ABSTRACT
        When assessing quality of life satisfaction in relation to
an individual's recovery from an addiction, such as alcoholism, the expressed
need for spiritual well-being is frequently a significant aspect of the
psychotherapeutic encounter. Some of the quantitative and qualitative aspects
of spiritual well-being in recovering alcoholics are examined. The study was
guided by the following questions: What is a satisfactory measure for
spiritual well-being? How could such a measure be useful not only for
research but for psychotherapeutic use? How might such a measure and its
findings be adapted to working with addicted clients? and How do the reports
of spiritual well-being of addicted individuals compare to a similar group of
nonaddicted adults? After reviewing the research addressing these issues, the
study designed to answer these questions is described. The study sample of 58
non-alcoholics and 50 alcoholics were administered the Spiritual Well-Being
Scale (SWB). The SWB consists of an Existential Well-Being Scale (EWB) and a
Religious Well-Being Scale (RWB). Findings indicate that the nonaddicted
group scored significantly higher on the total SWB and the EWB scales,
suggesting that life circumstances related to addiction and alcoholism
negatively influence individuals' spiritual well-being. Results were analyzed
qualitatively by interviewing recovering alcoholics on their spiritual
development path. A model describing this path is presented with narrative
descriptions provided by subjects in various points of their recovery. (RJM)

ED 412 431

ALCOHOLISM AND SPIRITUAL WELL-BEING

1

Alcoholism, Spiritual Well-Being and the Need for Transcendence

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Running head: ALCOHOLISM AND SPIRITUAL WELL-BEING

2

Abstract

This study examined the quantitative and qualitative aspects of spiritual well-being in recovering alcoholics. Fifty-eight nonalcoholics' and 50 alcoholics' scores on the Spiritual Well-Being Scale (SWB), (Ellison, 1983, 1989) were compared. The SWB consists of an Existential Well-Being Scale (EWB) and a Religious Well-Being Scale (RWB). A one-tailed t-test indicated the non-addicted group scored significantly higher on the total SWB and the EWB scales. The results were analyzed qualitatively by conducting a focus group with recovering alcoholics on their spiritual development path. A model describing this path is presented with narrative descriptions provided by subjects in various points in their recovery.

Alcoholism, Spiritual Well-Being and

the Need for Transcendence

When assessing the quality of life satisfaction in relation to the individual's recovery from various addictive processes such as alcoholism, the expressed need for spiritual well-being is frequently be a significant aspect of the psychotherapeutic encounter. Any consideration of the wholeness of human intention and behavior in relation to addictive processes must include a spiritual or transpersonal dimension.

While the need to address spiritual matters in recovery from addictions has become more accepted, impediments to making such inquiry a more natural part of the psychotherapy process remain. This is in part a result of professions, the fear of imposing religious values on clients. Yet, when understood in a broader, more holistic context than doctrinal religious beliefs, the fear of subjecting clients to specific religious ideas is largely removed. This is also true when the counselor/therapist construes the spiritual development of addicted clients as part of a continuum of psychological well-being.

Russo (1984) suggested that by adapting a more holistic epistemology of human development, we could take the perspective that spiritual development as is contained within the maturational structures of human development and change. For example, Bateson's holism (1972, 1979) posits several principals consistent with this idea of a continuum. These principals for Bateson included the inseparability of fact and value,

circuity and nonlinearity of thought and behavior, and the convergence of subject and object. In addition, Bateson's Learning I (controlling inner and outer environments), Learning II (understanding behavior and action as contexually constructed) and Learning III (the search for emergent or transpersonal meanings) clearly place the concept of spiritual development on a continuum.

Others have also approached spiritual development from a similar perspective. Fowler (1981), following the psychosocial model of Erik Erikson (1950), has suggested a six stage model that is consistent with Erikson's psychosocial stages. He states that the individual, throughout the life span moves from "Intuitive-Projective (early childhood) to Mythic-Literal (school years), Synthetic-Conventional (adolescence), Individualative-Reflective faith (young adulthood), Conjunctive (mid-life) and finally to Universalizing Faith. As mentioned earlier, these stages coincide with Erikson's struggle for Industry, Identity, Intimacy, Generativity and Integrity. Fowler's model remains very consistent not only with Erikson but with other life stage, structural theories such as those developed by Kohlberg and Levinson (Fowler, 1981).

