

The Spirituality of U.S. Pastoral Clinicians

Gordon J Hilsman – Doctor of Ministry Project: 1988ⁱ

I. Introduction

By identifying oneself as a chaplain or pastoral counselor a person claims to be at least minimally proficient as a “spiritual clinician”. Pastoral persons implicitly claim willingness to involve themselves in pastoral conversation, to address people in the spiritual dimension of their lives, to meet them in the here-and-now of spiritual care. In short, they claim expertise in the art of “clinical spirituality”.

How one identifies the spiritual thus becomes an interesting question. Although it is neither clear nor simple in what ways their own spiritual lives affect their spiritual care of others, some connection can reasonably be posited. How these people assess their own spiritual lives and the convictions they have developed about the spiritual lives of others, at least bears initial study.

Certified chaplains and pastoral counselors are seen as spiritual people with interest in and expertise in this realm of life. All have theological backgrounds and some history and sanction with ecclesiastical organizations that seek as their primary *raison d’être* to enhance the spiritual lives of people. They are the primary givers of spiritual care in hospital, prisons and other institutions for the care of people during the most painful times of their lives. And further, they are the primary teachers of practical spiritual care, as clinical supervisors in experiential education programs for clergy across the U.S. Many see themselves as on the forefront of the project of integrating academic theology, various church traditions, and the behavioral sciences, in what has been known as the pastoral care movement for over half a century. This present project constitutes initial survey research into the spiritual convictions and experiences of some of the most highly certified pastoral clinicians in the U.S.

II. History:

Spirituality does not lend itself well to rigorous empirical study. What is somewhat measurable is the material realm of life. The best we can do with spirituality is to observe its material manifestations, attempt to measure them, and then make inferences from the data. Yet a clinical discipline for spiritual care has arisen during this century due to the fact that chaplains in institutional settings have been charged with the spiritual care of people regardless of their religious history or involvement. The milieu of spiritual confusion that has emerged from the religious pluralism of American society has forced chaplains to develop ways of meeting people spiritually who are mostly unaware of their own spiritual dimension, either success or struggle. Uncomfortable in their institutional work with mere religious evangelizing from their own faith traditions, they wafted towards psychological and psychiatric concepts for decades with fair success, at least in developing skills for actually meeting people in the depths of their person to accompany them along the way. Perhaps the most recent mildly successful attempt in this direction has been to utilize the conceptual frameworks of developmental psychology in theorizing about faith development. Some have claimed progress in adapting this fairly complex and abstract work to more practical usability by front line pastoral clinicians .

As early as 1975, however, psychologist Paul Pruyser, experienced in the clinical training of clergy, vigorously chided pastoral people for too easily adopting the language of psychiatry in their helping, having all but abandoned their own rich traditions of caring. He offered his own suggested beginnings of a model for “pastoral diagnosis” in a book by that nameⁱⁱ.

In recent years, U.S. chaplains have been emphatically urged to do research into the effect we have on hospitalized people, largely by physicians Elizabeth McSherryⁱⁱⁱ and her colleagues, and largely to justify our positions as paid professionals in an increasing tight budgeted health care world. Research generated thus far tends to focus understandably on hospitalized patients’ religiosity and concepts of God, and the effects these have on measurable data such as length of stay in hospital. This direction has at least re-invited pastoral clinicians to deal more directly with patients’ spirituality, utilizing their own best concepts of spirituality in attempts to respond to McSherry’s challenge that churches and seminaries must teach more useful and documentable spiritual care of hospital patients or risk rapid obsolescence in the health care field.

There remains a huge lacuna however, in the form of a lack of language with which to converse about spiritual realities. In the absence of a widely accepted theory and terminology about the spiritual realm of life, on the one hand terminologies proliferate, exacerbating the super complex religious scene in which hundreds of religions disagree on fundamental political and theological issues, obscuring the simple, day today spirituality useful to us common humans. On the other hand this absence of consensually accepted understandable spiritual terminology often leaves ministry people mute or speaking the foreign languages of psychology or social work in meetings for insight sharing about troubled people. Medical and mental health workers have long confused religion with spirituality, skeptically ignoring both in their work, waiting for us to find our tongues. There is evidence that this is changing as sections of other disciplines seek to become conversant in spiritual concepts and pastoral people increasingly go in search of concepts and skills of true pastoral or spiritual assessment. My hope is that this project will contribute a bit to that recent positive change.

III. Theory

Spirituality will always remain a mystery, being by con-validation humanity’s attempts to deal with what transcends us. Yet as Pruyser reminded us, we all make pastoral diagnoses whether we realize it or not, as much of clinical supervision of pastoral care can be seen as improving ministers’ awareness of that pastoral diagnostic process inside ourselves. We need and utilize concepts of spirituality, though like the practice of medicine and the constantly changing conceptualizations of psychology, they are always incomplete in grasping the totality of one’s spiritual situation at any given point in life. There is at this point no generally accepted theory of spirituality.

The by what theory can we begin to study the spirituality of chaplains and pastoral counselors? My own work with chemical dependency since 1974, combined with the theologizing of Letty Russell and the historical analysis of Ernest Kurtz, have provided a framework for my own spiritualizing that utilizes two primary metaphors: *arena* and *partnership*.

A. Spiritual Arenas of Life

An arena is a place you go to observe or experience something better than you could from someplace else. Let us suppose that there are such arenas of spirituality, i.e., some aspects of life that more boldly dramatize our current state of spiritual wellness better than other slices of life. The

Baltimore Catechism in the 1950s and Teilhard de Chardin^{iv} in the 1960s convinced me that all life is spiritual. But if we can identify the primary arenas of spirituality, they will constitute a framework with which to listen to people's life history and experiences, assessing in the process, spiritual success and pain.

Like many clergypersons who involve themselves in some depth with the Alcoholics Anonymous community, I was jolted by the profound spiritual atmosphere of regular AA meetings. Over the past ten years I have come to see the recovery process as one very powerful spiritual arena of life. For lack of a better term, I call it the Help-Getting arena, and it has become the paradigm for other arenas. How well does this person get help when she needs it?

Harvard historian Ernest Kurtz's well researched account of the AA movement during the middle of this century, outlines the necessary elements of recovery as a primarily spiritual process.^v Deftly avoiding the human propensity to either over-simplify or over-complicate spirituality, he describes the recovering alcoholic's profound shift from compulsive preoccupation with "more, more", to a new focus on quality of sobriety; from self-absorbed isolation to help-getting involvement; from the despair of spiritual bankruptcy to the new hope of partnership living. In doing so, Kurtz identifies key concepts in this conversion process.

- 1 – Surrender to one's limitations
- 2 – Identify with similarly limited peers
- 3 – Openly acknowledge mutual vulnerability intentionally.

These observations of what makes recovery succeed become criteria for identifying other arenas of life similar in their ability to epitomize spiritual struggles and victories. Aspects of life that confront us with our limits in an affective way, invite us to share a deep level with other humans, and continually beckon us to share our mutual vulnerability with them, could be seen as true spiritual arenas. Recovery demands a combination of efforts that facilitate a new-found capacity for ongoing partnership in help-getting. Other arenas are similarly unique in illustrating the nurturance of partnership in a variety of other dimensions of life.

B. Partnership as Spiritual

Letty Russell has theorized convincingly in two of her books, on partnership as a metaphor of the relationship between humans and God.^{vi} "I will be your God and you will be my people" implies shared responsibility. The word partnership connotes a relationship that combines the elements of *mutual involvement* and *nobody in control*. It speaks of being deeply engaged in something one can't dominate or manage; implies influence rather than control; and suggests at least two persons investing energy in the same goal, each relying on the efforts of both for success. As a spiritual metaphor it promises usefulness in that we never have control over our own spirit, yet we influence it more than any other human. To be both deeply involved and not in control is to be vulnerable. Partnership is only possible when people accept the limitations of their influence and allow themselves to share mutual vulnerability.

