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For many people, religion and spirituality constitute a major domain of life, one that may influence other domains (e.g., work, relationships, self-regulation). As with any dimension of human experience, religion and spirituality hold the potential for both joys and struggles. Religion and spirituality can help to meet human needs for meaning (e.g., Park, 2005; see also Chapter 8 in this volume), comfort (e.g., Exline, Yali, & Sanderson, 2000), and attachment (e.g., Beck & McDonald, 2004; Kirkpatrick, 2004; Rowatt & Kirkpatrick, 2002; see also Chapter 7 in this volume). Yet these benefits do not rule out the possibility of strain and difficulty in religious and spiritual life.

The past decade has witnessed a veritable tidal wave of empirical research on religious and spiritual struggle. Although several literature reviews were published in the first part of the decade (e.g., Exline, 2002; Exline & Rose, 2005; Pargament, 2002; Pargament, Murray-Swank, Magyar, & Ano, 2005), along with a meta-analysis (Ano & Vasconcelles, 2005), the literature has more than doubled since these reviews were completed. There are now several hundred relevant entries in the PsycINFO database alone. Many of the articles to date have focused on links between struggle and other indexes of emotional and physical well-being.

Although space constraints do not permit an exhaustive review, the aim of this chapter is to orient readers to this burgeoning area of research. The first section describes what religious and spiritual struggles are and how they have been assessed. The second section briefly describes some situational and personal factors that might precipitate struggle. The third section reviews research on the broad concept of religious and spiritual struggle and how it relates to well-being, with an emphasis on studies from the past decade. This section also discusses the controversial question of whether struggle can lead to growth or other benefits. The fourth section briefly describes several types of specific struggles, highlighting select studies and suggesting topics for future research. (For additional recent reviews of specific struggles, see Exline & Rose, in press; Pargament, 2007; for reviews of literature relevant to management settings, see also Exline & Bright, 2011.)

**RELIGIOUS AND SPIRITUAL STRUGGLE: DEFINITIONS AND ASSESSMENT TECHNIQUES**

The notion of struggle implies that something in a person's current belief, practice, or experience is causing or perpetuating distress. This distress might take the form of a single, primary negative emotion (e.g., sadness; anger; guilt), or it might represent an internal conflict in which people experience thoughts or feelings that they cannot easily reconcile. Religious and spiritual struggle can focus on several domains, categorized by Pargament (2007) as divine (e.g., feeling angry at God), intrapersonal (e.g., being unable to forgive oneself for a transgression), and interpersonal (e.g., feeling betrayed by a religious leader). Struggles with supernatural evil will be briefly mentioned in this chapter. Following
the definitions of religion and spirituality for this handbook, some struggles are clearly spiritual in nature—that is, they focus on people's relationships with God or with a transcendent or sacred realm. Other struggles are clearly religious—that is, they center on teachings, practices, or group dynamics of an organized religious group. Yet because the two types of struggle often overlap, the general term religious or spiritual struggle (or the shorthand term struggle) is often used in this chapter.

This chapter frames religious or spiritual struggle as a form of distress or conflict in the religious or spiritual realm. Struggle can be understood in the context of several broader theoretical frameworks, however. For instance, religious or spiritual struggle has been conceptualized and operationalized as a specific, negative form of religious coping elicited by various life stressors (Pargament, Murray-Swank, et al., 2005). Religious or spiritual struggle could be viewed as a relational variable, a stable dispositional variable, or an indicator of more general psychological distress and disorder. Indeed, as we will see, there is support for each of these perspectives. Because religious or spiritual struggle can be conceptualized from different theoretical vantage points, there will be some overlap of this chapter with material in other chapters in this volume (e.g., for information on religious coping, see Chapter 19 in this volume). This chapter, however, devotes only passing attention to forms of struggle that can be clearly traced to specific psychological disorders because this material is covered in the second volume of this handbook. This chapter also does not focus heavily on interventions for spiritual struggle, which are covered in the chapter on spiritual problems (see Volume 2, Chapter 4, this handbook).

What about problematic aspects of religion or spirituality that are not linked with internal struggle? Pargament (2007) described various problems associated with pathways to the sacred, including problems of breadth and depth, fit, and continuity and change (see also Pargament, 1997, 2002). For example, a person might hold an immature, self-centered form of spirituality, one that others see as problematic but that is not causing any internal struggle for the person. Alternatively, members of a religious sect might share beliefs that diverge sharply from those of society at large. Although such situations could set the stage for struggle, they would not meet criteria for inclusion here unless the beliefs were causing distress or conflict.

