

INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps. Each original is also photographed in one exposure and is included in reduced form at the back of the book.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.

UMI

A Bell & Howell Information Company
300 North Zeeb Road, Ann Arbor MI 48106-1346 USA
313/761-4700 800/521-0600



**FACTORS THAT INFLUENCE AFRICAN AMERICAN CHURCH
GOERS TO SEEK HELP FROM THEIR CHURCHES AS OPPOSED TO
TRADITIONAL SOCIAL SERVICE AGENCIES**

DISSERTATION

**Presented in Partial Fulfillment of the Requirements for
the Degree Doctor of Philosophy in the Graduate
School of The Ohio State University**

By

Tenolian Rodney Bell, Sr., B.A., M.S.W., M.Div.

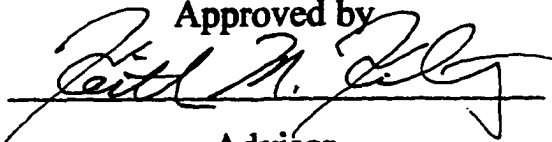
**The Ohio State University
1997**

Dissertation Committee:

Dr. Keith M. Kilty, Advisor

Dr. Virginia E. Richardson

Dr. James N. Upton

Approved by


Advisor

College of Social Work

UMI Number: 9801642

**Copyright 1997 by
Bell, Tenolian Rodney, Sr.**

All rights reserved.

**UMI Microform 9801642
Copyright 1997, by UMI Company. All rights reserved.**

**This microform edition is protected against unauthorized
copying under Title 17, United States Code.**

UMI
300 North Zeeb Road
Ann Arbor, MI 48103

*Copyright by
Tenolian R. Bell, Sr.
1997*

ABSTRACT

This study was designed to examine the factors that influence African American church goers to seek help from the African American church instead of traditional social service agencies. There is a dearth of information in the literature on the help seeking behavior of African American church goers. The participants were 145 members from nine (9) different denominations: Apostolic, Baptist, First Church of God, Holiness, Lutheran, Methodist, Nondenominational, Episcopalian, and Presbyterian. A purposive sampling strategy was used with a cross-sectional survey. All respondents volunteered to participate in this study.

The major findings were that African American church goers seek help at higher rates from their pastors as opposed to other professionals such as psychologist, psychiatrist, and social workers. African American church goers were influenced to seek help from the church on the basis of their confidence in the church, their involvement with the church, and their attitudes toward the church. It was concluded that since African American

church goers would continue to use the church as a primary helping source, social workers should seek to develop working relationships with African American pastors who have the greater influence with their members.

DEDICATION

Giving thanks and praise to God, I dedicate this work to my family,

Janice Lester Bell, Ph.D.,

Tenolian Rodney Bell, Jr., B.S.,

Londia Iver Bell (GingerSnap).

They were and continue to be my inspiration.

ACKNOWLEDGMENTS

I wish to express my deepest appreciation to the multitude of individuals who have tremendously impacted my life. This journey began a long time ago and would not have been completed without the help of friends, school teachers (including elementary and high school), Antioch Baptist Church, and my family.

First, I want to acknowledge my mother, Arvella Josephine Bell, who is my hero. Being a single parent on welfare and having to raise seven (7) sons and two (2) daughters, in the 1960's and 1970's, took a tremendous amount of strength and courage. She was and is my role model for strength and courage. Her goal was twofold: (1) to get her children through school and (2) to have all of her children reach the age of consent. I am deeply grateful for the love and support that she has given me over the years. Surely, had it not been for my mothers love, I would not be here today.

I want to express my warmest and heartfelt thanks to my immediate family, my: wife Dr. Janice Lester Bell, son Tenolian Rodney Bell, Jr., and daughter Londia Iver Bell (a.k.a., GingerSnap). Though working to

complete her own doctoral program, Janice unselfishly gave of herself. Whenever and for whatever reason the family needed her, she was there. Like Janice, Tenolian Jr., and Londia were there when I needed them. They have supported all of my endeavors. They have been there during my frustrations and disappointments, as well as during my triumphs and successes. Londia toiled with some of the typing and Janice made sure that I followed the correct format. Tenolian Jr. inspired me by overcoming obstacles to complete his Baccalaureate Degree. Thank you all for your love, your support, and your patience.

I also wish to acknowledge my dissertation committee, Dr. Virginia L. Richardson and Dr. James N. Upton, under the leadership of my advisor, Dr. Keith M. Kilty. I want to thank Dr. Kilty for his mentor ship, assistance, courage under fire, insight, support, care and concern, encouragement, guidance, preparation, foresight, and inspiration throughout my academic program. From the beginning Dr. Upton, Dr. Richardson, and Dr. Kilty, believed in my abilities and motivated me through the years. As a result, my achievements and accomplishments have been many. Thank you Dr. Richardson, Dr. Upton, and Dr. Kilty.

I also want to acknowledge my siblings in order of birth: Albert James Bell, Gwendolyn Evelyn Bell, Barry (Nadine) Wyatt Bell, Michael Jerome Bell, Keith Kevin Bell, George Lamar Bell, Arvella Yabra Bell, and Percy Delano Bell, whose lives have helped to shape me and are an intricate part of me. Without them my life would be incomplete.

To my in laws, Lectoria Lester, Sr., Carolyn Lester, who gave birth to Janice and my brother Lectoria Lester, Jr., and have been very supported of us physically and spiritually.

To my grandmother, Georgia Grandberry (deceased), who taught me to be a person of principle and ethics. Percy Grandberry, who taught how to work and Walter Mc Daniel, who has been like a grandfather, and has been very supportive and encouraging.

To my grandfather, Albert Bailey (deceased), whose sense of humor helped me to overcome fear at crucial times.

To my father, James Yabra Bell (deceased), who taught me how to be a man.

To my son Anthony Hemphill, my daughters Diane Hemphill and Janine Martin, whose spirits are ever present and linked to mine.

To my undergraduate counselor at Southern Illinois University at Edwardsville, Kay Rogers (Brown), who never quit on me nor would she allow me to quit on myself.

To my father and mother in the ministry, Rev. Dr. William (Margaret) Collins, Jr, whose inspirational preaching, teaching, and friendship changed my life forever.

To Antioch Baptist Church, St. Louis, Missouri, my church home, where I was “called out,” “set apart,” and nurtured in the faith.

To Mt. Zion Baptist Church, Madison, Wisconsin, my first pastorate, and the City of Madison, where I was taught how to pastor under stress. This experience helped to influence this research project.

To my daughter in the ministry, Rev. Muriel L. Johnson and her daughter Aisha, whose love, friendship, and counsel were invaluable during times of stress.

VITA

- December 9, 1949** **Born - St. Louis, Missouri**
- 1974** **B.A. Sociology,
Southern Illinois University,
Edwardsville, Illinois**
- 1974-1976** **Social Worker
St. Louis County Justice
Services, Clayton, Missouri**
- 1976** **M.S.W. Social Work
Washington University,
George Warren Brown,
School of Social Work,
St. Louis, Missouri**
- 1978-1979** **Psychiatric Social Worker
Malcolm Bliss Mental
Health Center,
St. Louis, Missouri**
- 1979-1981** **Social Worker
Missouri Kidney Program
St. Louis, Missouri**
- 1981** **M.Div. Pastoral Theology
Eden Theological Seminary
Webster Groves, Missouri**

1985-1986	Assistant Pastor First Shiloh Missionary Baptist Church, Houston, Texas
1986-1990	Senior Pastor Mt. Zion Baptist Church, Madison, Wisconsin
1987-1990	Co-Founder and Co-Administrator of Project UJIMA, Madison, Wisconsin
1988-1990	Co-Founder/Instructor of Upward Mobility Project, Madison, Wisconsin
1990-1991	Project Coordinator African American Pastors Project, Columbus, Ohio
1992-1993	Graduate Administrative Associate, College of Social Work, The Ohio State University, Columbus, Ohio
1993-1996	Graduate Teaching Associate, College of Social Work, The Ohio State University, Columbus, Ohio

1996 Graduate Administrative
Associate, Office of
Minority Affairs, The Ohio
State University,
Columbus, Ohio

1997 to present Assistant Professor
School of Social Work,
Tulane University,
New Orleans, Louisiana

FIELDS OF STUDY

Major Field: Social Work

Minor Field: Black Studies

Social Work Practice With African Americans

TABLE OF CONTENTS

	<u>Page</u>
Abstract	ii
Dedication	iv
Acknowledgments	v
Vita	ix
List of Tables	xv
Chapters:	
1. Introduction	1
Historical Role of the Church	3
Importance of the Pastor	5
Religion and Spirituality	6
The Problem	9
Purpose of the Study	12
Overview	13
2. Literature Review	15
History of Help-Seeking Models	16
Psychological Help-Seeking Models	18
Comparative Studies of Help-Seeking	22
African American Social Networks	24
Help-Seeking Behavior of African American Subgroups	27
Help-Seeking and African American Elderly	28
African American Help-Seeking and Gender	30
Critique	30
Conceptual Framework	33
Implications for Social Work	39
Basic Research Questions	41
Definitions	41

	Summary	42
3.	Research Methodology	44
	Research Design	45
	Sampling and Study Population	47
	Measurement	58
	Statistical Tests Selected for the Analysis of Data	61
	Summary	62
4.	Results	63
	Use of Services	64
	Who they trust the most	68
	Factor Analysis	71
	Attitudes About Professional Help	71
	Attitudes About Religion	81
	Multiple Regression Analysis	87
	Guidance in Day to Day living	88
	Participation in Counseling	90
5.	Conclusions and Implications for Social Work	92
	Summary	92
	Summary of Methodology	94
	Summary of Major Findings	97
	Demographics	97
	Discussion of Major Findings	101
	Research Question 1	102
	Research Question 2	105
	Research Question 3	113
	Limitations	115
	Conclusions	115
	Implications For Social Work	118
	Future Research	124

Appendices	126
A. Demographic Questionnaire	127
B. Attitudes About Professional Help	135
C. Attitudes About Religion and Cover Letter	145
D. Cover letter	151
 Bibliography	 153

LIST OF TABLES

Table		Page
1	Number of African American Church Goers by Denominational Affiliation	48
2	Gender of African American church Goers	49
3	African American Church Goers by Age	50
4	African American Church Goers by Income	52
5	African American Church Goers Level of Education	54
6	African American Church Goers Employment Status	56
7	African American Church Goers Marital Status	57
8	Types of Services Provided by The African American Church	65
9	African American Church Goers Were Counseled by	68
10	Persons to whom African American Church Goers would Turn In Time of Stress	70
11	Factor Analysis of Attitudes About Professional Help	75

12	Factor Analysis of Attitudes About Religion	82
13	Beta Coefficients for Guidance in Day-to-Day Living	89
14	Beta Coefficients for Participation In Counseling	91

CHAPTER 1

INTRODUCTION

The African American church in America is still the primary unit in the African American community, where African American people come together en masse and share the pains and problems of their human experience. The origin of the African American church is rooted in the shared experience of the African slaves, taken from villages and hamlets, from the west and east coasts of Africa. It was and continues to be a mutual aid society for survival, struggle, meeting basic life sustaining needs, complete with sermons having therapeutic value, (Martin and Martin, 1985). Both African American people and the African American church survived the trauma of slavery, with both still in critical condition, feeling the after shocks of the slave experience.

According to Roberts (1980) the African American Church has historically had two primary functions, one priestly, the other prophetic. In

its priestly role, the African American Church tended to the spiritual needs and the souls of African Americans. In its prophetic role, the church tended to the physical, economic, political, legal, social, and emotional needs of African Americans, with a primary concern for food, housing, education, and employment. Smith (1993), Hill (1990), and Wingfield (1988) agrees with Roberts (1980) in suggesting that the African American Church functions to assist African Americans with meeting basic needs.

Within this context, the family sees the church as another family member (extended) with the pastor viewed as a significant figure in the life of the family. Both the African American family and the African American church is concerned about the continued survival of the other. The relationship between the family and the church has been one of interdependence. With both recognizing that the one could not survive without the other. For African American people, the African American church is where individuality, personhood, and partnering, could all be approached from a biblical, historical, and cultural perspective (Felder, 1989). The African American church has historically been a place of refuge from the slave masters' distorted views of Christianity and has provided an

outlet for African American people to seek help without experiencing degradation and condemnation (Smith, 1993; Hill, 1990; Wingfield, 1988; and Martin and Martin, 1985).

Historical Role of the Church

In spite of the massive problems (economic, cultural, and social) that African Americans face, they have managed to survive largely through the way in which they have drawn on the church for both inspiration and for resources. Given the historical role that the church has played in the lives of African Americans, religion and religious activities have been a special focal point for African Americans in general and elderly African Americans in particular (Dubois, 1903; Taylor, 1993; Genovese, 1972; Lincoln and Mamiya, 1990; Woodson, 1933; Blassingame, 1972). Taylor (1993) found that 9 out of 10 African American elderly reported that attending religious services is very important to them with more than half reporting that it helps their emotional well-being and promotes a personal sense of spirituality. The African American church emerged as such a force in the life of African American people because it filled a real need.

Since the days of slavery, every aspect of African American life has been significantly impacted by the church. The theology of the African American church itself was appropriated from the bondage of the Hebrew children in Egypt (Cone, 1975; Roberts, 1980). Having been born in bondage placed the African American church in the unique position of being responsive to issues of oppression and racism. For the families that were torn and divided by slavery, the African American church became the central place of nurturing, socialization, and emotional development. The church is one of the few institutions within the African American community that was built, financed, owned and controlled by African Americans. In communities all over the United States, African Americans come together on a regular basis to worship, pray and socialize with other African Americans. For most, the African American church is the one constant, the one safe haven in an unpredictable world.

The African American church has historically provided and continues to provide access to a community of people on a regular basis. It continues to be the center of community life, attending to the educational, political, social, spiritual, economic, emotional and material needs of its people (Taylor, et al., 1987; Richardson, 1991; Boyd-Franklin, 1989). African

American people and the African American church have drawn on each other for that support and nurture. A shared sense of suffering has been the common ground out of which African American people and the African American church have developed (Thomas, 1976; Martin and Martin, 1985; Lincoln and Mamiya, 1990; Roberts, 1980).

Importance of the Pastor

Some writers indicate (Felder, 1989; Roberts, 1980; Lincoln and Mamiya, 1990), and studies show, (Taylor and Chatters, 1986; Taylor and Chatters, 1988;) that the African American church and the African American pastor are still the ones to whom African American people first turn when seeking help. These studies indicate that mainstream social service and medical institutions have not been sensitive nor appropriately responsive to the needs of African American people. African Americans who do access the system are met with institutional racism and therefore inadequate care (Edmonds, 1993; Guthrie, 1976; Hothersall, 1984).

Viewing traditional social services as a threat to identity and culture has resulted in African American people choosing not to use these services but rather to seek help from family and church. The church in general and

the African American pastor in particular is seen as someone trustworthy, not posing a threat to culture and identity. According to Wimberly (1989), the African American pastor and the African American church, have a critical message of hope for those who are lost, as well as a message of more abundant living for those who are Christians. Wimberly believes that both the messages of hope and of more abundant living must be conveyed in the counseling session.

Religion and Spirituality

The significance of religion and religious institutions in the lives of African Americans cannot be over stressed. Research shows that, for African Americans, the centrality of religion is reflected in such things as church attendance, confidence in the pastor, and participation in other religious activities (Glenn and Gotard, 1977; Taylor, 1985). However, Taylor, et al, (1987) noted that the majority of quantitative research is limited to examining racial comparisons and not the exclusive religious experience of African Americans, especially research on human services. "Training in the mental health fields largely ignores the role of spirituality and religious beliefs in the development of the psyche and its impact on

family life. In the treatment of Black families, this oversight is a serious one" (Boyd-Franklin, 1989, p. 78). In assessing the strengths and coping skills of African Americans, it is important for traditional social service institutions to be aware of the significance of and be sensitive to the role that spirituality and religion play in the lives of many African Americans.

Another issue impacting religion and spirituality is self-image. Self-image has also been and is a real problem for many African American people; spending centuries being considered and treated as property rather than persons has had a dramatic effect on the emotional and spiritual well-being of many (June, 1986; Martin and Martin, 1985). Unlike traditional social service institutions the, " . . . African American church is in a unique position to bolster the self-esteem of its members " (Richardson, 1991). Taylor (1993) asserts that religion may be crucial in enhancing feelings of self-regard, such as self-esteem, and in reducing negative states that arise from stress. With reference to issues of personal spirituality, June and Taylor's research indicates that religion provides a framework for behavior in the form of moral teachings and guidelines, and further, assists African Americans in understanding and deepening of religious faith. To know that blackness does not separate persons from the image of God is an important

step in the development of a healthy self-image as well as healthy relationships. Because African American people have few options in times of emotional need except the African American church, the church must be open to receive them (Roberts, 1980; Wimberly, 1991), and the pastor must be competent to provide counseling in areas of human predicaments, as noted by Adams (1970) and Wimberly (1991). It is for these reasons that the African American church is viewed by African American people, as being the only viable institution of human services and spiritual wholeness (Roberts, 1980; Smith, 1985).

