

Reactions and Strategies of German Catholic Priests to Cope with Phases of Spiritual Dryness

Arndt Büssing¹  · Jochen Sautermeister² · Eckhard Frick^{3,4} · Klaus Baumann⁵

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Abstract We investigated strategies of 763 Catholic priests (response rate 36%) to deal with phases of spiritual dryness, specifically their reactions toward these feelings, and which strategies were used. Most priests have found strategies to cope with feelings of spiritual dryness. Those who have managed to overcome these phases were stimulated “all the more to help others” and experienced “deeper spiritual clarity and depth.” Whatever strategy was chosen (we differentiated eight strategies in various combinations), there were no significant differences for priests’ self-efficacy expectation, transcendence perception or life satisfaction. Instead, we found significant differences for social support ($F = 6.5$; $p < 0.0001$) and somatization ($F = 3.4$; $p = 0.002$).

Keywords Spiritual dryness · Strategies · Coping · Catholic priests · Life satisfaction

Introduction

Spiritual dryness, insecurity or even doubts about the relationship with God of pastoral workers may affect the quality of their work engagement and empathic support and spiritual care of community members on the one hand and result in conflicts with their own

✉ Arndt Büssing
Arndt.Buessing@uni-wh.de

¹ Institute for Integrative Medicine, Faculty of Health, Witten/Herdecke University, Gerhard-Kienle-Weg 4, 58313 Herdecke, Germany

² Faculty of Theology, University of Bonn, Bonn, Germany

³ Department of Anthropological Psychology, School of Philosophy, Munich, Germany

⁴ Research Centre Spiritual Care, Department of Psychosomatic Medicine and Psychotherapy, Technische Universität München, Munich, Germany

⁵ Faculty of Theology, Albert-Ludwig University, Freiburg, Germany

faith and spiritual life on the other hand. We recently found that quite a remarkable proportion of Catholic priests experience phases of *spiritual dryness* (Büssing et al. 2016), i.e., 46% of the priests report such phases to occur occasionally, 12% often or regularly, while 36% experience it seldom and 6% not at all. This “spiritual dryness” (as measured with the Spiritual Dryness Scale) was operationalized as a perception of being distant from God, regardless of the efforts to draw close to Him; that own prayers go unanswered; to be spiritually empty, or the perception of not being able to give any more (both in terms of spiritual exhaustion), and even feelings of being abandoned by God. Thus, “spiritual dryness” refers foremost to a felt inability to get in contact with God and to communicate with Him (i.e., in prayer), but is also in relation to others and oneself. Theoretically, “spiritual dryness” can be distinguished from “spiritual desolation” which is an emotional state of bitterness and melancholy. In the aforementioned study, phases of “spiritual dryness” were predicted best by lacking perception of the transcendent in daily life [which refers to the perception of God’s presence, God’s love, desire to be closer to God, etc. (Underwood and Teresi 2002)] and low sense of coherence [which refers to a person’s ability or feelings that life events and situations are predictable and comprehensible, that one has the resources to manage them, and that it is worth to face the challenges which are seen as meaningful (Antonovsky 1987)], but also depressive and burnout symptoms (Büssing et al. 2016). Thus, empirically both concepts—spiritual dryness and spiritual desolation—may overlap because the latter may be also the result of the first. Both refer to one’s perception to perceive the transcendent or not and subsequent psycho-emotional reactions. On the other hand, a further facet of “spiritual dryness” is conceived as God puts people to the “test” to prepare them for spiritual growth. In the writings of the mystics and saints, this is called the “dark night of the soul” (Saint John of the Cross; 1542–1591) (Daeschler 1937). Obvious signs of “spiritual dryness” or even “desolation” can be found also in the testimony of Saint Mother Teresa (1910–1997), stating spiritual “dryness,” “darkness,” and “loneliness” (Kolodiejchuk/Mother Teresa 2009).

These phases are seen as necessary, are (in most cases) transient, and they may recur. Nevertheless, spiritual feelings such as desolation and loss of meaning are very often near to an identity crisis with symptoms of psychological depression. Such phases of spiritual doubts or insecurity are not a new phenomenon. They are mentioned with different names and content and are probably experienced by all religious people who are deeply devoted to a spiritual life, too (Lüttich 2004; Underhill 1990).

