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Assessing Religion and Spirituality in Counseling: Some Reflections and Recommendations

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In this article, the importance of conducting a religious and spiritual assessment in counseling is considered. Some essential dimensions of religion and spirituality to assess are described. The authors recommend assessment questions that can be asked during clinical interviews or included on written intake questionnaires. They also briefly describe a few standardized religious and spiritual assessment instruments. Finally, they offer suggestions for conducting spiritual assessments in school settings.

espite growing professional awareness of the importance of religion and spirituality in counseling and for psychological functioning (Kelly, 1995; Miller & Thoresen, 2003; Richards & Bergin, 2005), clients' religious backgrounds and spirituality are often overlooked during the assessment phase of the counseling process (Hathaway, Scott, & Garver, 2004). We believe that religious and spiritual assessment is relevant to counseling for several reasons. By understanding clients' spiritual worldviews, counselors are better able to empathically understand them. Misunderstanding clients' worldviews can undermine the therapeutic relationship, and mutual understanding may facilitate positive counseling outcomes. Assessing clients' spirituality enables counselors to better respect the religious values of their clients. Spiritual assessment can also help counselors to decide if spiritual interventions would be indicated with clients and, if so, which ones would be most helpful. In addition, such assessment can help counselors determine if clients have unresolved spiritual concerns or needs that should be addressed in counseling. Finally, spiritual assessment helps counselors determine whether clients' religious and spiritual beliefs are deleterious to their mental health or if they could be used as a resource to promote healing (Richards & Bergin, 2005).

A Case Vignette

The following composite case vignette, based on actual clients we have assisted, illustrates why conducting a religious and spiritual assessment may be helpful.

Imagine that you are providing counseling to a 25-year-old White man, whom we call Bill, who is experiencing a major depressive episode after his wife of 3 years has left him and filed for divorce. Your assessment reveals that he is at high risk for suicide. He has a specific and lethal plan for suicide, the method is easily available to him, and at times he has a fairly high intent to act on it. Your assessment also reveals that Bill is socially isolated, having just moved to this city about 6 months ago when he accepted a job promotion. Bill also manifests some signs of dependent personality characteristics.

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First assume that you also know that Bill does not believe in God and has no religious affiliation. What treatment plan or approach would you propose for Bill? Now assume that Bill does believe in God and that until he moved to this new city, he had been actively involved in a Christian church. Would your treatment plan or approach for Bill change at all?

There is no "right" way to handle this case. But the details of the case should illustrate that gathering some information about Bill's religious and spiritual background and beliefs may be relevant to treatment planning. Although a counselor's general approach to working with clients is unlikely to change significantly based on the client's religious orientation, there may be considerable variation in how the counselor implements specific interventions and discusses and resolves specific issues. For example, with Bill, the general approach might include helping him (a) identify reasons to continue living, (b) obtain more social support, and (c) obtain an appropriate prescription for antidepressant medication. Knowing that Bill is a Christian, the counselor may help him consider some religious and spiritual "reasons to live" that could help sustain him (e.g., God wants us to endure trials because they help us grow spiritually.). Helping Bill connect with members and leaders of his church may also be a helpful way of quickly increasing the social support in Bill's life, support that would not be so readily available if Bill was not religious. It is also possible that Bill's religious beliefs may influence whether he is willing to try antidepressant medication. The counselor might also consider ways in which Bill's spirituality may be contributing to his distress (e.g., religious beliefs or prohibitions about divorce). By assessing the influence of Bill's religious community and personal spirituality on his life, his counselor would likely be in a better position to help him cope with and overcome his depression, suicidal ideation, and grief.

Definitions of Reliaious and Spiritual

Both religion and spirituality are widely recognized as complex, multidimensional phenomena (Cook, 2004; Hill & Hood, 1999; Moberg, 2002). Given the complexity of these constructs, perhaps it is not surprising that there is much diversity and some controversy among professionals about how the terms *religious* and *spiritual* should be defined, operationalized, and measured (Cook, 2004; Moberg, 2002; Zinnbauer, Pargament, & Scott, 1999). It is beyond the scope of this article for us to attempt to describe or resolve the confusion or controversy associated with these terms, but we do describe our current personal working definitions of them and explain how our understanding of these constructs influences our approach to religious and spiritual assessment.

