

2009

What American Psychological Association Leaders Have to Say About "Psychology of Religion and Spirituality"

Mark R. McMinn

George Fox University, mmcminn@georgefox.edu

William L. Hathaway

Scott Woods

George Fox University

Kimberly N. Snow

George Fox University

Follow this and additional works at: https://digitalcommons.georgefox.edu/gscp_fac



Part of the [Psychology Commons](#)

Recommended Citation

McMinn, Mark R.; Hathaway, William L.; Woods, Scott; and Snow, Kimberly N., "What American Psychological Association Leaders Have to Say About "Psychology of Religion and Spirituality"" (2009). *Faculty Publications - Grad School of Clinical Psychology*. 169.
https://digitalcommons.georgefox.edu/gscp_fac/169

This Article is brought to you for free and open access by the Graduate School of Clinical Psychology at Digital Commons @ George Fox University. It has been accepted for inclusion in Faculty Publications - Grad School of Clinical Psychology by an authorized administrator of Digital Commons @ George Fox University. For more information, please contact arolfe@georgefox.edu.

What American Psychological Association Leaders Have to Say About *Psychology of Religion and Spirituality*

Mark R. McMinn
George Fox University

William L. Hathaway
Regent University

Scott W. Woods and Kimberly N. Snow
George Fox University

What do American Psychological Association (APA) leaders have to say about the new journal *Psychology of Religion and Spirituality*? A survey was sent to 204 current APA council representatives and divisional residents, yielding 63 completed questionnaires (31% response rate). Respondents generally affirmed the importance of religion and spirituality as topics of inquiry in psychology. Although not highly religious themselves, respondents recognize religion and spirituality as important aspects of human diversity. In considering the new journal, current APA leaders who responded to the survey are particularly interested in articles relating religion and spirituality to health and coping and articles considering cross-cultural and interfaith issues.

Keywords: religion, spirituality, psychology of religion, human diversity

In years past, psychologists have engaged in vigorous debates about the proper place of religion and spirituality in the science and profession of psychology (e.g., Bergin, 1980; Ellis, 1980; Walls, 1980), but today's psychology is becoming more interested in how religion and spirituality affect human experience (e.g., Ellis, 2000; Miller & Delaney, 2005; Pargament, 2007; Richards & Bergin, 2005; Shafranske, 1996; Sperry & Shafranske, 2005). In part, this change has occurred because empirical evidence has demonstrated some positive relationships between religious beliefs and health (Koenig, McCullough, & Larson, 2001; Miller & Thoresen, 2003; Powell, Shahabi, & Thoresen, 2003; Seeman, Dubin, & Seeman, 2003), and because religious and spiritual values have been recognized as a form of human diversity (American Psychological Association,

2002). Many psychologists now see a need to understand something of the religious values that influence many of the recipients of psychologists' research, teaching, and professional services.

As evidence of greater interest in religion and spirituality, the American Psychological Association (APA) is now publishing *Psychology of Religion and Spirituality (PRS)* in collaboration with Division 36 (Psychology of Religion). One of us (McMinn) was serving as president of Division 36 when the APA Publications Office first approached the division about the possibility of a new journal pertaining to religion and spirituality, and another (Hathaway) will be serving as president of the division when the first issue appears in print. As such, we have been privy to the conversations and planning behind the journal. It should be noted that between these two presidencies were the presidential terms of Ralph Piedmont and Lisa Miller, both highly involved in bringing *PRS* to fruition. The vision for *PRS* began with conversations between Piedmont and the APA Publications Office, with Piedmont noting that publications by APA Books had enjoyed good visibility and sales among a broad base of APA members. The APA Publications Office then engaged in conversation with the Division 36 Executive Com-

Mark R. McMinn, Scott W. Woods, and Kimberly N. Snow, Graduate Department of Clinical Psychology, George Fox University; William L. Hathaway, Doctoral Program in Clinical Psychology, Regent University.

Correspondence concerning this article should be addressed to Mark R. McMinn, Graduate Department of Clinical Psychology, George Fox University, 414 North Meridian Street V104, Newberg, OR 97132. E-mail: mmcminn@georgefox.edu

mittee and conducted market research that included surveying Division 36 members. The Division 36 Executive Committee endorsed the APA Publications Office's proposal for a new journal, which was in turn considered and ultimately approved by the necessary boards and committees of the APA.

The story of how *PRS* came about implies two important functions for the journal—one pertaining to psychology of religion scholars, and a second pertaining to psychologists in general. Regarding the first function, *PRS* can promote scholarly exchange among those who study in the area. *PRS* is the first APA journal devoted exclusively to religious and spiritual issues in psychology, and so its publication holds the potential of enhancing and promoting the work being done in the psychology of religion and spirituality. But the publication of *PRS* also holds potential for a broader audience in relation to the APA as a whole. As psychologists continue to recognize religion and spirituality as aspects of human diversity, even those who have little interest or background in the psychology of religion need to develop basic understanding in these areas. This second function of *PRS* moves the journal well beyond the provincial task of serving divisional scholarship and into the broader context of serving the APA as a whole.

