Chapter 18
Religious/Spiritual Development and Positive Psychology: Toward an Integrative Theory

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It was a brisk California evening at Stanford University. With its world-renowned scientific reputation and close ties to neighboring Silicon Valley, Stanford University might be the last place you would expect students to have a deeply religious/spiritual (R/S) experience. But they did. They had come to hear the 2015 "Last Lecture on a Meaningful Life," delivered annually by a globally impactful luminary. This year's speaker was Oprah Winfrey, a world-famous TV host, producer, actress, and philanthropist. After sharing about her own R/S journey, Winfrey (2015) exhorted:

> Let every step you take move you in the direction of the one thing all religions can agree on—love…. I'm not telling you what to believe, or who to believe, or what to call it, but there is no full life, no fulfilled, meaningful, sustainably joyful life without a connection to the spirit. I haven't seen it happen. And the way to sustainability is through practice. You must have a spiritual practice. What is yours? For some people, it is going to church… [for others, it is] prayer, conscious kindness, empathy, consistent compassion, gratitude. All [are] spiritual practices [that help you in] becoming more of who you are.

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Chapter Purpose and Overview

Winfrey's advice echoes a refrain sung across cultures for millennia—religion/spirituality often plays a meaningful role in human development and flourishing (Day, 2010; VanderWeele, 2017). Within the field of psychology, scientists and practitioners have spent over a century exploring how people's religiousness and spirituality develop across their lifespan (Day, 2010) and interact with their well-being (Koenig et al., 2012). Many theories of R/S development have been proposed (Friedman et al., 2012; King & Boyatzis, 2015), but they have neither been well-integrated with each other nor studied and applied broadly in the field of positive psychology.

   This chapter's purpose is to draw on existing longitudinal research on R/S development to propose an integrative theory that can guide developmental science and practice on religion, spirituality, and positive psychology. We begin by reviewing and proposing key definitions. Second, we summarize the limitations of existing R/S development theories. Next, we conduct a scoping review of extant longitudinal studies of R/S development, which reveals several reasons why an integrative theory is needed. Then we introduce our Positive Religious and Spiritual Development (PRSD) theory, including illustrative examples and a discussion of its caveats and limitations. Finally, we describe a few of its applications for clinical practice and religious ministry.

Conceptual Definitions of Key Terms

Drawing on the work of Pargament et al. (2013), Harris et al. (2018), Mahoney et al. (2021), and George and Park (2016), we propose the following two integrative definitions of *spirituality* and *religiousness*. *Spirituality* refers to people's search for and response to meaning and connection with whatever they perceive as sacred, typically including supernatural entities (e.g., deity/deities, saints, ancestors, karma, or fate/destiny) or aspects of life either viewed as a manifestation of the divine (e.g., close human relationships) or as having transcendent or divine-like qualities (e.g., nature or the universe). *Religiousness* refers to people's search for and response to sacred meaning (sense of transcendent significance, purpose, and coherence) and connection in the context of culturally sanctioned codifications (e.g., of beliefs, values, and morals), rituals (e.g., prayer, meditation, and collective worship), and institutions (e.g., families, faith communities, schools, and organizations). In short, *religiousness/spirituality* can be defined as people's search for and response to sacred meaning and connection. By extension, because *development* refers to "the progressive series of changes in structure, function, and behavior patterns that occur over the lifespan of a human being or other organism" (VandenBos, 2015, p. 304), *R/S development* can be defined as the progressive series of changes in the structure,

function, and patterns that characterize people's search for and response to sacred meaning and connection.

Developmental theories often differentiate between a *developmental factor* (a variable or condition that influences development), *developmental function* (the role an entity, action, phase, or other phenomenon plays in development), and *developmental sequence* (the order that changes in structure or function happen during development; VandenBos, 2015, pp. 304–305). Most contemporary developmental theories adopt a *developmental systems framework* (Overton, 2010), viewing development as "the result of bidirectional interaction between all levels of biological and experiential variables" (VandenBos, 2015, p. 305).

Limitations of Existing R/S Development Theories

Many R/S development theories already exist, and most of them fall into three categories: stage-structural (usually cognitively focused) theories, motivational theories, and relationally focused theories. Appendix 18.S1 contains summaries of some major theories from each of these categories.

Naturally, each existing category of R/S development theories has limitations. For example, stage-structural theories are often critiqued because they tend to (a) focus too narrowly on individuals and on cognitions (and not enough on motivations, emotions, relationships, and ecologies); (b) underplay contextual and cultural influences on R/S development; (c) assume people develop in a normative (universal), discontinuous (discretely stagelike), and linear (sequential) way; (d) undervalue the unique nuances and complexities embedded in people's R/S experiences and expressions; (e) understate the wide variation of R/S experiences and expressions at any one age; (f) imply children are limited to immature forms of religiousness/spirituality; and (g) use constructs that are difficult to operationalize concretely and apply cross-culturally (King & Boyatzis, 2015).

