



LOYOLA
UNIVERSITY MARYLAND

**APPENDICES TO THE
STUDENT HANDBOOK
FOR THE
PASTORAL COUNSELING AND
SPIRITUAL CARE
PROGRAMS**

2009-2010

APPENDICES

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APPENDIX A: PHILOSOPHY OF SUPERVISION

(Barry K. Estadt, Ph.D.)

Reprinted from *The Art of Clinical Supervision*, Paulist Press

Introduction

Every profession is concerned that its candidates be prepared for the effective practice of that profession. This requires that the candidate, during the course of preparation, acquire the theoretical body of knowledge proper to the profession as well as the professional skills which will enable the candidate to function effectively. Becoming a professional requires that the candidate master both theory and skills through discipline, concentration, patience and diligent practice. It means mastering the art of the profession.

An art is not something which can be taught; it can only be learned. The necessary steps in learning any art are outlined by Erich Fromm in *The Art of Loving*. He writes:

The process of learning an art can be divided conveniently into two parts: one, the mastery of the theory; the other, the mastery of the practice. If I want to learn the art of medicine, I must first know the facts about the human body, and about various diseases. When I have all this theoretical knowledge, I am by no means competent in the art of medicine. I shall become a master in this art only after a great deal of practice, until, eventually, the results of my theoretical knowledge and the results of my practice are blended into one--my intuition, the essence of the mastery of any art (p.4).

Most professional groups have incorporated internship experiences which provide candidates with an opportunity to work toward a "mastery of theory" and a "mastery of practice." Professional schools dealing with the preparation of counselors have faced an additional challenge since mastering the art of counseling goes beyond mastery of theory and practice. It includes, in addition, the personal qualities of the counselor which facilitate personality growth.

In the 1960's, Rogers pointed clearly to the importance of the person of the counselor as he outlined the necessary and sufficient conditions for personality growth to occur. Within the Rogerian framework, the capacity of the counselor for entering into a warm, accepting, empathic relationship characterized by unconditional positive regard, along with the ability to communicate to the client one's acceptance and understanding, is critical to the counseling and therapeutic process. This point has been strongly underscored by Carkuff, well known for his systematic work in training counselors in specific skills. Although much of Carkuff's focus is on skills training, he stresses the importance of the counselor's personal actualization in his preface to *Helping and Human Relations*, Vol. II:

If the helper cannot actualize his own potentials, he cannot enable another to do so. The focus of training, as the focus of treatment, then, is upon the change or gain of the

trainee himself. This is most critical, for without an effective person in the helping role, all else is futile (p. xii).

Authors in counseling and therapy typically present a list of the personal qualities of the therapist in keeping with their theoretical presuppositions. Corey, for example, in his introductory text for counselors, offers a list of nineteen qualities of effective therapists. Although each list varies in content and length, the points of convergence are significant in establishing an overwhelming consensus within the professional counseling community of the importance of the personhood and behavior of the counselor in the counseling process. Weiner, in *Principles of Psychotherapy*, summarizes the thinking in the field as follows:

Some approaches to psychotherapy have focused largely on technical skills with little attention to the personal qualities of the therapist. Others have stressed the personal interest and warmth of the therapist. Others have stressed the personal interest and warmth of the therapist as the major agent of change in psychotherapy and have minimized the importance of technique. Yet, most psychotherapy requires a balanced combination of personality and technical skills, which Strupp (1970, 1972) aptly refers to as the general and specific factors promoting change in psychotherapy (pp. 34-35).

Mastering the art of counseling requires an integration of a vast body of theoretical knowledge with clinical skills. It also involves developing in oneself the personal qualities which facilitate personality growth in clients within the context of the counseling relationship. Learning how to integrate theory, skills and personal qualities in working with many different types of clients is part of the long process of mastering the art of counseling.

Supervision: A Primary Catalyst

Within the counseling professions supervision of the candidate's ongoing counseling work has come to be regarded as the primary catalyst in facilitating an integration which includes: (a) an incorporation of the body of knowledge common to the field of counseling theory and practice; (b) the acquisition of specific counseling skills; (c) the development of a general way of being that facilitates personal growth in the client; (d) the formulation of one's personal understanding of counseling as a helping professional. The goal of supervision in counselor training is to assist candidates in working toward this fourfold integration.

Concepts of supervision vary among the various counseling specialties and within any given specialty. The term supervision is used to refer to administrative supervision, to beginning skill training as well as to a more intensive clinical process. While all forms of supervision play a role in the training process, the authors of this book presume that administrative supervision appropriate to the specialty and to the setting is being provided. In addition, they assume that basic courses in Helping Relationships, Crisis Intervention, Personality Development, and Psychopathology have been completed. The attention of the authors, therefore, is primarily directed toward the unique interpersonal process of supervision which seeks to address the growth of the candidate in mastering the art of

counseling.

With this focus in mind, supervision is defined as a special kind of tutorial relationship in which a person with less experience presents his/her work for the scrutiny and critique of a person with more experience. In the counseling profession, the preferred work-sample is a recording (audio or video) of a complete counseling session along with a clinical case report or summary which situates the counseling session. The recording grounds the supervisory session on the actual performance of the counselor and the interaction of the counselor with the client(s) along with the variety of issues which the work sample generates.

Supervisory Formats

Programs utilize *a variety of formats*. Individual supervision, based on a dyadic tutorial model, is deeply personal. It allows the supervisor to give consistent, ongoing, uninterrupted attention to the work of the counselor. The counselor is enabled to proceed at one's own pace and to deal, in a non-competitive setting, with one's personal learning needs.

Small group supervision is based on the premise that participants can learn a great deal from one another as well as from the group supervisor. Making presentations to the group strengthens one's ability to conceptualize the client's problems in clear and concise terms. It also allows for response from a variety of persons, thereby giving the counselor a broader based feedback. Frequently small groups, because of the personal nature of the interaction, develop into strong support groups in which counselors become increasingly comfortable with responding to one another with both positive and negative feedback.

The interdisciplinary case conference has been designed to allow the counselor the opportunity to present a counseling case in depth, demonstrate to one's supervisors and peers a level of competence in the total management of a case at the same time that one utilizes the group for consultation. A detailed grasp and organization of the case is required as well as the demonstration of clinical skills, a theoretical grasp of the psychodynamics of the client and the counselor-client interaction, and an understanding of one's own identity as a counselor. Participants have the opportunity of learning about a variety of clients through the in-depth presentations of their peers.

Supervisory Focus

The *focus* of supervision involves three primary interrelated functions: monitoring client welfare, promoting the supervisee's professional growth as a counselor, and evaluating the supervisee. For the agency supervisor who has direct responsibility for case management, the initial and sometimes primary concern will be for client welfare. The agency is directly and immediately accountable for services provided to the client. Quality control is required at every step in the delivery of services including intake, diagnosis, the development of treatment plans, ongoing counseling, and referral or termination.