These two potential functions of *PRS* may lead to conflicting publishing priorities at times. Some *PRS* articles may address important issues for those involved in the scientific study of religion but be of relatively little general importance to those who read the journal to better understand the spiritual dimensions of human diversity. Conversely, some articles may serve general APA purposes well but not be as helpful for those who are experts in the psychology of religion and spirituality. The editorial leadership of *PRS* appropriately comprises those who are experts in the psychology of religion and spirituality—most of whom are also Division 36 members—making it important to be intentional about hearing from psychologists who have more general interests in religion and spirituality but are not experts in the area. The present study was an effort to learn from APA leaders about what sort of *PRS* articles would be helpful for the larger needs of the association.

An early draft of the editorial policy statement for *PRS* encouraged submissions pertain-

ing to (a) scale development, (b) developmental processes of spiritual maturation, (c) spiritual and religious coping, (d) spiritual and religious interventions, (e) ethical use of religious constructs in psychotherapy, (f) development of professional competencies in religious and spiritual issues, (g) meta-analyses of religious and spiritual constructs, (h) the causal nature of spiritual and religious constructs, (i) neuropsychological bases of spirituality, and (j) interfaith comparisons of health and social functioning. All of these types of articles are likely to be useful to those who study the psychology of religion and spirituality, but which will best serve the larger goals of APA with its burgeoning interest in religion and spirituality? The purpose of the present study was to learn from APA leaders what direction might be most helpful for *PRS*.

Method

Participants and Procedure

In late October 2007, we contacted 213 APA leaders by e-mail. Of these, 9 were undeliverable, leaving a potential item pool of 204 respondents. Those we contacted were either a current member of the APA Council of Representatives, a current president of an APA division, or both. A total of 76 potential respondents (37%) visited the Web-hosted survey site, and 63 completed the online questionnaire, resulting in a response rate of 31%. The low response rate raises the possibility of response bias, where those who did not complete the questionnaire are systematically different from those who did complete the questionnaire. This problem is not limited to this particular study; others have reported similar problems when surveying APA members and other mental health professionals regarding religion and spirituality. For example, Hathaway, Scott, and Garver (2004) received a 33% response rate when mailing 1,000 questionnaires to APA members who offer professional services. Russell and Yarhouse (2006) obtained a 32% response rate for a Web-based questionnaire among training directors of Association of Psychology Postdoctoral and Internship Centers internship sites. Shafranske (2000) reported a 31% response for a mailed questionnaire among psychiatrists, even after nonrespondents were mailed a second

questionnaire after 6 weeks. An exception to this low response rate for questionnaires pertaining to religion and spirituality is that Delaney, Miller, and Bisoño (2007) obtained a 53% response rate among APA members being surveyed about religion and spirituality. Delaney et al. enhanced their response rate by offering an incentive, with each respondent being entered into a lottery drawing for a laptop computer. They also sent a second wave of mailings and expanded their respondent pool when not enough people responded to the questionnaire. In the present study, the sample pool could not be expanded because all available divisional presidents and council members were included in the first mailing, and because the Web-based questionnaire was anonymous, a reminder e-mail was not possible unless it was sent to all potential respondents regardless of whether or not they had completed the questionnaire.

Measures

In the first section of the online questionnaire, we assessed respondents' opinions about the appropriate place of religion and spirituality as topics of psychological inquiry by having participants rate four questions on a Likert-type scale, ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). The four questions pertained to whether religion and spirituality (a) are important topics for psychologists to consider, (b) reflect important aspects of human diversity, (c) can be studied with scientific rigor, and (d) are important to consider when providing professional services. The second section of the questionnaire listed the 10 types of manuscripts requested in the *PRS* editorial policy statement (see above) and requested participants to rate how useful each sort of article might be. These items were also rated on a Likert-type scale, ranging from 1 (*not at all useful*) to 5 (*very useful*). Instructions to respondents were as follows:

Division 36 of the APA (Psychology of Religion) will soon be publishing a new journal, *Psychology of Religion and Spirituality*. How useful would you find each of the following types of articles in a journal such as *Psychology of Religion and Spirituality*?

The final section requested demographic information about respondents, including age,

ethnicity, sex, and religious commitment. Religious commitment was assessed with a single item—"How important is your religion to you?"—with a Likert-type scale ranging from 1 (*not important; I have no religion*) to 5 (*highly important; it is the center of my life*). An analogous item with a similar response scale was used to measure spiritual commitment—"How important is your spirituality to you?" Respondents were also asked about the extent to which they had received formal psychological training in the study of religion and spirituality or in clinical work related to religion and spirituality. They responded on a Likert-type scale ranging from 1 (*not at all*) to 5 (*a great deal*).

