The Evolution of Research Paradigms in Pastoral/Spiritual Care, Counseling, and Education

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Abstract
This partially autobiographical article is presented as a chapter in the narrative of the evolution of research methodology in the social sciences and the impact that evolution has had on pastoral/spiritual care research as the author has experienced and observed it during the latter part of the 20th century and the early years of the 21st century.

Keywords: care, education, pastoral, pastoral theology, research paradigm, spiritual
I am a Canadian who grew up in Sarnia, Ontario, Canada, located across the St. Clair River from Port Huron, Michigan, USA. My aunt lived 60 miles south in a Detroit, Michigan suburb and I travelled many times across the Canada-USA border to visit her. I am a boundary person.

I studied for 5 years in the USA and have travelled extensively to North American cities for pastoral association conferences and throughout the world to the quadrennial conferences of the International Congress on Pastoral Care & Counselling. As a result of the latter, in 1989-90 I was privileged to spend 15 months as Visiting Fellow (Pastoral Counselling) at the Campbell Centre for Counselling and Human Relations Education in Christchurch, Aotearoa New Zealand. While in Christchurch, I was invited to participate with colleagues to form the South Island Institute for Clinical Pastoral Education.

I have also enjoyed the opportunity to travel widely in India, to offer a workshop on research methodology in pastoral care at United Theological Seminary in Bangalore, and to teach (and learn) pastoral research methodology and counselling theory on two occasions at the Mar Thoma Theological Seminary in Kottayam, Kerala, South India. I am a person in process of becoming transculturalized. (Carr, n.d.).

I have lived, for most of my professional life since 1975, in Edmonton, Alberta, Canada. This is where my children have grown to adulthood and where I have worked as Executive Director of a freestanding ecumenical Pastoral Counseling Center, as a Psychiatric Hospital Chaplain and Teaching Supervisor in Clinical Pastoral Education and Pastoral Counseling Education, as a Pastoral Psychotherapist in solo practice, and as a theological college teacher and thesis/dissertation guide who has learned a great deal from my students, supervisees, and clients. I am a pastoral therapist-teacher-
I am a Christian pastoral theologian. That is, I am committed to engaging in the “care of persons and care of world” (Graham, 1992) in a way that is grounded in Christian sacred texts and traditions and in the evolving theological learning and formulation of the Christian tradition. More than that, as a Christian pastoral theologian, I am committed to ensuring that the experience of care of persons and care of worlds contributes to emerging Christian theological foundations, formulations, and ongoing praxis.

This is how I see the world. This is my worldview. It is out of the above contexts that I venture to reflect on the evolution of the knowledge base of the professions to which my life has been dedicated – pastoral/spiritually integrated care, counselling, psychotherapy, and education.

I began my career in this specialized ministry in 1970 after 8 years as a congregational clergy in the Toronto, Canada suburbs. My theological college grounding for congregational ministries of care and counseling was Eduard Thurneysen’s A Theology of Pastoral Care (1962). While that theological grounding was important, I quickly learned that it was not enough when I was confronted with the needs of a congregation. There was much to be learned, primarily from those I served as pastor but also from the knowledge base and methodologies of the mental health and social services professions.

After taking several course in the pastoral and human sciences fields through the Toronto School of Theology, and two years of study in Pastoral Theology in Princeton, New Jersey, I became part of the pastoral psychology research tradition of Garrett-
Evangelical Theological Seminary and Northwestern University in 1972 in Evanston, Illinois as a Ph.D. student.

The Garrett research tradition originated in the 1950s as result of a partnership between the seminary’s Pastoral Psychology Department and the University’s Psychology Department, a partnership that was first entered into by the seminary’s Carroll A. Wise and the University’s Donald T. Campbell. The partnership was furthered by Wise’s successors at Garrett, Ronald R. Lee and John E. Hinkle, Jr.

