

## Changes in Personal Religion/Spirituality During and After Childhood Abuse: A Review and Synthesis

Donald F. Walker, Henri Webb Reid, Tiffany O'Neill, and Lindsay Brown  
Richmont Graduate University

Psychologists have begun to consider the potential role of traumatic experiences on the victim's spirituality and religiousness as well as the role personal religious and spiritual faith might have in recovery from abuse. In this review, the authors were particularly interested in these issues as they pertain to childhood abuse. The authors identified 34 studies of child abuse as they relate to spirituality and religiosity that included information on a total of 19,090 participants. The studies were classified according to both the form of abuse and the form of religiousness or spirituality that were examined. The majority of studies indicated either some decline in religiousness or spirituality ( $N = 14$ ) or a combination of both growth and decline ( $N = 12$ ). Seven studies gave preliminary indications that religiousness/spirituality can moderate the development of posttraumatic symptoms or symptoms associated with other Axis I disorders. The authors discuss implications for both therapy and future research.

*Keywords:* childhood abuse, religion and spirituality

Research findings as well as clinical observations and personal descriptions suggest that childhood abuse may impact a person's religious and spiritual faith in a number of different ways during the experience of childhood abuse and afterward. Some victims described turning to a personal God or to other members of a church, mosque, or synagogue for emotional support when abuse occurred and others described feeling totally bereft without any possibility of spiritual or religious comfort. Some victims/survivors were so negatively impacted that they gave up on any God figure and never prayed or attended a religious service again. Yet, many abuse survivors live a personal spiritual life somewhere in between these two positions—uncertain of what to make of the experience, that is, how to make personal meaning about its occurrence, or how to reconcile it with religious or spiritual beliefs and practices.

Recently, psychologists have begun to consider the potential role of personal religious and spiritual faith in resolving traumatic events, including childhood abuse (e.g., Exline & Rose, 2005; Pargament, Murray-Swank, & Mahoney, 2008; Park, 2005). Indeed, recent writings on the topic have suggested that spirituality may be a pathway to either posttraumatic growth or decline following abuse (Pargament, Desai, & McConnell, 2006). In this review, we seek to answer two slightly different but related questions on these topics having to do with our specific area of interest, childhood abuse. First, we sought to understand the role of religion/spirituality during and in the initial aftermath of childhood abuse. Simply put, does an individual's religiousness/spirituality (broadly defined) increase or decrease following childhood abuse? Second, we ask whether religiousness/spirituality moderates the relationship between childhood abuse and the development of additional symptoms associated with various psychological disorders such as depression and posttraumatic stress disorder among adult survivors of childhood abuse. After reviewing empirical studies of these questions, we discuss treatment and research implications regarding the suggestions of possible links between religion/spirituality and recovery from experiences of childhood abuse.

---

Donald F. Walker, Ph.D., Henri Webb Reid, Tiffany O'Neill, and Lindsay Brown, Center for Spirituality and Psychotherapy, Richmont Graduate University.

A portion of this research was presented at the 2007 annual meeting of the American Psychological Association, San Francisco.

Correspondence concerning this article should be addressed to Donald F. Walker, Ph.D., Center for Spirituality and Psychotherapy, Richmont Graduate University, 2055 Mt. Paran Road NW, Atlanta GA 30327. E-mail: dwalker@richmont.edu

## Religion and Spirituality Defined

Before we attempt to answer our review questions, some definition of terms is warranted. Psychologists typically describe religion and spirituality in related but separate terms. *Spirituality* is often broadly defined in two ways. One manner in which spirituality typically has been viewed is as a private, personal, affective experience with “the Divine” (e.g., Richards & Bergin, 1997). In addition, spirituality also has been conceptualized as that of a search or quest for the Sacred (e.g., Pargament, 1999). These broad definitions allow for dialogue and research to occur across denominations and disciplines.

Conversely, *religiousness*, although recognized as a multidimensional construct, frequently has been considered as an institutional set of beliefs and practices (Richards & Bergin, 2005). Thus, religiousness often has been distinguished from spirituality on the basis of cognitive beliefs and behavioral practices related to God rather than an affective experience of God. Some have suggested that it is possible to engage in a spirituality that is devoid of a religious context, or to experience a corporate religiousness without experiencing a personal spiritual life (Miller & Thoresen, 2003; Richards & Bergin, 2005).

Recently, it has been argued that a distinction between spirituality and religiousness is largely artificial. The foundation of this argument is that, in contrast to the majority of therapists, most of the American public considers spirituality and religiousness as essentially interchangeable. In addition, proponents of this position also suggest that spirituality/religiousness can be construed as a private, personal, affective experience of the Divine that takes place within the context of a religious institution and affiliation (e.g., Hill & Pargament, 2003). We delineate throughout our review how the authors of the primary studies that we review define and measure both religion and spirituality in their studies. However, we concur with recent theorists whom suggest that most of the American public view these terms essentially interchangeably and practice their spirituality in the context of organized religion (Hill & Pargament, 2003; Worthington & Sandage, 2001).

## Methodological Overview

Prior to reviewing the actual findings across studies, we provide a description of how the studies reviewed here were identified. Using the PsycINFO database, we located 34 empirical journal articles using the search terms “spirituality and abuse,” “religion and abuse,” “spirituality and child abuse,” and “religion and child abuse” that we included in this review. We limited the search to published journal articles, thus excluding unpublished dissertations as well as a larger set of studies that contained theoretical considerations related to religion/spirituality and child abuse. All of the studies were retrospective accounts of adult survivors. After reading the articles, we classified them as to whether they examined sexual abuse only ( $n = 21$ ), physical abuse only ( $n = 1$ ), or multiple forms of abuse ( $n = 12$ ). In addition, we categorized articles according to whether they investigated religion only ( $n = 8$ ), spirituality only ( $n = 10$ ), or both religion and spirituality ( $n = 13$ ). Three studies examined God image as the sole index of personal religiousness/spirituality. The set of 34 studies reported on a total of 19,090 participants. A few of the studies compared participants who had been victims of childhood abuse with participants who had not experienced any form of child abuse. We compared studies that were quantitatively versus qualitatively analyzed. We compared studies on this basis to examine potential differences in findings based purely on the methodology being utilized.

We also attempted to identify the effect of major abuse-related moderating variables, such as degree of seriousness of abuse (including its duration and frequency), identity of the abuser (whether related and whether abuse was intrafamilial), and whether abuse was single incident or repeated or involved one or more perpetrators, on religion/spirituality. In doing so, we found that although several studies have included measures of frequency or duration of the actual abuse, the majority of these studies have not examined them as continuous variables. To date, most studies artificially have dichotomized abuse frequency and duration to compare participants who have been abused physically or sexually with those who have not. In a similar fashion, the majority of quantitative studies that have measured severity of physical or sexual

abuse have not included this variable in further analyses in relation to religion/spirituality. We note exceptions to these general findings throughout the review.

### Does Childhood Abuse Increase or Decrease Religiousness/Spirituality?

Studies included in this review are included in Table 1. As Table 1 indicates, more studies suggested decreases in religiousness/spirituality as a result of trauma ( $n = 14$ ) than increases in religiousness/spirituality ( $n = 8$ ), though some studies suggested that the participants experienced a combination of both increase and decrease in different aspects of their personal religious and spiritual life simultaneously ( $n = 12$ ).