Results

Examining Sample Representativeness

Given the poor response rate, we used three methods to assess for response bias. First, we compared demographics of our sample with demographics of the population. Because age and ethnicity are not listed in the APA directory, only sex could be used for this analysis. The population of APA leaders used for this study consisted of 107 men (50%) and 106 women (50%). Similarly, the obtained sample consisted of 31 men (50%), 31 women (50%), and 1 who did not report sex. Second, we compared the religiousness of the APA leaders we surveyed with that of the APA members surveyed in 2003 by Delaney et al. (2007). They used a 3-point scale and found that 21% reported religion to be very important in their life, 31% fairly important, and 48% not very important. Results on our 5-point scale were similar, with 21% endorsing a 4 or 5 (5 = *highly important*), 25% endorsing the midpoint rating of 3, and 54% endorsing a 1 or 2 (1 = *not at all important*). These ratings are also consistent with ratings reported by Shafranske (2000) of a random sample of 253 APA members listed as clinical or counseling psychologists. Shafranske found that religion was very important to 26%, fairly important to 22%, and not important to 51%. Shafranske (2000) also reported salience of spirituality ratings, which roughly correspond to the findings reported here. In Shafranske's sample, 48% rated spirituality as very important (compared with 61% of our sample endorsing a 4 or 5 on a 5-point scale), 25% as fairly

important (21% of our sample), and 26% as not very important (18% of our sample endorsed a 1 or a 2). Third, we compared early responders (those completing the questionnaire within 2 days of the e-mail invitation being sent, $n = 46$) and later responders ($n = 17$). No differences were found on any of the variables, except that women were more likely to be in the later group of respondents, $\chi^2(1, N = 62) = 6.6, p < .05$. Thus, we cautiously conclude that the response bias problem in this study is no worse than whatever response bias may have been present in past survey research regarding psychologists' views of religion and spirituality. However, the consistently low response rates for survey research on religion and spirituality does pose a problem that deserves to be acknowledged whenever survey data are used to summarize what psychologists believe.

Characteristics of Respondents

Of the 63 respondents, 32% reported being an officer of an APA division, 40% reported being an APA council representative, 27% reported being both a divisional officer and an APA council representative, and 1 respondent reported "other" when asked about APA affiliation. When asked about their work setting, 25 respondents (40%) identified themselves as academic/research psychologists, 12 (19%) as professional psychologists, and 24 (38%) as both. The average age of respondents was 58.5 years, with a range from 37 to 80 years. Most respondents (79%) were European American, 5% were African American, 3% Asian American, 5% Hispanic/Latino, 3% Native American, and 5% reported "other" as their ethnicity. As noted above, half of the respondents were women and half men. Most (91%) of the respondents identified themselves as heterosexual, 7% as gay or lesbian, and 2% as bisexual. Respondents were also asked the

extent to which they had received formal psychological training in clinical work or scientific study pertaining to religion and spirituality. They responded on a 5-point Likert-type scale ranging from 1 (*not at all*) to 5 (*a great deal*). The average rating was 2.0 ($SD = 1.2$), with only 12.6% of the respondents responding above the midpoint on the scale. Those identifying themselves as professional psychologists—including those who identified themselves as both academic and professional psychologists—were more likely to have received training ($M = 2.5$) than those who identified themselves solely as research/academic psychologists ($M = 1.6$), $t(59) = 3.2, p < .005$, Cohen's $d = 0.9$.

Personal Commitment to Religion and Spirituality

We asked respondents two questions regarding personal religious and spiritual values: "How important is your religion to you?" and "How important is your spirituality to you?" As shown in Table 1, spirituality was more important than religion to respondents, $t(61) = 8.5, p < .001$, Cohen's $d = 1.1$. Responses to the two items were correlated, $r(60) = .55, p < .01$.

Religion and Spirituality in Psychological Inquiry

A set of four opinion items was used to assess respondents' views of religion and spirituality in the discipline of psychology. The opinion items and response patterns are shown in Table 2, ranked ordered from most to least endorsed. The overall results demonstrate a relatively affirming stance toward religion and spirituality in psychological research and practice, although there are overall differences among items, Pillai-Bartlett $V(3, 57) = 0.30, p < .001$. To

Table 1
Importance of Religion and Spirituality to APA Leaders

Question	1	2	3	4	5	<i>n</i>	<i>M</i>	<i>SD</i>
How important is your religion to you?	36.5%	17.5%	25.4%	17.5%	3.2%	62	2.3	1.2
How important is your spirituality to you?	3.2%	14.5%	21.0%	50.0%	11.3%	62	3.5	1.0

Note. Each question was scored on a 5-point Likert-type scale ranging from 1 (*not at all important; I have no religion/spirituality*) to 5 (*highly important; it is the center of my life*).