Ellison (1983) acknowledges several hierarchically ordered need conditions. These are the needs for having, relating, being and transcendence. First, the Need for Having, concerns itself primarily with basic security needs through the establishment of material and economic well-being. The Need for Relating places the emphasis on social interaction and seems roughly equivalent to Erikson's struggle for

intimacy. The Need for Being, while more difficult to define, seems to have an existential quality. That reflect what Erikson's would call the Struggle for Generativity. While the individual never loses sight of important social relationship patterns, personal accomplishment and satisfaction in life are paramount at this juncture. Finally, as with other structural stage or continuum approaches to spirituality, Ellison (1983) describes the need for transcendence is presented. Here Ellison (1983) states: "This refers to the sense of well-being that we experience when we find purposes to commit ourselves to that involve ultimate meaning for life" (p.330).

A second important and related reason for addressing spiritual issues in counseling and psychotherapy is that spirituality consists of basic naturalistic and human characteristics. This naturalism and humanism is deeply implicit in the structural models mentioned above. The methods of inquiry that utilize systematic observations and in-depth interviewing seem to strongly support this contention. However, with regard to the humanistic basis for spiritual needs, perhaps no other writer has described this more eloquently than the American philosopher, John Dewey.

Russell (1988), in an attempt to describe Dewey's approach to spirituality, states that first it is necessary to distinguish spiritual characteristics and qualities from historical religious doctrine. Being firmly grounded in a naturalistic approach, Dewey states the spirituality is a basic quality of human existence and therefore quite separate from the supernaturalism of most organized religious doctrines. Dewey also

suggests that self-integration includes spiritual development as an attempt to realize ideal goals. This primary act of experience and imagination on the part of the individual is essentially a religious or transpersonal activity.

The work of Elkins, Hedstrom, Hughes, Leaf, and Saunders (1988) is consistent with Dewey's approach to spirituality. The authors state that because the assumptions directing their spirituality inquiry the involve attitudes, beliefs and affective states and these areas can be explored and investigated. In turn, spirituality can be distinguished from religious belief by this assumption that spirituality is a natural if not necessary quality of human experience. As such, more or less standard mechanisms of both quantitative and qualitative inquiry should apply as basic method for understanding spiritual well-being and its application to addictions and their psychotherapeutic treatment.

Spiritual well-being can be seen as being vertically organized in that it speaks to unifying acts of imagination regarding idealized and ultimate goals. Spiritual development can also be viewed as "horizontal" or occurring across the life span when it is conceptualized as part of the psychosocial development of individuals. Also spiritual well-being can and should be distinguished from supernatural belief systems of traditional religions. In a more naturalistic framework, religion and spirituality can be seen as existing within normative developmental structures and processes. This, in turn, should help establish spiritual concerns as a natural part of psychotherapeutic inquiry and practice.

Therefore, the guiding questions for this exploration and inquiry were as follows: What is a satisfactory measure for spiritual well-being? How could such a measure be useful not only for research but for psychotherapeutic use? How might such a measure and its finding be adapted to working with addicted clients? How do the reports of spiritual well-being of addicted individuals compare to a similar group on nonaddicted adults? Lastly, what are the more connotative meanings of spiritual well-being described by addicted individuals?

Also, of importance is the attempt to "bridge the gap" between inquiry regarding the use of a particular instrument, Spiritual Well-Being Scale (Paloutzian & Ellison, 1982; Ellison, 1983) and its utilization in psychotherapeutic practice. In order to use such an instrument in practice, it seems necessary to provide more narrative and descriptive meaning to the quantitative scores derived from the Spiritual Well-Being Scale. The final question for this study, then, is, "How do addicted individuals construct personal, narrative meaning with respect to more general spiritual concerns?" This latter question was an attempt to provide some beginning guidelines for the inclusion of spirituality in the practice of counseling and psychotherapy.

Methods

The Spiritual Well-Being Scale (Paloutzian & Ellison, 1982; Ellison, 1983) is a 20 item measure that yields three scores; Spiritual Well-Being (SWB or total score); Existential Well-Being (EWB) and Religious Well-Being (RWB). One distinguishing characteristic between Existential and

Religious Well-Being is that all the items on the Religious Well-Being subscale use the term God. However, God is open to usage indicated by Dewey as the humanistic version of the ideal and transcendent. In turn, no such references to God are included in the Existential Well-Being subscale items.

This scale was originally conceived of as part of a larger study on loneliness and the overall quality of life of individuals. Since a very large percentage of Americans indicate the importance of religious belief to overall quality of life such a measure seemed essential (Paloutzian & Ellison, 1982) to any study of life satisfaction. An early study of slightly more than 200 college students yielded "... test-retest reliability coefficients of .93 (SWB), .96 (RWB), and .86 (EWB). Alpha coefficients reflecting internal consistency, were .89 (SWB), .87 (RWB), and .78 (EWB)." (Paloutzian & Ellison, 1982, p.233). The authors conclude that this indicates a very acceptable level of reliability and consistency for the scale. In addition the correlation between RWB and EWB was reported as r=.32.