Agencies which develop training programs and utilize students in the delivery of services frequently find that the quality of services is significantly enhanced. Teaching and supervising trainees stimulates staff to set standards of excellence in the delivery of services and provides a forum for ongoing reflection and evaluation of services rendered. The supervision of students provides unique opportunities for collegial peer interaction around diagnosis, the development of treatment plans and a wide range of potential treatment modalities. Frequently agency morale is enhanced as staff divide their energies between direct service and the supervision of students. Paradoxically, the utilization of student interns typically enhances the quality of service provided by an agency to clients.

Developed counseling programs supplement agency supervision with program supervision directed primarily at the *professional growth of the candidate*. This frees the supervisor from the pragmatic need to focus on crisis management and other needs of immediate concern, thereby allowing the supervisor greater freedom to deal with the growing edges of the counselor in depth without neglecting client welfare as issues emerge. The focus of supervision varies with the level of training of the counselor; the beginning counselor versus the near-graduate. Needs of counselors-in-training also vary widely because of diverse backgrounds and varying degrees of prior counseling experience. The supervisory hour with beginners may deal with basic diagnostic and counseling skills and concentrates more on an integration of theory and technique. The advanced level student would be expected to have achieved a technical proficiency in terms of theory and technique focusing now on the process issues of therapy and one's identity as a professional counselor.

Evaluation

Evaluation is an inescapable part of the supervisory relationship, whatever the supervisory setting. The primary issue is whether evaluation is done well or poorly. In this regard, the criteria on which a student is evaluated need to be made explicit, communicable and appropriate to the training level of the candidate. Problems in student evaluation emerge when the expectations of each level of training are not shared by student and supervisor. It has been my experience as administrator of a counseling training program for ten years that some supervisors have a special gift for dealing with beginning students, accepting their theoretical and clinical limitations, enabling them to move from neophyte status to an intermediate level, while other supervisors function more effectively with intermediate to advanced level students. It is important to match students and supervisors.

Counseling programs utilizing external field placements face the challenge of working at a common understanding of expectations regarding levels of expectation. The experience at Loyola is that program expectations are generally higher than agency expectations requiring an ongoing dialogue between the program and the agency. Special problems emerge when the prevailing therapeutic modalities at an agency differ notably from those of the counseling program itself. Although such differences in approach are enriching for the intermediate and advanced student, challenging the student in one's personal integration of theory and technique, it is confusing to the beginning student and must be taken into account

in the evaluation process.

Supervision Distinct from Therapy

The impact of the personal qualities of the counselor in the therapeutic relationship makes it inevitable that the counselor's personal therapeutic issues will emerge within the context of supervision. While individual therapeutic issues can be addressed in relationship to a given work-sample, extensive focus on the counselor's therapeutic issues in supervision will sidetrack and contaminate the supervisory process. Supervision focuses primarily on the dynamics of the candidate-as-counselor: how the counselor interrelates with clients in a growth-producing manner. Therapy with a supervisor would divert supervision from its threefold focus on: (a) client welfare, (b) professional growth of the candidate, and (c) evaluation. The therapeutic focus would involve changing the contract that a supervisor has with the supervisee and with the agency or program involved.

Such a shift thoroughly contaminates the process of supervision and demonstrates the supervisor's inability to establish and maintain parameters. Supervision frequently brings therapeutic issues to light since, in working with clients, counselors come face to face with unresolved issues in their own lives. When issues for personal therapy are brought to light, counselors can be invited to address the issues in appropriate ways: through personal self-reflection, dialogue with significant persons in their lives, growth groups or personal therapy. Whenever personal issues seriously interfere with counseling and the ongoing supervisory process, the supervisor must address the need for personal psychotherapeutic investigation as part of the evaluative process. While there may be different nuances of thought on the role of personal therapy and its requirement of all counselors-in-training, individual counselor training programs should have a clearly defined policy understood by faculty, supervisors, and students alike.

Supervision: The Core Process

For decades, supervision of the candidate's practicum experience has been accepted as integral to the training of counselors and related mental health professionals. Hundreds of supervisory hours are invested in every counseling candidate to assist the counselor in the task of integrating theory, clinical skills, therapeutic personal qualities and professional identity. Yet surprisingly little attention has been given to the training of supervisors. In most professional groups, it has been assumed that if one has gone through the supervisory process as a trainee, one is qualified upon completion to take on the role of supervisor. The American Association of Pastoral Counselors (AAPC) is notable in distinguishing between the role of practitioner and supervisor. In AAPC, the highest level of practitioner is the "Fellow." This status is awarded to the seasoned practitioner who has demonstrated an advanced level of integration of counseling theory and technique with one's clinical skills, pastoral identity and the ability to reflect theologically on one's counseling work. Fellows who wish to aspire to supervisory status must normally possess a doctoral degree and undertake to be a supervisor-in-training, accumulating a prescribed number of hours of doing supervision under supervision. The assumption underlying these requirements is that

supervision is an activity different from counseling requiring careful self-reflection and professional critique. Supervision of supervision, however has been carried on without the benefit of a systematic understanding of the process of supervision.

In recent years efforts to understand the supervisory process conceptually have been appearing. Typically, attempts to understand the process have involved drawing parallels with theories of counseling and psychotherapy. There are articles on supervision from a variety of approaches: Psychoanalytic, Client-Centered, Cognitive Developmental, Rational-Emotive, Social Learning and others. All are interesting and insightful to some degree; some are highly complex; others appear to focus more on the theoretical model rather than on the supervisory process itself. What is attempted in Chapter 2 is an examination of the *core process* of supervision as a basic process which underlies one's theoretical orientation. What precisely is the process of supervision? What are its stages? How is the process facilitated? What are the supervisory issues commonly addressed? An attempt is made to look at the *process of supervision* much as Carkuff, Egan, and others have looked at the process of counseling and psychotherapy addressing the core process of supervision which is fundamental irrespective of one's theory of counseling and psychotherapy.

References

R.R. Carkhuff, *Helping and Human Relations*. New York: Holt, Rinehart and Winston, 1969.

Erich Fromm, *The Art of Loving*. New York: Bantam Books, 1956.

I. Weiner, *Principles of Psychotherapy*. New York: Wiley, 1973.

APPENDIX B: STYLE FORMAT FOR DISSERTATIONS

LOYOLA COLLEGE IN MARYLAND

DISSERTATION/THESIS GUIDELINES

These guidelines have been developed to standardize dissertation and thesis formats for the college. These guidelines apply to all graduate programs in the College of Arts and Sciences (e.g., Pastoral Counseling, Psychology, Speech Pathology, and Education).

In all instances the format style of the American Psychological Association (APA) will be followed (See the *Publication Manual of the American Psychological Association*, 5th ed., 2001). All students and faculty are encouraged to familiarize themselves with this style of writing. It was selected for several reasons: 1) it is a style geared specifically for scientific writing; 2) it is flexible; and, 3) is rather easy to construct using contemporary word processing packages.