Table 2
Religion and Spirituality Related to Psychology

Item	1	2	3	4	5	<i>n</i>	<i>M</i>	<i>SD</i>
Religion and spirituality reflect important aspects of human diversity	1.6%	1.6%	4.8%	37.1%	54.8%	62	4.4	0.8
Religion and spirituality are important topics for psychologists to consider	3.2%	4.8%	11.3%	40.3%	40.3%	62	4.1	1.2
Religion and spirituality are important to consider when providing professional services	3.2%	4.8%	15.9%	39.7%	36.5%	63	4.0	1.0
Religion and spirituality can be studied with scientific rigor	6.5%	9.7%	19.4%	33.9%	30.6%	62	3.7	1.2

Note. Each opinion item was scored on a 5-point Likert-type scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*).

explore individual item differences, we used post hoc paired-sample *t* tests. Respondents were significantly more likely to affirm religion and spirituality as important aspects of human diversity than to acknowledge they are important topics for psychologists to consider, $t(60) = 2.3, p < .05$, Cohen's $d = 0.3$; that they can be studied with scientific rigor, $t(60) = 4.2, p < .001$, Cohen's $d = 0.7$; or that they are important when providing professional services, $t(61) = 3.0, p < .005$, Cohen's $d = 0.4$. They were also more likely to say that religion and spirituality are important topics for psychologists to consider than to say they could be studied with scientific rigor, $t(60) = 3.0, p < .005$, Cohen's $d = 0.4$. Finally, respondents were more likely to endorse the importance of religion and spirituality in professional services than to endorse that they can be studied with scientific rigor, $t(61) = 2.1, p < .05$, Cohen's $d = 0.3$.

Correlations Among Spirituality and Religion Variables

Pearson product-moment correlation coefficients were computed among the variables assessing personal commitment to religion and spirituality and those assessing religion and spirituality in psychological inquiry. The resulting correlation matrix is presented in Table 3. The age of respondents was not significantly related to items pertaining to religion and spirituality.

Topics for the New APA Journal

Respondents were asked to rate the usefulness of 10 potential types of articles for *PRS*.

The 10 article types were derived from initial planning documents as the journal was being developed. Article types and respondents' usefulness ratings are presented in Table 4 in order of highest to lowest usefulness. A repeated measures multivariate analysis of variance revealed an overall difference in ratings of article types, Pillai-Bartlett $V(9, 50) = 0.54, p < .001$. Results of a post hoc profile analysis employing paired-sample *t* tests to compare adjacent means revealed a significant difference between the top-rated item (articles pertaining to religious and spiritual coping) and the second-most-endorsed item (cross-cultural and interfaith comparisons), $t(63) = 2.8, p < .01$, Cohen's $d = 0.3$. No other adjacent means were significantly different.

The final two columns in Table 4 show the average ratings for respondents who identified themselves as professional psychologists and those who identified themselves as academic psychologists. Those who identified themselves as both academic and professional psychologists were included in the professional psychology group to distinguish those with professional psychological training and interests and those without. Professional psychologists revealed greater interests in articles pertaining to clinical interventions, $t(58) = 2.8, p < .01$, Cohen's $d = 0.7$; ethical applications of religious/spiritual constructs in psychotherapy, $t(59) = 2.1, p < .05$, Cohen's $d = 0.5$; and professional competencies to manage spiritual and religious issues in psychotherapy, $t(58) = 2.1, p < .05$, Cohen's $d = 0.5$. Professional psychologists reported less interest than academic psychologists in meta-analyses of religious and spiritual constructs, $t(57) = 2.1, p < .05$, Cohen's $d = 0.6$. No demographic differ-

Table 3
Correlation Matrix Among Religion and Spirituality Items

Item	Age	RS training	Import religion	Import spirituality	RS topics	RS diversity	RS science	RS prof services
Age		.01 <i>n</i> = 62	-.21 <i>n</i> = 62	-.19 <i>n</i> = 61	-.03 <i>n</i> = 61	-.08 <i>n</i> = 61	-.07 <i>n</i> = 61	-.14 <i>n</i> = 62
RS training			.31* <i>n</i> = 63	.42** <i>n</i> = 62	.24 <i>n</i> = 62	.13 <i>n</i> = 62	.08 <i>n</i> = 62	.09 <i>n</i> = 63
Import religion				.55** <i>n</i> = 62	.20 <i>n</i> = 62	.23 <i>n</i> = 62	.18 <i>n</i> = 62	.30* <i>n</i> = 63
Import spirituality					.36** <i>n</i> = 61	.36** <i>n</i> = 61	.26* <i>n</i> = 61	.23 <i>n</i> = 62
RS topics						.32* <i>n</i> = 61	.55** <i>n</i> = 61	.58** <i>n</i> = 62
RS diversity							.29* <i>n</i> = 61	.43** <i>n</i> = 62
RS science								.38** <i>n</i> = 62
RS prof services								