It is noteworthy that, of the 8 studies suggesting some form of religious or spiritual growth as a result of abuse, the majority of those studies ( $n = 5$ ) used some form of interview procedure (as opposed to pencil and paper scales) to assess religious or spiritual growth. Conversely, of the 14 studies that suggested decreases in religiousness/spirituality, only 2 used an interview procedure and analyzed the data qualitatively. This discrepancy suggests that the differences in obtained results may be due, in part, to the methodology that was employed. This is an important consideration because psychologists increasingly have urged the use of qualitative methods but have cautioned researchers and theorists using qualitative methodology to be aware of their own biases in their questions and the interpretation of their findings (e.g., Fassinger, 2005; Hill, Knox, & Thompson, 2005). It is possible that researchers using qualitative methods in the studies reviewed here were attempting to determine whether some good came out of the abuse experience. It is also possible that researchers employing quantitative methods were attempting to demonstrate the extent of negative effects of childhood abuse. To rectify these potential biases associated with the different methodologies, a number of researchers and theorists utilizing qualitative designs have advocated employing mixed qualitative-quantitative approaches (Haverkamp, Morrow, & Ponterotto, 2005). This methodological approach certainly warrants consideration in the study of trauma in general and in the specific line of research reported here.

### *Studies Supporting an Increase in Religiousness or Spirituality*

The eight studies that supported an increase in religiousness/spirituality suggested that it helps victims to find personal meaning of some sort in the experience and that it might be a culturally supported means of coping with the abuse itself. For example, Bryant-Davis (2005) interviewed 70 African American survivors of childhood abuse. She noted that spirituality is a prominent theme in African American culture, and that spirituality was used as a coping resource by many adult survivors in her study. In another qualitative study, Valentine and Feinauer (1993) interviewed 57 female survivors of childhood sexual abuse to determine resilience factors associated with recovery. Participants mentioned supportive relationships, self-regard, religion/spirituality, external attributions of blame, and an internal locus of control as resilience factors. Participants also indicated that spirituality helped them make meaning of the experience in a manner that served to free them of blame and guilt. Furthermore, participants also suggested that spirituality assisted them with the faith to find meaning and purpose in their lives. Other qualitative studies have demonstrated that adult male survivors of childhood sexual abuse sometimes created meaning from the experience by entering helping professions themselves (Etherington, 1995; Grossman, Soroli, & Kia-Keating, 2006).

### *Studies Supporting a Decrease in Religiousness or Spirituality*

As we noted earlier, the majority of studies that we reviewed indicated that a decrease in or damage to personal religion/spirituality was correlated with childhood abuse. When abuse decreases personal religiousness/spirituality, it appears to do so by damaging the individual's view of and relationship to God. For example, several studies found that participants who experienced childhood abuse reported having more distant relationships with God and were less trustful of God than nonabused participants (Kennedy & Drebing, 2002; Reinert & Edwards, 2009; Rossetti, 1994). Survivors of childhood abuse also reported believing that God was punitive, unfair, wrathful, distant, and less loving than individuals who had not suf-

ferred abuse (T. Hall, 1995; Kane, Cheston, & Greer, 1993; Lawson, Drebing, Berg, Vincelette, & Penk, 1998; Pritt, 1998).

Several studies have suggested that the degree to which the abuser symbolically or in reality represents a religious institution or deity is a significant factor in spiritual decline resulting from abuse. This seems to be the case whether the spiritual decline involves the God image specifically or involvement in institutional religion generally. For example, Rossetti (1994) compared adult Catholics in the United States between those who had not been victims of childhood sexual abuse ( $n = 1,376$ ), with those who had been sexually abused as children but not by a priest ( $n = 307$ ), and with those who had been sexually abused by priests ( $n = 40$ ). Those who were sexually abused by priests were more likely than those in the other two groups to report difficulty trusting priests and, by extension, difficulty trusting God. Those who were sexually abused as children showed a decline in trust in the priesthood, church, and God compared to those who were not abused; however, this decline was less than those who had been abused by priests.

In one survey of religion-related abuse, religious leaders perpetrated 31% of abuse cases (Bottoms, Nielsen, Murray, & Filipas, 2003). In this study, abuse was categorized as religion-related if participants responded affirmatively to any of the following questions: "(a) it happened in a religious setting; (b) person(s) who did it to you had some religious authority or was in any religious leadership position, (c) the person(s) told you God would punish you if you told about it; (d) it was to done to punish or discipline you in a way that was suggested by a religious text or spiritual being; (e) person(s) who did it thought you were possessed by devils or evil spirits; (f) person(s) who did it thought God or another spiritual figure or religious text told him/her to do it for reasons other than discipline or possession; (g) you were told God or another spiritual being would love you more because of the experience; (h) other religious reason" (Bottoms et al., p. 96).

Bottoms et al. (2003) found that in 31% of the cases, the abuse was punishment that was justified by religious texts, and in 20% of the cases, the abuser told the child that God would punish him or her for any disclosure of the abuse.

If the experience of abuse causes one to distrust God, survivors of childhood abuse would also have more difficulty using their relationship with God as a resource for coping. Several studies support this position. For example, Webb and Whitmer (2001) surveyed 167 Christian undergraduate students about their abuse history and religious problem-solving styles. Participants who reported that they had been physically abused or emotionally abused had significantly higher scores on self-directed forms of religious coping. Those who believed that they had been physically abused or emotionally abused scored significantly lower on both deferring and collaborative forms of religious coping.

*Potential moderators.* One issue of interest is identifying variables that moderate the relationship between some form of childhood abuse and one's personal religion/spirituality. Consistent with clinical descriptions, there is some evidence (though few quantitative studies have been conducted) that physical or sexual abuse by a father or father figure is particularly damaging to a child's personal religion/spirituality when compared to abuse by a some other family member or by a nonrelative. For example, Bierman (2005) examined the effects of father, mother, and extrafamilial physical and emotional abuse on religious involvement. Although the obtained correlations were very small, the correlation between paternal physical and emotional abuse with religious involvement was nearly twice as high ( $r = -.11$ ) as the correlation between extrafamilial abuse and religious involvement ( $r = -.06$ ).

In a related vein, Kane et al. (1993) examined the impact of incest committed by a father figure on 33 adult women survivors' perceptions of God. In this study, a father figure was defined as a biological or adoptive father, biological or adoptive grandfather, a step-father, or a long-term, live-in boyfriend of the survivor's mother. Kane et al. found that 61% of the incest survivors had left the religious faith community of their fathers. Furthermore, Kane et al. also found that, in comparison to a control group of 33 adult women, survivors of childhood incest were also more likely to report that God had negative or ambivalent feelings toward them.