Wimberly (1979,1982,1991) has written extensively in the area of pastoral care and counseling in the African American church community. In his writings, he has documented the importance of pastoral counseling in the African American church community and has called for African American pastors to be better trained in the methods of pastoral care and counseling. The reason for this is that many African Americans seek help for a myriad of problems and challenges and the services provided by the church are viewed as safe and nurturing. Assisting in coping with stressful life events has been one of the functions of the African American Church (Neighbors et al., 1982; Smith, 1985; Wimberly, 1991).

The Problem

Morrison (1991), suggests that there has been a general rejection of the African American church by traditional social service institutions. Morrison's research shows that the African American pastor and African American church are not viewed as viable providers of services by the social service community. At the same time, his research shows that African American people, by and large, seek help from African American churches and African American pastors instead of traditional social service agencies. Unlike service providers such as Catholic, Jewish, and Lutheran social services who often have the blessing of their denominational leaders and whose funding may come from their denomination or more traditional funding sources, such as the government or United Way, African American churches by and large self support their efforts. Thus, traditional social service providers appear to approach service provision as an unusual role for the African American church. This poses a major problem especially as it relates to African Americans. The unique and important role of the African American church as a primary helping institution has been grossly overlooked.

Edmonds (1993) posits that African Americans spend less on health care, receive less preventive care, and are more dependent on self-diagnosis and self-treatment. As a result of this they suffer more illnesses and die earlier than their white counterparts. Fear of hospitals, lack of finances, child care problems, fear of doctors experimenting on them and fear of death are some of the reasons given for not seeking help from traditional social service and medical institutions.

Extensive research has been done addressing the fact that African Americans do not utilize traditional social services in great numbers. In fact these same studies indicate that African Americans will utilize informal services before the formal (Neighbors and Jackson, 1984; Morrison, 1991; Neighbors, Jackson, Broman, and Gurin, 1983; Taylor and Chatters, 1986; Richardson, 1992; Jackson, Chatters, and Taylor, 1993).

According to Taylor and Chatters (1986) very little quantitative research focuses specifically on the use of traditional social services by African American people. Not many studies explore why African American

people do not use traditional social services. Also very little research, using a help-seeking approach, has focused on the utilization of services by African American people.

While historical and present-day evidence suggests that African American churches are extensively involved in the provision of support to their members, Taylor (1993), is surprised that this issue has received little systematic attention and scrutiny. It is surprising that very few studies have been done on the utilization of the services of the African American church. Billingsley (1992), in a national study of church run community outreach programs, reported that many African American churches are providing services in the areas of senior citizen housing, counseling programs, residential treatment centers for girls and boys, drug addiction programs, HIV counseling, schools, senior citizens community centers, multi-service centers, homecare, commercial properties, parenting programs, after-school tutorial programs, adult education, food distribution, and prison ministry. Given the broad range of and level of responsibility for services African American churches have, traditional social service institutions still view the church as an informal institution.

Purpose of the Study

The purpose of this study was to contribute to the body of literature exploring the help-seeking behavior among African American church goers. This research was concerned with the factors that influence the help seeking behavior of African American church goers. Specifically this research:

- 1) explored whether African American church goers seek help from the church more than they do traditional social service agencies;**
- 2) determined those factors that influence African American church goers to seek help from African American churches as opposed to traditional social services;**
- 3) identified particular demographic variables (such as gender, age, or education level) that are likely to affect seeking help from the church, or whether all groups of African American church goers are equally prone to seek such help.**

This research provides new knowledge as to why African American people prefer to seek help from their churches and why they prefer not to seek help from traditional social service institutions. It is also important in determining the linkages which need to be developed between traditional social service agencies and African American churches which have and will

continue to provide important services to the African American community. These new linkages may provide important referral options not only to African American churches but to traditional social service agencies as well.

Overview

Current literature which examines help seeking services generally among institutions does not give much attention to services provided by the African American church. There is a gap in social work literature as to what is known about the services provided by the African American church. Traditional social services systems have often viewed the African American church as an informal institution. The problem here is that there is not enough available knowledge, in social work literature, about the unique role of the African American church as the primary helping institution in the African American community. Despite the magnitude of its influence, there is little systematic study of the African American church's role(s) in social work literature. Not many studies have been done on the African American church as a formal and viable support system. Traditional social service

systems have been antagonistic toward the African American church and have ignored the services the church has historically and currently provides (Morrison, 1991).

The current literature which examines help seeking generally and African American church goers specifically does not give much attention to the factors that influence their help-seeking behavior. Without understanding the help seeking behavior of African American church goers, the profession of social work will be unable to (1) gain an understanding of the problem identification and solution processes for African American church goers, (2) identify the differences between the African American church and traditional social services in meeting the needs of African American church goers, (3) promote suitable and useful discussion and linkages with the African American church and African American people.

For too long African American people have allowed external institutions and particularly traditional social service institutions to define their problems; to prioritize their problems; to determine their needs; and to develop and implement solutions. Evidence suggests that consideration must be given to the efforts of the African American church in addressing these issues (Wimberly, 1979).

CHAPTER 2

LITERATURE REVIEW

The purpose of this chapter was to examine the literature relative to research on help seeking and the relevance of help seeking to social work practice with African Americans. This chapter was also concerned with pathways people follow to seeking professional help. The following sections will review help seeking literature relative to several critical areas: (1) History of help seeking models, (2) Psychological help seeking models, (3) Comparative studies of help seeking, (4) African American social networks, (5) Help seeking behavior of African American subgroups, (6) Help seeking and African American elderly, (7) African American help seeking and gender, (8) Critique of literature, (9) Conceptual framework, (10) Implications for social work, (11) Basic research questions, (12) Definitions, and (13) Summary.

The final purpose of this chapter was to begin to lay the foundation for social work professionals to acknowledge that the African American Church, whose influence over millions of African Americans, plays a major role in the help seeking behavior of its membership.

History of Help Seeking Models

The focus of research on help seeking models relative to psychotherapy has been around for approximately forty years. Kadushin (1958-1959) appears to have developed the first help seeking model and laid the foundation for knowledge building on the stages of help seeking. In this study, Kadushin wanted to discover why one hundred and ten clients of a psychiatric clinic decided to seek psychotherapy. Kadushin found that many decided that their mode of living was inadequate and that they had neither the resources nor the ability to correct the pattern of their lives without some outside help. Therefore, they decided to seek help. With this study, Kadushin developed a model that was the dye cast for all help seeking models to follow. To study this question, Kadushin used an accounting-scheme technique that consisted of five stages. Kadushin believes there are

several steps to this important decision. The individual must: (1) feel that a serious problem exists, (2) decide how to cope with it, and (3) choose a therapist.

The decision to seek psychotherapy, according to Kadushin (1958-59), is a decision made in depth. Depth decisions are not a unitary process but are composed of a number of steps or stages which Kadushin refers to as smaller decisions. He developed a five stage heuristic model to be used as a working hypothesis of the stages in the decision to seek psychotherapy. The steps to this linear sequential model are: (1) deciding there is a problem and that it is an emotional problem, (2) deciding whether or not to involve the immediate social environment, that is, whether to discuss the problem with relatives and friends, (3) deciding that present efforts in dealing with the problem are inadequate and that professional help must be called in, (4) deciding on which institutional sphere or profession can appropriately help with emotional problems, and (5) deciding on a particular practitioner. Kadushin believes an individual must go through all five steps in sequential order.

In 1969, Kadushin wrote a book titled "Why People Go To Psychiatrists". In the book he identifies and defines three types of

psychiatric clinics. According to Kadushin, the analytic clinic is concerned with training new psychoanalysts, the religio-psychiatric clinic trains ministers, and the hospital psychiatric clinic offers outpatient services connected to the hospital. While Kadushin's 1958-1959 research was mainly devoted to why people decide to seek-help, this book focused on how people decided which agency to go to. Kadushin believes that the decision to go to a an agency is composed of four steps: (1) realization of a problem, (2) discussions of problems with laymen, (3) choosing the type of helping profession, and (4) choosing a particular clinic. This is not a linear sequential model, although Kadushin points out that the type of clinic and the type of client are important in all stages. Others, who have since developed their own models, used and/or expanded on Kadushin's 1958-1959 model.

Psychological Help Seeking Models

In a three stage model, Gurin, Veroff, and Feld (1960) developed a model that was also based on the decision to seek help. The Gurin et. al. model was based on what was called decision points (similar to Kadushin's, (1958-1959) stages). They hypothesized that demographic characteristics

(such as age, sex, religion, income, etc.), strongly reflecting psychological factors and facilitating factors (such as availability of resources, knowledge of resources, and social support) would impact each decision point.

The Gurin et. al. model was a systematic analysis of the relevance of psychological and facilitating factors in explaining relationships between demographic characteristics and help seeking and viewed help seeking as a three stage process. Their linear sequential stages (or decision points) are: (1) deciding whether or not a problem will be defined as a mental health problem, (2) deciding whether or not to go for help with the problem, and (3) deciding where to go for help.

Albers and Scrivner (1977) wrote an article in which they were concerned with "The Structure of Attrition During Appraisal." They defined "appraisal" as, the process beginning with problem definition or stress, and some form of help seeking, and ending with the initial contact with a clinic. They defined "attrition" as, the termination of the process of appraisal at any point.

Albers and Scrivner developed what is called a five stage help seeking model of appraisal and argue that attrition can occur at any point during the process. Their linear sequential stages are: (1) recognition that a problem

exists, (2) a decision that the problem is a psychological (psychiatric or emotional) problem, (3) a decision that outside help is needed to solve the problem, (4) choice of an institutional sphere or profession for outside help, and (5) choice of a particular person or clinic.

The Gross and McMullen (1982, 1983) model, was a three stage psychological help seeking model. This model was similar to the obverse of the Darley and Latane (1970) help-giving model. The Darley and Latane model is a help-giving model that requires a person to answer yes to three questions. They are: (1) does the victim have a problem that my help will allay? (2) am I responsible for helping? (3) am I competent to successfully give aid?

The Gross and McMullen model, which is a linear sequential model, has three stages: (1) perceiving a problem, (2) deciding to seek help, and (3) operationalizing strategies.

Fischer, Winer and Abramowitz (1983) developed a five stage psychological help seeking model which represents a synthesis of help-seeking strategies found in Albers and Scrivner (1977), Gross and McMullen (1982, 1983), Kadushin (1958), and Rosenstock (1969).

The stages of this linear sequential model are: (1) perception and identification of a problem, (2) contemplating ways of helping oneself, (3) decision to seek (or accept) help, (4) precipitating event, and (5) overt help-seeking behavior.

Sussman, Robins and Earls (1987) proposed a six stage sequential help seeking model. They argue that the help-seeking process is initiated by experiencing unusual or distressing signs or symptoms and is completed by seeking treatment for those complaints. The six stages are: (1) experience particular feelings or sensations, exhibit certain behaviors, (2) perceive these as unusual and troublesome, (3) interpret them--e.g. temporary responses to stress, interpersonal problems, 'symptoms' of a 'medical' problem, (4) decide whether or not to seek help and from whom, (5) receive care, (6) evaluate results.

Wills and DePaulo (1991) suggest that help seeking is a pyramidal process. Their linear sequential model has three steps. They believe the process to be pyramidal in that: On the first level, relatively minor problems and worries are dealt with through emotional and cognitive support from family and friends, on the second level, more persistent problems are taken

to first-line helping agents such as clergy and general medical practitioners, and on the third level, serious problems are referred to appropriate specialists.

In summary, the stages of psychological help seeking range from three to six. The original model of psychological help seeking by Kadushin was expanded upon by some and synthesized by others. In the next section, research comparing the help seeking behavior of African Americans and White Americans is reviewed.

Comparative Studies of Help Seeking

Differences between race, class, and socio-cultural characteristics have been shown to impact help seeking behavior. There have been a number of comparative studies to determine whether there are distinctions between African Americans and White Americans in their tendencies to seek treatment. Some of those studies are briefly reviewed in this section.

Brown (1978) points out that, help seeking has been studied from several perspectives (Gottlieb, 1976; McKinlay, 1972). The creators of psychological help seeking models posit that help seeking is individual and is also linear sequential. It is individual in that it focuses on the person

identified as the patient. It is linear sequential in that the individual must go through each step. Investigators have been concerned with simply charting the availability of helpers, noting how availability varies by age or gender, by the perceived intimacy of the relationship, or by problem-oriented factors such as the type or degree of help required (Riley and Foner, 1968; Wellman, 1973).

In an article written with the expressed purpose of reviewing the literature, Nancy Gourash (1978) defined help seeking as any communication about a problem or troublesome event which is directed toward obtaining support, advice or assistance in times of distress (Hendricks, Howard, and Caesar, 1981; Hendricks, Howard, and Gary, 1981 also used this definition). To understand help seeking it is essential to know the characteristics and problems of those who seek various types of assistance. The literature shows that epidemiological studies established that the majority of people who report experiencing troublesome life events do seek help for their problems. The literature showed that the key factors that differentiate those who seek help from those who do not seek help are age and race. Help seeking declined consistently with age and is more prevalent among whites than African Americans (Rosenblatt and Mayer, 1972;

Jackson et al., 1993). However, Broman (1987) reports that his findings indicated that African Americans were more likely than whites to seek help. The differences may be perhaps who was sought out. Research by Billingsley (1992), Richardson (1992), Morrison (1991), and Lincoln (1990), found that African Americans were more likely to use informal support systems. The use of informal support systems will be discussed in the next section.

African American Social Networks

The literature also reported that people who seek help are usually looking for comfort, reassurance, and advice. They tend initially to turn to family and friends and use professional service organizations as last resorts (Booth and Babchuk, 1972; Croog, Lipson, and Levine, 1972; Jackson et al., 1993). The Jackson et al. (1993) research also indicates that African American women have more informal social group networks and use them more often. The sole use of professional services occurs much less frequently, than either exclusive reliance on family and friends or help-seeking from both social network and professional sources (Rosenblatt and Mayer, 1972; Jackson et al., 1993).

It was also reported that although people who seek help within the social network appear to represent a cross-section of the general population, those who eventually go to traditional social service agencies are readily identified by a common core of characteristics. Investigators of mental health, social service, and self help groups found repeatedly, that users tend to be young, white, educated, middle-class, and female (Rosenblatt and Mayer, 1972; Sue, McKinney, Allen, and Hall, 1974; Katz and Bender, 1976; Broman, 1987; Jackson et. al., 1993). In studies done between 1975 and 1977, social class appeared to no longer differentiate between those who did not use professional service (Gourash, 1978). It should be pointed out that beyond Jackson et. al. (1993) there is a lack of recent research on this issue.

In studies of people experiencing emotional stress, education and income were not found to correlate with the use of mental health facilities (Kulka, Veroff, and Douvan, 1979). It was suggested that the success of efforts to link public services and lower class consumers accounted for the lack of association between socioeconomic variables and help seeking behavior. The literature indicates that no one type of problem invariably precipitated the search for assistance, but there appeared to be some common

linkages between certain types of problems and availability of resources.

The social network is the primary resource for general worries and unhappiness, with spouse the focal helper for worries and friends the major resource of unhappy emotions.

Taylor (1986) found that among African Americans, income and education were significantly related to the frequency of help and the closer a person lives to relatives, the more contact he or she has with family, the more help he or she receives. Support from family was more frequent among those with fewer years of education and those with lower income.

Family, friends and neighbors are the predominant source of aid in a family crises. Within the middle class and working class, the social network is a major provider of economic assistance (Rosenblatt and Mayer, 1972).

Professional help is sought for problems ranging from severe emotional distress to discrete strains suffered under the stress of work or family roles; strains which frequently arise from problems with network members (Lurie, 1974).

A further review of the literature indicates that very little research has been done concerning the factors that influence African American help

seeking behavior. The literature does, however, show that African Americans are more likely to seek help from informal systems rather than formal systems (Taylor and Chatters, 1986).

Help Seeking Behavior of African American Subgroups

There is a small literature base on the help seeking behavior of African American subgroups. Spence and Atherton (1991) in a study on African American elderly found that while utilization of community-based social services was low, it was influenced by living arrangements, income, source of income, and informal network aid.