Although APA style is the overarching style guide, there are several exceptions to these rules that will need to be followed for dissertations and theses, and these are enumerated below. The reason for these discrepancies with APA style is that dissertations and theses represent final, finished documents and as such need to have a polish to them that is not found with manuscripts that are being submitted for publication. The list that follows outlines the specific variations from APA style that are being required. If a specific issue is *not* mentioned below, then APA guidelines are to be followed.

Editing

You are responsible for editing and proofreading your project prior to submitting it to your committee. Proofread carefully for typographical, grammatical, spelling, and punctuation errors. If you require assistance in preparing your manuscript, you may hire a private editor or typist.

Students who obtain the services of unlisted private editors or typists must provide those persons with this guide. Private editors and typists must communicate with the student, not with the university personnel. The university does not assume responsibility for a student's contractual agreement with a private editor or typist or for the quality of the editor's or typist's work. Students should not ask the editor or typist to send documents to the Committee. It is the student's responsibility to ensure that the dissertation/thesis is correct prior to submission. Editors and typists must not make changes that affect the content of the dissertation.

Paper

The final copy must be on 8.5 in. x 11 in. white, quality paper (100% cotton bond paper (32#)).

Do not bind or staple the manuscript. Use only one side of the paper. Noticeable corrections, such as by fluid or tape, are not permitted.

Margins

All pages of the dissertation/thesis must have the following margins: 1.5-in. left side; 1.0-in. top, bottom, and right side.

The bottom margin should be as close as possible to 1 in., but not smaller than 1 in. Bottom margins must be 1-in. regardless of the paragraph break. Therefore, you should remove the widow/orphan control in your word-processing program so that each page has text to the bottom margin.

Continue the narrative text to the bottom margin on a page with a short table or figure (i.e., one that is less than a full page).

An exception to the 1-in. bottom margin requirement is a stand-alone subheading (APA Level 2, 3), which

should not appear on the last line of a page.

Margins for appendix items may be larger, but not smaller, than those required for other pages of the manuscript.

Use a ragged (i.e., unjustified) right margin, except for the table of contents.

Each chapter must begin at the top of a new page

Page numbers are placed *within* the top or bottom margins (see section on page numbering).

Typeface and Size

Use a readable 12-pt serif typeface; Times New Roman or CG Times are to be used. However, a sans serif typeface (e.g., Arial) should be used for legends and axis labels in figures.

Italics should be used where required by APA rules. Do not use underling, bullets, or colors. Do not use superscript or bold type (except for certain statistical symbols as described in the APA manual).

A 10- or 11- pt type may be used in tables and figures, if necessary, to fit material within the left and right margins or on a single page. The type size for a table note or figure caption should be 10 pt to differentiate between the note or caption and the next line of text.

Line and Word Spacing

Double-space between all lines of text, between paragraphs, between headings and subheadings, between headings and text, and between tables (or figures) and text.

Single-spacing is required in some sections (e.g., Table of Contents). Single-spacing is used in table titles, text within tables, table notes, figure captions, block quotations, and multiple-line headings.

An acknowledgments page, if included, must be double-spaced with paragraph indentation.

Provide one space after punctuation, including colons and sentence-ending periods. Refer to APA section 5.11 for exceptions to this rule.

Pagination

Preliminary pages (“Title” page through the last page of “List of Figures”) must have lowercase Roman numeral centered in the bottom margin .5 in. from the bottom edge.

The title page is assigned a number (i) that is *not* placed on the page. The first page of Chapter 1 begins normal Arabic numbering (e.g., 1, 2, 3, etc.). These page numbers appear in the top right corner of the document after the Running Head.

The typeface and size of page numbers should be the same as the manuscript type.

Page Headers

Page headers appear on all pages EXCEPT the introductory pages, which include: Title Page, Abstract page(s), Dedication, Acknowledgment, Table of Contents, List of Appendixes, and the List of Tables and Figures. Page headers are to start on the first page of Chapter I. Page headers should be set at .5 inches from the top of the page and page footers should be set at .5 inches from the bottom of the page. For those students who are not familiar with using headers and footers in Microsoft Word might want to save the introductory pages and the body of the dissertation into two separate documents.

Indentation

The first line of each paragraph must have a consistent indentation of ½ in. Use the same indentation for subheadings in the table of contents, for block quotations, for the first lines of numbered seriation, and for the second and subsequent lines in reference-list entries.

Use a hanging indent style for the reference list.

In numbered lists, indent the first line of each item as shown in the APA Publication Manual, section 3.33.

In multi-paragraph block quotations, provide an additional indent for the first line of each paragraph (except for the first paragraph, which receives a single indent).

Order of Pages

This section outlines the order in which the pages of the thesis or dissertation are to be presented. Please note that the first page to have an Arabic (e.g., 1, 2, etc.) number is the first page of the Introduction. Arabic numbers are placed at the upper right corner of the page after the page header. All other pages, including the Title page are numbered in lower case Roman numerals (e.g., i, ii, iii, . . . etc), which are centered at the bottom of the page. The placement of pages is as follows:

- Approval Page
- Title Page
- Dedication (if present)
- Acknowledgments (if present)
- Abstract
- Table of Contents
 - o Use dot (.....) leaders for each entry
 - o Include entries for the Acknowledgments, Dedication, Abstract, and Appendixes
- List of Tables
- List of Figures
- First page of Chapter I
- References
- Appendixes
- Vita Auctoris (should be no more than two pages in length)

Abstracts are to be no longer than 500 words and two pages in length. They should convey an overview of the issues, methods, results, and conclusions of the study.

All text is double spaced throughout the document. However, within tables and figures, text should be single-spaced.

Headings

- 1) The first level of headings will be placed entirely in capitals. These terms are centered on the page. These sections are: DEDICATION, ACKNOWLEDGMENTS, ABSTRACT, TABLE OF CONTENTS, LIST OF TABLES, LIST OF FIGURES, CHAPTER I to CHAPTER V, REFERENCES, APPENDIXES, and VITA AUCTORIS.

- 2) Sub-headings to chapter, or second level headings, will have the first letter capitalized only and the words are centered on the page. There is no italicization of the words.
- 3) Sub- sub-headings, or third level headings will start at the margin at left, first letter capitalized (for all words) and the heading itself is italicized. Text appears on next line with a paragraph indent (½ inch).
- 4) Fourth level headings will begin as a paragraph indent, first letter capitalized (for all words) and the heading itself is italicized, with a period at end of heading. Text will begin immediately after heading.
- 5) Fifth level headings will begin as a paragraph *double* indent, first letter capitalized for the first word (lower case for all other words) and the heading itself is italicized, with a period at the end of the heading. Text will begin immediately after the heading.