When we use the terms *religious* and *religiousness*, we are referring to beliefs, practices, behaviors, and feelings that are expressed in institutional settings or ways associated with a denominational affiliation, including attendance at church, synagogue, or mosque; participation in public religious rituals; participation in public prayer; and publicly reading scriptures or sacred writings. When we use the terms *spiritual* and *spirituality*, we mean "thoughts

and feelings of enlightenment, vision, harmony with truth, transcendence, and oneness with God, nature, or the universe" (Richards & Bergin, 2005, p. 22). *Spirituality* may also include personal experiences, such as feeling compassion, hope, and love; receiving inspiration; feeling enlightened; being honest and congruent; and feeling a sense of meaning and purpose in life (Richards, Hardman, & Berrett, 2007).

We agree with those who have argued that polarizing religiousness as an institutional activity and spirituality as an individual expression is an oversimplification of their meanings (Pargament, 1999; Zinnbauer et al., 1999). Pargament suggested that "Virtually every major religious institution is quite concerned with spiritual matters" and "every form of religious or spiritual expression occurs in a social context" (p. 9). However, studies have shown that the main criterion that many people use to distinguish between religious and spiritual expressions is whether they occur in an institutional or in an individual context (Zinnabauer et al., 1999). Many people refer to themselves as being spiritual but not religious, meaning that they are not affiliated with an organized religion, but they do feel connected to God or other sacred things (Zinnabauer et al., 1999). Thus, it is often useful to distinguish between the terms in this manner.

In a counseling context, we have found it helpful to invite clients to consider a variety of possible definitions for the terms *religious* and *spiritual* to give them a broad and secure context from which to determine what these terms mean to them. We are careful not to impose our own definitions on our clients, but prefer to encourage clients to explore and clarify what the terms mean for them as we seek together to understand the roles of religion and spirituality in their life.

Because of the complexity, diversity, and controversy surrounding the constructs of religion and spirituality, we find it a challenging task to make recommendations to counselors concerning how to best conceptualize and assess clients' religiousness and spirituality. In this article, we offer some recommendations and cautions when doing so, but make no claim that we offer the final words on this topic. We hope the article provides helpful information to counselors, stimulates their thinking about religious and spiritual assessment, and perhaps serves as a catalyst to help them clarify their own approach to assessing the religious backgrounds and spirituality of their clients.

Process of Spiritual Assessment

Some scholars have recommended performing a multidimensional and multilevel client assessment (Hodge, 2005; Richards & Bergin, 2005). Through such a process, counselors may inquire about the various dimensions of clients' lives, including their emotional, physical, relational, occupational, and spiritual well-being. Globally assessing multiple dimensions of clients' lives during the first session or two of counseling has been referred to as a *Level 1 assessment* (Richards & Bergin, 2005). During a Level 1 assessment, counselors rely primarily on clients' self-perceptions and self-descriptions

of how they are functioning in each system of their life. This would help counselors to gain a global understanding of their client's spiritual worldview and the extent to which the client's religious background and spirituality may be relevant to the presenting problems and treatment planning.

When it seems relevant, counselors may then decide to perform more indepth Level 2 assessments of specific religious or spiritual dimensions. A Level 2 spiritual assessment involves examining specific dimensions of the client's religiousness and spirituality in greater depth. When clients provide information that indicates that spiritual concerns may be complicating their emotional issues, counselors may wish to explore these concerns further. For example, a client struggling with a generalized anxiety disorder might explain that she feels that if she saw God at the current moment, she would experience strong feelings of shame about her personal imperfections. This disclosure indicates that the client's view of God may be quite punitive. In this case, it may be important to examine her perception of God in greater depth to understand how it might interact with her psychological concerns.

Level 1 Assessment Issues

Counselors might obtain Level 1 spiritual information through intake questionnaires or counseling interviews, or the information may emerge as a natural development of the counseling process. Efficient intake questionnaires ensure that preliminary information on important aspects of the client's life is assessed at the beginning of counseling. Intake questionnaires can be completed by the client alone in the waiting room before the first counseling session as part of the introductory paperwork, or the counselor can go through the questions with the client. The following sample questions, adapted with permission from Richards and Bergin (2005, p. 238), can easily be incorporated into intake questionnaires or initial counseling interviews (Seligman, 2004).