The other categories of R/S development theories seek to address several of these limitations. For instance, motivational theories such as Pargament's (2013) theory of spirituality focus on explaining *why* people are R/S. Pargament (2013) argues people are R/S because they are motivated to discover, conserve, and occasionally transform their relationship with "the sacred" (p. 257), especially when coping with stress or loss. Pargament's (2013) theory of spirituality also helps explain how religiousness/spirituality interacts with people's well-being. He argues that *integration* (i.e., "the linkage of differentiated elements," Siegel, 2020, p. 461) is the marker and mechanism of healthy religiousness/spirituality. Specifically, Pargament (2013) posits that *healthy religiousness/spirituality* is marked and facilitated by R/S destinations (ultimate goals) and pathways (habitual ways of aspiring to reach those goals) that "work together in synchrony [and are] marked by breadth and depth, responsivity to life situations, flexibility and continuity, and a concept of the sacred that is large enough to encompass the full range of human potential and luminous enough to provide the individual with a powerful guiding vision" (p. 267).

Even so, like the stage-structural theories, Pargament's (2013) theory of spirituality can be criticized for being overly individualistic, underemphasizing the roles of context and culture in R/S development, and failing to explain how a person's R/S goals and habits develop and change through multilevel relational experiences with their ecologies. Some relationally focused theories such as positive youth development theory (Benson et al., 2006; Lerner et al., 2015) and reciprocating spirituality theory (King & Boyatzis, 2015; King et al., Chap. 17, this volume) have sought to address these limitations. Yet these relational developmental systems theories typically have only focused on youth and in some cases have only addressed R/S development peripherally.

Drawing on Existing Longitudinal Research to Develop an Integrative Theory

With all these limitations in mind, we wondered if there was a need for an overarching framework that could capitalize on the strengths of existing theories while simultaneously addressing their limitations. The extant empirical literature needed to guide this effort, so that any theory we developed was both scientifically grounded and truly needed. We focused only on longitudinal studies (because they would help reveal how R/S development occurs across time) and quantitative studies (because they would be based on larger samples than most qualitative studies). On May 28, 2021, we conducted a PsycINFO search using the terms "(religious development) OR (spiritual development) OR (faith development)" and the limiters *peer-reviewed*, *empirical study*, *longitudinal study*, and *quantitative study*. This strategy yielded 345 records. We screened out around half these articles (170, 49.3%) because they: (a) were a test-development or intervention study, (b) were misclassified as longitudinal, or (c) included religion/spirituality as only a very peripherally relevant variable. Ultimately, we retained 175 longitudinal quantitative studies, and those studies' features and findings are summarized in Appendix 18.S2.

Generally speaking, religiousness/spirituality and its dimensions (e.g., R/S attendance, importance, practices) influenced people's development positively—that is, R/S developmental factors usually led to better psychological, social, behavioral, and physical well-being. These effects were evident across cultures, contexts, and developmental periods. The positive developmental functions of religiousness/spirituality and its dimensions were compatible with Koenig et al.'s (2012) causal-pathways theory. That is, religiousness/spirituality positively affected well-being and development via four main pathways: psychological (emotional, cognitive, and motivational) processes, social (relational) processes, behavioral processes, and physical (physiological) processes. Also, consistent with a developmental systems framework (King et al., 2021), there was bidirectional interaction across all systemic levels, including people's physical bodies (genetics and physiology), mental activity (thoughts, emotions, motivations, and identities), behaviors, relationships

(with parents, peers, partners, and perceived deities), and sociocultural contexts (their school, community, faith tradition, and culture; Pargament et al., 2013).

To see whether an integrative R/S development theory was needed (and if so, what to include in it), we created Appendix 18.S3, which records (a) if each reviewed longitudinal study of R/S development assessed multiple R/S dimensions, (b) if contextual influences (moderators) of R/S development were identified, (c) if the interaction between religiousness/spirituality and well-being was studied, and (d) what theory or theories were explicitly or implicitly used to test hypotheses related to R/S development. As can be seen, 103 of the 175 studies (58.9%) measured multiple R/S dimensions; the most often assessed dimensions were R/S attendance (public R/S practices; $k = 102$, 58.3%), R/S importance ($k = 49$, 28.0%), R/S affiliation ($k = 35$, 20.0%), and private R/S practices (e.g., prayer frequency; $k = 33$, 18.9%). One-hundred twenty-five studies (71.4%) identified contextual influences on R/S development. Over 90 moderators were found; the most frequently identified moderators were age ($k = 42$), family contextual influences ($k = 39$), sex/gender identity ($k = 20$), faith tradition (e.g., R/S affiliation; $k = 15$), peer contextual influences ($k = 12$), and adverse life events ($k = 12$). Most studies ($k = 146$, 83.4%) examined the relationship between R/S development and well-being.

