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SPIRITUALITY AMONG A PREDOMINATELY AFRICAN AMERICAN COLLEGE STUDENT POPULATION

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Abstract: The purpose of this study was to determine the degree of spirituality among 430 predominately African American undergraduate students who completed the 48-item Life Attitude Profile-Revised (LAP-R). T-tests revealed that these students had a higher spirituality score than their predominately White counterparts who recently completed the LAP-R. Unlike the White students, no significant gender differences were found among specific spiritual indices. If these students use their moderately high degree of spirituality to influence health-related behaviors, the high rates of morbidity and mortality common among African American adults may lessen.

Spirituality is consistently defined as a (personal) sense of purpose and meaning (Abels, 2000; Bensley, 1998; Martin & Martin, 2002; McBride, Borrks, & Pilkington, 1998). Many people, including health educators, however, continue to equate spirituality with religion. Words such as *spirituality* and *religion* are used synonymously. Spilka and McIntosh (1996) reported that while people who value religion also claim to value spirituality, the terms are different. These authors differentiated spirituality from religion by explaining that spirituality involves fully living a meaningful, purposeful life while religion entails engaging in traditional practices, ceremonies, and dogma in religious institutions. About 46% of Americans attend church (religion), but 58% of Americans say that they frequently think about meaning and purpose of life (spirituality, Inglehart, 2004), which implies that *many* Americans may be more spiritual than religious. According to Martin and Martin, however, spirituality supersedes and overarches religiosity for *most* African Americans. Indices of spirituality include having *direction, goals, hope, and eagerness for living* (Reker, 1999), all of which are not necessary for practicing religion.

Currently, research studies show that people with higher levels of purpose and meaning tend to be healthier in general (Holt, Clark, Kreuter, & Rubio, 2003; Konig, 2002). Specifically, researchers have shown that spiritual well-being positively influences depression (Nelson, Rosenfeld, Breitbart, & Galletta, 2002) as well as recovery from addiction (Doweiko, 2002), breast cancer (Feher & Maly, 1999), and cardiovascular disease (Contrada, 2003). These findings may be specifically important information for males, who typically score lower on spirituality assessments than females (Dennis, Muller, Miller, & Banerjee, 2004; Knox, Langehough, Walters, and Rowley, 1998; Reker, 1999). These findings also may provide important information for African Americans, especially African American males who have disproportionately high morbidity and mortality rates (Newlin, Knaf, & Melkus, 2002).

Peter Benson (2003), President of Search Institute Minneapolis, a national non-profit research organization dedicated to promoting the well-being of children and adolescents, reported that spirituality is positively related to school success and negatively related to alcohol and tobacco use as well

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as violence and teen pregnancy. Holder, DuRant, Harris, Daniel, Obeidallah, and Goodman (2000) added that spiritual well-being influences less sexual activity among African American teens. Yet, in their article, "The Role of Spirituality in Preventing Early Sexual Behavior," Doswell, Kouyate, and Taylor (2003) reported that many African Americans yearn daily for life meaning and need to integrate what spirituality they have into fostering more self-control over life decisions, particularly regarding their typically early sexual behavior.

A diminished sense of spirituality may be related to other negative behaviors among adolescents. For example, Knox, et al. (1998) found that college students who have a lower degree of spirituality also engage more in stealing, getting into trouble with police, damaging property as well as being less able to "survive on their own." In an unpublished report, Dennis and Muller (2004) found fewer indices of spirituality among obese college students who likely engaged in unhealthy behaviors of overeating and exercising too little.

In addition to having a personal spirituality that affects individual behaviors, having spiritual peers also may affect personal behaviors. For example, Jagers (1997) found that African American youth who rated their friends as spiritual tended themselves to be empathic and less antagonistic toward others.

Jagers and Smith (1996) reported that overall African American college students have higher levels of spirituality than white students. Moreover, according to Chatters, Taylor, and Lincoln (1999) and Benson (2003), African American students also engage in spiritual practices (e.g., praying, meditating, reflecting on life, fully living life) more than whites. In a data set of 127,000 6th-12th grade adolescents across 320 U.S. cities, Benson found that although 70% of white students reported engaging in spiritual practices, 83% of African American students engaged in these behaviors. Belief in God is not necessary to be spiritual (Spilka, Hood, Hunsberger, & Gorsuch, 2003); however, in a study by Walker and Dixon (2002), it was found that 93% of white students reported believing in God and 99% of African American students reported belief in God.