A related construct might be the concept of “spiritual struggles.” Exline et al. (2014) operationalized six dimensions: (1) conflict or insecurity in own relationship with God (divine); (2) persecution or temptation by the devil or evil representatives (demonic); (3) conflicts with (important/mighty) people or groups from religious/spiritual groups (interpersonal); (4) concerns with the morality of own actions and desires (moral); (5) doubts about the importance, purpose or meaning of own life (ultimate meaning); and (6) feeling discomfort with own doubts and questions regarding religion/spirituality (doubt). “Spiritual dryness” as we have operationalized it may be related particularly to the divine dimension of this “spiritual struggle” construct, but not necessarily or explicitly though unconsciously with the other dimensions.

Any kinds of “spiritual struggles” can also be found as a reaction toward chronic or acute disease. In persons admitted to an acute medical rehabilitation unit, non-chaplain healthcare professionals identified 7% of these patients as “possibly experiencing religious/spiritual struggle” using a brief screening protocol. “Spiritual struggles” were also addressed in response to disease symptoms using Pargament’s Negative Religious Coping subscale (i.e., felt abandoned or punished by God, questioning God’s love or power; the

devil made this happen) (Pargament et al. 2001). Obviously, similar experiences may occur in quite different contexts. Negative religious coping as a reaction was found to be associated with anxiety, depression, somatization, and specific forms of psychopathology (i.e., paranoid ideation, obsessive compulsiveness) (McConnell et al. 2006). Abu-Raiya et al. (2016) found an interaction effect of these spiritual struggles and adults' depressive symptoms which was moderated by their religious commitment and life sanctification.

Thus, although these different concepts share some similar aspects, they are nevertheless different, both conceptually and clinically. One has to differentiate specific spiritual struggles as the consequence of *chronic illness and suffering* (i.e., feelings of abandonment, punishment, guilt), of *conflicts* with religious superiors or religious community (implying an interpersonal and moral dimension) or else significant others, and more general spiritual struggles as the consequence of one's spiritual life in terms of a *relation* with God (i.e., loss of trust, faith, dryness). Such differentiations and their patient disentanglement are part of what is called "spiritual discernment" in Catholic tradition, an "art" especially developed by St. Ignatius of Loyola and the synthesis provided in his book of "Spiritual Exercises" (nn. 313–336). Spiritual discernment seeks to enable the person to take a distance and reflect both in dialogue and in prayer on the meaning and dynamic direction of one's emotions and state of mind, including spiritual dryness.

Depending on the own (spiritual) insight and affective stability, phases of spiritual dryness, which were observed in primarily healthy persons (Büssing et al. 2013, 2016), can either result in depressive states of alienation from God (and loss of faith), or, when these phases are overcome, may result in spiritual growth (Lüttich 2004; Underhill 1990). One may argue that these phases are an essential aspect of spiritual growth processes of spiritual persons, including priests in particular, but they can be experienced as a (negative) crisis, too, when they are not recognized and adequately supported by spiritual supervisors or psychologists. Noteworthy enough, the rules of spiritual discernment (n. 318) recommend that no life-changing decision should be taken in phases of desolation which for many aspects may be very much alike spiritual dryness.

While our previous study on spiritual dryness of pastoral workers described which variables may have an influence on these phases (Büssing et al. 2016), the present study aims to investigate (1) to what extent priests were able to cope with these phases of spiritual dryness, (2) their reactions toward these feelings (i.e., caring for others and/or spiritual depth), and (3) which strategies they used to overcome these phases of spiritual dryness. We were particularly interested whether or not (and how) the reactions, when overcoming these phases, differ with respect to the chosen strategies. We assumed that these strategies will be differentially associated with the available resources priests may use, i.e., abilities to perceive the transcendence in daily life (as an extrinsic religious relational resource), self-efficacy expectation (as an intrinsic psychological resource), and social support (as an extrinsic relational resource). We further assumed that these strategies will be related differentially to priests' global life satisfaction and psychosomatic health as outcome variables, too. One may assume that priests' perception of the transcendent (namely God) will be an important and beneficial resource but also social support—which both are considered as relational resources. Because we have found that priests' self-efficacy expectations are slightly lower compared to other pastoral workers (Frick et al. 2015), one may assume that this psychological resource might not be too important to help coping with spiritual dryness.