One of the most pertinent findings of this review was that 112 distinct theories were used to guide the conceptual frameworks of the 175 studies. Nearly 80% of those theories were used to guide only one study of R/S development. Only five theories were used more than four times: parent religious socialization theory, Pargament's (2013) theory of spirituality, positive youth development theory (Benson et al., 2006), Erikson's (1963) psychosocial stage theory, and Big 5 personality theory. Roughly one-third of the reviewed studies ($k = 58$, 33.1%) were atheoretical.

Positive Religious and Spiritual Development (PRSD) Theory

Thus, it was clear the existing psychological literature on R/S development was characterized by a low degree of integration. The over 100 utilized theories were neither well-integrated with each other nor well-used in guiding developmental science on R/S development. In addition, although the association between R/S development and well-being was examined in over 80% of the reviewed studies, none of these studies were published in a positive psychology journal (e.g., *Journal of Positive Psychology* or *Journal of Happiness Studies*), and very few utilized positive psychology theories (e.g., PERMA well-being theory; Seligman, 2011). In sum, existing theories and research on R/S development were not well-integrated, either internally or externally (with positive psychology).

Hence, we concluded an integrative theory of R/S development was indeed needed. We sought to develop a theory that applied across the lifespan and across cultures, contexts, and forms of religiousness/spirituality. We wanted to build on existing theory and research as much as possible, so that the theory's conceptual and

scientific foundations were robust. We also wanted it to have practical relevance across disciplines and subdisciplines, especially mainstream psychology and positive psychology. Therefore, we wanted the connections between people's R/S development and holistic well-being to be a prominent focus. However, like the theory of positive youth development (Benson et al., 2006; Lerner et al., 2015), we wanted this to be a strength-based theory, focusing on positive trajectories of R/S
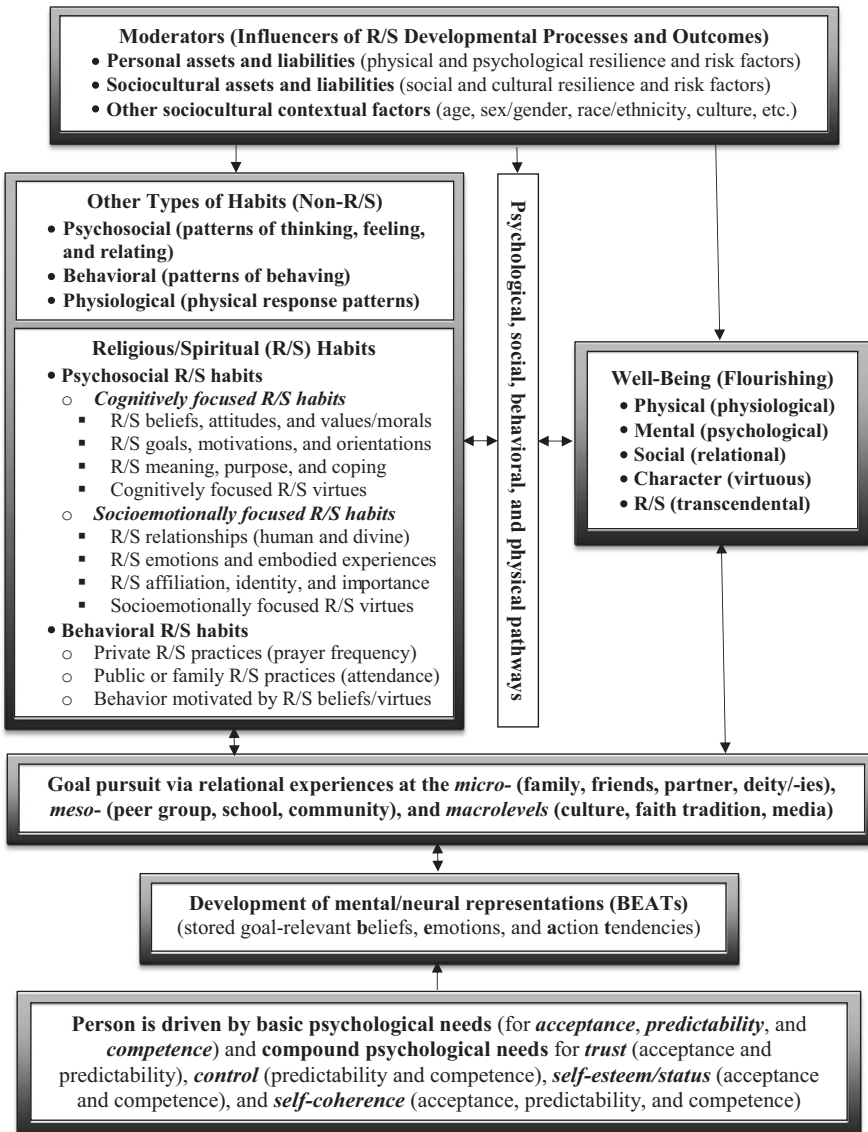

Moderators (Influencers of R/S Developmental Processes and Outcomes)
- **Personal assets and liabilities** (physical and psychological resilience and risk factors)
- **Sociocultural assets and liabilities** (social and cultural resilience and risk factors)
- **Other sociocultural contextual factors** (age, sex/gender, race/ethnicity, culture, etc.)