The following outlines this format:

CHAPTER II

Method

Participants

Participants were 150 graduate level volunteers.

Measures

Bi-Polar Adjective Rating Scale. This 80-item questionnaire was developed by Smith (1993) and measures the most important personality characteristics of individuals.

Reliability Evidence. In three samples of undergraduate students, Miller (1992) obtained internal consistency estimates for scores in the .75 - .85 range.

Table and Figures

Tables and figures must be formatted according to the guidelines of the APA manual (sections 3.62 - 3.86). Additionally, each table or figure must fit on one page (if possible). Use single spacing for entries within tables.

Tables and figures should be set flush left, presented horizontally, and placed at the appropriate point in text (i.e., following, as soon as possible, the text reference).

A figure caption is placed below the figure. If you have only one table or figure in the manuscript, do not label it with a number; refer to the item as "Table" or "Figure." The figure caption serves as a title; as such, the first sentence should appear in the Table of Contents listing.

Tables and figures are included within the body of the text and are not presented at the end of the document. Begin each new table or figure at the top of the page directly after it

is mentioned in text. If space remains below the table or figure, text should begin here (i.e., *not* at the beginning of the next page).

The titles to all figures and tables are italicized, but the label is not. For example:

Table 1

Descriptive statistics for selected measures.

Reference List

The reference list must be titled as “REFERENCES.”

Citation style will be according to APA style employing hanging indents. Students should consult with their department to determine whether they should use initials for authors’ first names or can spell out first name. Psychology students will use initials for authors’ first names.

References are not to be orphanated.

Appendixes

The format of appendix material may deviate from the format used for the other sections of the applied dissertation. However, sufficient margin space must be provided (see “Margins”), and pagination must be continuous (see “Pagination”).

Do not use color in any appendix (except for situations where color makes up the stimuli and /or the responses (e.g., fMRI).

The page numbers of the cover pages, not of the actual appendix items, are presented in the table of contents. Do not include a cover page for the whole appendix section.

Each appendix must have a cover page with its title centered top to bottom and left to right. The word “APPENDIX” is capitalized. A letter is used only if there is more than one appendix.

Keep the number of appendix items to a minimum. As a general rule, you should not include more than 26 appendix items (i.e., do not go past Appendix Z).

If only one appendix item is included, label it as “Appendix,” not as “Appendix A.”

Preliminary Pages

Approval Sheet: A universal cover sheet has been developed and is attached to this document. It is required in all cases.

Title page; see enclosed sample for required format. Break each line of the title at a logical point (e.g., avoid the splitting of a phrase). Break the lines of the fulfillment statement as shown in the sample.

Table of Contents

See the sample for the required format.

All the first- and second-level headings in the table of contents must appear in the text, and vice versa.

Include all levels of headings in the table of contents.

Lists of tables and figures follow immediately after the list of appendixes each on their own page.

Dot leaders, rather than a series of periods, must be used to join headings and their respective page numbers; at least two dots must separate the heading or title from its page number.

Directions for using Dot leaders in Word: Go to Format, Tabs, Tab Stop Position, Type in 6, Alignment Right, Leader 2, Set, OK. Now go to the place you want to insert the Dot Leaders and press your TAB key. Next Type in the Title on the left and then type in your page number on the right. Once you are done go back (to Format, Tabs) and set the Clear All so that you can then reset your tab key for paragraph indents.

The right margin for the table of contents is justified

Do not provide an additional tab (indent) for the second and subsequent lines of a heading, subheading, or title; begin the second line of the heading or title at the same point as the first line.

Avoid having headings and titles extend into the column of page numbers.

Headings and page numbers in the table of contents must match the corresponding headings and page numbers in the text.

If you have only one appendix item, one table, or one figure, do not include an identifying letter or number; label the header "Appendix," "Table," or "Figure."

Refer to APA section 3.13 for capitalization rules relating to headings and titles.

For all other aspects of formatting and style, students are to consult with the most current APA Guidelines. This includes information on abbreviations, writing style, statistical presentation, and all other aspects of formatting.

Students are responsible for checking with their department to determine the number of copies that are required. The necessary copies are then sent to the library for binding. The costs for binding will be charged to the student.

Italicization and Spacing of Statistics

Be **SURE** that all statistics are *italicized* in the text **and** in the tables (e.g., *N*, *n*, *M*, *SD*, *F*, *t*, *r*, *B*, etc.; this includes all *p* values mentioned.). For example, "Groups were significantly different, $F(2, 177) = 4.37$, $p = .03$, $\eta^2 = .18$." Greek letters, subscripts, and superscripts that function as identifiers (i.e., that are not variables) and abbreviations that are not variables (e.g., sin, log) are typeset in a standard typeface. Do not italicize them. Note that you should also be **SURE** to space appropriately in the text and tables (e.g., before and after an "equals" sign, greater or less than signs for *p* values, etc.).

Acknowledgements

This page is for you to thank your professors, research assistants, statistical consultants, etc. for their assistance. This page is typically reserved for "academic" thank you's. While some people may consider this page "optional," it is highly advisable to include this in your project to thank those persons who have made your final project possible.

Vita Auctoris

The "vita auctoris" is similar to a brief academic resumé or academic autobiography, written in third person. You may list where you received your undergraduate degree, and

what your plans are post-graduate. See sample for ideas. You may also want to talk with the professors in the department to ask for suggestions, as many of them included this section in their major project(s).

Appendix C: Sample of Quantitative Dissertation Proposal

The Cross-Cultural Generalizability of Western Spirituality and Religiosity Constructs to the Philippines: Spirituality as a Universal Aspect of Human Experience

by Gabriel S. Dy-Liacco

Religion and spirituality are part of every culture. Many measures of religiosity and spirituality have been developed to capture these qualities. However, most of these measures were developed within a Western European framework. The purpose of this study is to examine the extent to which these western constructs can be generalized to a non-western culture. Can these constructs validly capture the spiritual and religious experiences of individuals in a non-Western culture? The relevance and usefulness of spiritual and religious constructs will be analyzed using cross-cultural methods that test the generalizability of the 12-item short form of the Faith Maturity Scale (FMS; Benson, Donahue, & Erikson, 1993) and the Religiosity Index (RI; Piedmont, 2002) to the Philippines. Structural equation modeling procedures will be used to systematically analyze the relationships among measures of spirituality, religiosity, and psychological maturity such as purpose in life and self-actualization.

Research Questions

This dissertation will answer three research questions: 1) Can the normative psychometric properties of western spirituality scales, such as the FMS and the RI, generalize to a non-western culture such as the Philippines? 2) Will the structural and causal relationships among religiosity, spirituality, and indicators of psychological maturity that were previously found in U.S. samples (Piedmont, Mapa, & Dy-Liacco, 2003) emerge in the Philippine sample? 3) Do the FMS and RI account for significant additional variance over the domains of the Five-Factor Model of personality, and each other, in predicting salient psychosocial outcomes in a non-western culture?