- 1. Do you wish to discuss spiritual issues in counseling when relevant? If not, please disregard the following questions.
- 2. Do you believe in God or a Higher Power?
- 3. What is God like to you?
- 4. Is spirituality important to you?
- 5. Do you have a religious affiliation and, if so, how important is it to you?
- 6. Do you attend a church, synagogue, mosque, or another place of gathering?
- 7. How closely do you and your family follow the teachings of your religion?
- 8. How do you experience God's guidance in your personal life?
- 9. Are you aware of any spiritual resources or practices in your life that could be used to help you cope with or solve your problems? If so, what are they and how might they help you?
- 10. Is there anything related to your spirituality or religious community that concerns you?

- 11. Would you like your counselor to consult with your spiritual/religious leader if it appears this could be helpful to you?
- 12. Are you willing to consider trying religious and/or spiritual suggestions from your counselor if it appears that they could be helpful to you?

Another activity we have found to be valuable during a Level 1 assessment is to give clients a handout with various spiritual thoughts from wise people of different religious and spiritual traditions (Richards et al., 2007). The following are some examples:

The secret of health for both mind and body is not to mourn for the past, nor to worry about the future, but to live the present moment wisely and earnestly.—Buddha

My imperfections and failures are as much a blessing from God as my successes and my talents and I lay them both at his feet. —Gandhi

We must have the faith that things will work out somehow, that God will make a way for us when there seems no way. —Martin Luther King

I see God in every human being. When I wash the leper's wounds, I feel I am nursing the Lord Himself. Is it not a beautiful experience? —Mother Teresa

Counselors can develop their own list of such quotations. They are readily available on the Internet.

The handout of spiritual quotations helps clients to think about their spiritual beliefs and values. Counselors can ask clients to read the quotations and to pay attention to what impresses them as important. Questions such as the following invite reflection: "Which quote did you connect with the most?" "Which quote touched you in a special way?" "Which quote caused inspirational thoughts to come into your mind?" "Which quote resonated with you as something that is true or something that you believe in?" "Which quote seemed most important to you?"

Clients can then be asked to share with their counselor (or group) why a quotation is meaningful to them. As clients talk about their reactions to the quotations, counselors can gain some insight into their spirituality without asking clients to directly or explicitly describe their belief system. This assessment activity can be done individually or with a group. An additional benefit is that it enables clients to examine, share, accept, and embrace their own spiritual beliefs, as well as the beliefs of others.

Level 2 Assessment Issues

Level 2 assessments may be conducted during counseling interviews or by administering standardized assessment measures. A wide variety of instruments have been developed for studying religious variables, and many of these instruments have well-established psychometric properties (Hill & Hood, 1999; Miller & Thoresen, 2003).

Such instruments offer several advantages over interviewing. Standardized measures can help counselors assess specific dimensions of religion

and spirituality in considerable depth. They are also efficient because they can be completed by the client outside of the counseling session. Filling out such measures at leisure may enhance clients' capacity for self-exploration, introspection, and insight. Moreover, the normative data associated with standardized measures can help counselors understand how clients' experiences compare with those of others.

To be useful for counselors, measures of religiosity and spirituality should meet accepted standards for psychological tests, which include providing (a) evidence of reliability and validity, (b) adequate normative data, (c) information concerning the test's relevance to counseling, (d) clear administration and scoring instructions, and (e) a test manual. It is rare for measures of spiritual constructs to meet all of these criteria; however, many fulfill some of them (Richards & Bergin, 2005).

Psychologically Relevant Spirituality Areas and Associated Measures

Through experience, we have found that some dimensions of religiousness and spirituality are more clinically meaningful than others. In this section, we note some dimensions that may be important to assess during a Level 2 assessment and discuss some instruments that measure those dimensions. We refer readers to other publications that present helpful perspectives on additional dimensions and measures of spirituality that may be important to assess (e.g., Chirban, 2001; Gorsuch & Miller, 1999; Hall, Tisdale, & Brokaw, 1994; Hathaway et al., 2004; Hill & Pargament, 2003; Hodge, 2005; Joint Commission on Accreditation of Healthcare Organizations, 2008; Stanard, Sandhu, & Painter, 2000).

Religious Orthodoxy

Religious orthodoxy is the degree to which people believe in and adhere to the traditional doctrines and moral teachings of their religion. *Belief orthodoxy* refers to the degree to which people accept the doctrinal beliefs of their religion, and *behavior orthodoxy* is the degree to which they adhere to the moral teachings and spiritual practices taught by their religion (Richards & Bergin, 2005).