ASSESSMENT OF RELIGIOUS AND SPIRITUAL STRUGGLE

Although interest in spiritual struggle has grown dramatically in the past decade, several scholars did earlier work on the topic. For example, Funk (1958) developed a 22-item measure of religious conflict, which was later divided by Trenholm, Trent, and Compton (1998) into positive and negative domains. Berg (1994) developed an eight-item measure of spiritual risk for use in hospital settings. The Quest scale by Baithan and Schoenrade (1991a, 1991b) assesses religious doubts and questioning as part of an ongoing existential dialogue. In a related vein, Altemeyer and Hunsberger (1997) developed a measure assessing the extent to which various issues (e.g., evil and suffering, hypocrisy, specific doctrines) prompt religious questions and doubts.

As reviewed in the following section, most studies have framed religious or spiritual struggle in terms of coping with specific stressors (Pargament, 1997). Many have used the full Religious Coping Inventory (RCOPE; Pargament, Koenig, & Perez, 2000) or the 14-item Brief RCOPE (Pargament, Smith, Koenig, & Perez, 1998). The 16-item Suffering With God Scale (M. Webb, Sink, McCann, Chickering, & Scallan, 2010) focuses specifically on divine struggles. Specialized religious coping scales have been made for the faiths of Judaism (Rosmarin, Pargament, Krumrei, & Flannelly, 2009), Islam (Raiya, Pargament, Mahoney, & Stein, 2008), and Hinduism (Tarakreshwar, Pargament, & Mahoney, 2003), and qualitative work has been done in a U.S. Buddhist sample (Phillips et al., in press). Other measures have been designed for use in medical settings (for reviews, see Fitchett, 1999a, 1999b; Fitchett & Risk, 2009). Two of these measures are used to assess reactions to cancer diagnoses: The Spiritual Transformation Scale (Cole, Hopkins, Tisak, Steel, & Carr, 2008) asks about positive and negative spiritual changes, and the Cancer and Deity Questionnaire (Bowman, Beitman, Palesh, Prez, &
Koopman, 2009) focuses on perceived relationships with God.

Some measures frame spiritual struggle in non-coping terms, so that participants focus on their general perceptions, feelings, or attitudes rather than their coping responses to a specific stressor. For example, the Religious Comfort and Strain Scale (Exline et al., 2000) assesses the degree to which participants are experiencing feelings of comfort and three types of strain (alienation from God, fear and guilt, and social rifts) associated with religion. In terms of social aspects of religious struggle, Krause and colleagues (e.g., Krause, Chatters, Meltzer, & Morgan, 2000) have developed specific items to tap negative social interactions in religious organizations. Also noteworthy is the Spiritual History Scale (Hays, Meador, Branch, & George, 2001), which includes items on the costs of religiousness in one’s earlier life.

Measures of how people perceive their relationships with God often include subscales related to struggle. For example, the object-relations-based Spiritual Assessment Inventory (SAI; T. W. Hall & Edwards, 1996, 2002) addresses how people respond to disappointments or other conflicts in their relationships with God. The nine-item Attitudes Toward God Scale (Wood et al., 2010) taps current positive feelings and anger or disappointment toward God. Exline, Park, Smyth, and Carey (2011) have developed items to assess situation-specific anger and negative attributions regarding God. Measures of attachment to God (e.g., Beck & McDonald, 2004; Rowatt & Kirkpatrick, 2002) also include negative or conflicted feelings associated with God, as do many measures of God image (for reviews, see Moriarty & Hoffman, 2007; see also Chapter 15 in this volume).

WHEN AND FOR WHOM DOES STRUGGLE ARISE?

Although struggle can be framed as a natural part of spiritual or religious development (Pargament, 2007), it can be useful to reflect on when—and for whom—struggles tend to arise. As described in the following section, many studies have assessed struggle in response to negative life events such as illness, and this seems appropriate, particularly given that negative life events often elicit negative religious coping (e.g., Bjorck & Thurman, 2007). Yet, as we will see, there are many types of religious and spiritual struggle, and some might occur even in the absence of serious negative events.

A large-scale study of college students (Bryant & Astin, 2008) identified several religious and spiritual correlates of struggle. For example, greater struggle was associated with being part of a religious minority group, a quest orientation toward religion (see also Sandage, Jankowski, & Link, 2010), and seeing God as elusive (i.e., mysterious, “universal spirit”) as opposed to beloved or protective. Religious and spiritual predictors also may vary on the basis of the type of struggle. Concerns related to desecration, for example, are more likely among religious persons who perceive violations to their sacred beliefs (e.g., Pargament, Magyar, Benore, & Mahoney, 2005). Anger and disappointment toward God, in contrast, are more likely among those lower in religious commitment (e.g., Exline et al., 2011) and intrinsic religiosity (e.g., T. W. Hall & Edwards, 2002) but higher in extrinsic religiosity (e.g., T. W. Hall & Edwards, 2002). Anger toward God is also more likely when people see God’s intentions as cruel (Exline et al., 2011) and when they see such anger as morally acceptable (Exline, Kaplan, & Grubbs, 2012).