Similar studies by Neighbors and Jackson (1984); Neighbors, Jackson, Bowman, and Gurin (1983); Hendricks, Howard and Gary (1981); Hendricks, Howard and Ceasar (1981) and Gruber (1980) found low utilization of social services by African American males. In fact, in the Hendricks, et al., (1981) study, when ninety-five African American unwed fathers were asked who would they go to for help when they had a problem, 88% said family, 11% said friends, and only 1% said social service agency. The informal social network was found to be used quite extensively as a

means of coping with problems in the Neighbors, Jackson, Bowman, and Gurin (1983); Neighbors and Jackson (1984); Neighbors and Taylor (1985); Taylor and Chatters (1986); and Morrison (1991) studies.

Help Seeking And African American Elderly

Richardson (1992) studied the use of services by African American elderly and the factors associated with that use. A cross-sectional survey was used with multiple measures to examine service use. The 186 participants and care-givers were located through a purposive and snowball sampling strategy. The data were collected by trained interviewers. The results indicate that: (1) many of the elderly were not familiar with available services, (2) the services used most often were churches, public transportation and medical services, (3) while they were satisfied with services received in general, persons who had used senior information and referral services were also the least satisfied with them. None of the participants mentioned using a social worker.

Chatters, Taylor, and Jackson (1985) investigated the informal support networks of older African Americans. They focused on the relationship of a group of sociodemographic, health, family and availability factors to the size

and composition of the informal support network. They used data from NSBA. The sample selected for this study totaled 581 respondents who were 55 years of age and over. The results indicated that while most respondents had frequent contact with non-household family members, most felt that their relatives were the only persons they could count on when they needed help. The data showed that older men had smaller helper networks than older women.

In another study done a year later, Chatters, Taylor, and Jackson (1986), using the same respondents, examined the impact of sociodemographic, health and family factors on African American elderly adults' specific nominations to an informal helper network. The results indicated that the respondents nominated in order of frequency to the helper network were daughter, son and spouse. Parents were nominated the least as a part of the helper network with friends scoring not much higher than the parents.

African American Help Seeking and Gender

In an effort to study gender differences, Neighbors and Howard (1987) provided baseline data on gender differences in help seeking among African American adults. They used the data from the National Survey of Black Americans to analyze gender differences in professional help seeking behavior. The conceptual framework used for this study was a three stage help seeking process similar to Gurin, et al., 1960; and Gross and McMullin, 1982. The results indicated that men were less likely to seek professional help than women. They were also less likely to utilize physicians and social service agencies. Also African Americans with low incomes use social service more frequently than any other sociodemographic group.

Critique

In summary, this review found that previous literature practically ignores two critical issues: (1) the factors that influence help seeking behavior among African Americans in general, (2) very little research has been done concerning the factors that influence African American help seeking behavior as it relates to religion, spirituality and thus, the African American church (Neighbors and Taylor, 1985). The literature does

however, appear to be preoccupied with race comparisons and does not include the kinds of variables that would be helpful in explaining the heterogeneity of illness behavior within the African American population (Burgest, 1989). The literature does show that African Americans are more likely to seek help from family, friends, or the church and less likely to seek help from traditional social service agencies. But little has been done to examine the relationship between the African American church and its role in providing social services to its members and the African American community.

Billingsley and Caldwell (1991) forcefully assert that the African American church holds the allegiance of many African Americans and exerts great influence over their behavior, serving many different functions. They go on to say that the African American family is a strong and functional institution, sustained by a strong religious orientation, flexibility of family roles, and a strong achievement orientation. Social work practitioners need to understand that within the African American community there is a trust of clergy, family, friends and others who are African American.

As stated previously, the literature ignores the factors that influence help seeking behavior among African Americans as it relates to the church.

A number of studies have been done on service utilization, gender differences, and informal systems (with the church being placed in this category). However, little has been done to examine the relationship between the African American church and its role in providing social services to its members and the African American community.

Taylor (1986a) and Richardson (1992) found that the African American elderly exhibit a high degree of religious involvement; religion and church were found to be very important. Taylor (1993) reports that comparative analyses of religious participation, racial differences in social participation, and attitudes of African Americans and whites, show that elderly African Americans report participating in religious activities more frequently than elderly whites and are more likely to attend religious services, pray regularly, listen to religious programs, and read the bible.

In the Morrison (1991) study it was found that African American elderly utilized the services of the African American church at higher rates than they utilized traditional social service agencies. The factors reported to influence service provision of African American churches were denominational and size differences. Neighbors et. al. (1983) found that prayer was an extremely important coping response used by African

Americans. There is a lack of knowledge about help seeking behavior as it relates to the African American church, the factors that influence such behavior and how the church functions as a help giver.

Conceptual Framework

The framework for this research was based on the Help Seeking behavioral model used by James Green (1982) which deals directly with what much previous theory and research has ignored, based on the preceding literature review. The Green model resembles a person-in-environment approach, which is based on ecological systems theory. The person-in-environment approach is not only concerned with the effect the individual has on the environment but how the environment affects the individual. It sees the individual as part of an interrelated system with each part affecting the whole of the system. The individual and environment are a whole in which each part is interrelated to all other parts and each element is both cause and effect. That is, the focus is on people constantly interacting with the various systems around them. Because people are directly involved with family, friends, work, social services, politics, religion, goods and services, and educational institutions, this model is directed at improving the

interactions between the person and these various systems (Kirst-Ashman and Hull, 1993). For Green (1982), the experience of a problem or crisis is personal in that it disrupts the daily routines of individuals by creating discomfort and pain. Green argues that problem identification is social and cultural in that the labeling of the experience often requires confirmation and involvement from others before corrective action can be taken.

The four major components of this help seeking behavior model concerns itself with the client's culture and how the environment and culture impact on each other. As posited by Green (1982), those components include several issues. First, is the client's recognition of an experience as a "problem." Green (1982) argues that the cultural distinctions of the client play an important role in how problems are experienced and defined. In any culture clients provide a list of explanations for problems that are more or less shared by members of the culture. The members of the culture organize and act on the information concerning a problem and the conception of the problem is brought by the client to the therapist.

Given this cultural ethos and the ability of clients to articulate and share on the basis of conceptions distinctive to their cultural background, the social worker's own perception and appreciation of that fact is critical in

formulating a culturally informed response to the client's difficulties. A peoples "world view" (particularly the African American world view); which shapes their outlook on life; which distinguishes them from all others, will include culturally distinctive notions of the self, of others, and of classification and relationship. In sum, Green believes that to understand others one must first understand something of the distinctiveness of their perceptions of the world, its operations, and their places in it.

The second component is, the client's use of language to label and categorize a problem. Green (1982) argues that a significant part of what is known in any society is linguistically labeled and communicated in speech. He further suggests that it is critical to identify linguistic labels and explore their meaning to members of the culture in order to understand some significant portion of the world as members of a specific culture view it.

Semantics is an important part of language in any culture. Green (1982) suggests that words can often have two meanings. The "referential meaning" of a word is its dictionary definition. This definition is used when precision is wanted. The "social meaning" of a word refers to the community of speakers who use a particular semantic label, the occasions on which they use it, and their sense of appropriateness in its utilization. This

idea of appropriateness has to do with subtle shades of meaning and the fact that only persons thoroughly familiar with the culture will understand and appreciate those meanings when they are heard.

The third component is, the availability of indigenous helping resources in client communities and the decision-making involved in the utilization of those resources. Green (1982) argues that in all cultures there is a vast range of help seeking activities. The individuals support network includes persons who provide informational consultations which guides activities for lay interpretations of problems. For example, the active use of religion in the treatment of illness is distinctive to the help seeking behavior of many African Americans. White Americans, according to Green (1982), rely on television commercials and the media as sources of guidance when seeking help. Professionals, Green (1982) argues, may be the last and the least consulted by African Americans.

Well trained professionals are seen as a threat to indigenous strategies of problem identification and prevention. Historically, social service agencies were developed to meet the needs of European immigrants, argues Green (1982), while the African American church sought to address the

problems of African Americans. As a result African Americans developed their own sources for help and for specialized advice on personal concerns.

Finally, client oriented criteria for determining that a satisfactory resolution has been achieved. Here Green (1982) argues that cultural differences contribute to failures in communication and misunderstanding of intent. Green (1982) believes that well trained social workers have traditionally responded to minority clients in one of two ways, neither of which is useful in enhancing the worker's sense of cultural awareness. One response is to "individualize the client" when determining diagnosis and treatment. In Green's view, this response ultimately strips the individual of his or her support systems and identity by ignoring the greater part of that individuals biography.

The other response, according to Green, is to blame the clients culture for behavior, problems, and styles of self-presentation that cannot be accounted for in any other way. Superficial, stereotypic judgments are made about clients to explain cultural differences therefore providing "reasons" for client behavior. Green (1982) believes knowledge of cultural variations with an understanding of the clients framework of understanding will lead to a cultural intervention style that can lead to effectively meeting treatment

goals. This model, which gives full consideration to social and cultural differences, was used to explore and describe the factors that influence African American church goers to seek help from their churches as opposed to traditional social work agencies.

While it would be good to investigate all components of the this model, the second component, "the client's use of language to label and categorize a problem", will be difficult to measure. Although this is a significant issue, the type of research design needed to study this question would not lend itself to this study. Because of the constraints of the type of methodology used for this study, which is survey, the second component would be better investigated by another approach.

The components of this model investigated were: (1) the client's recognition of an experience as a "problem", (2) the availability of indigenous helping resources in client communities and the decision-making involved in the utilization of those resources, (3) client oriented criteria for determining how a satisfactory resolution can be achieved. These components were investigated for three reasons; first, the cultural distinctions of the participants played an important role in how problems were experienced and defined. Second, to determine the availability of the

African American church as a helping resource and the decision-making involved in the utilization of those resources. Third, to determine how a satisfactory resolution can be achieved using participant oriented criteria.

Implications for Social Work

Roberts (1980), Smith (1993), Felder (1993), Lincoln and Mamiya, (1990), Wimberly (1979, 1982, 1991), and Billingsley (1992) have firmly established the reasons why the African American church should be considered a major institution for providing services to African Americans. Unlike traditional social service institutions, which are often associated with oppression and racism, the African American church offers a supportive and familiar environment rooted in religion and spirituality.

A relationship between social work and the African American church would be unique. The uniqueness of the relationship between social work and the African American church would also be significant. Its uniqueness is found in that social work, in part, is designed to assist in the provision of certain services to this under served and under represented population. Its uniqueness is also found in that African American churches have access to and some influence over much of the African American population. The two

African American National and Progressive Baptist organizations alone boast of memberships of approximately 15 million. This number does not include the other African American denominational affiliations of which there are many. More accurate figures are not obtainable since many African American churches do not make their statistics available. The researchers ability to compile exact figures is complicated by two facts: (1) there are pastors who serve small congregations on a part time basis. (2) there are a variety of congregations which are not related to any major denomination and who do not keep statistics.

The significance grows out of a need for a closer working relationship between social work and the African American church. The relevance of this is to improve acceptability and accessibility of services in the African American community through direct referral and consultation between churches and social work practitioners.

To ignore religion and spirituality is to deligitimize African American culture and tradition. Social workers could benefit from knowing that, in times of stress, many African Americans frame issues in religious terms (Boyd-Franklin, 1989). By establishing a relationship with the church social workers should feel comfortable consulting with the pastor. Pastors and

church can be a valuable asset in the provision of services, particularly if the pastor had been previously engaged in the pastoral counselor role.

Basic Research Questions

This study seeks to address the following research questions:

- (1) Are African American church goers more likely to seek help from the church than they are from traditional social service institutions?
- (2) What factors are more likely to influence African American church goers to seek help from African American churches as opposed to traditional social services?
- (3) Are particular demographic groups more likely to seek help from the church, or, are all groups of African American church goers equally prone to seek such help?

Definitions

African American Church- Place of worship for the physical and emotional development of people of African American descent.

African American Pastor- Person of African American descent who has been called by an African American church to provide it with spiritual and administrative leadership.

Traditional Health and Social Service Institutions (Agencies)- Health and social service agencies under the charge of White Americans for the purpose of providing services to all people.

African American Church Goer- Person of African American descent who is a member of an African American church.

Help Seeking- any communication about a problem or troublesome event which is directed toward obtaining support, advice or assistance in times of distress.

Summary

This study examined the African American church as a major support system by looking at a representative group of African American church members in a major Midwestern American city. This study fills a void in the social work literature by using Greens' (1982) help seeking framework. The purpose of this study was to examine why African American church goers choose to seek help from African American churches as opposed to

traditional social service systems. Those factors that influence the help seeking behavior of African American church goers will be sought out. Help seeking studies that operate primarily from a demographic perspective, do not include the kinds of variables that would be helpful in explaining, what it is about the African American church in general and the African American pastor in particular, that makes their services meaningful and more accessible to African American church goers, or in clarifying the characteristics of traditional social service systems that impede access to professional help. The purpose of this study was to seek out those factors that influence the help seeking behavior of African American church goers.

CHAPTER 3

RESEARCH METHODOLOGY

The focus of this research was to: 1) explore whether African American church goers seek help from the church more than they do traditional social service agencies, 2) determine those factors that influence African American church goers to seek help from African American churches as opposed to traditional social services, 3) find if particular demographic variables (such as gender, age, or education level) are more likely to be related to seeking help from the church, or if all groups of African American church goers are equally prone to seek such help.

This research is an exploratory/developmental study of the factors that influence African American church goers to seek help from African American churches as opposed to traditional social service agencies. This research is designed to study factors that influence help seeking behavior by taking a cross section of African American church goers and analyzing that

cross section carefully (Babbie, 1992). Therefore, a cross-sectional survey design was used to collect data from various African American churches. This new knowledge will help to explain why researchers have found that most African American church goers do not utilize traditional services in large numbers.

The following sections will provide an overview of the characteristics of the sampling and study population, measurement, research design, and a summary of statistical tests selected for the analysis of the data.

Research Design

Because of the exploratory/developmental nature of this study, a help seeking framework seemed appropriate to identify the factors and generate hypotheses for further testing through other studies. The end product is a description of culture (Greens, 1982 help seeking model), in this case, the culture of the African American church as it relates to service provision to African American church goers. It was crucial to the study to have the pastors' endorsement because of the power and authority afforded to African American pastors' by their church members. The purpose of the study was personally explained to the pastors' by this researcher at their regular

ministerial alliance meetings. Then, upon request, this researcher met individually with those pastors' who were interested in having their churches participate in the study. The purpose of the research and the procedure of data collection was explained to the pastors.

Pastors' were asked to allow this researcher to explain the purpose of the study to their congregations and organized groups in the church. Participants were insured of confidentiality and anonymity in a written explanation of the purpose of the research. Pastors' were also asked to publicize the study in their church bulletins and newsletters. The participants were then asked to either retrieve a packet from the researcher after church or meeting and return the packet to the church secretary within a week. Those participants who volunteered were asked to complete the enclosed questionnaire. Two hundred packets were distributed to thirteen churches representing nine denominations. The research goal was to get 100 completed questionnaires, and 145 were actually collected, exceeding the goal. As a social worker, minister and former pastor the researcher

benefitted from greater credibility with, and trust of the pastors and participants. The researcher was not confronted with resistance from participating churches.

Sampling and Study Population

Since it was not possible to use a probability sampling strategy a purposive sampling strategy was used. The sample consisted of members from various African American churches in a major Midwestern city. One hundred and forty-five participants were included in the sample. African American pastors representing each denomination were contacted and asked to participate. The participating churches were identified from a listing of all African American churches in the area compiled by an interdenominational ministerial alliance. This researcher also attended denominational alliance meetings. The participating churches represented various denominations which included Apostolic (39), Baptist (39), First Church of God (21), Lutheran (4), Methodist (20), Non-denominational (12), Episcopalian (7), Presbyterian (2), Holiness (1) (See Table 1).

Denomination	Number of Respondents	Frequency (%)
Apostolic	39	26.9
Baptist	39	26.9
First Church of God	21	14.4
Lutheran	4	2.8
Methodist	20	13.8
Non-denominational	12	8.3
Episcopalian	7	4.8
Presbyterian	2	1.4
Holiness	1	.7

Table 1: Number of African American Church Goers by Denominational Affiliation (n= 145)

Of the 145 participants 69.7% were female while participation among males was 30.3% (See Table 2). What accounts for more women

participating in this research is that more women join church than men (while this is difficult to support with literature, it is accepted as fact). The youngest was 13 and the oldest was 86 years of age, the median age was 44 years. Forty-eight percent of the participants were between the age of 13 and 44. According to the Statistical Abstracts of the United States (1996), 48% of the African Americans surveyed in 1995 were between the ages of 15 and 44. The age of the participants was distributed between the ages of 25 and 64 (See Table 3), although seventeen participants did not indicate their age. The median age was 44.