Other Types of Habits (Non-R/S)
- **Psychosocial (patterns of thinking, feeling, and relating)**
- **Behavioral (patterns of behaving)**
- **Physiological (physical response patterns)**

Psychological, social, behavioral, and physical pathways

Religious/Spiritual (R/S) Habits
- **Psychosocial R/S habits**
  - *Cognitively focused R/S habits*
    - R/S beliefs, attitudes, and values/morals
    - R/S goals, motivations, and orientations
    - R/S meaning, purpose, and coping
    - Cognitively focused R/S virtues
  - *Socioemotionally focused R/S habits*
    - R/S relationships (human and divine)
    - R/S emotions and embodied experiences
    - R/S affiliation, identity, and importance
    - Socioemotionally focused R/S virtues
- **Behavioral R/S habits**
  - Private R/S practices (prayer frequency)
  - Public or family R/S practices (attendance)
  - Behavior motivated by R/S beliefs/virtues

Well-Being (Flourishing)
- **Physical (physiological)**
- **Mental (psychological)**
- **Social (relational)**
- **Character (virtuous)**
- **R/S (transcendental)**

Goal pursuit via relational experiences at the *micro-* (family, friends, partner, deity/-ies), *meso-* (peer group, school, community), and *macrolevels* (culture, faith tradition, media)

Development of mental/neural representations (BEATs)
(stored goal-relevant **b**eliefs, **e**motions, and **a**ction **t**endencies)

Person is driven by basic psychological needs (for *acceptance*, *predictability*, and *competence*) and **compound psychological needs** for *trust* (acceptance and predictability), *control* (predictability and competence), *self-esteem/status* (acceptance and competence), and *self-coherence* (acceptance, predictability, and competence)

Fig. 18.1 Positive Religious and Spiritual Development (PRSD) Theory

development. Ultimately, we chose to name the model Positive Religious and Spiritual Development (PRSD) theory (see Fig. 18.1).

To reiterate, *R/S development* refers to progressive changes in the structure, function, and patterns that characterize people's search for and response to sacred meaning and connection. As a lifespan developmental theory, PRSD theory focuses on "*systematic intraindividual changes*—from [at or near birth] to the end of life—of [a person's] behavior and of the systems and processes underlying those changes and that behavior" (Overton, 2010, p. 4). It focuses especially on *positive R/S development*, which is defined as R/S development that is contextually adaptive across time, situations, and contexts, where *contextual adaptiveness* refers to "individual–context relations benefiting both the person and his or her ecology" (Lerner et al., 2015, p. 608).

Mental/Neural Representations and R/S Habits: What Religiousness/Spirituality Is

Consistent with the interdisciplinary metatheory of interpersonal neurobiology (Siegel, 2020), PRSD theory views all human experiences—including religiousness/spirituality—as emerging from the interaction among the *mind* ("an embodied and relational process that regulates the flow of energy and information," Siegel, 2020, p. 5), embodied *brain* (the entire distributed nervous system—the physical mechanism of energy and information flow), and relationships (how energy and information is shared between entities). In particular, PRSD theory is based on the recognition that people's life experiences (a) lead their minds to develop *mental representations* (stored **b**eliefs, **e**motions, and **a**ction **t**endencies [BEATs; Dweck, 2021, p. 90] that carry symbolic meaning psychologically) and (b) lead their embodied brain to develop *neural representations* (patterns of neural firing that carry symbolic meaning physically). These mental/neural representations guide all human experience and behavior (Siegel, 2020), forming the psychological and physical structures upon which one's religiousness/spirituality functions.

Because the mind is a self-organizing system (Overton, 2010; Siegel, 2020), people also develop *R/S habits*—patterns of thinking, feeling, relating, and behaving that characterize a person's search for and response to sacred meaning and connection across time, situations, and contexts. These R/S habits include behavioral R/S habits (e.g., private and public R/S practices, such as prayer and R/S attendance) and psychosocial R/S habits, the latter of which can be further categorized into cognitively focused R/S habits (e.g., R/S beliefs, values, orientations, and meaning) and socioemotionally focused R/S habits (e.g., R/S identity, affiliation, emotions, and relationships). This conceptualization of R/S habits into behavioral, cognitive, and socioemotional dimensions is compatible with Saroglou's (2011) Big Four theory, which identifies four basic dimensions of religiousness/spirituality: behaving, believing, belonging, and bonding. Notably, large-scale cross-cultural

research has found evidence that the Big Four R/S dimensions are universally present and functionally equivalent across cultures and faith traditions, even though they can vary in interrelatedness, relative salience, and modes of expression (Saroglou et al., 2020).

