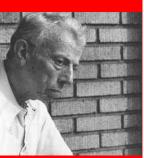
SOCIAL WORK SCHRISTIANITY

AN INTERNATIONAL JOURNAL









ARTICLES

The Call to Justice: Social Work in Catholic Higher Education

Family Violence in Congregations: An Exploratory Study of Clergy's Needs

The Effect of Spiritual Characteristics on Conceptualization of Spirituality and Religion: A National Study with a Spiritually Heterogeneous Sample

Counseling and Mental Health Referral Practices of Church Staff

The Anatomy of Trauma and Faith: A Reflective Post-Mortem



PUBLICATIONS

HOME STUDY



STATEMENT OF PURPOSE

Social Work and Christianity (SWC) is a refereed journal published by the North American Association of Christians in Social Work (NACSW) to support and encourage the growth of social workers in the integration of Christian faith and professional practice. SWC welcomes articles, shorter contributions, book reviews, and letters which deal with issues related to the integration of faith and professional social work practice and other professional concerns which have relevance to Christianity.

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CONTENTS

ARTICLES	
The Call to Justice: Social Work in Catholic Higher	
Education	
Barbara W. Shank	2
Family Violence in Congregations: An Exploratory Study	
of Clergy's Needs	
Katie Brennan Homiak and Jon E. Singletary	18
The Effect of Spiritual Characteristics on Conceptualization of Spirituality and Religion: A National Study with a Spiritually Heterogeneous Sample	
David R. Hodge	47
Counseling and Mental Health Referral Practices of	
Church Staff	
Lauren M. Polson and Robin K. Rogers	72
The Anatomy of Trauma and Faith: A Reflective	
Post-Mortem	
Theresa L. Blakley	88

Journal of the North American Association of Christians in Social Work

REVIEWS

Disability Advocacy Among Religious Organizations: Histories and Reflections		
A. A. Herzog, (Ed.), Martha Raske	104	
American Social Welfare Policy: A Pluralist Approach (5th ed.)		
H. J. Karger & D. Stoesz, Thomas D. Watts	106	
PUBLICATIONS	109	
HOME STUDY	114	

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A New Look

O DOUBT YOU HAVE NOTICED THAT THIS ISSUE OF SOCIAL WORK & Christianity has a new look. The last time we had a facelift was in 1995, so it was about time. Perhaps not surprisingly, most of what you see is not radically different from before. We began our evolution last year by increasing the format size of the journal to provide more white space and improve readability. This year we have made a few more changes in the layout and style of the journal to freshen it and bring it a bit more up to date.

The most dramatic change is in the cover. We hope you like it. The editorial group spent a good bit of time over the last year considering alternatives. We were looking for a strong cover and one which would communicate that the journal is for all who are concerned about the competent, ethical integration of Christian faith and professional social work practice—practitioners, students, and educators.

We want to particularly thank Robert Alderink of Calvin College Publishing Services for his valuable assistance in listening to our ideas, providing creative translation of those ideas into alternatives for us to consider, and for translating our choices into the new design for *Social Work & Christianity* that you see in this issue. And I want to thank the editorial group which works so hard week in and week out to make the production of this journal happen. �

David A. Sherwood, Editor-in-Chief

The Call to Justice: Social Work in Catholic Higher Education

Barbara W. Shank

This paper describes the congruency between Catholic social work education and Catholic social teaching. Schools of Social Work in Catholic institutions prepare students for social work practice in ways that are compatible with the call to justice, the goals of Christian service and the tasks of the Catholic Church's social teaching. Articulating the connections between Catholic social teaching and social work education is an important starting point for understanding the importance of social work education to Catholic colleges and universities.

World," (Gaudium et Spes, 1965) stated:

The joys and hopes, the sorrows and anxieties, of the women and men of this age, especially those who are poor or in any way oppressed, these are the joys and hopes, the sorrows and anxieties, of the followers

of Jesus Christ.

Addressing what is meant by the "joys and hopes, sorrows and anxieties of the women and men of this age," is not only the task of the Catholic Church's social teaching, but also the task of Catholic social work education. Many Catholic schools of social work make this connection explicit. For example, the mission statement of the School of Social Work at the College of St. Catherine and the University of St. Thomas reads:

Social Work & Christianity, Vol. 34, No.1 (2007), 2-17 Journal of the North American Association of Christians in Social Work Drawing from the Judeo-Christian traditions of social caring, we prepare students to use social work knowledge, values and skills to demonstrate the intrinsic value of all humankind as they serve those in need and promote social justice and human rights.

This mission statement indicates the intent of the School of Social Work at the College of St. Catherine and the University of St. Thomas to prepare students for social work practice in ways that are compatible with the Catholic call to justice, the goals of Christian service and the tasks of the Catholic Church's social teaching. This connection between Catholic social teaching and social work education is an important basis for understanding the importance of social work education to Catholic colleges and universities.

Catholic Social Work Education: History and Scope

Annarelli notes that Catholic higher education was established "to train individuals with an integrated vision of faith and culture for service to society, to establish a community of Christian witnesses among faculty members and students, and to contribute to the Church and society through scientific research and the study of human problems" (1987, p. 63). Building upon these goals, Catholic social work education endeavors "to prepare students for the practice of social work in ways that are compatible with the goals of Christian service and social justice" (Catholic Social Work Education, 1990, 1) and to provide staffing for Catholic social service agencies.

In 2005, Catholic undergraduate programs in social work accredited by the Council on Social Work Education (CSWE) numbered fifty-eight (Council on Social Work Education, 2005). This constituted 13 % of the 453 accredited social work programs nationally. Two other Catholic undergraduate programs were in candidacy for accreditation.

In 2005, there were 13 accredited graduate social work programs in Catholic colleges and universities (CSWE, 2005) or 8.2 % of the total number of accredited graduate programs nationwide. Loyola University, Chicago, offered the first Catholic university-based social work courses in 1914. A few years later, Fordham University in New York began offering social work courses, followed by The Catholic

University, St. Louis University, and Boston College. Other graduate programs under Catholic auspices established since the early 1900s include programs at Our Lady of the Lake in Texas, Barry University, Marywood College, the joint program at The College of St. Catherine and the University of St. Thomas, Dominican University, Spalding University, Newman University, and St. Ambrose University.

Doctoral programs in social work in 2005 numbered 64. The five Catholic schools offering a Ph.D. or D.S.W. include Barry University, The Catholic University of America, Boston College, Fordham University, and Loyola University of Chicago.

The location of Catholic programs nationally reflects the pattern of Catholic immigration and settlement in the U.S. Most accredited undergraduate and graduate programs are located in the East and Midwest. Few Catholic undergraduate programs in social work exist in the West, South, or Southwest. Only one graduate Catholic social work program is located in the South and only one is in the Southwest. This placement of programs leaves a large portion of the Catholic population without local access to Catholic social work education.

In reviewing the development and growth of programs at all three levels, the growth in program development under Catholic auspices has been primarily at the undergraduate level; however, five Catholic graduate social work programs have been developed since 1990. At the doctoral level, the number of Catholic programs has decreased from six to five. This decrease in the limited number of programs in doctoral education in social work presents a problem for undergraduate and graduate programs providing Catholic social work education as well as for the Catholic social service agencies. Doctoral-level programs at Catholic institutions help ensure there will be faculty available to teach at Catholic schools and provide leadership to Catholic social services who desire to retain a Catholic identity. Unless there is an increase in the number of programs and in the enrollment of students at all three levels, as well as active support for existing programs, Catholic institutions can expect to face a potential lack of scholars and service providers who are committed to an integrated vision of faith and culture for Christian service in the Catholic tradition.

Complementary Principles: Faith and Reason

Pope John Paul II, in "On Catholic Universities" (*Ex Corde Ecclesiae*, 1990, p. 13-14), states that every Catholic university, as Catholic, must have "an institutional commitment to the service of the people of God and of the human family." The Catholic university is also a place that protects the dignity of the human person, confronts the problems of society and culture, demands consideration of ethical concerns, and promotes social justice. Students should be challenged to combine humanistic and cultural development with specialized professional education. Professional education must also incorporate ethical values and a sense of service to individuals, to communities, and to society. Faculty and students should be particularly attentive to "the poorest and to those who suffer economic, social, cultural, or religious injustice" (Pope John Paul II, 1990, p. 25).

The purpose of social work education is the preparation of competent and effective social work professionals who are committed to social work practice that includes services to the poor and oppressed, and who work to alleviate poverty, oppression, and other forms of social injustice (Educational Policy Statement, 2001). Social work programs must ensure that students acquire a liberal arts perspective, which includes an understanding of one's cultural heritage in the context of other cultures. Social work programs must also provide specific knowledge about values and their ethical implications, prepare students to understand and appreciate human diversity and the worth and dignity of the person, promote the well being of all, and present strategies for promoting social and economic justice and for combating the causes and effects of oppression. The social work profession commits one to promoting individual change (service) and social reform (justice).

The Call to Justice: The Legacy of Gaudium et Spes

Forty years later, the principles articulated in *Gaudium et Spes* remain highly relevant for the social work profession and for undergraduate and graduate social work programs. "In the economic and social realms... the dignity and complete vocation of the human person and the welfare of society as a whole are to be respected and

promoted. For the person is the source, the center; and the purpose of all economic and social life" (*Gaudium et Spes*, 1965). The profession of social work is based on such values as service, social and economic justice, the importance of human relationships, and the dignity and worth of persons. These values are clearly consistent with the principles explicated in *Guadium et Spes* as central components of Catholic social teaching.

Several themes emerge as one examines *Gaudium et Spes* within the larger context of Catholic social teaching. These themes include the respect for the human person; rights, responsibilities and participation of the human person; the interdependence of person, family, and society; the value and dignity of work and the importance of working conditions and human activity; economic justice and the poor and vulnerable; the common good, and solidarity. Each of these themes is connected to premises underlying the purpose of social work education. The following sections will develop these themes and the strong convergence between Catholic Social Teaching and the social work profession.

Respect for the Human Person

In the Catholic tradition, the respect for and the dignity of the human person is central to the Gospel message. Each individual is a reflection of God and, as such, possesses a basic dignity that comes from God. Catholic teaching states that people should be understood differently from anything else in the created order because they possess two capacities that reflect the image of God — intelligence and free will. Human dignity, therefore, means that a person has a certain kind of standing in the order of creation that demands respect (*Gaudium et Spes*, 1965; Hehir, 1991; U.S. Catholic Bishops, 1998).

This intrinsic value or standing is irrespective of one's race, gender, age, economic status, culture, or sexual orientation. Institutions and policies must be evaluated by their commitment to human dignity. Human dignity demands that one acts according to understanding and free choice that is personally motivated and not pressured by external conditions. Human beings are "under the control of their own decision" which includes pursuit of the good and acceptance of judgment before God when accounting for one's

life decisions. Catholic teaching stresses hope and God's message of light, life, and freedom to the human person, communicating that the future of humanity rests on those who can provide reasons for living and hoping (*Gaudium et Spes*, 1965).

Ex Corde Ecclesiae calls upon Catholic universities to include in their research and teaching agendas the study of contemporary problems such as the dignity of the human person, the promotion of justice for all, the quality of personal and family life, the pursuit of peace, a just sharing of resources, and economic justice. The Catholic university is called to study these issues, paying special attention to their ethical and religious dimensions (Pope John Paul II, 1990).

The social work profession is often described as a profession of hope. Social workers help people in need and they address pressing and persistent social problems. Social workers respond to crises and emergencies as well as to everyday personal and social problems. Social workers are often credited with providing people with a reason to live and with hope for the future. The Council on Social Work Education's "Educational Policy and Accreditation Standards" (EPAS) mandates that social work education address these areas. One of the principal social work values is that all human beings have intrinsic worth, irrespective of their past or present behavior, race, culture, beliefs, lifestyle, economic status, or sexual orientation. Another principle includes self-determination, or the free choice to make decisions for one's self and to accept the consequences of those decisions. Social work values explicitly include respecting the inherent dignity and worth of the person. Faculty must integrate this content throughout the social work curriculum and affirm the value that professional relationships are built on regard for individual worth and dignity and furthered by acceptance, honesty, and responsible handling of conflict (CSWE, 2001). Students are expected to apply the concepts of unconditional positive regard, non-possessive warmth, acceptance, nonjudgmental attitude, and respect in their service delivery and professional relationships. They are expected to honor self-determination and ensure confidentiality (National Association of Social Workers, 1999).

Rights, Responsibilities and Participation of the Human Person

Catholic social teaching connects human dignity to individual rights, responsibilities, and participation in society. These rights and responsibilities include the freedom to live by one's conscience and to enjoy religious liberty, to raise a family, to immigrate and travel freely, to live free from unfair discrimination, and to have a share of earthly goods sufficient for one's self and one's family. People have a right to food, clothing, shelter, health care, education, security, social services, respect, appropriate information, and employment (*Mater et Magistra*, 1961; *Gaudium et Spes*, 1965). In Catholic social teaching, rights correspond to responsibilities to one's family, community, and the larger society and the respect for the individual carries with it the injunction that one respect the rights of others while working for the common good (U.S. Catholic Conference, 1990).

Catholic universities have the right and responsibility to be both a community of scholars and an academic institution in which Catholicism is vitally present and operative (Second International Congress of Delegates of Catholic Universities, 1972). The moral and ethical implications of research methodology and findings must be a concern for scholars and students in the Catholic university. The Catholic university must also be responsible for providing education that is accessible for the poor, for persons of color, and for members of other socially and economically disadvantaged groups. According to John Paul II, Catholic universities must assume some responsibility for promoting the development of emerging countries (*Ex Corde Ecclesiae*, 1990).

The Educational Policy (CSWE, 2001) of the Council on Social Work Education addresses issues of scholarship, research, accessibility of educational opportunities, and the global interdependence and context. It obligates schools of social work to assist students in developing an awareness of their personal values and to clarify conflicting values and ethical dilemmas, including ethical standards of scientific inquiry within research. Social work programs must make specific efforts to ensure equity to all students through fair and equitable polices and procedures in recruitment, admission, retention, and financial aid. The Council on Social Work Education also mandates schools of social work to demonstrate that student

aid is available to provide for a diverse student body that includes students who are economically disadvantaged (CSWE, 2001). CSWE also places an emphasis on the admission and retention of students of color, women, and other disadvantaged population groups. Many schools enhance their educational environment and opportunities by internationalizing their curriculum and developing "partner programs" with schools of social work in developing countries. Social work education has historically emphasized the importance of establishing services needed to meet basic human needs, which support the development of human capacities and enhance the social functioning of individuals and families.

Person, Family, Society and Interdependence

Gaudium et Spes (1965) emphasizes God's intent that people not live in isolation from one another. Christian Scripture and the shared teaching of various Christian traditions make clear that God desires people to participate in social groups and to participate as contributing members of their immediate and extended community. As such, Catholic social teaching asserts that human beings are not only sacred, but are also social in nature. Human dignity, rights, and responsibilities are recognized in relation to family and others in the community. This teaching emphasizes the important role of the family in shaping values, in addressing questions of social justice, and in encouraging us to contribute to the broader society. It addresses the obligation of:

...state and other political institutions to protect the life, dignity, and rights of the person; promote the wellbeing of our families and communities; and pursue the common good. Catholic social teaching stresses that a central test of political, legal, and economic institutions is what they do to people, what they do for people, and how people participate in them (US CC, 1990, p. 5).

This theme looks at the proper role of the state in civil society and identifies the principle of "subsidiarity," which calls for a graduated structuring of power, so that all power is not located in

one place. Subsidiarity promotes problem solving at the lowest level before higher levels of society or government intervene to address a problem (Hehir, 1991).

Catholic higher education seeks to cultivate an environment that exemplifies the Church's call to understand and support family and to participate in and contribute to the broader society. The Catholic university, therefore, serves as the "custodian and the witness of Catholic civilization" (Ruud, 6). It must endeavor to be a "hospitable environment where the life of the mind and the urgings of the heart are taken seriously. Both those who stand within the community of faith and those who come as fellow-searchers for the ultimate source of life and human meaning should find welcome here. There should be no enemies or aliens in a university, a truly Catholic university" (Malloy, 1992, p. 23). The Catholic university calls all of its members to become part of a community of scholars dedicated to preserving and extending knowledge. Specific rights and responsibilities, including a commitment to teaching, research, and service, accompany this call. Each member of the Catholic academic community is called upon to participate in the life of the community and to contribute to broader communities in society. Catholic institutions of higher education must, through their "Christian spirit of service, be firmly committed to the promotion of social justice" (Pope John Paul II, 1990, p. 23).

The NASW Code of Ethics enjoins all social workers to uphold the profession's values and to act ethically. Some of these core values include challenging social injustice and emphasizing the importance of human relationships. Integrated throughout the Educational Policy of the Council on Social Work Education is the mandate that social work education promote the development and advancement of knowledge, practice skills, and services that enhance human well-being and promote social and economic justice, and that challenge social injustice (CSWE, 2001). Social work education emphasizes the need to understand the centrality of the family, its importance as a basic social unit in society, and its role in shaping values. The human behavior and the social environment curriculum area must provide content on ways social systems promote or deter people in the maintenance or attainment of optimal health and well-being, including related values

and ethical issues. The importance of human relationships and interdependence is stressed. Programs must integrate content emphasizing social and economic justice that is grounded in an understanding of distributive justice, human and civil rights, and the global interconnections of oppression (CSWE, 2001). Social work education must include teaching on the roles of the state and other political institutions as they influence policy development, protect the dignity and rights of the person, promote the well-being of our families and communities, and alleviate forms of social injustice. Central to social welfare policy and services curriculum in social work education are analyses of what political and organizational processes do to and for people. Social work education calls faculty and students to participate in the broader community and empowers clients to exercise control over their lives to enhance their well-being.

The Value and Dignity of Work, Working Conditions and Human Activity

The value and dignity of work is another central theme of Catholic social teaching. The United States Catholic Conference declares that:

Work is a right, an expression of human dignity and allows one to contribute to God's creation. People have the right to decent and productive work, to decent and fair wages, to private property and economic initiative. Workers have the right to form voluntary associations such as unions, cultural organizations, and professional societies. The value of voluntary association, which is strongly supported by the Church, is at the heart of Rerum Novarum and other encyclicals on economic justice (USCC, 1990, p. 6).

Pope John Paul II's 1981 encyclical *Laborem Exercens* contends that the economy exists to serve people, not the other way around. This argument insists that society has an obligation to organize work so that people can earn a living wage and support their families. Economic systems must be created that provide meaningful work and protect the basic dignity of the person.

Catholic higher education challenges faculty and students "to attain integration between faith and life, and between professional competence and Christian wisdom. Students are challenged to search for the truth and for meaning in their lives, while training as leaders of tomorrow in their professions" (Pope John Paul II, 1990). A significant part of most mission statements of Catholic colleges and universities addresses the importance of combining a liberal education with career competency. Catholic higher education has expanded, not only to shape minds and to build morals, but also to extend the Catholic influence in society. Fostering a social, political, and intellectual environment guided by Catholic teaching, tradition, and moral values has always been an integral part of Catholic education. The growth and development of Catholic higher education has allowed numerous members of the Catholic Church and others to receive collegiate, graduate, and professional training, helping them to advance socially and economically (Leahy, 1991; John Paul II, 1999).

The purpose of social work education is to prepare competent and effective social work professionals. Social work education must provide the knowledge, values, and skills of the profession that are transferable among settings, population groups, and problem areas. Social work programs must ensure that graduates acquire a liberal arts perspective upon which a professional foundation can be built. Social work education does not allow for passive observation by its members, but focuses on social action and demands that constant attention be paid to values and ethics, diversity, populations-at-risk, and social and economic justice. Social work education emphasizes that practitioners strive to make social institutions more humane and responsive to human needs, are committed to assisting client systems to obtain needed resources, and are responsible for their own ethical conduct, the quality of their practice, and seeking continuous growth in the knowledge and skills of their profession (CSWE, 2001).

Economic Justice, the Poor and Vulnerable

The poor and oppressed have a special place in Catholic social teaching. A basic moral test of a society is how it provides and cares for its most vulnerable members. The Catholic tradition calls upon its members to put the needs of the poor and vulnerable first.