Gender	Number of Participants	Frequency (%)
Female	101	69.7
Male	44	30.3

Table 2: Gender of African American Church Goers (n=145)

Age	Number of Participants	Frequency (%)
13-24	7	5
25-34	18	13
35-44	40	28
45-54	29	20
55-64	20	14
65-74	11	8
75+	3	0
Missing Cases	17	12

Table 3: African American Church Goers by Age (n=145)

A little over half of the participants had incomes (See Table 4) between \$26,000 and \$41,000 or more (51.7%). Of that percentage, half had incomes of \$41,000 or more (25.5%). The median income was between

\$26,000-\$30,000. It is interesting to note that more participants were willing to share their income than their age.

These numbers were compared with data from the Statistical Abstracts of the United States (1996). It is important to note, however, that Statistical Abstracts surveyed approximately 8,093,000 African Americans. Though the category of income is broken down differently, it is not significant. More than half of those surveyed reported incomes between \$25,000 and \$50,000 or more (66.9%). Of that percentage, less than half had incomes of \$50,000 or more (21.2%). Data collected in 1995 for Statistical Abstracts show a favorable comparison with the findings of this research which could be generalizable to the larger African American population.

Income	Number of Participants	Frequency %
Under \$10,000	18	12.4
\$10,000-\$15,000	14	9.7
\$16,000-\$20,000	14	9.7
\$21,000-\$25,000	19	13.1
\$26,000-\$30,000	11	7.6
\$31,000-\$35,000	12	8.3
\$36,000-\$40,000	15	10.3
\$41,000-or more	37	25.5
Missing cases	5	3.4

Table 4: African American Church Goers by Income (n=145)

Most of the participants (93.1%) reported having graduated from high school and having some formal education beyond high school. The median highest level of education was some college. Ten participants (6.9%)

indicated some high school education or less (See Table 5). This is reasonably consistent with the data from Statistical Abstracts of the United States (1996), which reports that in 1995 over 70% of African Americans surveyed reported having graduated from high school and having some formal education beyond high school. Although no empirical evidence can be cited at this time, there is a perception among pastors that larger congregations tend to attract members with more formal education.

Education	Number of Participants	Frequency %
Middle School or less	2	1.4
Some High School	8	5.5
High School Graduate	18	12.4
Some Technical School	11	7.6
Technical School Graduate	9	6.2
Some College	34	23.4
College Graduate	31	21.4
Graduate or Professional	14	9.7
Grad. or Pro. Sch. Graduate	18	12.4

Table 5: African American Church Goers Level of Education (n=145)

The majority of the participants (63%) reported having full-time jobs, and 17% reported being retired. Eleven participants (8%) indicated they are working part-time, three (2%) are unemployed, six (4%) are disabled, and

seven (5%) are students (See Table 6). The sex and employment variables were cross tabulated to break down the employment variable by gender. Of the females in this study, 63 are full-time, 8 are part-time, 3 are unemployed, 4 are disabled, 16 are retired, and 6 are students. Of the males in this study, 29 are full-time, 3 are part-time, none are unemployed, 2 are disabled, 9 are retired, and 1 is a student. Again this can be compared to the Statistical Abstracts. In the 1995 data, 57.1% of those surveyed reported having full-time jobs, 6.6% were unemployed and 36.3% were not in the labor force. For the purposes of this study and further clarification the disabled, retired, and students are not in the labor force.

Employment	Number of Participants	Frequency %
Full-time	92	63
Part-time	11	8
Unemployed	3	2
Disabled	6	4
Retired	25	17
Student	7	5
Missing cases	1	1

Table 6: African American Church Goers Employment Status (n=145)

Eighty-four participants (58%) are married, and twenty (14%) of the participants reported being divorced. Twenty-four (17%) are single, eleven (8%) are widowed, and six (4%) are separated (See Table 7). There is a substantial variation in the numbers of this study with those reported in Statistical Abstracts. Therefore these numbers cannot be generalized beyond

the study population. The data indicates that in 1995, those surveyed reported that 43.2% were married, 10.6% were divorced, 7.2% were widowed, and 38.4% were single. It appears that church-goers are more likely to be married than non-church-goers.

Marital Status	Number of Participants	Frequency %
Married	84	57.9
Divorced	20	13.8
Separated	6	4.1
Widowed	11	7.6
Single	24	16.6

Table 7: African American Church Goers Marital Status (n=145)

Measurement

This study used three instruments: (1) a demographic questionnaire developed by the researcher (Appendix A), (2) the Attitude Toward Seeking Professional Psychological Help Scale of Fischer and Turner (1970) (Appendix B); and (3) the Religious Attitudes Scale of Poppleton and Pilkington (1963) (Appendix C).

The Fischer and Turner (1970) instrument is a 29 statement scale, scored on a four-point Likert Scale. It reflects a persons attitude toward seeking professional help for psychological problems. Scored on a Likert Scale; each statement ranges from strongly agree to strongly disagree. Individuals reflect how strongly they agree or disagree with such statements as "I would rather be advised by a close friend than by a psychologist, psychiatrist, or a social worker", and "If I believed I was having a mental breakdown, my first inclination would be to get professional attention." An internal consistency reliability of .82 was reported by Fischer and Turner (1970). The authors of the original scale did not include an "undecided" score. This researcher adapted the instrument to include a score for those who were undecided.

Charlene D. Humphrey-Patterson (1993), did a study on the "Help-Seeking Attitudes of African-American Pastors Toward Counseling." Humphrey-Patterson adapted the Fischer and Turner (1970) instrument to include seven more items which assessed attitudes toward seeking pastoral counseling. This was done because the original instrument was developed to assess help seeking attitudes only towards professional secular help. The addition of the seven items brought the total number of items on the instrument to 36. When the seven items were tested along with the 29 original items, a coefficient of .80 was computed on Cronbach's Coefficient Alpha (1951) on the adapted instrument establishing its reliability. When the seven items were tested alone, a Cronbach coefficient of .53 was found. This supported the reliability of the seven additional items.

Humphrey-Patterson (1993) modified the instrument to include seven additional items that assessed attitudes toward seeking pastoral counseling, because the original instrument was developed to assess help seeking attitudes only toward professional secular help. This researcher added six more questions and adjusted the Humphrey-Patterson adaptation so that the

seven additional items would assess African American church goers attitudes toward help seeking. The addition of this researcher's six items brought the total number of questions to 42.

The second instrument used in this study was the Religious Attitude Scale (Popperton and Pilkington, 1963), which assessed attitudes toward religion. This is a 21-item scale scored on a five-point Likert scale. It contains 21 statements designed to measure religious convictions by asking questions related to Christian doctrine. Subjects indicate how strongly they agree or disagree with such statements as "People without religious beliefs can lead just as good, moral and useful lives as people with religious beliefs," and "The existence of disease, famine and strife in the world makes one doubt some religious doctrines." The authors of this scale, using Cronbach's formula, reported an internal reliability coefficient of .97. This researcher modified the instrument to include three additional items that assessed the church goers attitudes toward religion and its impact on African American life, because the original instrument did not address this from a cultural perspective. The addition of three items brought the total number of questions to 24. This researcher was unable to find recent information about this scale.

The third instrument used was a demographic questionnaire that assessed such church goers characteristics as annual income, age, gender, highest level of education, employment, marital status, and denominational affiliation. This 7-item instrument was developed specifically for this study.

Statistical Tests Selected for the Analysis of Data

For the purposes of this study factor analysis was used to examine the dimensions of the attitude scales. Factor analysis is a data reduction method and a useful way to look for components or scales within large sets of attitude type items or variables. Its purpose is to identify and summarize the many inter-relationships that exists among individual items or variables. Factor analysis is a data reduction method that either removes duplicated information from a set of variables or it can be thought of as grouping similar items or variables (Kachigan, 1991).

Multiple regression was used to look for what variables distinguish who used church services. Multiple regression tests for which independent variables affect the dependent variable and to what extent. Its purpose is to predict one variables value on another when given its value on each of several variables. This will reduce errors of prediction (Kachigan, 1991).

Summary

The sample of this study consisted of 145 African American churchgoers of multiple denominations in a large Midwestern city. Statistical analysis of the data was conducted using factor analysis and multiple regression.

Three instruments were used to collect the data for this study: (1) a 41-item modification of the Attitude Toward Seeking Professional Psychological Help Scale (Fischer and Turner, 1970), (2) a 24-item adaptation of the Religious Attitude Scale (Popperton and Pilkington, 1963), and (3) a 7-item demographic questionnaire developed by the researcher.

CHAPTER 4

RESULTS

The purpose of this research was to examine factors that influence African American church goers to seek help from their churches as opposed to traditional health and social service agencies. The results in this chapter are predicated on the analysis of data collected from a demographic questionnaire, an adaptation of the Attitude Toward Seeking Professional Psychological Help Scale (Fischer & Turner, 1970), and an adaptation of the Attitudes About Religion scale (Popperton and Pilkington, 1963).

In order to answer the research question: “Are African American church goers more likely to seek help from the church than they are from traditional social service institutions?”, questions were asked concerning use of services and who did the respondents trust the most.

Use of Services

On the question of “Does your church provide some guidance in your everyday living?” 67.6% said a lot, 19.3% said some, 10.3% said very little, and 2.8% said none at all. On the question of the type of services the church provides: Food, 72.4% said yes and 26.2% said no; Clothing, 52.7% said yes and 46.2% said no; Day Care center or nursery, 36.6% said yes and 61.4% said no; Alcohol or drug counseling, 24.8 said yes and 73.1% said no; Counseling (individual, family, group, or marriage) 80% said yes and 17.9 % said no; Senior outreach center, 28.3% said yes and 69.7% said no; Mental Health, 7.6% said yes and 90.3% said no; Housing, 38.6% said yes and 59.3% said no; Employment, 32.4% said yes and 65.5% said no; Tutoring, 46.9% said yes and 51.7% said no (See Table 8).

Type of Service	Mean	Percent
Counseling	.81	80.0
Food	.73	72.4
Clothing	.52	51.7
Tutoring	.47	46.9
Housing	.39	38.6
Day Care Center	.37	36.6
Employment	.33	32.4
Senior Outreach Center	.28	28.3
Alcohol or Drug Programs	.25	24.8
Mental Health	.07	7.6

Table 8: Types of Services Provided By The African American Church

Of the above types of services provided by the church, 42.8% said they have used the services, 54.5% said they have never used these services.

On the question of “How often these services were used?”, of those who responded, 27.6% said never, 21.4% said not very often, 11% said fairly often, 6.9% said often, and 4.1% said very often. A total of 103 participants responded to this question. On the question of “Were you satisfied with these services?”, of those who responded, 35.2% said they were very satisfied while, 5.5% said they were slightly satisfied, 1.4% said they were undecided, .7% said they were slightly dissatisfied, 1.4 said they were very dissatisfied. A total of 64 participants responded to this question.

On the question of “What is your level of activity in helping to provide these services?”, of those who responded, 31% said they were helpful, 13.1% said they were not very helpful, 12.4% said they were fairly helpful, 12.4% said they were never helpful, and 9.7% said they were very helpful. A total of 114 participants responded to this question. When asked “Have you ever participated in individual, family, or group counseling?” of those who responded, 56.6% said yes, 42.8% said no. A total of 144 participants responded to this question.

On the question of when the counseling took place, of those who responded, 26.9% said that counseling took place in the last 12 months, 10.3% said 11 or more years, 7.6% said 1-2 years, 4.8% said 5-10 years,

and 4.1% said 3–4 years. A total of 78 participants responded to this question. When asked who were they counseled by: of those who responded, Pastor, 45.5% said yes, 15.9% said no; Psychologist, 5.5% said yes, 55.9% said no; Other, 4.1 said yes, 56.6% said no; Social Worker, 3.4% said yes, 57.9% said no; and for Psychiatrist, 2.1% said yes, 59.3% said no. A total of 89 participants responded to this question (See Table 9). When asked how satisfied they were with the results, of those who responded, 40.7% said they were very satisfied, 6.2% said they were slightly satisfied, 3.4% said they were slightly dissatisfied, 2.1% were undecided, 3.4% said they were very dissatisfied.

Counseled By	Mean	Percent
Pastor	.74	45.5
Psychologist	.09	5.5
Other	.12	4.1
Social Worker	.05	3.4
Psychiatrist	.09	2.1

Table 9: African American Church Goers Were Counseled by

Who they trust the most

The respondents were asked to rank order the persons they would choose to see first if they were experiencing a period of great personal stress. Specifically, they were asked to “rank the sources in the order you would choose”, by placing “1” in the space of the person you would choose first, and so on”. The categories are placed in order from most trusted (immediate family member) to least trusted (mental health center). In order of rank they

were: Immediate family member, pastor, close friend, other, other relative, myself, physician' office, psychologist, social service agency, psychiatrist, social worker, and mental health center. As table 10 indicates, immediate family members, pastors and close friends are by far the most trusted persons when respondents are experiencing a period of great personal stress. While professionals such as psychiatrist, psychologist and social workers are the least trusted. The respondents do not even have that much confidence in themselves in times of great personal stress (See Table 10).

Whom trusted the most	Mean	Standard Deviation
Immediate Family Member	1.9	1.45
Pastor	2.5	1.58
Close Friend	2.8	1.25
Other	3.2	3.88
Other Relative	3.8	1.98
Myself	5.4	4.12
Physician's Office	5.8	2.35
Psychologist	6.4	1.97
Social Service Agency	7.2	2.14
Psychiatrist	7.3	2.30
Social Worker	7.3	2.12
Mental Health Center	8.9	2.19

Table 10: Person's to whom African American Church Goers would Turn In Time of Stress

Factor Analysis

In order to answer the research questions: “What factors are more likely to influence African American church goers to seek help from African American churches as opposed to traditional social services?” and “Are particular demographic groups more likely to seek help from the church, or, are all groups of African American church goers equally prone to seek such help?”, a factor analysis was performed on the attitudes about professional help and the attitudes about religion variables as a first step, in order to simplify the data and to underscore certain significant results (Kachigan, 1991). In both cases, the principal component method was used, with varimax rotation to simple structure. The factor loading values accepted for this research were .50 and above.

Attitudes About Professional Help

Forty-one (41) statements were subjected to a factor analysis for attitudes about professional help and a four-factor structure was obtained (See Table 11). The first factor was named “Confidence in Church Help” and consisted of nine (9) statements: “I would want to get counseling from my pastor if I were worried or upset for a long period of time,” I would

willingly confide intimate matters to my senior pastor if I thought it might help me or a member of my family,” “In most instances, if I needed professional help beyond family and friends, I would probably first seek help from my senior pastor before a psychologist, psychiatrist, or a social worker,” “I am confident that my senior pastor would provide more appropriate counseling for me as a religious person even if my problem were severe mental disturbance,” “Counseling from my senior pastor is the only professional counseling I might pursue because I would trust his or her guidance and council would be coming from God,” “My church provides helpful services,” “My church will help me in time of need,” “My church is a lot of help to me,” and “I seek help from my church because it is sensitive to my needs”. The factor loadings ranged from .66 to .85.

The second factor consisted of seven (7) items and was titled “Confidence in professional help”, All the items had factor loadings from .58 to .75. The statements for the first factor were: “If a good friend asked my advice about a mental problem, I might recommend that he/she see a psychiatrist, psychologist, or social worker,” “There are times when I have felt completely lost and would have welcomed professional advice for a personal or emotional problem,” “A person with an emotional problem is not

likely to solve it alone; he or she is likely to solve it with professional help,”
“I would want to get professional attention if I were worried or upset for a
long period of time,” “If I were experiencing a serious emotional crises at
this point in my life, I would be confident that I could find relief in
psychotherapy,” “At some future time, I might want to have psychological,
psychiatric, or social work counseling,” and “If I thought I needed
professional help, I would get it no matter who knew about it.

The third factor was named “Working It Out On Your Own” and
consisted of seven (7) statements: “A person with a strong character can get
over mental conflicts by himself or herself, and would have little need of a
psychiatrist, psychologist, or social worker,” “Emotional difficulties, like
many things, tend to work out by themselves,” “Keeping one’s mind on a job
is a good solution for avoiding personal worries and concerns,” “I resent a
person, professionally trained or not, who wants to know about my personal
difficulties,” “The idea of talking about problems with a psychologist,
psychiatrist, or social worker strikes me as a poor way to get rid of emotional
conflict,” “ It is probably best not to know everything about oneself,” and

“There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without resorting to professional help”. The factor loadings ranged from .52 to .68.