Several studies have identified individual-difference predictors of religious or spiritual struggle. Struggle has been associated with demographic factors such as being young (Exline et al., 2011; McConnell et al., 2006), female (Bryant & Astin, 2008), and unmarried (McConnell et al., 2006). In terms of personality, struggle has been linked with insecure and anxious or ambivalent attachment (Ano & Pargament, 2003; Belavich & Pargament, 2002; T. W. Hall & Edwards, 2002) and negative affectivity (e.g., Ano & Pargament, 2003; Schottenbauer, Rodriguez, Glass, & Arnkoff, 2006; Wood et al., 2010). Anger and disappointment with God have also been linked to narcissistic qualities (Sandage & Moe, 2011), such as tendencies to exploit others (T. W. Hall & Edwards, 2002) and a sense of entitlement (e.g., Wood et al., 2010). Religious or spiritual struggles are also more likely for those who report poor social support (McConnell...
et al., 2006) and family-of-origin stressors such as alcoholism (Szewczyk & Weinmüller, 2006) and childhood physical or sexual abuse (Fallot & Heckman, 2005).

LINKS WITH INDICATORS OF WELL-BEING, DISTRESS, AND GROWTH

Because religious and spiritual struggle connotes some degree of discomfort, it seems reasonable to predict that measures of struggle would be associated with other measures of emotional distress. Emotional distress may, in turn, translate into physical symptoms. To date, the vast majority of the literature on religious and spiritual struggle has focused on these types of associations with emotional and physical well-being. Such studies are important in terms of clarifying the psychological and medical importance of religious and spiritual struggle. This section provides a brief (and admittedly not exhaustive) overview of this large literature. Many studies have a strong emphasis on divine struggles—struggles related to God or a Higher Power. The following section will give more detail on specific types of religious and spiritual struggles, including not only divine struggles but also those that are intrapersonal and interpersonal.

Mental Health

Studies to date have shown strong support for a link between religious or spiritual struggle and emotional distress. Results come from several types of studies, including meta-analyses and surveys of both nonclinical and clinical samples. A brief review follows.

Meta-analyses. Ano and Vasconcelles (2005) consolidated much of the early research on religious coping and adjustment in a meta-analysis of 49 studies. Twenty-two of the effect sizes focused on links between spiritual struggle and negative psychological adjustment (e.g., anxiety, depression, anger, negative mood, guilt, social dysfunction). Results revealed a modest but significant association (effect size of .22) between spiritual struggle and indicators of poor adjustment. Similarly, in a major meta-analysis on the link between religiosity and depression, T. B. Smith, McCullough, and Poll (2003) found that negative religious coping was linked with greater depression (weighted mean r = .136, N = 1,999 participants across eight studies).

Nonclinical samples. Surveys using nonclinical samples have also shown consistent links between spiritual struggle and emotional distress. In one large study, McConnell and colleagues (2006) surveyed a random sample of 1,629 respondents from the United States. Spiritual struggle showed positive links with all of the study’s distress measures: depression, paranoid ideation, somatization, and several indicators of anxiety. Another recent study using a large sample from the 1998 General Social Survey (Ellison & Lee, 2010) also showed connections between distress and spiritual struggle (intrapyschic, divine, and interpersonal). Similar links between spiritual struggle and emotional distress have been found in nonclinical samples of Jews (e.g., Rosmarin, Krumrei, & Andersson, 2009; Rosmarin, Pargament, & Flannelly, 2009; Rosmarin, Pargament, Krumrei, & Flannelly, 2009; Rosmarin, Pirutinsky, Pargament, & Krumrei, 2009), Muslims (Raiya et al., 2008), and Christians (e.g., Krause, Ingerson-Dayton, Ellison, & Wulff, 1999; Pargament, Zinnbauer, et al., 1998; Rosmarin, Krumrei, & Andersson, 2009; Strelan, Acton, & Patrick, 2009). Studies of undergraduates have yielded comparable patterns (e.g., Exline, Yali, & Lobel, 1999; Exline et al., 2000, 2011; Pargament, Smith, et al., 1998; Pargament, Zinnbauer, et al., 1998), and spiritual struggles have been shown to be common among undergraduates (Bryant & Astin, 2008; C. V. Johnson & Hayes, 2003).