In searching for the primary spiritual arenas of human living, a beginning point is thus to explore the aspects of life in which true partnership results in realized limitations, peer identification and regular open sharing of mutual vulnerability. For purposes of initial study, they can be divided into

endeavors of partnership with oneself, partnership with one's intimates, and partnership with the ultimate.

C. Partnerships of Life Described – Three Axes

Axis 1. Meta-personal Spirituality – Partnership with the Ultimate

1 – PARTNERING WITH A PERSONAL GOD

Common among even the unchurched is the inclination to pray when in real trouble. In situations that bring humans close to the limits of their own power, their focus is easily drawn to something Beyond. “There are no atheists in foxholes” suggests that prayer is verbalizing the vulnerability experiences our limits are made obvious. Truly praying together is openly sharing the mutual vulnerability. And much of theology and pastoral ministry in some religious traditions is focused on nurturing this partnership with God and the partnerships with people that sharing it together fosters.

2 – RELATIONSHIP WITH NATURE

Why would anyone retire in “Nowhere-town”, northern Wisconsin? Many do, perhaps because they've been vacationing there for decades seeing closeness with the mysteries, miracles and wonders of nature. Environmental spirituality, the sense of wonder at even one leaf as pointing beyond man's limits, is a significant part of the spirituality of many hunters, fishermen, photographers, environmentalists, bird watchers, campers, skiers, hikers, snowmobilers, poets and some recluses. Sharing the beauty and miracles of creation with its Planned and/or some others who similarly appreciate it, is genuinely spiritual activity, as attested to by St. Francis, St Paul (Rom 1/19-20), and some of the Psalms David wrote after walking in the wilderness. (e.g., Ps. 63)

3 – HARMONY WITH THE FORCES OF THE UNIVERSE

This term refers to beliefs and behavior of people around a non-personalized universal ultimate force or forces beyond human understanding. Some scientists speak of such convictions, for example, arising from their encountering the limits of man's ability to comprehend the universe by scientific study. Others meditate or “center themselves” to seek harmony with these forces without conceiving them as personal.

4 – INVOLVEMENT WITH A FAITH COMMUNITY

Religion intends to nurture spirituality through symbols and practices to inspire and facilitate relationships with the Beyond. At its best, religious practice assists our openly acknowledging the mutual vulnerability that comes with publicly expressing one's faith with others of similar belief. Religion can help or it can hinder spirituality, and has been utilized through the centuries to manipulate people in the worst ways. Not everyone seems able to utilize religious traditions and practices for genuine spiritual enhancement, and in fact, religious wounded-ness is quite familiar to any spiritual clinician. Yet to the millions of us who do benefit spiritually from religion, there is a definite communal aspect to that is nurtured by our sharing it together.

5 – CONTRIBUTION TO THE HUMAN COMMUNITY

How one relates to the human community as a whole as we strive to share the planet responsibly with each other is one window on a person's spirituality. Social action, liberation theology, and peace & justice work are significant segments of the spirituality of modern day prophets and

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consciousness-raisers. I remember an obscure study that suggested that people who stay mildly politically active are happier than those who don't. We can be easily frustrated by our limits at finding our best gifts for making a contribution to solving the problems of humankind. But being active in some facet of organized effort to better our planet plays on the edges of our limits, points to an uncontrollable Beyond, and feels better when honestly shared with those of like mind/heart.

6 – LIFE LOSSES

There are times in every life when something important is permanently ripped away and there is nothing you can do to stop it. Deaths of treasured individuals invite dealing with human limits and the Beyond in an obvious way, and this seems almost as true in any important loss including divorce of parents or oneself, personal disability, combat experience or significant medical crises. The sharing of mutual vulnerability with loss precipitates is familiar to any truly pastoral funeral arranger and grief facilitator, especially those who work with groups and families. Doesn't the way you've integrated important losses into the fabric of your life affect the development of bitterness, self-pity, resentment, depressiveness, and wisdom in old age?

7 – CONFRONTING MORTALITY

Every human has a history of personally facing/avoiding death. From first wrestling with "...if I should die before I wake..." through grandma's funeral, to the last image of the truck that kills you or struggling for that very last breath, the fact of our limited life span pursues us either gently or tortuously. The arena of confronting your own mortality consists of these events that beckon towards realization in depth of one's own impending death, with wisdom making headway over bitterness or despair.

Axis 2 – Interpersonal Spirituality

8 – ROMANTIC LOVING

You can't assure a satisfying love life for yourself. You can usually influence it, learning how to pursue it a bit more effectively. But the human situation of loving someone whose response you can't control, invariably at some points in a lifetime takes you to the limits of that influence. Romantic intimacy is regularly shared mutual vulnerability between lovers. It was seen as a symbol of the Beyond by such notables as Hosea, St. Paul, and the writer of the Song of Songs. If God is love, then God is romantic love too. Though Charles Williams' THEOLOGY OF ROMANTIC LOVE is obscure, it nonetheless points to and expands upon a most commonplace spiritual arena neglected by perhaps more pastors and spiritual clinicians than attend to it. Most song is written to give expression to the buoyed or dashed spirit of loving and being loved. "How's your love life?" is truly a spiritual question.

9 – PARENTING

Having a child makes you more vulnerable. Now you can be hurt by failure and pain in at least two lives – yours and your child's. You want them to be happy and you have your own ideas of what that should look like. But you find definite limits to the influence you have on their choices, their behavior, and their good or bad fortune. This combination of what you so powerfully want and how little influence you have of getting it makes parenting a most powerful arena. When this new vulnerability is shared, between partners, with other parents, or between parent and offspring,

something is nurtured in the parenting partnership itself. When my kids make up little plays for us to get into, why do I always have to be a “little kid”?

10 – ADULT RELATIONSHIP WITH YOUR PARENTS

Most if not all of us emerge from childhood/adolescence carrying unfinished business with our parents in the form of guilt (what I did), resentment (what they did), of just plain neutral regrets. The “childing” partnership is the parenting partnership seen from the child’s perspective, and it usually looks completely different. Anyone pastoral knows the spirit-inhibiting power of the arena and has seen the released energy when bits of the open Gestalts get some closure. Parents were our first “higher power” experience. “How is it really with your parents, whether they are alive or dead?” a profound spiritual arena to enter.

11 – CHILDHOOD RELATIONSHIP WITH YOUR PARENTS

“Parents” in this context means whoever personally parented you, not necessarily your biological mother and father. When you were little and they were big, you relied on them for everything making partnership is some form with them, essential. They had the primary responsibility for nurturing that relationship at first, and for passing the power over to you gradually as you grew. How well did they do their part in that partnership? Did they bestow roots of security and wings of freedom, or saddle the rest of your life with unfinished hurts, resentments, and guilt a shte basis for your life-long relating-to-higher-powers spirituality?

12 - PARENTS MODELING PARTNERSHIP

It has been said that more important to your little psyche than how your parents loved you, was how you saw them loving each other. If achieving elusive partnership in many aspects of life is crucial to spirituality, then all the more central to spiritual formation is the relative healthiness of that first model of partnership of mom partnering with dad.

13 – FRIENDSHIP

When you are aware of “needing a friend, you are likely in a situation that invites you to relate to your limits. The affection, loyalty and mysteries of friendship suggest something beyond both of us. And one of the elusive elements that draw friends to each other is the ability to identify with one another’s vulnerabilities and acknowledge them to one another, albeit to nobody else.

14 – HELP GETTING

An early Beatles’ song poeticized the “opening up the door” of that first real help-getting experience. Is it possible to raise children to eventually be adults who can ask for help when they need it but not when they could more profitably stretch their own limits instead? The essential of spiritual endeavor are all there in help-getting partnerships as demonstrated by the historic AA discoveries—limits, Beyond and shared vulnerabilities.

15 – EDUCATION

Learning is actually a delightful experience despite the fact that educators of all kinds are most familiar with how vigorously students at every level resist it. To learn requires admitting one doesn’t know (or know how), thus owning ones limits. Church leaders continually assert that the greatest barrier to continuing education of the clergy is motivation. Basic CPE training reveals that leaning

experientially is to confront one's limits, and doing so together requires consistent shared mutual vulnerability. From grandpa teaching you how to fish to eventual mentor partnership, learning nurtures the human spirit.

