Purpose:

1. To obtain national estimates of Primary Care Physicians (PCPs) attitudes, knowledge and practices concerning behavioral and mental health concerns in general and as specifically related to practice.
2. To obtain a national but small sample of Psychiatrists for comparison with Primary Care Physicians
3. To understand the relationship between religiosity and these attitudes, knowledge and practices for both Psychiatrists and PCPs and to compare the relationships across physician samples.

Sampling: Samples were drawn from the American Medical Association Physician Master File. This sample frame includes practicing physicians from the United States and its territories. The frame is a near complete listing of MDs and DOs. Physicians from both groups were included in our samples. We limited our samples to physicians who were 65 years of age or younger and who were practicing only in the 48 contiguous states, Alaska, and Hawaii (i.e., we eliminated those practicing in the territories).

The PCP sample consisted of 1,504 cases selected from the following physician primary specialty/secondary specialty group combinations: Primary specialty, Family Medicine, General Practice, Family Practice and Internal Medicine; Secondary specialty, Family Medicine, General Practice, Family Practice, Internal Medicine and unspecified (indicating those designated primary care physicians without a secondary specialty). The Psychiatry sample consisted of 512 physicians selected from the following physician primary specialty/secondary specialty groups: Primary specialty, Psychiatry; Secondary specialty, Psychiatry, unspecified.

Sample Design: The PCP portion of the sample frame was sorted into 4 strata before sample selection: (1) those with South Asian last names, (2) those with Arabic last names, (3) those with Jewish last names and (4) everyone else. Demographers were consulted to obtain lists of last names. Last name groups were used as proxy measures of the following religious groups we wished to over-represent in our sample – Hindu’s, Muslims, and Jews. A total of 1,500 cases were selected at random from across these strata. The following table gives the breakdown of frequency and percent of cases within stratum
<table>
<thead>
<tr>
<th>Last Name Group</th>
<th>n</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Asian</td>
<td>121</td>
<td>8.05</td>
<td>8.05</td>
</tr>
<tr>
<td>Arabic</td>
<td>171</td>
<td>11.37</td>
<td>19.41</td>
</tr>
<tr>
<td>Jewish</td>
<td>86</td>
<td>5.72</td>
<td>25.13</td>
</tr>
<tr>
<td>All Other</td>
<td>1,126</td>
<td>74.87</td>
<td>100.00</td>
</tr>
<tr>
<td>Total</td>
<td>1,504</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The Psychiatry portion of the sample frame was not sorted by strata. 512 cases were selected at random from this portion.

**Questionnaire Development:** Questionnaire topics were developed through qualitative interviews with PCPs and Psychiatrists in consultation with prominent Psychiatrist researchers. Cognitive interviewers on selected questions were conducted with a small group of PCP physicians around the country. Questionnaires were pretested on PCP physicians at university of Chicago hospital. The PCP and Psychiatrist questionnaires are nearly identical. A copy of the final questionnaires and a crosswalk between the two questionnaires are attached as appendices. Questionnaire topics are listed below.

**Topics:**

1. Mood and Affect
2. Chronic, Medically Unexplained Symptoms
3. Substance Abuse
4. Religion and Mental Health
5. Negotiating Medical Decisions
6. Your Practice Setting
7. Career Satisfaction and Professionalism
8. Your Spiritual and Religious Characteristics
9. Other Demographic Characteristics

**Data collection:** All questionnaires were administered by mail. The PCP and Psychiatrist surveys were on slightly different schedules:

**PCP Survey:**
- Advance letter mailed: October 29th, 2009
- First questionnaire mailed: November 5th, 2009
- Post card reminder mailed: November 12th, 2009
- Second questionnaire mailed: December 14th, 2009
- Third questionnaire mailed: January 15th, 2010

In addition, intermediate mailings were conducted as we received better information on advance letters or survey questionnaires that were returned because the addresses were bad.

**Psychiatrist Survey:**
- Advance letter mailed: November 10th, 2009
- First questionnaire mailed: November 17th, 2009
- Post card reminder mailed: November 24th, 2009
- Second questionnaire mailed: January 4th, 2010
- Third questionnaire mailed: February 4th, 2010
In addition, intermediate mailings were conducted as we received better address information for the advance letters or survey questionnaires that were returned because the addresses were bad. One of the psychiatrists on the research team helped us to gain access to email addresses of non-responding sample members who were members of the American Psychiatric Association. Emails were sent to these sample members asking them to contact us with a correct mailing address if they had not received a questionnaire in the mail, to return their questionnaire if they had received one, or to request a new one if they had received it but had mislaid it.

For both the PCP and Psychiatrist survey, sample members received a $20 cash incentive in the first mailing. Sample members who were nonrespondents by the third mailing received a notification with their third questionnaire that they would receive an additional $30 for completing the questionnaire and returning it to us.

**Data Processing:** Questionnaires were receipted as soon as they were returned. Each questionnaire was then double-entered into an Excel spreadsheet. After the data entry was completed the two versions were compared with one another using and Excel function and discrepancies were checked against the hard copy.

**Response rates: PCP sample:** Of the 1504 PCP cases fielded, 77 were declared out of scope because surveys were returned after three attempts were made to contact respondents at different addresses or we had received information that the physician had retired moved out of the country or was no longer in practice. Completed cases, response rates and refusal rates for the 1427 in-scope cases are shown in the following table.

<table>
<thead>
<tr>
<th>Stratum</th>
<th>Responded</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>South Asian</td>
<td>49</td>
<td>63</td>
</tr>
<tr>
<td>%</td>
<td>43.7</td>
<td>56.2</td>
</tr>
<tr>
<td>Arabic</td>
<td>77</td>
<td>85</td>
</tr>
<tr>
<td>%</td>
<td>47.5</td>
<td>52.5</td>
</tr>
<tr>
<td>Jewish</td>
<td>25</td>
<td>59</td>
</tr>
<tr>
<td>%</td>
<td>29.8</td>
<td>70.2</td>
</tr>
<tr>
<td>Other</td>
<td>380</td>
<td>689</td>
</tr>
<tr>
<td>%</td>
<td>35.6</td>
<td>64.4</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>531</strong></td>
<td><strong>896</strong></td>
</tr>
<tr>
<td>%</td>
<td><strong>37.2</strong></td>
<td><strong>62.8</strong></td>
</tr>
</tbody>
</table>

**Psychiatry sample:** Responses were obtained for 312 of the 487 eligible psychiatrist sample members yielding a response rate of 64.1%

**Weighting:** PCP sample. A base weight was constructed for each stratum by dividing the stratum’s sample frame total by the number of cases sampled for fielding minus the number of ineligible cases (inverse of the selection probability within stratum). The base weight was adjusted for nonresponse within fourteen post-stratification adjustment cells formed by the combination of name stratum, whether the physician attended a medical school inside or outside of the US and Practice Type (T/O=Teaching and Office Based, Oth.=Other). A factor was calculated for each of these eight cells by taking the inverse of the response rate for each cell. The final weight was the product of the base weight and the nonresponse adjustment factor. The sum of the final weights across all 1,427 eligible respondents is equal to the sample frame total of 136,403. Details are presented in the two tables below.
**CALCULATE BASE WEIGHT**

<table>
<thead>
<tr>
<th>Selections</th>
<th>Number in Frame</th>
<th>Selection Probability</th>
<th>Base Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Asian</td>
<td>112</td>
<td>32391</td>
<td>0.003</td>
</tr>
<tr>
<td>Arabic</td>
<td>162</td>
<td>7515</td>
<td>0.022</td>
</tr>
<tr>
<td>Jewish</td>
<td>84</td>
<td>4609</td>
<td>0.018</td>
</tr>
<tr>
<td>Everyone else</td>
<td>1,069</td>
<td>127839</td>
<td>0.008</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1427</strong></td>
<td><strong>172354</strong></td>
<td></td>
</tr>
</tbody>
</table>

**CALCULATE POSTSTRATIFICATION ADJUSTMENT**

<table>
<thead>
<tr>
<th>Name Group</th>
<th>Med. Sch.</th>
<th>Pract. Type</th>
<th>Targeted</th>
<th>Obtained</th>
<th>Response Rate (RR)</th>
<th>1/RR</th>
<th>Final Weight</th>
<th>Obtained X Final Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA US Oth.</td>
<td>51</td>
<td>26</td>
<td>0.51</td>
<td>1.96</td>
<td>572.40</td>
<td>14882.35</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SA US T/O</td>
<td>4</td>
<td>4</td>
<td>1.00</td>
<td>1.00</td>
<td>291.81</td>
<td>1167.243</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SA For. Oth.</td>
<td>56</td>
<td>33</td>
<td>0.59</td>
<td>1.70</td>
<td>495.19</td>
<td>16341.41</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arabic US Oth.</td>
<td>52</td>
<td>32</td>
<td>0.62</td>
<td>1.63</td>
<td>75.38</td>
<td>2412.222</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arabic US T/O</td>
<td>4</td>
<td>2</td>
<td>0.50</td>
<td>2.00</td>
<td>92.78</td>
<td>185.556</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arabic For. Oth.</td>
<td>94</td>
<td>45</td>
<td>0.48</td>
<td>2.09</td>
<td>96.90</td>
<td>4360.556</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arabic For. T/O</td>
<td>12</td>
<td>6</td>
<td>0.50</td>
<td>2.00</td>
<td>92.78</td>
<td>556.6667</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arabic US Oth.</td>
<td>61</td>
<td>40</td>
<td>0.66</td>
<td>1.53</td>
<td>83.68</td>
<td>3347.012</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jewish US T/O</td>
<td>9</td>
<td>8</td>
<td>0.89</td>
<td>1.12</td>
<td>61.73</td>
<td>493.8214</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jewish For. Oth.</td>
<td>14</td>
<td>11</td>
<td>0.79</td>
<td>1.27</td>
<td>69.83</td>
<td>768.1667</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jewish US Oth.</td>
<td>755</td>
<td>487</td>
<td>0.65</td>
<td>1.55</td>
<td>185.40</td>
<td>90288.54</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other US T/O</td>
<td>103</td>
<td>79</td>
<td>0.77</td>
<td>1.30</td>
<td>155.92</td>
<td>12317.51</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other For. Oth.</td>
<td>205</td>
<td>119</td>
<td>0.58</td>
<td>1.72</td>
<td>206.01</td>
<td>24515.43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other For. T/O</td>
<td>6</td>
<td>4</td>
<td>0.67</td>
<td>1.50</td>
<td>179.38</td>
<td>717.5248</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>172354</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**File construction:** After the data were cleaned Stata files were constructed with variable names matching the question numbers on the questionnaire and variable and value labels also matching the questionnaire. Separate files were created for PCPs and Psychiatrists. Two combination files were created, one for comparing PCPs and Psychiatrists and one for making population estimates to the combined universe of PCPs and Psychiatrists. All files are self-documenting as described above.
Description of Experimental Manipulations – PCP Questionnaire

Seven randomized experiments were included in the PCP survey questionnaire. The text and manipulations, along with response options, are given below. Respondent identification numbers were randomly assigned to condition independently within each experiment having the effect of randomizing respondents across experimental versions and negating contamination effects of a condition in a prior experiment on a condition in a subsequent one.

**Experiment 1:**

1. A 52-year-old man presents to his primary care physician for the third time in five months. He complains of difficulty sleeping, loss of appetite, irritability, and feeling “down” but not suicidal. He reports «F1» with his marriage «F1_ADD» work. He exercises regularly. He says he is «F2». Physical exam is unremarkable except for a sad affect, and routine labs are normal. He is open to “anything” the doctor thinks will help.

   Given this limited information, please indicate how likely you would be to do each of the following for this patient (*Assume all strategies are available and financially feasible for the patient*):

<table>
<thead>
<tr>
<th>How likely would you be to:</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) See the patient regularly for counseling yourself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in his religious community</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MANIPULATIONS:**

F1: problems/no problems

F1_ADD: and (for F1=problems), or (for F1=no problems)

F2: Christian and regularly attends church

   Christian but rarely attends church

   Jewish and regularly attends synagogue

   Jewish but rarely attends synagogue
Experiment 2:

4. A 23-year-old woman presents for the third time in five months. She complains of difficulty with ruminative thoughts, restlessness, tension, and worry. She reports «F3» with her school «F3_ADD» work. She exercises regularly. She says she is «F4». Physical exam is unremarkable except for an anxious affect, and routine labs are normal. She is open to “anything you think will help.”

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient):

<table>
<thead>
<tr>
<th></th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANIPULATIONS: The manipulations were identical to those used in question 1 but were arranged to be exactly the opposite. For example, if a respondent received “problems” and “Christian but rarely attends church” in question 1 that respondent would receive “no problems” and “Jewish and regularly attends synagogue” in
Experiment 3:

8. A 41-year old woman presents for her seventh clinic visit complaining of generalized muscle pains, fatigue and headaches. She has had the symptoms for several years. Prior physicians have diagnosed her with fibromyalgia and chronic fatigue syndrome. Physical exam is unremarkable except for tenderness over multiple areas of her body. Diagnostic workups have not found any physiological abnormalities. Regular exercise, NSAIDS, and muscle relaxants have not provided relief. She denies depression «F5». She says she is Muslim «F6». She is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

<table>
<thead>
<tr>
<th>How likely would you be to:</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) See the patient regularly for counseling yourself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in her religious community</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANIPULATIONS:

F5: but reports problems/and reports no problems
F6: and is very religiously observant/but is not very religiously observant
Experiment 4:

11. A 47-year-old man is admitted to the hospital with acute alcohol poisoning. After a medical detox, the patient says he has been drinking heavily for years and wants to get help. He has never been hospitalized or gone through rehabilitation before. He identifies himself as Christian «F7».

Please indicate how effective you think each of the following alcoholism treatment plans would be for this patient:

<table>
<thead>
<tr>
<th>Plan</th>
<th>Very effective</th>
<th>Somewhat effective</th>
<th>Not very effective</th>
<th>Not at all effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Participation in a local chapter of Alcoholics Anonymous (AA)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Pharmacological therapy by a physician who specializes in the treatment of addiction</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Completion of a residential rehabilitation program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANIPULATIONS:

F7: but says he has not been to church in months/ but says he never has been a church-goer

Experiment 5:

14. In your judgment, to what extent is «F8» each of the following:

<table>
<thead>
<tr>
<th>Plan</th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) A response to psychological woundedness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) A result of moral failings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANIPULATIONS:

F8: alcoholism/drug addiction
**Experiment 6:**

19. Please indicate to what extent you agree or disagree with the following statements: When dealing with «F9» medical decisions, a physician should …

<table>
<thead>
<tr>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Avoid influencing the patient’s decision one way or another.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Encourage the patient to make the decision that the physician believes is best.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MANIPULATIONS:**

F9: morally controversial/typical

**Experiment 7:**

20. A 54-year-old man presents to his physician and requests «F10». The physician believes that to provide the «F10_add» would violate the physician’s «F11» standards. The physician «F12» the patient why he objects to providing the «F10_add». The physician «F13» «F10_add».

In your judgment, how appropriate are the physician’s actions in this case?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very appropriate</td>
<td>Somewhat appropriate</td>
<td>Somewhat inappropriate</td>
<td>Very inappropriate</td>
</tr>
</tbody>
</table>

**MANIPULATIONS:**

F10: a clinical intervention/narcotic pain medication
F10_ADD: intervention (when F10=a clinical intervention)/medication(when F10=narcotic pain medication)
F11: personal/professional
F12: tells/does not tell
F13: then provides the/refers the patient to another physician who will provide the/ acknowledges that what the patient requests is legal and is provided by other physicians, but says he cannot in good conscience refer the patient to a physician who would provide the/ does not acknowledge that what the patient requests is legal is provided by other physicians and but does not refer the patient to another physician who will provide the
Experiments 1 through 5 were included in the Psychiatrist Questionnaire. Wording changes in the question stem, the removal of certain response options and the inclusion of others were necessary to make the clinical vignettes appropriate for psychiatrists. Please see the Psychiatrist Questionnaire in the appendix for the changes.

Because the PCP and Psychiatrist Questionnaires had different numbers of questions the experiments are numbered differently in each questionnaire. The following table gives the experiment number and the question numbers corresponding to each experiment for the PCP and Psychiatrist Questionnaire, respectively.