Design and Hypotheses

Three sets of hypotheses will be tested regarding the psychometric, structural and causal modeling, and incremental validity questions that were raised in this study.

1. Psychometric hypotheses. The following hypotheses address the generalizability of the normative psychometric properties of the FMS from the western protestant culture to the non-western catholic culture.

Hypothesis 1a. In the Philippine sample, the scores on the FMS and RI will demonstrate adequate internal consistency.

Hypothesis 1b. The normative two-correlated-factor structure of the FMS will be replicated in the Philippine sample.

Hypothesis 1c. There will be a significant degree of cross-observer convergence between self- and observer-ratings on the FMS and on the RI.

2. Structural and causal modeling hypotheses. The following hypotheses examine the structural nature and causal precedence among numinous constructs and established indicators of psychological maturity in causal prediction models.

Hypothesis 2a. Religiosity and spirituality will emerge as two dimensions that are significantly correlated, but each with sufficient unique variance to warrant separate conceptualization (Figure 1).

Hypothesis 2b. In a causal prediction model, religiosity and spirituality will emerge as the predictors of psychological maturity, rather than the reverse (Figure 2).

Hypothesis 2c. Spirituality will take causal precedence over religiosity in the prediction model (Figure 3).

3. *Incremental validity hypotheses.* The incremental validity hypotheses examine two questions regarding the predictive roles of religiosity and spirituality over both personality and each other. The first question is whether western numinous constructs add any value, without mediation by Five-Factor Model personality domains, to our understanding of non-western cultures. The second question is whether religiosity and spirituality contribute sufficient unique variance, over personality and each other, in our understanding of non-western people.

Hypothesis 3a. Religiosity and spirituality, taken together, will contribute additional significant explanatory variance over the FFM personality domains in predicting salient psychosocial criteria.

Hypothesis 3b. Religiosity and spirituality, taken separately, will contribute additional significant explanatory variance over the FFM personality domains, and each other, in predicting salient psychosocial criteria.

Method

Participants will be 700 adult male and female Filipinos, ages 18 to 65, who reside in Metro Manila, Philippines. Predictor measures are the 12-item short form of the Faith Maturity Scale and a 4-item index of Religiosity. Covariate measures are the Bipolar Adjective Rating Scale, which captures the domains of the five-factor model of personality, and the Spiritual Transcendence Scale. Criteria will be measured by the following: the Attitude Towards Abortion scale, the Bradburn Affect-Balance Scale, Delighted-Terrible scale, a Demographic Questionnaire, an Individualism-Collectivism scale, the Materialism Scale, the Purpose in Life Test, the Self-Report Altruism Scale, and the Self-Actualization Scale.

Psychological and Pastoral Significance of the Study

The pastoral value of this study is threefold. First, it will help communicate to the scientific community the value of including numinous variables in the study of universal aspects of human experience. The cross-cultural generalizability of the numinous scales' normative properties and incremental predictive effects, without mediation by the domains of the Five-Factor Model of personality (FFM; see Digman, 1990), will speak directly to the hypothesis that spirituality and religiosity are species-wide capacities of the human being. Causal modeling will reinforce the relevance and usefulness of the numinous constructs by demonstrating their causal impact on psychological functioning in a non-western culture.

Second, this study will contribute to the ecumenical dialog by empirically demonstrating the universal nature of the sense of personal attachment to a transcendent Being or reality. The cross-cultural generalizability of the western numinous constructs and their impact on psychological functioning will show that spiritual motivations are a significant part of what forms the common bond between human beings, despite differences in culture. In our increasingly religiously divided world, such results will provide strong scientific support for the ecumenical call to members of all religions, to live in a spirit of peace and cooperation by tapping into the common spiritual element of who we are as persons and emphasizing the development of the universal sense of attachment to a transcendent Being.

Third, this study will demonstrate how to use rigorous empirical methods to gain new insight into spirituality and religiosity in a non-western context. One value of an empirical tool is its power to generate relatively objective data that sheds light on the validity of a theory or model of some aspect of life. For example, John F. Nash, Jr.'s mathematical analysis of equilibria in non-cooperative game and bargaining theories, which won him the 1994 Nobel Prize in Economic Sciences, demonstrated the primacy of mutual gain over self-interest in predicting the optimal outcomes in relationships. His contributions to game theory have been applied outside of economic relationships to politics, military strategy, and other areas. One need not be a Nobel Laureate to use empirical tools to gain insight into spirituality and religiosity. With modern

advances in computing technology and construct conceptualization, it is now possible, more than ever before, for the average social scientist to use empirical tools to gain new insight into the structure of numinous constructs and their impact on various aspects of human functioning.

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Appendix D: Qualitative Dissertation Proposal for Faculty

Christine Ciecierski Berger

April 11, 2007

Dissertation Title: *The Experience and Effects of Healing Touch as Compared to Psychotherapy on a Bereaved Population.*

Introduction

Healing Touch is a relatively new method of laying-on-of-hands energy healing classified under the umbrella of complementary and alternative medicine (CAM). Cultures around the globe (mainly Eastern practices and shamanism) for at least 5000 years have depended on the technology of energy healing for holistic health prevention and treatment. Mainstream Western medicine and counseling have not been aware of the value of energy technologies and, as a result, have not studied them extensively. However, the general public has been avidly seeking CAM methods of healing as evidenced by the fact that in 1997, Americans spent 21 billion dollars out of their own pocket on alternatives to traditional medicine (Dworkin, 2001). A segment of this group seeks out Healing Touch as a means to balance body, mind, emotions and spirit. The quantitative empirical research that has been conducted thus far has failed to accurately capture the phenomenon at work. Anecdotal reports consistently demonstrate that Healing Touch is beneficial to the clients who use it which implies that quantitative methods are not the appropriate research design to empirically understand Healing Touch so qualitative methodology is asserted as a better fit. Another issue is that the existing body of research has mainly focused on Healing Touch in nursing and has not been explored in relationship to counseling. None of these studies have looked at the unique experiences and effects of counseling, Healing Touch and the interaction of Healing Touch and counseling which this dissertation aims to do.

The intended audience for this study is the population of counselors, pastoral counselors, and other mental health professionals. This study will impact these groups by articulating the dimensions of how HT can interact with counseling to promote holistic health.

Research Questions

Although counseling assumes the forms of many theoretical orientations, as a discipline it aims for healing and wholeness for the mind, body, spirit, and emotions. In addition, Healing Touch is engaged for healing on mental, physical, spiritual, and emotional levels. Both have similar goals but different means. Both are relational, but counseling implies a verbal relationship whereas healing is primarily an internal

experience of feeling. People seek out one form or another according to their preferences and comfort level, however there are increasing numbers of people who seek out both counseling and Healing Touch. Why? What are the positives? Negatives? How do the clients understand, or make sense, out of these two healing modalities? Further, how do the practitioners of both approaches work together for the benefit of the client? This study intends to discover and understand how each approach benefits the client (in the experience and afterward), and specifically, how the interaction of the two work together. (For further questions designed as drafts for the semi-structured interviews, please see attached.)