Finally, the fourth factor was labeled “Stigma and Help Seeking” and included four statements with a loading range from .50 to .63. The statements were: “Having been a psychiatric patient is a blot on a person’s life,” “Having been mentally ill carries with it a burden of shame,” “It is difficult to talk about personal affairs with highly educated people such as doctors, teachers, clergypersons, and counselors,” “If I could see an African American counselor, I would go to a social service agency”.

Variable

Varimax Rotated Factor Matrix

	I	II	III	IV
1. Although there are clinics for people with mental troubles, I would not have much faith in them.	-.088	.189	.273	.338
2. If a good friend asked my advice about a mental problem, I might recommend that he/she a psychiatrist, psychologist, or social worker.	-.307	.756	-.052	.096
3. I would feel uneasy going to a psychologist, psychiatrist, or a social worker because of what some people would think.	.084	-.285	.285	.219
4. A person with a strong character can get over mental conflicts by himself or herself, and would have little need of a psychiatrist, psychologist, or social worker.	.048	-.139	.633	.095
5. There are times when I have felt completely lost and would have welcomed professional advice for a personal or emotional problem.	-.017	.598	-.079	.256

75

Table 11: Factor Analysis of Attitudes About Professional Help

<u>Variable</u>	<u>Varimax Rotated Factor Matrix</u>			
	I	II	III	IV
6. Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.	.262	-.347	.330	.154
7. I would willingly confide intimate matters to an appropriate person if I thought it might help me or a member of my family.	.240	.392	-.196	.009
8. I would rather live with certain mental conflicts than go through the ordeal of getting professional treatment.	-.053	-.307	.368	.025
9. Emotional difficulties, like many things, tend to work out by themselves.	-.024	-.070	.681	-.108
10. There are certain problems that should not be discussed outside of one's immediate family.	.024	.037	.664	.119
11. A person with a serious emotional disturbance would probably feel most secure in a good mental hospital.	.029	.481	.427	.000
12. Keeping one's mind on a job is a good solution for avoiding personal worries and concerns.	.047	.040	.539	-.017
13. Having been a psychiatric patient is a blot on a person's life.	.127	-.153	.201	.500

Table 11: Factor Analysis of Attitudes About Professional Help (con't)

Variable

Varimax Rotated Factor Matrix

	I	II	III	IV
14. I would rather be advised by a close friend than by a psychologist, psychiatrist, or social worker even for an emotional problem.	.261	-.429	.278	.296
15. A person with an emotional problem is not likely to solve it alone; he or she is likely to solve it with professional help.	.139	.587	.043	-.126
16. I resent a person, professionally trained or not, who wants to know about my personal difficulties.	-.008	-.005	.529	.240
17. I would want to get professional attention if I were worried or upset for a long period of time.	.014	.708	.012	-.025
18. The idea of talking about problems with a psychologist, psychiatrist, or social worker strikes me as a poor way to get rid of emotional conflict.	-.102	-.076	.621	.269
19. Having been mentally ill carries with it a burden of shame.	.133	-.125	.001	.637
20. There are experiences in my life I would not discuss with anyone.	-.062	.179	.400	.421

77

Table 11: Factor Analysis of Attitudes About Professional Help (con't)

<u>Variable</u>	<u>Varimax Rotated Factor Matrix</u>			
	I	II	III	IV
21. It is probably best not to know everything about oneself.	.027	.168	.610	.242
22. If I were experiencing a serious emotional crisis at this point in my life, I would be confident that I could find relief in psychotherapy.	-.143	.822	-.071	-.034
23. There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without resorting to professional help.	.049	-.150	.585	.059
24. At some future time, I might want to have psychological, psychiatric, or social work counseling.	-.150	.696	-.110	.070
25. A person should work out his or her own problems; getting psychological, psychiatric, or social work counseling would be a last resort.	.141	-.243	.453	.169
26. Had I received treatment in a mental hospital, I would not feel that it ought to be "covered up."	.179	.163	.007	-.211
27. If I thought I needed professional help, I would get it no matter who knew about it.	.201	.616	.046	-.175

Table 11: Factor Analysis of Attitudes About Professional Help (con't)

Variable

Varimax Rotated Factor Matrix

	I	II	III	IV
28. It is difficult to talk about personal affairs with highly educated people such as doctors, teachers, clergypersons, and counselors.	-0.22	-0.019	.221	.554
29. I would want to get counseling from my senior pastor if I were worried or upset for a long period of time.	.770	-.113	-.030	-.136
30. I would feel uneasy going to my pastor because of what others might think.	-.316	.130	-.065	.464
31. I would willingly confide intimate matters to my senior pastor if I thought it might help me or a member of my family.	.665	.024	-.118	-.129
32. I think I would feel more comfortable going to a psychologist, psychiatrist, or social worker only if the suggestion came from my senior pastor.	.485	-.011	.133	.002
33. In most instances, if I needed professional help beyond family and friends, I would probably first seek help from my senior pastor before a psychologist, psychiatrist, or a social worker.	.724	-.197	.084	.000

79

Table 11: Factor Analysis of Attitudes About Professional Help (con't)

<u>Variable</u>	<u>Varimax Rotated Factor Matrix</u>			
	I	II	III	IV
34. I am confident that my senior pastor would provide more appropriate counseling for me as a religious person even if my problem were severe mental disturbance.	.682	-.451	.235	-.069
35. Counseling from my senior pastor is the only professional counseling I might pursue because I would trust his or her guidance and counsel would be coming from God.	.696	-.396	.267	-.023
36. My church provides helpful services.	.777	.055	-.037	.056
37. I would not go to a social service agency because white counselors cannot understand my problems.	.058	-.113	.161	.442
38. If I could see an African American counselor, I would go to a social service agency.	-.074	.352	.118	.533
39. My church will help me in a time of need.	.819	.092	-.002	.038
40. My church is a lot of help to me.	.856	.121	-.069	.073
41. I seek help from my church because it is sensitive to my needs.	.727	.167	-.060	.157

Table 11: Factor Analysis of Attitudes About Professional Help (con't)

For all four factors, scores were created by summing responses to the variables that loaded on each factor. In all cases, a high score meant the respondents agreed with the question. Factor one, the average score was a positive 24.84, with a standard deviation of 7.93. Factor two, the average score was a positive 34.12, with a standard deviation of 9.99. Factor three, the average score was a positive 14.31, with a standard deviation of 6.67. Factor four, the average score was a positive 7.55, with a standard deviation of 3.26.

Attitudes About Religion

Twenty-four (24) statements regarding attitudes about religion were subjected to a factor analysis and a four-factor structure was obtained (See Table 12).

Variable**Varimax Rotated Factor Matrix**

	I	II	III	IV
1. To lead a good life, it is necessary to have some religious belief.	.390	.088	.335	-.477
2. Jesus Christ was an important and interesting historical figure but in no way divine.	.106	.411	-.096	-.192
3. I genuinely do not whether God exists.	.051	.581	-.146	.116
4. Religious faith is merely another name for belief which is contrary to reason.	-.198	.389	.355	.062
5. People without religious beliefs can lead just as good, moral and useful lives as people with religious beliefs.	.065	.076	.099	.824
6. The existence of disease, famine and strife in the world makes one doubt some religious doctrines.	-.105	.421	.347	.112
7. The miracles recorded in the Bible really happened.	.178	-.208	.728	-.081
8. It makes no difference to me whether religious beliefs are true or false.	.035	.390	-.142	.305
9. Christ atoned for our sins by his sacrifice on the cross.	.448	-.185	.709	.074

Table 12 Factor Analysis of Attitudes About Religion

Variable**Varimax Rotated Factor Matrix**

	I	II	III	IV
10. The truth of the Bible diminishes with the advance of science.	-.247	.563	.117	-.195
11. Without belief in God, life is meaningless.	.176	.074	.583	-.419
12. The more scientific discoveries are made, the more the glory of God is revealed.	.546	-.061	.158	.182
13. Religious education is essential to preserve the morals of our society.	.754	-.009	.258	-.103
14. The proof that Christ was the Son of God lies in the record of the Gospels.	.479	-.094	.515	-.022
15. The best explanation of miracles is as an exaggeration of ordinary events into myths and legends.	.134	.698	-.121	-.033
16. International peace depends on the world-wide adoption of religion.	.626	.106	-.034	-.305
17. If you lead a good and decent life, it is not necessary to go to church.	-.020	.480	-.053	.364
18. Parents have a duty to teach elemental Christian truths to their children.	.323	-.078	.656	.056
19. There is no survival of any kind after death.	.165	.520	-.098	.103
20. The psychiatrist rather than the theologian can best explain the phenomena of religious experience.	.021	.513	.069	-.137

83

Table 12 Factor Analysis of Attitudes About Religion (con't)

Variable

Varimax Rotated Factor Matrix

	I	II	III	IV
21. On the whole, religious beliefs make for better and happier living.	.688	.110	.363	-.076
22. The humiliation and oppression experienced by African Americans are a sign that God is almost totally removed from the problems that confront African Americans.	.040	.567	.006	.087
23. The recent progress made by African Americans is an indication of God's presence in the African American community.	.584	.056	.118	-.036
24. The African American church has helped the condition of all African Americans.	.682	.139	.014	.099

84

Table 12 Factor Analysis of Attitudes About Religion (con't)

The first factor consisted of six (6) statements and was named "The Goodness of Religion." The statements included in this factor were: "The more scientific discoveries are made, the more the glory of God is revealed," "Religious education is essential to preserve the morals of our society," "International peace depends on the world-wide adoption of religion," "On the whole, religious beliefs make for better and happier living," "The recent progress made by African Americans is an indication of God's presence in the African American community," "The African American church has helped the condition of all African Americans." The statements resulted in factor loadings from .54 to .75.

The second factor consisted of six (6) statements, and was named "Belief in the Existence of God". The statements included in this factor were: "I genuinely do not know whether God exists," "The truth of the bible diminishes with the advance of science," "The best explanation of miracles is an exaggeration of ordinary events into myths and legends," "There is no survival of any kind after death," "The psychiatrist rather than the theologian can best explain the phenomena of religious experience," "The humiliation

and oppression experienced by African Americans are a sign that God is almost totally removed from the problems that confront African Americans.”

The statements have factor loadings from .51 to .69.

The third factor consisted of five (5) statements and were labeled “Religious Beliefs”. The statements included in this factor were: “The miracles recorded in the bible really happened,” “Christ atoned for our sins by his sacrifice on the cross,” “Without belief in God, life is meaningless,” “The proof that Christ was the Son of God lies in the record of the Gospels,” “Parents have a duty to teach elemental Christian truths to their children.”

The statements had factor loadings from .51 to .72.

Finally, the fourth factor consisted of one statement named “Life without Religious Beliefs”. This statement was: “People without religious beliefs can lead just as good, moral and useful lives as people with religious beliefs” with a factor loading of .83.

For all four factors, scores were created by summing responses to the variables that loaded on each factor. In all cases, a high score meant the respondents agreed with the question. Factor one, the average score was a positive 22.70, with a standard deviation of 6.22. Factor two, the average score was a positive 7.09, with a standard deviation of 2.95. Factor three,

the average score was a positive 22.96, with a standard deviation of 3.89.

Factor four, the average score was a positive 2.36, with a standard deviation of 1.49.

Multiple Regression Analysis

SPSS for windows Multiple Regression Analysis, Stepwise method, was used in order to answer the research questions about the factors related to influencing the help seeking behavior of African American church goers, where African American church goers are more likely to seek help, and the role that demographics play in the help seeking behavior. The independent variables were: gender, age, income, education, marital status, how long a member of current church, importance of church membership, church attendance, participate in auxiliary, attend bible study, confidence in professional help, confidence in church help, working it out on your own, stigma and help seeking, the goodness of religion, belief in the existence of God, religious beliefs, and life without religious beliefs.

There were a number of dependent variables that could have been used. Two were the most germane to answering the research questions: about the factors related to influencing the help seeking behavior of African

American church goers, where African American church goers are more likely to seek help, and the role that demographics play in the help seeking behavior. These independent variables were regressed on separate equations with two dependent variables. The dependent variables were:

- Guidance in day to day living,
- Participation in counseling.

Guidance in Day to Day living

The eighteen selected independent variables were regressed on the factor: “Does your church provide some guidance in your day-to-day living?” In this analysis, five (5) significant variables were identified. These variables were: importance of church membership, bible study attendance, confidence in church help, stigma and help seeking, and religious beliefs.

The church providing guidance in day-to-day living was positively associated with the importance of church membership, bible study attendance, and confidence in church help. The guidance of the church was negatively associated with religious beliefs and Stigma and help seeking.

The R square was .44 (See Table 13).

Independent Variables	Dependent Variable Guidance in day-to-day living
Gender	.024
Age	-.129
Income	.088
Education	-.147
Marital Status	-.003
How Long A Member	-.002
Importance of Church membership	.240 *
Church Attendance	-.038
Participation In Auxiliary	-.053
Bible Study Attendance	.193 **
Confidence In Professional Help	-.042
Confidence In Church Help	.387 *
Working It Out On Your Own	.070
Stigma And Help Seeking	-.221 *
The “goodness” Of Religion	.132
Belief In The Existence Of God	-.112
Religious beliefs	-.237 **
Life Without Religious Beliefs	-.031

Table 13: Beta Coefficients for Guidance in Day-to-Day Living (n=145)

R Square .44; *p<.01; **p<.05

Participation in Counseling

The eighteen selected independent variables were regressed on the factor: "Have you ever participated in individual, family, or group counseling?" In this analysis, six (6) significant variables were identified. These variables were income, how long a member of the church, bible study attendance, confidence in professional help, confidence in church help, and working it out on your own. The participation in counseling was positively associated with the income, length of membership, bible study attendance, and confidence in church help. Participation in counseling was negatively associated with confidence in professional help and working it out on your own. The R square was .32 (See Table 14).

Independent Variables	Dependent Variable Participation In Counseling
Gender	-.106
Age	-.074
Income	.209 **
Education	.156
Marital Status	.005
How Long A Member	.207 **
Importance of Church membership	-.121
Church Attendance	-.007
Participation In Auxiliary	-.054
Bible Study Attendance	.215 **
Confidence In Professional Help	-.264 *
Confidence In Church Help	.282 *
Working It Out On Your Own	-.172 **
Stigma And Help Seeking	.065
The "goodness" Of Religion	.049
Belief In The Existence Of God	.039
Religious beliefs	-.067
Life Without Religious Beliefs	.128

Table 14: Beta Coefficients for Participation In Counseling (n=145)

R Square .32; *p<.01; **p<.05

CHAPTER 5

CONCLUSIONS AND IMPLICATIONS FOR SOCIAL WORK

The purpose of the final chapter of this study is to summarize the main findings of this research, to discuss each research question based on the findings, and to delineate implications of this research for the field of social work.

Summary

The purpose of this research was to examine factors that influence African American church goers to seek help from their churches as opposed to traditional social service agencies. This research is concerned with the factors that influence help seeking behavior of African American church goers. Specifically this research explored:

1) whether African American church goers seek help from the church more than they do traditional social service agencies;

2) those factors that influence African American church goers to seek help from African American churches as opposed to traditional social services;

3) identified particular demographic variables (such as gender, age, or education level) that are likely to affect seeking help from the church, or whether all groups of African American church goers are equally prone to seek such help.

As noted earlier, the current literature which examines help seeking generally and African American church goers specifically does not give much attention to the factors that influence their help seeking behavior. For too long African American people have allowed institutions external to those established within, particularly traditional social service institutions, to define their problems; to prioritize their problems; to determine their needs; and to develop and implement solutions. The findings of this study agree with previous evidence that suggests that consideration must be given to the efforts of the African American church in addressing these issues (Wimberly, 1979, 1982, 1991; Morrison, 1991; Billingsley, 1992; and Richardson, 1992).

Summary of Methodology

This study employed a descriptive research design using a survey method with a self administered questionnaire. This method provided the researcher with a technique to reach African American church goers from several denominations. A probability sample of church goers was gathered from churches representing nine different denominations in the Columbus, Ohio area. The nine denominations represented are: Apostolic, Baptist, First Church of God, Holiness, Lutheran, Methodist, Non-denominational, Episcopalian, and Presbyterian. The total sample consisted of 145 participants from nine different denominations in the Columbus, Ohio area. The researcher called for 100 participants, however, 45 more participants volunteered to complete the survey.

A demographic questionnaire was developed and modified versions of the Fischer and Turner (1970) Attitudes About Professional Help, and Poppleton and Pilkington (1963) Attitudes About Religion were used.