Carroll Wise had been a student of Anton Boisen, a forester-turned-Presbyterian-clergy, who applied his knowledge of forestry’s scientific method to the study of the relationship between religion and mental illness in his work as the chaplain at Worcester State Hospital in Worcester, Massachusetts, USA. It is commonly known that Boisen’s work with student ministers was one of the precursors of Clinical Pastoral Education. It is not as well known that Boisen was training the student ministers in case study research. (Asquith, 1992; Thornton, 1970; C.A. Wise, personal conversations, 1972-75).

The Ashbrook and Hinkle festschrift for Carroll Wise (1988) contains a chapter by Emily Haight on The Research Legacy of Carroll A. Wise. In that chapter, Haight writes that, of the sixty doctoral dissertations completed by 1988 (in the joint Garrett Pastoral Psychology Department and Northwestern University Psychology Department program), “only five per cent were studies of a theoretical or historical nature with no experimental or statistical method involved.”

Haight categorizes the dissertations as follows.

1. Pastoral Care to Hospitalized or Ill Persons (12 studies)
2. Ministry to those Dying or Bereaved (4 studies)
3. Moral or Religious Traits of Persons or Groups (11 studies)
4. Description and Selection of Clergy (9 studies)
5. Seminary Curriculum and Pastoral Training (3 studies)
6. Marital Assessment and Treatment (3 studies)
7. Organizing and Administering Pastoral Counseling Centers (3 studies and 1 book)
8. Ministry to and by Women (4 studies)
9. Ministry to and by Cultural and Ethnic Groups (3 studies)
10. Ministry to Adolescents (2 studies)
11. The Integration of Theology and Psychology (6 studies)

**The Evolution of Research Paradigms**

It was and still is important that pastoral/spiritual care practitioners who wish to demonstrate the value of their practice learn the methods and skills of social science research. It was and still is not enough that pastoral/spiritual care practitioners be perceived as “doing no harm.” Increasingly, it has needed to be demonstrated that we “do good.” That need, of course, is not easily satisfied in a world of “bottom lines.”

During the 1960s and for the next two decades in North America, the research paradigm of the social sciences was mainly quantitative research. During that period, one of the standard texts for research methodology in the social sciences was *Experimental and Quasi-experimental Designs for Research* by Donald T. Campbell and Julian C. Stanley (1966). Campbell was my teacher (research methodology) at Northwestern University. He tested and refined his theories about research methodology in part though his involvement in the doctoral committees of Ph.D.
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students in the Garrett Evangelical Theological Seminary Pastoral Psychology and Counseling department.

The quantitative research methodologies described in Campbell and Stanley (1966) laid the foundation for ongoing evolution of research in the social sciences in North America and beyond, including most of the pastoral research just described as the research legacy of Carroll Wise. The Campbell and Stanley book describes the kinds of research that may properly be characterized as pre-experimental, experimental, and quasi-experimental and indicates the strengths and weaknesses of each type of design.

One of the more recent basic texts on research design, John Creswell’s Research Design: Qualitative, Quantitative, and Mixed Methods Approaches (2009 and 2013), presents essentially the same research models and lists of strengths and weaknesses of the quantitative methodologies as did Campbell and Stanley three decades earlier. The first edition of Creswell’s book (1994) focused only on quantitative and qualitative paradigms.

Quantitative research in the social sciences starts with an hypothesis or with hypotheses that arise from reflecting on human problems or issues in professional practice. Usually, hypotheses are grounded in existing theory and research findings. The researcher then tests the hypothesis or hypotheses in appropriate ways. Probability theory and statistical analysis offer a basis for claiming the reliability and the validity of the findings about the research hypotheses and thus an assessment of their generalizability. In social science and pastoral/spiritual care, quantitative research, hypotheses are usually not “proven” by a single research project. However, replication
of findings across several research projects tends to support the reliability and generalizability of the research findings.

One of the early alternatives to the quantitative research paradigm was Grounded Theory research. This approach was developed by Barney Glaser and Anselm Strauss during the 1960s.