The college years mark a time when young people explore life's direction and establish life patterns for adulthood (Sparling & Snow, 2002). Therefore, it seems imperative that African American students, especially those who report using spirituality to cope with life problems, should be encouraged to seek and expand their directing spiri-

tual dimension (Constantine, Wilton, Gainor, & Lewis, 2002; Russell, 1979) of health. The purpose of this study was to quantify spirituality among African American college students in order to identify spiritual indices that health educators might use in working with students with low scores. Another purpose of this study was to determine any gender differences in spiritual indices.

METHOD

PARTICIPANTS

This study was conducted during the fall semester 2003 and spring semester 2004. Study participants comprised a college sample of 430 undergraduate students attending a historically black university located in a small rural town setting in the northeastern U.S. Students were enrolled in one of 12 sections of an introductory, abnormal, or developmental psychology course.

After obtaining approval from the university Institutional Review Board and permission from each class instructor, students were surveyed at a time suitable to the instructor. In addition to completing the Life Attitude Profile-Revised (LAP-R; 1999), students provided their age, gender, race, and year in college. Some of the LAP-R data were used in another study involving the relationship of spirituality to first-generation college classification among African American students.

SURVEY

The LAP-R (1999) originally was developed by Reker and Peacock (1981). This 48-item questionnaire was designed for individuals of all ages from adolescence to later adulthood. Because the word *spirituality* is avoided in the title and content of survey response items, it appears not to bias people to spiritually-desirable answers. A fifth-grade reading level is required to complete the approximately 15-minute survey. A sample of 750 people, most of whom were 17-24 year old university students, provided normative scores in 1981. Coefficients of internal consistency for young adults (17-27 years old) ranged from 0.77 to 0.91 for all subscale and composite scores. Results of factor analysis lend strong support for the construct validity of the LAP-R. Concurrent validity was established from a series of eight previous studies. From these results, the LAP-R is viewed as a valid measure of current and future meaning and purpose in life. Also, it is predictive of outcome variables, including health and life satisfaction (Reker, 1999).

Each of the 48 questionnaire items is rated on a 7-point Likert scale of agreement (1-7), ranging

from *strongly agree* (7) to *strongly disagree* (1). The LAP-R is scored and profiled in terms of six subscales: *Purpose* (PO), *Coherence* (CO), *Choice/Responsibleness* (CR), *Death Acceptance* (DA), *Existential Vacuum* (EV), and *Goal Seeking* (GS). Two composite scales *Personal Meaning Index* (PMI) and *Existential Transcendence* (ET) also were used. A high score for each subscale and scale reflects a high degree of its attribute.

The purpose (PU) subscale refers to having life goals, having a mission in life, having a sense of direction from the past, in the present, and toward the future. Implicit in PU is the notion of what is centrally important in a person's life. The coherence (CO) dimension refers to an intuitive understanding of self, others, and life in general. CO gives an indication of a person's belief in his or her reason for existence. The choice/responsibleness (CR) subscale refers to the perception of freedom to make all of life choices. CR provides an index of the degree to which a person perceives that she or he is directing his or her life. Death acceptance (DA) refers to having an absence of fear as well as an acceptance of death as a natural aspect of life. The existential vacuum (EV) subscale refers to having a lack of meaning and direction in life. Goal seeking (GS) refers to one's eagerness to get more out of life.

The personal meaning index (PMI) composite score (PU + CO) was developed to provide a more focused measure of an individual's personal meaning. PMI refers to having life goals, as well as a mission and sense of direction in life. The other composite score, ET (existential transcendence) is a global measure of attitudes toward life that takes into account both the motivation to find meaning

and purpose. ET is derived from the following formula: PU + CO + CR + DA – (EV + GS).

STATISTICAL ANALYSIS

A *t-test* for equality of means was conducted on all data using SPSS^a to determine the difference between degrees of spirituality as expressed by African American males and females. All comparisons were made assuming an alpha level of .05 with two-tailed comparisons. In addition, means and standard deviations were assessed for all data.