<table>
<thead>
<tr>
<th>Experiment Number</th>
<th>PCP Questionnaire</th>
<th>Psychiatrist Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Question Number 1</td>
<td>Question Number 1</td>
</tr>
<tr>
<td>2</td>
<td>Question Number 4</td>
<td>Question Number 5</td>
</tr>
<tr>
<td>3</td>
<td>Question Number 8</td>
<td>Question Number 10</td>
</tr>
<tr>
<td>4</td>
<td>Question Number 11</td>
<td>Question Number 14</td>
</tr>
<tr>
<td>5</td>
<td>Question Number 14</td>
<td>Question Number 15</td>
</tr>
</tbody>
</table>
Religion, Spirituality and Common Mental Health Concerns:  
A National Physician Survey

Supported by grants from the National Institutes of Health (NIH) and the Templeton Foundation

Dear Fellow Physician,

There is increasing public and professional interest in the relationship between religion and mental health, yet little is known about what practicing physicians think. In order to shed light on doctors’ viewpoints, we would greatly appreciate it if you would take a moment to complete the attached questionnaire. This is part of a National Institutes of Health (NIH) sponsored study to understand physicians’ perspectives on religion and common mental health concerns.

You are one of 2000 physicians selected with the aim of representing physicians nationwide, and for the study to be accurate, we need your response. The questionnaire takes about 20 minutes to complete. Your responses will be confidential and in publications from this study, your name will never be matched to your answers. If you prefer not to answer a question for any reason, you may skip it. However, we hope that you will give your best answer to every question.

As a fellow physician, I know how limited and valuable your time is. Although we cannot compensate you for your time, we have included a $20 bill with the questionnaire as a token of our appreciation for your generous assistance.

Again, thank you for your time and your participation in this important study.

Sincerely,

Farr A. Curlin, MD
Please indicate your opinions and practices related to the following mental health conditions.

MOOD AND AFFECT

Consider the following clinical scenario:

1. A 52-year-old man presents for the third time in five months. He complains of difficulty sleeping, loss of appetite, irritability, and feeling “down” but not suicidal. He reports «F1» with his marriage «F1_ADD» work. He exercises regularly. He says he is «F2». Physical exam is unremarkable except for a sad affect, and routine labs are normal. He is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient):

<table>
<thead>
<tr>
<th>How likely would you be to:</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling yourself</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in his religious community</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
</tbody>
</table>

2a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F2_ADD» teachings?

□ 1 Yes  
□ 2 No  
Amonging there were …

2b. How likely would you be to refer this patient to one of those professionals?

□ 1 Very likely  
□ 2 Somewhat likely  
□ 3 Not very likely  
□ 4 Not at all likely

3. In general, how much would people with depression benefit from each of the following?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>c) Taking antidepressant medications</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
</tbody>
</table>
Consider the following clinical scenario:

4. A 23-year-old woman presents for the third time in five months. She complains of difficulty with ruminative thoughts, restlessness, tension, and worry. She reports “F3” with her school “F3_ADD” work. She exercises regularly. She says she is “F4”. Physical exam is unremarkable except for an anxious affect, and routine labs are normal. She is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (*Assume all strategies are available and financially feasible for the patient.*):

<table>
<thead>
<tr>
<th>How likely would you be to:</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) <em>Prescribe an anti-anxiety medication</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) <em>See the patient regularly for counseling</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) <em>Refer to a psychiatrist</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>d) <em>Refer to a psychologist or other licensed</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>e) <em>Encourage the patient to get more involved in</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>f) <em>Encourage the patient to get more involved in</em></td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>

5a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on “F4_ADD” teachings?

□1 Yes
□2 No — Assuming there were …

5b. How likely would you be to refer this patient to one of those professionals?

□1 Very likely
□2 Somewhat likely
□3 Not very likely
□4 Not at all likely

6. In general, how much would people with anxiety benefit from each of the following?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
</tr>
<tr>
<td>c) Taking anti-anxiety medications</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
</tr>
</tbody>
</table>
7. To what extent do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

a) Physicians too often treat normal sadness as if it were a medical illness.

b) Undertreatment of depression is a more pressing problem than overtreatment of normal sadness.

c) Physicians too often treat normal worry and stress as if it were a medical illness.

d) Undertreatment of anxiety disorders is a more pressing problem than overtreatment of normal worry and stress.

---

**CHRONIC, MEDICALLY UNEXPLAINED SYMPTOMS**

Please consider the following clinical scenario:

8. A 41-year old woman presents for her seventh clinic visit complaining of generalized muscle pains, fatigue and headaches. She has had the symptoms for several years. Prior physicians have diagnosed her with fibromyalgia and chronic fatigue syndrome. Physical exam is unremarkable except for tenderness over multiple areas of her body. Diagnostic workups have not found any physiological abnormalities. Regular exercise, NSAIDS, and muscle relaxants have not provided relief. She denies depression «F5». She says she is Muslim «F6». She is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

<table>
<thead>
<tr>
<th>How likely would you be to:</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling yourself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in her religious community</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

---

9. In general, how much do you think patients with these symptoms would benefit from each of the following?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>c) Taking medications</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
10. Please indicate whether you agree or disagree with the following statements about patients who have multiple chronic symptoms for which there is no clear physiological abnormality after a thorough medical workup:

<table>
<thead>
<tr>
<th>Such patients …</th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) are usually experiencing the normal ups and downs of life.</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>b) have medical conditions that scientific research will one day be able to explain.</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>c) tend to have a root problem that is spiritual in nature.</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>d) often get better with treatment by physicians.</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
</tbody>
</table>

**SUBSTANCE ABUSE**

Please consider the following clinical scenario:

11. A 47-year-old man is admitted to the hospital with acute alcohol poisoning. After a medical detox, the patient says he has been drinking heavily for years and wants to get help. He has never been hospitalized or gone through rehabilitation before. He identifies himself as Christian «F7».

Please indicate how effective you think each of the following alcoholism treatment plans would be for this patient:

<table>
<thead>
<tr>
<th>Treatment Plan</th>
<th>Very effective</th>
<th>Somewhat effective</th>
<th>Not very effective</th>
<th>Not at all effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Participation in a local chapter of Alcoholics Anonymous (AA)</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>b) Pharmacological therapy by a physician who specializes in the treatment of addiction</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td>c) Completion of a residential rehabilitation program</td>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
</tbody>
</table>

12a. To the best of your knowledge, are there any explicitly faith-based alcoholism treatment programs (not including AA) in your area to which you could potentially refer this patient?

- [ ] Yes
- [ ] No

Assuming there were …

12b. How likely would you be to refer this patient to one of those programs?

- [ ] Very likely
- [ ] Somewhat likely
- [ ] Not very likely
- [ ] Not at all likely
13. To what extent do you agree with the following statement: An emphasis on spirituality is critical to the success of 12-step programs.

☐ 1 Agree strongly
☐ 2 Agree somewhat
☐ 3 Disagree somewhat
☐ 4 Disagree strongly

14. In your judgment, to what extent is «F8» each of the following:

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) A response to psychological woundedness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) A result of moral failings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15. Please indicate the extent to which the following conditions result from choices for which patients are responsible?

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Alcoholism</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Obesity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Nicotine dependence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Depression</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Anxiety</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Chronic back pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) Fibromyalgia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16. Please indicate how much personal satisfaction you experience when taking care of patients with the following conditions:

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>A little</th>
<th>Some</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Alcoholism</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Obesity</td>
<td></td>
<td></td>
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<tr>
<td>g) Fibromyalgia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
RELIGION AND MENTAL HEALTH

17. Please indicate whether you agree or disagree with the following statements:

<table>
<thead>
<tr>
<th></th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Participating in a religious congregation provides unique psychological benefits that are not found by participating in nonreligious social groups.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) Any psychological benefits of participating in a religious congregation can also be found by participating in nonreligious social groups.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

18. Please indicate whether you think each of the following have a positive or negative effect on psychological well-being:

<table>
<thead>
<tr>
<th></th>
<th>Almost always negative</th>
<th>More negative than positive</th>
<th>Equally positive and negative</th>
<th>More positive than negative</th>
<th>Almost always positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Being deeply involved in a religious community</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) Regularly attending religious services</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) Avoiding behaviors forbidden by one’s religion</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) Frequent prayer</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>e) Believing that after death there will be a divine judgment</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>f) Directly feeling God’s presence</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>g) Having an authoritative religious mentor</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

NEGOTIATING MEDICAL DECISIONS

19. Please indicate to what extent you agree or disagree with the following statements: When dealing with «F9» medical decisions, a physician should …

<table>
<thead>
<tr>
<th></th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Avoid influencing the patient’s decision one way or another.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) Encourage the patient to make the decision that the physician believes is best.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
Please consider the following clinical scenario:

A 54-year-old man presents to his physician and requests «F10». The physician believes that to provide the «F10_add» would violate the physician’s «F11» standards. The physician «F12» the patient why he objects to providing the «F10_add». The physician «F13» «F10_add».

20. In your judgment, how appropriate are the physician’s actions in this case?

- [ ] 1 Very appropriate
- [ ] 2 Somewhat appropriate
- [ ] 3 Somewhat inappropriate
- [ ] 4 Very inappropriate

21. Once the medical options have been described to patients, how much responsibility do physicians and religious communities have for providing guidance to patients in each of the following situations? (assuming patients belong to a religious congregation or community)

<table>
<thead>
<tr>
<th>The patient …</th>
<th>Physicians’ responsibility to provide guidance</th>
<th>Religious communities’ responsibility to provide guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) faces a frightening medical diagnosis or crisis.</td>
<td>None</td>
<td>A little</td>
</tr>
<tr>
<td>b) will die within a few weeks.</td>
<td>None</td>
<td>A little</td>
</tr>
<tr>
<td>c) suffers from anxiety or depression.</td>
<td>None</td>
<td>A little</td>
</tr>
<tr>
<td>d) faces a morally complex medical decision.</td>
<td>None</td>
<td>A little</td>
</tr>
</tbody>
</table>

YOUR PRACTICE SETTING

22. Please estimate how many hours you spend in a typical week doing:

- A. Outpatient care: ______(# hours/week)
- B. Inpatient care: ______(# hours/week)
- C. Other work-related tasks: ______(# hours/week)

23. Please estimate how many hours you spend in a typical day at work on activities that you find personally rewarding: ______(# hours/day)
24. Are you a hospitalist?

☐ 1  Yes
☐ 2  No

25. Is your patient population considered medically underserved?

☐ 1  Yes
☐ 2  No

26. Is your place of practice religiously oriented or “faith-based”?

☐ 1  Yes
☐ 2  No

27. Please estimate (to the best of your knowledge):
   a. Including you, how many physicians work in your primary place of practice?
      _______ (# of physicians)

   b. What percentage of the physicians in your primary place of practice are similar to you in their views regarding morally controversial health care practices?
      _______ (% of physicians)
      ☐ 1  Don’t know

   c. What percentage of your patients come to see you because of your religious characteristics?
      _______ (% of patients)

28. For you personally, how important is it to work with colleagues who share your ethical/moral outlook regarding morally controversial health care practices?

☐ 1  Very important
☐ 2  Somewhat important
☐ 3  Not very important
☐ 4  Not at all important

29. To what extent do you agree or disagree with the following statements about your current practice?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) I have control over my work hours or call schedule.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>b) I have control over the kinds of clinical conditions I see.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>c) My clinical environment prioritizes the needs of the patient over maximizing revenue.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
</tbody>
</table>
CAREER SATISFACTION AND PROFESSIONALISM

30. Thinking very generally about your satisfaction with your overall career in medicine, would you say that you are currently:

- [ ] 1 Very satisfied
- [ ] 2 Somewhat satisfied
- [ ] 3 Neither satisfied nor dissatisfied
- [ ] 4 Somewhat dissatisfied
- [ ] 5 Very dissatisfied

31. Using your own definition of burnout, please choose one of the following:

- [ ] 1 I enjoy my work. I have no symptoms of burnout.
- [ ] 2 Occasionally I am under stress, and I don’t always have as much energy as I once did, but I don’t feel burned out.
- [ ] 3 I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.
- [ ] 4 The symptoms of burnout that I’m experiencing won’t go away. I think about frustration at work a lot.
- [ ] 5 I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.

32. To what extent do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The family in which I was raised emphasized the importance of serving those with fewer resources.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>b) For me, the practice of medicine is a calling.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>c) If I had it to do over again, I would not choose medicine as a career.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>d) If I had it to do over again, I would go into a different clinical specialty.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>e) In the next few years, I hope to reduce the amount of time I spend in direct patient care.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>f) In the next few years, I hope to leave the practice of medicine.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
</tbody>
</table>

YOUR SPIRITUAL AND RELIGIOUS CHARACTERISTICS

33. To what extent do you consider yourself a spiritual person?

- [ ] 1 Very spiritual
- [ ] 2 Moderately spiritual
- [ ] 3 Slightly spiritual
- [ ] 4 Not spiritual at all
34. How important would you say your religion is in your own life?

☐ 1. The most important part of my life
☐ 2. Very important in my life
☐ 3. Fairly important in my life
☐ 4. Not important in my life
☐ 9. Not applicable. I have no religion

35. Which of the following best indicates your religious affiliation?

☐ 1. None
☐ 2. Buddhist
☐ 3. Hindu
☐ 4. Jewish
☐ 5. Muslim
☐ 6. Roman Catholic
☐ 7. Eastern Orthodox
☐ 8. Protestant
☐ 9. Other Christian
☐ 10. Other Religion (please specify)

a. If Jewish, would you say you are …
☐ 1. Orthodox
☐ 2. Conservative
☐ 3. Reform
☐ 4. Secular
☐ 5. Other

b. If Christian, do you consider yourself evangelical?
☐ 1. Yes
☐ 2. No

36. How often do you attend religious services?

☐ 1. Never
☐ 2. Less than once a year
☐ 3. About once or twice a year
☐ 4. Several times a year
☐ 5. About once a month
☐ 6. Two to three times a month
☐ 7. Nearly every week
☐ 8. Every week
☐ 9. Several times a week

37. To what extent do you agree or disagree with the following statements?

a) Different religions have different versions of the truth, and each may be equally right in its own way
☐ Agree strongly
☐ Agree somewhat
☐ Disagree somewhat
☐ Disagree strongly

b) There is one religion that is uniquely and comprehensively true
☐ Agree strongly
☐ Agree somewhat
☐ Disagree somewhat
☐ Disagree strongly

c) There is no one, true, right religion
☐ Agree strongly
☐ Agree somewhat
☐ Disagree somewhat
☐ Disagree strongly

d) I try hard to carry my religious beliefs over into all my other dealings in life
☐ Agree strongly
☐ Agree somewhat
☐ Disagree somewhat
☐ Disagree strongly

e) My whole approach to life is based on my religion
☐ Agree strongly
☐ Agree somewhat
☐ Disagree somewhat
☐ Disagree strongly
OTHER DEMOGRAPHIC CHARACTERISTICS

38. Do you consider yourself Hispanic or Latino?
   □ 1 Yes
   □ 2 No

39. How would you classify your race?  [CHECK ONLY ONE]
   □ 1 Asian
   □ 2 Black or African-American
   □ 3 American Indian or Alaskan Native
   □ 4 White or Caucasian
   □ 5 Other (please specify) _____________________________

A. If Asian, do you think of yourself as …
   □ 1 East Asian or Pacific Islander
   □ 2 South Asian
   □ 3 Other Asian

40. Which of the following best describes how long you have been in the United States?
   □ 1 You immigrated to the United States as an adult.
   □ 2 You immigrated to the United States as a child.
   □ 3 One or both of your parents immigrated to the United States before you were born.
   □ 4 Both of your parents were born in the United States

41. When you think of the relationship between religion and psychological well-being, what are the aspects of religion that first come to mind?
   ____________________________________________
   ____________________________________________
   ____________________________________________

42. Please use the following space for anything else you would like to tell us about the care of patients with mental health concerns.
   ____________________________________________

If you would be willing to participate in a 15-30 minute confidential phone interview about religion and the practice of medicine, please check this box □ and indicate below the preferred way to reach you. A portion of respondents who volunteer will be contacted.