Materials and Procedures

Participants

All individuals of this anonymously conducted cross-sectional study (under the responsibility of the heads of the study group represented by Eckhard Frick (central coordinator), Klaus Baumann, Arndt Büssing, Christoph Jacobs, and Wolfgang Weig) were informed about the study either by the personnel managers of the dioceses or by our independent study office and invited by a separate letter from our study office to participate. This separate letter informed about the purpose of the study, assured confidentiality, underlined their right not to participate, and asked to provide informed consent by providing the filed anonymous questionnaires.

Within the larger German Pastoral Workers Study, Catholic priests were recruited from 22 of the 27 German dioceses (Frick et al. 2015). The response rate was 36.0% (ranging from 16 to 52%). Participation was possible by pencil-and-paper version or online questionnaire. All priests returned their paper questionnaire directly to the study office via surface mail.

For this specific analysis, we used a subsample of 763 Catholic priests who responded to the *Spiritual Dryness Scale* and provided information about their strategies. This specific research question was addressed in four dioceses (i.e., Paderborn, Mainz, Trier, and Aachen).

Measures

Spiritual Dryness Scale

To operationalize feelings of “spiritual dryness,” we used the 6-item *Spiritual Dryness Scale* (SDS) which had a good internal consistency (Cronbach’s $\alpha = 0.87$) (Büssing et al. 2013). The instrument addresses whether or not individuals have experienced such phases of “spiritual dryness,” feelings that God is distant, that one’s prayers go unanswered, to be “spiritually empty” or not being able to give any more (both in terms of a spiritual exhaustion), and finally, feelings of being abandoned by God. The items were formulated in such a way that they fit to daily life experiences of religious individuals. Response options were *not at all* (1), *rarely* (2), *occasionally* (3), *fairly often* (4), and *regularly* (5). The cited SDS scores were mean scores and represent the perceived lack/shortage.

Reactions Toward Phases of Spiritual Dryness

To address the reactions toward phases of spiritual dryness, we added three items, i.e.,

- I have found strategies to cope with these feelings.
- These feelings stimulate me all the more to help others.
- After these phases of “loneliness of God” or “spiritual dryness,” I experience a deeper spiritual clarity and depth.

We used the same response options as described above, namely *not at all* (1), *rarely* (2), *occasionally* (3), *fairly often* (4), and *regularly* (5).

In case respondents have found such strategies, they were invited to specify these using free-text formulations. To categorize these formulations, we followed the inductive process

of category formulation according to Mayring (2010) and a person-centered approach according to Langer and Rogers (2000), resulting in a 2-level category system. First the free-text phrases were transferred to an Excel table, which were then coded and categorized by two independent raters (JS and EF). They ascribed all identified contents to a main category and to sub-categories of meaning. These inductively formed category systems found by both reviewers were then compared, and the category descriptions clarified and hermeneutical differences discussed. Then, the next step was to find a basic category system which was then reviewed in a third step according to the overall text material and then slightly revised. This inductively formed category system with the levels of main and sub-category is the main basis for the categorization of the different units of meaning.

Daily Spiritual Experiences

To measure priests' perception of the transcendent in daily life, we referred to the *Daily Spiritual Experience Scale* (DSES-6; $\alpha = 0.91$) which uses specific items such as feeling God's presence, God's love, desire to be closer to God (union), finding strength/comfort in God, and being touched by beauty of creation (Underwood and Teresi 2002). The response categories are *many times a day, every day, most days, some days, once in a while, and never/almost never*. Item scores were finally summed up.

Self-Efficacy Expectation

To assess individuals' self-efficacy, we used the German language *General Self-Efficacy Scale* (GSE) (Schwarzer and Jerusalem 1995). The GSE scale has a good to very good internal consistency, i.e., Cronbach's α in German samples ranges from 0.80 to 0.90 (Hinz et al. 2006). Specific items are "If someone opposes me, I can find means and ways to get what I want," "When I am confronted with a problem, I can usually find several solutions," "I am confident that I could deal efficiently with unexpected events," and "No matter what comes my way, I am usually able to handle it." The 10 items are evaluated using a 4-point Likert scale ranging from disagreement to agreement and then summed up. High scores indicate higher (optimistic) self-efficacy.