Note. RS training = Amount of formal psychological training in clinical work or scientific study pertaining to religion and spirituality (1–5 Likert-type scale, with 5 = *a great deal*); Import religion = How important is your religion to you? (1–5 Likert-type scale, with 5 = *highly important*); Import spirituality = How important is your spirituality to you? (1–5 Likert-type scale, with 5 = *highly important*); RS topics = Religion and spirituality are important topics for psychologists to consider (1–5 Likert-type scale, with 5 = *strongly agree*); RS diversity = Religion and spirituality reflect important aspects of human diversity (1–5 Likert-type scale, with 5 = *strongly agree*); RS science = Religion and spirituality can be studied with scientific rigor (1–5 Likert-type scale, with 5 = *strongly agree*); RS prof services = Religion and spirituality are important to consider when providing professional services (1–5 Likert-type scale, with 5 = *strongly agree*). Numbers reported in each cell are Pearson product–moment correlations and sample sizes.

* $p < .05$. ** $p < .01$

ences were found between academic and professional psychologists.

Discussion

Whenever a new APA journal is published, it is important to consider its ideal niche within the context of the larger psychological literature. In this regard, APA leaders are key informants because they understand the broader themes and movements within the field of psychology. The APA leaders who participated in this study generally affirmed the importance of religion and spirituality as topics of relevance and as forms of human diversity. Some were not sure that religion and spirituality could be studied with scientific rigor, although most believed it is possible.

Respondents provided insight into the types of articles that might be most useful in *PRS*. Specifically, respondents endorsed articles on religion and spirituality as related to health and coping, as well as articles considering cross-cultural and interfaith comparisons. Respondents were more interested in articles in which

religion and spirituality are secondary variables related to issues of broad interest to psychologists (e.g., health, coping, cultural diversity) than articles that consider religion and spirituality as primary constructs (e.g., scale development, religious interventions).

A Continuum of Personal Engagement

Even as psychologists have become more open to conversations about religion and spirituality, it is important to note a continuum of personal engagement. A few respondents in this study continue to believe that religion and spirituality are unimportant, that they cannot be studied scientifically, and that they have no relevance in clinical training. These respondents represent one end of the continuum—those who oppose the psychological study of religion and spirituality.

In the middle of the continuum, many respondents affirmed the importance of religion and spirituality. Over 90% of respondents agreed that religion and spirituality are important aspects of human diversity (4 or 5 on the 5-point

Table 4
Perceived Usefulness of Article Types in Psychology of Religion and Spirituality

Article type	1	2	3	4	5	<i>n</i>	<i>M</i>	<i>SD</i>	Prof psych	Acad psych
Effects of spirituality and religiousness on coping, health, well-being, quality of life, and thriving	4.8%	4.8%	14.3%	41.3%	34.9%	63	4.0	1.1	4.0	3.9
Cross-cultural and interfaith comparisons of health, interpersonal, social, and clinical functioning ^a	6.3%	12.7%	19.0%	31.7%	30.2%	63	3.7	1.2	3.7	3.6
Developmental processes associated with spiritual maturation and its impact on psychosocial functioning	7.9%	15.9%	23.8%	30.2%	22.2%	63	3.4	1.2	3.5	3.3
Appropriate and ethical application of religious and spiritual constructs in psychotherapy	12.9%	14.5%	19.4%	32.3%	21.0%	62	3.3	1.3	3.6 ^b	2.9
Potential psychopharmacological and neuropsychological bases of spirituality	6.3%	14.3%	36.5%	25.4%	17.5%	63	3.3	1.1	3.3	3.4
Professional competencies for managing spiritual and religious issues in treatment	14.8%	8.2%	32.8%	27.9%	16.4%	61	3.2	1.3	3.5 ^b	2.8
Meta-analyses of religious and spiritual constructs	15.0%	10.0%	33.3%	23.3%	18.3%	60	3.2	1.3	2.9 ^b	3.6
Scale development and validation pertaining to religious and spiritual constructs	14.3%	20.6%	17.5%	30.2%	17.5%	63	3.2	1.3	3.0	3.5
The causal nature of spiritual and religious constructs, including the use of structural equation modeling, longitudinal designs, and experimental methods	17.5%	19.0%	19.0%	22.2%	22.2%	63	3.1	1.4	2.8	3.5
Clinical studies of spiritual/religious interventions	9.7%	17.7%	40.3%	19.4%	12.9%	62	3.1	1.1	3.4 ^b	2.6

Note. Each item was scored on a 5-point Likert-type scale ranging from 1 (*not at all useful*) to 5 (*very useful*). Prof psych = average rating for professional psychologists ($n = 36$); Acad psych = average rating for academic psychologists who are not also professional psychologists ($n = 25$).