Gaudium et Spes (1965) reinforces this principles through stressing reverence for the poor and consideration of neighbor as self. Catholic social teaching contends that society be viewed in terms of all of its members, and that social programs benefit everyone, not just the privileged few. Catholic social teaching instructs people to respond to the needs of others, but noting that those with the greatest needs require a greater response. Catholic social teaching stresses the need to seek creative ways to move beyond an emphasis on individual rights and freedom to extend democratic ideals to economic life and thus ensure that the basic needs for a life with dignity are accessible to all (USCC, 1990; U.S. Catholic Bishops, 1998).

"Training of the intellect," observed John Henry Newman, "which is best for the individual himself, best enables him to discharge his duties to society. If a practical end must be assigned to a university course, I say it is that of training good members of society. Its art is the art of the social life, and its end is fitness for the world" (Cited in Pelikan, 1992, p. 137). The Catholic university does not define its mission as one of directly providing care for the poor and vulnerable in society, but it works toward that end and toward the betterment of society through the lives and careers of its students (John Paul II, 1999). Newman saw the university and Catholic education as "the ground of promise in the future," as a way to address "the wrongs of the oppressed" (Pelikan, 1992, p. 147).

The stated purpose of social work education is preparation of competent and effective social work professionals who are committed to professional practice including services to the poor and oppressed, and who work to alleviate poverty, oppression, and other forms of social injustice (CSWE, 2001). Social workers strive to liberate vulnerable and oppressed people and to promote social inclusion. All graduates of accredited social work programs must be able to demonstrate that they "understand the forms and mechanisms of oppression and discrimination and apply strategies of advocacy and social change that advance social and economic justice" (CSWE, 2001, p. 9). At the heart of the social work profession is a concern for the well-being of all people and a commitment to serving the more helpless and vulnerable members of society.

The Common Good and Solidarity

Catholic social teaching focuses on the common good, the connectedness of all human beings, and includes all people as part of the "human family." Humans as social beings belong to three communities: the family, civil society, and the human community.

We are one human family, whatever our national, racial, ethnic, economic, and ideological differences. We are our brothers' and sisters' keepers (cf. Gen 4:9). In a connected and global economy, our responsibilities to one another cross national and other boundaries. Violent conflict and the denial of dignity and rights of people anywhere on the globe diminish each of us. Catholic social teaching clearly identifies the Church's concern for world peace, global development, environment, and international human rights. "Love of neighbor" has global dimensions in an interdependent world and love of God cannot be separated from love of one's neighbor (*Gaudium et Spes*, 1965; *Laborem Exercens*, 1981; USCC, 1990).

Newman notes that the Catholic university has "duties to society" on the local, national, and international level. The Catholic university must recognize an international context for its research and publication. Catholic universities must accept the challenge to become actively involved with professional international exchange programs to help prepare trained professionals in every profession for service in developing Third World countries. Providing the knowledge and skills for survival and growth demonstrates a commitment to the dignity of the human person, encourages individuals to take an active role in society, provides meaningful work, and assists the poor and the oppressed.

Social work education is committed to preparing practitioners to engage in prevention activities that promote well-being and to alleviate poverty, oppression and other forms of social injustice (CSWE 2001). Social workers are in solidarity with those who are disadvantaged and strive to alleviate poverty. Social work programs are to prepare social workers who can formulate and influence

social policies and service in diverse political contexts. A premise underlying social work education contends that effective social work practitioners recognize global interdependence and context, and the need for worldwide professional cooperation in service delivery.

State social work organizations and schools of social work are becoming involved in "pairing programs" with developing Third World countries. Social work faculty are providing expertise in planning and social development and in curriculum development to develop professional programs in countries where professional social work education has not been available. Both the national professional social work organization and the national professional social work education accrediting organization have identified internationalizing the profession and the curriculum as a major focus.

Conclusion

Catholic social teaching, as presented in *Gaudium et Spes*, the Catholic university, and social work education are complementary and compatible. Each has a rich heritage that places people before things, recognizes the dignity of the human person and the interdependence of humanity, challenges the oppression of racism and bigotry, and works for social and economic justice. Each calls upon its members to defend human rights, to participate in society at all levels, and to take action to serve the poor and vulnerable. Each requires that its members act out of a developed sense of values, ethics, and moral conscience for social justice. Social work education in many respects represents the actualization of Catholic social teaching and represents the Catholic universities' commitment to liberal education, preparation for career competency, and public service. �

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Family Violence in Congregations: An Exploratory Study of Clergy's Needs

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Studies of clergy, congregations, and victims of family violence often portray the church as a place of ongoing hope and increased pain. Some clergy deny that family violence is present in their congregations or feel ill-equipped to address it; other clergy are highly aware of this problem and are proactive in addressing its effects on families. In this study, the researcher mailed a survey to 100 different clergy in the (254) area code of central Texas in order to explore the number of abuse cases reported to clergy, how clergy address family violence, and the needs of clergy in responding to cases of reported abuse. Clergy also described their responses to these reports of abuse, which included confronting the families, informing authorities, referring victims to outside resources, and providing emotional, spiritual, and sometimes financial support. A small percentage of clergy felt very equipped to counsel victims of domestic violence (8%) or refer them to community resources (32%). The author provides implications for social workers, which include providing training for clergy and initiating collaborative relationships with congregations. Clergy need to promote violence-free congregations by recognizing and condemning abuse, educating congregants, validating and empowering women, and collaborating with community agencies to provide safety and basic assistance for victims.

omestic violence occurs in families within religious congregations. Victims often seek help from their clergy and congregation, believing that their faith community will be a safe haven. Clergy may need training in order to address domestic violence effectively. If churches are better equipped, victims and their

Social Work & Christianity, Vol. 34, No. 1 (2007), 18-46 Journal of the North American Association of Christians in Social Work families may have more immediate and comprehensive assistance, leading to healthier communities.

Miles (2000) interviewed 52 Christian survivors of domestic violence. Mary, one of the survivors, remarked,

My belief is that women turn first to ministers and members of the medical profession when they decide to disclose episodes of domestic violence. So clergy need to name the abuse. They need to understand that even if a victim does not have any broken bones or bruises, she still could be experiencing abuse. There is psychological and sexual abuse in so many marriages.... Pastors need to also realize that there are many men sitting in the pews of their churches who go home after the service and abuse their wives. (p. 94)

Some victims of domestic violence report that individual spiritual practices and religious communities provide strength, hope, support, increased self-esteem, the power to forgive, and validation (Horton, Wilkins, & Wright, 1988). Not only can churches provide counseling and emotional support, they can also offer physical space and volunteers as resources for community agencies, coupled with a community-based mission to help the oppressed and those in need (Beaman-Hall & Nason-Clark, 1997). If social workers educate clergy on the dynamics of family violence and opportunities for congregations to partner with community resources, clergy may be more likely to collaborate with outside helping agencies.

Several studies found a significant number of clergy who discuss the issue of family violence in pre-marital counseling and who also address family violence from the pulpit (Nason-Clark, 1996; Beal, 2001). Psychologists and psychiatrists suggest that clergy often make the initial referral to the larger helping professions (Meylink & Gorsuch, 1988). Clergy and congregants see families regularly, know their history, and have access to their homes and lives in ways other helping professionals may not. Clergy can educate congregation members about the signs of violence and available community resources so they may respond appropriately if they encounter a victim. Family violence is a multi-faceted community problem; all the

resources—psychological, spiritual, social, legal, and economic—in the community need to join together to eliminate domestic violence (Kroeger & Nason-Clark, 2001).

Studies of clergy, congregations, and victims of family violence reviewed below portray the church either as a place of ongoing hope or of increased pain. While some clergy deny the presence of family violence in their congregations, other clergy are highly aware and proactive in addressing family violence. Some victims report clergy as helpful and resourceful, while others report feeling discouraged and receiving unhelpful advice from clergy. A number of clergy actively refer victims to outside sources and seek collaborative relationships with local helping agencies, while many clergy do not feel comfortable or equipped to refer victims outside of the church.

Review of Literature

In 2002, half a million women in the U.S. were victims of non-fatal violence committed by an intimate partner (Bureau of Justice Statistics Crime Data Brief, 2003). In the state of Texas, there were 185,299 reported family violence incidents and 140 deaths of women who were killed by their intimate partner in 2003 (Texas Department of Public Safety, 2003). Not all incidents of violence are reported; 47% of all Texans report having personally experienced either physical or verbal abuse and/or forced isolation from friends and family at some point in their lifetime (Texas Council on Family Violence, 2005). Of those who were victims of violent incidents, 11,545 adults and 18,188 children sought refuge from the abuse at family violence shelters (Texas Council on Family Violence, 2005). The Family Code of Texas defines domestic violence as (Texas Statutes, 2004):

an act by one member of a family or household against another member of the family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault, but does not include defensive measures to protect oneself intended. (71.0004)

The definition of dating violence closely resembles that of family violence with the exception that according to the Family Code of Texas it is an act perpetrated by an individual whom that person has or has had a dating relationship (Texas Statutes, 2004). Because of the similarity in these definitions, the literature and social workers often use the terms family and domestic violence or abuse interchangeably.

Although Texas law declares domestic violence illegal, 74% of all Texans have either experienced violence themselves, or have a family member and/or a friend who has experienced some form of domestic violence (Texas Council on Family Violence, 2004). Family violence occurs across religions, races, cultures, and socioeconomic levels (Brinkerhoff & Grandin, 1992). Most victims of family violence are women or children, but men can also be victims of abuse (Janzen & Harris, 1997, p. 288).

In order to understand the cyclical nature of family violence, Lenore Walker (2000) developed a theory of violence as illustrated below:

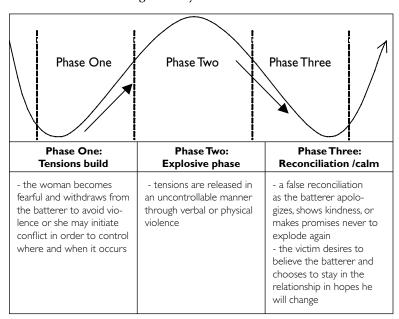


Figure 1: Cycle of Violence

According to this model, although domestic violence appears to resolve in phase three, the tension builds again and the cycle usually repeats itself. As cycles of violence repeat, the level of aggression toward victims and the seriousness of injury victims suffer usually increases. Thus, family violence is often a complex, chronic problem that is not easily resolved. The victim may often be in a state of learned helplessness, shame, self-blame, or denial and cannot easily ask for help.

Faith Communities and Domestic Violence

Family violence is present in faith communities and community leaders need to address this problem. In a study of 854 female victims of abuse, Bowker (1982) found that 50% attended church at least several times a month. Although Ellison, Bartowski, and Anderson (1999) and Brinkerhoff and Grandin (1992) found that regular church attendance at religious services has an inverse or curvilinear relationship with self-reported domestic violence, several studies on abuse and religiosity suggest that religious preference or denominational affiliation is not significantly related to family violence (Bowker 1982; Brinkerhoff & Grandin 1992).

The church shapes people's understanding of themselves, their relationship to God, and their relationship to other persons (Fortune, 1984). Many faith communities place great importance on the family unit, and churches model family and gender-roles within the family. Family life education in the church often serves as a context for families to learn how to shape relationships in non-violent, creative ways; it also addresses such issues as sex role stereotyping, conflict and problem solving, and shared decision making, topics which are important strategies to prevent violence (Fortune, 1984). The church's sacraments and rituals of baptism, Eucharist, Scripture, music, and community can be avenues for continued healing for victims of violence (Jones, 2005). However, Nason-Clark (1996) noted that churches often ignore the issue of family violence, wanting to believe that families of faith are happy and wholesome. Furthermore, many people blame domestic violence on circumstances beyond the abuser's control and may even blame victims for being abused, thus limiting a victim's self-determination and options for seeking help (Texas Council on Family Violence, 2004). Some Christian communities tend to separate from the world and discourage interaction with secular agencies and resources, including those for abused persons (Beaman-Hall & Nason-Clark, 1997; Kunst, 1993).

Some faith communities have responded competently while others have not responded to issues of domestic violence. Helping agencies are now targeting education and collaborative efforts toward faith communities due to their potential to prevent and address domestic violence. For example, in July 1995, a National Advisory Council on Violence Against Women was established by the Attorney General and Secretary of Health and Human Services (National Victim Assistance Academy, 2004). This council recognized that the religious community can provide a safe haven for women and families in need (National Victim Assistance Academy). The Texas Council on Family Violence has also recognized the potential of faith communities in addressing domestic violence. In 2004, the council created Communities of Faith, a project to promote networking and educational opportunities for clergy (Texas Council of Family Violence: Communities of Faith. http://www.tcfv.org/cof.htm).

Victims' Perspectives on Religious Assistance

Many victims of abuse attend church and seek ministerial help for safety, financial support, future plans for the family, community resources, spiritual and emotional support, and community. However, many victims report their clergy are ineffective in responding to family violence. Bowker's study (1982) of 854 women and Walker's study (1990) of 50 women in various domestic violence shelters both found that approximately 40% of women in abusive situations turn to clergy for help, while Nason-Clark (1996) discovered that 60% out of 200 women belonging to various churches consulted their clergy. Similar research also indicates that clergypersons are the most frequently sought source of help by those in psychological distress (Chalfant et al 1990; Alsdurf & Alsdurf, 1988). Seventy-two percent of 50 women living in five different family violence shelters recommend that victims tell their clergyperson (Walker, 1990, p. 168). Clergy often establish trust and credibility with couples during premarital counseling; thus, couples may naturally return to their pastor for counseling when their marriage is affected by conflict (Nason-Clark, 1999).

Some victims of abuse turn to the church because they perceive it to be a safe haven. However, one particular abused woman reported that the church is not always equipped to help: "Once you get there, nobody knows what to do with you." (Nason-Clark, Mitchell, & Beaman, 2004, p. 10). Women and children who sought help because of family violence rated clergy as the least effective caregivers. Respondents claimed clergy did not take them seriously, disbelieved their claims of violence, or simply sent them home to pray (Bowker & Maurer, 1986). In a study of 65 victims of abuse across seven states, 83% of victims reported seeking help from a minister, the second most chosen helper after a "friend." However, only 3% of these people reported the minister as being an effective source of help (Pearson, 1998). Another study found that one-third (n = 21) of religious victims (n = 64) who consulted their clergy found them to be the least helpful care providers (Horton, Wilkins, & Wright, 1988).

Women in abusive situations often find it difficult to trust the church which, although it has been their community, often appears to portray God as condoning violence (Leehan, 1992). Although many victims seek help from clergy, victims recognize that clergy are often ineffective in their efforts to help. Miles (2000) interviewed a diverse spectrum of 52 Christian survivors of domestic violence. Most of the interviewees reported anger, disappointment, and hurt in response to their clergy's attempts to pacify their reports of abuse. The survivors said that their clergy did not usually believe their reports, did not provide appropriate or consistent care, misinterpreted scripture to support male dominance, blamed them for the abuse, hesitated to confront the abuser, pressured them to stay in the relationship, and denied the presence of domestic violence in the congregation (p. 94). Furthermore, survivors criticized their clergy for refusing to educate themselves about domestic violence and for not taking advantage of outside resources.

Clergy responses to domestic violence

Clergy are often confronted with family violence and must decide how best to respond. Alsdurf and Alsdurf (1988) surveyed 5,700 Protestant pastors across Canada and the U.S. and found that 84%

had encountered family violence and had counseled a woman who had been physically abused by her husband. Similarly, in interviews with 100 Canadian clergy, Nason-Clark (1997) found that 98% had counseled a woman who was a victim of verbal abuse, 53% had assisted a woman in coping with a mild or non-life-threatening form of physical abuse, and 29% had worked to help women in cycles of battering (p. 106). Dixon (1995) found that 53% of 125 Anglican clergy in Australia dealt with family violence and that 41% experienced people outside of the church coming to them for help.

Clergy often feel ill-equipped to respond to domestic violence and this may appear in forms of denial or inaction. In a survey of 200 clergy, less than 20% reported they received "substantial training," and only 6% reported they were equipped with appropriate intervention strategies (Dixon, 1995). When Miles (2000) interviewed 158 clergy from various theological worldviews, all reported that they condemned domestic violence against women and children. At the same time, more than 50% of these clergy believed domestic violence was not an "issue" in their congregations and could not describe any plans for addressing the problem of family violence (Miles, 2000, pp. 50, 53). Only 16% of the interviewees reported active involvement in addressing aspects of domestic violence in their congregation and cited their discussion of the subject as vital in helping victims share their stories (Miles).

Staff in churches also recognize the need for clergy and laypeople to respond effectively to domestic violence. In an interview with staff at a particular church, Buxton (2000) observed that while staff agreed their church sought to offer grace to hurting people, it did not provide a safe place for people to struggle with their abuse or pain openly. Overall, they expressed a vague sense of the problem of abuse, feeling inadequate, and believing that "someone" was dealing with the problem (Buxton). When clergy and church leaders maintain silence surrounding the issue of family violence, victims may be encouraged to adopt the same silence toward their own victimization.

Some clergy hold tightly to the notion that family problems can be solved by prayer or by greater female submission. As a result, these clergy tend to encourage women to stay in an abusive relationship and avoid divorce at all costs (Walker, 1979; Alsdurf & Alsdurf, 1988; Garma, 1991; Procter-Smith, 1996; Stotland, 2000). For example,

Alsdurf and Alsdurf (1988) found that pastors often experienced a tension between protecting the victim and protecting the commitment to marriage. Some clergy struggle with the reliability of women's reports of abuse, believing that wives may overestimate the violence (Alsdurf & Alsdurf, 1988). In Nason-Clark's (1999) study of Canadian clergy, she found that pastors believed a lack of communication skills and self-understanding were the destructive factors in abusive relationships rather than issues of power, control, and aggression.

However, Nason-Clark (1999) did not find that clergy reduced violence to a spiritual shortcoming that could be solved by prayer or submission; instead, she found that clergy did not know how to counsel victims through the healing process. Further studies substantiate that clergy often do not feel equipped with appropriate training to conduct counseling or to refer people to community resources for abused women (Nason-Clark, 2000; Miles, 2000). Only 11 out of 125 clergy had received coursework on family violence during their theological education (Dixon, 1995); in Miles' study, he also found a small percentage who had received an education component regarding domestic violence (Miles, 2000). Only 15% of the 150 clergy who Miles (2000) interviewed had previously heard of the cycle of violence. Nason-Clark's (1999) study of 1000 clergy in a variety of denominations showed that less than 10% of clergy felt equipped to cope with the demands of counseling. Many clergy said their full schedules hindered possibilities of thorough counseling; however, rather than referring congregants elsewhere for counseling, they continued to provide inadequate counseling. These clergy often felt trapped between the needs of their congregants and their own feelings of inadequacy (Nason-Clark, Mitchell, Beaman, 2004). Furthermore, clergy often deny that family violence exists in Christian marriages within their congregations. This lack of awareness contributes to the lack of assistance that some victims experience in churches (Miles, 2000; Nason-Clark, 1997).

Some researchers conclude that pastors may over-report competency in the area of domestic violence because they feel the need to provide compassionate and socially acceptable answers (Alsdurf & Alsdurf, 1988). Pastors are presumed to be helpful in areas of family ministry and self-report high levels of competency when

helping other people with family concerns (National Association of Evangelicals, 1985, p. 4). These confident reports from clergy sometimes conflict with the negative experiences of many victims who seek clerical assistance (Bowker & Maurer, 1986; Pearson, 1998). Researchers should be aware of this tendency by clergy to over-report confidence and competence as this may skew results of surveys or interviews conducted with clergy.

The literature suggests that faith communities have valuable resources for addressing domestic violence and generally are a trusted place where victims of abuse seek haven. Many victims of abuse turn to clergy for help, although they often do not receive adequate assistance. Furthermore, clergy often report that feeling ill-equipped to address domestic violence competently. This study explores these issues by asking about the experiences and needs of clergy regarding domestic violence in central Texas.

Methods

Context for the Study

The Family Abuse Center (FAC), located in Waco, Texas, is a shelter for victims of abuse. It serves residents of Falls, Bosque, Hill, Limestone, Freestone, and McLennan Counties. On average, it houses 30 victims a day, with varying lengths of stay depending on victims' needs. The mission of Family Abuse Center is to "eliminate domestic violence in Central Texas by sheltering victims of domestic violence and by preventing abuse from occurring through intervention and education" (Family Abuse Center, 2004, p. 1). Intervention and education consist of "a crisis oriented program providing temporary emergency service with on-going services such as individual counseling, job training, housing options, parenting and group counseling" (Family Abuse Center, p. 1). These services are for residents and non-residents of the center who experience family violence.