Clients' level of religious orthodoxy is relevant for counselors to assess for several reasons (Richards & Bergin, 2005). First, highly orthodox clients are more likely than less orthodox individuals to prefer counselors who share their religious beliefs (Worthington, 1988). If counselors do not belong to the same religious tradition as their orthodox clients, building trust and credibility can be more difficult (Worthington, 1988). Communicating respect for the religious beliefs and culture of such clients can be essential. Second, orthodox clients are more likely than less orthodox clients to view their religious beliefs as being relevant to their presenting problems. Thus, they are more likely to initiate discussion of religious issues during counseling. Third, the exploration of spiritual issues and the use of spiritual interventions are often more acceptable to and effective with orthodox clients. Less orthodox

or nonreligious clients may not wish to discuss religious or spiritual issues during counseling. Overall, therefore, assessing a client's degree of religious orthodoxy can help counselors determine whether religious and spiritual issues are likely to be an important part of their work with the client.

One measure of religious orthodoxy that can be useful with Christian clients is the Christian Orthodoxy Scale (COS; Fullerton & Hunsberger, 1982), a 24-item measure intended to assess the level of "acceptance of well-defined, central tenets of the Christian religion" (Fullerton & Hunsberger, 1982, p. 318). Internal consistency reliabilities for the COS ranging from .63 to .98 have been reported, and validity studies have provided evidence that the COS is correlated with belief in God, belief in Jesus Christ, and frequency of participating in or performing religious activities (Fullerton & Hunsberger, 1982). The COS is easy to score and interpret, although more normative data are needed for it to be more fully useful in counseling situations. Unfortunately, we are not aware of any measures of religious orthodoxy that have been constructed specifically for members of non-Christian religions.

Spiritual Identity

Spiritual identity refers to a person's sense of identity and worth in relation to God and of the place of the Divine in the universe (Richards & Bergin, 2005). People who believe that they are eternal spiritual beings who are creations of God tend to experience a sense of worth and potential, and they feel spiritually connected to God's love. Much has been written over the years about the centrality of identity in psychological and interpersonal functioning (e.g., Erikson, 1968; Rogers, 1961). Clients with a positive sense of spiritual identity are better able to cope with emotional challenges because of their faith in God's love, in their own capacities, and in the ultimate purpose in life's adversities (Poll, 2005). With such clients, counselors may find that their clients' feelings of spiritual worth can serve as a resource to help them cope with and endure painful challenges.

For religious and spiritual clients, a deficit in their spiritual identity may be clinically significant. Religious clients who do not feel God's love in their life and who doubt whether they have any special worth or purpose may be at risk for psychological problems, including depression, anxiety, eating disorders, and addictions (Richards & Bergin, 2005; Richards et al., 2007). Counselors may find that spiritual interventions such as prayer, meditation, spiritual imagery, and spiritual direction can help such clients become more aware of their spiritual identity and worth, which could improve their clients' psychological well-being.

We are not aware of any published standardized measures of spiritual identity. We recommend that counselors assess clients' spiritual identity informally during their counseling sessions by asking questions such as the following:

- 1. How involved is God in your life?
- 2. What happens to us after we die?

- 3. Could you briefly describe your relationship with God?
- 4. What is the role of your life in God's eternal designs?
- 5. How much worth do you have to God?
- 6. What do you believe is the spiritual meaning and purpose of your life?

Intrinsic Religious Commitment

Perhaps the most influential conceptualization of religious orientation has been Gordon Allport's theory of *intrinsic and extrinsic religious orientation* (Allport, 1950; Allport & Ross, 1967; Donahue, 1985). People with an immature, extrinsic religious orientation tend to "use religion for their own ends," and in contrast, people with a mature, intrinsic orientation "find their master motive in religion" (Allport & Ross, 1967, p. 434). Intrinsically religious people are committed to their religion and to God because they truly believe. Numerous research studies have provided evidence that intrinsic religiousness tends to be correlated with positive psychological and social functioning, whereas extrinsic religiousness tends to be uncorrelated or negatively correlated with positive functioning (Donahue, 1985; Payne, Bergin, Bielema, & Jenkins, 1991).