Taken together, mental/representations and R/S habits form the structure of a person's religiousness/spirituality. Next, we explore how these mental/representations and R/S habits develop, function, and change, based on people's needs, goals, and relational experiences.

Needs, Goals, and Relationships: The Why and How of Religiou sness/Spirituality

Consistent with Dweck's (2021) motivational personality theory, PRSD theory assumes religiousness/spirituality is universally motivated by goals designed to meet psychological needs. Motivations are the psychological (mental) and physiological (neural) processes that energize and direct behavior (Reeve, 2017). *Needs* are what play the energizing (driving) function of religiousness/spirituality, *need-related goals* are what play the directive function, *mental/neural representations* (BEATs) are the latent structures comprising people's religiousness/spirituality, and *need-driven R/S habits* are its more manifest structural elements (Fig. 18.1; Dweck, 2021).

Although people certainly are motivated by physiological needs (e.g., thirst, hunger), because PRSD theory is primarily a psychological theory, it centers on the psychological needs that motivate people's search for and response to sacred meaning and connection. Drawing on Dweck's (2021) motivational personality theory, PRSD theory assumes there are three *basic needs* that are present at or near birth (acceptance, predictability, and competence) and four later-emerging *compound needs* that are formed from combinations of the basic needs—trust (acceptance and predictability), control (predictability and competence), self-esteem/status (acceptance and competence), and self-coherence (acceptance, predictability, and competence). A *need* is a mental or physical condition that is universally valued and essential for well-being, and a *basic need* must additionally be irreducible to other needs and apparent either at or near birth (Dweck, 2021). In PRSD theory, needs for acceptance, trust, and self-esteem/status tend to drive socioemotional R/S habits; needs for predictability, trust, and control tend to drive cognitively focused R/S habits; and needs for competence, control, and self-esteem/status tend to drive behavioral R/S habits (Dweck, 2021; Saroglou, 2011). The need for self-coherence (the nexus of all the needs) drives all three types of R/S habits, as people's minds strive toward optimal complexity, homeostatic equilibrium (balance), and maximal integration (linking of differentiated parts; Overton, 2010; Siegel, 2020).

But how do people's R/S habits develop and change across the lifespan? Consistent with relational developmental systems metatheory (King et al., 2021; Overton, 2010), PRSD posits that the structural building blocks of people's religiou

sness/spirituality (mental/neural representations and R/S habits) develop and change through bidirectional interaction between a person and the multiple levels of that person's dynamic social–cultural context. Representations and habits are specifically formed and transformed through goal-pursuing relational experiences between people and their surrounding sociocultural ecologies. This includes experiences at the microlevel (with individual entities, such as family members, friends, romantic partners, and perceived supernatural entities), mesolevel (with groups and institutions, such as a peer group, school, neighborhood, and faith community), and macrolevel (with large-scale systems, such as culture, faith tradition, geographic region, and available media). A person's pursuit of need-fulfilling goals at various relational levels leads them to develop mental/neural representations of what has happened in prior goal-relevant pursuits. Those representations guide the selection and pursuit of future goals, and their recurrent use leads to the development of *habits*—characteristic patterns of responding cognitively, emotionally, relationally, behaviorally, and physiologically. These habits can be R/S or non-R/S (involved vs. uninvolved in searching for and responding to sacred meaning or connection). This dynamic is bidirectional in that people's habits guide their relational experiences, which in turn can lead to change in representations (Dweck, 2021; Siegel, 2020).

Personal and Sociocultural Factors (Moderators): Contextual Influences on R/S Development

All developmental processes and outcomes—including developmental change itself—are influenced by a wide array of contextual developmental factors called *moderators*. Within PRSD theory, there are three main categories of these contextual moderators: (a) personal/internal assets and liabilities (physical and psychological resilience and risk factors, such as genetic and psychological strengths and vulnerabilities); (b) sociocultural/external assets and liabilities (social and cultural resilience and risk factors, such as interpersonal, community, and cultural strengths and vulnerabilities); and (c) other sociocultural factors, such as a person's age, sex, gender identity, sexual orientation identity, race/ethnicity, socioeconomic status, disability status, adverse life experiences, generational cohort, and local or national cultural context (Lerner et al., 2015).

Causal Pathways and Integration: How Religiousness/Spiritual ity Interacts With Well-Being

Consistent with the causal-pathways theory (Koenig et al., 2012), PRSD theory assumes a person's religiousness/spirituality bidirectionally influences their well-being via psychological (cognitive, emotional, and motivational), social, behavioral,

and physical (physiological) pathways. In addition, PRSD theory is compatible with positive psychological theories of well-being. For instance, resonant with VanderWeele's (2017) flourishing theory, PRSD theory views people's holistic well-being (flourishing) as comprised of five interrelated facets: physical well-being (physiological flourishing), mental well-being (psychological flourishing), social well-being (relational flourishing), character well-being (virtuous flourishing), and R/S well-being (transcendental flourishing). Moreover, the mental and social facets in PRSD theory are compatible with Seligman's (2011) PERMA facets: **P**ositive emotions, **E**ngagement, positive **R**elationships, **M**eaning, and **A**ccomplishments.