Study Design

The objectives of this research were to explore the number of abuse cases that are reported to clergy, to identify how clergy address the issue of family violence, and to determine the needs of clergy in responding to

cases of reported abuse. The researcher conducted an exploratory, cross-sectional study for the Family Abuse Center. One of the goals of this study was for the Center to develop new collaborative and educational relationships with churches in the area. Surveys were mailed to senior ministers of 100 churches in the (254) calling area of central Texas. The survey (available from authors on request) consisted of quantitative and qualitative questions and was created after reviewing several similar surveys and interviews with clergy that were relevant to the research question (Friedrich, 1988; Dixon, 1995; Kroeger & Nason-Clark, 2001; Miles, 2000; Plog, 2004; M. Jones, personal communication, September 24, 2004). The survey covers clergy's past experiences and training in dealing with family violence, preventive measures participating churches take, the church's willingness to collaborate with outside agencies, their collaborative relationships in the community, and clergy's perceived needs and requests for further resources.

All 249 churches in the (254) area code that were listed in the yellow pages were randomized into a sampling frame so as not to be in alphabetical or geographical order. In order to enhance the return rate of the surveys, the researchers attempted to reach clergy at each church to explain the purpose of the study and to recruit their participation. The researchers called each of the 249 churches, but not more than twice in an effort to reach the senior minister. Researchers then moved to the next church on the list. Fifty clergy were reached and all agreed to participate. Surveys were sent to these churches, and surveys were also sent to the senior minister of the first 50 churches on the randomized list that were not reached. This selection process was intended to enhance the representation of congregations and create a diverse sample.

The survey was accompanied by a cover letter of intent and an informed consent form (available from authors on request) and a stamped envelope for returning the survey. The respondent had the option of returning the survey anonymously or including contact information on the second page if he or she was interested in further resources. In order to increase response rate, the envelopes were hand-addressed and the return envelopes stamped and pre-addressed to the agency's P.O. Box. Follow-up reminder postcards were mailed two weeks after the surveys were sent.

Discussion of Findings

Consistent with prior research, this data suggests that some clergy feel ill-equipped to address family violence, while other clergy are highly aware and proactive in addressing its effects on families. Of the 100 surveys sent, 44 were returned and 28 pastors of this group requested further resources. Respondents spanned a wide range of 15 denominations. The largest number of respondents self-reported their denomination as Baptist, Methodist, and Catholic.

Quantitative Findings

Eighty-three percent estimated that domestic violence occurred in less than 10% of congregant families. Clergy's estimate of domestic violence were unrealistically low in the context of Texas where 47% of all Texans report having personally experienced at least one form of domestic violence: physical, verbal and/or forced isolation from friends and family at some point in their lifetime (Texas Council on Family Violence, 2005). Only 30% (13) of the pastors actually had abuse reported to them by congregants while at their current congregations; the average number of reports was three. Of these pastors, 4 wrote that they reported the abuse to civil authorities.

Of the 44 pastors who responded, 36% reported receiving training specific to domestic violence. In response to several Likert Scale questions, only 8% of pastors felt "very qualified" to counsel victims of abuse and 32% felt "very equipped" to refer victims to another community resource. Those pastors who had referred victims to outside sources, most commonly referred people to a professional counselor or the police. Pastors, on average, perceived their most important role in responding to domestic violence as being an advocate for the victim. Interestingly, 72% of pastors did not have a preference for faith-based or non-faith-based community services when making referrals. On another Likert Scale question, only 8% of clergy were "very familiar" with the Family Abuse Center, but 56% of churches had some kind of relationship with the center through financial, volunteer, or other support. This suggests that churches that support the shelter financially or with volunteers are not very aware of the services the Family Abuse Center actually offers. Fortyfour percent of clergy desired to know the needs of the Family Abuse Center in order to provide appropriate support.

Half of the churches reported having resources dealing with domestic violence such as literature, domestic violence education in premarital counseling, education on dating violence, or a support group for victims of domestic violence; 50% of churches reported possessing no resources related to domestic violence. Concerning domestic violence, 28% report having literature, 20% premarital education, 18% youth education, and 3% support groups. Only 32% of pastors report preaching on domestic violence at least once every few years.

Table 1: Summary of Relevant Quantitative Data from Clergy Survey

Question	Answer N = 44
Estimated less than 10% of congregation experiencing family violence	83% of clergy (35)
Clergy with abuse reported to them	30% of clergy (13)
Average number of reports	3 reports
Previous training	36% of clergy (14)
Felt very qualified to counsel victims	8% of clergy (3)
Felt very equipped to refer victims	32% of clergy (12)
Most common referrals	Professional counselor, police
Clergy's most important role	Advocate for victim
Preference of faith-based services	72% no preference (28)
Relationship with FAC—volunteers, financial, or other	56% of churches (22)
Familiarity with FAC—very familiar w/ services	8% of clergy (3)
Preached on domestic violence at least once every few years	50% of clergy (19)

Question	Answer N = 44
Pre-marital counseling w/education	20% of clergy (8)
Youth group education on dating violence	18% of clergy (7)
Church has support group	3% of churches (1)
Church has literature on family violence available	28% of churches (II)
Churches w/ no family violence resources (literature, support groups, dating violence education, or premarital education)	50% of churches (20)
Clergy desired to know the needs of FAC	44% of clergy (16)
Clergy desired literature on family violence	75% of clergy (27)
Clergy desired clergy training workshop	35% of clergy (15)
Clergy desired lay training workshop	20% of clergy (9)
Clergy desired community referral resources	70% of clergy (31)

This study revealed significant correlations. Pastors without previous training in domestic violence typically did not report possessing domestic violence resources in their churches (p = .006). Clergy with previous domestic violence training had literature available at their church or youth group education on dating violence (p = .014 and .044, respectively). Similarly, clergy with training were more familiar with the Family Abuse Center and its resources (p = .05). Those who had a relationship with Family Abuse Center tended to refer to the shelter more often (p = .02).

Clergy overwhelmingly expressed desires for further resources regarding domestic violence. Seventy-five percent of respondents desired literature or education for congregants and 35% wanted further training. Of the 28 who completed section two (see Appendix A) of the survey, 35% requested a clergy workshop and 20% requested workshops for lay members. Seventy percent asked for community

referral resources. Thus, it seems important to offer clergy resources and initiate collaborative relationships. The qualitative findings that follow further suggest the value of providing resources for clergy.

Qualitative Findings

In the open-ended portion of the survey, clergy were given the opportunity to write about their encounters with abuse. There are limits to the confirmability of these data, but in this triangulation with the quantitative data there is evidence of the value of transferability of the responses into practice (Lincoln & Guba, 1985).

In these data, we find that some clergy suspected the abuse while some were alerted by family members or other church members. Clergy recognized cases of emotional abuse as well as physical abuse, including child abuse, and reported taking appropriate steps to help families dealing with violence. While clergy differed in their approaches, most said their first step when suspecting abuse was to confront the family and/or victim. This is a potentially dangerous response if undertaken without a safety plan or sufficient consideration of possible consequences and it underlines the importance of training. Some clergy were direct in identifying the abuse; one minister went to the family and said, "I know there are problems, and I am here to help." In a less direct manner, one minister described focusing on issues of depression rather than abuse, in order to gradually open the door for discussing and naming the abuse. Another clergy member clarified the importance of gentle and private confrontation. When approaching the family, one minister explained the importance of taking another church member (a therapist in this case) to help confront the victim, and another minister described meeting with each family member separately before meeting with them together. Clergy reported a variety of victim responses to initial abuse discussions. Some victims denied the abuse, some were relieved to have it out in the open, some were ashamed, some sought help, and some responded with threats.

After identifying the abuse and approaching the family, ministers offered assistance. These clergy's responses to abuse parallel previous recommendations. Literature suggests that clergy's first step in addressing family violence should be recognizing the abuse and creating

a safe place for disclosure (Beal, 2001; Buxton, 2000; Miles, 2000; Nason-Clark et al., 2004). Clergy described offering referrals, counseling, prayer, financial support, or spiritual support. In answering the qualitative questions about the pastors' responses to abuse, several pastors mentioned making referrals to professional counselors and community resources such as the Family Abuse Center. Several ministers reported that they only felt comfortable providing spiritual and emotional support, and referred the victims to professional counselors. Four pastors wrote about making reports to civil authorities, including Child Protective Services; one clergy made efforts for the victim to receive a protective order. One congregation provided a woman with a safe place to stay until she could be assisted by another housing program. In another case, the family did not want assistance from the church and independently sought counseling outside the church. Only one minister reported a church member leaving the church after a report was made. In most cases, ministers reported that the families received the help they needed.

One clergy member described a procedure for confronting the family, informing authorities, suggesting counseling, and encouraging reconciliation through confession, repentance, and obedience. If the couple did not follow this, they were subject to church discipline; however, the nature of this discipline was not reported. This last approach raises questions about safety and validation for the victim, as well as accountability for the offender. Researchers in this field recommend that clergy validate the victim's experience and seek his or her safety above immediate reconciliation; furthermore, only the offender should be subject to discipline (Beal, 2001; Horton, Wilkins, & Wright, 1988; Nason-Clark, 1999).

Overall, clergy described their roles as either a primary intervener, an outside or "in the wings" supporter (meaning unexplained), or an intermediary who connected families with resources and then followed up. Several clergy mentioned safety and protection for the victim as their top priority followed by long-term plans for victim counseling. These are commendable roles and priorities of intervention (Beal, 2001; Horton, Wilkins, & Wright, 1988; Kroeger & Nason-Clark, 2001; Miles, 2000).

Implications for Social Service Professionals

Social workers and other helping professionals must seek to understand how clergy perceive domestic violence, as well as what they do to remedy problems of violence in families. Some ministers possess a great deal of experience and training, while others have little or no awareness of domestic violence, nor knowledge of how to respond. It is important to realize that clergy may deny the presence of violence in their congregations or over-report competency in responding to cases of abuse. However, when offered resources such as training, literature, or referral resources, pastors in the (254) area code generally responded positively, requesting more resources and training.

Education must begin with clergy and leaders of the church who model appropriate responses for the rest of the church. In one study, lay people received training, but were "guardedly optimistic" that the church would respond unless the clergy took the initiative to address domestic violence (Buxton, 2000). These lay people were eager to take action, but looked to their clergy for leadership. The staff agreed that a domestic abuse program could only begin with staff modeling how to discuss taboo topics (Buxton). Clergy need outside training and support from social workers who can empower them to address these taboo topics and be prepared to intervene in situations of abuse.

It may be helpful for social workers to provide education and resources for clergy. In this study, 35% of clergy requested further training. Of the clergy who completed section two of the survey, 36% requested a clergy workshop, 20% requested workshops for lay members, and 70% asked for community referral resources. In Dixon's (1995) study, clergy prioritized their needs in the following order: information, skills, resources, referral procedures, discussion surrounding the dynamics of family violence, and theological discussion regarding issues of abuse. Eighty-seven percent expressed willingness to attend an educational workshop (Dixon). Overall, in both studies, clergy seem to be open and eager to participate in training opportunities.

Workshops for clergy appear to be successful. Walker (1990) included 25 participants in the first workshop and believed that his goals were reached by breaking the silence of abuse and empowering

a handful of clergy who may recruit and inform other clergy (p. 148). The clergy were given pre- and post-tests on the workshop. Clergy's responses on post-tests suggested that educational workshops for clergy built confidence, encouragement, synergy, awareness, and practical strategies. Dixon's participant evaluations showed that clergy gained a greater awareness of the causes and nature of domestic violence, the helplessness of the victims, and a better understanding of their own experiences of dealing with anger and abuse (Dixon, 1995). A few examples of action the participants initiated after the workshop included sponsoring a church seminar on family violence issues, working with community agencies to provide crisis financial assistance, and advocating for a legislative issue affecting family violence (Walker, 1990, p. 154). Thus, clergy workshops have potential to provide clergy and congregations with tools they need to address domestic violence. Let us turn now to items to be considered when social workers offer training to clergy on issues of abuse.

Create a diverse team of trainers

Interdenominational and interfaith workshops require a diverse team of trainers. Walker (1990) provided a family violence workshop for clergy of different faiths using a diverse, multi-disciplinary training team. Friedrich (1988) strongly emphasizes the importance of involving a mixture of congregational representatives and other helping professionals in planning training events for clergy. Teams of educators for clergy must be open to genuine dialogue, always being sensitive in both written and spoken materials to the theological perspectives of the participants (Friedrich).

Provide literature for future resources and distribution

Churches should have literature on domestic violence readily available to families. This type of resource helps break the silence of taboo issues such as violence and helps validate members who experience abuse. It is a good idea to make literature that includes community resources and shelter phone numbers available in women's restrooms. If certain staff or congregation members have been trained to assist victims, their names could be included as well.

Educate about the cycle of violence and signs of abusive behavior

Clergy need to learn about the typical phases of violence, learned helplessness, and factors that keep victims in abusive relationships. They also need to learn how to recognize signs of abuse. Clergy can use this knowledge to identify possible abuse and intervene or prevent violent relationships by educating pre-marital couples and teenagers on the signs of abuse.

Provide role play and mentoring

Role play allows clergy the opportunity to practice and apply intervention strategies and skills across various scenarios. Clergy will be more likely to use their skills if they rehearse them. Participants in Dixon's clergy workshops requested more directive role play (Dixon, 1995). Some clergy may also be interested in shadowing a social worker or professional counselor/advocate.

Discuss the problem of violence and appropriate responses within theological frameworks

It is important to allow an opportunity for clergy to discuss what they have learned within their theological frameworks. When considering possible responses to all parties involved in family violence, it is necessary for clergy to consider the problem in a theological framework of suffering, sin, anger, forgiveness, sexuality, and hope (Jones, 2005). If possible, workshop educators may plan opportunities for follow up discussions among clergy.

Provide community resources and possible collaborations

As the data of this study shows, 56% of churches have a relationship with the Family Abuse Center, but only 8% are very aware of the services the shelter offers. Thus, it is important to educate partnering churches. At a clergy training session, it could be helpful to invite shelter managers or other community agency staff to share about their services. This may help dispel some myths (i.e. that secular helping agencies will be insensitive to faith issues) between faith-based and secular organizations and create cooperative relationships. Staff from local agencies can describe what a victim will encounter if she comes to receive services or calls a hotline. This information

will be helpful to clergy as they discuss options with families. Clergy may be less hesitant to refer people if they understand services better. Community agencies may also share their needs and opportunities for collaboration with congregations.

Conduct follow up training and updated information

After conducting workshops for clergy, Beal (2001) and Dixon (1995) emphasize the importance of follow up training. Beal's goal was to establish a yearly community-wide conference providing the latest information and resources for clergy to stay updated on issues of domestic violence specific to the African-American community (p. 94). In local communities, follow-up and updates can encourage clergy to continue learning about issues of violence and how to best respond.

Implications for Clergy

Through education and training, clergy can learn how to take the following steps toward violence prevention and intervention in situations of violence. Unfortunately, there is not a formula for clergy to follow because each minister must respond within his or her own context. The following are components of a holistic approach to family violence that surfaced in the literature review and the researcher's study.

Recognize abuse

In order to allow a victim to become a survivor and more fully empowered, clergy must recognize the abuse (Buxton, 2000). Once identified and named, the abused person can be freed to work toward healing, and hopefully the abuser will be willing to work toward repentance and healing as well.

In Nason-Clark's focus groups of church women, one woman said:

I hid from the church because I didn't feel safe, that wasn't a safe place for me to come and talk without feeling like I was being judged and condemned and put down. I don't know if a lot of our pastors would even

recognize abuse because they're not trained to...They should be much, much, much more aware...They've never lived or experienced it, so they don't know what to say. (p. 120)

Often, clergy may need to take initiative because victims are reluctant to come forward. Shame and low self-esteem, common for victims of abuse, coupled with fear of religious judgment, make it almost impossible for victims to take the initiative in reporting within a congregational setting (Walker, 1979).

Condemn abuse and address taboo issues

Women agree that the church needs to be a safe place to disclose their personal pain, past or present, and to receive practical and spiritual assistance (Nason-Clark et al., 2004). In order to disclose their suffering, women report that they need to hear their clergy condemn domestic violence (Nason-Clark, 1999). Churches need to promote a zero tolerance attitude toward violence of any kind (Buxton, 2000). By openly addressing taboo issues such as domestic violence, clergy begin to create a safe place for disclosure (Buxton). Clergy should preach on domestic violence at least once a year and include situations of violence in community prayers. If survivors of violence are known within the congregation, clergy can ask them to share their stories with the congregation, opening new opportunities for disclosure and healing. Clergy may develop a church statement against domestic violence. The statement could include specific procedures and plans for intervention in cases of violence.

Validate women and work to empower them

Some women who have been through the healing process suggest that clergy who use inclusive language and images for God and who provide leadership opportunities for both women and men in the church create an environment in which women are empowered to leave abusive relationships and retain their values of Christianity (Ezell, 1998; Giesbrecht & Sevcik, 2000). Victims who regarded their clergy as helpful reported receiving validation and approval (Horton, Wilkins, & Wright, 1988, p. 242). Churches should have a variety of support systems for women. Dependent upon the needs within each

church context, ministries for women and families might include job training, transportation, child care, or support groups.

Intervene with safety as the goal

Women perceive that domestic violence should not be addressed solely as a spiritual issue, but rather as one that requires support, safety, and healing (Beal, 2001; Nason-Clark, 1999). If abuse is treated as a spiritual problem with only spiritual solutions, the victim will not find safety or healing in all areas of life. The most positive reported experiences by victims were when their clergy agreed that in order to ensure safety, divorce or separation might be acceptable and even imperative for the victim (Horton, Wilkins, & Wright, 1988, p. 242). It is important to recognize that marital vows have already been broken once a partner is violent toward the other partner. Clergy should always prioritize the safety of the victim, and this may include referring the victim to a shelter. Clergy need to know how to create a safety plan for individuals in danger; congregants may also be trained to facilitate safety planning. Couples counseling and reconciliation work should be used rarely because the victim is often silenced and sometimes put into more danger in such interventions (Holtzworth-Munroe, 1995; Mullender, 1996, p. 169-202).

Provide basic assistance

In order for churches to address family violence holistically, provision and support for the healing journey should be made. Many women in abusive relationships may be financially dependent upon their abuser, making it even more difficult to leave the abusive environment. A church should consider providing financial and basic assistance, as well as supportive counsel, referral suggestions, and spiritual assistance (Nason-Clark et al., 2004). One woman addressed this:

All I ask of pastors is that if they don't know how to deal with abuse in families, then they need to find out how... Pastors need to learn the numbers to shelters by heart. Every church should have a food pantry and money set aside for women trying to escape abusive situations. (Miles, p. 94).

Train lay members to participate in intervention and support

Clergy can involve trusted congregants in intervention processes and share the task. Clergy may want to create a domestic violence task force of trusted congregants who can advocate for the victim and intervene appropriately (Jones, 2005). Buxton (2000) found that lay members were eager to provide support for families in abusive situations, but looked first to clergy for leadership. Lay members may be trained to facilitate safety planning when necessary. Lay women in the church can also serve as support networks for female victims and shelter residents (Nason-Clark, 1996; Beaman-Hall & Nason-Clark, 1997; Giesbrecht & Sevcik, 2000).

Promote violence-free living through prevention and education

Churches should be places that encourage violence-free families through words and example. Educational opportunities for violence prevention may include Sunday school, retreats, fellowships, premarital counseling, and, most importantly, sermons (Nason-Clark et al., 2004). Churches can post the local domestic violence crisis hotline numbers and have literature available in restrooms where victims may retrieve needed information without harassment or shame. Part of being a safe place for children includes teaching youth and children anger management and how to respond to violence. Further, youth groups and confirmation classes should participate in education on dating violence because approximately one in five female high school students reports being physically and/or sexually abused by a dating partner. Abused teenagers are significantly more likely to get involved in other risky behaviors; one study showed they were four to six times more likely to get pregnant and eight to nine times more likely to attempt suicide (Silverman, Raj, Mucci, & Hathaway, 2001).