RESULTS

OVERALL

Of the 430 students (156 males; 274 females), approximately 90% were African American. The remainder of the sample included whites, Hispanics, Asian Americans, and other races. Almost 90% of the 430 students were between ages 18-20, with the remainder of students age 21 and over. The sample was comprised of approximately equal percentages (each slightly above or below 30%) of freshmen, sophomores, and juniors. Seniors comprised a little over 10% of the sample.

Table 1 shows the overall means and standard deviations as they occurred for each of the 6 LAP-R dimensions. The CR dimension had the highest mean (45.31) and comparatively low standard deviation (6.44), followed closely by the GS dimension (44.29 ± 5.61). This finding suggests that the group tested was homogeneous in having a high sense of freedom regarding making all life choices, felt able to exercise personal decision-making, had a high internal locus of control (CR), and reflected a desire to deviate from the routine of life, seeking new and diverse experiences (GS). The PMI

Table 1. LAP-R Subscale Scores for Current Study (Predominately African American Sample), 2004 Similar Study (Predominately white Sample), and 1981 National Norms (Predominately white Sample).

LAP-R Subscales	Current Study Mean (SD)	*Similar Study Mean (SD)	**1981 Nat'l Norms Mean (SD)
Purpose in Life (PU)	43.21 (7.31)	41.55 (8.74)	40.03 (8.44)
Coherence (CO)	42.41 (6.71)	40.68 (6.33)	38.40 (8.30)
Choice/Responsible (CR)	45.31 (6.44)	44.50 (6.38)	44.94 (6.52)
Death/Acceptance (DA)	36.53 (9.25)	36.76 (8.68)	36.13 (9.45)
Existential Vacuum (EV)	30.71 (8.49)	30.58 (8.06)	25.92 (8.70)
Goal Seeking (GS)	44.29 (5.61)	42.26 (5.84)	41.15 (7.74)

^aDennis, D. L., Muller, S. M., Miller, K., & Banerjee, P. (2004). Spirituality among a college student cohort: A quantitative assessment. *American Journal of Health Education*, 35(4), 220-227.
^{**}Reker, G. T. (1999). *The life attitude profile-revised manual*. Peterborough, Ontario: Student Psychologists Press.

composite score was 85.61 ± 12.91 and the ET composite score was 95.58 ± 25.14 .

Male and female overall individual scores are shown in Table 2. The items in the Purpose in Life (PU), Coherence (CO), Choice/Responsibleness (CR) and Existential Vacuum (EV) dimensions did not reveal a statistically significant difference between male and female mean scores. This finding implies that the students tested were similar in their opinions regarding having life goals, a clear sense of personal identity, greater social consciousness and personal decision-making. Statistically significant differences were noted for males and females for the Death/Acceptance (DA) and Goal Seeking (GS) dimensions. In both dimensions, males scored higher than females.

The PMI composite score is designed to depict a sharper focus on personal meaning, in particular, life-goals, a sense of direction, a logical, consistent understanding of the self, others, and life in general. This score was not statistically significantly different for males and females. Similarly, the Existential Transcendence composite scale reflected no statistically significant difference in the responses by males and females. This finding reveals that both males and females report similar experiences with internalizing successes and failures of life, appreciations of the past, present and future, and a view of life that is meaningful.

DEATH ACCEPTANCE (DA)

Table 3 depicts question-wise differences between males and females concerning their expression of spirituality. Specific for the DA dimension, males agreed more strongly than females with the statements "I am less concerned about death" ($t =$

2.35, 95% CI = 0.071-0.787) and "I am not frightened of death like others" ($t = 2.66$, 95% CI = 0.123-0.812).

EXISTENTIAL VACUUM (EV)

All mean values for the individual items in the EV dimension were higher for males than females, except for the "I don't care" attitude and "life is boring and uneventful" statements. Statistically significant differences between the mean responses of males and females were assessed only for the following statement, "New activities soon lose their attractiveness" ($t = 2.84$, 95% CI = 0.148-0.811). The Existential Vacuum dimension reflects attitudes of boredom, apathy, lack of goals, and feelings of indifference.

GOAL-SEEKING (GS)

Only one statement in the GS dimension elicited a statistically significant difference in the mean responses of males (5.22) and females (4.86). The higher score among males in the statement, "A new challenge in my life would appeal to me now" ($t = 2.38$, 95% CI = 0.063- 0.651), suggests that males reported a higher interest in "breaking loose from the routine of life."