Grounded theory [research] is a strategy of inquiry in which the researcher derives a general, abstract theory of a process, action, or interaction grounded in the views of the participants [in the research]. This process involves using multiple stages of categories of information. … Two primary characteristics of this design are the constant comparison of data with emerging categories and theoretical sampling of different groups to maximize the similarities and the differences of information. (Creswell, 2009, p. 13)

Then, during the 1980s and 1990s, social science researchers (and particularly nurse-researchers) began to develop ways of exploring questions using methods that we now call “qualitative” research. There are now over a dozen types of research that may properly be called qualitative research, including at least the following: Case Study, Narrative Inquiry or Narratology, Phenomenology, Heuristic Phenomenology, Self-Inquiry, Ethnography, Autoethnography, Ethnomethodology, Symbolic Interaction, Hermeneutics, Hermeneutical Phenomenology, Action-oriented Research, Feminist Inquiry, Critical Theory, Queer Theory, etc. (Patton, 2002 and 2015)

Qualitative research explores questions rather than testing hypotheses. It does so in partnership with informants or co-researchers who have something to contribute to
the exploration. That is, qualitative research does not study “subjects.” As is the case with quantitative research’s hypotheses, qualitative research questions arise out of reflection on human problems and on issues in professional practice – questions that are either not answered by the existing research and/or theoretical literature or questions that “cry out” for more complex in-depth exploration.

At first, researchers using qualitative methods to explore issues and questions did not have wide acceptance for their findings. However, as reports began to be published in refereed journals and as standard methodological procedures and criteria have been developed, qualitative research has come to be regarded in many professional circles as an important contributor to the search for knowledge about the human condition and about professional practice in the care of persons. Qualitative research can no longer be regarded as “merely anecdotal.”

In a project begun a year before his death in 1996, Donald Campbell “laid out his arguments as to why qualitative approaches belong with quantitative ones as the assumptive background to relevant quantitative measures ….” (Campbell and Russo, 2001). In that book, quoting from an article he wrote in 1978, Campbell asserts the following.

In academic social science there is renewed emphasis on the methods of the humanities and increased doubts as to the appropriateness of applying the natural science model to social science problems. There appears to exist a qualitative versus quantitative polarity. These terms are shorthand for a common denominator among a wide range of partially overlapping concepts: for quantitative read also scientific, scientificist, and
naturwissenschaftlich. For qualitative read also humanistic, humanitistic, geisteswissenschaftlich, experiential, phenomenological, clinical, case study, fieldwork, participant observation, process evaluation, and commonsense knowing. (Campbell, 1978)

As Campbell implies, “qualitative” research should not be understood to be of better “quality” than “quantitative research.” The two approaches simply have different functions in the search for knowledge. Quantitative research is interested in proving causation, or at least demonstrating statistically significant correlation. Qualitative research is interested in exploring questions deeply.

In the early stages of the development of qualitative research methodologies, the work was quite labor intensive. There were no computer programs available that were comparable to the programs that had been developed to analyze quantitative data. Latterly, computer programs have been developed to assist the qualitative researcher with tasks such as the coding, clustering, and comparing of data – tasks that used to have to be done manually.

Once the data has been assembled, the mind of the researcher is able to process it. In that connection, Michael Quinn Patton tells us about the biological research of neurologist V.S. Ramachandran (Ramachandran and Blakeslee, 1998) … who studies unique cases of brain damage trying to find out how a young man can think his parents are imposters; why a woman with a stroke laughs uncontrollably; how a man with a stroke can be oblivious to being paralyzed on one side; why amputees have intense feeling, even pain, in missing limbs; and why an epilepsy patient has intense religious
experiences. Beyond what can be measured in brain waves and electrical impulses, [Ramachandran] strives to understand “qualia” – what humans subjectively add to the scientifically measurable aspects of experience. This involves inquiry into the greatest shared challenge for neuroscience, social sciences, and philosophy [one might add “Pastoral Theology”]: understanding consciousness. Ramachandran postulates that consciousness may involve the capacity to process qualia and that that capacity resides in a specific brain location. (Patton, 2002, p. 11)