Finally, resonant with interpersonal neurobiology metatheory (Siegel, 2020), PRSD theory posits that contextually adaptive internal and external integration are both the structural markers and functional mechanisms of positive R/S development (Davis et al., 2021). To reiterate, *contextual adaptiveness* refers to person–context linkages that benefit the person and their surrounding multilevel context (Lerner et al., 2015). *Internal integration* refers to contextually adaptive linkage among a person's mental representations, neural representations, R/S habits, and non-R/S habits. *External integration* refers to contextually adaptive linkage between a person's religiousness/spirituality (representations and R/S habits) and their multilevel sociocultural context.

Three Fictitious Examples Illustrating How PRSD Theory Works

Childhood   Maria (a 9-year-old girl who lives in a favela in Rio de Janeiro, Brazil) was born into a highly R/S and Roman Catholic Christian family. Although socio-economically poor (*sociocultural risk factor*), Maria's family is very close and happy (*sociocultural resilience factor*). Throughout her life, Maria has experienced consistently loving and supportive relationships with her parents, five siblings, extended family members, neighbors, and peers (*relational experiences*). As a result, she has developed positive *mental representations* (*BEATs*)—stored positive **b**eliefs about herself, others, and the world ("I am loved, accepted, and competent; other people are good, responsive, and trustworthy; and the world around me is good, predictable, and full of opportunities"); stored representations of recurrently activated positive **e**motions (love, joy, serenity, and hope); and stored **a**ction **t**endencies to approach people and the world with curiosity, confidence, and love (Siegel, 2020). These positive mental representations underlie her secure attachment orientation and high traits of agreeableness and optimism (*personal assets*).

Maria's mental representations (and their associated *neural representations*) have also been shaped by *religious socialization* from Maria's parents, extended family members, local community, and Brazilian culture (which is very religious and predominantly Catholic; Pew Research Center, 2018). Through this socialization (*multilevel relational experiences*), Maria has developed *mental*

representations that God and the saints are benevolent, powerful, and responsive and that others, the world, and herself are loved and cared for by God and the saints. She has developed a corresponding set of R/S beliefs (*cognitively focused R/S habits*) that help her make sense of her thoughts, emotions, and experiences (e.g., "God is powerful and cares about my family, community, and me"; "God always takes care of us"; and "God loves other people, so I should too"). Furthermore, Maria and her family attend weekly Sunday mass at their neighborhood's largest church, she participates in the church's children's group, and Maria prays whenever she feels stressed or uncertain (*behavioral* and *socioemotionally focused R/S habits*).

In sum, across time, situations, and contexts, Maria's R/S habits meet her psychological *needs* and benefit both Maria and her multilevel relational context (e.g., family, church, and neighborhood; *contextual adaptiveness*). They contribute to Maria's holistic well-being (*mental*, *physical*, *social*, *virtuous*, and *transcendental well-being*) by providing a sense of meaning (coherence, purpose, and significance; *psychological pathway*), relational connection (with family, church members, neighbors, God, and the saints; *social pathway*), moral behavioral guidance (to love others; *behavioral pathway*), and physiological serenity (homeostatic equilibrium; *physical pathway*).

Adulthood Mahmoud (a 45-year-old, Sunni Muslim man) lives in Cairo, Egypt with his wife and their five children. Growing up, Mahmoud had close and loving relationships with his parents and relatives (*sociocultural resilience factor*), which helped him develop positive *mental representations* (BEATs) of himself, others, the world, and Allah. From an early age, Mahmoud has had R/S beliefs (*cognitively focused R/S habits*) that help fulfill his needs for predictability, trust, and control (e.g., the *shahadah*—the belief "there is no god but Allah, and Muhammad is the messenger of Allah"). His public and private R/S practices (*behavioral R/S habits*; e.g., *salah* prayers five times a day, *zakat* yearly almsgiving, *syiam* fasting during Ramadan, and frequent mosque service attendance) have consistently helped fulfill his needs for competence, control, and self-esteem/status. In addition, his strong R/S identity and positive R/S relationships with family members (wife, children, and relatives), mosque members, and Allah (*socioemotionally focused R/S habits*) have helped fulfill his needs for acceptance, self-esteem/status, and self-coherence.

Since young adulthood, Mahmoud has owned a prosperous restaurant in a busy part of Cairo. His wife and children help him operate the restaurant. He and his family are known for their R/S devotion and their kindness, joy, and generosity. Two Muslim values guide their business decisions and daily life—*tawakkul* (relying on and trusting in Allah) and *shukr* (gratitude). Those values lead his family to give generously to others in need (e.g., community and mosque members). Mahmoud's psychosocial and behavioral R/S habits have consistently promoted his holistic well-being via psychological pathways (meaning and purpose), behavioral pathways (moral and virtuous behaviors), and social pathways (identity and social support).