Methodology

Theoretical framework

The theoretical framework for this study is based on an empirical understanding of these phenomena, not an explanation, which is based on the assumption that there are certain human phenomena that are better studied for understanding and context as opposed to positivistic measurement. This assumption is viable within the paradigm of social constructivism which means that people create meaning and action through their interpretation of phenomena within themselves and within the larger context of their social worlds and this is valid unto itself (Charmaz, 2006; Guba & Lincoln, 2005). This study assumes that the knowledge to be gained here is what counseling and Healing Touch mean to them according to the value of their lived experience. As a result of this worldview, the aim of this study is hypothesis-generation, as opposed to hypothesis-testing.

In addition, the inherent nature of energy healing is fluid, processual and applies in each case to the unique needs of the individual at hand, so it is too difficult and methodologically inappropriate to utilize a positivistic paradigm. Previous researchers have attempted to conduct positivistic research on energy healing and ran into a plethora of problems (Wardell & Weymouth, 2004), leading them to advocate using either straight qualitative research design or mixed-methods with tight controls in the quantitative component. Qualitative methods were selected here as this is a new area of exploration.

Design

Grounded theory is both the framework and method of analysis. Grounded theory is defined as a method where theory emerges from the gathering of the data (Strauss & Corbin, 1998). In its pure form,

preconceived notions about the topics of interest are suspended in order to let the data “speak” and reveal to the researchers what is going on in the data, leading up to generation of theory about the topics. This study differs a bit in that a thorough literature review has been completed to inform the conceptualization and interview structure, which provides a bit more rigor. Grounded theory was selected as the appropriate method for this study for two reasons. First, it is the most structured of the qualitative methods so it makes data interpretation somewhat more standard and comparable. Second, it will generate theory about a topic, Healing Touch, which currently has little to no theory to help understand it as a healing modality.

Site descriptions: Data will be collected at the Spiritual and Bereavement Care Center (SBCC) at Hospice of the Chesapeake in Annapolis, MD.

Selection and sampling: Data will be collected from three groups of people. The primary group of interest is the group of clients at the SBCC who are clients seeking both counseling and Healing Touch treatments for bereavement (about five people). These clients will be selected by the bereavement staff using the criteria that they have been in counseling for some time (at least a month) and that they are simultaneously receiving Healing Touch treatments. The second group of interest will be the bereavement counselors and they will be selected through contacting the clinical director of the SBCC (five people). Finally, the third group of interest will be the Healing Touch practitioners who will be selected through contacting the SBCC clinical director (five people).

The participants will simply be completing their usual occupational tasks: counselors will counsel according to their usual techniques, Healing Touch practitioners will do the same, and the clients will be receiving their treatments. Pertaining to the research, their main responsibility is to honestly and authentically report on their experiences and the effects that these modalities have on the larger context of their life.

This sample was chosen because bereavement is such a traumatic experience that multiple modalities of healing are likely to enhance the therapeutic process. This will help clients by being holistic and thus, providing a richer experience of healing and meaning-making.

Gaining Access: Access to subjects has already been approved through the Director of the SBCC, Ms. Christine Kennedy. In anticipation of this study, the researcher has met with Ms. Kennedy and her clinical staff to discuss the possibility of this project. Everyone was enthusiastic about the intellectual

importance of this study and eager to cooperate. The researcher will provide informed consent to all participants, alerting them that they may terminate their participation at any time. Anticipated logistical issues could be attrition, in that clients may terminate before the completion of the study. The researcher will attempt to address this by interviewing a few more clients than the proposed five.

Data collection: Data will be collected through journal entries created after each counseling and Healing Touch session and in the form of open-ended questions in semi-structured interviews with the participants. Each participant will be interviewed twice, once early in the counseling and Healing Touch process and once a month or two later (15 interviews from three groups: clients receiving both counseling and Healing Touch, Healing Touch practitioners and counselors). In addition, there will be some ethnographic data collected where the researcher will take notes of in-the-moment experiences of clients as they exist in the context of the hospice. Data collection will not continue for an indefinite length of time. Due to the fact that this is a dissertation project, data will not be collected to reach saturation. The parameters are two interviews per person to get more than one perspective. Once all thirty interviews are complete, then data collection will terminate. The time commitment is thirty 60-90 minute interviews totaling 30-45 hours of interview time with an additional 90-130 hours to transcribe the data. All of this will lead to a well-articulated theory that could be developed through additional study in the future.

Data analysis: Data collection, analysis, and interpretation will utilize grounded theory which means that interview, journal, and ethnographic data will be transcribed and entered into a software program called NVIVO. The data will then be coded and analyzed using three levels of coding which explicate themes and categories of the phenomena in question (Strauss & Corbin, 1998). These categories are constantly compared to understand their relationships to each other, eventually leading to generation of theory (Charmaz, 2006).

Procedures for attaining and assessing excellence: Qualitative research maintains different standards of rigor and excellence from quantitative research (Marshall & Rossman, 2006). Methods of validity used in this study will include: sharing some copies of the transcribed data with the participants for their verification, sharing the analyzed categories with my methodologist for confirmation that they are capturing accurate data themes, and triangulation of data in the form of using interviews, journals and ethnographic data to compare commonalities among the forms of data.

Timeline: Data will be collected and analyzed from June 2007 to December 2007

Researcher's role and experience: In contrast to the role of full participant-observer common to ethnographic research, I will be an engaged observer. I will enter the boundaries of the research space with a defined purpose, gather the data in the form of semi-structured interviews, and engage in a bit of ethnographic observation of the processes of the clients seeking counseling and Healing Touch.

As both a researcher and a trained clinician I am well-equipped to complete many of the tasks required in a qualitative study. My clinical experience taught me how to ask effective questions to obtain relevant information, which is necessary in this study which utilizes a large portion of interview data. Also, as most questions are open-ended, my skills at nuancing deeper levels of information will be important. Regarding boundaries, I am well-aware that the roles of a clinician and researcher are different. For example, I will be asking questions to gather information, not to help the client achieve therapeutic goals and I clearly understand this distinction.

Suppositions and hypotheses: It is expected that bereavement counseling will offer a specific understanding of healing from grief and Healing Touch will offer a different healing experience. I would like a deeper understanding of clients' experiences with each modality. In addition, I am curious about the interaction of the two in the lived experience of the clients. The verbal relationship in counseling will validate and normalize the clients' feelings of grief (among other benefits) and the Healing Touch will target deeper levels of bodily anxiety and create an experience and feeling of wholeness and deep relaxation. I expect that each will help deepen the effects of the other for a more optimal healing from grief.

