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Theodicies and professional quality of life in a nationally representative sample
of chaplains in the Veterans Health Administration

Joseph M. Currier¹, Kent D. Drescher², Jason A. Nieuwsma^{3,4}, and Wesley McCormick¹

¹Psychology Department, University of South Alabama, Mobile, AL

²National Center for PTSD, Palo Alto VA Healthcare System, Dissemination and Training
Division, Menlo Park, CA

³Mental Health and Chaplaincy Program, Department of Veterans Affairs, Mid-Atlantic Mental
Illness Research, Education and Clinical Center, Durham, NC

⁴Department of Psychiatry and Behavioral Sciences, Duke University Medical School

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Abstract

This study examined the role of theodicies or theological/philosophic attempts to resolve existential dilemmas related to evil and human suffering in chaplains' professional quality of life (ProQOL). A nationally-representative sample of 298 VHA chaplains completed the recently developed Views of Suffering Scale (Hale-Smith, Park, Edmondson, 2012) and ProQOL-5 (Stamm, 2010). Descriptive results revealed that 20% to 50% endorsed strong theistic beliefs in a compassionate deity who reciprocally suffers with hurting people, God ultimately being responsible for suffering, and that suffering can provide opportunities for intimate encounters with God and personal growth. Other results indicated that chaplains' beliefs about human suffering were differentially linked with their sense of enjoyment/purpose in working with veterans. These results suggest that theodicies might serve as a pathway to resilience for individuals in spiritual communities and traditions in the U.S., particularly for clinicians and ministry professionals who are committed to serving the needs of traumatized persons.

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Chaplains have long played a crucial role in attending to the multi-faceted needs of veterans who seek health care in the Veterans Health Administration (VHA; Bonner et al., 2013; Nieuwsma et al., 2013; Zullig et al., 2014). Although chaplains' primary mission is to support veterans' spiritual functioning, they usually also offer an array of formal and informal mental health interventions. In fact, when compared to psychologists and other traditional mental health providers, veterans may view chaplains as a more accessible and socially acceptable source of help for emotional distress. For instance, in a national random-sample survey of United States (U.S.) Iraq/Afghanistan Veterans, 20.2% of those with a probable mental health disorder (e.g., posttraumatic stress disorder [PTSD], depression,) had sought the help of a chaplain or other pastoral professional in the prior year (Nieuwsma et al., 2014a). In addition, Nieuwsma et al. (2014a) found that veterans were more likely to seek pastoral care in instances of stigma or mistrust of mental health care. Given this openness to seeking help from chaplains among many veterans who might not otherwise seek care, the VHA recently launched several initiatives to more fully support chaplains' involvement in mental health services (e.g., Nieuwsma et al., 2014b). We conducted this study to explore links between VHA chaplains' meaning frameworks for explaining human suffering (i.e., "theodicies") and professional quality of life (ProQOL) amidst the potential added burden of these clinical and ministry-related responsibilities.

Notwithstanding numerous opportunities for enhancing well-being, military service can confront veterans with a variety of traumas and other high-magnitude stressors that disrupt their physical, psychological, relational, and spiritual functioning. When considering this last domain, research has supported the need to address spiritual concerns among veterans dealing with PTSD

and other mental health problems (e.g., Currier, Drescher, & Harris, 2014; Hourani et al., 2012; Tran, Kuhn, Walser, & Drescher, 2012; Witvliet, Phillips, Feldman, & Beckham, 2004). In addition, Fontana and Rosenheck (2004, 2005) documented two key findings that further underscore the importance of chaplains: (1) higher rates of mental health service utilization in the VHA among veterans who reported a weakening of their religious faith; and (2) veterans who experienced a loss of meaning following their war-zone deployments were more likely to seek treatment. Overall, these findings suggest that many veterans who present for mental health care in the VHA might be struggling in the spiritual domain and desire to revise and/or repair their faith as part of the treatment process. Hence, in addition to being on the frontlines for addressing PTSD and other forms of emotional distress (Bonner et al., 2013), veterans oftentimes entrust chaplains with their most complex and distressing religious and spiritual concerns as well.