Older Adulthood Anika is a 65-year-old, married, Hindu woman who lives in rural India. She and her husband have six children, the last of whom just married. Throughout middle adulthood, Anika focused on fulfilling her duties and responsibilities to her extended family (e.g., her husband, children, parents [before their deaths], and eventually grandchildren). She pursued fulfilling these worldly duties in a wholehearted but dispassionate way, by cultivating habits of *niṣkāma karma* (i.e., dispassionate action; *behavioral R/S habit*) and *anasakti* (i.e., an attitude of nonattachment to events, experiences, and results; *cognitively focused R/S habit*). She engaged in several other practices as well, including behavioral R/S habits of *aṣṭāṅga yoga* (eight-step yoga), *bhajans* and *kīrtans* (communal religious chanting and singing), and *mantra japa* (mantra repetitions throughout the day). Through these and other practices, Anika gradually achieved greater levels of *sat-chit-anada* (state of bliss, truthful existence, and elevated consciousness) and holistic well-being (see Singh et al., Chap. 13, this volume).

Now that all their children are married and their parents have passed away, Anika and her husband are looking forward to dedicating even more of their lives to meditation and *svādhyāya* (self-reflection and study of scriptures; *behavioral and socio-emotionally focused R/S habits*). To a greater degree than ever before, Anika will be able to unburden herself from concerns with matters of her extended family. She is trusting that the pious, compassionate (yet dispassionate and nonattached) frame of mind she seeks to cultivate (*cognitively focused R/S habit*) will influence those in her community and extended family. Yet how this happens will not be her concern, as she seeks to trust *Brahman* (the Supreme Being) more and more, both in small and large matters. She seeks to learn more about her *atman* (true self) via self-inquiry (*socioemotionally focused R/S habit*), leading to enhanced *sat-chit-anada* and holistic well-being, as her *atman* is revealed and achieves greater liberation and union with *Brahman* (Singh et al., Chap. 13, this volume).

Important Caveats and Limitations of PRSD Theory

Before proceeding, some caveats and limitations to PRSD theory are worth noting. First, PRSD theory accounts well for the multilevel, multidimensional aspects of religion/spirituality, but it does not account as well for the multivalent nature of religion/spirituality (Pargament et al., 2013). Religion/spirituality is not beneficial for all people, at all times, and across all cultures and contexts. On the contrary, it can have harmful effects (e.g., R/S struggles can cause or exacerbate negative health outcomes) or expressions (R/S beliefs can fuel prejudice, discrimination, oppression, abuse, or violence; Vieten & Lukoff, 2022), and those effects and expressions can vary across people, time, cultures, and contexts. Nevertheless, like the theory of positive youth development before it (Benson et al., 2006), PRSD theory is a strength-based approach, focusing on positive trajectories of R/S development. That is, it focuses on what can go right in R/S development, why it goes right, and how

various developmental processes interact bidirectionally in promoting people's well-being.

Second, although PRSD theory focuses on how and why religiousness/spiritual ity can enhance people's well-being, humans almost universally have life experiences that undermine their well-being. These experiences can happen within or outside R/S contexts, and they can happen to people who have or have not experienced previous periods of positive R/S development. For instance, adverse life experiences either within a R/S context (e.g., sexual abuse by a R/S leader) or outside one (e.g., sexual assault outside a R/S community) can lead to negative changes in people's mental/neural representations of themselves, others, and the world (Charuvastra & Cloitre, 2008). Those changes can lead to shifts in people's R/S habits, which in turn can be contextually adaptive or maladaptive. Maladaptively, someone may experience R/S struggles that negatively affect their well-being. Conversely, if they experienced harm in a R/S context (e.g., a sexual minority coerced into a sexual orientation change effort), it may actually be adaptive for them to step away from religion/spirituality, either temporarily or for good.

Finally, people may have experienced religiousness/spirituality as need-fulfilling and health-enhancing for a period of their life, but over time it might not be as need-fulfilling or health-enhancing for them. For example, their needs may become better fulfilled via other avenues (their family, friends, work, etc.), or their R/S habits may not be as beneficial to their well-being (e.g., they used to rely heavily on R/S strategies to cope with stress, but they come to rely more effectively on other coping strategies). Similarly, someone's religiousness/spirituality may have been contextually adaptive for a period of their life, but as they or their context changes, it is no longer as adaptive. For instance, people may come to find the R/S communities and codifications that once supported their need-fulfillment and well-being now feel too constraining, simplistic, or vapid. Therefore, in their quest for sacred meaning and connection, they may change their R/S habits, which might mean either deconverting or becoming R/S in different ways (adopting a "spiritual but not religious" identity, shifting to a more progressive tradition/denomination, or becoming more private and personal in their R/S practices; Saroglou et al., 2020). In sum, when people's religiousness/spirituality is no longer as need-fulfilling, health-enhancing, or contextually adaptive, they may change their R/S habits as a result. These changes may not necessarily have negative effects on their well-being; they could instead have beneficial or benign effects.