   Phone number: (_____) ______________________
   E-mail: ______________________________

Please return this survey in the enclosed, postage-paid envelope.

Thank you for participating!
Religion, Spirituality and Common Mental Health Concerns:  
A National Physician Survey

Supported by grants from the National Institutes of Health (NIH) and the Templeton Foundation

Dear Fellow Physician,

I am writing on behalf of the study we are conducting from the University of Chicago’s Program on Medicine and Religion. We mailed a blue envelope to you with a questionnaire about mental and behavioral health care, and a self-addressed stamped return envelope. So far we have not received your completed questionnaire.

We selected this topic because doctors often face patients with puzzling symptoms yet the factors that influence the way doctors respond are not well understood. You are one of 2000 physicians from around the country that were selected using a scientific sampling procedure that will allow us to understand how physicians think about these topics. It is important for us to obtain this understanding so that we can inform doctors, through publications, about the current state of practice and so that medical education can be designed that will help future physicians to practice in the best possible way.

This is your last opportunity to participate in this study. We ask that you please complete the questionnaire and return it to us. **We will send you $30 (in addition to the $20 that we included in the original mailing) in appreciation of your efforts.** Your responses are completely confidential, and this research has been approved by the University Institutional Review Board. The information you give us will only be used statistically to advance knowledge about the practice of medicine.

If you have already mailed your questionnaire, we did not receive it. We ask that you complete this questionnaire and in return we will send you a check for $30. We apologize for the inconvenience. To contact us about this study, please call or email Project Director Kenneth Rasinski at 773-834-6837, or at krasinsk@uchicago.edu.

We hope to hear from you soon.

Sincerely,

Farr A. Curlin, MD
Please indicate your opinions and practices related to the following mental health conditions.

MOOD AND AFFECT

Consider the following clinical scenario:

1. A 52-year-old man presents to his primary care physician for the third time in five months. He complains of difficulty sleeping, loss of appetite, irritability, and feeling “down” but not suicidal. He reports «F1» with his marriage «F1_ADD» work. He exercises regularly. He says he is «F2». Physical exam is unremarkable except for a sad affect, and routine labs are normal. He is open to “anything” the doctor thinks will help.

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

<table>
<thead>
<tr>
<th>Option</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in his religious community</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F2_ADD» teachings?

☐ 1 Yes
☐ 2 No → Assuming there were…

2b. How likely would you be to recommend that the primary care physician refer the patient to one of those professionals?

☐ 1 Very likely
☐ 2 Somewhat likely
☐ 3 Not very likely
☐ 4 Not at all likely
3. If the primary care physician referred this patient to you, how likely would you be to do each of the following for this patient (Assume all strategies are financially feasible for the patient.):

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) Refer to a psychologist or other licensed counselor</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>

4. In general, how much would people with depression benefit from each of the following?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) Taking antidepressant medications</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>

Consider the following clinical scenario:

5. A 23-year-old woman presents to her primary care physician for the third time in five months. She complains of difficulty with ruminative thoughts, restlessness, tension, and worry. She reports «F3» with her school «F3_ADD» work. She exercises regularly. She says she is «F4». Physical exam is unremarkable except for an anxious affect, and routine labs are normal. She is open to “anything” the doctor thinks will help.

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an anti-anxiety medication</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in her religious community</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>
6a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F4_ADD» teachings?

☐ 1: Yes
☐ 2: No → Assuming there were…

6b. How likely would you be to recommend that the primary care physician refer the patient to one of those professionals?

☐ 1: Very likely
☐ 2: Somewhat likely
☐ 3: Not very likely
☐ 4: Not at all likely

7. If the primary care physician referred this patient to you, how likely would you be to do each of the following for this patient (Assume all strategies are financially feasible for the patient.):

<table>
<thead>
<tr>
<th></th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>c) Refer to a psychologist or other licensed counselor</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
</tbody>
</table>

8. In general, how much would people with anxiety benefit from each of the following?

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>c) Taking anti-anxiety medications</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
</tbody>
</table>

9. To what extent do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th></th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Physicians too often treat normal sadness as if it were a medical illness.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>b) Undertreatment of depression is a more pressing problem than overtreatment of normal sadness.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>c) Physicians too often treat normal worry and stress as if it were a medical illness.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
<tr>
<td>d) Undertreatment of anxiety disorders is a more pressing problem than overtreatment of normal worry and stress.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
</tr>
</tbody>
</table>
CHRONIC, MEDICALLY UNEXPLAINED SYMPTOMS

Please consider the following clinical scenario:

10. A 41-year old woman presents to her primary care physician for her seventh clinic visit complaining of generalized muscle pains, fatigue and headaches. She has had the symptoms for several years. Prior physicians have diagnosed her with fibromyalgia and chronic fatigue syndrome. Physical exam is unremarkable except for tenderness over multiple areas of her body. Diagnostic workups have not found any physiological abnormalities. Regular exercise, NSAIDS, and muscle relaxants have not provided relief. She denies depression «F5». She says she is Muslim «F6». She is open to “anything” the doctor thinks will help.

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

<table>
<thead>
<tr>
<th></th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c) Refer to a psychiatrist</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>d) Refer to a psychologist or other licensed counselor</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>e) Encourage the patient to get more involved in meaningful relationships and activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>f) Encourage the patient to get more involved in her religious community</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

11. If the primary care physician referred this patient to you, how likely would you be to do each of the following for this patient (Assume all strategies are financially feasible for the patient.):

<table>
<thead>
<tr>
<th></th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not very likely</th>
<th>Not at all likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Prescribe an antidepressant medication</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b) See the patient regularly for counseling</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c) Refer to a psychologist or other licensed counselor</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

12. In general, how much do you think patients with these symptoms would benefit from each of the following?

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Paying more attention to their relationships</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b) Paying more attention to their spiritual life</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c) Taking medications</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
13. Please indicate whether you agree or disagree with the following statements about patients who have multiple chronic symptoms for which there is no clear physiological abnormality after a thorough medical workup:

<table>
<thead>
<tr>
<th>Such patients …</th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) are usually experiencing the normal ups and downs of life.</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) have medical conditions that scientific research will one day be able to explain.</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) tend to have a root problem that is spiritual in nature.</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>d) often get better with treatment by physicians.</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>

**SUBSTANCE ABUSE**

Please consider the following clinical scenario:

14. A 47-year-old man is admitted to the hospital with acute alcohol poisoning. After a medical detox, the patient says he has been drinking heavily for years and wants to get help. He has never been hospitalized or gone through rehabilitation before. He identifies himself as Christian «F7».

Please indicate how effective you think each of the following alcoholism treatment plans would be for this patient:

<table>
<thead>
<tr>
<th>Treatment Plan</th>
<th>Very effective</th>
<th>Somewhat effective</th>
<th>Not very effective</th>
<th>Not at all effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Participation in a local chapter of Alcoholics Anonymous (AA)</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>b) Pharmacological therapy by a physician who specializes in the treatment of addiction</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
<tr>
<td>c) Completion of a residential rehabilitation program</td>
<td>□1</td>
<td>□2</td>
<td>□3</td>
<td>□4</td>
</tr>
</tbody>
</table>

14a. To the best of your knowledge, are there any explicitly faith-based alcoholism treatment programs (not including AA) in your area to which you could potentially refer this patient?

| □1 | Yes |
| □2 | No |

Assuming there were…

14b. How likely would you be to refer this patient to one of those programs?

| □1 | Very likely |
| □2 | Somewhat likely |
| □3 | Not very likely |
| □4 | Not at all likely |
To what extent do you agree with the following statement: An emphasis on spirituality is critical to the success of 12-step programs.

[ ] 1. Agree strongly
[ ] 2. Agree somewhat
[ ] 3. Disagree somewhat
[ ] 4. Disagree strongly

15. In your judgment, to what extent is «F8» each of the following:

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) A response to psychological woundedness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) A result of moral failings</td>
<td></td>
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</tbody>
</table>

16. Please indicate the extent to which the following conditions result from choices for which patients are responsible?

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Alcoholism</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>b) Obesity</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>c) Nicotine dependence</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>d) Depression</td>
<td></td>
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<tr>
<td>e) Anxiety</td>
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</tr>
<tr>
<td>f) Chronic back pain</td>
<td></td>
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</tr>
<tr>
<td>g) Fibromyalgia</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

17. Please indicate how much personal satisfaction you experience when taking care of patients with the following conditions:

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>A little</th>
<th>Some</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Alcoholism</td>
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<tr>
<td>b) Obesity</td>
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<td>c) Nicotine dependence</td>
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<td>e) Anxiety</td>
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</tr>
<tr>
<td>f) Chronic back pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) Fibromyalgia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**RELIGION AND MENTAL HEALTH**

18. Please indicate whether you agree or disagree with the following statements:

<table>
<thead>
<tr>
<th></th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Participating in a religious congregation provides unique psychological benefits that are not found by participating in nonreligious social groups.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b) Any psychological benefits of participating in a religious congregation can also be found by participating in nonreligious social groups.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

19. Please indicate whether you think each of the following have a positive or negative effect on psychological well-being:

<table>
<thead>
<tr>
<th></th>
<th>Almost always negative</th>
<th>More negative than positive</th>
<th>Equally positive and negative</th>
<th>More positive than negative</th>
<th>Almost always positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Being deeply involved in a religious community</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>b) Regularly attending religious services</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>c) Avoiding behaviors forbidden by one’s religion</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>d) Frequent prayer</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>e) Believing that after death there will be a divine judgment</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>f) Directly feeling God’s presence</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>g) Having an authoritative religious mentor</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
NEGOTIATING MEDICAL DECISIONS

20. Once the medical options have been described to patients, how much responsibility do physicians and religious communities have for providing guidance to patients in each of the following situations? (assuming patients belong to a religious congregation or community)

<table>
<thead>
<tr>
<th>The patient …</th>
<th>Physicians’ responsibility to provide guidance</th>
<th>Religious communities’ responsibility to provide guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None</td>
<td>A little</td>
</tr>
<tr>
<td>a) faces a frightening medical diagnosis or crisis.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) will die within a few weeks.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) suffers from anxiety or depression.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) faces a morally complex medical decision.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

YOUR PRACTICE SETTING

21. Please estimate how many hours you spend in a typical week doing:
   A. Outpatient care: ______(# hours/week)
   B. Inpatient care: ______(# hours/week)
   C. Other work-related tasks: ______(# hours/week)

22. Please estimate how many hours you spend in a typical day at work on activities that you find personally rewarding: ______(# hours/day)

23. Is your patient population considered medically underserved?
   1. Yes
   2. No

24. Is your place of practice religiously oriented or “faith-based”?  
   1. Yes
   2. No

25. To the best of your knowledge, what percentage of your patients come to see you because of your religious characteristics? _______% of patients

26. To what extent do you agree or disagree with the following statements about your current practice?

<table>
<thead>
<tr>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
</table>
   a) I have control over my work hours or call schedule. |     |     |     |     | 1 | 2 | 3 | 4 |
   b) I have control over the kinds of clinical conditions I see. |     |     |     |     | 1 | 2 | 3 | 4 |
   c) My clinical environment prioritizes the needs of the patient over maximizing revenue. |     |     |     |     | 1 | 2 | 3 | 4 |
CAREER SATISFACTION AND PROFESSIONALISM

27. Thinking very generally about your satisfaction with your overall career in medicine, would you say that you are currently:

- [ ] Very satisfied
- [ ] Somewhat satisfied
- [ ] Neither satisfied nor dissatisfied
- [ ] Somewhat dissatisfied
- [ ] Very dissatisfied

28. Using your own definition of burnout, please choose one of the following:

- [ ] I enjoy my work. I have no symptoms of burnout.
- [ ] Occasionally I am under stress, and I don’t always have as much energy as I once did, but I don’t feel burned out.
- [ ] I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.
- [ ] The symptoms of burnout that I’m experiencing won’t go away. I think about frustration at work a lot.
- [ ] I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.

29. To what extent do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The family in which I was raised emphasized the importance of serving those with fewer resources.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>b) For me, the practice of medicine is a calling.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>c) If I had it to do over again, I would not choose medicine as a career.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>d) If I had it to do over again, I would go into a different clinical specialty.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>e) In the next few years, I hope to reduce the amount of time I spend in direct patient care.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>f) In the next few years, I hope to leave the practice of medicine.</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
</tr>
</tbody>
</table>

YOUR SPIRITUAL AND RELIGIOUS CHARACTERISTICS

30. To what extent do you consider yourself a spiritual person?

- [ ] Very spiritual
- [ ] Moderately spiritual
- [ ] Slightly spiritual
- [ ] Not spiritual at all
31. How important would you say your religion is in your own life?

☐ 1. The most important part of my life
☐ 2. Very important in my life
☐ 3. Fairly important in my life
☐ 4. Not important in my life
☐ 5. Not applicable. I have no religion

32. Which of the following best indicates your religious affiliation?

☐ 1. None
☐ 2. Buddhist
☐ 3. Hindu
☐ 4. Jewish
☐ 5. Muslim
☐ 6. Roman Catholic
☐ 7. Eastern Orthodox
☐ 8. Protestant
☐ 9. Other Christian
☐ 10. Other Religion (please specify) ________________________________

a. If Jewish, would you say you are …

☐ 1. Orthodox
☐ 2. Conservative
☐ 3. Reform
☐ 4. Secular
☐ 5. Other

b. If Christian, do you consider yourself evangelical?

☐ 1. Yes
☐ 2. No

33. How often do you attend religious services?

☐ 1. Never
☐ 2. Less than once a year
☐ 3. About once or twice a year
☐ 4. Several times a year
☐ 5. About once a month
☐ 6. Two to three times a month
☐ 7. Nearly every week
☐ 8. Every week
☐ 9. Several times a week

34. To what extent do you agree or disagree with the following statements?

a) Different religions have different versions of the truth, and each may be equally right in its own way

Agree strongly ☐ 1  Agree somewhat ☐ 2  Disagree somewhat ☐ 3  Disagree strongly ☐ 4

b) There is one religion that is uniquely and comprehensively true

Agree strongly ☐ 1  Agree somewhat ☐ 2  Disagree somewhat ☐ 3  Disagree strongly ☐ 4

c) There is no one, true, right religion

Agree strongly ☐ 1  Agree somewhat ☐ 2  Disagree somewhat ☐ 3  Disagree strongly ☐ 4

d) I try hard to carry my religious beliefs over into all my other dealings in life

Agree strongly ☐ 1  Agree somewhat ☐ 2  Disagree somewhat ☐ 3  Disagree strongly ☐ 4

e) My whole approach to life is based on my religion

Agree strongly ☐ 1  Agree somewhat ☐ 2  Disagree somewhat ☐ 3  Disagree strongly ☐ 4
OTHER DEMOGRAPHIC CHARACTERISTICS

35. Do you consider yourself Hispanic or Latino?

☐ 1 Yes  ☐ 2 No

36. How would you classify your race? [CHECK ONLY ONE]

☐ 1 Asian  ☐ 2 Black or African-American  
☐ 3 American Indian or Alaskan Native  ☐ 4 White or Caucasian  
☐ 5 Other (please specify) ____________________________  

A. If Asian, do you think of yourself as …

☐ 1 East Asian or Pacific Islander  ☐ 2 South Asian  
☐ 3 Other Asian

37. Which of the following best describes how long you have been in the United States?

☐ 1 You immigrated to the United States as an adult.  
☐ 2 You immigrated to the United States as a child.  
☐ 3 One or both of your parents immigrated to the United States before you were born.  
☐ 4 Both of your parents were born in the United States

38. When you think of the relationship between religion and psychological well-being, what are the aspects of religion that first come to mind?

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

39. Please use the following space for anything else you would like to tell us about the care of patients with mental health concerns.

If you would be willing to participate in a 15-30 minute confidential phone interview about religion and the practice of medicine, please check this box ☐ and indicate below the preferred way to reach you. A portion of respondents who volunteer will be contacted.