Social Support

To measure priests' social support, we used the 14-item short version of the *Social Support Questionnaire "F-SozU"* (Fydrich et al. 2009). The internal consistency of the questionnaire is very good (Cronbach's $\alpha = 0.94$). The items refer to social support (i.e., to be accepted by others, have persons who share emotions), concrete support (i.e., someone cares for the flat when absent, have familiar persons one can always count on for his/ her help, to get lent something by friends or neighbors), and social integration (i.e., belong to a circle of friends to meet with, take action with others). Items were scored on a 5-point Likert scale (ranging from *does not apply* to *definitely applies*).

Psychosomatic Health

To measure psychosomatic distress, Derogatis (2000) developed the 18-item *Brief Symptom Inventory* (BSI-18), a short form of the *Symptom Check List* (SCL-90-R). This instrument has three scales with 6 items each: somatization, depression, and anxiety.

Specific items are feelings of worthlessness, loneliness, and being down, having no interest in anything, hopelessness about the future, pains in the heart and chest, nausea or upset stomach, nervousness, restlessness, being scared for no reason, and spells of terror or panic. The German version has good reliability coefficients for the respective subscales (somatization: $\alpha = 0.79$; depression: $\alpha = 0.84$; anxiety: $\alpha = 0.84$) (Franke et al. 2011). All perceptions are scored on a 5-point Likert scale ranging from *not at all* to *very strongly*.

Life Satisfaction

To measure life satisfaction, we relied on the German version of Diener's *Satisfaction with Life Scale* (SWLS) (Diener et al. 1985). This 5-item scale ($\alpha = 0.92$) uses general phrasings such as "In most ways, my life is close to my ideal," "The conditions of my life are excellent," "I am satisfied with my life," "So far I have gotten the important things I want in my life," and "If I could live my life over, I would change almost nothing." The extent of respondents' agreement or disagreement is indicated on a 7-point Likert scale, ranging from *strongly agree* to *strongly disagree*.

Statistical Analyses

Descriptive statistics were computed with SPSS 22.0. Given the exploratory character of this study, the significance level was set at $p < 0.05$.

Results

Participants

We analyzed data of Catholic priests from 4 dioceses ($n = 763$). Among them, 12% were between 25 and 45 years old, 25% between 45 and 55 years, 18% between 55 and 65 years, 18% between 65 and 75 years, and 27% older than 75 years.

Their mean DSES score was 23.2 ± 5.5 (range 5–36), indicating moderately high transcendence perception, and mean SDS scores 2.5 ± 0.7 (range 1–5), indicating moderate spiritual dryness scores. Their depressive symptoms scored low (3.7 ± 4.2 ; range 0–24).

Reactions Toward Phases of Spiritual Dryness

As shown in Table 1, 463 (61%) of priests in this sample responded to the item asking whether or not they had found strategies to cope with phases of spiritual dryness, while 39% did not respond to this item but nevertheless to the "outcome" items.

These feelings of "spiritual dryness" stimulated 36% of the them (fairly often or even regularly) to help others, 30% either not or only rarely, and 34% occasionally. Thirty-four percent stated that after these phases, they experienced deeper spiritual clarity and depth, 24% either not at all or rarely, and 41% occasionally.

Table 1 Frequency of experienced reactions toward phases of spiritual dryness in the sample of all priests ($n = 763$)

	Not at all (%)	Rarely (%)	Occasionally (%)	Fairly often (%)	Regularly (%)
I have found strategies to cope with these feelings ($n = 463$)	5	10	26	44	15
These feelings stimulate me all the more to help others ($n = 618$)	12	19	34	29	7
After these phases of loneliness of God “or spiritual dryness,” I experience a deeper spiritual clarity and depth ($n = 654$)	6	19	41	27	7

Strategies to Cope with Phases of Spiritual Dryness

Relying on the individual free texts from 157 out of 763 priests (21%), we were able to categorize 8 main strategies (often combined), i.e.,

1. Explicit spiritual practices (i.e., personal prayer, meditation) $n = 52$
2. Spiritual attitudes (i.e., trust in God, Christocentric orientation, openness to the new) $n = 72$
3. Interpersonal communication (i.e., family, friends, spiritual community) $n = 50$
4. Charitable acting (helping others, etc.) $n = 10$
5. Self-Care (i.e., private leisure life, holidays, sports) $n = 26$
6. Avoidance strategies (i.e., repression, inner retirement, distraction) $n = 26$
7. Accompanied self-reflection and experience (spiritual counselor, psychotherapy, etc.) $n = 22$
8. Other strategies $n = 3$