DISCUSSION

Results of this study indicate that this predominately African American college student sample demonstrated a fairly high degree of spirituality, evidenced by their overall mean PMI score of 85.61 out of the highest possible score of 112. This mean PMI score is higher than the PMI mean score (74.62) for the predominately white college student population in the Dennis et al. (2004) study as well

Table 2. Male and Female LAP-R Subscale and Composite Scores for a Predominately African American College Student Sample.

LAP-R Subscale	Males (n=156)	Females (n=274)	p-value
	Mean (SD)	Mean (SD)	
Purpose in Life (PU)	42.99 (7.05)	43.33 (7.47)	.641
Coherence (CO)	42.60 (6.58)	42.30 (6.80)	.664
Choice/Responsibleness (CR)	45.75 (5.74)	45.05 (6.81)	.281
Death/Acceptance (DA)	37.93 (8.90)	35.73 (9.37)	.018*
Existential Vacuum (EV)	31.64 (8.87)	30.17 (8.23)	.088
Goal Seeking (GS)	45.12 (5.30)	43.82 (5.74)	.021*
Composite Scales			
Personal Meaning Index (PMI)	85.61(12.60)	85.62(13.12)	.854
Existential Transcendence (ET)	92.28(25.10)	92.76(25.21)	.994

*t-test significant at $p < .05$

Table 3. Male and Female LAP-R Response Item Scores for a Predominately African American College Student Sample.

<u>LAP-R Response Items</u>	Males (n=156)		Females (n=274)	
Purpose in Life (PU)	Mean	(SD)	Mean (SD)	p-value
Past achievements give my life meaning	6.24	(0.904)	6.14 (1.21)	.364
I have clear goals and aims	6.10	(1.01)	6.08 (1.15)	.867
I have discovered a satisfying life purpose	5.44	(1.41)	5.49 (1.41)	.726
I live the kind of life I want to live	5.02	(1.61)	4.84 (1.80)	.294
I know where my life is going	4.81	(1.62)	4.96 (1.67)	.371
In achieving life's goals, I have felt fulfilled	4.42	(1.70)	4.60 (1.70)	.286
My mission in life gives me direction	5.88	(1.16)	6.00 (1.19)	.332
Life runs over with exciting good things	5.05	(1.54)	5.14 (1.49)	.566
Coherence (CO)				
The meaning of life is evident in the world around us.	4.89	(1.57)	4.77 (1.71)	.483
I am aware of a powerful purpose toward which my life has been directed	5.58	(1.21)	5.36 (1.28)	.075
My life philosophy gives significance to my life	5.39	(1.38)	5.31 (1.42)	.587
Thinking of my life, I see a reason for my being here.	6.04	(1.31)	5.99 (1.26)	.665
A framework helps me understand life.	5.28	(1.27)	5.12 (1.50)	.271
Parts of my life fit in a unified pattern	5.16	(1.21)	5.22 (1.33)	.671
I have a clear understanding of the ultimate meaning in life.	4.89	(1.57)	5.08 (1.59)	.245
My personal existence is orderly and coherent.	5.35	(1.25)	5.30 (1.23)	.691
Choice/Responsibleness (CR)				
Directing life is important.	6.17	(1.21)	6.00 (1.45)	.210
My accomplishments are my effort.	6.38	(0.814)	6.20 (1.18)	.092
I determine what happens in my life.	5.40	(1.66)	5.35 (1.76)	.792
I am free to make all life choices.	5.57	(1.45)	5.54 (1.54)	.860
I can live my life the way I want to.	5.62	(1.26)	5.56 (1.33)	.661
My life is in my hands, I am in control	4.99	(1.79)	4.73 (1.96)	.169
Regarding important life matters, I make my own choices	5.51	(1.18)	5.50 (1.39)	.961
I accept personal responsibility for my own life	6.15	(0.996)	6.20 (1.06)	.624
Death Acceptance (DA)				
I am less concerned about death than others	4.51	(1.69)	4.08 (1.88)	.019*
Death makes little difference to me	3.47	(1.90)	3.17 (2.01)	.131
I am not concerned about the inevitability of death	4.64	(1.77)	4.42 (1.90)	.229
I neither fear death nor welcome it.	5.22	(1.51)	5.01 (1.74)	.202
There is no sense in worrying about death	5.11	(1.52)	4.88 (1.54)	.074
I am not frightened of death like others	4.81	(1.77)	4.35 (1.73)	.008**
The thought of death seldom enters my mind.	4.48	(1.87)	4.39 (1.87)	.617
I accept death as another life experience	5.36	(1.52)	5.15 (1.66)	.197
Existential Vacuum (EV)				
I seem to change my main objectives in life.	3.85	(1.81)	3.54 (1.54)	.134
Something is missing from my life.	4.59	(1.91)	4.48 (1.90)	.547
I feel a lack of and a need to find real meaning in my life.	3.65	(1.79)	3.50 (1.87)	.396
New activities soon lose their attractiveness.	4.38	(1.70)	3.91 (1.66)	.005**
I am destined to accomplish something important, but I cannot put my finger on it.	4.96	(1.70)	4.70 (1.80)	.142
I daydream of finding a new place for my life and a new identity	4.25	(1.91)	4.02 (1.95)	.242
I find myself withdrawing from life with an "I don't care attitude."	3.19	(1.97)	3.22 (1.98)	.868
Life to me seems boring and uneventful.	2.64	(1.66)	2.79 (1.90)	.421