^a Item is rated significantly lower than preceding item ($p < .005$). ^b Item is significantly different for professional and academic psychologists ($p < .05$).

scale). Many of these respondents have scientific or professional curiosity about religion and spirituality. After all, this is what psychologists do—study the topics that affect behavior and mental processes. In recent years, psychologists have developed an interest in topics such as coping, forgiveness, gratitude, hope, virtue, humility, and love—all concepts with strong historical ties to religious and spiritual values.

At the highest level of personal engagement are psychologists who not only hold intellectual and scientific curiosity about religion and spirituality, but also are interested in their metaphysical dimensions (Jones, 1994; O'Donahue, 1989). To those at this end of the continuum, religion and spirituality are important because they inform the worldview issues that affect

psychologists and their work, including philosophy of science and spiritually integrative psychotherapy interventions (Pargament, 2007).

Although some articles in *PRJ* will undoubtedly address the philosophy of science and metaphysical issues, and perhaps some will even venture into the area of integration of faith and science, the journal is likely to have the greatest impact on psychology as a whole if it reaches to those in the middle ranges of this continuum of engagement. This will involve scientific explorations that are credible and relevant to psychologists in general. It is not surprising, then, that our respondents were most enthusiastic about articles that address prominent themes in psychology such as health, coping, and cultural sensitivity.

Religion and Spirituality as Distinct Constructs

In the current sample, a large number of respondents (61%) expressed a high level of personal engagement with spirituality but far fewer (21%) with religion. This finding is consistent with other findings regarding the religious values of psychologists (Delaney et al., 2007; Shafranske, 2000). On the whole, psychologists remain quite nonreligious. For example, 7% of psychologists agree with 35% of the general population that the Bible should be interpreted literally, and 4% (vs. 22% of the population) report themselves as evangelical Christian (National Election Studies, n.d.). Only 14% of psychologists attend religious services weekly or more, as compared with 25% of the general population. Psychologists are also more likely to discard previously held beliefs in God and participation in religious activity (27%) than the general population (less than 4%; Delaney et al., 2007). Despite a relatively low level of personal engagement in religion, many psychologists are invested in spirituality.

This intriguing distinction between spirituality and religiousness may highlight a mismatch between psychologists' forms of spirituality and those more typical of the general population in the United States. It seems that the U.S. population tends to have a form of spirituality tied in broad ways to conventional religiousness (Zinnbauer & Pargament, 2005), whereas psychologists may prefer a form of spirituality that remains separate from religious beliefs. For instance, current mindfulness and forgiveness interventions have been developed in secularized forms despite the rich religious history associated with these practices (Dryden & Still, 2006; Holeman, 2008; Rosch, 2007). Although there is nothing inappropriate in such preferences, the risk this presents is that psychological researchers and clinicians may not be fully sensitive to the distinctive forms of spirituality or religiousness operative in the lives of their clients or research participants. The distinction psychologists make between religion and spirituality reflects a need to refine our understanding of both. This may be another promising area of exploration for articles published in *PRS*.

Religion, Spirituality, and Professional Interventions

Overall, respondents expressed only modest interest in articles pertaining to the religious and spiritual nature of clinical interventions. The rating for the four types of articles that related to clinical work—regarding ethical issues of religious/spiritual interventions, meta-analysis, professional competencies, and clinical outcome studies of religious/spiritual interventions—received ratings around the midpoint on the 5-point scale. This could reflect a judgment that religion and spirituality are not relevant to routine intervention and assessment (see Hathaway et al., 2004) or perhaps the sparse research evidence for any incremental outcome-related contribution for religious and spiritual interventions (Tan & Johnson, 2005). But it is important to note that respondents who identified themselves as professional psychologists—including those who were both academic and professional psychologists—rated these items more highly than those who were academic psychologists and not professional psychologists. Not surprisingly, those who do professional work were most interested in articles pertaining to professional expertise with spiritual and religious issues.

Perhaps more surprisingly, those without professional psychology training were highly unlikely to have received any formal training regarding religion and spirituality (mean of 1.6 on a 5-point scale). Although professional psychologists reported a higher rate of training (mean of 2.5 on a 5-point scale), it still amounted to a modest amount—a finding that is consistent with previous research among psychologists (Aten & Hernandez, 2004; Bartoli, 2007; Hage, 2006; Russell & Yarhouse, 2006; Yarhouse & Fisher, 2002).