ProQOL is a broad construct that attempts to capture how exposure to these varying forms of human suffering might lead to significant emotional, cognitive, and behavioral changes for helping professionals in the context of their lives and work (for review, see Stamm, 2010). Regarding potential negative aspects that can disrupt chaplains' ability to do their job effectively, they may experience *compassion fatigue* (CF; also termed "secondary traumatic stress") or an inability to empathically engage with veterans after repeated encounters with serious illness (e.g., cancer; Zullig et al., 2014) and vicarious exposure to traumatic events. In addition, particularly in situations when chaplains feel overwhelmed by their job responsibilities and not supported by their overall work environment, they might experience *burnout* or emotional exhaustion and hopelessness related to serving in their helping role. However, besides these negative aspects, working with veterans can also promote *compassion satisfaction* (CS) or a deep sense of pleasure and purpose in working with veterans and their families. As with motivations in other helping

professions, many individuals pursue a career in chaplaincy for altruistic reasons and can derive great significance from their vocation. Compared to other types of mental health professionals who work with veterans (e.g., Cieslak et al., 2013; Kintzle, Yarvis, & Bride, 2013), Yan and Beder (2013) recently found that VHA chaplains reported remarkably positive ProQOL scores.

One of the possible reasons for chaplains' resilience and capacity to even thrive in their variegated occupational role is their theological background and internalization of robust explanatory frameworks for their patients' suffering. Rarely studied in the behavioral sciences, theodicies are theological/philosophic attempts to reconcile beliefs about God or a Higher Power with the inevitable occurrence of suffering and trauma in the world (Hall & Johnson, 2001). Given human beings' inherent need for meaning (Park, 2013), exposure to suffering and trauma can engender basic questions about evil, human nature, and the existence and character of God. For example, in making meaning of trauma, Hall and Johnson (2001) suggested that theistically-oriented persons might grapple with the question, "How can a good and all-powerful God allow for evil in the world?" In attempting to maintain or restore one's faith, he or she may struggle to reconcile the apparent reality of evil with the existence of a Higher Power who is both loving and competent to order the universe. Religious/philosophic traditions have long offered a variety of theodicies for resolving existential dilemmas (Berger, 1967). However, when considering the possible emotional/spiritual hazards of working on the frontlines with veterans, different beliefs about human suffering might be differentially linked with positive/negative aspects of ProQOL.

The Views of Suffering Scale (VOSS) was developed to promote inquiry into theodicies in scientific and applied work (Hale-Smith, Park, & Edmondson, 2012). Drawing on orthodox teachings from different Christian traditions, beliefs not linked with specific religious groups, and nontheistic frameworks (e.g., Buddhism, atheism), the VOSS captures several of the most

common views in North America about human suffering. Two of these subscales tap specific beliefs about God's role in the occurrence of suffering, including beliefs that suffering is present in the world because human beings broke relationship with the divine in their free will (divine responsibility) and God allows for suffering due to the decision to limit any foreknowledge about the future (limited knowledge). The VOSS also assesses four other theodicies that might operate in harmony in a theistic meaning system: God desires to be compassionately present in suffering (suffering God), God uses suffering as a catalyst for growth (soul-building), suffering provides an opportunity for mysteriously intimate encounters with God (encounter), and attributions about God's power/control in times of crisis or suffering (providence). Finally, in addition to these theistic views, the VOSS includes items that affirm the possible existence of a Higher Power without ascribing divine characteristics to the deity (unorthodox) and the inability for human beings to predict and/or understand the nature of suffering in any definitive sense (random).