The researcher initially solicited support for the study by explaining the objectives of the study to pastors who were members of local ministerial alliances representing various denominations. Those pastors agreeing to participate in the study, made arrangements for the researcher to speak with

members of their churches. The contact persons in the churches were the secretaries. Each contact person was to distribute the questionnaire to members upon request. The church secretaries were asked to collect the sealed questionnaires from the members to be collected by the researcher at an appointed time. There were weekly communications with the secretaries to monitor the progress of the questionnaire returns and with the pastors to announce on Sunday morning the importance of completing and returning the questionnaires.

Each participant received a questionnaire packet that consisted of: a cover letter, a self-administered questionnaire, and a pencil with the name of The Ohio State University imprinted on it as a gift. The questionnaire had explicit instructions for completion and a envelope to be sealed and given to the church secretary. The cover letter included the purpose of the study, importance of church member's participation, and promise of confidentiality (Appendix D).

Statistical methods used for the data analysis of the three research questions included factor analysis and multiple regression. Factor analysis was used to determine the dimensions of attitude scales by identifying and summarizing the many inter-relationships that exists among individual items

or variables (Kachigan,1991). Factor analysis was conducted on the modified Fischer and Turner (1970) and Poppleton and Pilkington (1963) attitude scales. The forty-one (41) items of the Fischer and Turner (1970) scale were subjected to a factor analysis for attitudes about professional help and a four-factor structure was obtained. The four factor's were: Confidence in Professional Help, Confidence in Church Help, Working it Out on Your Own, and Stigma and Help-Seeking. The twenty-four (24) items of the Poppleton and Pilkington (1963) scale were subjected to a factor analysis regarding attitudes about religion and a four factor structure was obtained. The four factor's were: The Goodness of Religion, Belief in the Existence of God, Religious Beliefs, and Life without Religious Beliefs.

Multiple regression was used to look for what variables distinguish who used church services and to predict one variables value relative to another when given its value on each of several variables (Kachigan, 1991). There were two (2) dependent variables and eighteen (18) independent variables. The dependent variables were: guidance in day to day living and participation in counseling. The independent variables were: gender, age, income, education, marital status, how long a member, importance of church membership, church attendance, participation in auxiliary, bible study

attendance, confidence in professional help, confidence in church help, working it out on your own, stigma and help seeking, the "goodness" of religion, belief in the existence of God, religious beliefs, and life without religious beliefs.

Summary of Major Findings

Demographics

The average age was 45.7 years, and of the 145 respondents, 101 (69.7%) were females. Over half, 80 (55.1%) of the respondents indicated having some high school or some college, while 63 (43.5%) indicated having a college or professional degree. Ninety-two (63.4%) indicated having full-time employment. Eighty-four (57.9%) indicated they were married.

The demographic data were used to answer the first research question, "Are African American church goers more likely to seek help from the church than they are from traditional social service institutions". Questions were asked concerning use of services and who did the respondents trust the most. Items related to use of services (i.e. "Does your church provide some guidance in your everyday living?"; and the types of services provided by

the church such as counseling, food, clothing, tutoring, etc) showed scores in the areas of agreement. However, only one church provided services in mental health. Respondents were asked to indicate whether or not they have used these services. More than half (54.5%) said they have never used these services while 42.8% said they have used these services. Of those who responded 40.7% said they were slightly to very satisfied while 2.1% said they were slightly to very dissatisfied.

Respondents were asked if they if they had ever participated in individual, family or group counseling. Of those who responded, 56.6% responded positively. Respondents were asked who were they counseled by. Of those who responded 45.5% said pastor, 5.5% said psychologist, 4.1% said other (i.e. pastor's wife or church leader), social worker 3.4%, and psychiatrist 2.1%. Participants were asked to indicate how satisfied they were with the results of this counseling. Of those who responded 47% said they were slightly to very satisfied.

Respondents were asked to rank who they trusted the most by placing "1" in the space of the person the respondents would choose first and so on. The mean was 1.9 for immediate family member, 2.5 for pastor, 2.8 for close friend, 3.2 for other (i.e. God, Jesus, spouse), 3.8 for other relative, 5.4 for

myself, 5.8 for physician's office, 6.4 for psychologist, 7.2 for social service agency, 7.3 for psychiatrist, 7.3 for social worker, and 8.9 for mental health center.

The research question, "What factors are more likely to influence African American church goers to seek help from African American churches as opposed to traditional social services?" was measured on the attitudes about professional help and attitudes about religion (five point Likert) scales. On the measure regarding attitudes about professional help, the findings indicate that the factor most likely to influence African American church goers to seek help from the church instead of traditional social services was their strong confidence in the church. However, the findings also indicate that the respondents had confidence in professional help (i.e. psychologist, psychiatrist and social workers). This may account for the agreement among the respondents that issues of stigma would not prohibit them from seeking professional help. The respondents were also in agreement that it would not be wise for a person to attempt to solve personal and emotional problems on their own.

On the measure regarding attitudes about religion, the findings indicate that the factor's most likely to influence African American church

goers to seek help from the church as opposed to traditional service institutions were the respondents positive attitudes toward: the goodness of religion, belief in the existence of god, their religious beliefs, and their belief that there is no life without religious beliefs.

The research question, "Are particular demographic groups more likely to seek help from the church, or, are all groups of African American church goers equally prone to seek such help?" was measured with regression analysis. Using multiple regression analysis, the dependent variables: "Guidance in day-to-day living," and "Participation in Counseling," were regressed on the following independent variables: gender, age, income, education, marital status, how long a member, importance of church membership, church attendance, participation in auxiliary, bible study attendance, confidence in professional help, confidence in church help, working it out on your own, stigma and help seeking, the goodness of religion, belief in the existence of good, religious beliefs, and life without religious beliefs.

When "Guidance in day-to-day living" was the dependent variable, the respondent's attitudes correlated with the importance of church membership, bible study attendance, confidence in church help, stigma and

help seeking , and religious beliefs presented as the factors that showed a significant relationship. On the dependent variable "Participation in counseling" the respondent's attitudes correlated with income, length of church membership, bible study attendance, confidence in church help, confidence in professional help, and working it out on your own.

Discussion of Major Findings

The present study focused on questions concerning the help seeking behavior of African American church goers. It was the purpose of this research to answer questions about: 1) whether African American church goers seek help from the church more than they do traditional social service agencies; 2) those factors that influence African American church goers to seek help from African American churches as opposed to traditional social services; 3) identify particular demographic variables that are likely to affect seeking help from the church, or whether all groups of African American church goers are equally prone to seek such help.

As mentioned in Chapter 1, according to Taylor and Chatters (1986) and Richardson (1992) very little quantitative research focuses specifically on the use of traditional social services by African American people. The

researcher did not find any literature that addressed the factors that influenced the help seeking behavior of African American church goers.

Notwithstanding the historical and present day evidence that suggests African American churches do provide support to their members and community, little attention and scrutiny has been given this in the literature (Taylor, 1993). In a national study of church run community outreach programs, Billingsley (1992), reported that many African American churches are providing a multitude of services (as mentioned in Chapter 1).

Research Question: "Are African American church goers more likely to seek help from the church than they are from traditional social service institutions."

The findings of this research show that African American church goers attitudes concerning the use of services and who they trust the most were positive toward the church. For example, African American church goers presented positive attitudes on questions related to services provided by the church. Slightly less than half found occasion to use the services. Of those who did use the services, just about half were satisfied with the services.

On the question of participation in individual, family, group, or marriage counseling, a majority of the respondents indicated that they have participated in such and were counseled by their pastor. When asked who they would seek help from first in times of stress, respondents indicated they would choose a family member first, pastor second, and close friend third. This is consistent with Jackson et al. (1993), Walker (1992), and Booth and Babchuk (1972) who report that people who seek help are usually looking for comfort, reassurance, and advice.

This researcher's experience as a social worker and pastor has shown that African American churchgoers are looking for someone who will give them advice as to how to handle stressful situations, while not asking questions about their income, family history, or the filling out of forms. When African Americans seek help they are looking for an immediate solution to a pressing problem. That problem may be lack of food; inability to pay rent, heat or light bill; transportation and others. The researcher believes the results were obtained because the church's history has been one of helping African American churchgoers meet basic needs (food, clothing, shelter, etc.) without question and without discrimination. Also, in keeping with the Green (1982) help seeking model, the church's history has been one

of framing an experience as a problem in religious terms within the context of culture. It should also be noted here that the centrality of religion in the life of African American churchgoers is reflected in such things as church attendance, confidence in the pastor, and participation in groups within the church.

On the question of who they trust the most, the pastors mean score was 2.5 while the scores of other professionals were: psychologist 6.4, psychiatrist 7.3, and social workers 7.3. There is a substantial difference in the score the pastor received compared to other professionals. These findings are consistent with previous research. Billingsley and Caldwell (1991) assert that the African American church holds the allegiance of many African Americans and exerts great influence over their behavior, serving many different functions. The African American community trusts family, pastor, and friends more than they trust anyone else. Taylor (1986a), Morrison (1991), and Richardson (1992) found religion and church to be very important to African Americans who utilize the services of the church at higher rates than they utilize traditional social service agencies.

Research Question: "What factors are more likely to influence African American church goers to seek help from African American churches as opposed to traditional social services?"

The following five (5) factors fit into the category of religious help seeking and are more likely to influence African American church goers to seek help from African American churches. "Confidence in Church Help," resulted in the respondents agreeing with the nine (9) items that loaded on this factor. For example, "In most instances, if I needed professional help beyond my family and friends, I would probably first seek help from my senior pastor before a psychologist, psychiatrist, or a social worker," and "Counseling from my senior pastor is the only professional counseling I might pursue because I would trust his or her guidance and counsel would be coming from God." All scores in this factor reflect positive attitudes by the respondents toward the church and pastor.

This is in agreement with Billingsley and Caldwell (1991) and Boyd-Franklin (1989) who argue that the church was and is a central force in caring for the community through provision of a wide range of services. Neighbors (1985) research indicates that ministers are contacted at much higher rates than social services, mental health centers, psychiatrist and

psychologist. Roberts (1980) calls this tending to the physical, economic, political, legal, social, and emotional needs of African Americans, with a primary concern for food, clothing, shelter, employment, and education, the prophetic function of the church.

It is believed that these results were obtained because the African American pastor is viewed as a safe and nurturing person to go to with your problems. He or she is viewed as "Gods person." That is, one who has been "called out," "set apart," and divinely inspired to do Gods work. These results also may have been obtained because African American church goers believe that the counseling of the pastor is divinely inspired by God. Along with this power and authority comes the belief that the pastor is divinely inspired to frame an experience as a problem in religious terms.

"The Goodness of Religion," resulted in the respondents agreeing with the six (6) items that were associated with this factor. For example, "The recent progress made by African Americans is an indication of God's presence in the African American community," and "The African American church has helped the condition of all African Americans." All scores in this factor reflect the respondents positive attitude towards church, Gods involvement in people's lives, and the benefit of being religious. Smith

(1985) supports these results and Smith (1993) agrees that the church has been a major support system for African Americans. These findings, again, may be a result of the common suffering of church and people. With the African American church being the only institution that African Americans own and control, it has provided social services and a sense of spirituality.

“Belief in the Existence of God,” resulted in the respondents disagreeing with the six (6) items that loaded on this factor. For example, “The psychiatrist rather than the theologian can best explain the phenomena of religious experience,” and “The humiliation and oppression experienced by African Americans are a sign that God is almost totally removed from the problems that confront African Americans.” The scores on this factor reflect the respondents negative attitudes toward the belief that God does not involve Himself in peoples problems and therefore does not exist.

The researcher believes these findings are an indication that African American church goers believe that only God could have freed them from slavery. It is a part of the unwritten theology of the African American church that God, through the second coming of Jesus Christ, will judge the oppressor for what they have done to the oppressed. They also believe that God has, is, and always will be involved in the everyday lives of African

Americans despite the humiliation and oppression they face. While the researcher was unable to find literature in support of or opposition to these findings all one has to do is to step into any African American church on any Sunday morning to observe the evidence that God, the righteous judge does exist.

“Religious Beliefs,” the findings indicate that the respondents were in agreement with the five (5) items that were associated with this factor. For example, “Christ atoned for our sins by his sacrifice on the cross,” and “The proof that Christ was the Son of God lies in the record of the Gospels.” All scores in this factor reflect positive attitudes by the respondents toward the bible and church doctrine (teaching). The researcher was unable to find literature in support of or opposition to these findings. However, the researchers personal experience as a pastor leaves little doubt that African American church goers are people of deep faith. These results are a statement of that faith. It should be pointed out that when religious beliefs were regressed with guidance in day to day living, the results indicated that African American church goers with strong religious beliefs were less likely to seek guidance from the church.

“Life without Religious Beliefs,” resulted in the respondents disagreeing with the one (1) item that loaded on this factor. **“People without religious beliefs can lead just as good, moral and useful lives as people with religious beliefs.”** This score reflect a negative attitude by the respondents toward living without religious beliefs. The researcher was unable to find literature in support of or opposition to these findings.

The following three (3) factors fit into the category of nonreligious help seeking and are more likely to influence African American church goers to seek help from traditional social service institutions. **“Confidence in Professional help,”** resulted in respondents agreeing with the seven (7) items that loaded on this factor. For example, **“There are times when I have felt completely lost and would have welcomed professional advice for a personal problem,”** and **“At some future time, I might want to have psychological, psychiatric, or social work counseling.”** All scores in this factor reflect respondent’s positive attitudes toward nonreligious help for personal and emotional problems.

While the respondents indicated a positive attitude toward professional help in this study they also indicated that when given a choice professional help will most likely not be sought. These findings may be the

result of several issues, the respondents may desire to seek professional help for serious problems but have an inherent fear to seek these services outside the church, the respondents view of traditional social services as a threat to culture and identity, and the residual affects of slavery. Traditional social service institutions have a storied history of not being sensitive or appropriately responsive to the needs of African American people. Also the fear of being experimented on as were the men in the Tuskegee Experiment. Within many denominations there is a strong healing component to the churches ministry and to seek help outside of the church implies that there is no faith in God's power to heal. One other reason for these results may be that the African American church is the one institution that will not allow traditional social services institutions to define their problems; prioritize their problems; determine their needs; nor to develop and implement solutions. For many African American church goers, religion (i.e. faith, spirituality, and living in hope) has reduced the negative states that arise from stress, which may be caused by some traditional services institutions.

Although respondents indicate confidence in professional help, these findings are inconsistent with current and previous research. The Neighbors

(1985) study show that only 9% of a sample of 631 respondents to the National Survey of Black Americans, sought professional help from psychologist, psychiatrist, or mental health agencies. These studies also show that in times of stress, African Americans seek help from hospitals, physicians and pastors. In contrast, the Broman (1987) study indicates that African Americans are more likely to seek help from mental health professionals and less likely to seek help from clergy. On the other hand, the Parker and McDavis (1989) findings are in agreement with Wimberly (1991) who argues that African Americans see their problems as both theological and psychological and would prefer to be counseled by a professional (preferably a minister) who understands both. Roberts (1980) calls this tending to the spiritual needs, the priestly function of the church.

“Working it Out on Your Own,” resulted in respondents disagreeing with the seven (7) items that were associated with this factor. For example, “A person with a strong character can get over mental conflicts by himself or herself, and would have little need of a psychiatrist, psychologist or a social worker,” and “There is something admirable in the attitude if a person is willing to cope with his or her conflicts and fears without resorting to professional help.” All scores in this factor, reflect a negative attitude by

respondents toward attempting to work out personal and emotional problems on their own, without the benefit of religious help. These results indicate that this is a factor that influences African American church goers to seek help from the church. This notion conflicts with the research of Sussman, Robins, and Earls (1987), which indicate that one reason frequently cited for not seeking professional help was that African Americans should be strong enough to handle their problems on their own.

“Stigma and Help Seeking,” resulted in the respondents disagreeing with the four (4) items that loaded on this factor. For example, “Having been mentally ill carries with it a burden of shame,” and “Having been a psychiatric patient is a blot on a person’s life.” All scores in this factor reflect a negative attitude by respondents toward the notion that stigma would prohibit them from seeking help from religious institutions for personal or emotional problems. The results indicate that this is a factor that would influence African American church goers to seek help from the church.

There is a wealth of information on stigma and the use of social services that indicate that stigma is a barrier to African Americans seeking help. The results of this study are in conflict with previous research. For

example, Neighbors (1985), which indicates that African Americans feel more stigmatized when seeking professional help and less so when seeking pastoral help. While the respondents indicate a negative attitude towards the notion that stigma would prohibit them from seeking help from non-religious professional institutions, when given a choice they would choose to seek help from the church. These results are again an indication that African American churchgoers trust the pastor, do not see the pastor as a threat to culture and identity, and believes the pastor is there to provide divine guidance.