Psychiatric and interpersonal stressors. Many studies have evaluated whether spiritual struggle is linked with poorer adaptation to major stressors. Some of these studies have focused on psychiatric populations. Studies have shown the struggle—distress link in individuals coping with anxiety and depression (e.g., Bosworth, Park, McCouid, Hays, & Steffens, 2003; Dew et al., 2010; Exline et al., 2000; Trenholm et al., 1998), chemical dependency (Conners, Whiteside-Mansell, & Sherman, 2006; Fallot & Heckman, 2005), schizophrenia (Duarte, 2010; Phillips & Stein, 2007), and bipolar disorder.
critique, see Thuné-Boyle, Stygall, Keshtgar, & Newman, 2006), HIV/AIDS (e.g., Cotton et al., 2006; Kudel et al., 2006; Trevino et al., 2010; Yi et al., 2006), chronic pain (e.g., Parenteau, 2009; Rippentrop, Altmaier, Chen, Found, & Keffala, 2005), lung disease (e.g., Burker, Evon, Sedway, & Egan, 2005), end-of-life issues (e.g., Edmondson et al., 2008; Hills, Paice, Cameron, & Shott, 2005), diabetes (Fitchett et al., 2004), and child and adolescent asthma (Benore, Pargament, & Pendleton, 2008). Religious and spiritual struggles have been linked with negative health-related outcomes, including greater substance use (e.g., T. J. Johnson, Sheets, & Kristeller, 2008; Raiya et al., 2008) as well as more negative body images and increased dieting (Kim, 2006).

Several of the health-related studies have used longitudinal designs to disentangle the links between religious or spiritual struggle and emotional distress. For example, a study of children hospitalized for asthma symptoms (Benore et al., 2008) showed that baseline struggle predicted greater anxiety at a 1-month follow-up. A longitudinal study of patients with congestive heart failure (Park, Brooks, & Sussman, 2009) revealed that spiritual struggle at baseline predicted positive shifts in depression and negative shifts in self-efficacy and growth 6 months later. Another study among Orthodox Jews showed that spiritual struggle (in the form of negative religious coping) predicted increases in depression over 2 weeks (Pirutinsky, Rosmarin, Pargament, & Midlarsky, in press). Most recently, a longitudinal study of cancer patients (Exline et al., 2011, Study 5) revealed that at the 1-year follow-up, positive shifts in anger toward God were linked with negative shifts in adjustment. Anger that was chronic or recurrent, rather than transient, seems to have been the issue: At follow-up, the highest levels of distress were reported by patients who reported anger at God at both time points (rather than just at one time point).

Physical Health
Although most of the studies on physical illness have emphasized links between spiritual struggle and emotional distress, spiritual struggle has also been linked with variables related to health status,
disease process, and biomarkers of illness. Early studies revealed cross-sectional links between spiritual struggles and poorer health status (e.g., Koenig, Pargament, & Nielsen, 1998). More recently, studies have gone a step further by using longitudinal designs. For example, in a 2-year longitudinal study of 596 older adults who were hospitalized for medical conditions, Pargament, Koenig, Tarakeshwar, and Hahn (2001) found that spiritual struggle (feeling abandoned by God, questioning God's love, and demonic reappraisal) predicted higher mortality rates. In another 2-year longitudinal study from the same site (Pargament et al., 2004), spiritual struggle at baseline predicted declines in functional status 2 years later.

Other researchers have found similar results in studies of a variety of illness conditions. For example, in a study of 96 medical rehabilitation inpatients, Fitchett, Rybarczyk, DeMarco, and Nicholas (1999) found that spiritual struggle at admission—and, in particular, anger toward God—was associated with poorer rehabilitation outcomes at a 4-month follow-up. Sherman et al. (2009), in a longitudinal study of 94 myeloma patients undergoing stem cell transplants, found that patients who showed increases in negative religious coping reported lower functional and physical well-being after their transplants. Trevino et al. (2010) found that negative religious coping among HIV/AIDS patients predicted worsening of symptoms 12 to 18 months later. New work on biomarkers comes from several studies by Ai and colleagues (Ai et al., 2009, 2010), who have shown links between spiritual struggle and higher levels of interleukin-1, an inflammatory cytokine, in patients facing cardiac surgery.

Possible Benefits From Struggle

Taken together, the studies reviewed so far have painted a grim picture of religious and spiritual struggles: Not only are these struggles painful, but they may even suggest a poor prognosis for future health and well-being. Yet intuitively, it seems that struggle should hold the potential for benefits (Exline, 2012), even if such benefits take time to unfold. After all, human development requires learning how to face new challenges, and stress can provide opportunities for growth (e.g., Calhoun & Tedeschi, 2006). When faith is tested, it seems reasonable to believe that it could become stronger—at least if a person turns to faith-building responses when faced with spiritual choice points (Pargament, 2007). Some may even begin to embrace questioning as a valued part of their spiritual identity (e.g., Batson & Schoenrade, 1991a, 1991b).