16 - HELP GIVING

People in the "helping professions" are invited constantly to meet the limits of peoples' ability to help one another. The helping partnership seen from the helper's perspective varies in character depending on how spiritually well the helper not only recognizes the limitations of her/his helping, but accepts and even appreciates them, whether the discipline be medicine, nursing, psychotherapy, chemical dependency counseling or ministry. Perhaps only those who have experienced real satisfaction working on a successful multidisciplinary team can appreciate the necessary shared mutual vulnerability that comes from accepting one's own limitations and in turn allows respect for the other team disciplines.

Axis 3 – Personal Spirituality

17 – PHYSICAL SELF-CARE

Most of us knew since the 6th grade health curriculum how to care for our bodies but we nonetheless struggle to do it. Overweight, nicotine, alcohol, and sedentary lifestyles are all self-destructive yet we flirt with our limits in trying to influence them enough for our own good. There is clearly a relationship with self here that is not always partnership but continually strives to be. And at best there are limits of our ability to "add one cubit" or one healthy day to our bodies. My primary CPE mentor and another supportive friend in the pastoral care movement (Bernie Pennington and Jim Anderson) died of colon cancer and a massive heart attack at 47 and 51 respectively. Both were slender, athletic and health conscious. There are limits to physical self-care that, thoughtfully attended to, touches the Beyond. When wellness writers explore its spiritual dimension, don't they have the sun revolving around the earth? Body care needs to also be seen as merely an arena of spirit care.

18 – EMOTIONAL SELF CARE

Best-selling self-help hype would have us believe that there are only seven or twenty easy steps to feeling good about ourselves all the time. But ferrying oneself through the developmental crises of life is always messy. The transition from being little when everyone else is big, to a self-valuing personal place where you aren't easily belittled anymore, happens either in a gradual developmental process or a rapid remedial one, but it seems never easily, never completely, and never with real control. Finding ways of dealing consistently and effectively with problems of self-worth, assertion, guilt, regret, and resentments, all which are primarily conflicts between me and me, is an elusive life project. Sharing the mutual vulnerability that this implies is the usefulness of group therapy and the varieties of growth group experiences.

19 – ATHLETIC ACCOMPLISHMENT

The arena of athletics uniquely combines power and vulnerability, though the former easily covers the latter in daydreams, idealizations and TV hype. Even George Blanda retired at 47. We all reach the limits of our athletic prowess, most of us after Jr. High. Experiencing and owning them however, is a struggle that points beyond ourselves. I'm not alone in remembering mystical sensations after pouring our "my all" in college cross country meets before anyone had heard of

endorphins. And the delicate balance in competition between trying too hard on the one hand, and not being able to “get into it” on the other, is an internal struggle that doesn’t show on the court or the TV screen. Attempting to vicariously share power by watching TV ought not to be confused with sharing the vulnerability of being limited athletically seen in balding comrades on the racquetball court.

20 – CREATIVE ENDEAVOR

Attempting proficiency in music, art or theater, will without question show you your limits, taking you beyond your own powers. Why is the inspiration sometime there and sometimes not? Will the public validate your excitement over your creative efforts? Will the critics? But the Beyond is met by many more of us in the APPRECIATING than in the CREATING of artistic truth and excellence. Religion, in its honest attempt to nurture spirituality, has utilized the arts from the beginning. Whether the struggle is between you and yourself, in creating, or beyond yourself, in appreciating and being moved, the arts remain a profound source of genuine spiritual experience.

21 – WORK

Task mastery is at some point THE key to children’s’ feeling good about themselves. So our capitalistic values dissuade us from knowing that it is better to work than not to work, EVEN IF WE DON’T GET PAID MONEY? The human person has survival needs and to work is to both accept some responsibility for them and feel good about caring for oneself. Studs Terkel’s tome *Working* (Pantheon 1974) illustrates the varied complexities of work satisfaction experienced by North American people, as well as the energy and creativity with which they approach and deal with it. Finding your best work satisfying and validated as worthwhile is an awesome project you can’t completely control, and it celebrates something beautiful about your awareness of your own identity. The chronically unemployed are burdened by a decided spiritual disadvantage.

22 – SEXUALITY

If there is one aspect of life that perpetually remains mysterious and repeatedly invites us to shared mutual vulnerability is relating to our own sexuality. Options of what we decide to do with the naturally unmanageable urges are few: heterosexual intercourse, homosexual expression, masturbation, and celibacy. Harry Stack Sullivan saw this decision as pivotal in the human development of young adults, and it is easy to see why. The consequences for one’s spirit take us in very divergent life directions with intense implications for our relationships and feelings about ourselves. Living richly with integrity with any of these decisions is a considerable life project, takes us to the limits of our “illusion of control” and invites us beyond ourselves.

23 – AGING

Part of the price of living beyond 40 is being confronted repeatedly with the limitations life relentlessly imposes as we age. Fading visual attractiveness, chronic medical conditions, decreased communication abilities, and perceived vocational uselessness: some of these are inevitable if we but live long enough. These gradual but inescapable limitations speak to us of powers we can neither stop nor understand. Sharing the mutuality of these heightened vulnerabilities is the stuff of senior citizens’ centers, gatherings and events. Denied and resisted they exacerbate self-isolation and bitterness.

24 – HOBBIES

A hobby is doing something different from your primary work, doing it well by your own realistic standards, and enjoying it in the process. Hobbies offer other activities in which we can meet ourselves both in our power and in our limits. And being able to share with other model railroaders, writers or wood workers enhances the experience as spiritually uplifting.

Although this arena is probably not as primary as some others, there is nonetheless the suggestion that it becomes more valued and valuable in retirement years.

IV – The Study

A. The Sample

Pastoral clinicians were selected from the highest certification categories on current membership lists of five major professional pastoral care and counseling associations in the United States, i.e., the National Association of Catholic Chaplains (NACC), the Association for Clinical Pastoral Education (ACPE), the College of Chaplain of the American Protestant Hospital Association (APHA-COC), the American Association of Pastoral Counselors (AAPC), and the Association of Mental Health Clergy (AMHC). All of the women members were included so as to obtain a significant sample by gender. Two thirds of the men were randomly selected. Fellows and diplomates from the AAPC and the APHA-COC; full supervisors from the ACPE and the NACC; and certified chaplains from the AMHC and NACC. After an attempt was made to minimize duplicate receptions of questionnaires by multiply certified individuals, the total sample was 1539. Multiply certified respondents were asked to identify which professional association they consider to be primary for them.

B. The Survey Instrument

A four-page survey instrument was developed specifically for this study, based on the phenomenological theory of spirituality originated by this researcher, adapted from experience with the spirituality of chemical dependency recovery through a style of treatment utilizing the Twelve Step program of Alcoholics anonymous. There are three parts to the survey through which the sample were invited to relate to the 24 spiritual arenas in three different ways.

Part I is experiential and self-evaluative, asking respondents to assess how successful they see themselves being so far in their lives, in each of the arenas. The term SUCCESS/EXPERIENCE was utilized intentionally to carry the idea that positive experience in any spiritual arena is partly achieved and partly “bestowed”, as “luck”, or “grace”.

Part II is conceptual, asking how important the respondents believe each arena to be in the lives of most humans. How do they relate conceptually to the arenas? What are their convictions about spirituality in partnership spirituality terms?

Part III is developmental, as it invites the sample to remember how primarily operant each arena was for him/herself during the various stages of his/her own life cycle. When they look at their own lives, which of these aspects of life were most strikingly memorable as pieces of their own spiritual experience?

A copy of the survey instrument is included as Appendix A.