Study Aims

The overarching aim of this study was to explore the associations between these different frameworks for understanding human suffering (as assessed by the VOSS) and ProQOL (CF, burnout, and CS) in a nationally representative sample of VHA chaplains. Given the limited information on associations between theodicies and psychological and health-related outcomes, we did not develop *a priori* hypotheses prior to performing the statistical analyses. Rather, we conducted this exploratory study to (1) describe chaplains' predominant beliefs about human suffering and (2) provide initial evidence on the types of theodicies that might help or hinder chaplains' ability to effectively attend to the many possible emotional and spiritual demands of their professional role in working with veterans in communities throughout the U.S.

Method

Participants and Procedures

This study focused on 298 VHA chaplains who were employed on a full- or part-time basis at medical centers across the U.S. In collaboration with the National Chaplain Center, an email invitation was sent from the National Center for PTSD (Training and Dissemination Division) in February, 2013 to 570 VHA chaplains to participate in a one-time online survey as part of a larger VHA-sponsored educational initiative on moral injury. In total, 61% of these persons completed portions of the survey and a little over half (53%) completed the quantitative instruments that provide the basis for this study. Given the moderate risk and educational aims of the study, all of the study procedures were deemed exempt by Stanford University's IRB for Human Subjects in Medical Research and approved for the types of analyses that form the basis of the present paper.

Nearly three-quarters (72.1%) of the participants were over 55 years of age and 85% were men. Nearly three-quarters (74.2%) also identified as being Caucasian in their racial/ethnic background; however, African American (17.1%), Asian American (3.7%), Hispanic (1.7%), Native American (4.0%), and other minority groups (2%) were represented as well. Most participants were married (65.8%), 24.1% had never married, 6.4% were divorced, and 3.0% had been widowed. In total, 86.1% of the chaplains were employed on a full-time basis. In addition, 44.8% had served in the military and an additional 14.5% were currently affiliated with the military in some capacity. Over two-thirds (69.4%) had a Master's degree and 28.3% had a doctoral degree. Over half (70.9%) had worked as VHA chaplains for more than 10 years and 40.5% had also worked as chaplains in the military. Nearly all of the participants were affiliated with Judeo-Christian denominations (i.e., Mainline Protestant [35.6%], Evangelical Protestant [32.6%], Roman Catholic [21.5%], Black Protestant [5.4%], Jewish [3.4%]).

Measures

Chaplains' theodicies were assessed with the newly developed Views of Suffering Scale (VOSS; Hale-Smith et al., 2012). We included eight of the three-item subscales in this study to capture chaplains' predominant perspectives for explaining suffering: unorthodox (e.g., "God could prevent evil and/or suffering from happening, but God chooses not to because God isn't entirely good"), random (e.g., "Suffering just happens without purpose or underlying reason"), limited knowledge (e.g., "The main obstacle to God preventing suffering is that God doesn't know when it will happen"), suffering God (e.g., "We know God is good in the midst of pain because God suffers with us"), providence (e.g., "Everything that we experience – including suffering – is planned in detail by God"), divine responsibility (e.g., "God is all-powerful and can change situations to alleviate suffering"), encounter (e.g., "Suffering is a way to encounter a God who is above and beyond human experience and comprehension"), and soul-building (e.g., "God intends suffering to be a catalyst for growth"). Items were rated on a six-point scale in which 1 = *Strongly disagree*, 2 = *Moderately disagree*, 3 = *Mildly disagree*, 4 = *Mildly agree*, 5 = *Moderately agree*, and 6 = *Strongly agree*. Cronbach's alphas were: unorthodox = .69, random = .77, limited knowledge = .81, suffering God = .89, providence = .81, divine responsibility = .67, encounter = .73, and soul-building = .91.

Professional quality of life (ProQOL) was assessed with Stamm's (2010) 30-item ProQOL-5. This instrument includes three ten-item subscales for assessing compassion fatigue (CF; e.g., "I am preoccupied with more than one person I help," "I feel as though I am experiencing the trauma of someone I have helped"), burnout (e.g., "I feel trapped by my job as a helper," "I feel worn out because of my work as a helper"), and compassion satisfaction (CS; e.g., "I feel invigorated after working with those I help," "I believe I can make a difference

through my work”). Responses are based on a 5-point scale, with anchor points ranging from 1 (*never*) to 5 (*very often*). In the present study, internal consistencies were: CF = .93, burnout = .93, and CS = .98.