But what evidence is there, if any, to support the idea that spiritual struggles can promote growth or other benefits? This issue has been understudied, especially in comparison to the simpler question of whether religious and spiritual struggles are linked with distress. The few studies that have examined potential benefits from struggle have yielded mixed findings. Some have found no relationship between religious or spiritual struggle and growth (e.g., Krumrei et al., 2009; for a review, see Ano & Vasconcelles, 2005). Yet as reviewed by Pargament, Desai, and McConnell (2006), several cross-sectional studies do suggest positive connections between spiritual struggles and posttraumatic growth (e.g., Pargament, Smith, et al., 1998; Pargament et al., 2000). How can these results be squared with the studies described thus far, which typically suggested that struggle was a risk factor for prolonged distress? In fact, one of the longitudinal studies (Park, 2008) looked at stress-related growth specifically, revealing that spiritual struggles actually predicted negative shifts in stress-related growth over time.

To date, there is no definitive explanation for why some studies suggest positive links between struggle and growth, whereas others suggest nonassociations and even negative associations. One possible explanation is that when compared with trivial problems, serious problems create not only more distress but also more opportunities for growth (Pargament et al., 2006). Major stressors can encourage people to cultivate new skills or sources of social support, for example, which can promote growth. Yet not all people will respond by building their resources; some instead will become mired in chronic struggles. To date, at least two longitudinal studies have identified chronic struggle as a problem. In their 2-year study of elderly, medically ill individuals, Pargament et al. (2004) identified
four groups: nonstrugglers, transitory strugglers (struggle at baseline only), acute strugglers (follow-up only), and chronic strugglers (both time points). Chronic strugglers were the only ones who showed declines in physical and mental health over 2 years. Similar patterns emerged from a 1-year longitudinal study of cancer patients (Exline et al., 2011, Study 5): Those who reported anger toward God at both time points showed the worst outcomes in terms of mental and physical well-being.

Another relevant idea is that some people may protest or complain to God while remaining closely engaged in the relationship (e.g., Zornow, 2001). These people might be said to have a “winter” form of faith as opposed to a sunny, optimistic, “summer” variety (Beck, 2006, 2007; Marty, 1997). In fact, recent research suggests that positive, resilient relationships with God often entail some tolerance for negative emotions, questioning, and complaint, just so long as exiting the relationship is not seen as a viable option (Exline et al., 2012). This type of flexibility might be seen as a sign of spiritual maturity or integration (e.g., Pargament, 2007).

Yet most studies that emphasize struggle only assess negative thoughts and emotions; they usually do not take the extra step of seeing how people handle their negative emotions once they arise. The SAI (T. W. Hall & Edwards, 1996, 2002) is one notable exception: In addition to evaluating whether participants experience negative feelings such as disappointment or anger with God, the SAI includes additional questions focusing on how people handle such feelings in the context of the relationship. Being able to express negative feelings while staying engaged in the relationship is framed as realistic acceptance, which is seen as a mature spiritual response. Another good option for assessing growth from struggle may be to supplement self-report measures (which may be prone to retrospective reporting biases) with behavioral measures related to the virtues. For example, studies might provide participants with opportunities to demonstrate such behaviors as generosity, forgiveness, or self-regulation.

Social support may also moderate the link between religious or spiritual struggles and outcomes. For example, Exline and Grubbs (2011) assessed responses that people received when they told others that they felt angry at God. To the extent that people reported supportive responses, they reported more spiritual engagement (i.e., approach behaviors toward God; strengthened faith). In contrast, reports of nonsupportive responses were associated with continued anger toward God, attempts to suppress such anger, use of substances to cope, and spiritual disengagement via exit behaviors (e.g., rebellion, withdrawal, deciding that God did not exist). Although based on retrospective reports, these findings suggest the potential importance of interpersonal responses to disclosures of religious or spiritual struggle.

SPECIFIC TYPES OF STRUGGLE

Many studies have framed religious and spiritual struggles as broad constructs, which makes sense when the purpose is to examine links with mental and physical health. Yet use of such broad categories could limit conceptual and theoretical development because many distinct problems can fit under the umbrella category of struggle. To provide some sense of this diversity, this section will describe several specific types of struggle using the categories outlined by Pargament (2007): divine, interpersonal, and intrapersonal. Because of space constraints, these overviews are brief and selective. For more elaboration on the specific struggles described in this section as well as discussion of demonic aspects of struggle, see Exline and Rose (2005, in press).