Implications for Clergy and Helping Agencies

In order to bring wholeness into the lives of victims, the helpers must accept and encourage many areas of expertise, including secular and faith-based care (Kroeger & Nason-Clark, 2001 and Miles, 2000). Friedrich (1988) notes that a gap in communication and

collaboration often exists between the social service world and the clergy. He points out that even if a pastor is known as the "expert" in his or her denomination on the issue of domestic violence, the pastor may not know of or be connected with local social service agencies. Clergy without education on family violence often define violence as a spiritual issue that can be solved with spiritual resources rather than secular resources (Nason-Clark, 1999; Miles, 2000). When Canadian evangelical clergy were interviewed, those with limited experience in counseling were more reluctant to refer individuals or couples to outside resources; thus, referrals were less likely to occur when they were perhaps needed the most (Nason-Clark, 1997). Kunst (1993) found that clergy who have been educated about mental health interventions outside of the church are more likely to refer. Some clergy may be hesitant to refer, unsure of what the victim will experience. Agencies can assist clergy by explaining the process clients participate in once referred.

Community resources need not exist in isolation from the church; ideally, a church will partner with local agencies, shelters, and other helping professionals in the field of domestic violence (Leehan, 1992; Livesy, 1987; Horton, Wilkins, & Wright, 1988; Beaman-Hall & Nason-Clark, 1997). Female victims of abuse often suggest that the church can respond positively by partnering with shelters (Nason-Clark, 1996; Beaman-Hall & Nason-Clark, 1997; Giesbrecht & Sevcik, 2000). Such collaborations allow an abused victim to work through the crisis in the context of her or his own religious values and social support, yet also receive the professional counseling and protection from community agencies or shelters that are more equipped for such crises. At domestic violence shelters, the victim often experiences validation and emotional and social support from other victims. Furthermore, agencies can provide literature on family violence that clergy can make accessible within their congregations. Several clergy members in Miles's (2000) study agreed that collaboration between the church and community is necessary, as Reverend Dr. Anne Marie Hunter noted:

The unique role of clergy is that we can deal with faith issues. Victims often have questions about forgive-

ness, marriage covenant, the interpretation of certain scriptural passages, etc. and they look to us to help them with their spiritual concerns. So clergy need to know how to respond to these faith issues, and then how to refer victims to community service providers, who also have their own unique roles in these situations. Ideally, ministers would have already spent time with service providers in their community building relationships, so that they will be prepared when crises occur. (Miles, p. 184)

In light of the clergy's perceived need to appear in control and capable and the implication that they might not be able to articulate needs or deficiencies in their services, Alsdurf and Alsdurf (1988) suggest that a future question for other professionals in the field should be, "How are you helping the pastors?" The responsibility should not only be on pastors to take the initiative and receive the education and support they need, but helping professionals should also seek out clergy for mutual collaborative relationships. The researcher's summary of steps toward collaboration are as follows:

- **Agencies can:** recruit a pastor or lay leader to facilitate a faith issues support group for clients
- **Pastors/Lay leaders can:** volunteer to facilitate a faith issues support group
- Agencies can: ask a local clergy person to serve on the organization's board of directors
- **Pastors/Lay leaders can:** contact an organization, volunteering to serve as a resource
- **Agencies can:** share agency needs—financial, in-kind, and volunteer—and recruit congregational support
- **Pastors/Lay leaders can:** connect a committee or team with an agency's needs, or invite the agency to share about financial, in-kind, and volunteer needs
- Agencies can: invite pastors and lay leaders to lead religious issue training for agency staff
- Pastors/Lay leaders can: provide religious issue training for agency staff

- Agencies can: refer clients of faith to clergy who have training specific to domestic violence
- **Pastors/Lay leaders can:** volunteer to be a referral resource for local agencies

Conclusion

Communities of faith have much to offer victims of family violence. Congregations can address family violence by participating in prevention and intervention. Clergy must lead congregations toward violent-free living, while facilitating healing for those who have experienced violence. This study has shown that clergy will request further resources when offered. Therefore, social workers and helping professionals must initiate relationships with local clergy, learn of their needs, and form collaborative partnerships that can provide more comprehensive service to families impacted by domestic violence. �

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The Effect of Spiritual Characteristics on Conceptualization of Spirituality and Religion: A National Study with a Spiritually Heterogeneous Sample

David R. Hodge

This exploratory study examined the relationship between respondents' faith tradition, orthodoxy, and spiritual motivation, and their conceptualizations of a) spirituality, b) religion, and c) the nature of the relationship between these two constructs. To explore these possible associations, the study employed a mixed method approach with a spiritually heterogeneous, national sample of social work graduate students (N = 391). The results indicated that faith tradition was associated with all three dependent variables. Orthodoxy and spiritual motivation, however, were associated with how respondents defined spirituality and religion, but not with their understanding of the nature of the relationship between the two constructs.

PIRITUALITY AND RELIGION HAVE RECENTLY EMERGED AS TOPICS OF interest among helping professionals. The National Institutes of Health (NIH) has formed a working group on spirituality and religion and issued calls for research on these topics (Miller & Thoresen, 2003). In the social work profession, the newly developed "Standards for Cultural Competence in Social Work Practice" (2001), issued by the National Association of Social Workers (NASW), recognizes the importance of spirituality and religion in clients' lives.

Social Work & Christianity, Vol. 34, No.1 (2007), 47-71 Journal of the North American Association of Christians in Social Work The number of educational programs offering content on spirituality and religion in the helping professions has increased dramatically over the past decade. In the field of medicine, for instance, the number of medical schools offering courses on spirituality and religion increased from a handful in 1990 to over 60 by at the turn of the century (Koenig, McCullough & Larson, 2001). Similar increases have occurred in social work (Miller, 2001)

While spirituality and religion have been topics of growing professional attention, little is known regarding how people conceptualize spirituality, religion, and the relationship between these two constructs or the factors that may influence conceptualizations in these three areas. In the social work profession, a number of qualitative studies, typically using regional samples, have explored definitions of spirituality and religion among social workers and the general public. In social work, the largest of the helping professions, conceptualizations of spirituality and religion have been explored with social work educators (N = 18) (Canda, 1988), Utah practitioners (N = 56) (Derezotes & Evans, 1995) and Virginia practitioners (N = 159) (Sheridan & Bullis, 1991). Similarly, among the general population, qualitative studies have been conducted with clients (N = 47) at an inner-city addictions treatment center (Arnold, Avants, Margolin & Marcotte, 2002), people wrestling with illness (N = 60) in Dade County, Florida (Woods & Ironson, 1999), African American women (N = 128) in a Midwestern community (Mattis, 2000), and Pennsylvania and Ohio residents (N = 346) drawn from 11 religiously dissimilar groups (e.g., liberal and conservative congregations) (Zinnbauer, et al., 1997).

These studies helped clarify some of the similarities and distinctions regarding how various samples define spirituality and religion. Perhaps the best qualitative study to date, at least among members of the general population, is a study conducted by Gallup and Jones (2000) that used a qualitative methodology with a nationally representative sample (N=100) to explore how members of the public defined spirituality. These researchers found that spirituality was most frequently defined as "Belief in God/seeking to grow closer to God" (Gallup & Jones, 2000, p. 184). Roughly 70% of respondents defined spirituality with reference to the transcendent while just over

30% defined spirituality without any reference to transcendence.

A number of quantitative studies with nationally representative samples have also been conducted to explore understandings of spirituality and religion among social workers and the general population. In social work, understandings of spirituality, religion, and faith have been explored among representative samples of NASW-affiliated practitioners (N = 2,069) in the United States (Canda & Furman, 1999) and social work practitioners (N = 789) affiliated with the British Association of Social Work (BASW) in the United Kingdom (Furman, Benson, Grimwood, & Canda, 2004). Respondents were presented with 16 descriptors (e.g., Belief, Meaning, Personal, Values) and asked to select all the descriptors that best defined the terms *spirituality*, *religion*, and *faith*.

Among the general public, a number of studies have explored the characteristics associated with various constructed classifications (e.g., spiritual and not religious, religious and not spiritual, and spiritual and religious) (Marler & Hadaway, 2002). Perhaps the most notable is a study conducted by Shahabi and associates (2002) that explored the correlates between a number of socio-spiritual-demographic variables and various constructed classifications with a nationally representative sample of adults (N = 1, 422).

As has been repeatedly noted, more research is needed to flesh out understandings of spirituality, religion, and the inter-relationship between the two constructs. In the social work profession, numerous calls for further research have occurred to study perceptions among social work students, practitioners, and educators (DeCoster & Burcham, 2002; Gilbert, 2000; Mattison, Jayaratne, & Croxton, 2000; Sheridan & Amato-von Hemert, 1999). The present study builds upon the above literature by exploring how respondents' faith tradition, orthodoxy, and spiritual motivation, are related to their conceptualization of spirituality, religion, and their understanding of the relationship between the two constructs.

In varying degrees, these three variables—faith tradition, orthodoxy and spiritual motivation—have been widely used in previous research on spirituality and religion (Hill & Hood, 1999). The wide use of these measures suggests that they have some degree of predictive capacity. Since these spiritual characteristics have been

shown to predict numerous other constructs, it seems reasonable to believe that they may be associated with conceptualizations of spirituality and religion.

While it seems plausible that individuals' spiritual characteristics might affect how they define spirituality and religion, or might influence how the relationship between spirituality and religion is understood, I am unaware of any studies exploring such associations with national samples. The multi-method approach used to explore these possible associations is described below.

Methodology

The study employed a national sample of professionally affiliated social work students who were nearing completion of their graduate educational programs. The rationale for using this sample was threefold: 1) apparently no studies on spirituality have been conducted with a national sample of graduate social work students, 2) research suggests this population is on the leading edge of the changes that are taking place in the social work profession regarding spirituality (Canda & Furman, 1999; Sheridan & Amato-von Hemert, 1999), and 3) as the practitioners and educators of the future, their perceptions may represent the direction in which social work is heading (Black, 1997).

In keeping with the methodology used by Zinnbauer and associates (1997), who sampled religiously heterogeneous groups to achieve greater variation in their variables of interest, students in two professional organizations were sampled to obtain as much variance as possible on the three independent variables used in this study. The two organizations surveyed were the National Association of Social Workers (NASW) and the North American Association of Christians in Social Work (NACSW). NASW is the largest professional organization of social workers in the United States and NACSW is the largest faith-based professional organization of social workers in the United States. A random, state-stratified sample was used for the NASW sub-sample, and systematic sampling was used with the NACSW sub-sample (Babbie, 1998). To ensure as much similarity in non-spiritual characteristics as possible among the two sub-samples, only student

members of NACSW who were enrolled in non-sectarian educational programs were eligible to be included in this study.

To reach potential respondents, a telephone survey was used in tandem with the possibility of as many as eight call-backs, with calls placed in the spring semester to ensure that as many students as possible had completed at least one semester of social work education. Depending upon the classification of phone numbers in which no person answered the phone, the response rate for the NASW sub-sample (N = 303) ranged from 61% to 86%. Similarly, the response rate for the NACSW sub-sample (N = 88) ranged from 70% to 93%.

Sample Characteristics

Analysis was conducted to explore possible differences between the NASW and the NACSW sub-samples. No significant differences emerged in any of the demographic variables, which consisted of age, gender, marital status, race, number of semesters in social work education, and length of time in the social work profession. As expected, however, significant differences did occur regarding the three independent variables: faith tradition, orthodoxy, and spiritual motivation. By comparison with the NASW sub-sample, the NACSW sub-sample was comprised of significantly more Protestants (92% vs. 35%; χ^2 = 86.36, df = 4, p < .001) and, among self-identified Protestants, higher levels of evangelical Christians (59% vs. 19%) and lower levels of theologically liberal Christians (9% vs. 40%; χ^2 = 39.86, df = 4, p < .001). Regarding orthodoxy, the NACSW sub-sample was significantly more likely to report orthodox beliefs (96% vs. 50%; χ^2 = 54.50, df = 1, p < .001). Similarly, the NACSW sub-sample reported a significantly higher mean spiritual motivation score compared to the NASW sub-sample (M = 6.61 vs. M = 4.68; t = -18.38, df = 389, p < 0.00.001). In keeping with the methodology of Zinnbauer and associates (1997), the two sub-samples were combined and the characteristics for the single sample are reported below.

The mean age was 35.00 (SD = 10.30) years and 86% (N = 338) of the sample were females. Most respondents were either married (46%, N = 181) or single (37%, N = 146), while the remaining individuals opted for a number of additional categories (e.g., divorced, widowed, partnered). Seventy-six percent (N = 298) of the respon-

dents were European American, 9% (N = 35) African American, 5% (N = 19) Hispanic, 4% (N = 16) Asian, 1% (N = 5) Native American, and 3% (N = 10) selected "other." The remaining respondents declined to answer the question.

To ascertain students' current location in their educational and professional careers, potential respondents were asked the following two questions: "Counting your current semester as one semester, how many semesters of graduate social work education do you have?" and "How many years have you been in the social work profession?" Respondents had completed, on average, 4.07 (SD = 1.71) semesters of social work education (counting their current semester as one) and 5.36 (SD = 5.80) years in the profession. This suggests that the respondents were close to completing their educational programs, had experienced significant socialization in social work forums and, consequently, were well qualified to participate in the study.

Operationalization of Dependent Measures

The survey instrument incorporated three qualitative questions designed to tap understandings of spirituality, religion, and the connection between these two constructs. Specifically, individuals were asked, "How would you define spirituality?", "How would you define religion?", and "What, if any, relationship do you see between spirituality and religion?" Data analysis was based upon grounded theory, in which the data were allowed to drive the construction of coding instruments (Glasser & Strauss, 1967). As described in Hodge and McGrew (in press), analysis produced five coding instruments, which represent the five dependent variables used in this study.

First, definitions of spirituality were coded into nine relatively distinct categories. Second, definitions of religion were coded into 12 themes or categories, many of which were identical to the categories used to define spirituality. Table 1 reports the categories and the frequency with which they were used to define spirituality and religion. Since more than one theme was often used to define religion, the frequencies for the religion definitions exceed 100%. Third, definitions of religion were rated as reflecting positive or negative valence toward religion, with 5% (N = 21) exhibiting negative valence.

Table 1: Definitions of Spirituality and Religion and their Frequency of Use

Definitions of Spirituality	%	Definitions of Religion*	%
Personally constructed (with no reference to the transcendent)	29	Practice of spirituality/faith	26
Belief in/experience of God	23	Organized beliefs or doctrines	26
Belief in/experience of higher power	21	Belief in/experience of God	15
Something beyond the individual (implied, although unspecified, reference to the transcendent)	11	Personally constructed (with no reference to the transcendent)	11
Don't know/No answer	7	Belief in/experience of higher power	11
Connection to others/world/ universe	4	Community	10
Application of religion	3	Humanly constructed (man-made)	
Unclassifiable	2	Institution	8
Something we don't understand	1	Don't know/no answer provided	4
		Culture/tradition	4
		Guidance—particularly for living	4

^{*}Percentages for definitions of religion exceed 100% because more than one definitional category or theme was used to define religion in many instances.

Fourth, responses for the question regarding the relationship between spirituality and religion were classified into seven relatively distinct categories. The categories and their frequency of use were:

- A relationship of some, unspecified type exists between spirituality and religion (50%)
- Spirituality and religion can be related, but are not necessarily related (26%)
- Don't know/no answer (7%)
- Spirituality is entity x (e.g., personal), religion is some entity y (e.g., communal)—relationship is unknown (5%)

- No relationship exists between spirituality and religion (5%)
- Spirituality and religion are identical concepts (3%)
- Unclassifiable responses (3%).

Analysis of data pertaining to the fifth dependent variable indicated that responses to the question about the relationship between spirituality and religion could be grouped into a 7-point continuum for a portion of the sample (N = 149). The continuum and frequencies were:

- 1.No relationship exists between spirituality and religion (14%)
- 2. A minimal relationship exists between spirituality and religion (7%)
- 3. Some relationship exists (12%)
- 4. A relationship exists (17%)
- 5. A strong relationship exists (29%)
- 6.A very strong relationship exists between spirituality and religion (13%)
- 7. Spirituality and religion are identical (7%).

Interrater reliability for the five dependent variables ranged from good to excellent (Cohen's kappa coefficients .78, p < .001 - .88, p < .001).

Operationalization of Independent Measures

The survey instrument also included three dependent measures: faith tradition, orthodox/unorthodox status, and level of spiritual motivation. Faith tradition was assessed with an item adapted from the General Social Surveys (GSS), which is widely considered to represent the state of the art in social science survey research (Davis, Smith, & Marsden, 1998). Specifically, potential respondents were asked: "Thinking about your religious faith, would you describe yourself as Protestant, Catholic, Jewish, some other type of faith, or no faith at all?"

If respondents indicated they were Protestant, they were then asked the following question: "Which of the following best describes your religious identity: theologically liberal Christian, mainline Protestant, evangelical, or fundamentalist." These four identities have been used in the GSS, correspond to relatively distinctive theological

traditions, and have been show to have reasonably good predictive ability (Smith, 1998).

Few respondents self-identified as members of the "fundamentalist" tradition (3%, N = 11). Since some scholars consider "fundamentalists" to be a sub-tradition within the broader evangelical tradition (Smith, 1996), and the term itself is widely considered to be pejorative when used by outsiders (Bolce & De Maio, 1999), these respondents were folded into the larger evangelical category. Similarly, relatively few respondents self-identified as adherents of no faith (6%, N = 23) or as Jewish (6%, N = 22). In keeping with the classification system used in the GSS, these two categories were combined into a single group to obtain sufficient numbers for statistical analysis. (Smith, 1990). Non-respondents (2%, N = 9) were eliminated.

The percentages recorded for each group within the faith tradition variable were as follows: evangelical Protestants 20% (N = 77), mainline Protestants 14% (N = 54), theologically liberal Protestants 12% (N = 48), Catholics 20% (N = 80), other faiths 20% (N = 78), adherents of Judaism and no faith 11% (N = 45).

To operationalize the concept of orthodoxy, Fullerton and Hunsberger's (1982) six-item Christian orthodoxy scale was used. This scale has been used by a number of researchers (Paloutzian, 1999). It attempts to measure acceptance of well-defined, central tenets of Christianity. Although self-identified Christians affirm a variety of beliefs, this scale taps those "bedrock" beliefs that are essentially unanimously agreed upon among all branches of Christianity. As sample item is "Jesus Christ was the divine Son of God."

This scale, which is generally considered to exhibit good reliability and validity (Paloutzian, 1999), was only administered to self-identified Christians. A Cronbach's Alpha coefficient of .80 was obtained with the present sample. In keeping with Fullerton and Hunsberger's (1982) recommendations, respondents were coded as either affirming orthodox or non-orthodox beliefs. Among self-identified Christians, 44% (N = 170) reported orthodox beliefs.

Spiritual motivation was measured with Hoge and Carroll's (1978) six-item intrinsic scale. The intrinsic measure is one of the most widely used measures in the psychology of religion and is generally considered to be reliable and valid (Burris, 1999). The

intrinsic measure represents an attempt to operationalize religious motivation or commitment. Individuals who score highly on the intrinsic scale are theorized to *live* their faith. For intrinsic believers, their faith provides the "master motive" for life, directing their thoughts and actions (Allport & Ross, 1967, p. 434). Put differently, for intrinsic believers, internalized faith or spirituality provides the central motivation for life. Consequently, the intrinsic scale can be considered a measure of spiritual motivation for individuals who ascribe to a faith tradition (Knox, Langehough, Walters & Rowley, 1998; Spalding & Metz, 1997). As sample items is "My faith involves all of my life."

As the above sample item suggests, a number of the measure's items presuppose a religious faith. This can pose problems for individuals with no faith tradition. Accordingly, in keeping with Burris' (1999) suggestion, if individuals disagreed with the premise on which an item was based, they were told that the appropriate response was to indicate 'strongly disagree' instead of leaving the item blank or skipping the question. This protocol allows individuals such as atheists to record low levels of motivation, which would be appropriate from a theoretical viewpoint.

In this study, a Cronbach's Alpha coefficient of .91 was obtained with the intrinsic scale. The theoretical range for the scale is 1 to 7, with higher values indicating higher levels of spiritual motivation. The mean motivation value for the sample was 5.11 (SD = 1.64).

Few cases had missing values (six cases each for the orthodoxy and motivation measures). In instances where three or fewer of the scales' six items were missing, the series mean was used to retain the case. In other instances, listwise deletion was used.

Results

Possible associations between the three independent variables and the five dependent variables were explored. The results are reported first for the spirituality definitions, followed by the remaining dependent variables.