Results

Description of Chaplains’ Theodicies

When comparing the average item scores across the eight VOSS subscales, chaplains most strongly endorsed theistically-oriented beliefs about a suffering God (i.e., 55.1% averaged scores of 5 or 6 across these items). When considering the next most frequent theodicies, nearly a quarter of the sample “moderately” or “strongly” agreed with items about divine responsibility, encounter, and soul-building. As presented in Table 1, chaplains had the lowest scores on the unorthodox and limited knowledge subscales, with no participants reporting moderate or strong agreement items assessing either of these theodicies.

To examine whether chaplains’ beliefs about human suffering differed on the basis of their religious traditions, we ran an initial set of five analyses in which VOSS subscales were simultaneously regressed onto belonging (0 = *No*, 1 = *Yes*) in the five most common religious affiliations in the sample (i.e., Evangelical Protestant, Mainline Protestant, Black Protestant, Roman Catholic, Jewish). All of these subgroups had at least ten participants represented in the sample. When compared to other traditions, participants from an Evangelical Protestant group had lower scores on the random, $p = .01$, and limited knowledge subscales, $p = .003$, along with higher scores on providence, $p < .001$, divine responsibility, $p = .003$, encounter, $p = .011$, and soul-building, $p < .001$. Affiliation with a Mainline Protestant group was positively linked with beliefs about a God who suffers with people, $p = .005$. Similar to evangelical groups, chaplains from a Black Protestant group were more likely to endorse beliefs about God’s providence, $p =$

.005. Finally, in contrast to their Christian counterparts, those affiliated with Judaism had higher scores in randomness, $p = .031$, as well as lower scores on the suffering God subscale, $p = .032$.

Theodicies and ProQOL

With the exception of a positive correlation between chaplains' scores on encounter and CF, $p = .011$, none of the theodicies were linked with negative dimensions of the ProQOL in the bivariate analyses (see Table 1). However, multiple significant correlations emerged between VOSS subscales and levels of chaplains' CS. Namely, chaplains who endorsed higher scores on subscales assessing providence, $p = .025$, divine responsibility, $p = .003$, and suffering God, $p = .060$, indicated greater satisfaction in their work. In contrast, inverse associations were found between CS and unorthodox, $p = .005$, random, $p = .028$, and limited knowledge, $p = .001$, views of human suffering in these bivariate analyses.

We last conducted a multivariate regression analysis to examine whether any of the eight theodicies were uniquely associated with CS (i.e., single ProQOL outcome that emerged as being significantly linked with VOSS subscales in bivariate analyses). In entering the VOSS subscales simultaneously, the model was statistically significant, $F(8, 282) = 3.30$, $p = .001$, accounting for 9% of variance in chaplains' fulfillment in helping veterans. Of the eight individual predictors, CS was uniquely associated with lower scores on the unorthodox subscale, $B = -.11$, $SE B = 0.05$, $p = .04$. Although the links did not reach statistical significance, both providence, $B = .05$, $SE B = 0.03$, $p = .066$, and divine responsibility, $B = .05$, $SE B = 0.03$, $p = .086$, approached the .05 level for determining statistical significance.