Patton observes that, “if Ramachandran is right, qualitative inquirers may need that part of the brain to be especially active, accessible, and responsive.” (Patton, 2002)

Patton is asserting that it is the qualia that enable the mind of the qualitative researcher to make sense of the data. I like to illustrate how that happens by using the example of the TV screen or the computer monitor. The inputs (data) which cause the screen to function are a series of impulses, present or absent in complex patterns. However, what the viewer sees is an image in living colour. There is some subjectivity in what the viewer sees – but there are also universal characteristics. Both the individual subjectivity and the universality of the picture being seen become more apparent as we reflect on and talk about what we experience. That is what qualitative exploration is like.

There is another paradigm that is different from the still evolving qualitative research methodologies, although it has common features with some qualitative approaches. Indigenous Research is a research paradigm with its origins in Canada, Australia, and Botswana. (Wilson, 2008, and Kovach, 2009; Bagele, 2011) Wilson, a
Canadian who teaches in Australia, writes as follows.

Relationships don’t just shape Indigenous reality, they are our reality.

Indigenous researchers develop relationships with ideas in order to achieve enlightenment in the ceremony that is Indigenous research.

Indigenous research is the ceremony of maintaining accountability to these relationships. For researchers to be accountable to all our relations, we must make careful choices in our selection of topics, methods of data collection, forms of analysis and finally the way we present information.

One of the features of Indigenous research is that the researcher, in the gathering of data and in the introduction of that data in the research report, locates her/himself for the co-researcher and the report reader. Wilson writes as follows.

I am an Opaskwayak from Northern Manitoba currently living in the Northern Rivers area of New South Wales, Australia. I’m also a father of three boys, a researcher, son, uncle, world traveller, knowledge keeper and knowledge seeker. As an educated Cree, I’ve spent much of my life straddling the Indigenous and academic worlds. Most of my time these days is spent teaching other Indigenous knowledge seekers (and my kids) how to accomplish this balancing act while still keeping both feet on the ground. (Wilson, 2008)

I (John Carr) am not an Indigenous person. However, even during the late 1970s when I was writing my doctoral dissertation (a longitudinal correlational study of seminary graduates, i.e. a quantitative research study, Carr, 1980), I knew that it was important to “locate myself” for the reader. The reader will have noticed that I followed
that tradition in introducing this essay.

Given the relational and spiritual groundedness of Indigenous peoples, it seems to me that pastoral/spiritual care researchers working in most cultural contexts might very well find the emerging Indigenous Research paradigm to be compatible with their worldview and useful in many situations.

**Pastoral/Spiritual Care Research**

Please note that I have been using the term “pastoral/spiritual care” in generic way that is inclusive of pastoral/spiritual care, counseling, psychotherapy, and education.

The first North American publication of a text specifically about research in the pastoral/spiritual care disciplines was Larry VandeCreek's *Research Primer for Pastoral Care & Counseling* (1988). That book emerged out of the work of the Research Committee of the American Association of Pastoral Counselors, of which I was a member. The *Research Primer* was incorporated into *Research in Pastoral Care and Counseling: Quantitative and Qualitative Approaches* in 1994, with Hilary Bender and Merle Jordan writing the second part on the qualitative paradigm. VandeCreek’s *Spiritual Needs & Pastoral Services: Readings in Research* followed in 1995.

The Carroll Wise festschrift edited by Ashbrook and Hinkle which, as previously noted, contains a chapter by Emily Haight on the Carroll Wise Research legacy and includes brief reports of several studies that were part of that research legacy, This book was published in the same year as was the VandeCreek *Research Primer* (1988). The appendix to Haight’s article lists the dissertations in the Carroll Wise legacy. That list is replicated in the appendix to this article. There are a few which use Case Study
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Method and one Ethnographic Study in that list.