Phone number: (_______) ___________________  
E-mail: ____________________________

Please return this survey in the enclosed, postage-paid envelope.  
Thank you for participating!
APPENDIX C: COMPARISON OF PCP AND PSYCHIATRIST QUESTIONNAIRES

PCP

1. A 52-year-old man presents for the third time in five months. He complains of difficulty sleeping, loss of appetite, irritability, and feeling “down” but not suicidal. He reports «F1» with his marriage «F1_ADD» work. He exercises regularly. He says he is «F2». Physical exam is unremarkable except for a sad affect, and routine labs are normal. He is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient):

1a. Prescribe an antidepressant medication
1b. See the patient regularly for counseling
1c. Refer to a psychiatrist
1d. Refer to a psychologist or other licensed counselor
1e. Encourage the patient to get more involved in meaningful relationships and activities
1f. Encourage the patient to get more involved in his religious community

2a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F2_ADD» teachings?
2b. How likely would you be to refer this patient to one of those professionals?

3. If the primary care physician referred this patient to you, how likely would you be to do each of the following for this patient (Assume all strategies are financially feasible for the patient):

3a. Prescribe an antidepressant medication
3b. See the patient regularly for counseling
3c. Refer to a psychologist or other licensed counselor

4. In general, how much would people with depression benefit from each of the following?
Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

4a. Prescribe an anti-anxiety medication  
4b. See the patient regularly for counseling yourself  
4c. Refer to a psychiatrist  
4d. Refer to a psychologist or other licensed counselor  
4e. Encourage the patient to get more involved in meaningful relationships and activities  
4f. Encourage the patient to get more involved in her religious community  

5a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F4_ADD» teachings?  
5b. How likely would you be to refer this patient to one of those professionals?  

6a. Paying more attention to their relationships  
6b. How likely would you be to recommend that the primary care physician refer the patient to one of those professionals?  

7a. Prescribe an antidepressant medication  
7b. See the patient regularly for counseling  
7c. Refer to a psychologist or other licensed counselor  

8a. Paying for attention to their spiritual life  
8b. Encouraging the patient to get more involved in their religious community  

9a. Taking antidepressant medications  
9b. Encouraging the patient to get more involved in meaningful relationships and activities  
9c. Encouraging the patient to get more involved in their religious community  

5. A 23-year-old woman presents for the third time in five months. She complains of difficulty with ruminative thoughts, restlessness, tension, and worry. She reports «F3» with her school «F3_ADD» work. She exercises regularly. She says she is «F4». Physical exam is unremarkable except for an anxious affect, and routine labs are normal. She is open to “anything you think will help.”

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

5a. See the patient regularly for counseling  
5b. See the patient regularly for counseling yourself  
5c. Refer to a psychiatrist  
5d. Refer to a psychologist or other licensed counselor  
5e. Encourage the patient to get more involved in meaningful relationships and activities  
5f. Encourage the patient to get more involved in her religious community  

6a. To the best of your knowledge, are there any mental health care professionals in your area who base their practice on «F4_ADD» teachings?  
6b. How likely would you be to recommend that the primary care physician refer the patient to one of those professionals?  

7a. Prescribe an antidepressant medication  
7b. See the patient regularly for counseling  
7c. Refer to a psychologist or other licensed counselor  

8b. Encouraging the patient to get more involved in their religious community  

6. In general, how much would people with anxiety benefit from each of the following?  
6a. Paying more attention to their relationships  
8a. Paying for attention to their spiritual life  
9a. Taking antidepressant medications
6b. Paying more attention to their spiritual life
6c. Taking anti-anxiety medications
7. To what extent do you agree or disagree with the following statements?
   7a. Physicians too often treat normal sadness as if it were a medical illness.
   7b. Undertreatment of depression is a more pressing problem than overtreatment of normal sadness.
   7c. Physicians too often treat normal worry and stress as if it were a medical illness.
   7d. Undertreatment of anxiety disorders is a more pressing problem than overtreatment of normal worry and stress.

8. A 41-year old woman presents for her seventh clinic visit complaining of generalized muscle pains, fatigue and headaches. She has had the symptoms for several years. Prior physicians have diagnosed her with fibromyalgia and chronic fatigue syndrome. Physical exam is unremarkable except for tenderness over multiple areas of her body. Diagnostic workups have not found any physiological abnormalities. Regular exercise, NSAIDS, and muscle relaxants have not provided relief. She denies depression «F5». She says she is Muslim «F6». She is open to “anything you think will help.”

Given this limited information, please indicate how likely you would be to do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

8a. Prescribe an anti-anxiety medication
8b. See the patient regularly for counseling yourself
8c. Refer to a psychiatrist
8d. Refer to a psychologist or other licensed counselor
8e. Encourage the patient to get more involved in meaningful relationships and activities
8f. Encourage the patient to get more involved in her religious community

10. A 41-year old woman presents to her primary care physician for her seventh clinic visit complaining of generalized muscle pains, fatigue and headaches. She has had the symptoms for several years. Prior physicians have diagnosed her with fibromyalgia and chronic fatigue syndrome. Physical exam is unremarkable except for tenderness over multiple areas of her body. Diagnostic workups have not found any physiological abnormalities. Regular exercise, NSAIDS, and muscle relaxants have not provided relief. She denies depression «F5». She says she is Muslim «F6». She is open to “anything” the doctor thinks will help.

Given this limited information, if the primary care physician asked your opinion, how likely would you be to recommend that the primary care physician do each of the following for this patient (Assume all strategies are available and financially feasible for the patient.):

10a. Prescribe an anti-anxiety medication
10b. See the patient regularly for counseling
10c. Refer to a psychiatrist
10d. Refer to a psychologist or other licensed counselor
10e. Encourage the patient to get more involved in meaningful relationships and activities
10f. Encourage the patient to get more involved in her religious community

11. If the primary care physician referred this patient to you, how likely would you be to do each of the following for this patient (Assume all strategies are financially feasible for the patient.):
11a. Prescribe an antidepressant medication
11b. See the patient regularly for counseling
11c. Refer to a psychologist or other licensed counselor

9. In general, how much do you think patients with these symptoms would benefit from each of the following?

9a. Paying more attention to their relationships
9b. Paying more attention to their spiritual life
9c. Taking medications

10. Please indicate whether you agree or disagree with the following statements about patients who have multiple chronic symptoms for which there is no clear physiological abnormality after a thorough medical workup:

10a. are usually experiencing the normal ups and downs of life.
10b. have medical conditions that scientific research will one day be able to explain.
10c. tend to have a root problem that is spiritual in nature.
10d. often get better with treatment by physicians.

11. A 47-year-old man is admitted to the hospital with acute alcohol poisoning. After a medical detox, the patient says he has been drinking heavily for years and wants to get help. He has never been hospitalized or gone through rehabilitation before. He identifies himself as Christian «F7».

11a. Participation in a local chapter of Alcoholics Anonymous (AA)
11b. Pharmacological therapy by a physician who specializes in the treatment of addiction
11c. Completion of a residential rehabilitation program

12a. To the best of your knowledge, are there any explicitly faith-based alcoholism treatment programs (not including AA) in your area to which you could potentially refer this patient?
12b. How likely would you be to refer this patient to one of those programs?

13. To what extent do you agree with the following statement: An emphasis on spirituality is critical to the success of 12-step programs.

14. In your judgment, to what extent is «F8» each of the following:

14a. A disease
14b. A response to a psychological woundedness
14c. A result of moral failings.

15. Please indicate the extent to which the following conditions result from choices for which patients are responsible?

15a. Alcoholism
15b. Obesity
15c. Nicotine dependence
15d. Depression
15e. Anxiety
15f. Chronic back pain
15g. Fibromyalgia

16. Please indicate how much personal satisfaction you experience when taking care of patients with the following conditions:

16a. Alcoholism
16b. Obesity
16c. Nicotine dependence
16d. Depression
16e. Anxiety
16f. Chronic back pain
16g. Fibromyalgia

17. Please indicate whether you agree or disagree with the following statements:

17a. Participating in a religious congregation provides unique psychological benefits that are not found by participating in nonreligious social groups.

17b. Any psychological benefits of participating in a religious congregation can also be found by participating in nonreligious social groups.

18. Please indicate whether you think each of the following have a positive or negative effect on psychological well-being:

18a. Being deeply involved in a religious community
18b. Regularly attending religious services
18c. Avoiding behaviors forbidden by one’s religion
18d. Frequent prayer
18e. Believing that after death there will be a divine judgment
18f. Directly feeling God’s presence
18g. Having an authoritative religious mentor

19. Please indicate to what extent you agree or disagree with the following statements: When dealing with «F9» medical decisions, a physician should …

19a. Avoid influencing the patient’s decision one way or another.
19b. Encourage the patient to make the decision that the physician believes is best.
A 54-year-old man presents to his physician and requests «F10». The physician believes that to provide the «F10_add» would violate the physician’s «F11» standards. The physician «F12» the patient why he objects to providing the «F10_add». The physician «F13» «F10_add».

20. In your judgment, how appropriate are the physician’s actions in this case?

21. Once the medical options have been described to patients, how much responsibility do physicians and religious communities have for providing guidance to patients in each of the following situations? (assuming patients belong to a religious congregation or community)

21a. faces a frightening medical diagnosis or crisis. 20a. pcp21ai_psy20ai

21b. will die within a few weeks. 20b. pcp21bi_psy20bi

21c. suffers from anxiety or depression. 20c. pcp21ci_psy20ci

21d. faces a morally complex medical decision. 20d. pcp21di_psy20di

22. Please estimate how many hours you spend in a typical week doing:

22a. Outpatient care: 21a. pcp22a_psy21a

22b. Inpatient care: 21b. pcp22b_psy21b

22c. Other work-related tasks: 21c. pcp22c_psy21c

23. Please estimate how many hours you spend in a typical day at work on activities that you find personally rewarding: 22 pcp23_psy22


25. Is your patient population considered medically underserved? 23 pcp25_psy23

26. Is your place of practice religiously oriented or “faith-based”? 24 pcp26_psy24

27. Please estimate (to the best of your knowledge):

27a. Including you, how many physicians work in your primary place of practice? - pcp27a

27b. What percentage of the physicians in your primary place of practice are similar to you in their views regarding morally controversial health care practices? - pcp27b

27c. What percentage of your patients come to see you because of your religious characteristics? 25. To the best of your knowledge, what percentage of your patients come to see you because of your religious characteristics? pcp27c_psy25

28. For you personally, how important is it to work with colleagues who share your ethical/moral outlook regarding morally controversial health care practices? - pcp28
29. To what extent do you agree or disagree with the following statements about your current practice?

29a. I have control over my work hours or call schedule.
29b. I have control over the kinds of clinical conditions I see.
29c. My clinical environment prioritizes the needs of the patient over maximizing revenue.

30. Thinking very generally about your satisfaction with your overall career in medicine, would you say that you are currently:

31. Using your own definition of burnout, please choose one of the following:

32. To what extent do you agree or disagree with the following statements?

32a. The family in which I was raised emphasized the importance of serving those with fewer resources.
32b. For me, the practice of medicine is a calling.
32c. If I had it to do over again, I would not choose medicine as a career.
32d. If I had it to do over again, I would go into a different clinical specialty.
32e. In the next few years, I hope to reduce the amount of time I spend in direct patient care.
32f. In the next few years, I hope to leave the practice of medicine.

33. To what extent do you consider yourself a spiritual person?

34. How important would you say your religion is in your own life?

35. Which of the following best indicates your religious affiliation?

35a. If Jewish, would you say you are …
35b. If Christian, do you consider yourself evangelical?

36. How often do you attend religious services?

37. To what extent do you agree or disagree with the following statements?

37a. Different religions have different versions of the truth, and each may be equally right in its own way
37b. There is one religion that is uniquely and comprehensively true
37c. There is no one, true, right religion
37d. I try hard to carry my religious beliefs over into all my other dealings in life
37e. My whole approach to life is based on my religion

38. Do you consider yourself Hispanic or Latino?
39. How would you classify your race? [CHECK ONLY ONE]  
39a. If Asian, do you think of yourself as …  
40. Which of the following best describes how long you have been in the United States?  
41. When you think of the relationship between religion and psychological well-being, what are the aspects of religion that first come to mind?  
42. Please use the following space for anything else you would like to tell us about the care of patients with mental health concerns.
APPENDIX D: PCP QUESTIONNAIRE DATA CODEBOOK

---------------
q1a prescribe an antidepressant
---------------

type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing .: 7/896

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<th>Numeric</th>
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<td>75</td>
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<tr>
<td></td>
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---------------
q1b see pt regularly for counseling yourself
---------------

type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing .: 22/896

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q1c refer to a psychiatrist
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type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing .: 18/896

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---------------
q1d refer to a psychologist/other licensed counselor
---------------

type: numeric (byte)
label: likely
**q1e** encourage pt to get more involved in meaningful relationships and activities

---

**type:** numeric (byte)

**label:** likely

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**units:** 1  
**unique values:** 4  
**missing .:** 18/896

**tabulation:**

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**q1f** encourage pt to get more involved in his religious community

---

**type:** numeric (byte)

**label:** likely

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**range:** [1,4]  
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**unique values:** 4  
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**tabulation:**

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**q2a** any mntl hlth professionals in area who base practice on q1_religion

---

**type:** numeric (byte)

**label:** yesno

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**tabulation:**
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q3a how much would ppl w/ depression benefit from paying attention to relationships
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**type:** numeric (byte)
**label:** range

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q3b how much would ppl w/ depression benefit from paying attention to spiritual life
---------------------

**type:** numeric (byte)
**label:** range

**range:** [1,4]  
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q3c how much would ppl w/ depression benefit from taking antidepressants
---------------------

**type:** numeric (byte)
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<tr>
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**q4a prescribe an anti-anxiety med**

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type: numeric (byte)
label: likely
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unique values: 4 missing.: 7/896
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**q4b see pt regularly for counseling yourself**

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range: [1,4] units: 1
unique values: 4 missing.: 12/896
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</tr>
<tr>
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<tr>
<td>12</td>
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**q4c refer to a psychiatrist**

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range: [1,4] units: 1
unique values: 4 missing.: 15/896
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<tr>
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<tr>
<td>132</td>
<td>4</td>
<td>not at all likely</td>
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<tr>
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<td></td>
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---

**q4d refer to a psychologist/other licensed counselor**
---------------------

**q4e** encourage pt to get involved in meaningful relationships and activities

---------------------

**q4f** encourage pt to get involved in her religious community

---------------------

**q5a** any mntl hlth professionals in area who base practice on q4_religion

---------------------
q5b how likely to refer this pt to one of those professionals

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<td>2</td>
<td>311</td>
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<td>3</td>
<td>225</td>
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q6a how much would ppl w/ anxiety benefit from paying attention to relationships

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<td>4</td>
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q6b how much would ppl w/ anxiety benefit from paying attention to spiritual life

<table>
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<td>184</td>
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<td>a little</td>
</tr>
<tr>
<td>3</td>
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<tr>
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q6c how much would ppl w/ anxiety benefit from taking anti-anxiety meds

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<tbody>
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<td>387</td>
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<tr>
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<td>285</td>
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<td>a lot</td>
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q7a physicians too often treat normal sadness as if it were a medical illness

```
type: numeric (byte)
label: agree

range: [1,4]                        units: 1
unique values: 4                        missing .: 5/896

tabulation: Freq.   Numeric  Label
            13         1  not at all
            141        2  a little
            448        3  somewhat
            289        4  a lot
            5          .
```

q7b undertreatment of depression is a more pressing problem than overtreatment of no

```
type: numeric (byte)
label: agree

range: [1,4]                        units: 1
unique values: 4                        missing .: 13/896

tabulation: Freq.   Numeric  Label
            144        1  agree strongly
            450        2  agree somewhat
            240        3  disagree somewhat
            49         4  disagree strongly
            13         .
```

q7c physicians too often treat normal worry and stress as if it were a medical illness

```
type: numeric (byte)
label: agree

range: [1,4]                        units: 1
unique values: 4                        missing .: 14/896

tabulation: Freq.   Numeric  Label
            125        1  agree strongly
            404        2  agree somewhat
            315        3  disagree somewhat
38  4 disagree strongly
14  

q7d undertreatment of anxiety disorders is a more pressing problem than overtreatment

---

type: numeric (byte)
label: agree

range: [1,4]  units: 1
unique values: 4  missing .: 14/896

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<td>disagree strongly</td>
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q8a prescribe an antidepressant

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type: numeric (byte)
label: likely

range: [1,4]  units: 1
unique values: 4  missing .: 12/896

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<td>183</td>
<td>3</td>
<td>not very likely</td>
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<tr>
<td>44</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
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<td>.</td>
<td></td>
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q8b see pt regularly for counseling yourself

---

type: numeric (byte)
label: likely

range: [1,4]  units: 1
unique values: 4  missing .: 15/896

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<th>Label</th>
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</thead>
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<td>somewhat likely</td>
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<tr>
<td>383</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>199</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>15</td>
<td>.</td>
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</table>

---

q8c refer to a psychiatrist

---

type: numeric (byte)
label: likely
q8d refer to a psychologist/other licensed counselor

q8e encourage pt to get involved in meaningful relationships and activities

q8f encourage pt to get involved in her religious community
q9a how much do you think pts w/ these symptoms would benefit from paying attention