In a series of follow-up studies Ellison (1983) continued to provide evidence for the validity of the Spiritual Well-Being scale. These further studies have found that spiritual well-being is positively correlated with measures of self-esteem as well as significant developmental factors such as family cohesiveness and positive view toward one's parents. Those characteristics that were negatively correlated with Spiritual Well-being were possessing an individualistic perspective such as placing high values

on personal success and independence. The tentative conclusions of these preliminary studies continue to suggest a two dimensional perspective on Spiritual Well-Being: a religious dimension (again constructed as either naturalistic or in traditional religious terms) and an existential dimension that is clearly humanistic in its value orientation with regard to basic purpose in life.

One of the other conclusions indicated by Ellison (1983) was that further investigation was needed with regard to particular life situations and exigencies. This interest has been pursued in a series of studies, three of which are relevant to this research. Roth (1988) investigated spiritual well-being and marital adjustment and found a strong positive correlation between marital satisfaction and spiritual well-being. The author further speculated that such a relationship might be reflective of the developmental nature of intimacy as experienced both in human relationships and between an individual and his/her conception of ultimate concerns or God. Subjects used for this study were attending members of established religious groups. Some differences were also found respective to length of marriage and gender.

In an attempt to explore the developmental basis of hope and spiritual well-being, Carson, Soeken and Grimm (1988) surveyed 182 nursing students and found a strong positive relationship between hope (as measured by a State-Trait Hope Scale) and spiritual well-being. Somewhat more surprising was the finding that hope was more strongly correlated with Existential Well-Being (EWB) than with Religious Well-

Being (RWB). The authors offered a developmental explanation of this finding suggesting that the young adults surveyed had yet established sufficient independence to consider a relationship to God or ultimate concerns. The correlation between hope and spiritual well-being also suggests the potential role of the transpersonal or spiritual dimension in emotional well-being and physical health.

A third study of interest was done by Kirschling and Pittman (1989). Here the researchers administered the Spiritual Well-Being scale to 70 individuals who were caring for a terminally ill family member. An interesting feature of this study was the SWB was administered face-to-face and as part of an expanded qualitative interview procedure. Respondents made a number of comments including some difficulty in relating to the questions using the concept of God (RWB items). While such a reference does not necessarily refer exclusively to traditional religious tenets, the implication of a traditionally religious context, more particularly a Christian context, is apparent all the same. Also considered was the somewhat artificial distinction between positive and negative life events. One respondent suggested that an event which was initially negative, upon subsequent self-reflection had now acquired a more positive connotation. The authors were emphatic about recommending the use of both quantitative and qualitative information in any attempt to more deeply understand this complex and often ambiguous concern.

In summary the Spiritual Well-Being Scale provides the researcher and clinician with a relatively simple and straightforward measure of

transcendent need satisfaction. Studies have provided acceptable indices of statistically based measure of reliability and validity. The two dimensions, Religious Well-Being and Existential Well-Being, seem to be important interrelated qualities of the more comprehensive measure of Spiritual Well-Being. However, in the very act of establishing necessary psychometric status of the measure, the deeper and more descriptive meanings may be missed. Ellison (1983) states this quite clearly "The richer, connotative meaning that might be associated with a term is intentionally ignored because to use such would result in a loss of precision and, therefore, of scientific comparison" (p.331).

Sample

The respondents comprised two distinct groups, those individuals indicating alcohol addiction and at least some involvement in Alcoholics Anonymous and those indicating no addictive behaviors or treatment of any kind. The first group (nonaddicted) consisted of 11 males and 47 females. This group was also entirely Caucasian. The second group (addicted) consisted of 21 males and 29 females all of whom were Caucasian. These respondents did not report their age. Both groups came from the Midwest and represented high school graduates, college undergraduates and graduate students.

Findings

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Insert Table 1 about here

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Using a one-tailed t-test, the nonaddicted group scored significantly higher in the total Spiritual Well-Being Scale and also significantly higher in the Existential Well-Being Scale than did the addicted group. It would appear, based on the above findings, that the life circumstances related to addiction and alcoholism has a potential influence of the spiritual well-being of such individuals, particularly as expressed by the dimension of existential well-being. The nonaddicted group may have a stronger sense of spiritual well being than the addicted group due to the higher existential well being scale which addresses: what we are doing, why we are doing it, who we are, where we belong (Ellison, 1983). Prior to assessing the usefulnesses of this concept in psychotherapy, a qualitative dimension was added to this study to examine the deeper aspects of spiritual well-being.