I note, also, that the very first pastoral psychology doctoral dissertation during the years in which Carroll Wise taught at Garrett was an empirically grounded study of “The Idea of God and Personality Integration with Special Emphasis upon Self-Evaluation as a deciding Integrating Factor – An Historical-Clinical-Experimental Approach.” (Nilsen, 1952)

North American practitioners of pastoral/spiritual care are not easily persuaded concerning the value of empirical research. The long-serving Managing Editor of The Journal of Pastoral Care (& Counseling), Orlo C. Strunk, Jr., frequently commented (personal communication, 2001 - 2008) that whenever he published a report on empirical research in The Journal, he would inevitably receive several complaints from frontline practitioners – especially about reports of quantitative research.

Some of that resistance to acknowledging the importance of research derives from the basic formation processes of pastoral/spiritual care practitioners. Those basic formation processes usually affirmed knowledge and wisdom as derived from sacred texts and traditions – not from exploration of the data of spiritual experience and pastoral/spiritual care practice.

Further, there have not been many pastoral/spiritual care programs in North American institutions that fund positions for pastoral/spiritual care researchers. As a result, training programs have not had a resident expert on pastoral/spiritual care research to introduce trainees to the ways in which their practice is inextricably linked to research. Trainees eventually become practitioners and some trainees become trainers who have no models for teaching the persons they are training about the importance of
An extensive research project by George Fitchett and colleagues (Fitchett, Tartaglia, Dodd-McCue, and Murphy, 2012) indicates that while there is “growing evidence that leaders in professional health care chaplaincy recognize the important role of research….” very few training programs actually teach chaplains how to do research.

[The researchers] interviewed CPE supervisors from 26 randomly-selected CPE residency programs. We found 12% of the programs had intentional and substantive research-related curricula, 27% of the programs offered some limited exposure to research, and 62% of the programs provided no education about research. We found also that supervisors often defined “research education” in terms of actually conducting research projects. CPE residency programs potentially play a central role in educating research-literate chaplains. Future research should examine the incentives and barriers that influence the inclusion of research education in CPE residency programs.

Fitchett, like VandeCreek, is one of the “research leaders” in North America’s pastoral/spiritual care, counseling, and education profession. He was involved in another research project which explored chaplain research literacy.

The Association of Professional Chaplains (APC) developed Standards of Practice for Acute and Long-term settings. Standard 12 promotes research-literate chaplains as important for the profession. Since many chaplains receive training in clinical pastoral education (CPE) residency
programs, the aim of this study was to identify model practices for the teaching of research in such programs. Using a purposeful sample, this study identified 11 programs that offered “consistent and substantive” education in research. Common features included the existence of a research champion, a culture supportive of research, and the availability of institutional resources. The study identified models and methodologies that CPE programs can adopt. (Tartaglia, Fitchett, Dodd-McCue, Murphy, and Derrickson, 2013)

Unless pastoral counselors have done their training in an academic program that requires them to engage in research and to learn how research informs practice, they are unlikely to know how to read research and integrate the principles of research in their clinical practice.

In contrast to the complaint of readers of *The Journal of Pastoral Care & Counseling* described above, here is what one of my students wrote in an integrative paper for her first course on research in a Master of Psychotherapy and Spirituality program. The statements are shared with the student’s permission.

I could immediately relate this … to my future work as a therapist where I am likely to be engaged in ongoing research in some form or other as a way to further my development as a practitioner. Seeking to discover ‘what works best’ from a therapeutic standpoint in my work with various clients and/or groups would require an informed, and thus ethical, approach to the process of research. Thus, it was clear that knowing what made for ‘good’ research would be invaluable in my career not only from the perspective of engaging with my own
questions, but also from the perspective of relying upon the research of others for professional guidance.