Discussion

VHA chaplains play an increasingly critical and variegated role in caring for veterans in communities throughout the U.S. (e.g., Bonner et al., 2013; Elbogen et al., 2013; Nieuwswa et

al., 2013; Zullig et al., 2014). However, in contrast to findings with other helping professionals who work with veterans and other military populations (e.g., Cieslak et al., 2013; Kintzle et al., 2013), recent work has found that VHA chaplains endorse low levels of job-related distress (CF, burnout) and typically derive deep satisfaction from their work (Yan & Beder, 2013). Given chaplains' professional training and possible personal background in grappling with theological matters, the development of frameworks for making meaning of suffering might be a pathway to resilience in their occupational functioning. Drawing on a nationally representative sample of VHA chaplains, this exploratory study was conducted to survey participants' predominant beliefs about human suffering and examine whether different theodicies might facilitate their ProQOL amidst encounters with veterans contending with mental health and/or spiritual problems.

In keeping with teachings in common religious traditions throughout the U.S., the participants scored the highest on the VOSS subscale assessing belief in a compassionate deity who reciprocally suffers with hurting people (i.e., one out of two endorsed this theodicy with an average-item score of "5" or "6" on VOSS). In addition, nearly a quarter of the group endorsed theodicies that were consistent with theistic notions about God ultimately being responsible for suffering (in lieu of giving human beings free will), suffering can provide unique opportunities for intimate encounters with God, and God may use suffering as a catalyst for personal growth. When comparing these descriptive results with Hale-Smith et al.'s (2012) validation sample of young adults, a similar rank-ordered pattern of mean scores also emerged with suffering God, divine responsibility, encounter and soul-building being among the most common theodicies. In addition, irrespective of age differences and a greater representation of non-theistic perspectives in Hale-Smith et al.'s sample, mean scores frequently fell below average-item scores of 4 (i.e., *Mildly agree*) on all of the VOSS subscales across the two groups.

The present results further revealed that chaplains' endorsement of many of the theodicies varied according to predominant religious affiliations in this sample. When compared to counterparts from other theistically-oriented traditions, chaplains from Evangelical Protestant groups were less likely to endorse beliefs in the randomness of suffering and possibility that suffering occurs because God limits foreknowledge of difficult events in people's lives. In addition, participants from evangelical backgrounds indicated stronger endorsement of theodicies related to God's providence, responsibility, and paradoxical role in using suffering for soul-building. Belonging in a Black Protestant group was similarly associated with a stronger belief in God's power and control. Although participants as a whole had faith in a deity who suffers with hurting persons, Christians from Mainline Protestant groups were particularly likely to endorse this theodicy. In contrast, when compared to Christian traditions, chaplains with an affiliation to Judaism had higher scores on subscales assessing beliefs about the randomness of suffering and disagreement about a deity who mutually suffers with humankind. Notwithstanding a shared belief in a Higher Power, these results highlight how adherents to Judeo-Christian traditions can ascribe varying attributes and characteristics to God that might facilitate different types of global beliefs for assimilating or "making sense" of seemingly senseless events in life (Park, 2013).

Consistent with the second aim of this study, several bivariate associations also emerged between chaplains' theodicies and satisfaction from working with veterans. Namely, theistically-oriented beliefs about God's providence, power and responsibility, and compassion in times of suffering were each positively linked with CS. These findings align with Hall and Johnson's (2001) discussion about the intellectual and therapeutic value of these theodicies for persons who possess a theistic worldview that coheres with teachings/doctrines from the Christian scriptures. In addition, given the emphasis on God's intervention or activity in the context of suffering,

these results might also align with suggestions about how one's relationship with God might serve vital attachment functions in times of distress or suffering (for review, see Granqvist & Kirkpatrick, 2013). In particular, these results suggest that the internalization of global beliefs about God's compassion, power/control, and sovereignty might contribute to chaplains' well-being and subjective sense of purpose in working with veterans and their families.