C. Methodology and Procedure

The survey was mailed to all of the sample twice during 1988, once in June and once in July, offering each sample member two separate invitations to participate. It was accompanied by a cover letter requesting that it be completed and returned in the enclosed post-paid envelope. No personally identifying data were requested, though some respondents voluntarily identified themselves. Returned questionnaires were separated according to professional association and the data entered into a PDP-II computer utilizing the MINITAB program at Northland College, Ashland WI. Consultation was obtained from Patricia Shifferd, Ph.D. of the sociology department. Demographic data was entered along with responses so that it could be processed relative to several variables including professional association, gender, denomination, marital status and age.

Standard descriptive techniques were used to summarize the data. Analytic tests used were those appropriate for nominal and ordinal data—specifically chi-square was used to measure significant differences in frequency distributions among sub-samples, and the Spearman rank-order correlation (ρ) was used to measure strength of association.

D. Results

Response to the first wave of 1589 questionnaires sent was 588 or about 37%. After removing names of those who identified themselves in the first wave responses, the second wave numbered 1280, of which 286 were returned completed, for a total response of 874 or 55%. Of these, 87 or 11.1 % were spoiled or arrived after the deadline for being included in the data processing.

Association	n	# women	% women
APHA	230	41	17.8
AAPC	219	20	9.1
ACPE	214	43	20.1
NACC	68	38	55.9
AMHC	56	7	12.5
t	787	149	18.9

Table One: Respondents by designated professional association

Denomination	APHA	AAPC	ACPE	NACC	AMHC
Mainline Protestant	169	170	165	1	34
Roman Catholic	17	13	18	64	8
Evangelical	20	9	6	0	3
Other	13	10	13	0	7

Table Two: Respondents by designated preferred denominational affiliation

Marital Status	APHA	AAPC	ACPE	NACC	AMHC
Single	20	15	29	54	7
Married	179	173	147	5	42
Divorced	8	6	13	0	2
Widowed	2	1	0	1	0
Mean Age	49.7	51.8	49.4	54.5	55.3

Table Three: Respondents by marital status and designated preferred professional association

The data do not always add up to the total numbers above because some respondents did not complete some demographic data blanks.

Results of the study will be discussed in relation to the four basic questions that were asked in processing the data:

- 1 – What can we extrapolate might be the spiritual arenas that are seen as PRIMARY by these pastoral clinicians? Which are seen most frequently as SECONDARY or of less importance in the lives of most humans?
- 2 – What do these clinicians see as the spiritual arenas having been most importantly operative during the various stages of their own life cycles? (Part III) In reading these clinicians’ living human documents through the window of partnership spirituality, has there been an observable “spiritual epigenesis” in their lives?
- 3 – What statistically significant differences are there in the responses of members of these five professional associations, particularly in their:
 - a - Convictions of how important each arena is in the lives of most humans?
 - b – Perceptions of how well they themselves have succeeded in these spiritual arenas of life?
- 4 – What statistically significant differences are there between responses of men and women clinicians in this survey?

Question One: The search for the arenas that are in some way primary

We assume that all lives are unique and thus everyone’s spirituality is distinctive in the arenas that are most powerfully operant and energetically attended to by that particular individual. However, as pastoral clinicians have gone about their work with the spiritual lives of people, which arenas do they regard as primarily important in the lives of most humans? And when they observe their own lives, as they have been well trained to do, what arenas do they see as having been primary in their own spiritual histories? Three distinct attempts were made to address this question in the data, i.e., identify the primary arenas of spirituality.

Table Four presents the data resultant from the three aspects of the survey instrument, the mean value of ratings of the arenas regarding their importance to spirituality(left column); memories of their significance during respondents own lives (middle column); and their mean ranking of the successful experience respondents have of them over the span pf their lives so far (right column).

Conceptual – Importance to Spirituality	Ave. Rank	Memory - My Development	Rank	Self-Evaluation - Success/Experience	Ave. Rank
EMOTIONAL SELF CARE	8.65	FRIENDSHIP	1817	HELP GIVING	8.69
PERSONAL GOD	8.55	PERSONAL GOD	1728	WORK	8.54
FRIENDSHIP	8.40	ROMANTIC LOVE	1224	EDUCATION	8.39
LOSSES	8.40	FAITH COMM	1149	NATURE	8.26
MORTALITY	8.06	EDUCATION	1036	FRIENDSHIP	8.23
HELP GIVING	8.03	SEXUALITY	940	SEXUALITY	8.07
PHYSICAL SELF	8.01	WORK	902	PERSONAL GOD	7.93
HELP GETTING	7.91	PARENTING	842	EMOTIONAL SELF	7.90
FAITH COMMUNITY	7.87	EMOTIONAL SELF	800	MORTALITY	7.86
HUMAN COMMUNITY	7.86	CHILD/PARENT	798	HELP GETTING	7.68

SEXUALITY	7.85	HELP GIVING	764	PARENTING	7.65
WORK	7.78	PHYSICAL SELF	690	ROMANTIC LOVE	7.63
CREATIVITY	7.66	HELP GETTING	665	PHYSICAL SELF	7.62
CHILD/PARENT	7.65	NATURE	628	LOSSES	7.55
HARMONY/UN IV	7.50	LOSSES	480	CREATIVITY	7.38
AGING	7.47	PARENT/MODEL	458	FAITH COMMUNITY	7.37
NATURE	7.42	HUMAN COMM	424	HUMAN COMMUNITY	7.37
ROMANTIC LOVE	7.35	ATHLETICS	400	AGING	7.23
PARENTING	7.28	HARMONY/UN IV	349	HARMONY/UNIVERSE	6.76
EDUCATION	7.06	ADULT/PARENT	335	CHILDHOOD/PARENT	6.68
ADULT/PARENT	6.87	HOBBIES	332	HOBBIES	6.62
HOBBIES	6.47	CREATIVITY	300	ATHLETICS	6.22
PARENT/MODEL	6.15	MORTALITY	279	ADULT/PARENT	5.94
ATHLETICS	4.31	AGING	178	PARENT/MODEL	5.23

Table Four: Conceptual, Developmental, and Self-Assessment Data

a) Conceptual Convictions – Column One shows the mean response of the respondents as a whole group, to part II of the survey, asking them to rank the arenas according to “how important you believe them to be to the spiritual regarding the spiritual health/wellness of most human lives.” In other words when you ask pastoral clinicians which arenas they THINK are the most primary, column one results.

Note that the very top arena is EMOTIONAL SELF CARE, rated a bit higher than PERSONAL GOD, which one would guess people think of as most central to spirituality. These respondents spend their professional lives gaining quick access to the affective lives of people to hopefully be of service to them. To do so requires skillful use of clear communication and sensitive relating to the feeling side of life. Pastoral clinicians have apparently come to appreciate this aspect of life as profoundly spiritual. One wonders whether the nation’s pastors, churchgoers or the general public would share such appreciation of emotional self-care as deeply spiritual, though such words as self-concept, self-esteem, and self-care are common pop psychology terms for happiness.

On the bottom of the list is ATHLETICS, the only arena rated on the average below the midpoint of a ten point scale. ATHLETICS, at least in the personally specific way it was queried about in the survey, (athletic accomplishment satisfying to you), is not highly valued by these respondents as spiritual. Noting the enormous energy injected into the world Series and Super Bowl hype, we can guess that respondents would see VICARIOUS athletics as more important to spirituality, whether positively or negatively.

All of the arenas involving relationships with one’s parents are rated quite low. Don’t spiritual clinicians see spirituality as having been born in relationships to parents, our first “higher powers”? Are these primary relationships seen as merely important developmentally and therapeutically? Or has the individuation of pastoral clinicians been so complete that we forget the power of the past?

B – Developmental Memories - In Part III of the survey, the sample were asked to identify the “arenas in which you were most richly influenced during the indicated times of your life.” When a tally is made of each time an arena was mentioned as having been primarily operative at some point of a respondent’s life, column two (Table One) results. It is a ranking of how arenas influenced these respondents’ lives at specific points or at several points along their own life pilgrimage.