Psychotherapists generally report positive regard for the religious beliefs of others; 8 in 10 believe religion to be an important factor in a person's mental health (Delaney et al., 2007), and most clinicians report being familiar with the religious and spiritual beliefs of their clients (Hathaway et al., 2004). Despite these findings, however, Hathaway and colleagues (2004) found that "most [psychologists] do not routinely assess the [religion/spirituality] domain or address it in treatment planning" (p. 97). Nearly 50% of psychologist respondents acknowledged spontaneous client reports of

changes in their religious/spiritual functioning, yet 93.8% of psychologists in the national study denied having ever endorsed a religious/spiritual problem V code (a designation in the 4th edition of the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*).

Although Division 36—and the psychology of religion more generally—are not oriented toward practice as much as they are toward science, it is noteworthy that professional psychology training may be the primary place where professional psychologists receive information about spiritual and religious issues. And more is needed. This being the case, then it follows that professional psychology training programs may be an important venue and that *PRS* should include a reasonable number of articles pertaining to professional psychology.

Limitations

The limitations of the current study include a low response rate coupled with the highly fluid nature of APA leadership. The low response rate is a potential problem because those who responded to the questionnaire may be more or less favorably inclined toward religion and spirituality than those who did not respond. Divisional presidents typically serve a 1-year term, and APA council members serve a 3-year term. Thus, our sample of APA leaders undoubtedly includes those who are relatively new to leadership and do not have the insider view of APA functioning that more experienced APA leaders have. In addition, the study is limited by amorphous definitions of religion and spirituality. Rather than trying to define these constructs precisely—a task that is nearly impossible and of little benefit in exploratory survey research—we allowed respondents to provide opinions on the basis of their existing understandings of religion and spirituality. In the future, greater sophistication in research and training in this domain will require careful specification of what particular facet of religion and spirituality one is studying.

Conclusion

Articles related to health and coping are particularly interesting to the APA leaders who responded to this survey. This is not surprising in light of high-profile media attention in this area as

well as a series of articles in a special section of *American Psychologist* (Miller & Thoresen, 2003; Powell et al., 2003; Seeman et al., 2003). Respondents reported relatively less interest in seeing clinical studies of spiritual and religious interventions. Still, religious and spiritual considerations in professional practice may be useful for *PRS* insofar as they are respectful of religious client values, enhance client willingness to enter treatment, promote rapport, contribute to greater accuracy in assessment when religious beliefs complicate symptom presentation, and provide a potential source of adjunctive resources. Articles clarifying the distinctions and commonalities of spirituality and religion will also serve an important purpose for psychologists, especially because many psychologists find spirituality, but not religion, important in their personal lives and because those who seek psychological services may not make this same distinction.

We began this article by suggesting two audiences for *PRS*—those scholars who are interested in the psychology of religion and spirituality, and those in the broader APA community who are learning how religious and spiritual constructs affect their academic and professional work. The present study focused on the latter audience. It seems clear that respondents value religion and spirituality insofar as they reflect a form of human diversity, but less clear whether or not respondents understand and value the scholarly work being done in the psychology of religion. Some aspects of religion and spirituality are likely more conducive to traditional research methods than others, but the fact that psychology of religion research that has been resurging since the mid-20th century may not be in the consciousness of many psychologists (Emmons & Paloutzian, 2003; Gorsuch, 1988). A future study with members of Division 36—presumably, those who have a greater understanding of contemporary scholarship in the psychology of religion—would supplement the information provided by the current study of APA leaders.

A new venture such as *PRS* provides opportunity for enhanced awareness of religious and spiritual issues within the broader psychological community. Having an APA journal provides psychology of religion scholars with a seat at APA's table of discourse. It will be important to listen and learn from one another as *PRS* functions both to serve the needs of Division 36 and the broader needs of APA.