This document is copyrighted by the American Psychological Association or one of its allied publishers. This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

Table 1  
Summary of Studies Included in the Review

Study	Participants	Measure of religiousness or spirituality	Change in religiousness/spirituality
Studies supporting primarily growth from childhood abuse			
Bogar & Hulse-Killacky (2006)	10 women sexually abused in childhood	Interview questions about the effects of the abuse; spirituality emerged as a theme	Spirituality was used as an aspect of recovery
Tarakeshwar, Hansen, Kochman, Fox, & Sikkema (2006)	266 men and women sexually abused as children	Five items measuring public and private religious activities, beliefs, and coping	Participants reporting greater religious resiliency reported being generally better able to address past abuse
Bryant-Davis (2005)	70 African American men and women survivors of physical and sexual abuse	Interview questions about coping strategies; spirituality emerged as a theme	Organized religion and personal spiritual practices were both identified as coping strategies
J. M. Hall (2003)	55 female survivors of multiple-forms childhood abuse and neglect	Interview questions about recovery; theme of spiritual connection emerged	Spiritual connection (including church attendance) was identified as an area of positive growth after abuse
Doxey, Jensen, & Jensen (1997)	653 men and women	Survey questions about personal religiousness	Victims of childhood sexual abuse who were more religiously active experienced fewer symptoms of depression and higher self-esteem
Reinert & Smith (1997)	266 women sexually abused in childhood	Spiritual Experience Index, Revised Ego Grasping Orientation Scale	Participants who had been sexually abused turned to faith for support
Etherington (1995)	25 men sexually abused in childhood	Interview questions about the effects on spirituality after the abuse	Some men reported using spirituality to create meaning out of the abuse; some reported entering helping professions to care for others
Valentine & Feinauer (1993)	22 women sexually abused in childhood	Interview questions—importance of religion and spirituality; function of religion/spirituality	Participants reported religion/spirituality were important in daily life; also reported that religion provided them with a supportive network, often helped them make meaning of the abuse
Studies supporting primarily decline from childhood abuse			
Reinert & Edwards (2009)	150 college students	Loving and Controlling God scales Fezter (1999)	The experience of childhood verbal, physical, and sexual abuse correlated with viewing God as distant, controlling, and unloving
Isely, Isely, Freiburger, & McMackin (2008)	9 men who were sexually abused by Catholic clergy	Interview questions about clergy sexual abuse and current functioning	Participants reported feelings of guilt, confusion, and anger
Bierman (2005)	3,032 adults aged 25 to 74 years living in the United States; participants were asked to report whether they had been abused as children	Single items about religious involvement; importance of spirituality in daily life	Degree of physical abuse correlated with generally less religious involvement, often reported less importance of spirituality in daily life

(table continues)

Table 1 (continued)

Study	Participants	Measure of religiousness or spirituality	Change in religiousness/spirituality
Fallop & Heckman (2005)	666 female adults with physical and/or sexual abuse history	Religious coping scales from the Fetzer measure of religion and spirituality Spiritual Well-Being Scale	Women with higher frequencies of childhood abuse reported generally less positive and typically more negative religious coping Severity of abuse was associated with lower existential well-being Frequency of childhood abuse was associated with lower spiritual well-being
Femauer, Middleton, & Hilton (2003)	983 adults—582 were sexually abused as children	Spiritual Well-Being Scale	
Weber & Cummings (2003)	158 university students divided into groups of high and low sexual, physical, or psychological abuse	Spiritual Well-Being Scale	
Webb & Whitmer (2001)	167 college men and women participants were asked to report whether they had been physically or emotionally abused	Three single-item measures of personal and parental religious beliefs	Report of abuse negatively correlated with maintenance of religious beliefs
Ganje-Fling, Veach, Kuang, & Houg (2000)	77 counseling center clients; 43 of whom had been sexually abused in childhood	Spiritual Well-Being Scale Counseling and Spirituality Questionnaire (developed by Ganje-Fling et al., 2000, for the purpose of their study)	No significant differences in spiritual well-being between clients; however, twice as many sexually abused participants ( $n = 19$ ) expressed a negative view of religion as opposed to a positive view ( $n = 8$ )
Pritt (1998)	115 Mormon women sexually abused in childhood	Spiritual Well-Being Scale Adjective Rating of God Scale (Gorsuch, 1968)	Abuse was typically associated with lower spiritual well-being, viewing God as more harsh, punitive, and distant
McLaughlin (1994)	43 male and female adult survivors of sexual abuse by	Measure of Spirituality Test (developed by McLaughlin, 2004, for the purpose of her study)	Survivors tended to view the childhood abuser as representing the clergy; they also reported that they did not generally attend church, and often reported believing they were not worthy of God's love
T. Hall (1995)	33 women in outpatient sexually abused as children, 20 women in outpatient treatment who were not sexually abused, 22 nonabused women not currently in treatment	Religious Status Inventory (Maloney, 1985)	Women who had been abused typically experienced significantly lower spiritual functioning
Rossetti (1994)	1,810 men and women; participants reported whether they had been physically or sexually abused as children	Survey instrument about spiritual and religious damage	Abuse generally damaged one's relationship with the church and with God
Kane, Cheston, & Greer (1993)	33 women sexually abused in childhood by a father figure, 33 women sexually abused by anyone other than a father	Interview questions; inventory about God image	27% of survivors left faith communities due to the abuse and did not return; 33% left faith communities but returned

(table continues)

Table 1 (continued)

Study	Participants	Measure of religiousness or spirituality	Change in religiousness/spirituality
Finkelhor, Horaling, Lewis, & Smith (1989)	585 victims of childhood sexual abuse compared to 2,033 nonabused participants	Interview survey about religious involvement	Victims of childhood sexual abuse were significantly more likely to not practice any religion currently
Studies suggesting a combination of both growth and decline Galea (2008)	312 Maltese college students	Spiritual transcendence scale; questions about religious practice	Victims of childhood abuse reported fewer experiences of spiritual transcendence and religious practice; however, personal religion and spirituality moderated the relationship between abuse and positive affect
Flynn (2008)	25 women who had been sexually abused by Catholic clergy	Interview questions about the effects of clergy sexual abuse	Some women reported an increase in postabuse symptoms; participants also reported an increase in relational spirituality
Gall, Basque, Damasceno-Scott, & Vardy (2007)	101 college students	God image scales, Hope inventory questions about religion and spirituality	Victims of extended duration of abuse tended to view God as less benevolent or providential; however, participants who reported a more positive relationship with God also had fewer symptoms of anger, anxiety, or depression
Gall (2006)	101 adult survivors of childhood sexual abuse	RCOPE (Pargament, Koenig, & Perez, 2000)	Abuse correlated with greater spiritual discontent; however, positive forms of religious and spiritual coping were associated with fewer overall symptoms
Grossman, Sorsoli, & Kia-Keating (2006)	16 male survivors of childhood sexual abuse	Interview questions about how participants made meaning over time	Only 2 men reported involvement in organized religion; some men reported themes of forgiveness and acceptance
Krejci et al. (2004)	71 female sexual abuse victims 25 non-abused women	Jarel Spiritual Well-Being Scale (Hungelmann et al., 1989)	Childhood sexual abuse was associated with postabuse symptoms and diagnosable mood disorders; spiritual well-being moderated the development of symptoms
Bottoms, Nielsen, Murray, & Filipas (2003)	126 men and women total, 72 had experienced physical abuse	Importance of religious beliefs, frequency of prayer, religious services, Christian orthodoxy scale	Abuse negatively affected religious participation for those whose abuse was not religion related
Kennedy & Drebing (2002)	3,424 adult church members asked about whether physical or sexual abuse occurred	Religious views, experiences, and practices	Abuse was generally related to higher religious doubting, but not self-reported closeness to God