While 606 priests did not state a specific strategy, 157 did state some in various combinations, including particularly *Explicit spiritual practices* and *Spiritual attitudes*, which were thus combined to *Spirituality* ($n = 46$; further along with other strategies). *Interpersonal communication* and *Self-Care* were often found in association ($n = 25$). Moreover, *Accompanied self-reflection and experience* were found mostly in association with *Interpersonal communication* and *Self-Care*, and thus, these were combined to *Self-Care/Interpersonal Communication* (SC/IC; $n = 31$). *Avoidance* strategies were seen as an important negative strategy which was stated alone by a few persons ($n = 14$), but also in combination with others ($n = 12$), particularly with *Spirituality* ($n = 9$). Finally, we had the following categories: *Spirituality* ($n = 46$); *SC-IC* ($n = 31$); *Spirituality + SC/IC* ($n = 47$); and *Avoidance* ($n = 26$).

Strategies to Cope with Phases of Spiritual Dryness and Their Consequences

We have seen that most participants have found strategies to deal with these phases. Now we intended to analyze whether the chosen strategies may have some “effectiveness.” This analysis refers to the subsample of priests who stated specific strategies. Whether the non-

respondents did not have any specific strategy to cope, or they did not regard their chosen strategies as beneficial, or they were unable to remember, is unclear.

As shown in Table 2, particularly those who stated *Avoidance* strategies have found ways to cope with these feelings only rarely or not at all, while those who relied on *SC/IC* (with or without *Spirituality* as an additional strategy) were more often or even regularly able to cope. The response pattern differs significantly between the strategy groups ($p = 0.012$; Pearson χ^2). With respect to the mean scores of this specific item, the results are significantly different between the groups ($F = 5.88$; $p < 0.0001$).

Particularly, priests who have stated *Spirituality* and/or *SC/IC* strategies stated that spiritual dryness stimulated them to help others fairly often or even regularly (46.1, 42.4, and 43.5%, respectively), while this was true only for 18.2% of those with *Avoidance* strategies (Table 3). The response pattern differs significantly between the strategy groups ($p = 0.010$; Pearson χ^2). With respect to the mean scores of this item, the results do not significantly differ between the groups ($F = 1.66$; n.s.).

When overcoming these phases of spiritual dryness particularly, priests who use *Spirituality* plus *SC/IC* strategies reported more often deeper spiritual clarity and depth when compared to the other groups, while again the few priests who stated *Avoidance* had lower agreement scores (Table 4). However, these differences are statistically not significant ($p = 0.745$; Pearson χ^2). With respect to the mean scores of this item, the results do not significantly differ between the groups, either ($F = 1.75$; n.s.).

Chosen Strategies and Their Associations with Priests' Available Resources and Outcomes

Next we analyzed whether priests using the identified strategies differ with respect to their available resources, i.e., transcendence perception (as an extrinsic religious source), self-efficacy expectation (as an intrinsic psychological source), and social support (as an extrinsic relational source), and how they are related to their global life satisfaction and psychosomatic health as outcome variables.

We found that in most cases, the strategies do not have a significant impact on the analyzed variables (Table 5). Neither transcendence perception as an extrinsic spiritual

Table 2 Strategies to cope with spiritual dryness phases and effectiveness

	I have found strategies to cope with these feelings				
	Not at all	Rarely	Occasionally	Fairly often	Regularly
None stated ($n = 354$)	5.9	12.4	28.8	40.1	12.7
<i>Spirituality</i> ($n = 31$)	0.0	3.2	22.6	58.1	16.1
<i>SC/IC</i> ($n = 22$)	0.0	0.0	18.2	59.1	22.7
<i>Spirituality</i> + <i>SC/IC</i> ($n = 28$)	3.6	0.0	7.1	57.1	32.1
<i>Avoidance</i> ($n = 11$)	18.2	18.2	18.2	36.4	9.1
<i>Avoidance</i> strategies + others ($n = 12$)	0.0	0.0	25.0	58.3	16.7
All strategies	5.2	10.3	26.2	43.7	14.6

Results are in % of respective category and are statistically different ($p = 0.012$; Pearson χ^2)

SC/IC Self-Care/Interpersonal Communication

Table 3 Strategies to cope with spiritual dryness phases and stimulation to help others