Definitions of Spirituality

To explore associations between respondents' faith tradition and definitions of spirituality, the spirituality definitions variable was recoded to meet statistical assumptions (see Table 2). Analysis with the chi-square procedure indicated that faith tradition was significantly associated with the definitions chosen to define spirituality ($\chi^2 = 81.74$, p < .001).

Table 2: Spirituality Definitions by Faith Tradition

Faith Tradition	Personally Constructed	Belief in/ Experience of God	Experience of Higher Power	Beyond Individual	Don't Know	Other
Evangelical Protestant	12%	54%	13%	10%	5%	5%
Mainline Protestant	24%	24%	20%	11%	11%	9%
Theologically Liberal Protestant	29%	19%	27%	17%	2%	6%
Catholic	27%	15%	31%	4%	7%	15%
Other faiths	41%	10%	19%	11%	8%	10%
Jewish and secular	40%	9%	18%	13%	11%	9%

Perhaps the most notable finding is the tendency for evangelical Protestants to define spirituality in terms of Belief in/Experience of God, while adherents of other faiths, and Judaism and no faith leaned towards defining spirituality in Personally Constructed forms without reference to a transcendent dimension. Catholics and theologically liberal Protestants were generally just as likely to define spirituality in either Personally Constructed forms or in terms of Belief in/Experience of a Higher Power. Mainline Protestants were generally just as likely to define spirituality as Personally Constructed, Belief in/Experience of God, and Belief in/Experience of a

higher power. Adding the three categories that define spirituality in terms of some type of relationship with a transcendent dimension (i.e., God/higher power/beyond individual), results in evangelical Protestants being most likely to define spirituality with some type of reference to the transcendent (78%), followed by theologically liberal Protestants (63%), mainline Protestants (55%), Catholics (50%), other faiths (41%), and Jews/seculars (40%).

Chi-square analysis indicated that affirming orthodox/non-orthodox beliefs was significantly related to the definitional categories chosen to define spirituality ($\chi^2 = 22.59$, p < .001). The most prominent differences occurred with the following categories: Personally constructed, Belief in/Experience of God, and Belief in/Experience of a Higher Power. Among self-identified Christians, non-orthodox believers were significantly more likely to define spirituality in Personally Constructed terms (30% vs. 18%) and as Belief in/Experience of a higher power (29% vs. 20%) and less likely to define spirituality as Belief in/Experience of God (12% vs. 39%). Non-orthodox Christians were also more likely to define spirituality without any reference to a transcendent dimension (46% vs. 32%). Put conversely, orthodox believers were more likely to incorporate some type of reference to the transcendent in their definitions of spirituality than were non-orthodox believers (68% vs. 54%).

One-way Analysis of Variance (ANOVA) indicated that spiritual motivation was significantly associated with the categories respondents used to define spirituality (F = 11.97, p < .001). Tukey's post hoc test indicated that higher levels of spiritual motivation were associated with a greater likelihood of defining spirituality in terms of Belief in/Experience of God (M = 6.17) as opposed to other definitions (M = 4.58 - 4.99).

Definitions of Religion

Analysis was also conducted to explore the extent of associations between the three independent variables and the second dependent variable—definitions of religion—beginning with an exploration of the relationship between respondents' faith tradition and the 12 categories used to define religion. Faith tradition was significantly related to three of the definitions used to define religion (see Table

3). The remaining categories were either unassociated with respondents' faith tradition (i.e., Organized beliefs or doctrines, Personally Constructed, Belief in/Experience of a Higher Power, Community, and Institution) or, in the remaining instances, failed to support the assumptions required for statistical analysis.

Table 3: Faith Tradition and Percentage Agreement with Significant Religion Definitions

Faith Tradition	Practice of Spirituality/ Faith	Belief in/ Experience of God	Humanly Constructed	
Evangelical Protestant	38%	29%	19%	
Mainline Protestant	33%	15%	4%	
Theologically Liberal Protestant	19%	15%	12%	
Catholic	26%	16%	2%	
Other faiths	22%	5%	10%	
Jewish and secular	11%	11%	2%	
χ^2 Stat.	14.20*	17.25**	19.89**	

^{* &}lt; .05. ** < .01. *** < .001.

Evangelical Protestants were more likely to use all three themes to define religion than were members of other faith traditions (see Table 3). Supplemental analysis indicated that evangelical Protestants were the most likely to use multiple themes to define religion (42%; $\chi^2 = 11.50$, p = .042), followed by mainline Protestants (37%), Catholics (32%), Jews/secularists (31%), other faiths (23%), and theologically liberal Protestants (21%). Catholics, along with Jews and secularists, were the least likely to use the Humanly Constructed theme to define religion.

Exploration of the relationship between orthodoxy and the 12 categories used to define religion indicated that orthodoxy was related

with the use of three categories. Among Christian respondents, orthodox believers were significantly more likely to use the Belief in/Experience of God category (24% vs. 10%; χ^2 = 7.75, p = .005), more likely to use the Humanly Constructed category (13% vs. 3%; χ^2 = 6.92, p = .009), and less likely to use the Belief in/Experience of a Higher Power category (6% vs. 14%; χ^2 = 4.34, p = .037) to define religion compared to non-orthodox believers. Orthodoxy was unrelated to the following categories: Practice of Spirituality/Faith, Organized beliefs or doctrines, Personally Constructed, Community, Institution, Don't know/No answer, Tradition/Culture, and Guidance. The remaining category, Unclassifiable, failed to meet the necessary assumptions for statistical analysis.

The relationship between spiritual motivation and the 12 definitional categories for religion was also explored using independent samples t-tests. Higher scores on the spiritual motivation scale were associated with greater frequency of using the following categories to define religion: Practice of Spirituality/faith (M = 5.58 vs. M = 4.95; t = 3.66, df = 209, p < .001), Belief in/Experience of God (M = 5.56 vs. M = 5.03; t = 2.67, df = 387, p = .013), and Humanly Constructed (M = 5.77 vs. M = 5.05; t = 2.49, df = 93, p = .009). The remaining categories were unrelated to spiritual motivation.

Valance of Religion Definitions

Analysis was conducted to explore possible associations between the three independent variables and the third dependent variable regarding the valence of religion definitions. The relationship between faith tradition and valence, however, could not be explored because statistical assumptions were not met. Orthodoxy was unrelated to valence among self-identified Christian respondents. In other words, believers who held non-orthodox beliefs were just as likely as believers who held orthodox beliefs to use negative themes to define religion. Similarly, spiritual motivation was unrelated to the valence of the definitions.

The Relationship between Spirituality and Religion

Next, associations were explored between the independent variables and the fourth dependent variable regarding the nature of the relationship between spirituality and religion. To meet statistical assumptions, the response categories of the dependent variable were reformatted. The relatively few responses in the category, Spirituality and religion are identical, were folded into the largest category, A relationship of some unspecified type exists between spirituality and religion. The following two categories were retained unaltered: Spirituality and religion can be related but are not necessarily related, and No relationship exists between spirituality and religion. Finally, the remaining categories (i.e., Don't know, Spirituality is entity x/religion is some entity y—relationship is unknown, and Unclassifiable) were collapsed into a new category entitled, Unknown relationship.

The faith tradition variable was also reformatted, with all Protestants being collapsed into a single category. Analysis with the revised variables indicated that a significant relationship existed between respondents' faith tradition and their understanding of the relationship between spirituality and religion ($\chi^2 = 22.00$, p = .009).

Table 4: Faith Tradition and Type of Relationship between Spirituality and Religion

Faith Tradition	U nspecified relationship	Can be but not necessar- ily related	No relationship exists	Unknown relationship
Protestant	58%	23%	5%	13%
Catholic	45%	24%	5%	26%
Other faiths	60%	31%	1%	8%
Jewish & secular	40%	29%	13%	18%

Close to 70% of Catholics and Jews/secularists reported that either some unspecified relationship exists between spirituality and religion or that they can be related (see Table 4). Eighty-one percent of Protestants and 91% of other faiths held similar views. Interestingly, 13% of Jewish and secular adherents reported that no relationship exists between spirituality and religion. The other independent

variables, orthodoxy and spiritual motivation, were both unrelated to respondents' assessment of the nature of the relationship between spirituality and religion.

Strength of Relationship between Spirituality and Religion

Finally, associations were explored between the independent variables and the fifth dependent variable, which measured the strength of the relationship between spirituality and religion along a 7-point continuum ranging from no relationship exists between the two concepts (1) to the two concepts being identical (7). For the purposes of analysis, the continuum was treated as a continuous variable with higher scores representing higher degrees of overlap between spirituality and religion.

Analysis with the reformatted faith tradition variable, which collapsed all Protestants into a single category, revealed the existence of significant differences between the four groups (F = 3.10, p =.029). Tukey's post hoc test indicated that respondents who were Jews or members of no faith reported that significantly less overlap exists between spirituality and religion than do other groups (M = 2.88 vs. M = 4.14 - 4.29). Breaking out the Protestants into separate faith traditions, however, revealed a somewhat different picture. Analysis with the unformatted faith tradition variable indicated the existence of significant differences between groups (F = 2.44, p =.037). Tukey's post hoc text revealed that no significant differences existed between Jews/secularists (M = 2.88), evangelical Protestants (M = 3.93), other faiths (M = 4.14), Catholics (4.23) or theologically liberal Protestants (M = 4.25). Jewish and secular respondents (M = 2.88) only differed significantly in their perceptions from mainline Protestants (M = 4.73), with the latter faith tradition understanding a stronger relationship to exist between spirituality and religion than the former group. Mainline Protestants did not differ significantly from other groups in their views regarding the strength of the relationship between spirituality and religion.

Finally, analysis indicated that the other independent variables, orthodoxy and spiritual motivation, were both unrelated to respondents' assessment of the strength of the relationship between spirituality and religion.

Discussion

This study explored the relationship between respondents' faith tradition, orthodoxy, and spiritual motivation, and their conceptualizations of spirituality, religion, and the nature of the relationship between the two constructs using a spiritually heterogeneous national sample of social work graduate students. Analysis revealed that faith tradition was, at least to some degree, significantly associated with how respondents defined spirituality and religion. Faith tradition was also associated with how respondents conceptualized the relationship between spirituality and religion, and their understandings of the strength of the relationship between spirituality and religion.

Orthodoxy was also associated with how respondents defined spirituality and religion. Orthodoxy was unrelated, however, to understandings of the relationship between spirituality and religion. In other words, the manner in which self-identified Christians conceptualized both the type and strength of the relationship between spirituality and religion was independent of their affirmation of orthodox or non-orthodox beliefs. Similarly, respondents' level of spiritual motivation was associated with the way in which spirituality and religion were defined, but not understandings of the relationship between spirituality and religion.

While some degree of overlap likely exists between the three independent variables, it would appear that the faith tradition variable has the most predictive effect because this variable was associated with respondents' understandings of spirituality, religion, and the inter-relationship between the two constructs. While orthodoxy and spiritual motivation were associated with the definitions chosen to define spirituality and religion, they were unrelated to how the relationship between spirituality and religion was conceptualized.

The construct most influenced by respondents' spiritual characteristics appears to be definitions of spirituality. Respondents' faith tradition, orthodoxy, and spiritual motivation were all associated with how respondents' defined spirituality. In other words, all of the personal spiritual characteristics explored in this study shaped how spirituality was defined. While the same can be said for religion definitions, the magnitude of the effect appeared to be stronger with

the spirituality definitions. In short, it appears that spirituality is the construct that is most susceptible to being shaped by respondents' spiritual characteristics.

Conversely, the construct most independent of respondents' spiritual characteristics appeared to be understandings of the nature of the relationship between spirituality and religion. The vast majority of respondents in all faith traditions believed that some type of relationship exists, or at least can exist, between spirituality and religion. Similarly, relatively little variation appeared regarding the strength of the relationship. Also notable is that the use of negative statements to define religion was largely independent of respondents' spiritual characteristics.

Implications for Research and Practice

As social work and other helping professions move toward integrating spirituality into their respective professional discourses, the findings suggest a number of implications. Some degree of shared understanding of spirituality, religion, and the nature of the relationship between the two constructs is important for both researchers and helping professionals (Ai, 2002). Conceptualizations shape the questions asked, the answers found, and the way the resulting findings are understood and presented (Kuhn, 1970). As Gilligan's (1993) work illustrates, if conceptualizations differ too radically, then an informational disconnect may occur in which misunderstandings can flourish.

In keeping with the finding that conceptualizations of spirituality may be particularly susceptible to being shaped by respondents' personal spiritual characteristics, Miller (1998) has argued that certain measures of spirituality reflect such biases. More specifically, some spirituality measures are conceptualized in such a manner that respondents who hold different understandings of spirituality receive lower scores than those whose understandings of spirituality are more congruent with those of the measure's designers.

Whitfield's (1984) spirituality measure serves as a case in point. In this measure, spirituality is operationalized in a manner that reflects a secular, humanistic understanding of spirituality. Consequently, spirituality is operationalized with items such as "I

feel sexually fulfilled" and "I exercise regularly." Thus, a devout Catholic sister who forsakes sexual fulfillment and a systematic exercise program to spend more time in prayer and service to the poor is deemed less spiritual than the sexually fulfilled secularist who exercises regularly.

As the helping professions incorporate spirituality into mainstream discourse, social workers should be aware that such conceptual disconnects exist and of their ethical obligations in such situations. In general, spirituality tends to be disproportionately affirmed among people who are poor and other traditionally disenfranchised populations (Gallup & Lindsay 1999; Gallup & Jones, 2000). Social workers have an ethical duty to ensure that services reflect clients' interests, particularly those clients who are poor or otherwise disenfranchised (NASW Code of Ethics, 1999). Similarly, in the area of spirituality, social workers have an ethical duty to ensure that conceptualizations of spirituality are grounded in clients' worldviews. In situations where conceptualizations differ from those held by clients, particularly those who are poor or otherwise vulnerable, social workers have an ethical responsibility to highlight such disconnects and work for the development of more client-centered measures.

Similar concerns exist in the area of practice. Practitioners who define spirituality without reference to the transcendent should take steps to ensure that their personal conceptualizations do not unduly affect their ability to work with the majority of clients, who appear to define spirituality in terms of the transcendent (Gallup & Jones, 2000). Similarly, although few respondents reported that no relationship exists between spirituality and religion, individuals who hold such beliefs must ensure that their personal views do not limit their ability to explore the full array of clients' strengths, given that for most clients spirituality and religion are interconnected entities (Marler & Hadaway, 2002; Shahabi, et al., 2002).

For instance, based upon qualitative work with Eastern Orthodox believers, Joanides (1997) found that a holistic synthesis between religion and spirituality tended to exist among believers in this tradition. The author noted that this interconnection differed from the understanding of spirituality and religion held by many

social workers. Consequently, Joanides suggested that the tendency of some social workers to dichotomize spirituality and religion may affect their work with Eastern Orthodox believers. Such practitioners may overlook salient information, such as the supportive nature of weekly church-based fellowship meetings.

Given that the faith tradition variable seemed to have the most predictive effect on understandings of spirituality and religion, practitioners may wish to include a question designed to explore this area in their standard clinical assessments. Indeed, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) now requires the inclusion of a question to assess clients' denominational affiliation in hospitals and many other health-care settings (Hodge, in press).

To make full use of the resulting information, practitioners should familiarize themselves with the general beliefs and practices of those traditions they are likely to encounter in practice settings. Practitioners should also develop self-awareness of their own faith tradition, or lack thereof. Practitioners are then well positioned to note potential conflicts in understandings, beliefs, and values that may exist when differences in faith traditions exist.

Finally, even though personal spiritual characteristics were unrelated to the negative religion definitions, this finding may also warrant some comment. Like other human characteristics, religion can be manifested in harmful forms. Yet, for most individuals, religion is an important strength (Gallup & Lindsay 1999; Gallup & Jones, 2000; Marler & Hadaway, 2002; Shahabi, et al., 2002). Consequently, the negative definitions of religion may be a concern since such definitions preclude any positive expressions of religion.

Such conceptualizations raise the possibility that negative sentiment may be informing the definitions. Some social workers have diaphobic tendencies, or animus towards a worldview in which a transcendent God, rather than humankind, serves as the ultimate point of reference (Hodge, 2003). Genia (2000) has suggested that failure to work through such negative tendencies may result in religious countertransference. In much the same way that practitioners from divorced families may experience countertransference biases when encountering divorce (Black, Jeffreys & Hartley, 1993),

practitioners with diaphobic tendencies may experience religious countertransference biases when encountering religion.

Practitioners, particularly those who define religion negatively, should engage in sufficient self-examination to ensure that they do not attempt to work through unresolved biases in practice settings (Genia, 2000). As is the case in dealing with biases associated with other human characteristics, in some cases social workers will be able to address their biases to such an extent that effective service provision is possible. In other cases, referral to another practitioner will be necessary.

Limitations and Conclusion

This study has a number of limitations. While the use of a national sample safeguards against the effects of regional bias, the results cannot be generalized to all social workers or even all graduate social work students. The use of multiple t-tests at the .05 level of significance must also be noted as a limitation as repeated application of the procedure will eventually yield significant findings by chance alone (Type I error). It is also possible that confounding constructs exist. Due to the cross-sectional research design, no definitive statements can be made about causality. Although it may seem reasonable to posit that, for example, high levels of spiritual motivation may foster a greater likelihood of defining religion as the practice of spirituality/faith, it is impossible to conclude that such a relationship does, in fact, exist based upon the present research design. It is also possible that the practice of one's spirituality/faith may foster higher levels of spiritual motivation, or directionality may run in both directions. Further research is required to answer such questions.

This exploratory study, however, lays the groundwork for such research by suggesting that relationships do exist between at least some spiritual characteristics and the manner in which spirituality and religion are defined and the way in which the relationship between the two constructs is understood. Given the growing attention devoted to spirituality and religion, this study represents an important step in advancing our understanding. �

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Key Words: Spirituality; Religion; Faith tradition; Orthodoxy; Spiritual motivation

Counseling and Mental Health Referral Practices of Church Staff

Lauren M. Polson and Robin K. Rogers

Individuals and families in crisis frequently seek help first from their pastor or other church staff. However, these professionals are not necessarily equipped to respond adequately to people struggling with problems of mental health. What do clergy do in these circumstances? This article reports the findings of a study that addressed the question: What are the attitudes about and practices of making referrals to mental health agencies by staff of mainline Protestant congregations in Waco, Texas? Using stratified random sampling, an 18-item survey was mailed to the pastor or designated staff member in 57 congregations, of whom 51 returned the survey. Key findings include that church staff rarely made referrals to mental health professionals. When they did make referrals, it was because they did not feel qualified to deal with the problem. They reported that they were not trained to recognize mental and emotional illnesses and that they needed continuing education to help people with their personal problems.

MERICANS HAVE CONSISTENTLY REPORTED THAT RELIGION IS A VITAL part of their lives, with three out of five classifying religion as very important, nearly 70% being members of a church or synagogue, and 40 percent attending a service at least once a week (Gallup & Lindsey, 1999). This same study indicated that 65% of Americans believe that religion can answer today's problems. Therefore, it is not surprising that religion plays an important role in the lives of people with serious medical illness or emotional distress. The U. S. Surgeon General (1999) estimated that 20% of adult Americans

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Koenig, George, and Peterson (1998) found that religious coping was the dominant coping behavior used by the medically ill and that religious attendance also is related to lower rates of medical illness. Koenig (2002) also reported a positive effect of prayer and religion on mental and physical health.

Two studies spanning 40 years have shown that a substantial percentage (up to 40%) of Americans with a serious problem seek clergy as their first source of help (Gurin, Veroff, & Feld, 1960; Kane & Williams, 2000). In a study of Hispanic and Anglo Catholics in Florida, Kane and Williams (2000) found that Hispanic Catholics prefer help from a priest whether or not this priest has a degree and license in one of the helping professions (clinical social work, psychology, psychiatry or mental health counseling). Anglo Catholics, however, prefer help from a priest or a layperson with a degree in one of the helping professions.

Kane (2001) reported that clergy believe they have a clear sense of when people need to be referred to mental health professionals. These findings are supported by study by Moran et al. (2005) that identified two different types of problems presented in pastoral counseling: Factor 1—grief, death and dying, anxiety, and marital problems; and Factor 2—depression, alcohol/drugs, domestic violence, severe mental illness, HIV/AIDS, and suicide. They found that clergy were less confident of their ability to work with Factor 2 problems and that they consulted with social workers and pastoral counselors "a few times a year." They also reported that less than half of the clergy had training in Clinical Pastoral Education and those with this training felt more competent in dealing with both types of problems. Other studies have also found that church staff in general, both ordained clergy and other ministers, receive limited training in counseling, often only Clinical Pastoral Education (Molica et al, 1986; Kane, 2001; Moran et al, 2005).