(table continues)

This document is copyrighted by the American Psychological Association or one of its allied publishers. This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

Table 1 (continued)

Study	Participants	Measure of religiousness or spirituality	Change in religiousness/spirituality
Ganzevoort (2002)	12 Dutch men who had been victims of childhood sexual abuse	Participants were asked to provide abuse narratives; the narratives were analyzed for religious themes	3 men described God as distant, 5 described God as close; 10 men described metaphors of threat and dependency when describing childhood religion; only 2 men described their current religion in similar terms
Ryan (1999)	50 women sexually and both physically abused as children	Interview questions about religion and spirituality both before and after the abuse	48% reported no current religious affiliation; 65% reported some increase in their spirituality as a result of abuse
Lawson, Drebhing, Berg, Vincellete, & Penk (1998)	527 adult males physically or sexually abused as children	Spiritual Injury Scale (Lawson et al., 1998); KASL Religiosity Index (Idler & Kasl, 1992)	Some participants reported continued spiritual injury and distress; others reported spiritual growth
Elliott (1994)	2, 964 professional women, of those, 918 were childhood sexual abuse victims	Questions about current and childhood religious orientation	Among participants raised in conservative Christian homes, victims of abuse were significantly less likely to participate in organized religion as adults; however, those participants who practiced organized religion had fewer posttraumatic symptoms as adults

*Studies Supporting a Combination of Religious and Spiritual Growth and Decline*

Studies with mixed results related to childhood abuse and later religiousness/ spirituality supported the notion that individuals who were able to use spirituality to make meaning out of their experience typically do so outside the context of organized religion and do in fact, turn to individual spirituality to make meaning. For example, Ryan (1998) interviewed 50 women who survived childhood maltreatment. Almost half reported no current religious affiliation. The others endorsed Judaism, Buddhism, Protestantism, and pagan circles. Three fourths of the women who were raised in an organized religion reported that they left the religion of their childhood. Furthermore, half of the participants (25) reported questioning a God that could allow abuse to occur. However, 64% reported that their spirituality was stronger after their experience of abuse (as opposed to before or during the abuse that occurred). Sixteen respondents (nearly one third) specifically reported that God had been an agent for survival and healing. Ten respondents also reported that their spirituality provided meaning for the experience. Other studies in support of this position suggest that personal spirituality is often expressed through personal prayer or transcendent spiritual experiences (Kennedy & Drebing, 2002; Lawson et al., 1998).

Gall (2006) surveyed 101 adult survivors of childhood sexual abuse using the RCOPE (Pargament, Koenig, & Perez, 2000) to measure religious coping. The RCOPE consists of 21 subscales designed to measure different aspects of spiritual coping. Gall used 8 of the 21 subscales in the study. Gall examined several moderating variables of interest (type of abuse, extent of the abuse, and age of onset) in relation to religious and spiritual outcomes. Gall found that type of abuse correlated with greater spiritual discontent and pleading coping. Survivors who were older at the onset of abuse reported currently using more spiritual support coping. Participants that reported experiencing a greater perceived impact of the abuse on their childhood also reported that they experienced a greater amount of spiritual discontent. In explaining these findings, Gall suggested that chil-

dren who were abused at an older age may have formed a secure attachment with God prior to the onset of abuse, thereby enabling them to use their relationship with God as a source of comfort.

In addition, Gall (2006) also found that as the number of perpetrators involved in the abuse increased, participants tended to rely less on self-directed forms of coping and more on negative forms of religious and spiritual coping. These men and women also reported a greater degree of spiritual discontent than other participants. Positive forms of religious and spiritual coping (such as greater spiritual support and religious forgiveness) were correlated with successful resolution of the abuse experience and fewer overall symptoms.

The degree to which an individual or their family is personally involved in organized religion at the time of the abuse also seems to serve as a moderating factor in whether religiousness/spirituality can be utilized as a coping resource. For instance, Grossman et al. (2006) interviewed 16 adult men from varying ethnic backgrounds about the manner in which they created meaning from their childhood sexual abuse experiences. Although spirituality was infrequently mentioned as a source for making meaning, half of the male participants developed spiritual beliefs that appeared to aid in their recovery. Only 2 of the men were actively involved in a religious community. Grossman et al. reported that several of the men in the study mentioned that their spirituality developed through Alcoholics Anonymous or other 12-step programs. Although the sample is small, the results support: (a) the idea that participants uninvolved in religion as children were better able to turn to organized religion as adults, and (b) most participants who turned to spirituality to find meaning did so outside of organized religion in church settings in favor of ecumenical treatment programs such as 12-step programs.

### Does Religiousness/Spirituality Moderate the Development of Other Symptoms?

Seven studies examined whether religiousness/spirituality moderates the development of posttraumatic symptoms or other symptoms associated with Axis I disorders directly. Elliott (1994) conducted a survey of 2,964 professional

women. Of the total sample, 918 women reported being a victim of childhood sexual abuse. Among abuse survivors, Elliott compared samples of women who had been raised by atheistic/agnostic parents, conservative Christian parents, or conservative parents of other faiths. Elliott conducted several analyses related to perpetrator status (whether familial or extrafamilial), religious affiliation, and posttraumatic symptoms. Posttraumatic symptoms were measured using the Trauma Symptom Checklist-40 (Briere & Runtz, 1989). As might be expected, Elliott found that women who had been victims of extrafamilial abuse experienced significantly more symptoms than women who had not been victims of childhood abuse. In addition, victims of familial abuse reported significantly more posttraumatic symptoms than victims whose abuser was not part of their nuclear family. Finally, regardless of religious affiliation, participants reporting no current religious practices experienced significantly more posttraumatic symptoms than participants who were currently involved in organized religion. This was true whether the religion was Christianity or another faith.

In another study examining the impact of childhood sexual abuse on current emotional functioning, Doxey, Jensen, and Jensen (1997) surveyed 653 adult women who had been sexually abused as children as part of a larger sample. Emotional functioning was measured using several items designed to assess symptoms of depression. Personal religiousness was measured with three survey questions asking about the importance of religion in their lives. Doxey et al. found that religion moderated the relationship between abuse and depressive symptoms. According to Doxey et al., women who were abused self-reported having better mental health than nonabused women, if they were religious. Furthermore, among victims of childhood sexual abuse, those who were highly religious were less depressed than participants reporting moderate or low personal religiousness.

More recent, Bottoms et al. (2003) examined profiles of religion-related abuse among 126 college age men and women. According to the authors, victims of religion-related abuse displayed more depression, anxiety, hostility, psychoticism, phobic anxiety, and paranoid ideation than individuals who suffered either no

abuse or a form of abuse that was not religion related, possibly because the abuse occurred at more serious levels. Victims of religion-related abuse were also higher in somatization than victims of nonreligion-related abuse.