Having connected with the essential nature of research, my commitment to exploring this subject [the chosen research topic] with curiosity and openness was revitalized. I was following in the footsteps of all of humanity before me who had directed this very same curiosity to an infinite number of questions seeking to understand and better their existence. It is this innate desire to ‘make meaning’ that I was tapping into, the capacity to ‘do research’ that has propelled evolution over the eons. (Klappstein, 2015)

It seems to me that modern-day practitioners of pastoral/spiritual care who object to having to do research and read research articles and know nothing about research paradigms are forgetting (or just do not know) that their profession had its origins in a “research-oriented” teaching-learning context as indicated above in the discussion of the work of Anton Boisen.

Some work on Pastoral Research Methodology has been done in the academy. *Practical Theology and Qualitative Research* by Aberdeen University’s John Swinton and Harriet Mowat (2006) is typical of that work. Swinton and Mowat argue that “qualitative research is one way in which we [i.e. Practical/Pastoral Theologians] can begin to look behind the veil of ‘normality’ and see what is actually going on within situations.” (Swinton and Mowat, 2006, p. vi)

I agree with Swinton and Mowat that the role of pastoral research is (at least in the Christian tradition) the ongoing development and integration of theology grounded in practice. I expect that that might be so for other religious traditions. It does seem to me
that pastoral/spiritual care research is not, at least in the first instance, just about proving the efficacy of pastoral/spiritual interventions in the lives of individuals and of systems (although it is that secondarily). Rather, I think that pastoral research is primarily about understanding and illuminating the reality of the human-Divine relationship and about understanding how that relationship (“spirituality” on the human side of it) impacts on human health and healing.

For me, Pastoral Research, using the research paradigms of Quantitative, Grounded Theory, Qualitative, and Indigenous Research, holds the promise both of deepening theology and broadening professional understanding of how pastoral/spiritual care, counseling, and education serves the “healing” and personal/professional growth and formation needs of persons. As chaplains, pastoral/spiritually integrated counselors/psychotherapists, pastoral educators, and pastoral theologians are increasingly able to ground what they do in the reality of human experience, these professions will be far more credible - in religious organizations and in the wider professional community.

In addition to the acknowledgments already noted, I am indebted to Leslie Gardner, and the other Associate and Core faculty of St. Stephen’s College with whom I have worked for many years, for stimulating some of the ideas that I have presented in this article – and to the students with whom I have tested out these ideas. There are undoubtedly other “chapters” on this subject that are “yearning” to be written and I invite those who have lived the journey to give voice to those yearnings. One of those chapters might involve a discussion of how worldview and belief systems impact on research questions and the selection of research paradigm and methodology.
# Appendix

Chronological List of Doctoral Dissertations in Pastoral Psychology and Counseling, 1952-1987
Garrett-Evangelical Theological Seminary and Northwestern University, Evanston, IL