A study of Orthodox Christian ministers by Rogers (2002) revealed that these clergy make referrals when the person shows evidence of serious psychological problems or the spiritual director "does not have the strength and knowledge necessary to help the individual"

(p. 288). A church's ideology and the staff's education level also affect whether they make referrals. Members of the clergy with advanced education and liberal ideologies are more likely than those with less education and conservative ideologies to make referrals to mental health professionals (Gottlieb & Olefson, 1987). In addition, Paul et al., (2002) found that clergy in a rural area are more likely to make referrals to a Christian counseling agency or a counselor who is a Christian than they are to a non-Christian agency or counselor.

Taylor, Ellison, Chatters, Levin and Lincoln (2000) reported that only 10% of the clergy that they studied referred their parishioners to mental health professionals. This finding is consistent with the results of several earlier studies that reported low referral practices by clergy (Perlmutter, 1974; Bell, Morris, Holzer, and Warheit 1976; Virkler, 1979; Abramczyk, 1981; Gilbert, 1981, and Mollica et al, 1986). In contrast, Paul, Hussey, and Arnsberger (2002) reported that 40% of the church staff that they studied made referrals to mental health professionals.

Orthner (1986) found that United Methodist pastors spend an average of 2.8 hours a week in scheduled counseling. These pastors' feeling of competency in counseling was found to be directly related to the amount of time they devoted to counseling and the specialized training in counseling that they received.

In summary, the research shows that church members prefer to go to their clergy for counseling, and that clergy make referrals when they feel their church members have a serious problem that they cannot handle. Research also shows that clergy and, in some cases, other church staff members desire specialized training to work with people and their mental health problems.

Knowing this raised the question of whether local church staff members feel competent to provide mental health counseling or make referrals to mental health agencies. This question is important to the social work community because if church staff members are counseling without proper training, this could be detrimental to their clients as well as to the larger counseling community. Therefore, this study addressed the following research question: What are the attitudes about and practices of making referrals to mental health agencies by staff of churches in large Protestant denominations in Waco, Texas?

Methodology

A review of Family Counseling and Children's Services (FCCS) of Waco records revealed that since 1984, only five percent of its clientele were referred by local church staff. Knowing that church staff (ordained clergy and other ministers) are not always trained to provide appropriate counseling raised the issue about whether local church staff members feel competent to provide mental health counseling or make referrals to mental health agencies. As mental health counselors, the staff were concerned that persons needing assistance receive the best counseling available, whether from church staff or a mental health agency.

Research Design and Sample Selection

This exploratory study used quantitative research methods with a mailed survey. A target sample size of 50 churches was selected due to the exploratory nature of the study as well as limited finances and a 4-month time frame for the project. The sample also was limited to Protestant denominations to increase its homogeneity for analytic purposes and because the researchers were more familiar with their administrative structures. The sample of churches was selected by stratified random sampling. First, a sampling frame was created listing all of the Baptist, Methodist, Presbyterian, Church of Christ, and Lutheran churches included in the 2003-04 edition of the SBC Waco (Texas) Yellow Smart Pages. These were the five largest mainstream Protestant denominations in Waco by number of congregations listed in the SBC Yellow Pages. The denominations were not divided according to different subgroups within the denominations such as Southern or American Baptist. Within each denominational category, the congregations were listed in random order.

From this sample frame of 213 congregations in five denominations a total sample of 56 congregations was selected. The number of congregations selected from each denomination was based on the proportion of churches in that denomination relative to all of the churches in the sampling frame, with a minimum of five congregations from each denomination.

Table 1 shows the distribution of these 213 churches across

denominations, the sample size, and the actual number of churches that completed the survey. The target size of the sample was 50; however, the minimum-of-five criterion resulted in a final sample of 56 churches: 34 Baptist, eight Methodist and five each of Church of Christ, Lutheran and Presbyterian. However, one of the five Presbyterian churches was without a pastor or other paid professional staff at the time of this study, so the sample size for Presbyterian churches was four.

Fifty-one churches completed and returned their surveys for a response rate of 89%. One church returned its uncompleted survey with a note attached which said that they did not have a minister who could complete it. The other churches did not respond.

Table 1: Summary of Sample Selection

Denomination	Sampling Frame (% of total)	Sample Size	Actual Sample/ Completed Surveys (%)
Baptist	144 (67%)	34	29 (85%)
Methodist	35 (16%)	8	9 (89%)
Church of Christ	16 (7%)	5	5 (100%)
Lutheran	9 (4%)	5	4 (80%)
Presbyterian	9 (4%)	4	4 (100%)
Total	213 (100%)	56	51 (91%)

The following procedure was used to select the actual churches and church staff persons to whom the surveys were mailed. The researcher began with the first church in each list and called the churches in order asking to speak with the pastor, explaining the nature of the survey, and asking whether he or she would be willing to consider completing a questionnaire if one was sent to him or her. Each of the 56 pastors contacted agreed. In some cases the pastor identified another church staff member as the appropriate person to complete the questionnaire, and then the researcher contacted those individuals to see whether they would be willing to participate in the survey.

Instrumentation and Data Collection

The questionnaire used in this project was developed by the researchers using concepts and questions from prior research studies as a guide (Kane, 2001; Taylor et al, 2000; Paul, Hussey, & Arnsberger, 2002). The questionnaire, which was pretested using local seminary students, consisted of items pertaining to demographics of the church (Q1-2), the minister (Q3-4, 20-24), and the minister's referral practices (Q 8-11). The questions concerning referral practices addressed the population counseled, types of counseling referrals for which referrals have been made, percentage of referrals made, and the reasons for the referrals. The questionnaire was mailed during the first week in February 2004 and followed two weeks later by a reminder postcard.

Findings

Subjects

The sample consisted of 51 respondents, 43 male and 8 female. The average and median age of the church staff was 46, and they had been in the ministry for an average of 17 years. All of the church staff had at least a college degree, 47.6% also had a seminary degree and 31% had both a seminary and graduate school degree. Ethnically, 92.1% of the respondents were Caucasian, 3.9% African-American, 2 % Hispanic/Mexican-American, and 2% Asian-American (these pastors identified themselves as such). Table 2 shows the ethnic breakdown of the churches in the sample compared to the ethnic breakdown of the sampling frame. Sixty percent said that they had received specialized training in counseling and 18% said that they had a counseling license but did not indicate the type of license in the space provided.

Table 2: Comparison of Ethnicities in Sample Frame and the Sample

Ethnicity	Sampling Frame (% of Total)	Sample (% of Total)
Caucasian	71	92.1
African-American	22	3.9
Hispanic/ Mexican-American	5	2.0
Asian-American	3	2.0
Total	100	100

Involvement in Counseling

The church staff reported that they spent an average of two hours per week in direct counseling and in that time counseled an average of two people. The data revealed that 28.6% of the respondents counseled four to six people per week while 46.9% counseled one or two people per week. When asked which population they counseled, over 85% of the respondents reported counseling with mostly adults.

Referral Practices

The respondents reported making relatively few referrals; 62.5% of the church staff referred 10% or fewer of the people they counseled to a mental health professional. Table 3 shows to whom they made these referrals.

Table 3: Summary of Church Staff Referrals

Referred to	Percentage	
Private Psychologists	46.7	
Psychiatrists	33.3	
Social Agencies	31.1	
Mental Health Agencies	31.1	
Other Clergy	24.4	
Social Workers	15.6	

Reasons for referral

When asked why they made referrals, approximately nine out of ten of the respondents said that they referred because they didn't feel qualified to deal with the problem; one in five had an established friendship with the potential client, and approximately one out of ten were too busy to provide counseling or referred because the person needing counseling was not a church member (See Table 4).

Table 4: Reasons for Church Staff Referrals

Reason for Referral	Percentage
Didn't feel qualified to deal with problem	87.5%
Had established friendship with client	20.8%
Too busy to provide counseling	12.5%
Person needing counseling not a church member	10.4%

There were four statistically significant relationships concerning the reasons church staff made referrals to mental health counselors. First, staff who counseled adults were significantly more likely to refer a client because they reported being too busy more than staff who counseled youth or older adults with $X^2(2, N=44) = 6.210$, p=.045. Second, as the number of people that church staff counseled increased, their opinion that they referred because they were too busy also increased (Somers' D=-.273, p=.048). Third, the greater the number of people that church staff counseled the more likely they were to refer because they didn't feel qualified to deal with the problem with $X^2(3, N=47)=7.804$, p=.050. Finally, as the percentage of people that church staff referred increased, their likelihood to refer because they didn't feel qualified to deal with the problem also increased (Somers' D=-.186, p=.035).

Prior and Future Training

There were three statistically significant relationships related to church staff's feelings of capability in counseling. First, as the number of hours church staff spent counseling each week increased, their feelings of capability in counseling increased significantly with $X^{2}(8,$ N=49)=22.877, p=.004. Second, when asked if they thought their congregation expected their minister to have advanced training in counseling, Baptist church staff reported significantly higher expectations than the other denominations (Somers' D=-.353, p=.003). Third, as the number of people that church staff counseled each week increased, their feeling of capability in counseling increased with Pearson R=.293, p=.041.

Overall, 84% of all church staff reported that they had a clear sense of when problems should be referred to mental health professionals. There were two statistically significant relationships concerning church staff's feelings of adequacy when making referrals. First, Baptist and Methodist church staff were more likely to disagree with the statement, "I have a clear sense of when problems should be referred to mental health professionals." than the other denominations with $X^2(6, N=49)=29.678$, p=.020. Second, as the percentage of people that church staff referred increased, their feeling of having a clear sense of when people with personal problems should be referred significantly increased (Somers' D=.330, p=.004).

There were two statistically significant relationships concerning continuing education. First, as the number of hours that church staff counseled each week increased, their opinion that clergy needed continuing education to help people with personal problems significantly increased (Somers' D=.280, p=.028). Second, as the number of people church staff counseled each week increased, their opinion that church staff needed continuing education also significantly increased (Somers' D=.389, p=.001). Almost all (93.9%) of the church staff reported that they needed continuing education to help people with their personal problems.

There were three statistically significant relationships concerning church staff's prior education in counseling. First, as the number of people that church staff counseled each week increased, their opinion that seminary students should receive specialized training to counsel people with personal problems significantly increased (Somers' D=.312, p=.003). Second, as the number of people church staff counseled each week increased, their feeling that their seminary training prepared them to work with people and their mental health issues significantly decreased with $X^2(9, N$ =46)=18.421, p=.03. Third, as the percentage of people that church staff referred increased, their feelings that they had been trained to recognize mental and emotional illnesses significantly increased (Somers' D=.309, p=.007).

There were two statistically significant relationships concerning the amount of referrals church staff make. First, church staff who referred a greater number of people to mental health clinics agreed significantly more with the statement that "they regularly refer people to mental health professionals (Somers' D=.468, p=.000). Second, church staff with specialized training in counseling made significantly more referrals than church staff without training with Likelihood Ratio X^2 (6, N=49)=13.416, p=.037.

Counseling

There were three statistically significant relationships concerning the amount of counseling that church staff members do. The first and second are that staff members from larger churches spent significantly more hours per week counseling (Somers' D=.353, p=.002) and coun-

seled significantly more people (Somers' D=.374, p=.001). Churches with a larger number of church members counseled a significantly greater number of youth and churches with a larger number of church members counseled a significantly greater number of older adults with Linear by Linear $X^2(8,N=44)=4.514$, p=.034.

Implications

The purpose of this study was to examine the counseling and referral practices of church staff of the most prevalent Protestant denominations in Waco, Texas. The study used stratified random sampling techniques and a quantitative questionnaire. Key findings were discovered in the areas of referrals, capability in counseling, and continuing education.

Referrals

The findings suggest that church staff refer only a small percentage of the people who come to them to request help to mental health professionals. These findings agree with those of Taylor, Ellison, Chatters, Levin and Lincoln (2000), Bell, Morris, Holzer, and Warheit (1976), Virkler (1979), Abramczyk (1981), and Gilbert (1981). However, church staff reported that they had a clear sense of when a person needed to be referred, and when they did make referrals, it was because they did not feel qualified to deal with the person's presenting problem. This is consistent with Rogers (2002) and indicates that church staff members believe they can handle most of the problems people present to them.

Capability

Church staff reported that as the number of hours they spent counseling and the number of people that they counseled each week increased, their feelings of capability increased. This relationship, though significant, is only a correlation and does not imply that the increased hours spent counseling caused their increased feelings of capability. For example, those who felt more capable may have accepted more counselees; or those who desired to counsel had sought greater preparation. Counseling made up a very small percentage of their weekly activities. They also reported that they did not feel that their prior training adequately prepared them for counseling.

Although church staff did not report high levels of confidence in their counseling ability, they still did not make a large percentage of mental health referrals. These findings seem to contradict each other. One possible explanation may be that they felt capable enough to deal with the problems not to have referred them but they did not feel completely confident in the help that they gave the client. Alternatively, while they may not feel capable as counselors, they may also doubt that their counselees need mental health counseling; or they may be concerned about the nature of the services that would be provided if they referred.

Church staff indicated a desire for continuing education concerning mental health counseling, a finding consistent with Lowe (1986). One response to this expressed need would be for mental health agencies in Waco to offer seminars or classes for this audience on counseling techniques and making decisions about referral.

Similar to Gottlieb and Olfson (1987), church staff with specialized training in counseling made more referrals than church staff without training. This suggests that as people become more aware of what counseling entails and the different types of counseling, they begin to recognize their need for help. Another dynamic may be that church members are discerning about their clergy's competence to handle their emotional problems and seek help only from those in whom they have confidence.

Implications for social work

The findings from this study have several implications for social work. The first concerns the respondents' expressed need for continuing education in counseling. The Code of Ethics of the National Association of Social Workers (NASW) states that social workers value community education and value clients receiving the very best services available. This is seen in the ethical principles of service and competence. Social workers could conduct continuing education classes for church staff that would provide them with information on counseling as well as on when and how to make referrals. The continuing education curriculum and materials could

be prepared by the one of the professional social work associations such as NASW or NACSW and classes sponsored by local branches. Accredited social work programs could provide continuing education or special training in this area tailored to local needs. This would be an indirect means of improving services to the public in general as well as educating clergy in particular about the counseling services that social workers provide. This training could also be offered through distance learning. Another implication is that social workers can advocate within seminaries to have counseling classes added to the seminary curriculum. This may not be plausible because of the already large number of classes that are required. Another possibility is to add a class on utilizing the resources within their community. This class would include learning how to make referrals and network with agencies.

Mental health agencies can use these findings to support pastors in their role as counselor and increase the number of referrals to their agency, both of which would benefit people needing help. Mental health agencies individually or in a consortium could provide information to the pastors about their presence, availability, and the range of issues they address, specifically ones that require more specialized interventions.

Limitations of Study

One limitation of this study is that it did not divide denominations into subgroups. For example, American Baptists and Southern Baptists are grouped together under the heading Baptist. Therefore, responses reported for the overall denomination may not be consistent across all subgroups. However, the sampling method, sample size, and return rate allowed for a representation of all included groups.

Another limitation is that the sampling frame came from the phone book. Any church that did not list its name and number in the phone book was not given a chance to participate in the study. It was hypothesized that most churches in Waco, Texas, have the means and see the need for a listing in the phone book; but if a church did not, then it was not included in the study. In addition, the sampling frame consisted of the five prevalent Protestant denominations in Waco and omitted other denominations that may have a large presence in Waco but are not mainline Protestant churches, such as Assembly of God and Bible churches.

The last limitation is that African-Americans are underrepresented in the study. Since Caucasians made up such a large proportion of the sample, specific differences of the ethnic minorities could easily have been overshadowed.

Suggestions for Further Research

This study has begun to look at the counseling and referral practices of church staff, but it only examined a subset of Protestant churches. In order to have a more complete picture of the practices of church staff, a wider range of churches needs to be studied. Gurin, Veroff, and Feld (1960) examined the Roman Catholic Church, but no known research involving Charismatic churches or other Christian denominations has been conducted. This study could be replicated and this survey instrument modified and used in these research projects.

Future studies also need to inquire about church staff's desire to refer to "religious" counselors or whether they have a tendency to refer to professionals with whom they already have a relationship. In order for social workers to educate church staff on how and when to make referrals, they must know to whom the church staff are making referrals, because referrals are handled differently by different types of agencies. In addition, these studies need to explore the differences between church staff's feelings regarding their adequacy as counselors and their actual competence in practice.

Summary

This study examined the counseling and referral practices of church staff of prevalent Protestant denominations in Waco, Texas, through a mailed survey to a sample of 51 churches. The findings conclude that church staff do not make a large number of referrals, and when they do make referrals, it is because they do not feel capable of doing the counseling themselves. Also, they do not think that their prior education trained them to work with people's personal

problems, and they desire continuing education on this issue. The researchers recommend that social workers offer continuing education classes to church staff, and that seminaries offer more classes on counseling or at least a class on utilizing community resources. �

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The Anatomy of Trauma and Faith: A Reflective Post-Mortem

Theresa L. Blakley

Trauma of great personal magnitude rips apart a person's foundational worldview, the meaning of life, one's place in the world, and one's sense of safety in it. The author observes her own story as a social worker and academic, and as a human being under extraordinary traumatic stress resulting from the murder of her pastor/husband. Informed by classic and current traumatologists, the author recounts her journey toward healing and resolution within this living laboratory. The paper presents a reflective analysis of the role of faith in trauma recovery.

T WAS A BRIGHT, TROPICAL WINTER'S DAY AFTER CHRISTMAS IN MIAMI, gentle and beautiful. We had just returned home from morning services at Central Baptist Church where my husband had been pastor for 10 years. On the agenda at our household was dinner with visiting relatives—a relaxing, pleasant afternoon to be sure. Without warning of danger or disaster afoot, something astonishing happened that would change our lives forever. On December 26, 1999, at 1:15 in the afternoon, a gunman simply opened the front door of our home and began shooting.

The first three shots, aimed at the eldest of my three children, missed their mark, pocking a mirrored glass wall in the dining room. My daughter, 19, ran out the door and into the backyard where she attempted to scale the six-foot privacy fence, screaming for help.

In her flight for survival, she reasoned out her escape in the double-fast pace of adrenaline-driven thought: "If I get over this fence, he will hunt me down and kill me in the neighbor's yard; if

Social Work & Christianity, Vol. 34, No.1 (2007), 88-103 Journal of the North American Association of Christians in Social Work I don't get over the fence, he will kill me right here and now like a trapped animal. Somebody help me!" As if caught in some nightmare, she clawed up the wooden fence and scraped down in a number of desperate escape attempts; all the while hearing the sometimes rapid, sometime staccato "pop-pop-pop" of the gun inside the house.

My husband was the second in the household to encounter the gunman. Having just arrived home from preaching services, Keith rushed out from the master bedroom to investigate the commotion. The gunman strode confidently toward the pastor with the gun point blank at his head. In the fight for his survival, Keith put his hands up in a defensive manner, backing up slowly, reasoning with the young man: "No, don't. You don't want to do this—don't shoot. Don't!" Without a word, the gunman fired four clear shots, each squarely hitting their mark.

One bullet from the small handgun made a perfect hole in the pastor's right front tooth without shattering it; another pierced his left temple, allowing brain matter to spill out onto the floor; two other bullets lodged deep inside his skull, with the most fatal embedded in his brainstem. Keith fell where he was shot, landing halfway into the sunken living room and halfway onto the perimeter-walkway. Gravely injured, his brain began to die; consciousness would now be measured in seconds. It can only be speculated that confusion, shock, and last thoughts of safety for his family flashed in rapid succession as life energy ebbed from him.

The sensorial shock of causing a violent deathblow to another human being did not deter the gunman. With cold resolve, the young man strode through the house, past the dining room and kitchen, toward Keith's elderly father. Without words, the young and the old faced off. Correctly assessing the danger, Keith's father stood protectively at the backdoor between his granddaughter and the intruder. With the energizing rush of stress hormones organizing his thoughts to survive, he reasoned in milliseconds that he could neither fight his attacker, nor successfully flee. In service of survival, the elder man instinctively froze at the wall, turning ever so slightly to protect vital organs when the inevitable shots struck. The intruder took aim and fired a single shot into grandfather's chest. The grandfather fell backwards out of the house and onto the screened-in porch, going in and out of consciousness.