Allport's (1950) theory provides a useful starting point for counselors in considering whether their clients' religious orientation is authentic and adaptive. For example, clients who are involved in their religion solely because of the social benefits it affords, and not because they believe in its teachings, may feel a lack of congruence. Such clients may profit from exploring these feelings. In contrast, clients who are intrinsically religious are more likely to view their faith in God and religious beliefs as a source of meaning, support, and strength that could assist them during treatment.

The Religious Commitment Inventory–10 (RCI-10; Worthington et al., 2003) is a useful measure of intrinsic religious commitment for counseling situations. The RCI-10 is a 10-item measure that was developed specifically for use in counseling situations to measure "the degree to which a person adheres to his or her religious values, beliefs, and practices and uses them in daily living" (Worthington et al., 2003, p. 85). Factor analyses have revealed that the RCI-10 is composed of two subscales: (a) Intrapersonal Religious Commitment and (b) Interpersonal Religious Commitment. High internal consistency reliabilities (ranging from .87 to .96) and test–retest reliabilities (e.g., r = .84) have been reported for the RCI-10's total scale and subscales. The authors have provided considerable evidence supporting the validity and usefulness of the RCI-10 with both Christian and non-Christian, client and nonclient samples.

God Image

God image can be defined as an individual's conception of God or a Higher Power (Rizzuto, 1979). It is not uncommon for clients' God image to affect or to be intertwined with their presenting concerns and to influence their overall emotional well-being. Learning more about clients' God image can help mental health professionals gain insight into their clients' disorders and

determine whether their God image could become a resource in their healing process (Francis, Gibson, & Robbins, 2001; O'Grady & Richards, 2007). A relatively large body of research demonstrates that individuals' God image can relate to their self-conceptions, parental and other relationships, and emotional well-being and psychological functioning (Bassett & Williams, 2003; Francis et al., 2001; Lee & Early, 2000).

The God Image Inventory (GII; Lawrence, 1991) was developed for research and for clinical and pastoral use to measure an individual's inner or intuitive sense or image of God. The GII comprises six principal scales (Influence, Providence, Presence, Challenge, Acceptance, and Benevolence) and two control scales (Faith and Salience). It was standardized with a national sample of 1,580 respondents and has shown adequate reliability and validity. This 136-question instrument can be completed in about 20 minutes and is easily interpreted.

Value-Lifestyle Congruence

Value—lifestyle congruence refers to "the degree to which a person's lifestyle choices and behaviors are congruent with his or her professed moral, religious, and spiritual values" (Richards & Bergin, 2005, p. 229). According to a survey conducted by Jensen and Bergin (1988), the majority of mental health professionals agree that there are specific moral values that are important for a positive, mentally healthy lifestyle. The values that study participants endorsed as important for guiding and evaluating counseling with all or many clients included compassion, honesty, personal responsibility, appropriate guilt, self-discipline, marital fidelity, commitment to family, and forgiveness. Richards and Bergin have noted that incongruence between clients' values and lifestyle choices can create feelings of guilt and anxiety, often contributing to emotional disturbance and problems with interpersonal relationships.

There are insufficient standardized instruments designed to measure individuals' value—lifestyle congruence that would be suitable for counseling purposes. One published instrument that contains some items that assess clients' feeling of moral congruence is the Theistic Spiritual Outcome Survey (TSOS; Richards et al., 2005). We provide more information about this instrument in a later section of this article in the context of assessing the spiritual outcome of counseling. Counselors may also assess clients' moral congruence informally by asking questions such as the following:

- 1. How important are your moral values to you?
- 2. How congruent is your behavior with your moral beliefs?
- 3. What concerns, if any, do you have about your moral behavior?
- 4. Are there any areas of your life where you feel that you do not "practice what you preach"? If so, would you like to discuss them?

Spiritual Well-Being

Spiritual well-being has been conceptualized as having two main dimensions: (a) a sense of well-being in relation to God and (b) a sense of well-being in rela-

tion to life and its purpose (Ellison, 1983; Paloutzian & Ellison, 1991). Spiritual well-being is not considered to be the same thing as spiritual health, but as arising from an underlying state of spiritual health (Ellison, 1983). Assessing spiritual well-being can provide counselors with insight into whether clients perceive that God loves them, is concerned about their welfare, and is a source of support and comfort. Assessing whether clients feel a sense of life purpose, meaning, and satisfaction is also clinically relevant. Many psychologists have explained how one's sense of life purpose and meaning can have an impact on psychological well-being (Carlton, 1998; Frankl, 1985; Yalom, 1980).