Krejci et al. (2004) also examined the relationship of personal spirituality to the development of other symptoms, including self-reported posttraumatic stress symptoms, mood disorders, substance abuse disorders, and eating disorders. Krejci et al. compared a sample of 71 adult women who had been victims of childhood sexual abuse to a control group of 25 adult women who had not been sexually abused. Using semistructured clinical interviews to assess for symptoms, Krejci et al. found that women who had been sexually abused when they were children were significantly more likely to experience posttraumatic symptoms, a diagnosable mood or anxiety disorder, or to have concerns about eating or body image. The two groups did not differ in meeting diagnostic criteria for an eating disorder or a substance abuse disorder. However, the authors also reported that within the group of women who had been sexually abused as children, participants with higher levels of spiritual well-being had lower levels of posttraumatic symptoms as well as fewer mood and anxiety disorders.

Gall (2006) examined the role of spirituality in coping with life stress among 101 adult survivors of childhood sexual abuse. Gall found that religious and spiritual forms of coping predicted distress of adult survivors in different ways depending on the form of religious and spiritual coping being utilized. Negative forms of religious and spiritual coping (such as spiritual discontent) correlated in positive directions with anxiety and depression. Conversely, positive forms of religious and spiritual coping (such as spiritual support) were associated with lower levels of anxiety and depression.

In a related follow-up study, Gall, Basque, Damasceno-Scott, and Vardy (2007) studied the relationships between aspects of childhood physical and sexual abuse, God image, and current emotional functioning in a sample of 101 adult men and women. The experience of having endured multiple forms of abuse (i.e., both physical and sexual abuse) was significantly correlated with depressive, anxious, and angry mood states. However, the age of onset of abuse, duration of abuse, and number of pepe-

trators involved in the abuse failed to significantly correlate with any of these negative mood states. None of the abuse-related variables correlated significantly with viewing God as either benevolent or providential. However, God image moderated the relationship between abuse and negative affect, as viewing God as benevolent correlated negatively with symptoms of depression, anger, or anxiety. Thus, in this study, abuse failed to significantly damage one's image of God, though maintaining a benevolent image of God helped participants to cope with the abuse.

Finally, Galea (2008) surveyed 312 college students in Malta regarding the links between spiritual transcendence, religious practice, multiple forms of childhood abuse, and current mood. A total summed score was created for possible forms of abuse (sexual, physical, emotional, or neglect) that a participant may have experienced as a child. Significant negative correlations were obtained between childhood abuse and spiritual transcendence ( $r = -.12$ ) as well as current religious practice ( $r = -.30$ ). The experience of childhood abuse correlated negatively with current positive affect and generally correlated positively with current negative affect. However, in a path analysis, both spiritual transcendence and current religious practice moderated the relationship between childhood abuse and current positive and negative affect. This suggests that, although abuse damages one's personal religiousness and spirituality, to the extent that an adult victim is able to make use of personal religious and spiritual resources, these resources assist them in coping in daily life.

In summary, though the research evidence at this point is limited and is in need of more methodological rigor, the studies reviewed here suggest that religiousness/spirituality may, in some cases, be a moderator of the development of posttraumatic and other Axis I symptoms and their associated disorders. The majority of these studies used single item measures of religiousness, sometimes using religious affiliation or self-reported importance of religion. It is noteworthy that, although few studies have been conducted, most studies suggested that childhood physical or sexual abuse tends to damage one's faith, whether individual or corporate forms of religion and spirituality were being studied. However, despite the damage to one's

personal religiousness and spirituality, in the few studies that have been conducted, these resources also served in most cases to buffer them from the development of other symptoms. Abuse survivors undoubtedly experience ambivalence and difficulty resolving spiritual struggles involving a faith that has been damaged while also attempting to make use of that faith to cope. Additional research is needed assessing the role of multiple forms of personal religiousness and spirituality in relationship to posttraumatic symptoms and other symptoms related to Axis I disorders simultaneously. Research is also needed that further elucidates the nature of this process for abuse survivors.

### Implications for Treatment

Psychologists are ethically mandated to consider client religion as an aspect of client diversity to incorporate in case conceptualization and treatment (American Psychological Association, 1992). As alluded to in the introduction and in the findings of this review, people often respond in a myriad of ways with respect to their religion and spirituality during and after the occurrence of abuse, making this ethical mandate particularly complicated when childhood physical and sexual abuse are reported. Given our review, it appears likely that clients recovering from abuse will have mixed feelings about their religious and spiritual faith. Consequently, we urge therapists to initially maintain an open but supportively neutral stance with respect to religion/spirituality as it relates to recovery from childhood physical and sexual abuse while recognizing that client feelings toward religion/spirituality may change over the course of therapy.

Trauma psychologists should also be aware of potential initial value differences with regard to religion/spirituality and thoughtfully consider the impact of these potential differences on the treatment process. Earlier, we noted that among scholars, even defining religion and spirituality has been difficult within the psychological literature. Psychologists in clinical practice also sometimes strongly disagree on the relationship between these two terms. Furthermore, though some have suggested that the personal religious and spiritual life of therapists is not so different from that of the American public that it serves (e.g., Smith & Orlinsky, 2004), others have

suggested that therapists participate in organized religion to a lesser degree than that of the American public as a whole (e.g., Delaney, Miller, & Bisono, 2007; Walker, Gorsuch, & Tan, 2004). If this is true to some degree, some therapists may unwittingly experience a tendency to encourage clients to move away from potential religious resources in favor of spiritual resources that take place outside the context of organized religion in their recovery. We encourage therapists to take stock of their own biases and sources of countertransference in such situations and to carefully consider the potential impact of their own approach to religion and spirituality in their work with abused clients.

We suggest that therapists will be in a better position to understand how to respond to clients' religious and spiritual faith if they apply recent published guidelines for assessing religion and spirituality in psychotherapy in their work with clients, in general and in trauma/abuse related treatment. Richards and Bergin (2005) suggested initially assessing religion and spirituality broadly (termed a Level 1 assessment) as part of a standard psychosocial assessment that gives attention to physical, social, behavioral, intellectual, educational-occupational, and psychological-emotional domains. These authors proposed that a more detailed Level 2 approach was appropriate for clients whose religious affiliation and beliefs were related to their presenting problems. During this portion of the assessment, therapists should assess clinically important dimensions of religiousness and spirituality such as the client's metaphysical worldview, their religious affiliation, religious orthodoxy, religious problem-solving style, spiritual identity, God image, value-lifestyle congruence, doctrinal knowledge, and religious spiritual health and maturity. According to Richards and Bergin, all these dimensions may assist therapists in their efforts to assess, conceptualize, and therapeutically employ any religiousness and spirituality resources.

Applying Richards and Bergin's (2005) model to therapy with abuse survivors, psychologists should consider the client's religious and spiritual functioning at intake, and also consider potential changes in the client's religious and spiritual faith as a result of the abuse and/or other life events, including additional abuse and other trauma. In addition, we suggest that psy-

chologists reassess the role of religion and spirituality later in therapy, even with clients who report initially that such issues are not relevant for them or to their treatment. We recommend this because so many participants in the studies that were reviewed here had ambivalent feelings related to religion and spirituality after abuse. For some clients, aspects of their religious and spiritual faith might serve to worsen their experience of the abuse, and other dimensions could assist in resolving the abuse at the same time.