Table 3. Male and Female LAP-R Response Item Scores for a Predominately African American College Student Sample. (Continued)

	Males (n=156)		Females (n=274)	
	Mean	(SD)	Mean (SD)	p-value
Goal-Seeking (GS)				
New and different things appeal to me	6.19	(0.965)	6.07 (1.02)	.208
I would enjoy breaking loose from the routine of life.	5.03	(1.60)	4.86 (1.73)	.304
I am restless.	4.12	(1.85)	3.90 (1.89)	.257
I feel the need for adventure and "new worlds to conquer."	5.47	(1.44)	5.24 (1.55)	.125
A new challenge in my life would appeal to me now.	5.22	(1.39)	4.86 (1.54)	.018*
I hope for something exciting in the future.	6.49	(0.883)	6.49 (0.965)	.985
I am eager to get more out of my life than I have so far.	6.12	(1.25)	6.00 (1.41)	.413
I am determined to achieve new goals in the future.	6.47	(.791)	6.40 (1.09)	.467

t-test significant at *p<.05, **p<.01

as the PMI mean score (78.43) in Reker's 1981 national norm sample comprised of predominately white students. Therefore, results from this study provide agreement with Jager's and Smith's (1996) finding that African American students are more spiritual than white students. In addition, the moderately high PMI mean score in this sample as well as the moderately high mean Goal Seeking mean score (44.29, compared to 42.49 for students in the Dennis et al. study) lend agreement with Chatters et al.'s (1999) finding that African American students practice their spirituality more than their white counterparts.

While it is believed that males typically score lower on spirituality assessments than females (Dennis et al., 2004; Knox et al., 1998; Reker, 1999), males and females in this study scored similarly (85.61 and 85.62, respectively) on the overall spirituality score (PMI composite scale). This finding may indicate that, unlike samples from other studies, spirituality is equally important and developed for African American male and female students.

Only four response items among three subscales (Death Acceptance, Existential Vacuum, and Goal Seeking) revealed any significant differences between males and females. Males scored higher than females (4.51 and 4.08, respectively) on "I am less concerned about death than others" and "I am not frightened of death like others" (males= 4.38; females=3.91). These differences parallel those found by Dennis et al. (2004), indicating that males in general may perceive themselves as more unafraid to die than females. In both the Existential Vacuum statement, "New activities soon lose their attractiveness" and the Goal Seeking statement, "A new challenge in my life would appeal to me now," males scored higher. These results are difficult to inter-

pret because only one item is represented in each subscale. Making broad conclusions based on one item may be inappropriate.

The highest mean score for a subscale for the overall group was Choice/Responsibleness. This score (45.31) was similar to the mean score (44.50) for predominately white students in the Dennis et al. (2004) study. This finding is not surprising because, irrespective of race, many college students are likely experiencing freedom from their parents for the first time.