Comparing these two tables, the greatest differences are EDUCATION and ROMANTIC LOVE that leap high (15 places) and MORTALITY that descends (18 places). Educations' leap should not surprise us, given that certification has required a major, long term, successful, affective education experience. It is easy to see education as having more importance to them than to "most humans". MORTALITY's descent is more interesting in a sample of respondents, many of whom presumably deal with other people's deaths frequently, and would probably claim to have faced their own death in some important way. The leap of ROMANTIC LOVE to third probably suggests that while respondents appreciate that it has been a powerful experience for them, they don't typically consider ROMANTIC LOVE as spiritual in their own most familiar sense of the word.

C – Evaluative Self-Assessment: Part I of the survey asked respondents to assess the degree of their own "experience/achievement" in each of the arenas. The resultant ranking in column three (Table One) can be seen as an indicator of which arenas these clinicians have valued highly enough to invest themselves in, of how they see themselves as having most successfully spent the own spiritual life energy. To that degree it is at least an INDICATOR by their behavior, of which arenas have been most important to them.

The top three here are not surprising in a sample who see themselves as successful in their primary WORK, of HELP-GIVING, many through persistent learning of the own as well as Education of others to care more effectively. Note also that the three arenas of relating to one's parents rank here even lower than they did in importance in Part II. Pastoral clinicians have predominately not been impressed by their positive experience of their own parents. Their relationship to a FAITH COMMUNITY also slides significantly in rank in this table as compared to Tables One and Two. While 7.37 on a ten point scale could still be seen as successful in relating to a church, it is definitely not overwhelming in a sample of clergy, apparently reflecting the somewhat peripheral relationship many spiritual clinicians maintain with the religious bodies that endorse them.

There is no obvious point at which to most appropriately divide primary from secondary arenas. However, if we consider which arenas appear in the top half of all three rankings, and those in the top half of two of the three ranking lists, then these arenas would be considered primary:

Top half, all three rankings	Top half, two of three rankings
Emotional Self-Care	Mortality
Personal God	Physical-Self Care
Friendship	Help Getting
Help giving	Faith Community
Work	Romantic Loving
Sexuality	Education
	Parenting

Table Five: Thirteen Primary Spiritual Arenas

These thirteen arenas can be considered primary for these respondents and the remaining eleven, secondary. On the other hand, dividing them this way leaves out NATURE, from which all spirituality probably emanates! It also leaves out major LOSSES, events which more clearly that anything else shows us most obviously and painfully that there are powers far greater than ourselves. An also incredibly, CHILDHOOD RELATIONSHIP WITH PARENTS would be gone, our first relationships with powers greater than ourselves! Clearly it would be more functional to simply remove the lowest ranking arenas designating them as secondary, (i.e., athletics, hobbies, aging, adult

relationship with parents {which still would be gone}, parents modeling partnership, and harmony with the forces of the universe) if there were any reason at all to reduce the list from 24.

One could guess that there are great differences in these rankings when considered from specific ideologies and other sub-cultures. For example the following four arenas would no doubt appear much higher in rank, if certain other groups were more closely studied:

Social Activists – HUMAN COMMUNITY

Psychotherapists –CHILDHOOD RELATIONSHIPS WITH ONE’S PARENTS

Women – CREATIVITY

Scientists and Buddhists– HARMONY WITH THE FORCES OF THE UNIVERSE

Question 2: Testing for “Epigenesis”

The principle of epigenesis was first used as a human development concept by Erik H. Erikson in the early 1950s relative to psychobiosocial life stage progress^{vii}. It states summarily that while each developmental crisis or project is operative to some degree in every stage of life, one particular project tends to emerge as primary in each era. We can assume that spiritual arenas are somewhat stage specific due to their biological inherency in certain times of life, e.g., CHILDHOOD RELATIONSHIP WITH PARENTS and PARENTING. But is there a series of arenas that emerge in turn through the life cycle, observable in the development of these clinicians as they remember it?

Arena	Child	Adolesce	Yng Adult	Mid-Adult	Middle Age	Maturity	Old Age
FRIENDSHIP n	352	495	353	300	218	67	32
	11.32	14.43	9.66	8.35	8.73	8.62	10.49
PERSONAL GOD	229	402	386	343	249	73	32
	7.24	11.72	10.56	9.55	9.98	10.04	10.49
EMOTIONAL SELF	46	72	180	266	171	49	21
	1.45	2.10	4.92	7.41	6.85	6.31	6.89
HELP GIVING	26	66	179	268	171	46	
		.82	1.92	4.90	7.46	6.85	5.92
WORK	37	79	269	294	177	39	
	1.17	2.3	7.36	8.13	7.09	5.2	1.97
SEXUALITY	20	308	291	192	104	20	5
	0.63	8.98	8.00	5.34	4.17	2.57	1.64
EDUCATION	303	273	297	122	41	8	3
	9.90	7.96	8.12	3.40	1.64	1.03	.98
FAITH COMM	252	261	268	191	120	44	14
	8.23	7.61	7.33	5.32	4.81	5.66	4.59
HELP GETTING	176	81	132	165	85	18	8
	5.75	2.36	3.61	4.59	3.41	2.32	2.62
LOSSES	72	42	75	112	120	37	22
	2.28	1.22	2.05	3.12	4.81	4.76	7.21
PHYSICAL SELF	93	138	74	123	167	65	30
	3.04	4.02	2.02	3.42	6.69	8.37	9.84
ROMANTIC LOVE	5	278	444	298	154	37	6
	0.16	8.10	12.14	8.30	6.17	4.76	1.97
NATURE	192	148	92	99	78	15	4
	6.07	4.31	2.52	2.76	3.12	1.93	1.93
MORTALITY	14	12	11	60	95	52	35
	.46	.35	.30	1.67	3.8	6.9	11.48
PARENTING	102	26	213	364	120	15	4

	3.33	.76	5.83	10.13	4.81	1.93	1.31
CHILD /PARENT	487	133	104				
	15.4	5.3	2.34				
PARENT MODEL .	314	92	20	24	7	2	0
	9.9	2.68	.55	.67	.288	.26	0
ADULT /PARENT		26	104	201	61	7	2
		.76	2.84	3.39	2.44	.90	.66

Table Six: Mentions of Arenas as % of total mentions in that life stage.

Table Six presents the data from the results of all respondents to Part II of the survey instrument. For example, when all respondents considered what arenas had nurtured them spiritually before the age of 12, 352 of them mentioned Friendship, 229 mentioned Personal God, 303 mentioned Education and so on.

Graphing the six arenas with the most mentions by all respondents by developmental era, produces Figure One below.