Next to enter the terror of that day was Keith's mother, frail and crippled with age. Not comprehending the peril that had entered the house, she hobbled out of a back bedroom perturbed about noise she perceived to be firecrackers. "What's going on in here"? Her annoyed curiosity quickened into a correct assessment of danger. In flight for her survival, grandmother retreated back into the bedroom, locking the door behind her. With four hard kicks, the locked door flew off its hinges, leaving the grandmother and the armed intruder face to face. The young man simply approached his target and fired; the bullet lodging into her hip joint with searing pain. As the injured woman fell onto the bed, thoughts of survival strategies flashed through her mind; to avoid another shot, she struggled to control her terror and pain; she feigned death. Instinctually freezing to survive, the grandmother lay injured on the bed, eyes closed, motionless, without sound or breath until she could hear her attacker leave the room.

Having fired all the rounds in his handgun, the offender fled the home; but his violent rampage had just begun. By nightfall, the doomed young man had murdered two additional men in cold blood, seriously wounding three others in home invasions and drive-by shootings. Before dawn the next morning, he parked a car in front of an apartment complex, rigged with a bomb he had devised to maximize death and injury. Police readily identified the explosive device upon locating the vehicle, successfully disarming it before more harm could be done. By daylight, the police had surrounded the young man, witnessing his suicide by a single shot to the head as they approached him. He died instantly. His story was over; a terrible new phase of my life had just begun.

The Anatomy of Trauma after Homicide

A Living Laboratory

Though this story is intensely private, the experience has served as a kind of living laboratory of trauma and faith processes, compelling me as an academic, social work clinician, and Christian, to observe it publicly. Being a clinical researcher on a project studying lifespan trauma in HIV-infected women at the time of the incident, I was afforded a rare opportunity to know trauma phenomenology,

both clinically and academically, before I knew it within my own skin. The translation of trauma *knowledge* into trauma *experience* was jolting, and the parallel process of *observing* trauma in self and family was almost immediate. "Frankenstein's monster" had arisen from the safe order of the laboratory and was stomping about with a life of its own, demanding attention from the very scientist who studied the poor creature with cool, intellectual detachment. The science of trauma was immediately brought to life in me; I involuntarily became doubly informed.

This paper will explore an "anatomy of trauma" informed by faith with my own traumatic event as a backdrop for post-mortem reflection. An examination of what classical and current traumatologists suggest as a major thoroughfare towards trauma resolution will follow, with a final word about the "anatomy of faith" which has been informed by trauma.

Existential Crisis and the Psychological Shock of Violent Victimization

While most sudden death losses are traumatic, homicide facilitates its own brand of existential crisis, frequently spinning out long-term complicated bereavement (Freeman, 2005) and increased potential for chronic posttraumatic stress sequelae (Allen, 1995). Existential and practical questions gnaw at survivors and curious collaterals alike, borne from the shock of facing off with evil in the world, and coming away roundly beaten and scarred for life. "Diseases, accidents, and natural disasters do not raise the question of evil", said Janoff-Bulman, "something has to be intended, as is the case in violent victimizations" (1995, p. 79). So great is the psychological shock of losing a cherished one through cold, calculated violence that the road to recovery is paved with jagged rocks and broken glass

Impact of Severity and Context

Allen (1995) notes that perpetrated crime, committed with malevolent intent, deepens the severity of the trauma, significantly impacting the survivor's "dose response." "Dose response" refers to the degree of severity of the trauma event influencing the survivor's

ability to cope and recover from the aftermath of a traumatic event (Herman, 1997); the greater the severity of the event, the greater potential for post-trauma symptoms.

Contextual factors of the crime can influence coping capacity as well, and can include such crime-associated variables as person, place, or time. In my case, the shootings took place in my home (place) and at Christmas (time), both examples of how the milieu and time-context of the trauma event can potentiate a deeper emotional wound. As home was idealized in our family as a symbol of safe sanctuary, and Christmas a season of peace and joy, the contextual factors surrounding the stressor event unseated foundational beliefs of what it meant to be safe and secure. This was a dystonic experience of our assumptive worlds.

Herman (1997), in an eloquent treatise on trauma and recovery, provided distinctive descriptions of psychological derailment of children who are sexually molested by a trusted, known other. In a similar vein, when the murder of a loved one is perpetrated by an intimate other or acquaintance, survivors often blame self for not accurately assessing behavioral and environmental cues that warned of danger (Ross, 2003). This struggle can involve perseverative bouts of self-doubt and brutal recrimination (Wilson, 2000) for not rising to some superhuman level to prevent the crime ("If only I had done this or that; if only I had paid attention to the signs; if only I had been more perceptive...").

In our case, the gunman had made harassing hang-up calls over a period of one year prior to the shootings. No one in the family had a clue as to the identity of the caller, nor did any of us calculate the danger inherent therein. When homicide detectives asked me why I did not report these harassment calls to the police, I made a hard mental note that I had failed to perceive danger. Rounds of self-recrimination for not reading and acting on cues that may have prevented the disaster that had befallen my family increased the suffering, complicating the recovery processes.

Disturbance in Homeostasis and Schema

For those impacted by severe trauma, homeostasis, or one's steady state, is globally disrupted, often switching normal develop-

mental and psychological processes into states of hyper alertness and arousal (Rothschild, 2000). These states are aimed at survival, and are sustained long after a threat of harm has past. Not only have the circumstances of one's life been critically affected, one's schema, or worldview has been shattered (Janoff-Bulman, 1995). The totality of the experience overwhelms human coping capacities—mind, body, and spirit—the genesis of posttraumatic stress processes.

Psychophysiological Fallout

Everly (1995) referenced Selye's description of posttraumatic processes as "wear and tear" (p. 35) on the human organism. Research has established the evidence of neurobiological (Southwick, Krystal, Johnson, & Charney, 1995) and psychophysiological (Rothchild, 2000; Friedman, 1995) dysregulation to the human system under significant traumatic stress. Major disruptions in sleep, affect regulation, memory, concentration, and anxiety (van der Hart, Steele, & Ford, 2001), coupled with increased vigilance that constantly scans the environment for signs of threat (Miller, 2005), significantly impacts survivor's ability to perform at previous levels of basic functioning. Everyday enterprises such as school, work, grocery shopping, cleaning, paying bills, planning and cooking meals—all potentially become insurmountable tasks.

True to my own experience of life after Keith's death, mundane tasks were necessarily performed between alternating feelings of numbness and emotional fragility. For months after the murder, preparing dinner for the family felt overwhelmingly difficult to me. Sadness sapped the appetites from us all, yet we had to eat. I often resorted to taking the family out to a restaurant, but even there food would be picked at and someone in the family would start to cry or put their head down on the table in silence. Everyday tasks of eating, sleeping, going to school and work were the intolerable demands of going through the motions of life at the end of the world.

Posttraumatic Symptoms and Factors Affecting Coping

Trauma of great personal magnitude potentiates the ripping apart of a person's foundational worldview, the meaning of life, one's place in the world, and one's sense of safety in it (Everly, 1995). The

shock and horror of the murder act is played and replayed in the minds of surviving loved ones. This most unwelcome re-run enters unbidden, occupying center stage on the screen of the mind (Henry-Jenkins, 1997; Ross, 2003; Rothchild, 2000). Emotional numbing, sleep disturbances, flashbacks, along with a sense of foreshortened future for self and surviving loved ones, persist for years (Allen, 1995; Herman, 1997; Wright, 2003). Lerner (2004) described these highly sensory-charged stimuli as the "imprint of horror" (p. 3), overwhelming the survivor's coping capabilities and facilitating a course to complicated posttraumatic stress processes.

Henry-Jenkins (1997) coined the term "homicide stress syndrome" (p. 39) to describe long-term biopsychosocial consequences to those who have experienced the loss of significant others by human-orchestrated violence. The family, as primary support group, can experience global destabilization, with the family unit seeming to come apart at the seams from the unrelenting weight of the sudden, violent loss.

The circumstances surrounding the murder can become taboo, subject matter too painful to mention in many families suffering from unresolved traumatic grief. The murdered family member becomes the unacknowledged "ghost" at every meal and family gathering, leading to a sense of dread when the family comes together. Family events and traditional holidays become too painful; avoidance becomes the cure. This drift away from established family customs and celebrations is evidence that the "face" of the affected family has changed; a pervasive sense of irreparable damage and irreplaceable loss. The integrity of the family system begins to break under the weight of traumatic grief, straining, and sometimes breaking apart, the strongest of familial relationships (Ross, 2003).

Other support systems, initially present for the family, pull away as the slog of complicated bereavement sets in. The exhortation by outside others to "get on with life" within weeks of the incident is evidence that the supportive role for some has become more than they can bear. As secondary or vicarious trauma can be spun-off for those who become supportively involved in the traumatic grief of others, even the closest of friends may begin to move out of the circle of care for self-protection (Henry-Jenkins, 1997). The evaporation

of support systems greatly compounds sorrow, creating a vortex of isolation within and without the immediate family, and incapacitating coping and adaptation capabilities (Ross, 2003).

I felt a pervasive sense of isolation away from friends, family, and church after Keith's funeral. My extended family members were supportive, but lived in other states. Our church family was, as a whole, in a state of shock and operating in crisis mode. They could not be faulted for failing to reach out to us in solace or practical help. Other pastors did not call or come by. After weeks went by, the isolation was palpable, with the children asking me why no one had come to check on us. I did not have an answer to their question, but wondered if the fear and stigma associated with murder had not tainted us as a survivor-family.

About a year after the crime, I was invited to address a fellowship of Baptist pastors, all of whom were Keith's colleagues in Miami. I learned that most of the pastors assumed others were reaching out to us. Some voiced to the group that they did not know what to say or do. It seemed to me that the murder of one of their own was uncharted waters, freezing them from acting out familiar pastoral roles. I understood. The waters were indeed uncharted, dark and deep.

Questing Behavior, a Hologram of Hope

Many who have lost loved ones to violent crime quest after every detail of the event, as if knowing the *what*, the *when*, and the *how* could put to rest the overarching *why* of it all - the nonsensical injustice of it all. The first words I uttered upon approaching the yellow crime scene tape cordoning off my house, 20 minutes past the shootings, was more like a primal scream: "WHAT HAPPENED?!" This questing behavior occurs at many levels in the aftermath of violent crime; it is, in fact, the drive to control what is no longer possible to control.

This was certainly my experience; I collaborated with family members of other murder victims to gather details of the crime and the perpetrator of it. With passionate resolve we interviewed homicide detectives, defense and state's attorneys, as well as judges who had been involved in various legal actions concerning the gunman. I called the perpetrator's probation officer for his perspective, and

face-to-face, conducted a clinical post-mortem of the crime and the criminal with the forensic psychiatrist and psychologist who had evaluated him six months prior to the shooting spree. Visiting the morgue, poring over autopsy reports, talking with anyone who had a shred of information about the event drove us, as victims-cuminvestigators, to physical and emotional exhaustion.

By the end of three years, we had for our efforts a fat binder of forensic reports and criminal profiles, all in service of trying to make sense of what could not be made sensible. Attempting to hold accountable persons or institutions is, at some level, a stab at reestablishing a floor of justice and fairness in the world; a frustrating hologram of hope to call back that which has been lost.

Pathways to Recovery and Healing

Classical and current traumatologists note that survivors affected by severe traumatic events move through fluid developmental phases toward some level of recovery. Pierre Janet, a late 19th century psychologist hailed for his groundbreaking work in trauma theory and therapy methodologies, asserted that posttraumatic symptomatology was caused in part by an inability to integrate traumatic memories (van der Hart, Brown, & van der Kolk, 1995). This cognitive dissonance is thought to be resolved through reestablishment of "an integrated set of basic assumptions or schemas" (Janoff-Bulman, 1995, p. 79). A major component of recovery, then, may involve the coalescing of traumatic memories into the survivor's worldview. Rothchild (2000) apparently concurs, stressing the importance of comprehending the facts of the traumatic event, the resultant impact on the body and mind, and the personal meaning the event holds for the survivor.

In my family's case, the initial shock was experienced and survived; the raw reality of posttraumatic stress disorder set in; the pieces of our lives were gathered up and vigilantly protected, and the facts were known, as much as they would ever be. Integration of the traumatic loss, along with extracting meaning out of the event, became signage on the road to healing and recovery; an arduous journey indeed.

The Anatomy of Faith in Trauma

Look Back; Look Around; Look Up

Smith (2004) attributed to Ralph Waldo Emerson the proverb "sorrow looks back; worry looks around; faith looks up" (p.11). This rings somewhat true with my lived experience of traumatic loss, but it is too clean a construction. Wilson (2000) quotes Doerfleur's declaration on recovery from criminal homicide that "healing is sloppy; it's really sloppy" (p.5). For me, traumatic grief and the road to healing has certainly been "sloppy", with a life of its own, looping back on itself, fluid and entangled with few predictabilities. C. S. Lewis (1961) pondered the nature of grief after the loss of his wife to cancer, saying grief is "...like a long valley, a winding valley where any bend may reveal a totally new landscape" (p. 69); he describes sorrow as more of a *process* than a *state*.

Sorrow looks back. At some point past the brain-numbing shock, sopping sorrow set in like an unrelenting storm over brickhard desert. I could not stop crying; I was exhausted with crying; I vowed to stop crying which prompted a cloudburst of howling tears. My eyes ached and my vision was blurry due to swollen tissues from crying. Work was a necessity, so I cried in the privacy of my car on the way to work and on the way back home, a good hour and a half each way in Miami rush hour traffic; it was a titrated grief that was necessarily functional. I struggled to keep my composure in the midst of everyday life, keeping at bay the threat of a public outburst of crying, sometimes failing for all my resolve. When my face, splotched and swollen from a recent crying jag, gave me away, compassionate queries asking if I was "alright" threatened to burst the dam of tears I struggled to control. I utilized humor when I could, a familiar coping defense for me, with laughter relieving the stress in more socially acceptable ways. (I once threatened to market a "Saltlick for the Bereaved" to compensate for the sodium loss brought on by excessive crying). At other times, I just shared the haunting hurt of it all, breaking down in front of some concerned other who was willing to witness my pain. In sorrow, I did "look back," but I also grieved for that which what was lost in the dream of the future.

Worry looks around. In gut-twisting worry, I also "looked

around." I was anxious over a multitude of practical matters concerning our financial security ("Will I be able to support this family alone?"); physical safety ("Are there others out there who wish us harm?"); and psychological stability ("Will my children be able to bear this loss with their mental health intact?")

A tormenting anxiety that another immediate family member would suddenly die was experienced by members of the family, creating a kind of hyper-accountability about each other's health and whereabouts. I was late to arrive home from work a few weeks after the shootings. The children heard a siren on the busy thoroughfare not far from the house, and imagined their mother entangled and dying in a violent automobile crash. The three strategized together to find me—all going different directions in a desperate search. By the time I arrived safely home, tired from the traffic jam that delayed me, the children were relieved, then infuriated, then tearful. The next day, the family budget was reorganized to include wireless phones for each member of the family; a luxury we could not afford prior to the traumatic loss had now become a necessity.

To mitigate the anxiety, I soaked up the Book of Psalms, practicing as I could encouraging mandates to "cast your burden upon the Lord, and He will sustain you" (Psalm 55:22, NAS), and to "be strong and let your heart take courage" (Psalms 27:14). I never felt the judgment of God for trembling under the weight of traumatic stress, just His abiding presence to hold onto me until the worst of the terrible storm had passed. C. S. Lewis complained: "No one ever told me that grief felt so like fear. I am not afraid, but the sensation is like being afraid." (1961, p. 1). Lewis also compared the feeling of grief to the feeling one has under the spell of suspense; his observations are harmonious with my lived experience of traumatic bereavement.

Faith looks up. My primary coping mechanism throughout this terrible ordeal was, and continues to be, my relationship with God, a faith-bound relationship that has long been nourished and cherished. My fixed trust in the goodness and faithfulness of God provided the central, organizing factor that has given meaning and direction to my life. In writing about spirituality in posttraumatic therapy, Ochberg (1995) speculated that "a victim's sense of spirit may be acutely dimmed for a period after victimization..." (p. 253).

After a time of healing, however, spiritual growth may exceed those who have not encountered their own mortality so graphically. Herman (1997) noted how post-mortem changes to the survivor's worldview can be shaped out of the realization of the fragility and temporariness of life. "Her view of life may be tragic, but for that very reason she has learned to cherish laughter. She has a clear sense of what is important and what is not. Having encountered evil, she knows how to cling to that which is good" (p. 213). This statement resonates strongly with my post-mortem worldview.

My personal account of trauma tracks the acute presence of God at work before, during, and after the critical incident; the meaning of this has been central to my coping, healing, and recovery process. Many of the experiences I attribute directly to God's intervention sometimes overwhelm me with gratitude, enhancing my spiritual growth and deepening my relationship with God.

Movements of the family that Sunday were most unusual, causing three immediate family members to not be present at the time the gunman entered our home. My youngest child, 15 years old at the time, was scheduled to go on a camping trip with some college students who were friends of the family. The group had planned to depart on Monday morning, but decided at the last minute to leave for the trip early Sunday morning instead. This sudden change of plans secured my son's safety; he was three hours away from home at the time of the shootings.

My second child, 17 years old, had asked permission to attend another church with a group of friends who had planned a picnic for the afternoon. She was not due to be home until three in the afternoon, a plan that saved her life. I was out of the house at the time of the incident as well. After arriving home from church, I spontaneously decided to rush to the market for a few items for lunch. My habit was to have Sunday lunch ready and warm in the oven for quick after-church preparation. Breaking this pattern removed me from the line of fire that day. I was gone for 20 minutes, unknowingly passing the gunman on the road on his way to begin his terrible rampage at our house.

The peculiarity that the family was not all together at home on that day at that time provides an important part of the meaning-making that

has proved crucial to my recovery—a strong belief that God directly intervened to preserve our lives. Many other protecting and preparing factors in and around the tragedy of that day, including the survival of my eldest daughter and the elder grandparents, cause me to sustain a sense of wonder and awe at the tender mercies of God, so vibrantly active in the details of our lives.

That my husband of 22 years was murdered in the terror of that day has never shaken my faith in the goodness and faithfulness of God. In yet another act of meaning-making and integration of the event into my post-mortem schema, I have noted that every bullet fired that day was a bullet that was not be used to harm my daughter. Her life was preserved. I know my husband would have willingly given his life for any member of the family; that was the character of the man.

Strangely Beautiful

Sir Winston Churchill motivated those going through the strain of World War II with this 'bootstrap' directive: "If you are going through hell, keep going" (Quote DB, 2005). I am tempted to adopt this quip as descriptive of my own experience, but that would not be exactly true. My experience of traumatic grief has been more like a healing walk through the Valley of the Shadow of Death, with the Shepherd, faithful and true, surrounding my being and sustaining me. I have had to "keep going," and in a very real sense it has taken all of my resolve and grit to put one foot in front of the other. It has been, however, the powerful presence of the Great Spirit of God by my side who has sustained me, the Mighty Comforter, a Strong Tower, the Protecting Shepherd who has attended all my ways, who fellowshipped with me in the midst of intense horror and grief that I felt, at times, to be unbearable.

Deeply mysterious, I have experienced my long walk in the Valley of the Shadow as strangely beautiful. I can hardly explain the meaning of this, knowing only that it has something to do with the tender mercies of our majestic God. It may be best explained by the movement of God's Spirit in the human soul under extreme stress inherent in this verse: "The Lord is near to the brokenhearted, and saves those who are crushed in spirit" (Psalms 34:18, NAS).

Fragile Threads

Viktor Frankl, the Viennese psychiatrist who survived imprisonment at a Nazi concentration camp, developed logotherapy for victims of severe life trauma based on "making sense out of senseless suffering" (Frankl, 1984, p. 9). In a commentary on Frankl's therapeutic approach, Allport explained that Frankl encouraged trauma survivors "to weave these slender threads of a broken life into a firm pattern of meaning and responsibility" (Frankl, 1984, p. 7). This paper, a post-mortem analysis of my own recovery and healing process from trauma, evidences a pattern-in-progress; fragile threads weaving together the shattered pieces, making sense from the unthinkable.