Of particular interest in this study is the Existential Transcendence composite mean score. Students in this sample scored similarly to the 1981 national norm (92.58 and 92.47, respectively), which was comprised predominately of white students. These results also were similar (88.83) to those of students in the Dennis et al. (2004) study, which also consisted predominately of white students. This finding indicates an opposing view to Doswell et al.'s (2003) premise that African American students are yearning for life meaning. In particular, these African American students were not yearning for meaning in life in comparison to the White students who completed the same survey. Possibly, these students are not yearning for what they perceive that they already possess. While this study does not address what African American students do with their moderately high degree of spirituality, future research studies might address whether African American students are channeling their spirituality for healthful living and more self-control over life decisions instead of merely using it to cope with life problems as suggested by Constantine et al. (2002).

Health educators such as Russell (1979), Holt et al. (2003), and Dennis and Muller (2004) as well

as physicians such as Konig (2002) and McBride et al. (1998) are increasingly aware of the directing effect a person's spirituality has on his or her health. By helping African American students enhance their already moderately high degree of spirituality, health educators may help them have more success in school and fewer incidences of obesity (Dennis & Muller), as well as decreased alcohol and tobacco use, violence, teen pregnancy (Benson, 2003), stealing, getting into trouble with police and surviving better on their own (Knox, et al., 1998). Also, helping African American students purposely focus their personal sense of spirituality toward its connection to health may be particularly important to eventually decreasing their unusually high morbidity and mortality rates (Newlin et al. 2002).

This study makes a positive contribution to health educators' knowledge concerning spirituality among one predominately African American sample; however, this study has limitations. First, it is difficult to quantify spirituality because of its abstract nature; nevertheless, by doing so, the term is better understood (Adams, Bezner, Drabbs, Zambarano, & Steinhardt, 2000). Also, the sample size was not only small but represented only a rural, small-town college student sample. A larger and exclusively African American sample, comprised of both rural and urban students, could increase generalizability of results to African American adolescents in general. Any differences among spiritual indices between African American male and female students also might be expressed.

CONCLUSION

Results from this study indicate that these African American college students have a moderately high degree of spirituality. For long-term health related benefits, these students may benefit from opportunities to reflect upon their personal spirituality and its connection to long-term health decisions. For example, health educators may ask students to think about potential links between what they believe is their life purpose and how that purpose affects their decisions regarding health behaviors such as school performance, anger, alcohol and drug use, food choices, exercise, violence, or sexual activity. Interestingly, this coupling of spirituality with health behaviors reflects the roots of the *black helping profession*. In their book, *Spirituality and the Black Helping Tradition in Social Work*, Martin and Martin (2002) wrote that the essence of *black spirituality* was used in past times to "transcend and transform soul-destroying, life-threatening systems" (p. 11). Many health educators believe that spirituality is the dimension of health that positively directs people to take action to enhance their other personal health dimensions (physical, mental, emotional, and social; Russell, 1979). If African American adolescents embrace a traditional spiritual intention and this spirituality remains moderately high or increases, morbidity and mortality rates among African Americans adults should decline.

REFERENCES

- Abels, L. (Ed.). (2000). *Spirituality in social work practice*. Denver, CO: Love Publishing Co.
- Adams, T. B., Bezner, J. R., Drabbs, M. E., Zambarano, R. J., & Steinhardt, M. A. (2000). Conceptualization and measurement of the spiritual and psychological dimensions of wellness in a college population. *Journal of American College Health*, 48, 165-173.
- Bensley, R. (1998, March 30). Spiritual dimensions of health. [LISTSERV]. Available E-mail: HEDIR-L@SIU.EDU
- Benson, P. L. (2003, November). *Spiritual development in childhood and adolescence*. Paper presented at the meeting of the Tufts University Center for Children, Medford, MA.
- Chatters, L. M., Taylor, R. J., & Lincoln, K. D. (1999). African American religious participation: A multi-sample comparison. *Journal of the Scientific Study of Religion*, 38, 132-145.
- Constantine, M. G., Wilton, L., Gainor, K. A., & Lewis, E. L. (2002). Religious participation, spirituality, and coping among African American college students. *Journal of College Student Development*, 43(5), 605-613.
- Contrada, R. J. (2003). *Spirituality, religion, and cardiovascular disease*. Paper presented at the International Conference for the Integration of Health and Spirituality, Bethesda, MD.
- Dennis, D. L., & Muller, S. M. (2004). *Spirituality: A link to obesity?* Manuscript submitted for publication.
- Dennis, D. L., Muller, S. M., Miller, K., & Banerjee, P. (2004). Spirituality among a college student cohort: A quantitative assessment. *American Journal of Health Education*, 35(4), 220-227.
- Doswell, W. M., Kouyate, M., & Taylor, J. (2003). The role of spirituality in preventing early sexual behavior. *American Journal of Health Studies*, 18(4), 195-199.