The Spiritual Well-Being Scale (SWBS; Ellison, 1983; Paloutzian & Ellison, 1991) was developed to measure individuals' overall self-perception of spiritual well-being. It has two subscales: the Religious Well-Being subscale and the Existential Well-Being subscale. The SWBS has been widely used, is easy to understand, brief, and easy to score (Ellison & Smith, 1991). It was normed on a large, diverse sample and has adequate reliability and validity (Boivin, Kirby, Underwood, & Heather, 1999).

Religious Problem Solving

Research indicates that, in general, people who turn to their spiritual beliefs to help them cope tend to experience fewer anxious and depressive symptoms and to enjoy better overall health and emotional well-being (Plante & Sherman, 2001). Although many religious people turn to God during times of crisis, there appear to be clinically relevant differences in the manner or style in which they do so. Pargament et al. (1988) outlined three religious problem-solving styles: *self-directing*, *deferring*, and *collaborative*. Self-directing individuals remove God from the decision-making process and consider themselves independently responsible for solving their problems. People with a deferring style take little or no responsibility for solving their problems and rely completely on God to provide the solutions to their problems. Individuals with a collaborative approach to problem solving view themselves and God in a joint relationship and actively working together to solve problems.

Pargament et al. (1988) found that the deferring style was negatively associated with personal control, self-esteem, and tolerance of ambiguity, whereas both the self-directing and the collaborative styles were associated with personal control and self-esteem. In our own clinical work, we have found that some clients with extreme deferring styles expect God to guide them in every decision they make, and they feel incapable of making a decision if God has not told them what to do (O'Grady & Richards, 2007). Counselors may wish to assess their clients' religious problem-solving style to better understand how their clients function in their relationship with God and how this may influence their ability to cope with and resolve their difficulties.

The Religious Problem-Solving Scale is a 36-item instrument that assesses these three styles of religious problem solving (Pargament et al., 1988). It takes about 20 minutes to complete the full form of this measure, 10 minutes for the short form. It is easy to interpret and has been found to have strong reliability and validity among Presbyterian and Lutheran samples.

Normative data from samples representing greater diversity of religious orientations and ethnic backgrounds would increase the scale's usefulness for counseling.

Spiritual Assessment in Public School Settings

The Establishment Clause of the First Amendment to the Constitution of the United States has been the guiding principle for setting limits on what is considered appropriate behavior for professionals in public school settings (Hudgins & Vacca, 1995). It is clear from this clause that school counselors should not do anything with their clients that may give the impression that they are seeking to promote, endorse, or establish a particular religion. School counselors should not invite or allow clients to participate in religious practices with them. To avoid accusations of proselytizing, school counselors should also be cautious about expressing their personal religious beliefs to clients (Richards & Bergin, 2005).

Despite these restrictions, students, teachers and counselors do "enjoy constitutional protection of free speech and free exercise of religion" (Staver, 1995, p. 37). School counselors have the right to explore a client's spiritual issues and concerns when the client initiates the discussions or when the counselor believes that such issues are pertinent to the client's presenting concerns (Richards & Bergin, 2005). Counselors also have the right to engage in religious and spiritual assessments of their clients and to recommend spiritual interventions if this seems therapeutically warranted (Richards & Bergin, 2005; Sink & Richmond, 2004a).

The June 2004 issue of the *Professional School Counseling* journal provides help-ful rationales and guidelines to help school counselors effectively and ethically address students' spirituality in school settings (Sink & Richmond, 2004b). In our view, one implication of the articles in this special issue is that assessing the religious and spiritual dimensions of students' lives is essential. For example, MacDonald (2004) made the case that spirituality is an important aspect of students' diversity and development. To fully appreciate students' culture, worldview, and sense of identity, counselors must gain some understanding of their religious and spiritual background and beliefs.

In another article in this special issue, Sink and Richmond (2004a) defined *spirituality* as "a meaning-making activity" and described the following examples of manifestations of students' spiritual issues that these authors have observed in school settings:

a spiritual crisis after a disaster, grieving over a lost parent and wondering why God allowed this to happen, or the loss of meaning that may come with the breakup of a family or the untimely death of a classmate. Students also pose spiritual questions that may be related to their "inherited" religious belief systems, spiritual concerns about abortion and child-beating, understanding of the spiritual dimensions of Alcoholics Anonymous or Narcotics Anonymous, dabbling in witchcraft or devil worship, and their place in the world. (p. 291)

Sink and Richmond (2004a) described additional spiritual acts that students may engage in (e.g., meditating on nature, hiking in the woods, listening to inspiring music, singing, participating in counseling, and praying).