Psychologists should also be aware of potential spiritual issues that clients with abuse histories are likely to struggle with. As our review demonstrates, abuse survivors are more likely to experience spiritual struggle around anger toward God as a result of their abuse, blaming God for their suffering and in addition for turning a blind eye to them. In therapy, such clients are likely to question how a just God (or God figure) would allow the suffering of young children (especially when or if it occurs in the name of God or as part of a religious ritual). Exline and Rose (2005) addressed these issues specifically when they suggested that, for these clients, acknowledging and expressing negative feelings toward God can be helpful in therapy. They suggested several interventions to assist clients in expressing these and other feelings. For example, clients might pray, write an angry letter to God, use an empty chair technique, or read Hebrew Psalms as part of treatment.

Therapists should be prepared to address issues and questions such as these or consider a referral to a trusted pastoral resource. A major potential difficulty with making such an outside referral is that so few clergy have knowledge of trauma and abuse or have received training in addressing it with their congregants, resulting in possible additional harm to clients. Should therapists wish to consult resources for themselves, for clergy serving as spiritual directors and in pastoral counseling capacities, and for clients, a number of resources from various faiths are now available (e.g., Day, Vermilyea, Wilkerson, & Giller, 2006; Fortune, 2005; Frawley-O'Dea, 2007; Leehan, 1993; Lev, 2003; Saakvitne, Gamble, Pearlman, & Lev, 2000).

As we noted in the review, though the evidence is limited, there are a few studies that suggested that, for some individuals, their personal religious and spiritual faith moderated the degree to which they experienced posttraumatic

and other distressing symptoms. For those clients who are able to use their religious belief and spirituality to sustain them over the course of their abuse or afterward and/or as part of the healing process, religion and spirituality can be incorporated into treatment in several ways depending on their specific religious affiliation. For example, Christian clients of Catholic background and from the various Protestant and fundamentalist denominations can be encouraged to incorporate their image of God into the abuse narrative. In recreating the abuse narrative, clients can be asked to consider what God might have felt or thought about what was occurring. They can also be encouraged to talk to God or to another who may intervene with God according to the beliefs of their religion (i.e., saints, angels), using either verbal or written prayer, to assist in resolving the abuse. Clients from a variety of religious denominations may also be encouraged to utilize religious and community support through their congregation (although this is not always possible, as seen from reports of unsupportive and even hostile congregants in response to allegations of sexual abuse by Catholic clergy). For example, they could pray with a nonoffending clergy member, or ask for prayer from other members of the congregation, as appropriate. These methods of incorporating religion and spirituality into treatment might be more appropriate for clients whose abuse was not religion related.

A final treatment consideration concerns abuse that itself is religion related or even religion based. The majority of participants in studies of religion-related abuse indicated that either clergy members or their parents or other relatives perpetrated some form of sexual or physical religion-related or religion-based abuse. Therapists must actively confront religion-related beliefs that have been distorted by the perpetrator(s) and his or her status in the community and the religious group. For example, clergy members may have explicitly told children that God would punish them if they did not cooperate or disclosed sexual abuse. As another example, parents utilizing abusive forms of physical punishment may have used religious texts such as the Bible to support and justify the form of punishment they meted out. We encourage therapists to explore possible distortions of religious incorporated within religion-related abuse, and to consult with clergy members from

a client's denomination to gain additional information about that group's belief system as it may relate to parenting, sexual behavior, and physical punishment. With the client's consent, it may also be particularly powerful for him or her to receive the message from a nonoffending clergy member or other church representative who can communicate that religious-based abuse is a major betrayal and often involves a serious distortion of religious beliefs. These individuals must also be prepared to exonerate the adult survivor of any blame for the occurrence of the abuse and/or might offer healing or forgiveness according to that particular religious context.

In addition to exploring the religion-based distortions used to justify abuse; we particularly encourage explicit discussions of God images for those clients whose religious affiliation incorporates belief in a personal God. A number of the studies reviewed indicate that the abuse victim's image of God and relationship with God were particularly damaged as a result of religion-related abuse, and that the perpetrator often symbolically (or in actuality) represented God. Survivors of this form of abuse may continue to project onto God aspects and qualities of their abuser, perhaps struggling with an image of a God who is cold and indifferent, unforgiving, or harsh and vindictive. As our review indicates, this image often continues into adulthood, despite the fact that the abuse itself has ended. In essence, this process might psychologically perpetuate an abusive relationship. Victims of incest by a father or father-figure or sexual abuse perpetrated by a clergyman in particular may find it difficult to relate to a masculine and paternal God. Female survivors, in particular, may find themselves gravitating toward religions that are nature based or that promote the worship of female deities.

We suggest that therapists should openly explore the client's image of God and, where possible, consider consulting with clergy members or other pastoral representatives to better understand images of God within the client's particular religion. With the assistance of a clergy member or in consultation with pastoral resources (such as those that we have cited earlier), therapists may wish to incorporate religious texts (such as the Torah or the Bible) that provide other concrete images of God and to explore those images with the client. In ad-

dition to exploring the client's image of God as an attachment figure, therapists might also openly explore the client's perception of how God feels about them. Several studies found that some victims of childhood abuse believed that God did not love or value them. Therapists should openly explore distorted client beliefs about how God feels about them, and actively confront these beliefs. This could be done using sacred texts from the client's religious background. For example, Kane et al. (1993) suggested having Christian women who had suffered childhood sexual abuse read passages in the New Testament that highlight various roles that women played in Jesus' ministry, demonstrating God's respect and love for them. They also suggested that Christian women might be helped in improving their God image to reflect on feminine aspects of God—pointing out that the Greek feminine noun *Sophia* is a source for the name of the Holy Spirit. Considering feminine characteristics of God in this way might help women who have suffered childhood abuse to overcome associations of an abusive childhood father figure with God.

### Implications for Research

We report here on the extant research findings as they might suggest a better understanding for the resolution of childhood physical and sexual abuse, and by the inclusion of religion/spirituality as a potential moderator of aftereffects. The most significant limitation of the current research that we reviewed is that all of the studies utilized adult participants whom were retrospectively reporting on their recovery experiences. This approach raises the possibility that a number of changes in feelings and experiences of religion/spirituality might have occurred that the participant may have forgotten or distorted. We envision a number of ways in which future research endeavors can build on the existing research.

Research utilizing child and adolescent participants reporting on their experience closer to the time of the abuse and prospectively would be helpful. Such research is difficult to complete due to the need to be sensitive to the child's need for treatment and due to potential reluctance to discuss their experience. However, surveys of children participating in child abuse research suggest that children perceive the ben-

efits of such participation to outweigh the potential cost (Chu, DePrince, & Weinzierl, 2008).