Struggles With the Divine

Many spiritual struggles involve seeing God in a negative light—as uncaring, punitive, or unworthy of trust. Research on negative religious coping has placed a heavy emphasis on these struggles with the divine: In fact, five of the seven negative items on the Brief RCOPE (Pargament, Smith, et al., 1998) focus on God (e.g., “wondered whether God had abandoned me”; “felt punished by God for my lack of devotion”). Research on God images (see Chapter 15 in this volume) and attachment to God (see Chapter 7 in this volume) are also of obvious relevance here.

Existing studies make it clear that divine struggles are linked with mental and physical health. Two facets of struggle with the divine are described in
this section: anger toward God and concern about punishment from God. More broadly speaking, the study of divine struggles could make important conceptual contributions to the larger field of psychology. After all, God is a relational partner with unique qualities: In contrast to human beings, God is often seen as all powerful, all knowing, and holy. In addition, most people do not report that they can see or hear God with their physical senses. This lack of unambiguous sensory evidence, in turn, can prompt many questions about God’s qualities, communication, and very existence.

Anger toward God. The topic of anger toward God has begun to receive some focused attention (see Exline & Martin, 2005), as highlighted in a recent article describing five recent studies of undergraduates, a national sample, and individuals coping with bereavement and cancer (Exline et al., 2011). Results from these studies suggest that anger toward God seems to be common, albeit at low levels of intensity, and it shows correlates with emotional distress and physical symptoms that parallel those for other religious and spiritual struggles. In general, people seem to become angry at God for the same reasons they get angry at other people: when they see God as responsible for serious harm, when God’s intentions are seen as cruel, and when there is no sense of a close, committed relationship with God before the incident.

Many people see anger toward God as morally wrong, particularly those who are devout and hold positive images of God (Exline et al., 2012). As with human relationships, the domains of closeness and anger regarding God are largely independent (Beck, 2006), suggesting that positive and negative feelings can coexist. As described earlier, staying engaged while being willing to express questions or negative feelings toward God may be part of a healthy spiritual process (Beck, 2007; Exline et al., 2012; T. W. Hall & Edwards, 1996, 2002). Yet the fact that many people see anger toward God as wrong raises practical questions about whether people will admit to such feelings. This potential problem highlights the need for alternate means of assessment, such as psychophysiological or implicit measures, to complement self-report instruments.

How do people resolve anger toward God? In one study of undergraduates (see Exline & Martin, 2005), 80% of participants who reported some anger toward God in response to a past event said that their anger had decreased over time. Common reasons included finding a sense of meaning, benign reappraisals about God’s intentions, and the simple passage of time. A vital next step will be the development of interventions focused specifically on anger toward God.

Concern about divine punishment. Some people also worry that God feels punitive or disapproving toward them, as captured on the RCOPE (Pargament, Koenig, & Perez, 2000) and Brief RCOPE (Pargament, Smith et al., 1998). They may envision God as a stern judge, for example, or as a parent who offers only conditional acceptance. Regardless of theological beliefs, depression or low self-esteem might make people assume that God disapproves of them (e.g., Greenway, Milne, & Clarke, 2003). Some people might also find it difficult to experience God’s love or forgiveness at an emotional level, even if they believe intellectually that God is loving and merciful. For example, some might agree with a statement about God being forgiving because their tradition endorses such a belief, even though their internal experiences suggest fear or unresolved guilt. Although perhaps difficult to tap with self-report measures, such a division between “head and heart” (e.g., Tallon, 2008) would be an interesting topic for future work.

In terms of intervention, any type of struggle with the divine may warrant a close inspection of one’s God image and its possible sources (e.g., doctrine, socialization, experiences with parents). Sensitivity to theological differences is important here. For example, some faiths portray God (or some facets of God) as punitive, and to challenge such beliefs could be seen as misinformed or disrespectful. In future research, it will be important to examine how people from varied traditions see and perceive God’s forgiveness (e.g., Toussaint & Williams, 2008).

Intrapersonal Struggles
Other spiritual struggles have an inward focus, even though they center on beliefs associated with the
divine realm. The boundaries here quickly become fuzzy, because any religious or spiritual struggle could cause personal distress. In intrapsychological struggles, however, the primary emphasis is on one's own thoughts or actions rather than on God or others. Two areas of intrapsychological struggles are briefly highlighted in the next sections: moral imperfection and questioning or doubt.