```
type: numeric (byte)
label: range

range: [1,4] units: 1
unique values: 4 missing .: 19/896

tabulation: Freq. Numeric Label
42 1 not at all
199 2 a little
340 3 somewhat
296 4 a lot
19 .
```

q9b how much do you think pts w/ these symptoms would benefit from paying attention

```
type: numeric (byte)
label: range

range: [1,4] units: 1
unique values: 4 missing .: 22/896

tabulation: Freq. Numeric Label
55 1 not at all
239 2 a little
347 3 somewhat
233 4 a lot
22 .
```

q9c how much do you think pts w/ these symptoms would benefit from taking meds

```
type: numeric (byte)
label: range

range: [1,4] units: 1
unique values: 4 missing .: 18/896

tabulation: Freq. Numeric Label
26 1 not at all
253 2 a little
435 3 somewhat
164 4 a lot
18 .
```

q10a such pts are usually experiencing the normal ups and downs of life

```
type: numeric (byte)
label: agree
```
q10b such pts have medical conditions that scientific research will one day be able to

q10c such pts tend to have a root problem that is spiritual in nature

q10d such pts often get better with treatment by physicians
q11a how effective you think participation in a local chapter of AA would be effective

type: numeric (byte)
label: effective

range: [1,3] units: 1
unique values: 3 missing .: 12/896

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<td>somewhat effective</td>
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<td>15</td>
<td>3</td>
<td>not very effective</td>
</tr>
<tr>
<td>12</td>
<td></td>
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q11b how effective you think pharmacological therapy by a physician who specializes in

type: numeric (byte)
label: effective

range: [1,4] units: 1
unique values: 4 missing .: 13/896

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<th>Numeric</th>
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<tbody>
<tr>
<td>197</td>
<td>1</td>
<td>very effective</td>
</tr>
<tr>
<td>541</td>
<td>2</td>
<td>somewhat effective</td>
</tr>
<tr>
<td>137</td>
<td>3</td>
<td>not very effective</td>
</tr>
<tr>
<td>8</td>
<td>4</td>
<td>not at all effective</td>
</tr>
<tr>
<td>13</td>
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q11c how effective you think completion of a residential rehabilitation program would


type: numeric (byte)
label: effective

range: [1,3] units: 1
unique values: 3 missing .: 11/896

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<tr>
<td>489</td>
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<td>64</td>
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<td>not very effective</td>
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q12a any explicitly faith-based alcoholism treatment programs to which you could refer


type: numeric (byte)
label: yesno
**q12b how likely to refer pt to one of those programs**

- **Type:** numeric (byte)
- **Label:** likely

**Range:** [1,4]  
**Units:** 1  
**Unique Values:** 4  
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**q13 to what extent do you agree that an emphasis on spirituality is critical to the**

- **Type:** numeric (byte)
- **Label:** agree

**Range:** [1,4]  
**Units:** 1  
**Unique Values:** 4  
**Missing:** 18/896

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<td>109</td>
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**q14a to what extent is q14_alc_drug a disease**

- **Type:** numeric (byte)
- **Label:** range

**Range:** [1,4]  
**Units:** 1  
**Unique Values:** 4  
**Missing:** 6/896

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<tr>
<td>72</td>
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<td>289</td>
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q14b to what extent is q14_alc_drug a response to psychological woundedness

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<td></td>
<td>447</td>
<td>3</td>
<td>somewhat</td>
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<td></td>
<td>278</td>
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</tr>
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<td></td>
<td>9</td>
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q14c to what extent is q14_alc_drug a result of moral failings

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<td>60</td>
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q15a to what extent does alcoholism result from choices for which pts are responsible

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<tr>
<td>Range:</td>
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q15b to what extent does obesity result from choices for which pts are responsible

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<tr>
<td></td>
<td>32</td>
<td>1</td>
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<tr>
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<td>130</td>
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<td></td>
<td>447</td>
<td>3</td>
<td>somewhat</td>
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<tr>
<td></td>
<td>278</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td></td>
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### q15c to what extent does nicotine dependence result from choices for which pts are responsible

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### q15d to what extent does depression result from choices for which pts are responsible

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<td>2</td>
<td>a little</td>
</tr>
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<td>3</td>
<td>somewhat</td>
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### q15e to what extent does anxiety result from choices for which pts are responsible

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<tr>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>4</td>
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</table>
q15f to what extent does chronic back pain result from choices for which pts are resp

```
type: numeric (byte)
label: range

range: [1,4]       units: 1
unique values: 4  missing .: 8/896

tabulation: Freq.   Numeric  Label
            139         1  not at all
            369         2  a little
            327         3  somewhat
            53          4  a lot
             8          .
```

q15g to what extent does fibromyalgia result from choices for which pts are responsib

```
type: numeric (byte)
label: range

range: [1,4]       units: 1
unique values: 4  missing .: 12/896

tabulation: Freq.   Numeric  Label
            199         1  not at all
            377         2  a little
            253         3  somewhat
            55          4  a lot
             12          .
```

q16a how much satisfaction you experience when taking care of pts w/ alcoholism

```
type: numeric (byte)
label: range1

range: [1,4]       units: 1
unique values: 4  missing .: 11/896

tabulation: Freq.   Numeric  Label
            151         1  none
            296         2  a little
            353         3  some
            85          4  a lot
             11          .
```

q16b how much satisfaction you experience when taking care of pts w/ obesity

```
type: numeric (byte)
label: range1

range: [1,4]       units: 1
unique values: 4  missing .: 11/896

```
range: [1,4] units: 1
unique values: 4 missing.: 10/896

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<tbody>
<tr>
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</tr>
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<tr>
<td>3</td>
<td>some</td>
</tr>
<tr>
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q16c how much satisfaction you experience when taking care of pts w/ nicotine

---

range: [1,4] units: 1 missing.: 12/896

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<tbody>
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<td>some</td>
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q16d how much satisfaction you experience when taking care of pts w/ depression

---

range: [1,4] units: 1 missing.: 15/896

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<tr>
<td>4</td>
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q16e how much satisfaction you experience when taking care of pts w/ anxiety

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range: [1,4] units: 1 missing.: 17/896

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<tr>
<td>3</td>
<td>some</td>
</tr>
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</table>
q16f how much satisfaction you experience when taking care of pts w/ chronic back pai

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Type: numeric (byte)
Label: range1
Range: [1,4] units: 1
Unique values: 4 missing .: 12/896

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q16g how much satisfaction you experience when taking care of pts w/ fibromyalgia

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q17a participating in a religious congregation provides unique psychological benefits

---

Type: numeric (byte)
Label: agree
Range: [1,4] units: 1
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<td>414</td>
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q17b psychological benefits of participating in a religious congregation can be found

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Type: numeric (byte)
### q18a being deeply involved in a religious community has a pos/neg effect on psychological well-being

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### q18b regularly attending religious services has a pos/neg effect on psychological well-being

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### q18c avoiding behaviors forbidden by one's religion has a pos/neg effect on psychological well-being

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**Type:** numeric (byte)

**Label:** posneg

**Range:** [1,5]

**Units:** 1

**Unique values:** 5

**Missing .:** 8/896

**Tabulation:**

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**Type:** numeric (byte)

**Label:** posneg

**Range:** [2,5]

**Units:** 1

**Unique values:** 4

**Missing .:** 9/896

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**Type:** numeric (byte)

**Label:** posneg

**Range:** [1,5]

**Units:** 1

**Unique values:** 5

**Missing .:** 10/896

**Tabulation:**

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<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>--------</td>
<td>---</td>
<td>------------------------</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>almost always negative</td>
</tr>
<tr>
<td></td>
<td>72</td>
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</tr>
<tr>
<td></td>
<td>267</td>
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<td>4</td>
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<td>5</td>
</tr>
<tr>
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**q18d** frequent prayer has a pos/neg effect on psychological well-being

---

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<th>unique values</th>
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<td></td>
</tr>
<tr>
<td>11</td>
<td>2</td>
<td>more negative than positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>144</td>
<td>3</td>
<td>equally positive and negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>432</td>
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<td></td>
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<tr>
<td>299</td>
<td>5</td>
<td>almost always positive</td>
<td></td>
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</tr>
<tr>
<td>10</td>
<td>.</td>
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---

**q18e** believing that after death there will be a divine judgment has a pos/neg effect

---

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<td>14/896</td>
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<td>Label</td>
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<td>----------</td>
<td>----------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>1</td>
<td>almost always negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>2</td>
<td>more negative than positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>275</td>
<td>3</td>
<td>equally positive and negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>325</td>
<td>4</td>
<td>more positive than negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>170</td>
<td>5</td>
<td>almost always positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>.</td>
<td></td>
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</table>

---

**q18f** directly feeling God's presence has a pos/neg effect on psychological well-being

---

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<th>unique values</th>
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<th>tabulation</th>
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<td>Freq.</td>
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<td>Label</td>
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</tr>
<tr>
<td>---------</td>
<td>----------</td>
<td>----------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>1</td>
<td>almost always negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>2</td>
<td>more negative than positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>135</td>
<td>3</td>
<td>equally positive and negative</td>
<td></td>
<td></td>
</tr>
<tr>
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<td>4</td>
<td>more positive than negative</td>
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<td></td>
</tr>
<tr>
<td>363</td>
<td>5</td>
<td>almost always positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>.</td>
<td></td>
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</tbody>
</table>
q18g having an authoritative religious mentor has a pos/neg effect on psychological w


type: numeric (byte)
label: posneg

range: [1,5] units: 1
unique values: 5 missing .: 11/896

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<tbody>
<tr>
<td>40</td>
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<td>almost always negative</td>
</tr>
<tr>
<td>142</td>
<td>2</td>
<td>more negative than positive</td>
</tr>
<tr>
<td>302</td>
<td>3</td>
<td>equally positive and negative</td>
</tr>
<tr>
<td>317</td>
<td>4</td>
<td>more positive than negative</td>
</tr>
<tr>
<td>84</td>
<td>5</td>
<td>almost always positive</td>
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<tr>
<td>11</td>
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</table>

q19a w/ q19_dectyp decisions, a physician should avoid influencing pt's de


type: numeric (byte)
label: agree

range: [1,4] units: 1
unique values: 4 missing .: 5/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>173</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>269</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>346</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>103</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>5</td>
<td>.</td>
<td></td>
</tr>
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</table>

q19b w/ q19_dectyp decisions, a physician should encourage pt to make deci


type: numeric (byte)
label: agree

range: [1,4] units: 1
unique values: 4 missing .: 6/896

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<tr>
<td>344</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>298</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>173</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>6</td>
<td>.</td>
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</table>

q20 how appropriate are the physician's actions


type: numeric (byte)
label: appropriate
q21ai physicians' responsibility to provide guidance if pt faces a frightening medical

<table>
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<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>134</td>
<td>1</td>
<td>very appropriate</td>
</tr>
<tr>
<td>135</td>
<td>2</td>
<td>somewhat appropriate</td>
</tr>
<tr>
<td>237</td>
<td>3</td>
<td>somewhat inappropriate</td>
</tr>
<tr>
<td>361</td>
<td>4</td>
<td>very inappropriate</td>
</tr>
<tr>
<td>29</td>
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q21aii religious communities' responsibility to provide guidance if pt faces a frightening

<table>
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<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>8</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>85</td>
<td>3</td>
<td>some</td>
</tr>
<tr>
<td>784</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>17</td>
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</tbody>
</table>

q21bi physicians' responsibility to provide guidance if pt will die within a few weeks

<table>
<thead>
<tr>
<th>Freq.</th>
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<th>Label</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>18</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>139</td>
<td>3</td>
<td>some</td>
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</tbody>
</table>
q21bii religious communities' responsibility to provide guidance if pt will die within

- Type: numeric (byte)
- Label: range1
- Range: [1,4]
- Units: 1
- Unique values: 4
- Missing.: 28/896

<table>
<thead>
<tr>
<th>Freq.</th>
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<tbody>
<tr>
<td>17</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>22</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>151</td>
<td>3</td>
<td>some</td>
</tr>
<tr>
<td>678</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>28</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q21ci physicians' responsibility to provide guidance if pt suffers from anxiety or dep

- Type: numeric (byte)
- Label: range1
- Range: [1,4]
- Units: 1
- Unique values: 4
- Missing.: 16/896

<table>
<thead>
<tr>
<th>Freq.</th>
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<th>Label</th>
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<tbody>
<tr>
<td>2</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>21</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>274</td>
<td>3</td>
<td>some</td>
</tr>
<tr>
<td>583</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>16</td>
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<td></td>
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</table>

q21cii religious communities' responsibility to provide guidance if pt suffers from anx

- Type: numeric (byte)
- Label: range1
- Range: [1,4]
- Units: 1
- Unique values: 4
- Missing.: 32/896

<table>
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<tbody>
<tr>
<td>38</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>151</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>425</td>
<td>3</td>
<td>some</td>
</tr>
<tr>
<td>250</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>32</td>
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</table>

q21di physicians' responsibility to provide guidance if pt faces a morally complex dec
type: numeric (byte)
label: range1

range: [1,4]  units: 1
unique values: 4  missing .: 19/896

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<thead>
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<th>Label</th>
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<tbody>
<tr>
<td>11</td>
<td>1</td>
<td>none</td>
</tr>
<tr>
<td>85</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>323</td>
<td>3</td>
<td>some</td>
</tr>
<tr>
<td>458</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>19</td>
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<td></td>
</tr>
</tbody>
</table>

q21dii religious communities' responsibility to provide guidance if pt faces a morally

-------------------

q22a   how many hours you spend in a typical week doing outpt care

-------------------

type: numeric (float)

range: [0,100]  units: .1
unique values: 50  missing .: 57/896

mean: 25.9648
std. dev: 18.2777

percentiles: 10% 25% 50% 75% 90%
0 8 30 40 50

-------------------

q22b   how many hours you spend in a typical week doing inpt care

-------------------

type: numeric (float)

range: [0,90]  units: .1
unique values: 50  missing .: 129/896

mean: 18.8696
std. dev: 23.9112

percentiles: 10% 25% 50% 75% 90%
0 0 8 40 60
q22c  how many hours you spend in a typical week doing other work-related tasks

  type: numeric (float)
  range: [0,90]  units: .1
  unique values: 42  missing .: 197/896
  mean: 13.6845
  std. dev: 14.5736
  percentiles: 10% 25% 50% 75% 90%
                0   5  10  17  40

q23  how many hours you spend in a typical day at work on activities that you find pe

  type: numeric (float)
  range: [0,100]  units: .1
  unique values: 39  missing .: 35/896
  mean: 7.98432
  std. dev: 10.8047
  percentiles: 10% 25% 50% 75% 90%
                1.5  3  6  8  12

q24  are you a hospitalist

  type: numeric (byte)
  label: yesno
  range: [1,2]  units: 1
  unique values: 2  missing .: 20/896
  tabulation: Freq. Numeric Label
              142   1  yes
              734   2  no
              20   .

q25  is your pt population considered medically underserved

  type: numeric (byte)
  label: yesno
  range: [1,2]  units: 1
  unique values: 2  missing .: 28/896
  tabulation: Freq. Numeric Label
              355   1  yes
              513   2  no
              28   .
q26 is your place of practice religiously oriented or 'faith-based'

- **Type:** numeric (byte)
- **Label:** yesno
- **Range:** [1, 2]
- **Units:** 1
- **Unique values:** 2
- **Missing .:** 21/896

<table>
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<th>Label</th>
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<tbody>
<tr>
<td>114</td>
<td>1</td>
<td>yes</td>
</tr>
<tr>
<td>761</td>
<td>2</td>
<td>no</td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

q27a how many physicians work in your primary place of practice

- **Type:** numeric (int)
- **Range:** [-1, 2000]
- **Units:** 1
- **Unique values:** 63
- **Missing .:** 56/896
- **Mean:** 60.3893
- **Std. dev:** 181.57
- **Percentiles:**
  - 10%: 1
  - 25%: 3
  - 50%: 8
  - 75%: 30
  - 90%: 100

q27b what % of physicians in your primary place of practice have similar views regard

- **Type:** numeric (float)
- **Label:** dk, but 33 nonmissing values are not labeled
- **Range:** [-1, 100]
- **Units:** .1
- **Unique values:** 34
- **Missing .:** 54/896
- **Examples:**
  - -1: don't know
  - -1: don't know
  - 20
  - 90

q27c what % of pts come to see you b/c of your religious characteristics

- **Type:** string (str4)
- **Unique values:** 30
- **Missing "":** 144/896
- **Examples:**
  - "0"
  - "0"
  - "0"
  - "10"

---
q28 how important is it to work w/ colleagues who share your ethical/moral outlook r

---

type: numeric (byte)
label: important

<table>
<thead>
<tr>
<th>range</th>
<th>units</th>
<th>unique values</th>
<th>missing :</th>
</tr>
</thead>
<tbody>
<tr>
<td>[1,4]</td>
<td>1</td>
<td>4</td>
<td>25/896</td>
</tr>
</tbody>
</table>

tabulation: Freq. Numeric Label
193 1 very important
410 2 somewhat important
196 3 not very important
72 4 not at all important
25 .

q29a I have control over my work hours or call schedule

---

type: numeric (byte)
label: agree

<table>
<thead>
<tr>
<th>range</th>
<th>units</th>
<th>unique values</th>
<th>missing :</th>
</tr>
</thead>
<tbody>
<tr>
<td>[1,4]</td>
<td>1</td>
<td>4</td>
<td>23/896</td>
</tr>
</tbody>
</table>

tabulation: Freq. Numeric Label
227 1 agree strongly
351 2 agree somewhat
174 3 disagree somewhat
121 4 disagree strongly
23 .

q29b I have control over the kinds of clinical conditions I see

---

type: numeric (byte)
label: agree

<table>
<thead>
<tr>
<th>range</th>
<th>units</th>
<th>unique values</th>
<th>missing :</th>
</tr>
</thead>
<tbody>
<tr>
<td>[1,4]</td>
<td>1</td>
<td>4</td>
<td>29/896</td>
</tr>
</tbody>
</table>

tabulation: Freq. Numeric Label
111 1 agree strongly
224 2 agree somewhat
280 3 disagree somewhat
252 4 disagree strongly
29 .

q29c My clinical environment prioritizes pt needs over maximizing revenue

---

type: numeric (byte)
label: agree

<table>
<thead>
<tr>
<th>range</th>
<th>units</th>
<th>unique values</th>
<th>missing :</th>
</tr>
</thead>
<tbody>
<tr>
<td>[1,4]</td>
<td>1</td>
<td>4</td>
<td>38/896</td>
</tr>
</tbody>
</table>
### Tabulation: Freq. Numeric Label
- **316** 1 agree strongly
- **372** 2 agree somewhat
- **133** 3 disagree somewhat
- **37** 4 disagree strongly
- **38** .

---

**q30** Satisfaction with your overall career in medicine

---

**Type:** numeric (byte)
**Label:** satisfied
**Range:** [1,5] **Units:** 1
**Unique values:** 5
**Missing .:** 29/896

### Tabulation: Freq. Numeric Label
- **326** 1 very satisfied
- **401** 2 somewhat satisfied
- **49** 3 neither satisfied nor dissatisfied
- **75** 4 somewhat dissatisfied
- **16** 5 very dissatisfied
- **29** .

---

**q31** Using def of burnout, please choose one of the following

---

**Type:** numeric (byte)
**Label:** q31lab
**Range:** [1,5] **Units:** 1
**Unique values:** 5
**Missing .:** 27/896

### Tabulation: Freq. Numeric Label
- **145** 1 I enjoy my work. I have no symptoms of burnout.
- **520** 2 Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out.
- **164** 3 I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.
- **31** 4 The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.
- **9** 5 I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.
- **27** .

---

**q32a** The family in which I was raised emphasized the importance of serving those with
---

type: numeric (byte)
label: agree

range: [1,4]  units: 1
unique values: 4  missing .: 23/896

tabulation: Freq.   Numeric  Label
            349         1  agree strongly
            341         2  agree somewhat
            147         3  disagree somewhat
             36         4  disagree strongly
             23         .

---

q32b The practice of medicine is a calling

---

type: numeric (byte)
label: agree

range: [1,4]  units: 1
unique values: 4  missing .: 31/896

tabulation: Freq.   Numeric  Label
            365         1  agree strongly
            361         2  agree somewhat
             99         3  disagree somewhat
              40         4  disagree strongly
              31         .

---

q32c If I had it to do over again, I would not choose medicine as a career

---

type: numeric (byte)
label: agree

range: [1,4]  units: 1
unique values: 4  missing .: 26/896

tabulation: Freq.   Numeric  Label
            83         1  agree strongly
            141         2  agree somewhat
            240         3  disagree somewhat
            406         4  disagree strongly
             26         .

---

q32d If I had it to do over again, I would go into a different clinical specialty

---

type: numeric (byte)
label: agree

range: [1,4]  units: 1
unique values: 4  missing .: 25/896

tabulation: Freq.   Numeric  Label
q32e I hope to reduce the amount of time I spend in direct pt care