	These feelings stimulate me all the more to help others				
	Not at all	Rarely	Occasionally	Fairly often	Regularly
None stated ($n = 471$)	10.8	20.0	34.6	28.2	6.4
Spirituality ($n = 39$)	10.3	12.8	30.8	28.2	17.9
SC/IC ($n = 33$)	9.1	15.2	33.3	42.4	0.0
Spirituality + SC/IC ($n = 46$)	15.2	15.2	26.1	23.9	19.6
Avoidance ($n = 11$)	18.2	27.3	36.4	18.2	0.0
Avoidance strategies + others ($n = 13$)	38.5	0.0	30.8	30.8	0.0
All strategies	11.7	18.6	33.6	28.5	7.5

Results are in % of respective category and are statistically different ($p = 0.010$; Pearson χ^2)

SC/IC Self-Care/Interpersonal Communication

Table 4 Strategies to cope with spiritual dryness phases and experience of deeper spiritual clarity and depth

	I experience deeper spiritual clarity and depth				
	Not at all	Rarely	Occasionally	Fairly often	Regularly
None stated ($n = 518$)	6.4	18.3	42.1	26.6	6.6
Spirituality ($n = 39$)	5.1	17.9	46.2	23.1	7.7
SC/IC ($n = 31$)	0.0	25.8	38.7	32.3	3.2
Spirituality + SC/IC ($n = 43$)	2.3	11.6	37.2	32.6	16.3
Avoidance ($n = 9$)	11.1	33.3	33.3	22.2	0.0
Avoidance strategies + others ($n = 10$)	10.0	20.0	40.0	20.0	10.0
All strategies	5.8	18.5	41.7	26.9	7.1

Results are in % of respective category and are statistically not different ($p = 0.745$; Pearson χ^2)

SC/IC Self-Care/Interpersonal Communication

source nor self-efficacy expectation as an intrinsic psychological source differed significantly between the strategy groups. However, social support as an extrinsic relational source was significantly lower in priests with *Avoidance* strategies when compared to the other strategies; *Avoidance* plus other strategies had higher scores than *Avoidance* alone. Moreover, *SC/IC* (with or without *Spirituality*) had higher social support scores compared to the other strategies.

With respect to the “outcomes” such as life satisfaction or psychosomatic health, neither life satisfaction nor anxiety scores differed significantly between the groups. However, we found significant differences for somatization ($F = 3.77$; $p = 0.002$). Higher scores were observed in priests who stated *Avoidance* (alone) strategies, while those who stated *Avoidance* plus other strategies had much lower somatization scores. Further, depressive symptoms were in trend higher in the *Avoidance* users when compared to the priests using other strategies.

Table 5 Extracted strategies to overcome spiritual dryness and their relation to priests' resources and outcomes

	Resources				Outcomes			
	Spiritual dryness	DSES	Self-Efficacy Expectation	Social Support	Life Satisfaction	Depressive symptoms	Anxiety	Somatization
All priests (<i>n</i> = 754)								
z-mean	0.46	-0.33	0.00	0.00	0.00	0.00	-0.01	-0.01
z-SD	1.04	1.06	1.00	1.00	1.00	1.00	0.99	0.99
No strategy stated (<i>n</i> = 603)								
z-mean	0.45	-0.36	-0.01	-0.03	0.00	0.02	-0.03	-0.02
z-SD	1.03	1.05	1.00	1.01	1.01	1.04	1.00	0.98
Spirituality (<i>n</i> = 43)								
z-mean	0.51	-0.13	0.10	0.09	0.26	-0.13	0.14	-0.02
z-SD	1.05	1.17	0.97	0.88	0.88	0.67	0.91	0.94
SC/IC (<i>n</i> = 34)								
z-mean	0.60	-0.31	0.24	0.31	-0.03	-0.04	0.04	-0.09
z-SD	1.00	1.03	0.86	0.70	0.93	0.89	0.94	1.03
Spirituality + SC/IC (<i>n</i> = 49)								
z-mean	0.19	-0.06	0.08	0.36	0.03	-0.28	-0.08	-0.10
z-SD	1.00	1.05	1.04	0.73	0.90	0.52	0.94	0.86
Avoidance strategies alone (<i>n</i> = 12)								
z-mean	1.01	-0.86	-0.54	-1.33	-0.56	0.59	0.75	1.19
z-SD	1.36	1.17	1.03	1.73	1.15	1.66	1.51	1.52
Avoidance strategies + others (<i>n</i> = 14)								
z-mean	0.61	-0.44	-0.12	0.03	-0.45	-0.19	0.14	-0.03
z-SD	1.31	1.22	1.12	0.87	1.14	0.65	0.77	0.86
F value	1.20	1.23	1.28	6.56	1.85	2.00	1.79	3.77
P value	n.s.	n.s.	n.s.	< 0.0001	n.s.	0.080	n.s.	0.002