References

- American Psychological Association. (2002). Ethical principles of psychologists and code of conduct. *American Psychologist, 57*, 1060–1073.
- Aten, J. D., & Hernandez, B. C. (2004). Addressing religion in clinical supervision: A model. *Psychotherapy: Theory, Research, Practice, Training, 41*, 152–160.
- Bartoli, E. (2007). Religious and spiritual issues in psychotherapy practice: Training the trainer. *Psychotherapy: Theory, Research, Practice, Training, 44*, 54–65.
- Bergin, A. E. (1980). Psychotherapy and religious values. *Journal of Consulting and Clinical Psychology, 48*, 95–105.
- Delaney, H. D., Miller, W. R., & Bisono, A. M. (2007). Religiosity and spirituality among psychologists: A survey of clinician members of the American Psychological Association. *Professional Psychology: Research and Practice, 38*, 538–546.
- Dryden, W., & Still, A. (2006). Historical aspects of mindfulness and self-acceptance in psychotherapy. *Journal of Rational-Emotive and Cognitive Behavior Therapy, 24*, 3–28.
- Ellis, A. (1980). Psychotherapy and atheistic values: A response to A. E. Bergin's "Psychotherapy and Religious Values." *Journal of Consulting and Clinical Psychology, 48*, 635–639.
- Ellis, A. (2000). Can rational emotive behavior therapy (REBT) be effectively used with people who have devout beliefs in God and religion? *Professional Psychology: Research and Practice, 31*, 29–33.
- Emmons, R. A., & Paloutzian, R. F. (2003). The psychology of religion. *Annual Review of Psychology, 54*, 377–402.
- Gorsuch, R. L. (1988). Psychology of religion. *Annual Review of Psychology, 39*, 201–221.
- Hage, S. M. (2006). A closer look at the role of spirituality in psychology training programs. *Professional Psychology: Research and Practice, 37*, 303–310.
- Hathaway, W. L., Scott, S. Y., & Garver, S. A. (2004). Assessing religious/spiritual functioning: A neglected domain in clinical practice? *Professional Psychology: Research and Practice, 35*, 97–104.
- Holeman, V. T. (2008). The role of forgiveness in religious life and within marriage and family relationships. In J. D. Onera (Ed.), *The role of religion in marriage and family counseling* (pp. 197–211). New York: Routledge/Taylor & Francis.
- Jones, S. L. (1994). A constructive relationship for religion within the science and professional of psychology: Perhaps the boldest model yet. *American Psychologist, 49*, 184–199.
- Koenig, H. G., McCullough, M. E., & Larson, D. B. (2001). *Handbook of religion and health*. New York: Oxford University Press.
- Miller, W. R., & Delaney, H. D. (Eds.). (2005). *Judeo-Christian perspectives on psychology: Human nature, motivation, and change*. Washington, DC: American Psychological Association.
- Miller, W. R., & Thoresen, C. E. (2003). Spirituality, religion, and health: An emerging research field. *American Psychologist, 58*, 24–35.
- National Election Studies. (n.d.). *The ANES guide to public opinion and electoral behavior*. Retrieved March 2, 2008, from <http://www.electionstudies.org>
- O'Donahue, W. (1989). The (even) bolder model: The clinical psychologist as metaphysician–scientist–practitioner. *American Psychologist, 44*, 1460–1468.
- Pargament, K. I. (2007). *Spiritually integrated psychotherapy: Understanding and addressing the sacred*. New York: Guilford Press.
- Powell, L. H., Shahabi, L., & Thoresen, C. E. (2003). Religion and spirituality: Linkages to physical health. *American Psychologist, 58*, 36–52.
- Richards, P. S., & Bergin, A. E. (2005). *A spiritual strategy for counseling and psychotherapy* (2nd ed.). Washington, DC: American Psychological Association.
- Rosch, E. (2007). More than mindfulness: When you have a tiger by the tail, let it eat you. *Psychological Inquiry, 18*, 258–264.
- Russell, S. R., & Yarhouse, M. A. (2006). Training in religion/spirituality within APA-accredited psychology predoctoral internships. *Professional Psychology: Research and Practice, 37*, 430–436.
- Seeman, T. E., Dubin, L. F., & Seeman, M. (2003). Religiosity/spirituality and health: A critical review of the evidence for biological pathways. *American Psychologist, 58*, 53–63.
- Shafranske, E. P. (1996). Religious beliefs, affiliations, and practices of clinical psychologists. In E. P. Shafranske (Ed.), *Religion and the clinical practice of psychology* (pp. 149–162). Washington, DC: American Psychological Association.
- Shafranske, E. P. (2000). Religious involvement and professional practices of psychiatrists and other mental health professionals. *Psychiatric Annals, 30*, 525–532.
- Sperry, L., & Shafranske, E. P. (Eds.). (2005). *Spiritually oriented psychotherapy*. Washington, DC: American Psychological Association.
- Tan, S. Y., & Johnson, W. B. (2005). Spiritually oriented cognitive–behavioral therapy. In L. Sperry & E. P. Shafranske (Eds.), *Spiritually*

- oriented psychotherapy* (pp. 77–130). Washington, DC: American Psychological Association.
- Walls, G. B. (1980). Values and psychotherapy: A comment on “Psychotherapy and Religious Values.” *Journal of Consulting and Clinical Psychology*, *48*, 640–641.
- Yarhouse, M. A., & Fisher, W. (2002). Levels of training to address religion in clinical practice. *Psychotherapy: Theory, Research, Practice, Training*, *39*, 171–176.
- Zinnbauer, B. J., & Pargament, K. I. (2005). Religiousness and spirituality. In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 21–42). New York: Guilford Press.

Received April 25, 2008

Revision received November 12, 2008

Accepted November 12, 2008 ■