```
type: numeric (byte)
label: agree
range: [1,4]                          units: 1
unique values: 4                        missing .: 34/896
```

```
tabulation:  Freq.   Numeric  Label
131         1  agree strongly
237         2  agree somewhat
261         3  disagree somewhat
233         4  disagree strongly
34         .
```

q32f I hope to leave the practice of medicine

```
type: numeric (byte)
label: agree
range: [1,4]                          units: 1
unique values: 4                        missing .: 32/896
```

```
tabulation:  Freq.   Numeric  Label
62         1  agree strongly
86         2  agree somewhat
191         3  disagree somewhat
525         4  disagree strongly
32         .
```

q33 to what extent do you consider yourself a spiritual person

```
type: numeric (byte)
label: spiritual
range: [1,4]                          units: 1
unique values: 4                        missing .: 26/896
```

```
tabulation:  Freq.   Numeric  Label
213         1  very spiritual
363         2  moderately spiritual
214         3  slightly spiritual
80          4  not spiritual at all
26         .
```

q34 how important would you say your religion is in your own life

--
q34lab
range: [1,9]    units: 1
unique values: 5    missing .: 20/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>127</td>
<td>1</td>
<td>the most important part of my life</td>
</tr>
<tr>
<td>251</td>
<td>2</td>
<td>very important in my life</td>
</tr>
<tr>
<td>283</td>
<td>3</td>
<td>fairly important in my life</td>
</tr>
<tr>
<td>127</td>
<td>4</td>
<td>not important in my life</td>
</tr>
<tr>
<td>88</td>
<td>9</td>
<td>not applicable. I have no religion</td>
</tr>
<tr>
<td>20</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q35 which of the following best indicates your religious affiliation

religion
range: [1,10]    units: 1
unique values: 10    missing .: 28/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>4</td>
<td>Jewish</td>
</tr>
<tr>
<td>6</td>
<td>6</td>
<td>Roman Catholic</td>
</tr>
<tr>
<td>8</td>
<td>8</td>
<td>Protestant</td>
</tr>
<tr>
<td>8</td>
<td>8</td>
<td>Protestant</td>
</tr>
</tbody>
</table>

typejew
range: [1,5]    units: 1
unique values: 5    missing .: 800/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>1</td>
<td>orthodox</td>
</tr>
<tr>
<td>23</td>
<td>2</td>
<td>conservative</td>
</tr>
<tr>
<td>41</td>
<td>3</td>
<td>reform</td>
</tr>
<tr>
<td>19</td>
<td>4</td>
<td>secular</td>
</tr>
<tr>
<td>6</td>
<td>5</td>
<td>other</td>
</tr>
<tr>
<td>800</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

yesno
range: [1,2]    units: 1
unique values: 2    missing .: 409/896

<table>
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<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>98</td>
<td>1</td>
<td>yes</td>
</tr>
</tbody>
</table>
q36 Attendance at Religious Services

Type: numeric (byte)
Label: attendance
Range: [1, 9]       Units: 1
Unique values: 9   Missing: 27/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>118</td>
<td>1</td>
<td>never</td>
</tr>
<tr>
<td>95</td>
<td>2</td>
<td>less than once a yr</td>
</tr>
<tr>
<td>124</td>
<td>3</td>
<td>about once or twice a yr</td>
</tr>
<tr>
<td>124</td>
<td>4</td>
<td>several times a yr</td>
</tr>
<tr>
<td>70</td>
<td>5</td>
<td>about once a month</td>
</tr>
<tr>
<td>75</td>
<td>6</td>
<td>two to three times a month</td>
</tr>
<tr>
<td>93</td>
<td>7</td>
<td>nearly every wk</td>
</tr>
<tr>
<td>125</td>
<td>8</td>
<td>every wk</td>
</tr>
<tr>
<td>45</td>
<td>9</td>
<td>several times a wk</td>
</tr>
<tr>
<td>27</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q37a Different religions have different versions of the truth, and each may be equal.

Type: numeric (byte)
Label: agree
Range: [1, 4]       Units: 1
Unique values: 4   Missing: 31/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>346</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>305</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>90</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>124</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>31</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q37b There is one religion that is uniquely and comprehensively true.

Type: numeric (byte)
Label: agree
Range: [1, 4]       Units: 1
Unique values: 4   Missing: 31/896

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>144</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>94</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>119</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>508</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>31</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>
q37c There is no one, true, right religion

  type: numeric (byte)
  label: agree

  range: [1,4]       units: 1
  unique values: 4   missing .: 31/896

  tabulation: Freq.   Numeric  Label
                389         1  agree strongly
                161         2  agree somewhat
                104         3  disagree somewhat
                211         4  disagree strongly
                31           .

q37d I try hard to carry my religious beliefs over into all my other dealings in life

  type: numeric (byte)
  label: agree

  range: [1,4]       units: 1
  unique values: 4   missing .: 33/896

  tabulation: Freq.   Numeric  Label
                163         1  agree strongly
                285         2  agree somewhat
                198         3  disagree somewhat
                217         4  disagree strongly
                33           .

q37e My whole approach to life is based on my religion

  type: numeric (byte)
  label: agree

  range: [1,4]       units: 1
  unique values: 4   missing .: 28/896

  tabulation: Freq.   Numeric  Label
                125         1  agree strongly
                216         2  agree somewhat
                194         3  disagree somewhat
                333         4  disagree strongly
                28           .

----------------------
q38 Hispanic/Latino

  type: numeric (byte)
  label: yesno

  range: [1,2]       units: 1
  unique values: 2   missing .: 11/896

----------------------
<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>41</td>
<td>1</td>
<td>yes</td>
</tr>
<tr>
<td>844</td>
<td>2</td>
<td>no</td>
</tr>
<tr>
<td>11</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

### q39 classification of race

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>140</td>
<td>1</td>
<td>asian</td>
</tr>
<tr>
<td>55</td>
<td>2</td>
<td>black or african-american</td>
</tr>
<tr>
<td>7</td>
<td>3</td>
<td>american indian or alaskan native</td>
</tr>
<tr>
<td>644</td>
<td>4</td>
<td>white or caucasian</td>
</tr>
<tr>
<td>15</td>
<td>5</td>
<td>other</td>
</tr>
<tr>
<td>35</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

### q39a type of Asian

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>1</td>
<td>east asian or pacific islander</td>
</tr>
<tr>
<td>73</td>
<td>2</td>
<td>south asian</td>
</tr>
<tr>
<td>23</td>
<td>3</td>
<td>other asian</td>
</tr>
<tr>
<td>765</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

### q40 how long you have been in U.S.

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>189</td>
<td>1</td>
<td>you immigrated to u.s. as an adult</td>
</tr>
<tr>
<td>60</td>
<td>2</td>
<td>you immigrated to u.s. as a child</td>
</tr>
<tr>
<td>100</td>
<td>3</td>
<td>one/both of parents immigrated to u.s. before you were born</td>
</tr>
<tr>
<td>537</td>
<td>4</td>
<td>both parents were born in u.s.</td>
</tr>
<tr>
<td>10</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>
q41 aspects of religion that come to mind when you think of religion and psychologic
----------------------
type: string (str244)
unique values: 633 missing "": 240/896
examples: 
"Doing what Jesus would do."
"Overall positive, but oftentimes guilt"
"Very comforting to people who believe"

warning: variable has leading, embedded, and trailing blanks
----------------------
q42 additional comments
----------------------
type: string (str244)
unique values: 220 missing "": 673/896
examples: 
"
"
"
"Environmental stress and lack of social support or health insurance plays a critical role in their well being."

warning: variable has leading, embedded, and trailing blanks
APPENDIX E: PSYCHIATRIST QUESTIONNAIRE DATA CODEBOOK

----------
q1a  prescribe an antidepressant  
----------

  type: numeric (byte)  
  label: likely  
  range: [1,4] units: 1  
  unique values: 4 missing .: 5/312

  tabulation: Freq.  Numeric  Label  
              168  1 very likely  
              102  2 somewhat likely  
               26  3 not very likely  
               11  4 not at all likely  
                5 .

----------
q1b  see pt regularly for counseling yourself  
----------

  type: numeric (byte)  
  label: likely  
  range: [1,4] units: 1  
  unique values: 4 missing .: 15/312

  tabulation: Freq.  Numeric  Label  
              54  1 very likely  
              59  2 somewhat likely  
             109  3 not very likely  
               75  4 not at all likely  
               15 .

----------
q1c  refer to a psychiatrist  
----------

  type: numeric (byte)  
  label: likely  
  range: [1,4] units: 1  
  unique values: 4 missing .: 13/312

  tabulation: Freq.  Numeric  Label  
             133  1 very likely  
             107  2 somewhat likely  
               50  3 not very likely  
               9  4 not at all likely  
               13 .

----------
q1d  refer to a psychologist/other licensed counselor  
----------

  type: numeric (byte)  
  label: likely
range: [1,4] units: 1 missing .: 7/312
unique values: 4

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>144</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>116</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>35</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>10</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

q1e encourage pt to get more involved in meaningful relationships and activities

----------
type: numeric (byte)
label: likely
range: [1,4] units: 1 missing .: 9/312
unique values: 4

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>121</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>99</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>61</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>22</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

----------
q1f encourage pt to get more involved in his religious community

----------
type: numeric (byte)
label: likely
range: [1,4] units: 1 missing .: 9/312
unique values: 4

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>61</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>108</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>85</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>49</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

----------
q2a any mntl hlth professionals in area who base practice on q1_religion

----------
type: numeric (byte)
label: yesno
range: [1,2] units: 1 missing .: 8/312
unique values: 2

<table>
<thead>
<tr>
<th>Freq.</th>
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<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>1</td>
<td>yes</td>
</tr>
<tr>
<td>204</td>
<td>2</td>
<td>no</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
q2b  how likely to refer pt to one of those professionals

<table>
<thead>
<tr>
<th>type: numeric (byte)</th>
<th>label: likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>range: [1,4]</td>
<td>units: 1</td>
</tr>
<tr>
<td>unique values: 4</td>
<td>missing .: 13/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>112</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>103</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>39</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>13</td>
<td></td>
<td>.</td>
</tr>
</tbody>
</table>

q3a  prescribe an antidepressant medication

<table>
<thead>
<tr>
<th>type: numeric (byte)</th>
<th>label: likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>range: [1,4]</td>
<td>units: 1</td>
</tr>
<tr>
<td>unique values: 4</td>
<td>missing .: 10/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>205</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>81</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>13</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>.</td>
</tr>
</tbody>
</table>

q3b  see pt regularly for counseling yourself

<table>
<thead>
<tr>
<th>type: numeric (byte)</th>
<th>label: likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>range: [1,4]</td>
<td>units: 1</td>
</tr>
<tr>
<td>unique values: 4</td>
<td>missing .: 17/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>131</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>95</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>45</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>24</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td>.</td>
</tr>
</tbody>
</table>

q3c  refer to a psychologist/other licensed counselor

<table>
<thead>
<tr>
<th>type: numeric (byte)</th>
<th>label: likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>range: [1,4]</td>
<td>units: 1</td>
</tr>
<tr>
<td>unique values: 4</td>
<td>missing .: 17/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>131</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>95</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>45</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>24</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td>.</td>
</tr>
</tbody>
</table>
tabulation: Freq. Numeric Label
119 1 very likely
124 2 somewhat likely
38 3 not very likely
14 4 not at all likely
17 .

q4a how much would ppl w/ depression benefit from paying attention to relationships

  type: numeric (byte)
  label: range

  range: [1,4] units: 1
  unique values: 4 missing .: 2/312

  tabulation: Freq. Numeric Label
  3 1 not at all
  18 2 a little
  101 3 somewhat
  188 4 a lot
  2 .

q4b how much would ppl w/ depression benefit from paying attention to spiritual life

  type: numeric (byte)
  label: range

  range: [1,4] units: 1
  unique values: 4 missing .: 3/312

  tabulation: Freq. Numeric Label
  5 1 not at all
  33 2 a little
  144 3 somewhat
  127 4 a lot
  3 .

q4c how much would ppl w/ depression benefit from taking antidepressants

  type: numeric (byte)
  label: range

  range: [1,4] units: 1
  unique values: 4 missing .: 2/312

  tabulation: Freq. Numeric Label
  2 1 not at all
  9 2 a little
  114 3 somewhat
  185 4 a lot
  2 .
q5a  prescribe an anti-anxiety med
----------------------

type: numeric (byte)
label: likely
range: [1,4] units: 1
unique values: 4 missing.: 4/312

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>99</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>120</td>
<td>2</td>
<td>somewhat likely</td>
</tr>
<tr>
<td>76</td>
<td>3</td>
<td>not very likely</td>
</tr>
<tr>
<td>13</td>
<td>4</td>
<td>not at all likely</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

----------------------
q5b  see pt regularly for counseling yourself
----------------------

type: numeric (byte)
label: likely
range: [1,4] units: 1
unique values: 4 missing.: 9/312

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>1</td>
<td>very likely</td>
</tr>
<tr>
<td>73</td>
<td>2</td>
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<td>64</td>
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q5c  refer to a psychiatrist
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type: numeric (byte)
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range: [1,4] units: 1
unique values: 4 missing.: 12/312

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q5d  refer to a psychologist/other licensed counselor
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type: numeric (byte)
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q5e encourage pt to get involved in meaningful relationships and activities

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**Type:** numeric (byte)

**Label:** likely

**Range:** [1, 4]

**Units:** 1

**Unique values:** 4

**Missing:** 5/312

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q5f encourage pt to get involved in her religious community

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**Type:** numeric (byte)

**Label:** likely

**Range:** [1, 4]

**Units:** 1

**Unique values:** 4

**Missing:** 6/312

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q6a any mntl hlth professionals in area who base practice on q5_religion

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**Type:** numeric (byte)

**Label:** yesno

**Range:** [1, 2]

**Units:** 1

**Unique values:** 2

**Missing:** 4/312

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q6b how likely to refer this pt to one of those professionals

---

**Type:** numeric (byte)

**Label:** likely
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<tr>
<td></td>
<td>109</td>
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<td>43</td>
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q7a describe an antidepressant medication

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**label:** likely

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q7b see pt regularly for counseling yourself

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q7c refer to a psychologist/other licensed counselor

**type:** numeric (byte)

**label:** likely

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q8a  how much would ppl w/ anxiety benefit from paying attention to relationships
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unique values: 4  missing .: 1/312

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<tr>
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<td>2</td>
<td>a little</td>
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<tr>
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<td>3</td>
<td>somewhat</td>
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<tr>
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q8b  how much would ppl w/ anxiety benefit from paying attention to spiritual life
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q8c  how much would ppl w/ anxiety benefit from taking anti-anxiety meds
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q9a  physicians too often treat normal sadness as if it were a medical illness
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**q9b** undertreatment of depression is a more pressing problem than overtreatment of no

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<td>80</td>
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<tr>
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**q9c** physicians too often treat normal worry and stress as if it were a medical illne

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<tr>
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<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>6</td>
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<td>disagree strongly</td>
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**q9d** undertreatment of anxiety disorders is a more pressing problem than overtreatment

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</tr>
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<td>4 not at all likely</td>
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<tr>
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<td>60</td>
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</tr>
<tr>
<td>10</td>
<td>4 not at all likely</td>
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<table>
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<tr>
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range: [1,4] units: 1
unique values: 4 missing.: 6/312

tabulation: Freq. Numeric Label
133 1 very likely
118 2 somewhat likely
43 3 not very likely
12 4 not at all likely
6 .

-------------------
q10e encourage pt to get involved in meaningful relationships and activities
-------------------
type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing.: 7/312

tabulation: Freq. Numeric Label
108 1 very likely
118 2 somewhat likely
68 3 not very likely
11 4 not at all likely
7 .

-------------------
q10f encourage pt to get involved in her religious community
-------------------
type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing.: 8/312

tabulation: Freq. Numeric Label
57 1 very likely
100 2 somewhat likely
116 3 not very likely
31 4 not at all likely
8 .

-------------------
q11a prescribe an antidepressant medication
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type: numeric (byte)
label: likely

range: [1,4] units: 1
unique values: 4 missing.: 12/312

tabulation: Freq. Numeric Label
124 1 very likely
114 2 somewhat likely
53 3 not very likely
9 4 not at all likely
12 .
q11b see pt regularly for counseling yourself