Although obtaining permission to interview or sample child participants in clinical settings presents its own challenges, we view the opportunity to discuss the potential role of religion/spirituality as a source of healing of the abuse as a benefit of the research itself. With careful consideration of the ethics of participation, the literature itself would benefit from child and adolescent samples using a longitudinal design with cross-sectional data collection and reporting at various ages/developmental stages. Additional research is also needed to better understand how features of the abuse itself (multiple forms of abuse, its duration and frequency, and the relationship between abuser and child, abuse in the name of God or of a demon) affect religious and spiritual outcomes. Research that begins to compare changes in religious and spiritual functioning across different denominations is also needed. Further, there is a need to better understand changes in functioning prospectively and longitudinally over time at different points in time (e.g., at the time of the abuse, and months and years afterward) as opposed to one retrospective account years after the abuse. Studies that evaluate changes in religious and spiritual functioning of children and adolescents who are actually in therapy would be particularly helpful in understanding how to better address client needs in therapy.

One other mental health question or issue that has yet to receive needed research attention is the degree to which religion and spirituality might moderate the development of other symptoms and/or allow for the amelioration or the intensification of distress. We were able to identify only three studies that have examined this relationship. Given the potential benefit in reducing abuse symptoms, we suggest that future research efforts be geared toward identifying ways in which various aspects of religiousness and spirituality can be utilized as a coping mechanism that helps to build resilience. As we suggested, research efforts using children and adolescents who have recently experienced abuse (as opposed to retrospective research using adult survivors) could be particularly beneficial in this regard.

Finally, markedly different results were obtained in the review depending on whether the

participant was interviewed or given a paper and pencil measure to complete. This observation suggests a need for mixed qualitative-quantitative designs in future research in this area and offers substantiation to those researchers and theorists who suggested this approach.

## References

- American Psychological Association. (1992). Ethical principles of psychologists and code of conduct. *American Psychologist, 47*, 1597–1611.
- Benson, P., & Spika, B. (1973). God image as a function of self-esteem and locus of control. *Journal for the Scientific Study of Religion, 12*, 297–310.
- Bierman, A. (2005). The effects of childhood maltreatment on adult religiosity and spirituality: Rejecting God the Father because of abusive fathers? *Journal for the Scientific Study of Religion, 44*, 349–359.
- Bogar, C. B., & Hulse-Killacky, D. (2006). Resiliency determinants and resiliency processes among female adult survivors of childhood sexual abuse. *Journal of Counseling and Development, 84*, 318–327.
- Bottoms, B. L., Nielsen, M., Murray, R., & Filipas (2003). Religion-related child physical abuse: Characteristics and psychological outcomes. *Journal of Aggression, Maltreatment, and Trauma, 8*, 87–114.
- Briere, J., & Runtz, M. (1989). The Trauma Symptoms Checklist (TSC-33): Early data on a new scale. *Journal of Interpersonal Violence, 4*, 151–163.
- Bryant-Davis, T. (2005). Coping strategies of African American adult survivors of childhood violence. *Professional Psychology: Research and Practice, 36*, 409–414.
- Chu, A. T., DePrince, A. P., & Weinzierl, K. M. (2008). Children's perception of research participation: Examining trauma exposure and distress. *Journal of Empirical Research on Human Research Ethics, 3*, 49–58.
- Day, J. H., Vermilyea, E., Wilkerson, J., & Giller, E. (2006). *Risking connection in faith communities: A training curriculum for faith leaders supporting trauma survivors*. Baltimore: Sidran.
- Delaney, H. D., Miller, W. R., & Bisono, A. M. (2007). Religiosity and spirituality among psychologists: A survey of clinician members of the American Psychological Association. *Professional Psychology: Research and Practice, 38*, 538–546.
- Doxey, C., Jensen, L., & Jensen, J. (1997). The influence of religion on victims of childhood sexual abuse. *International Journal for the Psychology of Religion, 7*, 179–186.

- Elliott, D. M. (1994). The impact of Christian faith on the prevalence and sequelae of sexual abuse. *Journal of Interpersonal Violence, 9*, 95–108.
- Etherington, K. (1995). Adult male survivors of childhood sexual abuse. *Counseling Psychology Quarterly, 8*, 233–242.
- Exline, J. J., & Rose, E. (2005). Religious and spiritual struggles. In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 315–330). New York: Guilford.
- Fallot, R. D., & Heckman, J. P. (2005). Religious/spiritual coping among women trauma survivors with mental health and substance use disorders. *Journal of Behavioral Health Services and Research, 32*, 215–226.
- Fassinger, R. E. (2005). Paradigms, praxis, problems, and promise: Grounded theory in counseling psychology research. *Journal of Counseling Psychology, 52*, 156–166.
- Feinauer, L., Middleton, K. C., & Hilton, G. H. (2003). Existential well-being as a factor in the adjustment of adults sexually abused as children. *The American Journal of Family Therapy, 31*, 201–213.
- Fetzer, I. (1999). *Multidimensional measurement of religiousness/spirituality for use in health research: A report of the Fetzer Institute/National Institute on Aging Work Group*. Kalamazoo, MI: John E. Fetzer Institute.
- Finkelhor, D., Hotaling, G. T., Lewis, I. A., & Smith, C. (1989). Sexual abuse and its relationship to later sexual satisfaction, marital status, religion, and attitudes. *Journal of Interpersonal Violence, 4*, 379–399.
- Flynn, K. A. (2008). In their own voices: Women who were sexually abused by members of the clergy. *Journal of Child Sexual Abuse, 17*, 216–237.
- Fortune, M. M. (2005). *Sexual violence: The sin revisited*. Cleveland, OH: Pilgrim.
- Frawley-O'Dea, M. G. (2007). *Perversion of power: Sexual abuse in the Catholic church*. Nashville, TN: Vanderbilt University Press.
- Galea, M. (2008). The impact of child abuse on the psycho-spiritual and religious status of Maltese college students. *Pastoral Psychology, 57*, 147–159.
- Gall, T. L. (2006). Spirituality and coping with life stress among adult survivors of childhood sexual abuse. *Child Abuse and Neglect, 30*, 826–844.
- Gall, T. L., Basque, V., Damasceno-Scott, M., & Vardy, G. (2007). Spirituality and the current adjustment of adult survivors of childhood sexual abuse. *Journal for the Scientific Study of Religion, 46*, 101–117.
- Ganje-Fling, M., Veach, P. M., Kuang, H., & Houg, B. (2000). Effects of childhood sexual abuse on client spiritual well-being. *Counseling and Values, 44*, 84–92.
- Ganzevoort, R. R. (2002). Common themes and structures in male victims' stories of religion and sexual abuse. *Mental Health, Religion, and Culture, 5*, 313–325.
- Genia, V. (1997). The Spiritual Experience Index: Revision and reformulation. *Review of Religious Research, 38*, 344–361.
- Gorsuch, R. L. (1968). The conceptualization of God as seen in adjective ratings. *Journal for the Scientific Study of Religion, 7*, 56–64.
- Grossman, F. K., Sorsoli, L., & Kia-Keating, M. (2006). A gale force wind: Meaning making by male survivors of childhood sexual abuse. *American Journal of Orthopsychiatry, 76*, 434–443.
- Hall, J. M. (2003). Positive self-transitions in women child abuse survivors. *Issues in Mental Health Nursing, 24*, 647–666.
- Hall, T. (1995). Spiritual effects of childhood sexual abuse in adult Christian women. *Journal of Psychology and Theology, 23*, 129–134.
- Haverkamp, B. E., Morrow, S. L., & Ponterotto, J. G. (2005). A time and place for qualitative and mixed methods in counseling psychology research. *Journal of Counseling Psychology, 52*, 123–125.
- Hill, C. E., Knox, S., & Thompson, B. J. (2005). Consensual qualitative research: An update. *Journal of Counseling Psychology, 52*, 196–205.
- Hill, P. C., & Pargament, K. I. (2003). Advances in the conceptualization of and measurement of religion and spirituality: Implications for physical and mental health research. *American Psychologist, 58*, 64–74.
- Hungelmann, J., Kenkel-Rossi, E., Klassen, L., & Stollenwork, R. (1989). Development of the JAREL spiritual well-being scale. In R. M. Carroll-Johnson (Ed.), *Classification of nursing diagnosis: Proceedings of the eighth conference held in St. Louis, MO, March 1988* (pp. 393–398). Philadelphia: Lippincott.
- Idler, E. L., & Kasl, S. V. (1992). Religion, disability, depression, and the timing of death. *American Journal of Sociology, 97*, 1052–1079.
- Isely, P. J., Isely, P., Freiburger, J., & McMackin, R. (2008). In their own voices: A qualitative study of men abused as children by Catholic clergy. *Journal of Child Sexual Abuse, 17*, 201–215.
- Kane, D., Cheston, S., & Greer, J. (1993). Perceptions of God by survivors of childhood sexual abuse: An exploratory study in an underresearched area. *Journal of Psychology and Theology, 21*, 228–237.
- Kennedy, P., & Drebing, C. E. (2002). Abuse and religious experience: A study of religiously committed evangelical adults. *Mental Health, Religion, and Culture, 3*, 225–237.