Surprised by Grace

My lived experience of traumatic loss has been indeed informed and shaped by faith. I have seen the fruit borne of Keith's death in the lives of so many who were touched by the testimony of his life; this fruit-bearing, according to Nouwen (1994), the by-product of death by all those who lived by the Spirit of God. My life has borne the fruit of that day, too, being transformed by qualities that underscore a deep understanding of the fleeting, fragile nature of our earth-bound existence. This melancholic enlightenment has put before me a choice to embrace life or death; I have chosen life. I have chosen to cherish each moment and treasure each person in my life. I have chosen to love again. After soul-tearing loss, I have been surprised by God's grace which has empowered me, not just to *survive*, but to *thrive* in gratitude; a joyful epiphany collected along the way. �

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Disability Advocacy Among Religious Organizations: Histories and Reflections

Herzog, A. A. (Ed.). (2006). Binghamton, NY: The Haworth Pastoral Press.

As the disability rights movement continues to evolve, Herzog reminds us that religious organizations have been part of the struggle for social justice. In his 233-page indexed text, twelve contributors, including editor Herzog, provide brief histories and commentaries on disability services and advocacy within and among various religious organizations from 1950 to the present.

Many of the contributors played key roles in the organizations they describe, such as Sam Kabue, Coordinator for the Ecumenical Disability Advocacy Network of the World Council of Churches, and Janice Benton, Executive Director of the National Catholic Partnership on Disability. Each chapter focuses attention on a different faith-based organization, describing the early history and evolution of disability work, collaborative efforts, accomplishments, and future directions. Organizations represented include, among others, The National Council of Churches, the National Apostolate for Inclusion Ministry, The Christian Council on Persons with Disabilities, Bethesda Lutheran Homes, and the Religion and Spirituality Division of the American Association on Mental Retardation. The list is predominantly Christian. Thus, Herzog falls short of providing a view of disability advocacy across diverse religious organizations.

Nevertheless, emerging from these selected organizational histories are some benchmarks of disability rights work in mid-twentieth century America. The reader begins to see that as faith-based advocates worked for accessibility and inclusion for persons with disabilities they faced resistance from religious institutions as well as society. Morstad (pp. 127-140) describes the work of Bethesda Lutheran Homes in providing residential services and humane treatment for persons with developmental disabilities. As deinstitutionalization increased community living options, Lampe (pp. 55-74) shows how disability advocates in the National Apostolate for Inclusion Ministry

REVIEWS 105

worked to make Catholic worship and education architecturally and intellectually accessible to persons with disabilities. Herzog (pp. 207-226) traces the history of the Religion and Disability Program of the National Organization on Disability. He describes efforts to promote full inclusion of persons with disabilities in leadership roles in seminaries and other religious organizations. Each chapter reveals the unique and varied responses of disability advocates as they challenged religious institutional policies and practices.

Although the text focuses attention on disability advocacy within Christian organizations, the important work of interfaith (Religion and Spirituality Division of the American Association on Mental Retardation) and international (World Council of Churches) disability advocacy are discussed. For example, Kabue describes the work of the World Council of Churches' Ecumenical Disability Advocates Network that has documented the theological mandate to view disability as "part of the human diversity and plurality of God's creation" (p. 8). Herzog (pp. 207-226) shows how the Religion and Disability Program of the National Organization on Disability was developed as a secular organization available to religious leaders and people of all faiths, including Christians, Jews, Muslims, and Buddhists. Thus, these chapters show recent collaborations between secular and religious leaders.

Each chapter describes the passion and commitment of a particular organization's leaders to alleviate suffering or combat disability discrimination. However, as each chapter unfolds, the reader also observes widely differing approaches to how Christians deal with the problems experienced by people with disabilities. For example, Genzink's chapter on Friendship Ministries (pp. 163-170) reports on the international movement to show congregations how to include people with cognitive impairments in worship and Bible study. In this case, disability advocacy is seen as a response to the Biblical mandate to serve the oppressed and forgotten.

In contrast, Herzog (pp. 75-92) describes how organizations within American Protestantism evolved from advocacy for accessible worship to participation in the battle for equal rights and self-determination for persons with disabilities. This chapter shows how the work of disability advocates has evolved: first, providing humane

service; then, making worship accessible; and finally joining the fight for equal rights. Equal rights advocates value social justice over charity, believing that when social structures, such as religious organizations, work *for* people with disabilities instead of *with* people with disabilities they are part of the oppression.

Because this text compiles what has been done by disability advocates within religious organizations, it is recommended as a wake up call for Christians in social work to consider what has not yet been done. Specifically, where disability advocacy in religious organizations is not led by people with disabilities, it has not kept pace with disability rights. The text is further recommended as an opportunity for social workers and religious leaders to compare advocacy work across denominations and to consider more ways to collaborate. �

Reviewed by Martha Raske, Ph.D., an associate professor with the Social Work Department at the University of Southern Indiana and co-editor of Ending Disability Discrimination: Strategies for Social Workers. Phone: (812) 465-1147. Email: mraske@usi.edu.

American Social Welfare Policy: A Pluralist Approach (5th ed.) Karger, H. J., & Stoesz, D. (2006). Boston, MA: Allyn & Bacon.

This social welfare policy textbook is one of the most widely used in social welfare policy courses. Several editions have preceded this one. The book is divided into four parts. Part 1 has five chapters, one, on social policy and the welfare state, a second on research and policy analysis, a third one on religion, a fourth on discrimination, and a fifth on poverty. Part Two has two chapters, one on the voluntary sector, and the other on privatization and human service corporations. Part Three has ten chapters, on the making of governmental policy, tax policy and income distribution, social insurance and public assistance programs, health, mental health and substance abuse, criminal justice, child welfare, housing and food and rural policies. Finally, Part Four has one chapter on international and comparative social welfare policy.

REVIEWS 107

The authors are two of the more creative social policy scholars writing today. Howard Jacob Karger is a professor at the University of Houston, Graduate School of Social Work. David Stoesz is a professor at Virginia Commonwealth University. They created Policy America, a nonprofit organization that is dedicated to communicating information on innovations in social policy. They have written extensively.

A new addition to this 5th edition is Chapter 3, "Religion and Social Welfare Policy" (written by Howard Jacob Karger and Peter A. Kindle). Rare indeed is a social welfare policy book with an entire chapter on this subject. Their unparalleled coverage of the private sector continues unabated with this edition. I know of no social welfare policy textbook that even begins to approach the level of coverage of this important topic that this book provides.

This is a comprehensive book, tuned into current directions in the field. The Spotlight boxes (see p. xxi) are helpful. The coverage of the abortion issue is much more sensitively handled than in past editions. It is a well-written social welfare policy book (this is not always the case with social welfare policy textbooks!).

There are some areas needing improvement for the next edition. Most social welfare policy books do not really weave in the comparative and international social welfare dimension throughout the book. Chapter 18 is devoted to it, but most chapters in the book do not really include much content in this area. An example would be Chapter 14 on mental health and substance abuse policy. What can we learn from mental health and substance abuse policies in Canada, the U.K. and other countries? At several places in the book, data needs updating.

Their tackling the subject of religion and social welfare policy is admirable. But Judaism and Islam, two historical, seminal world religions, are ignored in the chapter. How has Maimonides impacted Jewish social thought (and all of social thought) on social welfare? What about Islamic conceptions of social welfare? Catholicism, another historical world religion, receives little coverage (the papal social encyclicals from the likes of Leo XIII, John Paul II and others, are not mentioned). A deeper appreciation of Protestant contributions to social thought and social welfare (the work of Alan Keith-

Lucas and Ronald J. Sider come to mind, to name only two) would be helpful. Despite some areas needing improvement, it can certainly be said that this is one of the best social welfare policy textbooks on the market today. It is possibly geared more toward the graduate level than the undergraduate level. The authors have succeeded in writing a comprehensive and timely social welfare policy textbook. �

Reviewed by Thomas D. Watts, School of Social Work, University of Texas at Arlington, UTA Box 19129, 211 South Cooper St., Arlington, TX 76019-0129; Telephone: 817-272-5216; E-mail: tdwatts@uta.edu.

PUBLICATIONS AVAILABLE FROM NACSW

CHRISTIANITY AND SOCIAL WORK: READINGS ON THE INTEGRATION OF CHRISTIAN FAITH & SOCIAL WORK PRACTICE (SECOND EDITION) Beryl Hugen & T. Laine Scales (Editors). (2002). Botsford, CT: NACSW \$28.95 U.S., \$43.35 Cdn. (\$23.15 or \$34.75 for NACSW members or orders of 10 or more copies).

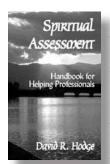


This extensively-revised second edition of *Christianity and Social Work* is written for social workers - from students, whose motivations to enter the profession are informed by their Christian faith, to seasoned professionals - whose desire is to develop distinctively Christian approaches to helping. The book is organized so that it can be used as a textbook or supplemental text in a social work class, or as a training or reference materials for practitio-

ners. Readings address a breadth of curriculum areas such as social welfare history, human behavior and the social environment, social policy, and practice at micro, mezzo, and macro levels.

SPIRITUAL ASSESSMENT: HELPING HANDBOOK FOR HELPING PROFESSIONALS

David Hodge. (2003). Botsford CT: NACSW \$18.00 U.S., \$27.10 Canadian. (\$14.50 or \$21.85 for NACSW members or orders of 10 or more).

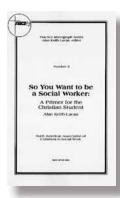


A growing consensus exists among helping professionals, accrediting organizations and clients regarding the importance of spiritual assessment. David Hodge's Spiritual Assessment: Helping Handbook for Helping Professionals, describes five complementary spiritual assessment instruments, along with an analysis of their strengths and limitations. The aim of this book is to familiarize readers with a repertoire of spiritual assess-

ment tools to enable practitioners to select the most appropriate assessment instrument in given client/practitioner settings. By developing an assessment "toolbox" containing a variety of spiritual assessment tools, practitioners will become better equipped to provide services that address the individual needs of each of their clients.

SO YOU WANT TO BE A SOCIAL WORKER: A PRIMER FOR THE CHRISTIAN STUDENT

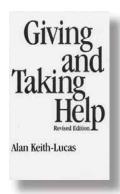
Alan Keith-Lucas. (1985). Botsford, CT: NACSW. Social Work Practice Monograph Series. \$10.00 U.S., \$15.05 Canadian. (\$8.00 or \$12.05 Cdn for NACSW members or orders of 10 or more).



So You Want to Be a Social Worker has proven itself to be an invaluable resource for both students and practitioners who are concerned about the responsible integration of their Christian faith and competent, ethical professional practice. It is a thoughtful, clear, and brief distillation of practice wisdom and responsible guidelines regarding perennial questions that arise, such as the nature of our roles, our ethical and spiritual responsibilities, the fallacy of "imposition of values," the problem of sin, and the need for both courage and humility.

GIVING AND TAKING HELP (REVISED EDITION)

Alan Keith-Lucas. (1994). Botsford CT: North American Association of Christians in Social Work. \$18.00 U.S., \$27.10 Canadian. (\$14.50 or \$21.85 for NACSW members or orders of 10 or more).



Alan Keith-Lucas' Giving and Taking Help, first published in 1972, has become a classic in the social work literature on the helping relationship. Giving and taking help is a uniquely clear, straightforward, sensible, and wise examination of what is involved in the helping process—the giving and taking of help. It reflects on perennial issues and themes yet is grounded in highly practice-based and pragmatic realities. It respects both the potential and limitations of social science in understanding the

nature of persons and the helping process. It does not shy away from confronting issues of values, ethics, and world views. It is at the same time profoundly personal yet reaching the theoretical and generalizable. It has a point of view.

PUBLICATIONS 111

SUBSTANCE ABUSE AND SPIRITUALITY: AN ANNOTATED, TOPICAL BIBLIOGRAPHY

Jason Pittman. (2003). Botsford, CT: NACSW. Available from NACSW only as an e-publication for \$15.00 U.S., \$22.50 Canadian. Available in regular hard copy version from Booksurge at www.Booksurge.com or 866-308-6235.

Jason Pittman's Substance Abuse and Spirituality: An Annotated Topical Bibliograply provides access to a broad range of resources related to spirituality and addictions, treatment, and the ethical integration of faith and social work practice. The thoughtful annotations included in this work are based on a solid knowledge of the literature, the problem of addiction, and the spiritual and treatment issues involved.

Substance Abuse and Spirituality is carefully organized as well as exhaustively and meticulously researched, and is a valuable resource for social workers and related professionals interested in or working with addictions issues.

CHURCH SOCIAL WORK: HELPING THE WHOLE PERSON IN THE CONTEXT OF THE CHURCH

Diana R. Garland (Editor). (1992). Botsford, CT: North American Association of Christians in Social Work. \$18.00 U.S., \$25.35 Canadian.

CHARITABLE CHOICE: THE CHALLENGE AND OPPORTUNITY FOR FAITH-BASED COMMUNITY SERVICE

David A. Sherwood (Editor). (2000). Botsford, CT: NACSW \$12.00 U.S., \$18.00 Cdn. (\$9.60 or \$14.50 for NACSW members or orders of 10 or more)

Charitable Choice is primarily for use as a text in social work and social welfare classes to familiarize students with both the challenges and opportunities presented by "Charitable Choice," a key provision embedded in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. It raises significant issues and questions regarding the implementation of Charitable Choice, and documents initial efforts by states to implement the law, pro-

vides examples of church involvement in community social ministry, looks at characteristics and attitudes of staff at faith-based substance abuse treatment programs, and explores the experiences of volunteer mentors in social welfare programs.

HEARTS STRANGELY WARMED: REFLECTIONS ON BIBLICAL PASSAGES RELEVANT TO SOCIAL WORK

Lawrence E. Ressler (Editor). (1994). Botsford, CT: North American Association of Christians in Social Work. \$8.00 U.S., \$12.05 Canadian. (\$6.50 or \$9.80 for NACSW members or orders of 10 or more).

Hearts Strangely Warmed: Reflections on Biblical Passages Relevant to Social Work is a collection of devotional readings or reflective essays on 42 scriptures pertinent to social work. The passages demonstrate the ways the Bible can be a source of hope, inspiration, and conviction to social workers.

CALLED TO COUNSEL: A COUNSELING SKILLS HANDBOOK

John R. Cheydleur. (1999). Wheaton, IL: Tyndale House. Order through NACSW for \$24.95 U.S., \$38.51, Cdn. (\$19.99 or \$30.85 for NACSW members or orders of 10 or more). Hardcover.

JUST GENEROSITY: A New Vision for Overcoming Poverty in America.

Ronald J. Sider. (1999). Grand Rapids: Baker Book House. Order through NACSW for \$11.99 U.S., \$18.05 Cdn. (\$9.60 or \$14.45 Cdn for NACSW members or orders of 10 or more).

THE POOR YOU HAVE WITH YOU ALWAYS: CONCEPTS OF AID TO THE POOR IN THE WESTERN WORLD FROM BIBLICAL TIMES TO THE PRESENT Alan Keith-Lucas. (1989). Botsford, CT: North American Association of Christians in Social Work. \$18.00 U.S., \$25.35 Canadian.

SELF-UNDERSTANDING THROUGH GUIDED AUTOBIOGRAPHYCraig Seaton (1999) Craig Seaton, Publisher Order through NACSW for \$10.00, \$15.05 Cdn

PUBLICATIONS 113

THE WELFARE OF MY NEIGHBOR WITH AMY SHERMAN'S WORKBOOK: APPLYING THE PRINCIPLES FOUND IN THE WELFARE OF MY NEIGHBOR Deanna Carlson (1999) Family Research Council Order through NACSW for \$15.00, \$22.60 Cdn

ENCOUNTERS WITH CHILDREN: STORIES THAT HELP US UNDERSTAND AND HELP THEM

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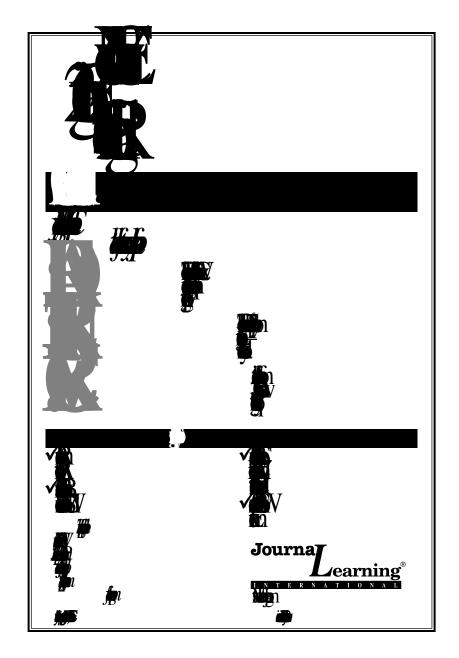
Cathy Suttor and Howard Green. (1985). Botsford, CT: North American Association of Christians in Social Work. Social Work Practice Monograph Series. \$10.00 U.S., \$15.05 Cdn.

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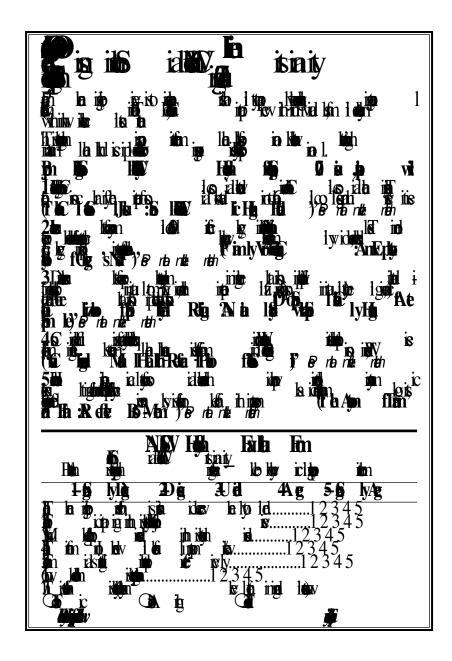
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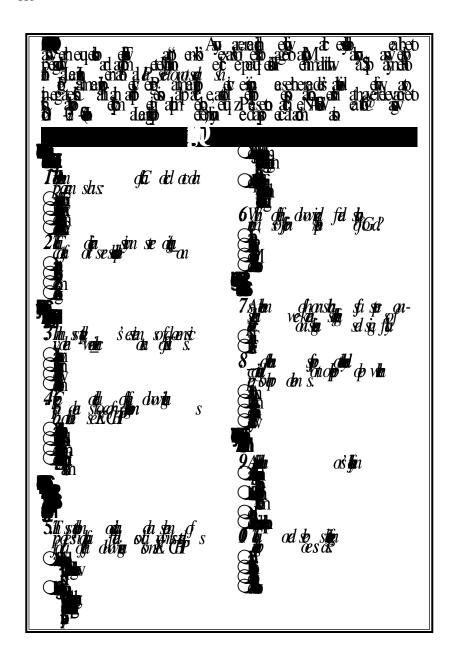
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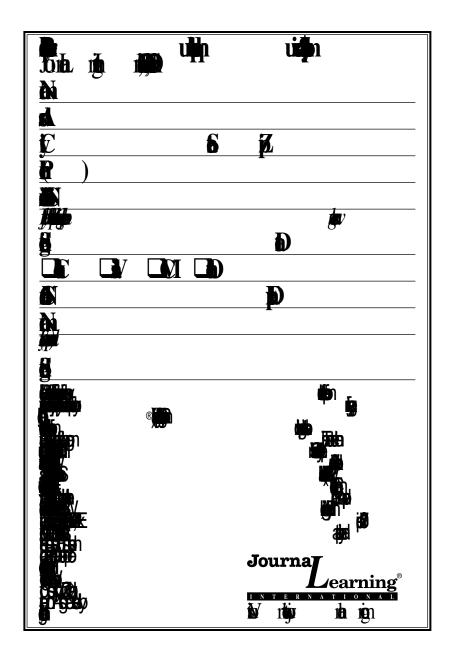


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HOME STUDY 117



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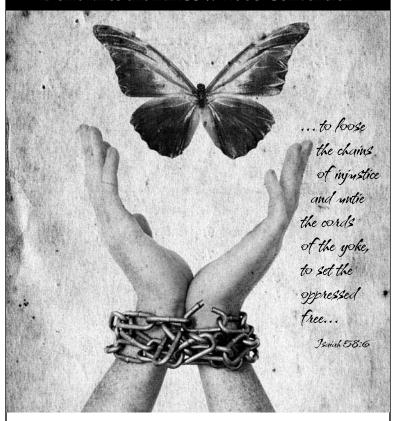
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