Research Question: “Are particular demographic groups more likely to seek help from the church, or, are all groups of African American churchgoers equally prone to seek such help?”

The findings of this research established a consistency of attitudes about the help seeking behavior of African Americans as they relate to the church. The results indicate that income was the only demographic variable that positively regressed with participation in counseling and was a significant factor in seeking help from the church. This is consistent with Jackson (1986) whose research indicates that income and education were

significantly related to the frequency of help. The more money African American churchgoers make, the more likely they are to seek help from the church. This is significant because previous research shows that on one hand, African Americans of all income levels see the church as helpful, (Taylor et al., 1987) and on the other hand, low-income African Americans were more than twice as likely as high-income African Americans to use social services (Neighbors and Taylor, 1985). The importance of this research is that overall, church involvement and attitudes towards the church are factors that influence African American churchgoers in their help-seeking behavior. Other demographic variables such as age, gender, level of education, employment status, and marital status were not significant.

Those respondents with high incomes could easily purchase counseling services. However, this researcher believes those with high incomes trust the pastor to help them resolve their personal and emotional problems. They are seeking help from the pastor because they believe the pastor will provide them with divine guidance and are not a threat to culture or identity.

Limitations

This was a purposive sample and there is potential for self selection bias. Because the participants volunteered, the results must be read with caution and not generalized to the larger African American church going population.

One last question might have to do with the difference between those who participated in this study and those who did not. The researcher's suspicion is that those who participated thought the results might help the church and/or social service institutions. Others may have participated because the researcher is an ordained minister. Those who chose not to participate may be distrustful of researchers. Without asking the question to the respondents, these and any other answers are pure speculation at best.

Conclusion

As indicated in Chapter 2, the conceptual framework for this research was based on the help seeking behavioral model of James Green (1982). Greens model concerns itself with the culture of African Americans and how the environment and culture impact on one another. His model was designed to be socially and culturally sensitive. This model was immensely helpful to

approach to help seeking and not the more traditional linear sequential approach. Also as previously stated in Chapter 2, the person-in-environment approach is based on ecological systems theory, which is concerned with how systems affect individuals. The Green model does not focus on the individual only nor does the individual have to go through each step. Greens model aligns itself with the African American world view which based in a systems approach to problem solving.

It is clear, in the review of the literature, that the African American church has historically been the center of African American life, with impact on every aspect of that life (i.e. cultural, political, social, spiritual, and economics). Therefore, the African American church, which has been the center of African American life, has always used a systems approach in caring for African American people. While the term “systems theory” was not introduced by the African American church, this researcher would argue that the church has practiced this theory for more than one-hundred years. The Green model of help seeking, which is very concerned with culture and identity, is based on a help seeking model that has been part and parcel of African American culture and has contributed to answering the research questions and interpreting the findings of this study.

The major issue accentuated in this study is the strong relationship of African American church goers to the use of social services provided by the African American church. This research indicates that African American church goers in this study are seeking individual, family, and group counseling from the pastor at significantly higher rates than they are from psychologist, psychiatrist, and social workers. The results overwhelmingly indicate that the respondents are more likely to seek help from the church before going to traditional social service institutions.

Although African American church goers indicated a positive attitude toward professional help, the results of this study clearly indicate that African American church goers are not utilizing these services. The respondents agree that after immediate relatives, the pastor and the church, are the most sought after sources of help in times of stress. The low scores on the use of psychiatrist, psychologist, social workers, mental health, social service institutions and physicians indicate that these services are underutilized by African American church goers.

The respondents indicated that they trust the pastor and the church. A large number of the respondents also indicated that the church has been an agent of social, economic, and political change and therefore has helped the condition of all African Americans.

Implications For Social Work and Further Research

Traditional social services have historically considered the African American church as an informal referral and treatment source. On the other hand, traditional social services have no trouble viewing other church-based services such as Catholic and Lutheran social services as formal referral and treatment sources. Race has always been the issue to accepting the African American church as a formal and viable social service institution.

The reasons why the African American church should be considered a major institution for providing services to African Americans has been firmly established in the findings of this research. Unlike traditional social service institutions, which are often associated with oppression and racism, the African American church offers a supportive and familiar environment rooted in religion and spirituality. It would be beneficial for social workers to acknowledge that the African American church holds the allegiance of

many African Americans and exerts great influence over their behavior. The African American church, as a natural support system, must be recognized and utilized by social workers. The African American church is the “keeper” of African American culture and in Chapter 10 of Du Bois’ (1903) “The Souls of Black Folk” is an excellent critique of African American culture and the church. This should be required reading for all social workers.

A relationship between social work and the African American church would be unique. The uniqueness of the relationship between social work and the African American church would also be significant. Its uniqueness is found in that social work, in part, is designed to assist in the provision of certain services to this under served and under represented population. Its uniqueness is also found in that African American churches have access to and some influence over much of the African American population. Its significance is found in the National Baptist, USA; the National Baptist of America and the Protestant Baptist organizations which together boast of memberships of approximately 15 million. That is about half of the entire African American population in the United States. This number does not include the other African American denominational affiliations of which

there are many. More accurate figures are not obtainable since many African American churches do not make their statistics available. The researcher's ability to compile exact figures is complicated by two facts: (1) there are pastors who serve small congregations on a part time basis. (2) there are a variety of congregations which are not related to any major denomination and who do not keep statistics.

The significance also grows out of a need for a closer working relationship between social work and the African American church which can be a valuable resource for social workers. The relevance of this is to improve acceptability and accessibility of services in the African American community through direct referral and consultation between churches and social work practitioners.

It is important for social workers employed in social service institutions, to have an adequate working level of knowledge about the African American church if they are to assist African American church goers, who view their emotional and personal problems through a lense colored by both theology and psychology. Social workers have a lot of work to do in this regard. Social workers are not known for bolstering the self-esteem of African Americans. In assessing the strengths and coping skills of

African Americans, it is important for traditional social service institutions to be aware of the significance of and be sensitive to the role that spirituality and religion play in the lives of African American church goers. As this research shows, social workers are not considered as a source of help in time of stress.

The African American church has a role to play also. The African American church can be both instrumental and influential in helping African American church goers, with whom they already established a base of trust out of common suffering, to understand the importance of seeking help from a trained social worker. It is important for African American churches to understand that, unlike other social service professionals that may share concerns about the psychological issues of African Americans, social workers bring to the social service setting unique and special skills and training.

However good that training is, schools of social work should include courses on doing social work with African Americans and courses on pastoral care in their curricula because of the strong influence of the African American church. Schools of social work have an intellectual and moral responsibility, to teach prospective social workers culturally specific

techniques, that will enable them to provide the kinds of services that would help to better the quality of life of their clients. This researcher would argue that traditional social services use of individualistic approaches to problem solving with African Americans is a violation of the culture and therefore counter productive. African Americans view with suspicion theoretical models that view the individual as the problem. Within the African American community, culture plays a major role in how problems are defined. The social workers own perception and appreciation of that fact is critical in formulating a culturally informed response to the problem.

Social workers who are not African American must be aware of how they think and feel about African Americans and how African American church goers think and feel about them. They need to become aware of their personal biases and fears that might prevent them from embracing the all important religious experience of African Americans. Being aware of personal attitudes can help the social worker determine if he or she has a need to increase experiences with African Americans to learn more about culture, lifestyles, and patterns of communication.

Many social workers, in their attempt to provide services for African Americans often lack the experience of working with African Americans.

Many social workers graduate from social work programs, not having lived among or developed friendships with African Americans, and are unsure of how to approach and counsel African Americans. Proper academic as well as practical training will enable social workers to effectively assess the needs of African American church goers and provide a broad base of knowledge of the services related to social and religious functioning. This should be done because like it or not, the African American pastor is most often viewed as a psychologist, psychiatrist, social worker, and theologian by African American church goers. This study supports the view that, the pastor as a professional, is a main source of help because he or she has something different to offer in terms of spiritual resources.

African Americans will continue to seek help from the church. It is incumbent upon the social worker to employ strategies that will create alliances between the African American church and traditional social service institutions. Social workers can support the increasing number of African American churches that have social service programs to address the needs of African Americans. This includes accepting the history of the African

American church and the African American family sharing the major responsibility of guiding African Americans through the economic, political and social processes of this society (Wingfield, 1988; Hill, 1990).

This study could be greatly improved by conducting it on a national level. Given the numbers of African American church goers in America, it would be helpful in terms of providing quality social services, to conduct a national study that can be generalized to that specific population. Such a study might yield information that would help social service institutions and African American churches see the need to develop collaborative programs.

Future Research

The literature appears to be silent on the help seeking attitudes and behavior of African American non-church goers. What do non-church goers do and where do they go when they need help for personal or emotional problems? Or, are they just left to fall through the cracks? This issue needs to be specifically addressed in future research.

More research needs to be done on the exclusive religious experiences of African Americans as it relates to help seeking. Denominational teaching on health care and healing, influences the use of traditional social services.

Some denominations teach against blood transfusions, some teach against taking any kind of drugs including prescription drugs. Research on this issue by denomination would yield a wealth of information.

APPENDICES

APPENDIX A
DEMOGRAPHIC QUESTIONNAIRE

BACKGROUND INFORMATION

1. Gender:

- Male
 Female

2. Age: _____

3. Approximate annual income:

- Under \$10,000
 \$10,000-\$15,000
 \$16,000-\$20,000
 \$21,000-\$25,000
 \$26,000-\$30,000
 \$31,000-\$35,000
 \$36,000-\$40,000
 \$41,000 or more

4. Check the highest educational level you have attained:

- Middle school or less
 Some high school
 Some technical school
 Some college
 College graduate
 Graduate or professional school
 Graduate or professional school graduate

5. Employment status:

- Full-Time
 Part-Time
 Unemployed
 Disabled
 Retired
 Student

6. Marital status:

- Married
- Divorced
- Separated
- Widowed
- Single

CHURCH PARTICIPATION

1. Please check your denominational affiliation:

- Apostolic
- Assembly of God
- Baptist (American, National, Progressive)
- Roman Catholic
- Church of God
- Church of God in Christ
- First Church of God
- Greek Orthodox Catholic
- Holiness
- Independent/Charismatic
- Lutheran
- Methodist (A.M.E., A.M.E. Zion, C.M.E., United)
- Non-denominational
- United Church of Christ
- Other (Specify) _____

2. How long have you been a member at your present church?

- One year or less
- 2-3 years
- 4-5 years
- 6-7 years
- 8-9 years
- 10 or more years

3. Your church membership is:

- Extremely important
- Fairly important
- Fairly unimportant
- Not important at all

4. How often do you attend church?

- At least once a week
- Once or twice a month
- Three or four times a month
- Once or twice a year
- Five or six times a year

5. Do you participate in a ministry, auxiliary, or board in the church?

- Yes
- No

If yes, which one(s) _____

6. How often do you attend prayer meeting at your church?

- At least once a week
- Once or twice a month
- Three or four times a month
- Once or twice a year
- Five or six times a year
- Never

7. How often do you attend bible study at your church?

- At least once a week
- Once or twice a month
- Three or four times a month
- Once or twice a year
- Five or six times a year
- Never

8. Does your church provide some guidance in your day-to-day living?

- A lot
- Some
- Very little
- None at all

9. Does your church provide services such as:

(Check all that apply)

- Food
- Clothing
- Day Care center or nursery
- Alcohol or drug program
- Counseling (individual, family, group, or marriage)
- Senior outreach center
- Mental Health
- Housing
- Employment
- Tutoring

10. Have you ever used these services?

- Yes
- No

If yes, which services have you used: _____

11. How often have you used these services?

- Very often
- Often
- Never
- Fairly often
- Not very often

12. Were you satisfied with these services?

- Very satisfied
- Slightly satisfied
- Undecided
- Slightly dissatisfied
- Very dissatisfied

13. What is your level of activity in helping to provide these services?

- Very helpful
- Helpful
- Never
- Fairly helpful
- Not very helpful

COUNSELING ACTIVITIES

1. Have you ever participated in individual, family, or group counseling?

- Yes
- No

If you answered "Yes" to the above, please respond to the following:

Did that counseling take place in:

- The last 12 months
- 1-2 years
- 3-4 years
- 5-10 years
- 11 or more years

2. Were you counseled by a:

(Check all that apply)

- Pastor
- Psychologist
- Psychiatrist
- Social Worker
- Other (Specify) _____

Were you satisfied with the results?

- Very satisfied
- Slightly satisfied
- Undecided
- Slightly dissatisfied
- Very dissatisfied

3. If you were to encounter a period of great personal stress (such as the loss of a close friend or relative, loss of job, emotional, physical, or economic problems) to whom would you turn? Rank the sources in the order you would choose. For example, place "1" in the space of the person you would choose first, and so on. Please read the list before showing your choices. Be sure to place different numbers in each space provided.

- Immediate family member
- Other relative
- Close friend
- Pastor
- Psychologist
- Psychiatrist
- Social Worker
- Social Service Agency
- Physician's office
- Mental health center
- Other (Specify) _____
- No one, I would handle it myself

4. If you choose to seek professional counseling, how important would the counselor's religious beliefs be to you?

- Very important
- Somewhat important
- Undecided
- Somewhat unimportant
- Not important at all

If you answered "very important" would the counselor have to be a "Born Again" Christian?

Yes

No

If yes, explain why _____

5. If you were to experience depression, suicidal thoughts, marital problems, divorce, or other such stressful situations, to whom would you turn?

	Likely				Unlikely
	5	4	3	2	1
Immediate family member	5	4	3	2	1
Other relative	5	4	3	2	1
Close friend	5	4	3	2	1
Pastor	5	4	3	2	1
Psychologist	5	4	3	2	1
Social Worker	5	4	3	2	1
Social Service Agency	5	4	3	2	1
Other (Specify _____)	5	4	3	2	1
No one.					
I would handle it myself	5	4	3	2	1

APPENDIX B

ATTITUDES TOWARD SEEKING

PROFESSIONAL PSYCHOLOGICAL HELP SCALE

FISCHER AND TURNER (1970)

ATTITUDES ABOUT PROFESSIONAL HELP

Below are several statements concerning psychological, mental health, and religious issues. Read each statement carefully and show your frank response and opinion in your answers. There are no "wrong" answers. The right answers are your honest feelings and beliefs. It is very important that you answer every item.

1. Although there are clinics for people with mental troubles, I would not have much faith in them.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

2. If a good friend asked my advice about a mental problem, I might recommend that he/she see a psychiatrist, psychologist, or social worker.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

3. I would feel uneasy going to a psychiatrist, psychologist, or social worker because of what some people would think.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

4. A person with a strong character can get over mental conflicts by himself or herself, and would have little need of a psychiatrist, psychologist, or social worker.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

5. There are times when I have felt completely lost and would have welcomed professional advice for a personal or emotional problem.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

6. Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

7. I would willingly confide intimate matters to an appropriate person if I thought it would help me or a member of my family.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

8. I would rather live with certain mental conflicts than go through the ordeal of getting professional treatment.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

9. Emotional difficulties, like many things, tend to work out by themselves.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

10. There are certain problems that should not be discussed outside of one's immediate family.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

11. A person with a serious emotional disturbance would probably feel most secure in a good mental hospital.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

12. Keeping one's mind on a job is a good solution for avoiding personal worries and concerns.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

13. Having been a psychiatric patient is a blot on a person's life.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

14. I would rather be advised by a close friend than by a psychologist, psychiatrist, or social worker even for an emotional problem.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

15. A person with an emotional problem is not likely to solve it alone; he or she is likely to solve it with professional help.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

16. I resent a person, professionally trained or not, who wants to know about my personal difficulties.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

17. I would want to get professional attention if I were worried or upset for a long period of time.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

18. The idea of talking about personal problems with a psychologist, psychiatrist, or social worker strikes me as a poor way to get rid of emotional conflict.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

19. Having been mentally ill carries with it a burden of shame.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

20. There are experience in my life I would not discuss with anyone.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

21. It is probably best not to know everything about oneself.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

22. If I were experiencing a serious emotional crises at this point in my life, I would be confident that I could find relief in psychotherapy.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

23. There is something admirable in the attitude if a person is willing to cope with his or her conflicts and fears without resorting to professional help.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

24. At some future time, I might want to have psychological, psychiatric, or social work counseling.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

25. A person should work out his or her own problems; getting psychological, psychiatric or social work counseling would be a last resort.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

26. Had I received treatment in a mental hospital, I would not feel that it ought to be "covered up."

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

27. If I thought I needed professional help, I would get it no matter who knew about it.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

28. It is difficult to talk about personal affairs with highly educated people such as doctors, teachers, clergypersons, and counselors.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

29. I would want to get counseling from my senior pastor if I were worried or upset for a long period of time.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

30. I would feel uneasy going to my senior pastor because of what others might think.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

31. I would willingly confide intimate matters to my senior pastor if I thought it might help me or a member of my family.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

32. I think I would feel more comfortable going to a psychologist, psychiatrist, or social worker only if the suggestion came from my senior pastor.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

33. In most instances, if I needed professional help beyond family and friends, I would probably first seek help from my senior pastor before a psychologist, psychiatrist, or a social worker.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

34. I am confident that my senior pastor would provide more appropriate counseling for me as a religious person even if my problem were severe mental disturbance.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

35. Counseling from my senior pastor is the only professional counseling I might pursue because I would trust his or her guidance and counsel would be coming from God.