Focus Group Discussion and Analysis

Alcoholism research involves some unique research barriers in accessing subjects. One barrier is the general cautiousness of alcoholics toward helping professionals as a result of negative personal experiences. Another access barrier is locating and grouping recovering alcoholics who have completed treatment and/or aftercare. Recovering alcoholics are readily located through Alcoholics Anonymous (AA), but AA refuses to let research be completed in conjunction with AA meetings. This commitment to anonymity applies knowing who alcoholics are outside of their meetings. As a result of these limitations, the approach chosen to study the alcoholics's phenomenological world of spirituality was that of

13

participant/observer.

Since the participant researcher had friends in AA, recovering alcoholics who had been out of treatment for at least three years were readily located through the support networks of Alcoholics Anonymous. Friends of the researcher were asked to bring recovering friends to the meeting to discuss their spirituality.

On a Sunday afternoon a focus group discussion session was conducted with 10 recovering alcoholics. The group was held in the home of one of the participants with the stated purpose of discussing spirituality in recovery. Participants were offered a chance to discuss their spiritual issues with other alcoholics over refreshments. Some of the alcoholics knew one another and all knew either the researcher/participant or the individual who housed the event. Participants were told the discussion would last one hour, however, all but one participant stayed an hour and a half because of their intense involvement in the discussion. The researcher participant finally ended the discussion after 90 minutes. The focus group discussion, was initiated and facilitated by the participant researcher. In the introduction, people were asked to discuss their spiritual development in recovery. The SWB scale administered in the study was given to them to facilitate spiritual discussion in general as well as encouraging specific reactions to the scale. Initially the researcher asked people to discuss their spiritual development in recovery and after approximately an hour's discussion on this topic, asked participants to

discuss how they "access" their god. Other than these two general statements, the researcher only asked clarifying questions. Participants spoke in the group in the same manner of behavior at a typical AA meeting: one person speaking at a time, acknowledgement when finished speaking, and equal opportunity to speak (everyone speaks once and then a person can speak a second time).

Upon completing a semthematic content analysis of the audiotape discussion, there appeared to be a several important themes that emerged with respect to the spiritual development of the alcoholics. These themes seems to be most logically and coherently represented as developmental "steps" on a "pathway" to spiritual well-being. The preliminary understanding of the developmental themes follow. Each theme is followed by a direct quote from a group member.

1. Admission of personal failure by the alcoholic:

"Life is a colossal flop."

This admission may encourage an alcoholic to transcend personal pain and fears by joining a community (AA). Developing this sense of community required some of the alcoholics to rise above emotional damage experienced by other people such as parents or organizations such as churches and religious teachings. The alcoholics needed to act trusting even though they may not have felt trusting during those early years of recovery. Participants reported a feeling of ambivalence about staying sober, trusting god, and commiting toward this sober way of life. This stage appeared to last for the group participants until approximately

three years of recovery. All of the alcoholics in this particular group

discussion said they kept themselves "safe" during these early years: they

did not expose themselves to alcohol/drug triggering experiences such as

going to a bar, and they did not risk very much emotionally with others,

such as being involved in an intimate sexual relationship.

2. Personalization of god (Higher Power).

Between two and five years of sobriety, participants reported a change

which lasted until seven or eight years of sobriety. Participant made

statements which seemed to function as transitional signposts or markers.

Selected examples of this theme are listed below:

a. "I had to redefine God."

b. "I became involved in a group of survivors of violence and began to

translate my god from a male to a female, a granny." ("When the

questionnaire said, 'Do you pray?', I had to translate the question, 'Do you

have a conversation with Granny?'")

c. "Now [5 years sober] my mind has opened up to new religions and I

have a sense of faith and spiritual well-being."

d. "I 'went out' between two and five years and studied eastern religions."

e. "I 'went out' between two and five years and became involved with

psychic phenomena."

f. "I began to see God differently around two years of sobriety."

g. "AA is the only stable thing in my life [5 years sobriety]. I am

recovering and that is the only stable thing I can define about myself".

h. "I feel less lonely due to the unity of AA as my higher power".