```
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unique values: 4  missing .: 14/312

tabulation: Freq.  Numeric  Label
106       1  very likely
93        2  somewhat likely
74        3  not very likely
25        4  not at all likely
14        .
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q11c refer to a psychologist/other licensed counselor

```
type: numeric (byte)
label: likely

range: [1,4]  units: 1
unique values: 4  missing .: 11/312

tabulation: Freq.  Numeric  Label
135       1  very likely
129       2  somewhat likely
23        3  not very likely
14        4  not at all likely
11        .
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q12a how much do you think pts w/ these symptoms would benefit from paying attention

```
type: numeric (byte)
label: range

range: [1,4]  units: 1
unique values: 4  missing .: 3/312

tabulation: Freq.  Numeric  Label
13         1  not at all
53         2  a little
127        3  somewhat
116        4  a lot
3          .
```

q12b how much do you think pts w/ these symptoms would benefit from paying attention

```
type: numeric (byte)
label: range

range: [1,4]  units: 1
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missing .: 3/312

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<td>somewhat</td>
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<tr>
<td>92</td>
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<td>a lot</td>
</tr>
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q12c how much do you think pts w/ these symptoms would benefit from taking meds

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<th>Label</th>
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<tr>
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<td>1</td>
<td>not at all</td>
</tr>
<tr>
<td>58</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>141</td>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>102</td>
<td>4</td>
<td>a lot</td>
</tr>
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q13a such pts are usually experiencing the normal ups and downs of life

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q13b such pts have medical conditions that scientific research will one day be able t

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<tr>
<td>units: 1</td>
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<th>Label</th>
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<td>170</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>89</td>
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<td>disagree somewhat</td>
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q13c such pts tend to have a root problem that is spiritual in nature

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<table>
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<tr>
<th>tabulation: Freq.</th>
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<th>Label</th>
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<tbody>
<tr>
<td>8</td>
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<tr>
<td>62</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>156</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>82</td>
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q13d such pts often get better with treatment by physicians

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<td>145</td>
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<tr>
<td>115</td>
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</tr>
<tr>
<td>28</td>
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q14a how effective you think participation in a local chapter of AA would be effective

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<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>199</td>
<td>1</td>
<td>very effective</td>
</tr>
<tr>
<td>110</td>
<td>2</td>
<td>somewhat effective</td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>not very effective</td>
</tr>
<tr>
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q14b how effective you think pharmacological therapy by a physician who specializes i

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<tbody>
<tr>
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<table>
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<tr>
<th>tabulation: Freq.</th>
<th>Numeric</th>
<th>Label</th>
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<tbody>
<tr>
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<td>4</td>
<td></td>
</tr>
<tr>
<td>4</td>
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### q14c How effective you think completion of a residential rehabilitation program would

<table>
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<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
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<tbody>
<tr>
<td>95</td>
<td>1</td>
<td>very effective</td>
</tr>
<tr>
<td>163</td>
<td>2</td>
<td>somewhat effective</td>
</tr>
<tr>
<td>47</td>
<td>3</td>
<td>not very effective</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>not at all effective</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>144</td>
<td>1</td>
<td>very effective</td>
</tr>
<tr>
<td>155</td>
<td>2</td>
<td>somewhat effective</td>
</tr>
<tr>
<td>10</td>
<td>3</td>
<td>not very effective</td>
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</tbody>
</table>

### q14a Any explicitly faith-based alcoholism treatment programs to which you could refer

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<thead>
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<th>Label</th>
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<tbody>
<tr>
<td>121</td>
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<td>yes</td>
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<tr>
<td>184</td>
<td>2</td>
<td>no</td>
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</table>

### q14b How likely to refer pt to one of those programs

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<tbody>
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<tr>
<td>124</td>
<td>2</td>
<td>somewhat likely</td>
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<tr>
<td>64</td>
<td>3</td>
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<tr>
<td>22</td>
<td>4</td>
<td>not at all likely</td>
</tr>
</tbody>
</table>

### q15 Add to what extent do you agree that an emphasis on spirituality is critical to the
### q15a to what extent is q15_alchlism_Drug Addiction a disease

<table>
<thead>
<tr>
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<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>137</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>114</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>44</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>13</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
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</tbody>
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### q15b to what extent is q15_alchlism_Drug Addiction a response to psychological wounde

<table>
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<th>Numeric</th>
<th>Label</th>
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<tbody>
<tr>
<td>4</td>
<td>1</td>
<td>not at all</td>
</tr>
<tr>
<td>11</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>96</td>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>198</td>
<td>4</td>
<td>a lot</td>
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<tr>
<td>3</td>
<td>.</td>
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### q15c to what extent is q15_alchlism_Drug Addiction a result of moral failings

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<th>Label</th>
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<tr>
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<td>1</td>
<td>not at all</td>
</tr>
<tr>
<td>42</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>177</td>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>83</td>
<td>4</td>
<td>a lot</td>
</tr>
<tr>
<td>2</td>
<td>.</td>
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</tbody>
</table>
q16a to what extent does alcoholism result from choices for which pts are responsible

```
<table>
<thead>
<tr>
<th>Numeric</th>
<th>Label</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>not at all</td>
</tr>
<tr>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>4</td>
<td>a lot</td>
</tr>
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</table>
```

q16b to what extent does obesity result from choices for which pts are responsible

```
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<tr>
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<th>Label</th>
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<tbody>
<tr>
<td>1</td>
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<tr>
<td>2</td>
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<tr>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>4</td>
<td>a lot</td>
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</tbody>
</table>
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q16c to what extent does nicotine dependence result from choices for which pts are responsible

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<th>Label</th>
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</thead>
<tbody>
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<td>1</td>
<td>not at all</td>
</tr>
<tr>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>3</td>
<td>somewhat</td>
</tr>
<tr>
<td>4</td>
<td>a lot</td>
</tr>
</tbody>
</table>
```
q16d to what extent does depression result from choices for which pts are responsible

```plaintext
 type: numeric (byte)  
 label: range  

 range: [1,4]  
 unique values: 4  
 units: 1 
 tabulation: Freq. Numeric Label  
 101 1 not at all  
 148 2 a little  
 54 3 somewhat  
 5 4 a lot  
 4 .
```

q16e to what extent does anxiety result from choices for which pts are responsible

```plaintext
 type: numeric (byte)  
 label: range  

 range: [1,4]  
 unique values: 4  
 units: 1 
 tabulation: Freq. Numeric Label  
 90 1 not at all  
 153 2 a little  
 61 3 somewhat  
 5 4 a lot  
 3 .
```

q16f to what extent does chronic back pain result from choices for which pts are responsible

```plaintext
 type: numeric (byte)  
 label: range  

 range: [1,4]  
 unique values: 4  
 units: 1 
 tabulation: Freq. Numeric Label  
 75 1 not at all  
 157 2 a little  
 71 3 somewhat  
 6 4 a lot  
 3 .
```

q16g to what extent does fibromyalgia result from choices for which pts are responsible

```plaintext
 type: numeric (byte)  
 label: range  

```
---

**q17a** how much satisfaction you experience when taking care of pts w/ alcoholism

---

type: numeric (byte)
label: range1

range: [1,4]  
units: 1  
unique values: 4  
missing .: 3/312

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<tbody>
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<td>not at all</td>
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<tr>
<td>138</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>61</td>
<td>3</td>
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<tr>
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<td>4</td>
<td>a lot</td>
</tr>
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**q17b** how much satisfaction you experience when taking care of pts w/ obesity

---

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label: range1

range: [1,4]  
units: 1  
unique values: 4  
missing .: 9/312

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<tbody>
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<tr>
<td>94</td>
<td>2</td>
<td>a little</td>
</tr>
<tr>
<td>122</td>
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<td>some</td>
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<tr>
<td>68</td>
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<td>a lot</td>
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<tr>
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---

**q17c** how much satisfaction you experience when taking care of pts w/ nicotine depende

---

type: numeric (byte)
label: range1

range: [1,4]  
units: 1  
unique values: 4  
missing .: 7/312

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<td>98</td>
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<td>a little</td>
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<tr>
<td>119</td>
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<tr>
<td>55</td>
<td>4</td>
<td>a lot</td>
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<tr>
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q17d how much satisfaction you experience when taking care of pts w/ depression

```
type: numeric (byte)
label: range1
range: [1,4] units: 1
unique values: 4 missing .: 5/312
```
```
tabulation: Freq. Numeric Label
2 1 none
4 2 a little
58 3 some
243 4 a lot
5 .
```

q17e how much satisfaction you experience when taking care of pts w/ anxiety

```
type: numeric (byte)
label: range1
range: [1,4] units: 1
unique values: 4 missing .: 5/312
```
```
tabulation: Freq. Numeric Label
3 1 none
6 2 a little
84 3 some
214 4 a lot
5 .
```

q17f how much satisfaction you experience when taking care of pts w/ chronic back pai

```
type: numeric (byte)
label: range1
range: [1,4] units: 1
unique values: 4 missing .: 8/312
```
```
tabulation: Freq. Numeric Label
52 1 none
132 2 a little
87 3 some
33 4 a lot
8 .
```