Data are standardized z-factor values

Values with *p* < 0.01 are highlighted (bold)

SC/IC Self-Care/Interpersonal Communication

Discussion

In research literature, one may find much more about the beneficial effects of spirituality/religiosity (overview in Koenig et al. 2012; Cobb et al. 2012) than about religious persons' spiritual dryness or, more generally, about their struggles and religious doubting (Proeschold-Bell et al. 2014). Among adults from the USA, Ellison et al. (2013) investigated two types of spiritual struggles (i.e., divine struggles/troubled relationships with God, and struggles with belief/religious doubts) and measured their associations with aspects of psychopathology such as depressed affect, anxiety, phobic anxiety, and somatization. Of special interest for our context is their finding "that individuals who identify themselves as highly religious (...) experience the strongest negative effects of spiritual struggles in comparison with persons who identify themselves as moderately religious, or not religious at all." This would fit in principle to our study that priests are assumed to be highly religious and are thus susceptible to phases of spiritual dryness. However, there is little doubt that persons who are less interested in religious issues do not have a higher risk to experience religious doubts or even struggles. More important is the question which consequences these putatively inevitable phases of spiritual dryness will have, and what religious persons like priests will do to deal with these phases. Either these phases are transient and important to develop deeper forms of spirituality, or these phases are constant and will be associated with depressive mood states, alienation from God, and finally, quitting the "vocation" as a pastoral worker although some may continue "on the job" with extrinsic motivations.

First we can state that 59% of the respondents in this sample stated that they have found strategies to cope with feelings of spiritual dryness, while 15% putatively did not and 26% only occasionally. However, 40% of priests did not respond to this item, but responded to the two "outcome" items. We cannot exclude the possibility that they were not sure whether they did find strategies to cope and were thus not responding to this item. Nevertheless, most were stimulated "all the more to help others" and experienced "deeper spiritual clarity and depth" in response to "spiritual dryness."

Among the strategies used by the priests, we can identify more helpful and less helpful ones to cope with feelings of spiritual dryness. Those who used *Self-Care/Interpersonal Communication (SC/IC)* and/or *Spirituality* were fairly often or even regularly able to cope with the respective feelings of spiritual dryness, while those few who used *Avoidance* strategies were less effective. However, *Avoidance* strategies combined with other strategies were quite as effective as *Spirituality*. This indicates that *Avoidance* strategies are not *per se* less appropriate when persons have access to other resources, too. *Avoidance* seems to be less helpful only when it is the only strategy. However, due to the fact that only a few priests have chosen this strategy, further studies are needed to substantiate this interpretation.

Helping others as a result of overcoming spiritual dryness phases and also the experience of deeper spiritual clarity and depth were observed more often in priests who used *SC/IC* and/or *Spirituality* as a strategy. Again, *Avoidance* as only strategy was less effective.

With respect to the important question whether these strategies may influence "outcome" variables such as global life satisfaction and psychosomatic health, particularly depressive states, we can state that this must not be necessarily true. The strategies have to fit to the mindset of the persons and to their available resources. For this study, we focused on extrinsic religious sources (i.e., transcendence perception), intrinsic psychological sources (i.e., self-efficacy expectation), and social support as an extrinsic relational source.

Significant differences were found only for social support as a resource and somatization as a psychosomatic health outcome, and in trend also for depressive symptoms. Social support scores were highest in persons using *Spirituality* plus *SC/IC* or *SC/IC* alone and lowest in those using *Avoidance* strategies. Whether the former groups *per se* had more access to this relational resource and were thus using it, or were actively reaching out for this support, is unclear. Nevertheless, friends, mentors, and companions are regarded as important supporters to deal with phases of religious “desolation” (Thibodeaux 2010).