3. Stabilization of Spiritual Beliefs

At about seven or eight years of sobriety, yet another spiritual "shift" seemed to be occurring. At this point, addicted individuals either returned to traditional organized religions or extended an alternative pathway to spirituality. Some of the comments particular to theme were:

a. "Around six or seven years of sobriety I returned to organized religion."

b. "I came back around my eighth year because my son wanted to go to Sunday school...I am not alcoholic in my essence. AA is a religion with rituals and traditions...Discipline and spirituality result in a lot of freedom...We all have the same god with different definitions."

c. "I never 'came back' to traditional religion, maybe because I never had anything to come back for."

Discussion

The Spiritual Well-Being Scale provides both the researcher and clinician working with addictive clients a viable starting point for incorporating transcendent issues into the psychotherapeutic enterprise. As mentioned earlier, the instrument is straightforward, simple to administer and has been sufficiently researched to provide such a starting point. However, the finding that the addicted population scored significantly lower on SWB and the attendant subscales than the normal population raises more questions than such an empirical investigation can answer.

Those psychologists and theologians that typically deal with transcendent and spiritual matters, theoretically or in applied counseling

contexts, would certainly respond by stating the implausibility of capturing transcendent experiences in a survey measure. Moreover, employing statistical reasoning to contrast groups responding to such an instrument would therefore be equally suspect. What seemed to be needed was more descriptive accounting of the process underlying spiritual well-being.

It seems at the root of this dilemma is the idiographic-nomothetic conceptions of humans (Howard & Myers, 1990). Nomothetic approaches, exemplified here by the SWB Scale itself, search for the commonalties that might exist between addicted individuals and their non-addicted counterparts. Here, a "standard" is invoked by which people are measured. The idiographic approach searches for those characteristics that make individuals unique and different from all others. The focus group analysis is a preliminary step to understanding how an addicted individual may struggle for spiritual well-being in light of certain circumstances and life experiences. More significantly, how do such individuals assign meaning of a spiritual nature to these same life events?

Our perspective is essentially that nomothetic and idiographic ways of knowing about transcendent and spiritual experiences are irreducible to each other. Yet, at the same time, they are also complementary to each other. It is this point that we believe is most important to consider in research inquiry and cinical application of spirituality in psychological practice. That is, we can invoke standards of measurement to seek commonalities only so long as we acknowledge the incompleteness of such an approach. Richer, more descriptive, narrative

accounts of the process and struggle for spiritual well-being must be sought out to provide deeper, connotative meanings. When inquiry is made with respect to spiritual experience in human development and change both irreducible but complementary modes of inquiry and knowing should be present.

We further purport that when discussing spiritual well-being in the research interview or clinical session, that nomothetic approaches be utilized as a means of departure to deeper, connotative descriptions. Nomothetic approaches allow us to "locate" ourselves and our clients and to begin the search for uniqueness pathways to spiritual well-being. The focus group analysis further provides the context for those nomothetic standards to exist in nonjudgmental juxtaposition with our own individual experiences. Allowing each individual to take the survey (nomothetic) and render a storied account (idiographic) concerning the particular struggle for spiritual well-being, appears to provide an opportunity for these two modes of knowing to be complementary.

Finding out that alcoholics score significantly lower on the scale and both its subscales is useful information, but it is still not meaningful in the connotative sense. Using these findings to construct questions that probe pathways particular to this group is perhaps the best utilization of nomothetic data. In turn, coming to an understanding as to how alcoholics interpret and give meaning to events and concerns of a transcendent nature should, in the future, allow us to create new hypotheses and new "versions" of the Spiritual Well-Being Scale that may be more sensitive to

this special group's particular needs. In this way, assessing spiritual needs is a cycle and more precisely an on-going spiral of investigation that attempts to balance the irreducible elements of the universal (standards and norms) with the particular (unique aspects of spiritual experience).

There are other contingencies and factors that can be further explored. Some of these include environmental concerns, cultural background, emotional factors and gender and social factors. As such contingencies are included in an expanded spiral of nomothetic and idiographic research, our ability to understand the rich, diverse and intricate web of human needs for spirituality and transcendence will be enhanced. The incorporation of such needs into existing and new psychotherapeutic and counseling models can potentially proceed directly from this type of research and exploration, as it attempts to resemble in its practice of assessment and reflection and hypothesis creation, the counseling/therapy process itself.

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Table 1

Descriptive Statistics and T-tests

	Group	
Scale	Nonalcoholics (n = 58)	Alcoholics (n = 50)
Spiritual Well-Being (SWB)		
M	101.14	92.84
SD	11.78	16.60
Religious Well-Being (SWB)		
M	50.84	48.52
SD	7.97	9.39
Existential Well-Being (EWB)		
M	49.95	45.71
SD	6.08	8.52

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