- Doweiko, H. E. (2002). *Concepts of chemical dependency* (5th ed.). Pacific Grove, CA: Brooks/Cole.
- Feher, S., & Maly, R. C. (1999). Coping with breast cancer in later life: The role of religious faith. *Psychooncology*, 8, 408-416.
- Holder, D. W., DuRant, R. H., Harris, T. L., Daniel, J. H., Obeidallah, D., & Goodman, E. (2000). The association between adolescent spirituality and voluntary sexual activity. *Journal of Adolescent Health*, 26, 295-302.
- Holt, C. L., Clark, E. M., Kreuter, M. W., & Rubio, D. M. (2003). Spiritual health locus of control and breast cancer beliefs among urban African American women. *Health Psychology*, 22(3), 294-302.
- Inglehart, R. F. (2004). *World values surveys*. Ann Arbor, MI.
- Jagers, R. (1997). Afrocultural integrity and the social development of African American children: Some conceptual, empirical, and practical considerations. *Journal of Prevention and Intervention in the Community*, 16, 7-31.
- Jagers, R. J., & Smith, P. (1996). Further examination of the spirituality scale. *Journal of Black Psychology*, 22, 429-442.
- Knox, D., Langehough, S. O., Walters, C., & Rowley, M. (1998). *Religiosity and spirituality among college students*, 32(3), 430-432.
- Konig, H. G. (2002). An 83-year-old woman with chronic illness and strong religious beliefs. *The Journal of the American Medical Association*, 288, 487-493.
- Martin, E. P., & Martin, J. M. (2002). *Spirituality and the black helping tradition in social work*. Washington, DC: NASW Press.
- McBride, J. L., Borrks, A. G., & Pilkington, L. (1998). The relationship between a patient's spirituality and health experiences. *Family Medicine*, 23, 1-3.
- Nelson, C. J., Rosenfeld, B., Breitbart, W., & Galletta, M. (2002). Spirituality, religion, and depression in the terminally ill. *Psychosomatics*, 43, 213-220.
- Newlin, K., Knafl, K., & Melkus, G. D. (2002). African-American spirituality: A concept analysis. *Advances in Nursing Science*, 25(2), 57-70.
- Reker, G. T. (1999). *Life attitude profile-revised manual*. Peterborough, Ontario: Student Psychologists Press.
- Reker, G. T., & Peacock, E. J. (1981). The life attitude profile (LAP): A multidimensional instrument for assessing attitudes toward life. *Canadian Journal of Behavioral Science*, 13, 264-273.
- Russell, R. (1979). Some futures for health educators in the 1980s. *Eta Sigma Gamma*, 12(Suppl. 2), 3-7.
- Sparling, P. B., & Snow, T. K. (2002). Physical activity patterns in recent college alumni. *Research Quarterly for Exercise and Sport*, 73, 200-205.
- Spilka, B., Hood, R. W., Jr., Hunsberger, B. & Gorsuch, R. (2003). *The psychology of religion: An empirical approach* (3rd ed.). New York, NY: The Guilford Press.
- Spilka, B., & McIntosh, D. N. (1996). *Religion and spirituality: The known and the unknown*. Paper presented at the meeting of the American Psychological Association, Toronto, Canada.
- Walker, K. L., & Dixon, V. (2002). Spirituality and academic performance among African American college students. *Journal of Black Psychology*, 28(2), 107-121.

CHES AREAS

Responsibility I - Assessing Individual and Community Needs for Health Education

Competency A - Obtain health related data about social and cultural environments, growth and development factors, needs, and interests.

Competency B - Distinguish between behaviors that foster and those that hinder well-being.

Competency C - Infer needs for health education on the basis of obtained data.

Competency D - Determine factors that influence learning and development.

Responsibility VII - Communicating Health and Health Education Needs, Concerns, and Resources

Competency A - Interpret concepts, purposes, and theories of health education.

Responsibility VIII - Apply Appropriate Research Principles and Methods in Health Education

Competency A - Conduct thorough reviews of literature.

Responsibility X - Advancing the Profession of Health Education

Competency A - Provide a critical analysis of current and future needs in health education.