<table>
<thead>
<tr>
<th>Year</th>
<th>Author</th>
<th>Title</th>
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<tbody>
<tr>
<td>1962</td>
<td>Taggart, Morris.</td>
<td>A study of Attitude Change in a Group of Theological Students.</td>
</tr>
<tr>
<td>1965</td>
<td>Lee, Ronald R.</td>
<td>Theological Belief as a Dimension of Personality.</td>
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<tr>
<td>1966</td>
<td>Foster, Leila M.</td>
<td>Theological Implications of Ego-Identity.</td>
</tr>
<tr>
<td>1966</td>
<td>McHolland, James D.</td>
<td>A Summary of the Influence of Pastoral Care on the Attitude of Patients in the Rehabilitation Unit of a General Hospital.</td>
</tr>
<tr>
<td>1966</td>
<td>Williamson, Donald S.</td>
<td>Selective Inhibition of Aggression by Church Members in a Local Church Setting.</td>
</tr>
<tr>
<td>1967</td>
<td>Gilmore, Allen R.</td>
<td>Some Theological and Personality Correlates of a Mode of Conflict Resolution.</td>
</tr>
<tr>
<td>1967</td>
<td>Bruehl, Richard G.</td>
<td>Perceptions of the Pastoral Role by Staff and Patients in a General Hospital and Pastors' Stereotypes of Medical Personnel’s Attitudes Towards the Pastoral Role.</td>
</tr>
<tr>
<td>1968</td>
<td>Phillips, Gary L.</td>
<td>The Contribution of Erik Erikson and Anna Freud to the Pastor’s Work with the Adolescent.</td>
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<tr>
<td>1969</td>
<td>Blake, Robert.</td>
<td>Attitudes toward Death as a Function of Developmental Stages</td>
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1970 Houts, Donald C. The Use of Ego Identity Measures in Evaluating a Seminary Curriculum.
1971 Hartung, Buce M. Requests of Hospitalized Patients for a Religious Ministry.
1971 Mase, Bruce F. Changes in Self-Actualization as a Result of Two Types of Residential Group Experiences.
1972 Dahlquist, Douglas A. Sexual Attitudes in the Baptist General Conference.
1972 Greer, Philip C. Field Dependence and the Practice of Ministry.
1972 Smith, Robert L. The Relative Proneness to Shame or Guilt as an Indicator of Defensive Style.
1972 Trueblood, Roy W. Attitude Changes Among First Year Theological Students.
1972 Zullo, James R. T-group Laboratory Learning and Adolescent Ego-Development.
1976 Donnovan, Paul A. Birth Order and Catholic Priests.
1977 Augspurger, Richard E. Grief Resolution Among Recent Spouse Bereaved
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Individuals.

1977  Bach, James F. Hospital Nurse Morale.
1977  Ortmeyer, John A. Anxiety and Repression Coping Styles and Treatment Approaches in the Integration of Elective Orthopedic Surgical Stress.
1977  Ashby, Homer U. An MMPI Scale for Narcissistic Personality Disorder.
1978  DeSobe, Gerald J. Marital Communication Labs: Perceptual Change and Marital Satisfaction.
1978  McNair, Clinton D. The Effects of Pastoral Counseling on the Patient’s Adjustment to Hemodialysis
1979  Alcorn, Charles E. Self/Partner Perception of Couples: At the Engaged and Six Month Married Period.
1979  Nahrwold, Steven C. A Comparative Case Study of Four Different Organizational Models of Pastoral Counseling Centers.
1980  Carr, John C. The MMPI, Ministerial Personality, and the Practice of Ministry.
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<tr>
<th>Year</th>
<th>Author</th>
<th>Title</th>
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<tr>
<td>1981</td>
<td>Fite, Robert C.</td>
<td>A psychological Study of Persons Reporting Mystical Experiences.</td>
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<td>1981</td>
<td>Martin, John C.</td>
<td>Dimensions of the Grief Experience in Recently Bereaved Spouses</td>
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<td>1983</td>
<td>Comer, Michael P.</td>
<td>Psychological Characteristics of a Ministerial Assessment Battery.</td>
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<td>1983</td>
<td>Graham McNair, Alice M.</td>
<td>Exploratory Study of Pastoral Care Intervention with Hysterectomy Patients.</td>
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<td>1984</td>
<td>Lattimore, Vergel L.</td>
<td>Pastoral Care Strategies of Black Pastors.</td>
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<td>1984</td>
<td>Myers, Robert K.</td>
<td>The Relationship between Dreams and Dreamers in Modern Psychological Literature.</td>
</tr>
<tr>
<td>1985</td>
<td>Scanlon, Joan.</td>
<td>Life Themes in the Wives of Roman Catholic Deacons.</td>
</tr>
<tr>
<td>1985</td>
<td>Silva-Netto, Benoni R.</td>
<td>Culture, Personality, and Mental Health: An Ethnographic Study of Five Filipino Immigrant Families.</td>
</tr>
<tr>
<td>1986</td>
<td>Pressley, Arthur L.</td>
<td>A Study in the Use of Consumer Marketing Theory to Develop Entry Systems for Pastoral Counseling Centers.</td>
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