Pastoral Implications: To date, pastoral counseling has expanded the field of counseling by advocating the importance of respecting and including spirituality in mental health treatment. One next level of knowledge expansion lies in gathering data on energy healing as a construct and as a compliment to pastoral counseling. To date, there are no studies examining this phenomenon and this study will open up the exploration of Healing Touch and counseling. Empirical knowledge about the processes and outcomes of Healing Touch as an example of a widely-used approach to holistic healing and how it compares to counseling will add to both the clinical and research understanding of energy healing and its impact on individuals' sense of well-being and spirituality. This is the important contribution that this study will make to the field of pastoral counseling. Integrating the energy healing perspective of Healing Touch illuminates

the efforts of pastoral counselors to work with mind, body, and spirit, because by its very nature, Healing Touch brings all of these components to the surface to be addressed and healed. Pastoral counselors can utilize this research to do one of two things. First, they can learn more about Healing Touch and potentially refer clients for Healing Touch sessions as an adjunct to their counseling. As Healing Touch works on a deep level, the insights clients' gain in HT are likely to add to the progress and intimacy of the counseling relationship, which can release areas of resistance that inevitably occur in any counseling relationship. Second, counselors could take the Healing Touch training and explore the use of Healing Touch and counseling in their own practices, being mindful of the ethical standards and parameters of each field.

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Appendix E

Sample of Title Page

The Title of My Dissertation

Joanna I. Longfellow

B.A. University of Maryland
M. A. Loyola College in Maryland

Submitted to the Department of [XXXXX] of Loyola College in Maryland
In Partial Fulfillment of the Requirements for the Degree of
Doctor of [XXXXX]
[Master of Arts/Science]

January, 2004

Appendix F: Sample Table of Contents

Table of Contents are slightly different in Pastoral Counseling and Psychology. The first example is a general example. The Table of Contents in the second Sample Format is a Pastoral Counseling example. A separate example for Psychology is included in the third sample.

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Appendix G: Sample of Dissertation Elements in Practice

Sexual Orientation and Embodied Spirituality as
Predictors of Personal Well Being and Health Practices

Martha J. Horn

B. S. University of North Alabama
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Submitted to the Department of Pastoral Counseling [Psychology] of
Loyola College in Maryland
in Partial Fulfillment of the Requirements for the
Degree of Doctor of Philosophy [Psychology]
[Master of Arts/Science]

April, 2005

DEDICATION

I offer special thanks to my partner, Barbara White, and dedicate this dissertation to her in gratitude not only for her emotional and practical support throughout this project, but also for our relationship, which both inspired and fueled this study.

ACKNOWLEDGEMENTS

I am deeply grateful for those who have accompanied me on this long and amazing journey. I thank my committee members: Dr. Ralph Piedmont, Dr. Gerry Fialkowski, Dr. Robert Wicks, and Dr. Mary Hunt for their expertise and insightful contributions. I thank the Rev. Michael Hopkins, the Rev. Alison Quin, Dr. Vince Nevins, and Barbara White for contributing items in the initial development of the *Embodied Spirituality Scale*. I thank Patrick Hardy and Steven Scott for their assistance at data collection events and Anna Mapa for her valuable technical support. I thank Dr. Janet Merkel who has accompanied me on this journey in a very special way.

I also thank the clergy, other key contact people, and participants of the congregations who graciously agreed to participate in the study: the Rev. Michael Hopkins and St. George's Episcopal Church, Glenn Dale, MD; the Rev. Candace Schultis and the Metropolitan Community Church of Washington, D. C.; the Rev. Karla Woggon and St. Andrews Episcopal Church, College Park, MD; Mary Ryan and Holy Trinity Episcopal Church, Bowie, MD; Doug McGuckin and Dignity, Washington, D. C.; Vince McGrath and Stonewall Mission Church, Nashville, TN; Franklin Farmer, Cathedral of Hope, Dallas, TX; and Dr. Tom Rodgeron. I thank the Commission on Ministry of the Episcopal Diocese of Washington, D. C. for a grant that partially funded the data collection portion of the study. I thank Dr. Carole Rayburn and Dr. Lee Richmond for the use of the *Body Awareness and Sensitivity for Intimacy Comfort Scales (BASICS)*.

ABSTRACT

For centuries, Christianity has generally maintained a dualistic separation between body and spirit that has included a number of proscriptive beliefs and attitudes about sex. However, neurological research and a growing body of literature of sexual theology (or embodiment theology) that has emerged over the past thirty years has challenged traditional, body-spirit dualistic assumptions and suggests that not only is human sexuality an integral part of the human experience, but that it is also more complex and more holistic than the activity of genital sex. This study empirically explored embodied spirituality as an aspect of spiritual experience as measured by the *Embodied Spirituality Scale (ESS)* (Horn & Piedmont, 2003). Sexual orientation and gender were the particular variables of interest in the study. The participants were 125 women and 142 men (21.6% lesbian, 33.5% gay men, 41.6% nongay/nonlesbian, 1.9% bisexual, and 1.5% “other”) from several congregations in the Baltimore/Washington DC area and from congregations in Tennessee and Texas. Measures used in the study were: the *ASPIRES* (Piedmont, 2004), the *Bi-Polar Adjective Rating Scale* (Piedmont, 1995), the *Body Awareness and Sensitivity for Intimacy Comfort Scales* (Rayburn & Richmond, 1996), the *Embodied Spirituality Scale (ESS)* (Horn & Piedmont, 2002), the *Affect Balance Scale* (Bradburn, 1969), the *Satisfaction with Life Scale* (Diener, Emmons, Larsen, & Griffin, 1985), the *Multidimensional Health Profile Health Functioning (MHP-HI)* (Ruehlman, Lanyon, & Karoly, 1992), and a demographic questionnaire. No main effects were found for either sexual orientation or gender on the *ESS*. However, the results support the validity of the *ESS* as a measure of embodied spirituality that appears to be relatively independent of personality. The results in the present study that describe the relationship between the *ESS* and health-related factors suggest that as a measure of embodied awareness, the *ESS* may offer clues to the nature of the “active ingredient” in the relationship between spirituality and health. Results support the use of the *ESS* as a measure in spirituality and health research. Although this study did not demonstrate sexual orientation to be a significant variable in spiritual experience, it did demonstrate that the integration of sexuality and spirituality (or embodied spirituality) has value as a dimension of spiritual experience and that it is a dimension that has potential implications for health care.

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CHAPTER I

Introduction

Christianity has a long tradition of body/spirit dualism, a concept that not only maintains a constitutional distinction between the spiritual and physical (e.g., distinguishing the “mind” from the “brain”), but that also maintains a qualitative distinction between the two (the body/the carnal/the physical as “lower” and “evil,” and the soul/the spiritual as “higher” and “good.” From this perspective, bodily sensations are not “bad” or “sinful” in and of themselves, but may become “bad” or “evil” when pleasure/desire/concupiscence obscures the spiritual process (Augustine, trans. 1960; Augustine, trans. 2002). When this traditional concept is discussed, one name that often figures prominently in the discussion is that of St. Augustine (trans. 1960; trans. 2002).