**Facing moral imperfection.** Even if they do not fear God's punishment, people may struggle when they confront their own imperfections of morality or character (e.g., "I'm too weak to stop drinking" or "I'm too selfish"). At some level, these types of struggles can be framed in general psychological terms as experiences of personal failure or limitation. However, specific religious beliefs or practices might increase anxiety or guilt about moral failings. For example, a negative view of human nature could lead to shame and self-loathing, whereas perfectionistic approaches to religious rules could feed into scrupulosity (e.g., Abramowitz, Huppert, Cohen, Tolin, & Cahill, 2002), with its associated excesses of guilt and anxiety. Such preoccupation with sin may be linked in important ways with frightening beliefs about the afterlife, such as fears of hell (e.g., Exline & Yali, 2006) or, in Eastern traditions, bad karma.

In severe forms, extreme scrupulosity may be a sign of obsessive–compulsive disorder (OCD), which would require specialized treatment. In milder cases, resolving religious shame or guilt might entail working toward acceptance of human imperfection, perhaps by fostering self-forgiveness, humility, or self-compassion. Although there is some research on these topics (for reviews, see J. H. Hall & Fincham, 2005; Wayment & Bauer, 2008), more work is needed on ways to foster these qualities across various belief systems. Within Christianity, for example, it may be appropriate to infuse discussions about sin with attention to the topic of grace (e.g., McMinn, Ruiz, Marx, Wright, & Gilbert, 2006), as shown in a recent intervention study (Ano, 2006).

**Spiritual questions and doubts.** Struggles can also arise when people try to reconcile their thoughts and beliefs about God or about religious doctrines. Attempts to conserve cherished or long-held beliefs might fail as people are exposed to new ideas or contradictory information. In the wake of negative life events, people may find themselves on an attributional search, asking, "Why?" and finding that their existing meaning systems cannot provide satisfying answers.

Altemeyer and Hunsberger (1997) developed a tool to assess sources of questions or doubts about religion, such as religious teachings (e.g., sex, evolution) and offenses by religious people (e.g., hypocrisy, intolerance). Their work has suggested that religious doubt is a mixed experience in psychological terms: On the bright side, doubt is linked with potentially positive qualities such as openness to experience, complex thinking, and ego identity development. These findings parallel Batson and Schoenrade's (1991a, 1991b) quest orientation to religion, in which doubt and questioning are framed positively. Yet doubt, like other struggles, has been associated with distress (e.g., Krause, Ingersoll-Dayton, Ellison, & Wulff, 1999) and does predict religious disengagement for some individuals (Hunsberger, Pratt, & Pancer, 2002).

One compelling topic for future work involves the interface between cognitive and emotional aspects of doubt. For example, one recent study showed that anger-related struggles with God were greatest for participants who were uncertain about whether God exists (as opposed to being sure about God's existence or nonexistence; M. Webb et al., 2010). More broadly speaking, anger toward God tends to correlate with doubts about God's existence (Exline & Park, 2010). It may be that doubt creates a tenuous relational foundation, which, in turn, makes anger more likely. Anger might promote doubt ("I can't believe that a loving God would do this") or lead to nonbelief as a way to exit the relationship, as captured in Novotni and Petersen's (2001) concept of emotional atheism. Consistent with this logic, some atheists and agnostics do report anger focused on the idea of God, especially in reference to past events or hypothetical images of God (e.g., Exline et al., 1999, 2011; see also M. Webb et al., 2010).

**Interpersonal Struggles**
Some religious struggles focus specifically on interpersonal issues. Many problems fall into this
category, ranging from family conflicts to religious wars. Social psychological research on social influence, prejudice, and intergroup dynamics can be helpful in understanding these types of struggles. This section focuses on two broad categories of interpersonal struggle: disagreements about religious issues and offenses committed by members of religious groups.

Disagreements about religious issues. Even when people agree on general beliefs such as the existence of God, they can diverge in many of their specific beliefs. These disagreements can cause stress within families (e.g., Curtis & Ellison, 2002), as when devout members of two faiths try to marry or when a teenager breaks away from the faith of her parents. People who hold minority religious beliefs within a larger group or culture can also face difficulties ranging from teasing and social exclusion to aggression. These can be seen not only as serious social problems but also as sources of personal distress for minority group members, who may experience anxiety, shame, or a sense of stigma. Such issues have been documented among Jews, for example (e.g., Dubow, Pargament, Boxer, & Tarakeshwar, 2000), and among individuals who identify as gay, lesbian, bisexual, and transgender (e.g., Halkitis et al., 2009).