Other bivariate results also indicated that theodicies that emphasize randomness of suffering, unorthodox perspectives about God's role in suffering, or emerge from open theism were each associated with less CS. In addition, when analyzing all of the theodicies in a single model, the unorthodox theodicy emerged as being the most salient correlate of CS, accounting for less purpose/enjoyment in helping veterans. These results should not be interpreted to suggest that chaplains who endorsed these theodicies were functioning more poorly in their occupational role. Rather, besides evidence that chaplains who were experiencing secondary traumatization were more likely to endorse a belief in an encounter theodicy, none of the theodicies assessed in this study were associated with negative dimensions of ProQOL. In general, these findings might instead suggest that chaplains who had constructed theodicies characterized by randomness or the notion of a Higher Power who is not entirely competent and beneficent might be less likely to perceive a divinely-inspired purpose for their work. In keeping with Park's results (this volume), these specific theodicies may also exist within a larger system of global meaning that translates into less optimistic appraisals about one's work and life in general.

Several limitations affect the ability to derive strong conclusions from this study. We have noted the over-representation of individuals from Christian backgrounds and exclusive focus on chaplains in the VHA system. Given the limited training in spirituality among most mental health professionals in the U.S. (Shafranske, & Cummings, 2013), this study provided a

unique opportunity to explore the nature and role of theodicies in ProQOL. However, these results might not generalize to non-Christian groups, clinicians with less sophistication and background in addressing spiritual concerns, or chaplains working in other professional and ministry-related contexts. In addition, all of the measures were assessed simultaneously, such that we cannot draw causal or temporal inferences about associations between theodicies and ProQOL. For example, although positive concurrent relationships emerged between several of the study variables, effect sizes were small to moderate in magnitude and we were unable to examine whether these theodicies might support CS over time and/or possibly even buffer against CF and burnout symptoms. As a related point, we also did not include a measure of psychological distress (e.g., depression) or gather information about how theodicies of patients and provider could be related to treatment efficacy. Addressing these limitations would represent important next steps for research on theodicies.

Researchers and clinicians have begun to expand conceptualizations of trauma to include the possible spiritual dimensions of how survivors respond and recover from their experiences. From a community psychology perspective, these results suggest the importance of developing a trauma-informed culture in churches and other spiritual communities that can appreciate the multi-faceted impact of trauma and possible pathways to supporting resilience. For example, while theologies should not be encouraged on the basis of health outcomes, faith communities can harness resources from their respective teachings/doctrines about suffering and evil to instill adaptive beliefs in members for making meaning of inevitable stressors in their lives. Particularly for mental health and ministry professionals who are engaged in serving trauma-exposed groups, they may benefit from gaining awareness about – and even revising or building upon – their own theodicies. From a clinical standpoint, certain types of theodicies may not only support one's

clientele in responding adaptively to trauma, but also promote cognitive flexibility and better prepare helping professionals themselves for grappling with the distressing existential realities that can emerge from intervening with trauma survivors. In summary, this study highlights: (1) the frequency of several theistically-oriented views of suffering among VHA chaplains and (2) positive contributions to supporting resilience among those individuals who are committed to serving veterans in communities across the U.S.

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Table 1

Descriptive Statistics and Correlations between Theodicies and Professional QOL

	Moderately or Strongly Agree	<i>M</i>	<i>SD</i>	<i>CF</i>	<i>Burnout</i>	<i>CS</i>
Unorthodox	0.0%	1.22	0.58	.04	.09	-.16**
Random	12.8%	2.99	1.27	.00	.04	-.13*
Limited Knowledge	0.0%	1.48	0.80	.00	.10	-.19**
Suffering God	55.1%	4.79	1.25	.03	.00	.11
Providence	6.5%	2.42	1.29	.08	-.09	.13*
Divine Responsibility	24.6%	4.00	1.13	.01	.00	.17**
Encounter	22.2%	3.90	1.22	.15*	.04	.07
Soul-Building	24.7%	3.55	1.50	.04	-.10	.10

Note. “Moderately or Strongly Agree” = average item score of 5 or greater on VOSS subscale; *M* = mean average item score, *SD* = standard deviation of score, QOL = quality of life, *CF* = compassion fatigue, *CS* = compassion satisfaction. Theodicy subscales are average item scores, with possible range of 1 to 6. ****p* < .001, ***p* < .01, **p* < .05