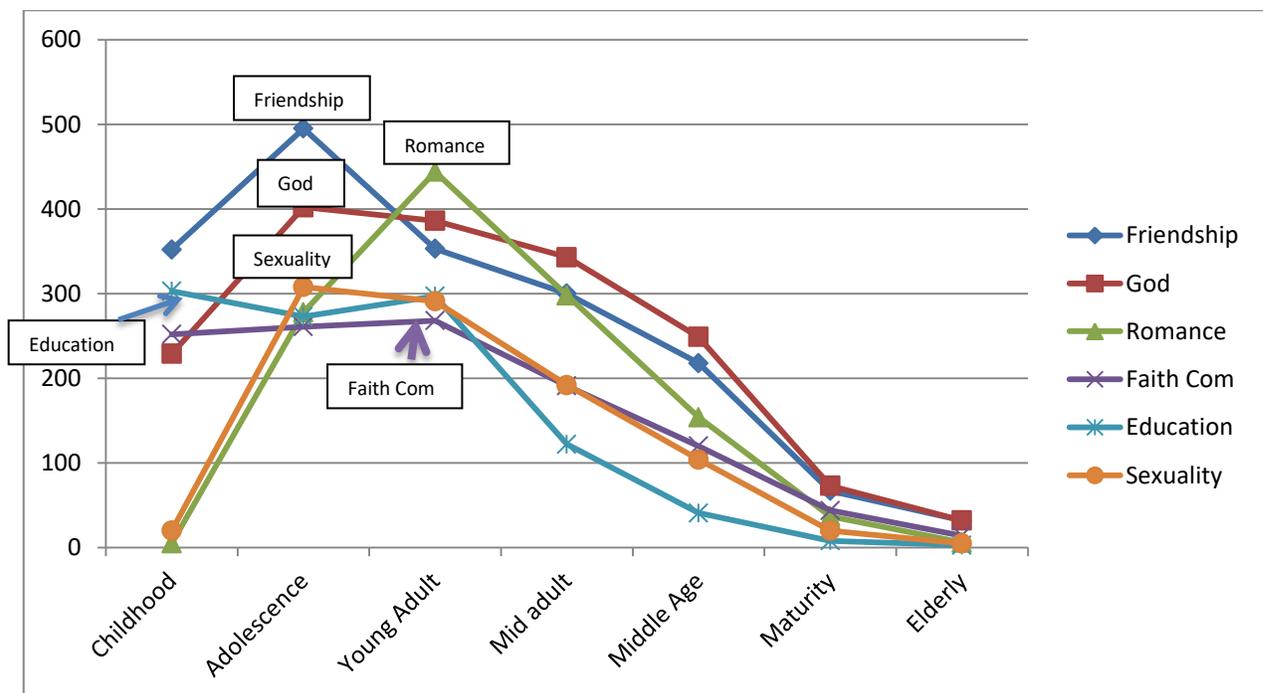


Figure One – Spiritual Epigenesis

Table 7 displays the total data from Part III of the survey, organized by life era. It summarizes how these respondents as a whole saw the arenas most operant for them in the various stages of their life so far in terms of Partnership Spirituality.

Column One for example, offers a summary of what respondents remember as actually having nurtured them spiritually before they were 12 years old. Note that while they did not see the arena RELATIONSHIP WITH ONE’S PARENTS as important conceptually, in Part II or as successful for themselves in Part I, when they focus on their own childhood, relating to parents individually and as models of partnership for them, they clearly see these arenas as some of the most important ones in early life.

Also worth comment is the appearance of PARENTING on the childhood list. It appears high enough to be likely caretakers at an early age, presumably of younger siblings, or in worst cases, of parents. This observation would be of interest to anyone familiar with the term “co-dependency”.

Referring to the **Spiritual Epigenesis, Figure One** that presents results from the data in Table Six: note that:

- a. PARENTING reaches an all-time low during adolescence, while SEXUALITY is at its peak, with ROMANTIC LOVING high and ascending. Is there any wonder it is persistently difficult to influence teenagers about the responsibility they have to offspring they may conceive before they are ready to parent them?
- b. Respondents saw PERSONAL GOD as primary in adolescence more than in any other stage of life.
- c. FRIENDSHIP and PERSONAL GOD remain persistently high throughout the life cycle
- d. MORTALITY is extremely low during “invincible adolescence” and young adulthood, and rises as death is seen approaching, peaking thus in old age. PHYSICAL SELF CARE follows a similar path except for a minor peak in self-absorbed adolescence.
- e. The hypothesis that ROMANTIC LOVE, SEXUALITY, PARENTING, AND CHILDHOOD RELATIONSHIP TO PARENTS are quite stage specific is confirmed, as they all show definite peaks in certain stages of life.
- f. FAITH COMMUNITY, NATURE, and EDUCATION decline consistently through life after childhood highs, presumably because more personal arenas crowd them out.
- g. WORK, HELP GIVING, and EMOTIONAL SELF CARE are highest during the middle decades when personal vigor is highest.

Figure One, illustrated in the Spiritual Epigenesis graph, is perhaps the most interesting of the study, tending to boldly confirm spiritual epigenesis among these respondents. It illustrates the relationships between the primary spiritual arenas over the life cycle. Note that in childhood, RELATIONSHIP TO PARENTS clearly peaks above all else. In adolescence only one arena exceeds PERSONAL GOD, i.e., FRIENDSHIP. In young adulthood and mid-adulthood, again only one arena in each exceeds PERSONAL GOD, i.e., ROMANTIC LOVE and PARENTING respectively. In middle age and maturity, PERSONAL GOD tops all else. And in old age again one arena is higher than PERSONAL GOD, i.e., MORTALITY. A poetic interpreter may surmise that life appears to present itself at least one bold invitation in each era of life, to learn about partnerships as to partner a bit better with a PERSONAL GOD.

There is definite suggestion here that pastoral care can be somewhat targeted or focused in content at times, based on the life stage of the patient, parishioner or counselee. In utilizing a Partnership Spirituality assessment framework one could expect to find pain or celebration in specific arenas during specific stages of life. In addition to whatever else may be emergent in the spiritual life of a patient, some attending to these primary arenas is indicated. From preachers to pediatric chaplains to religious educators, there is some necessary appreciation and depth of understanding of the particular spiritual arenas most likely primary during the present stages of life of people with whom

we work in order to meet them spiritually. And there is ample reason to be open to specific remedial work on unfinished business of arenas past.

Question Three: Are there statistically significant spiritual differences among the five professional associations

Tables 7-10 show responses of the five professional associations studied, to the “conviction of importance” (Part II) and “perception of success” (Part I) aspects of the survey. The Spearman rank order correlation coefficient (rho) was calculated to determine the degree of correlation between what arenas respondents value and how well they see themselves doing in those arenas. Note that the rho is quite low for all but the NACC.

A.M.H.C. RANK ORDER - MEAN RESPONSE

Conceptual		Self-evaluative	
PERSONAL GOD	9.00	HELP GIVING	8.66
EMOTIONAL SELF	8.68	WORK	8.55
FRIENDSHIP	8.43	NATURE	8.48
LOSSES	8.13	EDUCATION	8.40
CHILDHOOD/PARENT	8.00	PERSONAL GOD	8.33
FAITH COMMUNITY	8.00	SEXUALITY	8.32
WORK	7.94	FRIENDSHIP	8.18
SEXUALITY	7.88	MORTALITY	8.02
HELP GIVING	7.87	EMOTIONAL SELF	7.94
PHYSICAL SELF	7.87	LOSSES	7.93
HELP GETTING	7.80	FAITH COMMUNITY	7.92
HUMAN	7.78	PHYSICAL SELF	7.85
MORTALITY	7.72	PARENTING	7.81
HARMONY/UNIVERS	7.65	HUMAN COMMUNITY	7.79
ROMANTIC LOVING	7.56	ROMANTIC LOVING	7.73
NATURE	7.49	CREATIVE ENDEAVOR	7.45
PARENTING	7.44	HELP GETTING	7.37
CREATIVE ENDEAVOR	7.25	AGING	7.37
EDUCATION	7.00	HOBBIES	7.23
AGING	6.92	HARMONY/UNIVERSE	7.07
HOBBIES	6.86	CHILDHOOD/PARENT	6.84
ADULT/PARENT	6.78	ATHLETICS	6.47
PARENT/MODEL	6.62	ADULT/PARENT	6.13
ATHLETICS	4.44	PARENT/MODEL	5.31

Table 7: Spearman rho -rank order correlation coefficient 0.551

N. A. C. C.
RANK ORDER MEAN
RSPONSE

Conceptual		Self-Evaluative	
PERSONAL GOD	9.29	PERSONAL GOD	9.30
FRIENDSHIP	9.03	FRIENDSHIP	9.06
EMOTIONAL SELF	9.03	NATURE	8.88
LOSSES	8.78	WORK	8.65
PHYSICAL SELF	8.56	EDUCATION	8.58
FAITH COMMUNITY	8.41	FAITH COMMUNITY	8.41
HELP GETTING	8.36	HELP GIVING	8.41
MORTALITY	8.30	LOSSES	8.22
HELP GIVING	8.26	EMOTIONAL SELF	8.21
SEXUALITY	8.22	MORTALITY	8.18
HUMAN COMMUNITY	7.92	HELP GETTING	8.11
NATURE	7.84	SEXUALITY	7.90
HARMONY/UNIVERSE	7.76	PHYSICAL SELF	7.80
AGING	7.76	HUMAN COMMUNITY	7.63
CREATIVE ENDEAVOR	7.69	CHILDHOOD/PARENTS	7.48
EDUCATION	7.59	CREATIVE ENDEAVOR	7.37
WORK	7.56	HARMONY/UNIVERSE	7.33
CHILDHOOD/PARENT	7.52	AGING	7.30
ADULT/PARENT	7.45	ADULT/PARENT	6.69
PARENT/MODEL	6.64	PARENT/NODEL	6.42
HOBBIES	6.57	HOBBIES	6.36
PARENTING	6.51	ATHLETICS	5.41
ROMANTIC LOVING	6.40	ROMANTIC LOVE	5.19
ATHLETICS	4.04	PARENTING	3.98