Other authors in the special issue also described various ways that spirituality may be manifested in students' lives, including beliefs about sexuality and pregnancy; interest in religious cults; attitudes about war and violence; students' feelings of hope, meaning, and purpose in life; and personal values about issues such as honesty, compassion, forgiveness, and respect for diversity (e.g., Ingersoll & Bauer, 2004; Lonborg & Bowen, 2004; MacDonald, 2004; Rayburn, 2004; Richmond, 2004; Sink, 2004; Wolf, 2004). The various descriptions of ways that religiousness and spirituality may be manifested in school settings are valuable. These descriptions may assist school counselors in their efforts to (a) recognize when students are grappling with spiritual issues and (b) assess the relevance of these issues to the students' emotional and interpersonal functioning.

Asking students questions about their religious background and spirituality when it seems relevant during counseling interviews may be the safest way to conduct spiritual assessments in the public schools. Giving children or adolescents written spiritual assessment measures could be construed by critics as an instance of a counselor seeking to promote his or her religious views by passing out religious literature that advocates a specific definition of religion or spirituality. Before asking clients to complete written spiritual assessment measures, school counselors should obtain full administrative approval to use the measures, and of course, we recommend that they first obtain parental and client consent.

Assessing the Spiritual Outcomes of Counselina

It is important for counselors and researchers to assess the spiritual outcomes of counseling. Documenting that counseling can facilitate clients' spiritual growth and well-being could increase the level of trust that spiritual and religious clients and leaders have in counselors. In addition, outcome research could help researchers and counselors better understand the role of faith and spirituality in counseling, healing, and recovery (Richards & Bergin, 2005).

In this article, we have identified several assessment measures that could also be used for outcome research. Most of these measures were not specifically designed as psychotherapy outcome measures (Hill & Hood, 1999) and thus may lack the sensitivity such measures need. More research is needed on these measures before they can be confirmed as sensitive and valid counseling outcome measures. Nevertheless, at present, as long as they are interpreted cautiously, they can provide researchers with some ways of seeking to monitor the effects of counseling on clients' religiosity and spirituality.

One measure that was developed specifically to assess the spiritual outcomes of counseling is the TSOS (Richards et al., 2005). The TSOS was designed to be in general harmony with the main tenets and practices of the major theistic world religions and assesses four major dimensions of spirituality: (a) feelings of moral congruence and worthiness, (b) faith in God's existence and loving influence, (c) awareness of one's spiritual identity and purpose, and (d) love for other people and a desire to promote their welfare (Rich-

ards et al., 2005). The TSOS was found to have adequate reliability, validity, and usefulness among a sample of college students, a sample of inpatient women with eating disorders, and two samples from inpatient psychological clinics in Germany (Richards et al., 2005). Additional validation work is still required with samples that are more diverse in race, ethnicity, religion, and age. Nevertheless, the TSOS shows initial promise for use as a spiritual counseling outcome measure.

Conclusion

It is becoming more widely recognized that assessing clients' religious background and personal spirituality is an important part of comprehensive psychological assessment. Currently, the most feasible way to assess religion and spirituality is simply to ask clients questions about their faith and spirituality informally during counseling interviews.

Many standardized measures of spirituality have been recently designed. Although many of these measures have data supporting their reliability and validity, most need additional work to establish their suitability for counseling. Many of the measures have limited normative data; were designed in a denominationally specific way; and lack clear instructions for administration, scoring, and interpretation (Moberg, 2002; Richards & Bergin, 2005).

There is a need for religious and spiritual assessment measures that have been published by commercial test publishers so that they can be made more widely available to counselors. In the meantime, counselors may wish to use the available measures when they believe doing so would be helpful for their clients. As long as the measures are interpreted tentatively and relied on primarily for exploration purposes, they can be helpful for counselors and their clients.

Regardless of whether counselors choose to use standardized spiritual assessment measures or assess spirituality in other creative and less formal ways, it is essential that they assess the religious and spiritual dimensions of their clients' life during their counseling interviews as part of a multi-dimensional assessment strategy. We are confident that as they do so, they will be more fully successful at assisting each client with his or her unique challenges and needs.

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