It is important to underline that, although the perception of transcendence was lowest in those who used *Avoidance* alone or *Avoidance* along with other strategies, the highest scores were found not in the *Spirituality* users but in those who relied on *SC/IC*. This difference between *Spirituality* and *SC/IC* users may seem contra-intuitive. Although these differences for transcendence perception are not significant, they are at least interesting and raise questions: Is it in some cases feelings of lacking social support or social frustration which cause spiritual dryness? What about social gratifications which cover or resolve feelings of spiritual dryness—and what about possibly different kinds of spiritual dryness? Obviously, it is not religious activities alone which might be helpful, but also the reflection of life concerns and self-care which in turn were more effective to improve spiritual clarity and depth, and to stimulate the intention to help others the more. In line with this, there were no significant differences with respect to self-efficacy expectation either which can be regarded as an intrinsic psychological resource. In fact, it was found to be significantly lower in priests compared to other pastoral workers (Frick et al. 2015). This means being able to cope with these problems is foremost a matter of seeking support and finding adequate strategies.

Limitations

Self-reported information can be biased; respondents’ answers might be either too positive (due to social desirability) or too negative (to let off steam). Of importance, a rather large fraction of priests did not state a specific strategy to overcome phases of spiritual dryness, while 157 did state some in various combinations. However, 81 and 86%, respectively, responded to the outcomes of these phases—but only 61% have found strategies to overcome these phases; the others may not have found adequate strategies. With respect to the usage of the free-text field to state their specific strategies, only 21% of the whole sample filled this field. It is thus unclear whether for the non-responders, there was no necessity to use any strategy, or whether they were unsure about it, or whether they were not willing to share this information (i.e., fear to be identified by their free-text formulations). On the other hand, they did share other private information, and thus, we do not assume a reluctance to share these strategies. The respective categories are by nature rather broad than individually explicit. Moreover, some categories were used by only a few persons (i.e., *Avoidance*), others often in combination with other strategies. Thus, the findings with the smaller groups should not be over-interpreted. Moreover, because several strategies were used simultaneously, they had to be combined and can thus not be assessed independently.

Some of the “significant” findings could be influenced by the fact of multiple comparisons, particularly the analyses of the different strategies (with p values of 0.01). However, relevant differences between the different strategy groups were found only for social support ($p < 0.0001$) and somatization ($p = 0.002$), and these differences cannot be attributed to effects of multiple testings.

Conclusions

Although some see phases of spiritual dryness as an essential aspect of spiritual growth, they can nevertheless also be a hint for an existential crisis, particularly when these phases are not recognized and adequately supported by spiritual directors or psychotherapists. In most cases, priests were able to overcome these phases, and they did find strategies to cope, however, in 15% either not or only rarely. These feelings stimulated 37% (fairly often or even regularly) to help others, and 34% experienced deeper spiritual clarity and depth. The chosen strategies were often used in various combinations. Particularly, the *Avoidance* strategies were used by only a few persons, but these had the lowest social support and had the highest somatization and depression scores. *Self-Care/Interpersonal Communication* strategies (with or without *Spirituality* as a further strategy) were related to higher social support and lower depressive symptoms and somatization scores. These self-care and communication abilities in line with spiritual strategies could be supported as they may be beneficial in various aspects: They help coping with spiritual dryness, and they are conducive to stimulate “all the more to help others” and to experience “deeper spiritual clarity and depth.” In fact, we recently found that spiritual supervisors stated that these phases of spiritual dryness may require the support by spiritual counselors, a sustained prayer life, interpersonal relationships, mindful and self-caring relationships with oneself, and working on dysfunctional mental patterns, injuries, and experiences of failure and guilt (Frick et al. 2016). Whether these recommendations are in fact beneficial to overcome “spiritual dryness” and “spiritual desolation” or not remains to be investigated.

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Compliance with Ethical Standards

Conflict of interest This study was an investigator-initiated trial without any influence of Church authorities. It was not funded by any church authorities or related organizations. All authors are members of the respective universities; two of the authors are Catholic priests KB and EF working at universities as researchers. The authors disclose any financial or other competing interests.

Ethical Standard All procedures performed were in accordance with the ethical standards of the respective dioceses and with the 1964 Helsinki Declaration.

Informed Consent All individuals of this anonymously conducted cross-sectional study were informed about the study either by the personnel managers of the dioceses or by our independent study office and invited by a separate letter from our study office to participate. This separate letter informed about the purpose of the study, assured confidentiality, underlined their right not to participate, and asked to provide informed consent by providing the filed anonymous questionnaires.

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