Practical Applications

Clinical Practice

Help R/S Clients Draw on Their Religiousness/Spirituality as a Resilience Resource The vast majority of people in the world are R/S (Pew Research Center, 2018). By extension, most clients seen in clinical practice are R/S, despite the fact that psychologists often are not R/S themselves and frequently report having little

training in addressing religiousness/spirituality clinically (Vieten & Lukoff, 2022). One application of PRSD theory is that it is clinically useful for mental health practitioners to develop R/S competencies, especially when it comes to helping R/S clients draw on their religiousness/spirituality to enhance their resilience and well-being.

Assess How R/S Clients' Mental Health Problems Are Affecting Their R/S Development A core process emphasized in PRSD theory is the bidirectional interaction of R/S development and well-being. This interaction has important clinical implications. For example, it highlights the fact that people's mental health problems can negatively affect their R/S functioning (Vieten & Lukoff, 2022). Hathaway (2003) has referred to such effects as "clinically significant religious impairment" (p. 113), defined as "a reduced ability to perform religious activities, achieve religious goals, or experience religious states, due to a psychological disorder" (p. 113). One way this impairment can manifest is when mental health difficulties impair or impede someone's positive R/S development. Practitioners can assess for such a possibility and then intervene as needed.

Promote R/S Clients' Positive R/S Development The most basic clinical application of PRSD theory is for mental health professionals to promote their R/S clients' positive R/S development. Clinicians can do so directly (e.g., by using spiritually integrated interventions as part of clinical treatment; Captari et al., Chaps. 26 and 30, this volume) or indirectly (e.g., by encouraging clients to nurture their positive R/S development both between sessions and following treatment termination).

Clients often complain that their R/S beliefs, practices, commitments, and affiliations are ignored, belittled, or even pathologized by mental health practitioners (Vieten & Lukoff, 2022). Correspondingly, clients often complain that R/S practitioners (e.g., pastoral counselors or R/S leaders) use one-size-fits-all approaches that impose rigid religious dogmas and ignore the person's unique context and personalized R/S goals, needs, and quests. PRSD theory emphasizes that one marker and mechanism of positive R/S development is harmonious synchrony between individuals and the contexts in which they are embedded. Effective and culturally sensitive clinical practice needs to foster—not frustrate—this vibrant synchrony (Pargament, 2013).

Religious Ministry

Help Faith Community Members Understand How Their R/S Habits and Well-Being Interact Faith community members often do not have a clear understanding of why and how their R/S habits influence their well-being and vice versa. Therefore, effective R/S ministry might involve helping members understand these interconnections and make appropriate changes, such as changing their R/S habits to become

more health-enhancing, need-fulfilling, well-integrated, and contextually adaptive. Similarly, by improving members' holistic well-being, effective R/S ministry may lead to adaptive changes in members' R/S habits (Davis et al., 2021; Wang et al., Chap. 29, this volume).

Address Impediments to Members' Positive R/S Development In addition, effective R/S ministry may need to help members recognize and remove impediments to their positive R/S development. Such impediments could be internal (e.g., ways their R/S habits are not health-enhancing, need-fulfilling, well-integrated, or contextually adaptive) or interpersonal (e.g., relationships or relational habits that are hindering their need-fulfilling, health-enhancing R/S development).

Nurture Members' Positive R/S Development Again, the most basic application of PRSD theory in R/S ministry is to nurture believers' positive R/S development. This can occur through a variety of avenues, such as (a) strategic R/S interventions at the microlevel (R/S ministry to individuals, couples, or families) and macrolevel (R/S ministry to larger groups of members), (b) effective R/S ministry that enhances members' well-being and fulfills their basic and compound needs, and (c) caring R/S leaders who model well-integrated, health-enhancing R/S habits and help their community members cultivate such habits (Wang et al., Chap. 29, this volume).

Conclusions

In this chapter, we have drawn on existing theory and research to present an integrative lifespan framework—positive R/S development (PRSD) theory—that can guide developmental science and practice on religion, spirituality, and positive psychology. PRSD theory is a lifespan theory, and it recognizes R/S development as both continuous (ongoing) and discontinuous (discrete) and as influenced both by nature and nurture (Overton, 2010). PRSD theory posits that positive R/S development involves contextually influenced, bidirectional interaction among people's goal-relevant mental/neural representations, need-fulfilling relational experiences, well-integrated and contextually adaptive R/S habits, and holistic well-being. Ultimately, we hope PRSD theory will be used to help individuals, families, communities, and societies flourish more fully, as we all seek to live the type of meaningful, fulfilling, and sustainably joyful life that Oprah Winfrey (2015) and others inspire us to pursue. In so doing, may our search for sacred meaning and connection help us all increasingly "becom[e] more of who [we] are" (Winfrey, 2015).

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