Although often limited to examples related to sexuality, body/spirit dualism was a much broader concept than this. It encompasses the experience of all bodily sensations. In his *Confessions*, for example, Augustine discussed the temptations of concupiscence (i.e., desire or appetite) with respect to food and drink, the allure of “sweet odors,” the experience of listening to music, visual pleasures, and sexuality (Augustine, trans. 1960). According to Augustine, all of these sensory experiences were potentially sinful because they could be enjoyed as an experience of pleasure related to desire. For example, Augustine wrote that food and drink are good as created by God and he acknowledged that they are necessary for human existence. The problem is that the necessary activities of eating and drinking involve the sensation of pleasure. Augustine declared that the reason for eating and drinking is good health and not to experience the pleasure involved. However the certainty of eating and drinking leaves much to be discovered and explored

CHAPTER III

Method

Participants

Participants for this study were 125 female (46.5%) and 142 male (52.8%) adults between the ages of 18 and 78 ($M = 47$; $SD = 10.9$). The sample was 77% Caucasian ($n = 207$), 11 % African-American ($n = 32$), 1.9% Hispanic ($n = 5$), 1.5% Native American ($n = 4$), and 1.1% Asian ($n = 3$). Nearly 7% (6.7%, $n = 18$) of participants listed their ethnicity as “other.” Except for one Buddhist, all of the participants identified themselves as Christian. They represented at least seven different faith traditions from within Christianity (Episcopal, 42%; Metropolitan Community Church, 26.4%; Roman Catholic, 13.8%; Baptist, 4.8%; Methodist, 1.9%; Presbyterian, .4%; United Church of Christ, .4%, and “Other,” 10.4%) and represented several different Christian congregations in the Baltimore-Washington, DC area and congregations in Tennessee and Texas. Sexual orientation of participants was 41.6% non-gay/lesbian ($n = 112$), 33.5% gay men ($n = 90$), 21.6% lesbian ($n = 58$), 1.9% bisexual ($n = 5$), and 1.5% “Other” ($n = 4$). Participants who identified their sexual orientation as bisexual or “other” and participants who identified their gender identity as transgendered ($n = 2$) were excluded from the statistical analysis because an examination of these categories of individuals lies beyond the scope of the present study.

Measures

Assessment of Spirituality and Religious Sentiments (ASPIRES). Piedmont (2004) developed the *ASPIRES* to both clarify and broaden the scope of the *Spiritual Transcendence Scale (STS)*. The *ASPIRES* measures two dimensions of spiritual

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SAMPLE TABLE

Table 5

Incremental Validity of the Spiritual Transcendence Subscales and Religious Orientation Subscales over the Five-Factor Model Markers Domains in Predicting Moral Reasoning.

<i>Predictor Variables</i>	<i>Criterion Variable</i>		
	Moral Reasoning	Subscale	Partial <i>F</i>
<i>FFM</i>			
R^2	0.18		8.76***
<i>Spiritual Transcendence</i>			
ΔR^2	0.14	Prayer Fulfillment	38.35***
$\Delta\Delta R^{2a}$	—		—
<i>Religious Orientation</i>			
ΔR^2	0.21	Intrinsic	63.90***
$\Delta\Delta R^{2b}$	0.08	Intrinsic	23.60***

Note. $N = 196$.

FFM = Five-Factor Model Marker Domains.

ΔR^2 : predictive validity above FFM; $\Delta\Delta R^{2a}$: predictive validity above FFM and religious orientation; $\Delta\Delta R^{2b}$: predictive validity above FFM and spiritual transcendence.

*** $p < 0.0001$.

Another set of regression analyses were performed in which the scores of STS or the ROS were entered on the second step of the regression equation, using the forced entry method, in subsequent analyses and the remaining predictor variable, either STS or ROS, respectively, was entered on the third step in a forward entry fashion. Results failed to support the hypothesis that spiritual transcendence would provide explained variance for the criterion variable above the variance explained by personality and religious orientation.

SAMPLE FIGURE

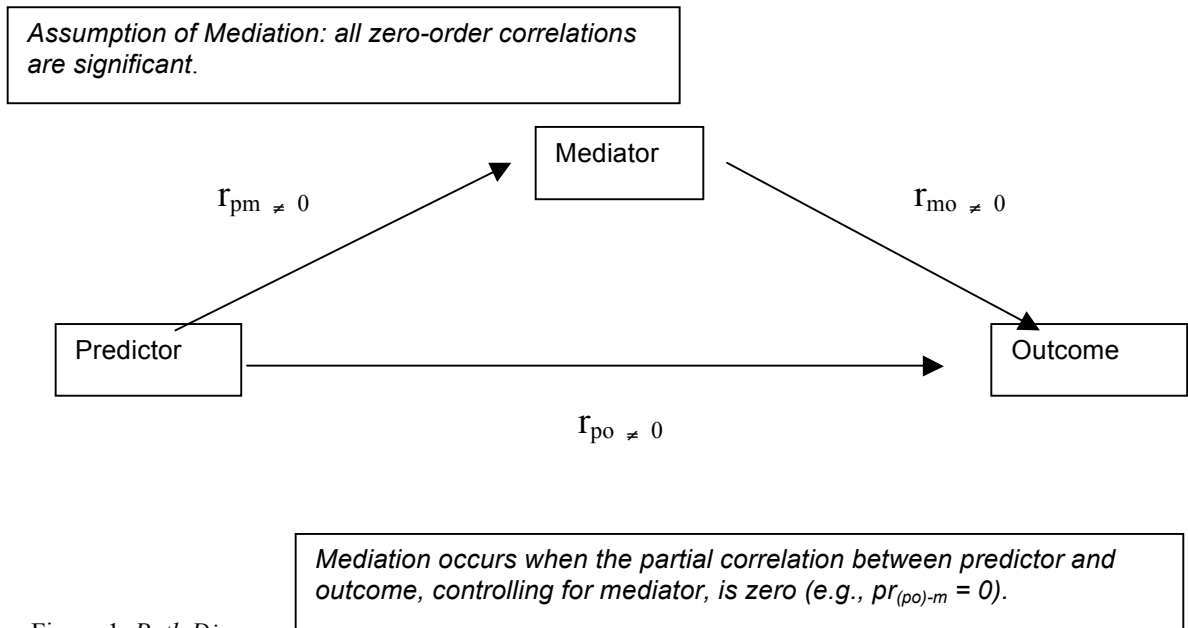


Figure 1. Path Diagram of a mediation effect.

Text continues

APPENDIX A

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