q17g how much satisfaction you experience when taking care of pts w/ fibromyalgia

```
type: numeric (byte)
label: range1
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q18a participating in a religious congregation provides unique psychological benefits
-----------------------

Type: numeric (byte)
Label: agree

Range: [1, 4]
Units: 1
Unique values: 4
Missing: 8/312

Tabulation:
Freq.   Numeric   Label
53   1   none
108   2   a little
106   3   some
37   4   a lot
8   .

q18b psychological benefits of participating in a religious congregation can be found
-----------------------

Type: numeric (byte)
Label: agree

Range: [1, 4]
Units: 1
Unique values: 4
Missing: 5/312

Tabulation:
Freq.   Numeric   Label
96   1   agree strongly
147   2   agree somewhat
41   3   disagree somewhat
23   4   disagree strongly
5   .

q19a being deeply involved in a religious community has a pos/neg effect on psychology
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Type: numeric (byte)
Label: posneg

Range: [1, 5]
Units: 1
Unique values: 5
Missing: 4/312

Tabulation:
Freq.   Numeric   Label
1   1   almost always negative
8   2   more negative than positive
60   3   equally positive and negative
190    4 more positive than negative
49     5 almost always positive
 4 .

q19b regularly attending religious services has a pos/neg effect on psychological wel

<table>
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<td>55</td>
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<tr>
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</table>

q19c avoiding behaviors forbidden by one's religion has a pos/neg effect on psycholog

<table>
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<tr>
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<tr>
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<td>146</td>
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q19d frequent prayer has a pos/neg effect on psychological well-being

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<tr>
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<tr>
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<td>94</td>
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<tr>
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q19e believing that after death there will be a divine judgment has a pos/neg effect

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<tr>
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<tr>
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</tr>
<tr>
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</tr>
<tr>
<td>unique values</td>
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</tr>
<tr>
<td>missing . .</td>
<td>6/312</td>
</tr>
</tbody>
</table>

tabulation:

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<th>Label</th>
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</thead>
<tbody>
<tr>
<td>13</td>
<td>1</td>
<td>almost always negative</td>
</tr>
<tr>
<td>47</td>
<td>2</td>
<td>more negative than positive</td>
</tr>
<tr>
<td>118</td>
<td>3</td>
<td>equally positive and negative</td>
</tr>
<tr>
<td>97</td>
<td>4</td>
<td>more positive than negative</td>
</tr>
<tr>
<td>31</td>
<td>5</td>
<td>almost always positive</td>
</tr>
<tr>
<td>6</td>
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</table>

q19f directly feeling God's presence has a pos/neg effect on psychological well-being

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<tr>
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</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
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<td>[1,5]</td>
</tr>
<tr>
<td>units</td>
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</tr>
<tr>
<td>unique values</td>
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tabulation:

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<th>Label</th>
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<tbody>
<tr>
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<td>1</td>
<td>almost always negative</td>
</tr>
<tr>
<td>14</td>
<td>2</td>
<td>more negative than positive</td>
</tr>
<tr>
<td>55</td>
<td>3</td>
<td>equally positive and negative</td>
</tr>
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<td>140</td>
<td>4</td>
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</tr>
<tr>
<td>92</td>
<td>5</td>
<td>almost always positive</td>
</tr>
<tr>
<td>6</td>
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</tr>
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</table>

q19g having an authoritative religious mentor has a pos/neg effect on psychological well-being

<table>
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<tr>
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<tbody>
<tr>
<td>label</td>
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<tr>
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<td>[1,5]</td>
</tr>
<tr>
<td>units</td>
<td>1</td>
</tr>
<tr>
<td>unique values</td>
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<td>7/312</td>
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tabulation:

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<th>Label</th>
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</tr>
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<td>more negative than positive</td>
</tr>
<tr>
<td>120</td>
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<td>equally positive and negative</td>
</tr>
<tr>
<td>84</td>
<td>4</td>
<td>more positive than negative</td>
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<tr>
<td>13</td>
<td>5</td>
<td>almost always positive</td>
</tr>
<tr>
<td>7</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q20a physicians' responsibility to provide guidance if pt faces a frightening medical
q20a1i religious communities' responsibility to provide guidance if pt faces a frighten
----------------------

q20a1i religious communities' responsibility to provide guidance if pt faces a frighten
----------------------

q20b1i physicians' responsibility to provide guidance if pt will die within a few weeks
----------------------

q20b1i physicians' responsibility to provide guidance if pt will die within a few weeks
----------------------

q20b1ii religious communities' responsibility to provide guidance if pt will die within
----------------------

q20b1ii religious communities' responsibility to provide guidance if pt will die within
----------------------
q20ci physicians' responsibility to provide guidance if pt suffers from anxiety or dep

<table>
<thead>
<tr>
<th></th>
<th>1 none</th>
<th>2 a little</th>
<th>3 some</th>
<th>4 a lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td></td>
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<td>8</td>
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<td>242</td>
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<td></td>
</tr>
<tr>
<td>9</td>
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q20cii religious communities' responsibility to provide guidance if pt suffers from anx

<table>
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<tr>
<th></th>
<th>1 none</th>
<th>2 a little</th>
<th>3 some</th>
<th>4 a lot</th>
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<tbody>
<tr>
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<td></td>
</tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>161</td>
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</tr>
<tr>
<td>68</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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q20di physicians' responsibility to provide guidance if pt faces a morally complex dec

<table>
<thead>
<tr>
<th></th>
<th>1 none</th>
<th>2 a little</th>
<th>3 some</th>
<th>4 a lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>98</td>
<td></td>
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</tr>
<tr>
<td>189</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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------------
q20dii religious communities’ responsibility to provide guidance if pt faces a morally
-------------------------------

  type: numeric (byte)
  label: range1
  range: [1,4]  units: 1
  unique values: 4  missing .: 9/312

  tabulation:  Freq.  Numeric  Label
   5         1  none
   26         2  a little
   99         3  some
  173         4  a lot
   9         .

-------------------------------
q21a how many hours you spend in a typical week doing outpt care
-------------------------------

  type: numeric (float)
  range: [0,60]  units: .1
  unique values: 37  missing .: 28/312

  mean: 26.2271
  std. dev: 16.2954

  percentiles: 10% 25% 50% 75% 90%
                1.5  10  30  40  45

-------------------------------
q21b how many hours you spend in a typical week doing inpt care
-------------------------------

  type: numeric (float)
  range: [0,75]  units: .1
  unique values: 32  missing .: 74/312

  mean: 15.2374
  std. dev: 18.6595

  percentiles: 10% 25% 50% 75% 90%
                0   0   5  30  40

-------------------------------
q21c how many hours you spend in a typical week doing other work-related tasks
-------------------------------

  type: numeric (float)
  range: [0,100]  units: .1
  unique values: 31  missing .: 80/312

  mean: 14.6573
  std. dev: 15.4965

  percentiles: 10% 25% 50% 75% 90%
                0   5  10  20  40
q22  how many hours you spend in a typical day at work on activities that you find pe

--------------------

type: numeric (float)

range: [0,85]  units: .1
unique values: 29  missing .: 17/312

mean: 10.2
std. dev: 12.1418

percentiles: 10% 25% 50% 75% 90%
2 4 6 8 30

--------------------

q23 is your pt population considered medically underserved

--------------------

type: numeric (byte)
label: yesno

range: [1,2]  units: 1
unique values: 2  missing .: 8/312

tabulation: Freq. Numeric Label
161 1 yes
143 2 no
8 .

--------------------

q24 is your place of practice religiously oriented or 'faith-based'

--------------------

type: numeric (byte)
label: yesno

range: [1,2]  units: 1
unique values: 2  missing .: 8/312

tabulation: Freq. Numeric Label
22 1 yes
282 2 no
8 .

--------------------

q25 what % of pts come to see you b/c of your religious characteristics

--------------------

type: numeric (float)

range: [0,90]  units: .1
unique values: 18  missing .: 20/312

mean: 3.17808
std. dev: 10.159

percentiles: 10% 25% 50% 75% 90%
0 0 0 0 10

--------------------
q26a I have control over my work hours or call schedule

```
type: numeric (byte)
label: agree
range: [1,4]  units: 1
unique values: 4  missing .: 8/312

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>83</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>130</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>46</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>45</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>8</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>
```

q26b I have control over the kinds of clinical conditions I see

```
type: numeric (byte)
label: agree
range: [1,4]  units: 1
unique values: 4  missing .: 10/312

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>58</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>83</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>85</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>76</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>10</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>
```

q26c My clinical environment prioritizes pt needs over maximizing revenue

```
type: numeric (byte)
label: agree
range: [1,4]  units: 1
unique values: 4  missing .: 11/312

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>115</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>126</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>36</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>24</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>11</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>
```

q27 satisfaction with your overall career in medicine

```
type: numeric (byte)
label: satisfied
range: [1,5]  units: 1
unique values: 5  missing .: 3/312
```
### q28: Using def of burnout, please choose one of the following

<table>
<thead>
<tr>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I enjoy my work. I have no symptoms of burnout.</td>
</tr>
<tr>
<td>2</td>
<td>Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out.</td>
</tr>
<tr>
<td>3</td>
<td>I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.</td>
</tr>
<tr>
<td>4</td>
<td>The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.</td>
</tr>
<tr>
<td>5</td>
<td>I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.</td>
</tr>
</tbody>
</table>

### q29a: The family in which I was raised emphasized the importance of serving those with

<table>
<thead>
<tr>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>5</td>
<td>disagree strongly</td>
</tr>
</tbody>
</table>
q29b The practice of medicine is a calling
---------------------

type: numeric (byte)
label: agree

range: [1,4]
units: 1
unique values: 4
missing .: 4/312

tabulation: Freq. Numeric Label
128 1 agree strongly
121 2 agree somewhat
45 3 disagree somewhat
14 4 disagree strongly
4 .

---------------------
q29c If I had it to do over again, I would not choose medicine as a career
---------------------

type: numeric (byte)
label: agree

range: [1,4]
units: 1
unique values: 4
missing .: 5/312

tabulation: Freq. Numeric Label
20 1 agree strongly
52 2 agree somewhat
74 3 disagree somewhat
161 4 disagree strongly
5 .

---------------------
q29d If I had it to do over again, I would go into a different clinical specialty
---------------------

type: numeric (byte)
label: agree

range: [1,4]
units: 1
unique values: 4
missing .: 5/312

tabulation: Freq. Numeric Label
12 1 agree strongly
46 2 agree somewhat
71 3 disagree somewhat
178 4 disagree strongly
5 .

---------------------
q29e I hope to reduce the amount of time I spend in direct pt care
---------------------

type: numeric (byte)
label: agree

range: [1,4]
units: 1
unique values: 4
missing .: 8/312
q29f I hope to leave the practice of medicine

-------------
type: numeric (byte)
label: agreement
range: [1,4] units: 1
unique values: 4 missing .: 5/312

-------------
q30 To what extent do you consider yourself a spiritual person

-------------
type: numeric (byte)
label: spiritual
range: [1,4] units: 1
unique values: 4 missing .: 4/312

-------------
q31 How important would you say your religion is in your own life

-------------
type: numeric (byte)
label: q34lab
range: [1,9] units: 1
unique values: 5 missing .: 3/312
---

q32 which of the following best indicates your religious affiliation
---

type: numeric (byte)
label: religion

range: \([1,10]\) units: 1
unique values: 10 missing .: \(5/312\)

examples:
2 Buddhist
4 Jewish
6 Roman Catholic
8 Protestant

---

q32a type of Jew
---

type: numeric (byte)
label: typejew

range: \([2,5]\) units: 1
unique values: 4 missing .: \(271/312\)

<table>
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<th>Label</th>
</tr>
</thead>
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<td>4</td>
<td>2</td>
<td>conservative</td>
</tr>
<tr>
<td>16</td>
<td>3</td>
<td>reform</td>
</tr>
<tr>
<td>16</td>
<td>4</td>
<td>secular</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>other</td>
</tr>
<tr>
<td>271</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

q32b evangelical Christian or not
---

type: numeric (byte)
label: yesno

range: \([1,2]\) units: 1
unique values: 2 missing .: \(171/312\)

| Freq. | Numeric | Label | |
|-------|---------|-------|
| 23    | 1       | yes   |
| 118   | 2       | no    |
| 171   |         |       |

---

q32_spec Q32_SPEC
---

type: string (str22)

unique values: 14 missing "": \(295/312\)

examples:
"
""
""
""

warning: variable has embedded blanks
q33  attendance at religious services

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td>1</td>
<td>never</td>
</tr>
<tr>
<td>41</td>
<td>2</td>
<td>less than once a yr</td>
</tr>
<tr>
<td>53</td>
<td>3</td>
<td>about once or twice a yr</td>
</tr>
<tr>
<td>47</td>
<td>4</td>
<td>several times a yr</td>
</tr>
<tr>
<td>21</td>
<td>5</td>
<td>about once a month</td>
</tr>
<tr>
<td>33</td>
<td>6</td>
<td>two to three times a month</td>
</tr>
<tr>
<td>21</td>
<td>7</td>
<td>nearly every wk</td>
</tr>
<tr>
<td>33</td>
<td>8</td>
<td>every wk</td>
</tr>
<tr>
<td>7</td>
<td>9</td>
<td>several times a wk</td>
</tr>
<tr>
<td>3</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q34a Different religions have different versions of the truth, and each may be equal

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>168</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>88</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>21</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>32</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>3</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q34b There is one religion that is uniquely and comprehensively true.

<table>
<thead>
<tr>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>1</td>
<td>agree strongly</td>
</tr>
<tr>
<td>14</td>
<td>2</td>
<td>agree somewhat</td>
</tr>
<tr>
<td>31</td>
<td>3</td>
<td>disagree somewhat</td>
</tr>
<tr>
<td>232</td>
<td>4</td>
<td>disagree strongly</td>
</tr>
<tr>
<td>5</td>
<td>.</td>
<td></td>
</tr>
</tbody>
</table>

q34c There is no one, true, right religion
**q34d**  I try hard to carry my religious beliefs over into all my other dealings in life

**q34e**  My whole approach to life is based on my religion

**q35**  Hispanic/Latino
292  2  no
3 .

q36  classification of race

<table>
<thead>
<tr>
<th>type:</th>
<th>numeric (byte)</th>
</tr>
</thead>
<tbody>
<tr>
<td>label:</td>
<td>race</td>
</tr>
<tr>
<td>range:</td>
<td>[1,5]</td>
</tr>
<tr>
<td>units:</td>
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</tr>
<tr>
<td>unique values</td>
<td>5</td>
</tr>
<tr>
<td>missing :</td>
<td>13/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>tabulation:</th>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>64</td>
<td>1</td>
<td>asian</td>
</tr>
<tr>
<td></td>
<td>23</td>
<td>2</td>
<td>black or african-american</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>3</td>
<td>american indian or alaskan</td>
</tr>
<tr>
<td></td>
<td>204</td>
<td>4</td>
<td>white or caucasian</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>5</td>
<td>other</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

q36a  type of Asian

<table>
<thead>
<tr>
<th>type:</th>
<th>numeric (byte)</th>
</tr>
</thead>
<tbody>
<tr>
<td>label:</td>
<td>asian</td>
</tr>
<tr>
<td>range:</td>
<td>[1,3]</td>
</tr>
<tr>
<td>units:</td>
<td>1</td>
</tr>
<tr>
<td>unique values</td>
<td>3</td>
</tr>
<tr>
<td>missing :</td>
<td>255/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>tabulation:</th>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>23</td>
<td>1</td>
<td>east asian or pacific islander</td>
</tr>
<tr>
<td></td>
<td>24</td>
<td>2</td>
<td>south asian</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>3</td>
<td>other asian</td>
</tr>
<tr>
<td></td>
<td>255</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

q37  how long you have been in U.S.

<table>
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<tr>
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<th>numeric (byte)</th>
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</thead>
<tbody>
<tr>
<td>label:</td>
<td>immigration</td>
</tr>
<tr>
<td>range:</td>
<td>[1,4]</td>
</tr>
<tr>
<td>units:</td>
<td>1</td>
</tr>
<tr>
<td>unique values</td>
<td>4</td>
</tr>
<tr>
<td>missing :</td>
<td>2/312</td>
</tr>
</tbody>
</table>

<table>
<thead>
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<th>tabulation:</th>
<th>Freq.</th>
<th>Numeric</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>74</td>
<td>1</td>
<td>you immigrated to u.s. as an adult</td>
</tr>
<tr>
<td></td>
<td>22</td>
<td>2</td>
<td>you immigrated to u.s. as a child</td>
</tr>
<tr>
<td></td>
<td>39</td>
<td>3</td>
<td>one/both of parents immigrated to u.s.</td>
</tr>
<tr>
<td></td>
<td>175</td>
<td>4</td>
<td>both parents were born in u.s.</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
q38 aspects of religion that come to mind when you think of religion and psychologic

----------------------

    type: string (str244)
    unique values: 243       missing "": 64/312
    examples: ""
                "Faith."
                "Religion and church attendance can be extremely helpful to some patients. In these I encourage re-connection with their religious community. However, for others, this is not helpful and represents another stress - these issues must be taken wit"
                "The survey confuses spirituality and religion. Spirituality is linked to psychological well being and it may be accessed through religion, but religion is not required."

    warning: variable has leading, embedded, and trailing blanks

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q39 additional comments

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    type: string (str244)
    unique values: 92        missing "": 220/312
    examples: ""
                ""
                ""
                ""
                "For too much emphasis now on biological approaches with reduced training and effort spent in preparing people to assist those they serve with the opportunity for transformation"

    warning: variable has leading, embedded, and trailing blanks