Given that almost any disagreement could cause struggle, how are disagreements about religion unique? One possibility is that because religious beliefs are often central to how people make sense of the world (Park, 2005), clashes on these meaning-laden issues will carry special significance. Also, to the extent that people associate religion with the sacred, they may see all beliefs and practices associated with their religion as sacrosanct. Those who seem to disrespect these sanctified beliefs or practices may thus be seen as committing sacrilege (e.g., Pargament, Magyar, et al., 2005; Pargament, Trevino, Mahoney, & Silberman, 2007). Another factor that could fuel conflict and aggression is the belief that violence has been sanctioned by God—an idea that has received support in laboratory experiments (e.g., Bushman, Ridge, Das, Key, & Busath, 2007). Given the potential volatility of religious disagreements, more research is needed on how individuals and groups can navigate religious disagreements in constructive ways.

Offenses by members of religious groups. Some religious struggles center on offenses committed by religious persons or groups. For example, people may note atrocities that have been committed in God’s name or the intolerance shown by certain religious groups. Others report direct harm by religious group members, which can range from negative social interactions within congregations (e.g., Ellison, Krause, Shepherd, & Chaves, 2009; Krause et al., 2000; Krause, Ellison, & Wulff, 1998) to sexual abuse by clergy (e.g., Pargament, Murray-Swank, & Mahoney, 2008; Plante, 2004). These offenses not only cause strife within congregations, but they may also be a reason for people to disengage from religion or to doubt its value (Altemeyer & Hunsberger, 1997). Offenses by religious leaders might be particularly damaging: Not only do these individuals hold positions of authority, but also some are seen as appointed by God or even as representatives of God. Thus, moral offenses by religious leaders might seem to reflect on God.

How can people and religious communities heal from the damage caused by these offenses? Resolution strategies would need to be tailored to the specific problem (e.g., trauma work in abuse cases, conflict resolution, pastoral restoration, forgiveness). Regardless of the exact offense, some people may benefit from focusing on the idea of universal human limitation: No matter how devout and well-intentioned people might be, the inevitable flaws and shortcomings of human nature may prevent us from being perfect representatives of the sacred.

Struggles Related to Perceptions of Supernatural Evil
Some people also experience struggles related to belief in supernatural evil forces, such as the devil or evil spirits (for details, see Exline & Rose, 2005, in press). Studies have shown that demonic appraisals for negative events such as divorce are quite common (Krumrei et al., 2011). Such appraisals typically correlate with other struggle indicators and adjustment difficulties (e.g., Pargament et al., 2000, 2001; Pargament, Smith, et al., 1998). Yet
attributing negative events to the devil could serve a defensive function by helping individuals to preserve a positive view of God (e.g., Beck & Taylor, 2008). Some people might find a personification of evil to be preferable to the idea of a completely capricious, impersonal universe in which negative events are attributed entirely to chance or natural laws.

CONCLUSIONS AND FUTURE DIRECTIONS

This chapter has provided an overview of empirical research on religious and spiritual struggle, a literature that has more than doubled since the last reviews were written (Amar & Vasconcelles, 2005; Exline & Rose, 2005; Pargament, Murray-Swank, et al., 2005). Most of this literature has focused on associations between struggle (often framed as negative religious coping), distress, and health. Many studies now document links between struggle and distress, and a growing number show links with physical outcomes. Several longitudinal studies also clarify that struggles—particularly chronic ones—predict later declines in emotional and physical health.

Where might the field go from here? In terms of the religion–health link, it now seems prudent to move beyond cross-sectional, correlational studies to continue the trends toward more sophisticated measures: longitudinal designs, use of biomarkers, and evaluation of psychological mediators. It would be useful to learn more about whether certain types of religious and spiritual struggles are especially strong predictors of distress or illness. In addition, the possibility that religious and spiritual struggle might lead to growth under some conditions is a compelling but difficult question, one that has received little attention to date. Complex and sometimes contradictory findings on this topic point to the need for more research to clarify the conditions under which struggles lead to growth versus decline (Pargament et al., 2006).

Although research linking religious or spiritual struggle with mental and physical health has been fruitful, a narrow focus on health outcomes runs the risk of diverting attention from other important facets of struggle. To provide precise conceptualization and better integration with other theoretical work, a useful next step may be to focus more attention on specific types of struggles: what they entail, how they develop, and how they can be resolved. While digging more deeply into conceptual questions about struggles and their resolution (see Volume 2, Chapters 4 and 17, this handbook), social scientists should try to glean from the wisdom of others who wrestle with these issues on a regular basis: theologians, philosophers, clergy, educators, pastoral counselors, chaplains, and spiritual directors, to name a few. Although psychologists have much to contribute, we also have much to learn, particularly given our status as relative newcomers to this conversation. Over the long term, our ability to make meaningful and lasting contributions to science and society may depend on our ability to step outside the confines of our profession and see ourselves as part of a bigger picture—both historically and in terms of interdisciplinary dialogue.

References