Agree	Probably Agree	Undecided	Probably Disagree	Disagree
5	4	3	2	1

36. My church provides helpful services.

Agree	Probably Agree	Undecided	Probably Disagree	Disagree
5	4	3	2	1

37. I would not go to a social service agency because white counselors cannot understand my problems.

Agree	Probably Agree	Undecided	Probably Disagree	Disagree
5	4	3	2	1

38. If I could see an African American counselor, I would go to a social service agency.

Agree	Probably Agree	Undecided	Probably Disagree	Disagree
5	4	3	2	1

39. My church will help me in a time of need.

Agree	Probably Agree	Undecided	Probably Disagree	Disagree
5	4	3	2	1

40. My church is a lot of help to me.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

41. I seek help from my church because it is sensitive to my needs.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

APPENDIX C
RELIGIOUS ATTITUDES SCALE

ATTITUDES ABOUT RELIGION

We now turn to another part of religious life, religious belief. Your beliefs may or may not be consistent with those of other members of your church or fellowship. I hope you will find that these questions allow you to express your own beliefs. It is very important that you answer every item even if you find it difficult to make up your mind.

1. To lead a good life, it is necessary to have some religious belief.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

2. Jesus Christ was an important and interesting historical figure but in no way divine.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

3. I genuinely do not know whether God exists.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

4. Religious faith is merely another name for belief which is contrary to reason.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

5. People without religious belief can lead just as good, moral and useful lives as people with religious beliefs.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

6. The existence of disease, famine and strife in the world makes one doubt some religious doctrines.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

7. The miracles recorded in the Bible really happened.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

8. It makes no difference to me whether religious beliefs are true or false.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

9. Christ atoned for our sins by his sacrifice on the cross.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

10. The truth of the Bible diminishes with the advance of science.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

11. Without belief in God, life is meaningless.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

12. The more scientific discoveries are made, the more glory of God is revealed.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

13. Religious education is essential to preserve the morals of our society.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

14. The proof that Christ was the son of God lies in the record of the Gospels.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

15. The best explanation of miracles is as an exaggeration of ordinary events into myths and legends.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	1
	4		2	

16. International peace depends on the world-wide adoption of religion.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

17. If you lead a good and decent life, it is not necessary to go to church.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

18. Parents have a duty to teach elemental Christian truths to their children.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

19. There is no survival of any kind after death.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

20. The psychiatrist rather than the theologian can best explain the phenomena of religious experience.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

21. On the whole, religious beliefs make for better and happier living.

Agree	Probably	Undecided	Probably	Disagree
5	Agree	3	Disagree	Disagree
	4		2	1

22. The humiliation and oppression experienced by African Americans are a sign that God is almost totally removed from the problems that confront African Americans.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

23. The recent progress made by African Americans is an indication of God's presence in the African American community.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

24. The African American church has helped the condition of all African Americans.

	Probably		Probably	
Agree	Agree	Undecided	Disagree	Disagree
5	4	3	2	1

APPENDIX D
COVER LETTER

Dear Church Member:

We are asking you to participate in a study of factors that influence the help-seeking behavior of African American church members. We have reviewed this study with your pastor and he/she agrees the results will be valuable for utilization in future ministries of your church and the religious community at large.

I am an ordained minister and a Doctoral student at the Ohio State University in Columbus. My major field of study is Social Work. My Doctoral Advisory Committee consists of three professors: along with Dr. Kilty are; Dr. Virginia Richardson, and Dr. James Upton. Their approval has also been given for this study.

We are asking for your participation by completing the following questionnaire. Most of the questions can be answered by a circle or check mark in the appropriate space. The questions will take about 20-30 minutes to answer completely.

As you complete the questions, we think you will become aware of the fact that they do address an important topic in African American churches today. Also, we believe the results will be of benefit not only to your local church, but the religious community as well.

We do appreciate your taking time to complete this questionnaire and helping us in this study.

Sincerely,

Rev. Tenolian R. Bell, MSW, M.Div.

Dr. Keith Kilty, Advisor and Chair

BIBLIOGRAPHY

Adams, J. E. (1970). Competent to counsel. Michigan: Zondervan.

Albers, R., & Scrivner, L. (1977). The structure of attrition during appraisal. Community Mental Health Journal, 13, 325-332.

Babbie, E. (1992). The practice of social research (6th ed.). California: Wadsworth.

Billingsley, A. (1992). Climbing jacob's ladder: The enduring legacy of african-american families. New York: Simon & Schuster.

Billingsley, A., & Caldwell, C. H. (1991). The church, the family and the school in the african-american community. Journal of Negro Education, 60, 427-440.

Blassingame, J. W. (1972). The slave community: Plantation life in the ante-bellum south. New York: Oxford University Press.

Booth, A., & Babchuk, N. (1972). A needed fourth step in the conceptual armamentarium of modern medicine. Social Science and Medicine, 6, 537-544.

Boyd-Franklin, N. (1989). Black families in therapy: A multisystems approach. New York: The Guilford Press.

Broman, C. L. (1987). Race difference in professional help seeking. American Journal of Community Psychology, 15 (4), 473-489.

Broman, C.L., Neighbors, H. W., & Taylor, R. J. (1989). Race differences in seeking help from social workers. Journal of Sociology and Social Welfare. 109-123.

Brown, B. B. (1978). Social and psychological correlates of help-seeking behavior among urban adults. American Journal of Community Psychology, 6, (5), 425-439.

Burgest, D. (Ed.) (1989). Social work practice with minorities (2nd ed.). New Jersey: The Scarecrow Press.

Chatters, L. M., Taylor, R. J., & Jackson, J. S. (1985). Size and composition of the informal helper networks of elderly blacks. Journal of Gerontology, 40, (5), 605-614.

Chatters, L. M., Taylor, R. J., & Jackson, J. S. (1986). Aged blacks' choices for an informal helper network. Journal of Gerontology, 41, (1), 94-100.

Croog, S., Lipson, A., & Levine, S. (1972). Help patterns in severe illness: The roles of kin network, non-family resources and institutions. Journal of Marriage and the Family, 34, 32-41.

Dubois, W. E. D. (1903). The souls of black folks. New York, Signet Books.

Edmonds, M. M. (1993). Physical health. In J. S. Jackson, L. M. Chatters, & R. J. Taylor (Eds.), Aging in black america (pp.151-166). London: Sage.

Felder, C. H. (1989). Troubling biblical waters: race, class, and family. New York: Orbis Books.

Fischer, E. H., Winer, D., & Abramowitz, S. (1983). Seeking professional help for psychological problems. In A. Nadler, J. D. Fischer, & B. M. DePaulo (Eds.), New directions in helping: Vol. 3. Applied perspectives in help-seeking and receiving (pp. 163-185). New York: Academic Press.

Fischer, E. H., & Turner, J. L. (1970). Orientation to seeking professional help: Development and research utility of an attitude scale. Journal of Consulting and Clinical Psychology, 35, (1), 79-90.

Genovese, E. D. (1972). Roll, jordan, roll. New York: Pantheon Books.

Glenn, N. D., & Gotard, E. (1977). The religion of blacks in the united states: Some recent trends and current characteristics. American Journal of Sociology, 83, 443-451.

Gottlieb, B. H. (1976). Lay influences on the utilization and provision of health services: A review. Canadian Psychological Review, 17, 126-136.

Gourash, N. (1978). Help-seeking: A review of the literature. Journal of Community Psychology, 6, (5), 413-423.

Green, J. W. (1982). Cultural awareness in the human services. New Jersey: Prentice Hall.

Gross, A., & McMullen, P. (1982). The help-seeking process. In V. Derlega & J. Grzelek (Eds.), Cooperation and helping behavior: Theories and research (pp. 305-326). New York: Academic Press Inc.

Gross, A., & McMullen, P. (1983). Models of the help-seeking process. In B. M. DePaulo, A. Nadler, & J. D. Fischer (Eds.), New directions in helping: Vol. 2. Help-seeking. New York: Academic Press.

Gruber, M. (1980). Inequality in the social services. Social Service Review, March, 59-75.

Gurin, G., Veroff, J., & Feld, S. (1960). Americans view their mental health. New York: Basic Books.

Guthrie, R. (1976). Even the rat was white. New York: Harper & Rowe.

Hendricks, L. E., Howard, C. S., & Caesar, P. P. (1981). Help-seeking behavior among select populations of black unmarried adolescent fathers: Implications for human service agencies. American Journal of Public Health, 71, (7), 733-735.

Hendricks, L. E., Howard, C. S., & Gary, L. E. (1981). Help-seeking behavior among urban black adults. Social Work, 26, (3), 161-163.

Hill, K. (1990). Politics and participation in the black church. The Western Journal of Black Studies, 14, (2), 123-135.

Hothersall, D. (1984). History of psychology. Pennsylvania: Temple University Press.

Humphrey-Patterson, C. D. (1993). Help-seeking attitudes of african-american pastors toward counseling. Unpublished doctoral dissertation, Michigan State University, Michigan.

Jackson, J. S., Chatters, L. M., & Taylor, R. J. (Eds.) (1993). Aging in Black America. California: Sage.

June, L. N. (1986). Enhancing the delivery of mental health and counseling services to black males: Critical agency and provider responsibilities. Journal of Multicultural Counseling and Development, 14, 39-45.

Kachigan, S. (1991). Multivariate statistical analysis: A conceptual introduction (2nd ed.). New York: Radius Press.

Kadushin, C. (1958-1959). Individual decisions to undertake psychotherapy. Administrative Science Quarterly, 3, 379-411.

Kadushin, C. (1969). Why people go to psychiatrist. New York: Atherton.

Katz, A. H., & Bender, E. I. (1976). Self help groups in western history and prospects. Journal of Applied Behavioral Science, 12, 265-282.

Kirst-Ashman, K. K., & Hull, G. H. (1993). Understanding generalist practice. Chicago: Nelson-Hall.

Kulka, R. A., Veroff, J., & Douvan, E. (1979). Social class and the use of professional help for personal problems: 1957 and 1976. Journal of Health and Social Behavior, 20, (3), 2-17.

Lincoln, C. E., & Mamiya, L. H. (1990). The black church in the african american experience. Durham: Duke University Press.

Lurie, O. R. (1974). Parents attitudes toward children's problems and toward the use of mental health services: Socioeconomic differences. American Journal Orthopsychiatry, 44, 109-120.

McKinlay, J. B. (1972). Some approaches and problems in the study of the use of services: An overview. Journal of Health and Social Behavior, 13, 115-152.

Martin, J. M., & Martin, E. P. (1985). The helping tradition in the black family and community. Maryland: National Association of Social Workers.

Morrison, J. D. (1991). The black church as a support system for black elderly. Journal of Gerontological Social Work, 17, (1/2), 105-120.

Neighbors, H. W., Jackson, J. S., Bowman, P. J., & Gurin, G. (1983). Stress, coping, and black mental health: preliminary findings from a national study. Prevention in Human Services, 2, (3), 5-29.

Neighbors, H. W., & Jackson, J. S. (1984). The use of informal and formal help: Four patterns of illness behavior in the black community. American Journal of Community Psychology, 12, (6), 629-644.

Neighbors, H. W. (1985). Seeking professional help for personal problems: Black american's use of health and mental health services. Community Mental Health Journal, 21, 156-166.

Neighbors, H. W. (1984). Professional help use among black americans: Implications of unmet need. American Journal of Community Psychology, 12, (5), 551-566.

Neighbors, H. W., & Howard, C. S. (1987). Sex differences in professional help seeking among adult black americans. American Journal of Psychology, 15, (4), 403-415.

Neighbors, H. W., & Taylor, R. J. (1985). The use of social service agencies by black americans. Social Service Review, 59, (2), 258-268.

Parker, W. M., & McDavis, R. L. (1989). Attitudes of blacks toward mental health agencies and counselors. In D. Burgest (Ed), Social work practice with minorities (pp.14-25). New Jersey: The Scarecrow Press, Inc.

Richardson, V. (1992). Service use among urban african american elderly people. Social Work, 37, (1), 47-54.

Richardson, B. L. (1991). Utilizing the resources of the african american church: Strategies for counseling professionals. In L. Courtland & B. L. Richardson (Eds.), Multicultural issues in counseling: New approaches to diversity (pp.65-75). Alexandria, VA: American Association for Counseling and Development.

Riley, M., & Foner, A. (Eds.) (1968). Aging and society. New York: Sage.

Roberts, J. D. (1980) Roots of a black future: Family and church. Philadelphia: Westminster Press.

Rosenblatt, A., & Mayer, J. E. (1972). Help seeking for family problems: A survey of utilization and satisfaction. American Journal of Psychiatry, 128:2, (3), 126-130.

Rosenstock, I. M. (1969). Prevention of illness and maintenance of health. In J. Kosa, A. Antonovsky, & I. K. Zola (Eds.), Poverty and health: A sociological analysis (pp. 168-190). Cambridge, Mass.: Harvard University Press.

Smith, J. M. (1993). Function and supportive roles of church and religion. In J. S. Jackson, L. M. Chatters, & R. J. Taylor (Eds.), Aging in Black America (pp. 125-147). London: Sage.

Smith, C. W. (1985). The church in the life of the black family. Valley Forge: Judson Press.

Spence, S. A., & Atherton, C. R. (1991). The black elderly and the social service delivery system: A study of factors influencing the use of community-based services. Journal of Gerontological Social Work, 16, (1/2), 19-35.

Sue, S., McKinney, H., Allen, D., & Hall, J. (1974). Delivery of community mental health services to black and white clients. Journal of Consulting and Clinical Psychology, 42, 794-801.

Sussman, L. K., Robins, L. N., & Felton, E. (1987). Treatment-seeking for depression by black and white americans. Social Science and Medicine, 24, (3), 187-196.

Taylor, R. J. (1993). Religion and religious observances. In J. S. Jackson, L. M. Chatters, & R. J. Taylor (Eds.), Aging in Black America (pp. 101-123). London: Sage.

Taylor, R. J., Thornton, M., & Chatters, L. M. (1987). Black american's perceptions of the sociohistorical role of the church. Journal of Black Studies, 18, 123-138.

Taylor, R. J., & Chatters, L. M. (1986). Church -based informal support among elderly blacks. Gerontologist, 26, 637-642.

Taylor, R. J., & Chatters, L. M. (1988). Church members as a source of informal social support. Review of Religious Research, 30, 193-203.

Taylor, R. J. (1986). Religious participation among elderly blacks. The Gerontologist, 26:6.

Taylor, R. J. (1986a). Patterns of informal support to elderly black adults: Family, friends, and church members. Social Work, 34, (3), 205-211.

Thomas, L. R. (1976). Biblical faith and the black american. Valley Forge: Judson Press.

U. S. Department of Commerce, Bureau of the Census, (1996). Statistical abstract of the United States. Washington DC: U. S. Government Printing Office.

Walker, C. (1992). Biblical counseling with african-americans: Taking a ride in the ethiopian's chariot. Michigan: Zondervan.

Wellman, B. (1973). Community ties and support systems: From intimacy to support. In L. Bourne, R. McKinnon, & J. Simmons (Eds.), The form of cities in central canada. Toronto: University of Toronto Press.

Wills, T., & DePaulo, B. (1991). Interpersonal analysis of the help-seeking process. In C. R. Snyder, & R. F. Donelson (Eds.), Handbook of social and clinical psychology: The health perspective (pp. 350-375). New York: Pergamon Press.

Wimberly, E. P. (1979). Pastoral care in the black church. Nashville: Abingdon Press.

Wimberly, E. P. (1982). Pastoral counseling and spiritual values. Nashville: Abingdon Press.

Wimberly, E. P. (1991). African american pastoral care. Nashville: Abingdon Press.

Wingfield, H. L. (1988). The historical and changing role of the black church: The social and political implications. The Western Journal of Black Studies, 12, (3), 127-133.

Woodson, C. G. (1921). The history of the negro church. Washington, D. C.: Associated Press.