Table 8: NACC Spearman rho - rank order correlation coefficient 0.746

A.P.H.A.
RANK ORDER - MEAN RESPONSE

Conceptual		Self-Evaluative	
PERSONAL GOD	8.82	HELP GIVING	8.68
EMOTIONAL SELF	8.60	WORK	8.45
LOSSES	8.47	NATURE	8.42
FRIENDSHIP	8.42	PERSONAL GOD	8.31
MORTALITY	8.12	MORTALITY	8.08
HELP GIVING	8.09	SEXUALITY	8.07
FAITH COMMUNITY	8.00	EDUCATION	8.00
PHYSICAL SELF	7.81	FRIENDSHIP	7.99
WORK	7.79	PARENTING	7.81
CHILDHOOD/PARENT	7.79	EMOTIONAL SELF	7.76
HELP GETTING	7.78	ROMANTIC LOVING	7.76
SEXUALITY	7.75	PHYSICAL SELF	7.69
HUMAN	7.71	FAITH COMMUNITY	7.40
AGING	7.62	CREATIVE ENDEAVOR	7.35
ROMANTIC LOVING	7.55	AGING	7.20
CREATIVE ENDEAVOR	7.55	HELP GETTING	7.18
PARENTING	7.33	HUMAN COMMUNITY	6.98
NATURE	7.30	LOSSES	6.85
EDUCATION	7.05	CHILDHOOD/PARENT	6.65
HARMONY/UNIVERSE	6.48	HOBBIES	6.58
ADULT/PARENT	6.95	HARMONY/UNIVERSE	6.48
PARENT/Model P	6.62	ATHLETICS	6.11
HOBBIES	6.42	ADULT/PARENT	5.42
ATHLETICS	4.14	PARENT MODEL P	5.38

Table 9: APHA Spearman rho = 0.526

Convictions of Importance vs. Impressions of Self-Success

ACPE

AAPC

Conceptual		Self-Evaluative		Conceptual		Self-Evaluative	
EMOTIONAL SELF	8.61	HELP GIVING	8.65	EMOTIONAL SELF	8.62	HELP GIVING	8.85
LOSSES	8.31	EDUCATION	8.59	LOSSES	8.35	WORK	8.69
PERSONAL GOD	8.31	WORK	8.32	FRIENDSHIP	8.29	PARENTING	8.53
FRIENDSHIP	8.27	FRIENDSHIP	8.29	MORTALITY	8.19	EDUCATION	8.51
PHYSICAL SELF	8.03	NATURE	8.09	PERSONAL GOD	8.15	SEXUALITY	8.18
HUMAN COMM	8.03	SEXUALITY	7.98	PHYSICAL SELF	8.05	FRIENDSHIP	8.14
HELP GIVING	7.98	EMOTIONAL SELF	7.92	HELP GIVING	7.99	ROMANTIC LOVE	8.08
HELP GETTING	7.95	HELP GETTING	7.91	HELP GETTING	7.91	NATURE	8.00
MORTALITY	7.88	ROMANTIC LOVE	7.74	CREATIVE ENDE	7.87	HELP GETTING	7.98
SEXUALITY	7.85	LOSSES	7.72	SEXUALITY	7.85	EMOTIONAL SELF	7.90
FAITH COMM	7.74	MORTALITY	7.63	WORK	7.85	LOSSES	7.82
WORK	7.71	PHYSICAL SELF	7.51	HUMAN COMM	7.84	MORTALITY	7.72
CREATIVITY	7.65	PARENTING	7.47	HARMONY/UNIV	7.74	HUMAN COMM	7.67
CHILD/PARENT	7.47	PERSONAL GOD	7.44	FAITH COMM	7.68	PHYSICAL SELF	7.55
ROMANTIC LOVE	7.33	CREATIVE ENDEV	7.28	PARENTING	7.62	CREATIVE ENDEV	7.51
NATURE	7.33	HUMAN COMM	7.27	CHILD/PARENT	7.61	PERSONAL GOD	7.48
HARMONY/UNIV	7.30	AGING	7.06	AGING	7.56	AGING	7.36
AGING	7.27	FAITH COMM	7.00	NATURE	7.53	FAITH COMM	7.23
PARENTING	7.05	HOBBIES	6.65	ROMANTIC LOVE	7.39	HARMONY/UNIV	7.09
EDUCATION	6.87	CHILD/PARENT	6.55	EDUCATION	7.09	HOBBIES	6.55
ADULT/PARENT	6.67	HARMONY/UNIV	6.46	ADULT/PARENT	6.66	CHILD/PARENT	6.54
HOBBY	6.49	ATHLETICS	6.34	HOBBIES	6.38	ATHLETICS	6.39
PARENT/MODEL	5.88	ADULT/PARENT	5.96	PARENT/MODEL	5.70	ADULT/PARENT	6.20

Table 10: ACPE and AAPC Rank Order – Spearman Rho=

Some differences in spiritual style are suggested when perusing these columns juxtaposed. Figures 5-15 graph relationships between associations as to how they responded on this survey. The chi-square technique was utilized to analyze the frequency distributions of responses in order to determine which of the differences would be considered statistically significant. Tables 18-19 show the results of these tests of significance.

Considering all three parts of the survey, conceptual, evaluative and developmental, a summary sketch of how respondents of each professional association differ from the other associations would need to include observations from this survey that:

- a. NACC respondents as a group see FRIENDSHIP and ADULT RELATIONSHIP TO ONE'S PARENTS as more important than the other groups do, and ROMANTIC LOVING as much less important. In looking at themselves they see that they have had partnership modeled for them more effectively by their parents than the other groups have, that they have been better as partnering with NATURE and a FAITH

COMMUNITY than the other groups, and less nurtured spiritually by ROMANTIC LOVE and PARENTING.

- b. FRIENDSHIP has been experienced as more consistently spiritually nurturing for them than other groups, that ROMANTIC LOVE was much less operant as a spiritual arena during the middle decades of life than for members of the other associations, and that PARENTING was never very spiritually nurturing for them at all. They also remember PHYSICAL SELF CARE as a more consistent experience than other groups remember it, WORK as dropping in importance earlier in life, and HELP GETTING as emerging later in life yet as even more important to them than the others remember it for themselves.
- c. AAPC respondents conceptually see less spiritual value in FAITH COMMUNITY involvement, partnership with a PERSONAL GOD, and ADULT RELATIONSHIP TO ONE'S PARENTS than the other groups do. They see ATHLETICS and CREATIVITY as more important to spirituality than other groups, though still valuing ATHLETICS quite low. Developmentally they remember maintaining WORK and SEXUALITY as nurturing spiritual arenas a bit longer in life than the other groups and seem to “get religion” for a while in maturity, as FAITH COMMUNITY and PERSONAL GOD rise in value before descending again in old age.
- d - AMHC respondents differ mainly in the arena of HELP GETTING. Conceptually they see less value in it as a spiritual arena, and evaluative they see themselves as less successful at achieving/experiencing it during their lives thus far. Developmentally, older AMHC respondents tend to remember experiencing the HELP GETTING, arena along with PERSONAL GOD, FAITH COMMUNITY, and PHYSICAL SELF CARE as having been more important to them later in life than the other groups do.
- e - ACPE respondents conceptually see less spiritual value in partnering with a PERSONAL GOD, in CREATIVITY, and in ATHLETICS than the other groups do. In looking at themselves in an evaluative way they see less success in relating to a PERSONAL GOD than all groups except the AAPC to whom they are comparable in that arena. Developmentally their memories differ little from the other groups as a whole with minor exceptions that their older respondents tend to remember maintaining ROMANTIC LOVE as a spiritual experience a bit longer in life, and relating to a personal God as less nurturing a bit longer too.
- f. APHA respondents differ conceptually from the other groups primarily in that they are more appreciative of one's PARENTS MODELING PARTNERSHIP as a spiritual arena. In their own spiritual assessment they see themselves as less successful in having achieved spiritual nurturance through EDUCATION and having made a contribution to the HUMAN COMMUNITY. Developmentally there appears to be no remarkable difference between these respondents and the other groups.