- Knoblauch, D., & Falconer, J. (1986). The relationship of a Taoist orientation to western personality dimensions. *Journal of Transpersonal Psychology, 18*, 73–83.
- Krejci, M., Thompson, K. M., Simonich, H., Crosby, R., Donaldson, M. A., Wonderlich, S. A., et al. (2004). Sexual trauma, spirituality, and psychopathology. *Journal of Child Sexual Abuse, 13*, 85–103.
- Lawson, R., Drebing, C., Berg, G., Vincelle, A., & Penk, W. (1998). The long term impact of child abuse on religious behavior and spirituality in men. *Child Abuse and Neglect, 22*, 369–380.
- Lehan, J. (1993). *Defiant hope: Spirituality for survivors of family abuse*. Louisville, KY: Westminster.
- Lev, R. (2003). *Shine the light: Sexual abuse and healing in the Jewish community*. Boston: Northeastern University Press.
- Maloney, H. N. (1985). Assessment of religious maturity. In E. M. Stern (Ed.), *Psychotherapy and the religiously committed patient* (pp. 99–106). Pasadena, CA: Integration.
- McLaughlin, B. R. (1994). Devastated spirituality: The impact of clergy sexual abuse on the survivor's relationship with God and the church. *Sexual Addiction and Compulsivity, 2*, 145–158.
- Miller, W. R., & Thoresen, C. E. (2003). Spirituality, religion, and health: An emerging research field. *American Psychologist, 58*, 24–35.
- Paloutzian, R., & Ellison, C. (1982). Loneliness, spiritual well-being, and quality of life. In L. A. Peplau and D. Pearlman (Eds.), *Loneliness: A sourcebook of current theory, research, and therapy* (pp. 224–237). New York: Wiley Interscience.
- Pargament, K. I. (1999). The psychology of religion and spirituality? Yes and no. *International Journal for the Psychology of Religion, 9*, 35–43.
- Pargament, K. I., Desai, K. M., & McConnell, K. M. (2006). Spirituality: A pathway to posttraumatic growth or decline? In L. G. Calhoun & R. G. Tedeschi (Eds.), *Handbook of posttraumatic growth: Research and practice* (pp. 121–137). London: Erlbaum.
- Pargament, K. I., Koenig, H. G., & Perez, L. (2000). The many methods of religious coping: Development and initial validation of the RCOPE. *Journal of Clinical Psychology, 56*, 519–543.
- Pargament, K. I., Murray-Swank, N. A., & Mahoney, A. (2008). Problem and solution: The spiritual dimension of clergy sexual abuse and its impact on survivors. *Journal of Child Sexual Abuse, 17*, 397–420.
- Park, C. L. (2005). Religion and meaning. In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 295–314). New York: Guilford.
- Pritt, A. F. (1998). Spiritual correlates of reported sexual abuse among Mormon women. *Journal for the Scientific Study of Religion, 37*, 273–285.
- Reinert, D. F., & Edwards, C. E. (2009). Attachment theory, childhood maltreatment, and religiosity. *Psychology of Religion and Spirituality, 1*, 25–34.
- Reinert, D. F., & Smith, C. E. (1997). Childhood sexual abuse and female development. *Counseling and Values, 41*, 235–246.
- Richards, P. S., & Bergin, A. E. (1997). *A spiritual strategy for counseling and psychotherapy*. Washington, DC: American Psychological Association.
- Richards, P. S., & Bergin, A. E. (2005). *A spiritual strategy for counseling and psychotherapy* (2nd ed.). Washington, DC: American Psychological Association.
- Rossetti, S. J. (1994). The impact of child sexual abuse on attitudes toward God and the Catholic church. *Child Abuse and Neglect, 12*, 1469–1481.
- Ryan, P. L. (1998). An exploration of the spirituality of fifty women who survived childhood violence. *The Journal of Transpersonal Psychology, 30*, 87–102.
- Saakvitne, K. W., Gamble, S., Pearlman, L. A., & Lev, B. T. (2000). *Risking connection: A training curriculum for working with survivors of childhood abuse*. Baltimore: Sidran.
- Smith, D. P., & Orlinsky, D. E. (2004). Religious and spiritual experience among psychotherapists. *Psychotherapy: Theory, Research, Practice, Training, 41*, 144–151.
- Tarakeshwar, N., Hansen, N. B., Kochman, A., Fox, A., & Sikkema, K. J. (2006). Resiliency among individuals with childhood sexual abuse and HIV: Perspectives on addressing sexual trauma. *Journal of Traumatic Stress, 19*, 449–460.
- Valentine, L., & Feinauer, L. L. (1993). Resilience factors associated with female survivors of childhood sexual abuse. *The American Journal of Family Therapy, 21*, 216–224.
- Walker, D. F., Gorsuch, R. L., & Tan, S. Y. (2004). Therapists' integration of religion and spirituality in counseling: A meta-analysis. *Counseling and Values, 49*, 69–80.
- Webb, M., & Whitmer, K. J. O. (2001). Abuse history, world assumptions, and religious problem solving. *Journal for the Scientific Study of Religion, 40*, 445–453.
- Weber, L. J., & Cummings, A. L. (2003). Relationships among spirituality, social support, and childhood maltreatment in university students. *Counseling and Values, 47*, 82–95.
- Worthington, E. L., Jr., & Sandage, S. J. (2001). Religion and spirituality. *Psychotherapy: Theory, Research, Practice, Training, 38*, 473–478.

Received September 23, 2008

Revision received April 7, 2009

Accepted April 20, 2009 ■