Question 4: Gender Differences

How did males and females differ in their assessing the importance of each arena to spirituality and their own experience/achievement in each life partnership? The chi-squares technique was used to examine the frequency distributions of male as compared to female respondents to Part I and Part II of the survey instrument. Sketches of how male and female respondents differ in responses to this survey would need to include:

- A - The most significant differences between these men and these women conceptually were that men rated domestic relationships higher in importance to spirituality than women did. The biggest difference was in PARENTING and second was in the ROMANTIC LOVE arena. Women relate more to ADULT RELATIONSHIP TO PARENTS and CREATIVE ENDEAVOR as spiritual than men do, and men appreciate making friends with the natural AGING process more highly than women.
- B - Experientially women see themselves as having had very little success with the same domestic relationships, ROMANTIC LOVE and PARENTING. They claim more achievement of spirituality through FRIENDSHIP and FAITH COMMUNITY involvement than the men. Men also see themselves as having had more successful experiences with ATHLETICS than women claim, and a bit more success with HOBBIES. One is tempted here to follow the typical male habit of considering the men in the study to be normative and thus ask why the women exhibit a much less domestically relational spiritual style than the men. It would be equally legitimate to ask why men see themselves as less successful at FRIENDSHIP and involvement with a FAITH COMMUNITY. There are no clear indications to either set of questions in the data, and perhaps such interpretations would be better left to articulate men and women spiritual clinicians themselves anyway.
- C - One fairly obvious suggestion about the former however, would arise from women's professional struggles over the past few decades. They are a minority in what may be their most highly valued professional associations, having only in the past decade distinguished themselves, fighting their way through certification processes developed by and for men. They are for the most part career women who have struggled even more painfully than men, to juggle home and profession. It would be most interesting to know if spiritual assessment of the general female population of the country would reflect similar disenchantment with romantic love and parenting as spiritual experience, with higher valuing of networking with each other in friendship and church. Would two primary styles of women's spirituality emerge, one more domestic, romantic, and family oriented creative; the other favoring personal growth, friendship, church and outward oriented creativity?

CONCLUSIONS

1. The high percentage of responses to this survey is significant in itself, indication a degree of current interest by top pastoral clinicians and educators in the whole nebulous concept of spirituality. It also hints at a positive response to the language of partnership spirituality in which the survey instrument was written. Is the corner being turned on our taking the spiritual

dimensions of our helpes as seriously as the DSM II and emotional accessibility? Are pastoral professionals in specialized settings seeing themselves more as SPIRITUAL CLINICIANS? Is the ground becoming more fertile for development of a language with which to converse about spirituality that fits observable realities and provides points of contact with peer pastoral people and other disciplines?

2. A case can be made for the existence and thus usefulness of Primary Spiritual Arenas in making pastoral assessments. As one therapist initially read the top 13 arenas (table four) she remarked to a peer, “These are all the major issues of a suicidal patient I’m working with”. As a framework for listening to people’s stories, they offer a minimal yet organizing structure for identifying major areas of spiritual discomfort or spiritual distress, and a direction for addressing these as dysfunctional partnership aspects of life.
3. Spiritual epigenesis has been validated solidly enough to be attending to by preachers, teachers, administrators and pastoral counselors, in making decisions about the CONTENT of pastoral contacts in various developmental eras. If preachers for example, cannot speak with usefulness about friendship, romantic and family relationships to people in their teens, twenties and thirties, can they spiritually meet them at all? Aren’t the Bible and church traditions filled with stories and wisdom about these relationships that are simple enough to enhance partnership life when utilized prescriptively and creatively?
4. Professional pastoral associations both differ significantly and agree considerably in their convictions of what is important to spirituality for most people, and in what they see as having been their own success and mediocrity in spiritual experience. These associations could almost be said to exhibit different “spiritual styles”, though that term may be most appropriately used to describe different individuals than enduring spiritual characteristics of large associations.
5. Men and women differ significantly in their responses to the partnership arenas of this study. Women’s style favors networking among friends, church and a personal God, while men tend to prefer domestic relationships or romantic love and parenting.
5. Several other arenas worth utilizing in this type of research and theory have emerged in the course of this project. The major one’s include:
 - A – SELF TREASURING – Coming to prize your own person with its gifts and limitations
 - B – RELATIONSHIP TO THE MATERIAL WORLD – Getting, having, keeping, and enjoying material things and how they can feed your spirit without excesses of greed and grandiosity
 - C – SOLITUDE – Relating with integrity to your own soul, i.e., the deepest recesses of your own person
 - D – GRANDPARENTING – Letting yourself be taught to love anew by the free love of grandchildren without the responsibility of disciplining them

E – LIFE SPACE DEFINITION – Nesting, surrounding yourself with what feeds you, i.e., with open space, tasteful class, rustic nostalgia physical comfort, etc.

F – SIBLING RELATIOSHIPS – The first peer sharing that tends to endure, positive and negative, throughout life

7. Further study utilizing the concepts of Partnership Spirituality would be, at the very least interesting. How does the existing but nebulously defined discipline of clinical spirituality relate to such similar realities as ecclesiastical spirituality, sacramental spirituality, creation spirituality and social activist spirituality? A study of the nation's parish pastors would be interesting if not useful, especially if compared to similar studies of various other professional groups such as nurses, psychologists, and educators, as well as the general public. Perhaps insight in these directions would further collaborative efforts between such diverse yet similar groups.

Footnotes

ⁱ Graduate Theological Foundation, South Bend IN.

ⁱⁱ Paul W. Pruyser (1976) *The Minister as Diagnostician: Personal Problems in Pastoral Perspective*, Louisville KY, Westminster John Knox Press

ⁱⁱⁱ Elizabeth McSherry, Daniel Kratz, and William A. Nelson, "Pastoral Care Departments: More Necessary in the DRG Era?" *HCM Review* 11 (1) (1986: Aspen Publishers, Inc.) pp. 47-59. In a two-year study, Dr. Elizabeth McSherry studied 700 coronary patients admitted to the Brockton/West Roxbury (Virginia) Center. The Center dealt with some of the most costly and complicated procedures, such as bypass operations, valve replacements and open heart surgery — in addition to patients undergoing care for heart attacks and chronic heart disease. The patients were divided into two groups. One group had daily visits by a chaplain. The other group saw a chaplain on an average of three minutes during their entire hospital stay. The study found that the patients who had the most contact with the chaplains were released from the hospital an average of two days sooner than patients who did not receive regular visits. Dr. McSherry estimated that the cost of the chaplain visits was no more than \$100 per patient. But the savings that came from letting a patient go home earlier amounted to \$4000 a day. And the group visited by the chaplains also had fewer complications after surgery.

^{iv} Pierre Teilhard de Cahardin, (2015), *The Phenomenon of Man*, first published in 1955 in France by Éditions du Seuil.

^v Ernest Kurtz (2010) *Not God: A History of Alcoholics Anonymous*. Center City MN: Hazelden. (First published in 1976.)

^{vi} Letty M. Russell (1979) *The Future of Partnership*, 1st edition, and (1981), *Growth in Partnership*, first ed., Louisville KY, Westminster John Knox Press

^{vii} Erik Homburger Erikson (1950) *Childhood and Society*, New York: W.W. Norton & Co., p. 70 ff.

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