SPIRITUAL COMPETENCY TRAINING IN MENTAL HEALTH

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SRCP



INVESTIGATOR TEAM

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BGSU_® Bowling Green State University



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OUTLINE

WHAT IS SPIRITUAL COMPETENCY AND WHY DO WE NEED IT?

THE SPIRITUAL COMPETENCY TRAINING PROGRAM FOR MENTAL HEALTH (SCT-MH): DESCRIPTION AND KEY FINDINGS

10 TIPS FOR INTEGRATING SPIRITUALITY INTO PSYCHOTHERAPY

SPIRITUAL COMPETENCY RESOURCES





WHAT WOULD YOU DO IF YOUR CLIENT SAID...?

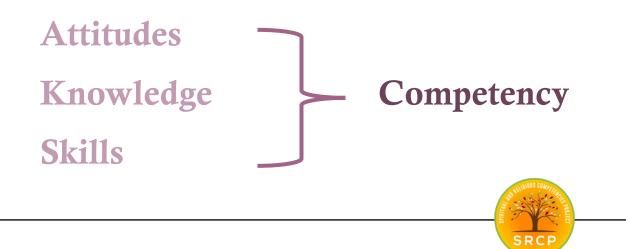


WHAT IS SPIRITUAL COMPETENCY AND WHY DO WE NEED IT?



WHAT IS SPIRITUAL COMPETENCY?

"A form of cultural competence that deals with spirituality and religion, specifically clients' individually constructed spiritual worldviews." (Hodge, 2016, p. 2)



16 SPIRITUAL COMPETENCIES (VIETEN ET AL., 2013)

Attitudes

• Psychologists demonstrate empathy, respect, and appreciation for clients from diverse spiritual, religious, or secular backgrounds and affiliations.

Knowledge

• Psychologists know that many diverse forms of spirituality and/or religion exist, and explore spiritual and/or religious beliefs, communities, and practices that are important to their clients.

Skills

• Psychologists are able to conduct empathic and effective psychotherapy with clients from diverse spiritual and/or religious backgrounds, affiliations, and levels of involvement.

WHY SPIRITUALLY INTEGRATED MENTAL HEALTH CARE IS SO NECESSARY

- Spirituality is a resource to many people
- Many clients want their spirituality to be integrated
- Integrating spirituality can improve clinical outcomes
- Some forms of spirituality can exacerbate mental health problems
- Ethical/professional mandates for multicultural competence, including spirituality

(APA, 2002; Koenig, VanderWeele, & Peteet, 2023; NASW, 2017; Oxhandler et al., 2019; Pargament, 2007; Worthington et al., 2011)

LACK OF GRADUATE TRAINING



Graduate and post-graduate training programs across counseling, marriage and family therapy, psychology, and social work generally do not formally address religion and/or spirituality in coursework or clinical training

(Carlson et al., 2002; Crook et al., 2012; Hage et al., 2006; Moffatt & Oxhandler, 2018; Oxhandler et al., 2015, 2018; Russell & Yarhouse, 2004; Saunders et al., 2014; Schafer et al., 2011; Schulte et al., 2002; Vogel, 2013).



BRIDGING THE TRAINING GAP

- Lack of Graduate and Professional Training
- Current Competency Levels and Engagement

• Practice Realities

Ethical Mandates

THE SPIRITUAL COMPETENCY TRAINING PROGRAM FOR MENTAL HEALTH (SCT-MH)



ONLINE SCT-MH COURSE: MENTAL HEALTH CARE PROVIDERS

- Multidisciplinary
- Basic competency
- Empirically-based content
- Adult-learning instructional methods
- Online format using edX platform
- 8 modules (8-10 hours)

• Evaluated changes in attitudes, knowledge, and skills before and after the SCT-MH program with 169 MH providers (Pearce et al., 2019; 2020)

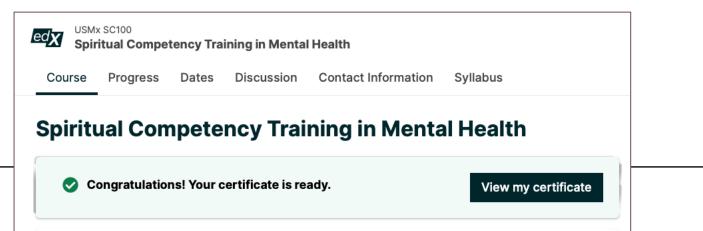


SCT-MH MODULES

- 1. Introduction and Orientation
- 2. Understanding Spirituality
- 3. Guiding Principles
- 4. Helpful and Harmful Types of Spirituality

6. Mobilizing Spiritual Resources
7. Assessing and Addressing Spiritual
Problems
8. Putting It All Together and Future
Directions

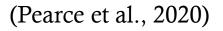
5. Assessing Spirituality



THE PARTICIPANTS

- N = 169
- 83% <u>Female</u>; mean 44 <u>years old</u>
- <u>Race</u>:
 - 69% Caucasian
 - 8% Asian
 - 6% African American
 - 4% Hispanic
 - 3% Other
- <u>Discipline</u>:
 - 36% Psychologists
 - 34% Social Workers
 - 12% Professional Counselors
 - 4% Psychiatrists
 - 3% Chemical Dependency
 - 1% Marriage and Family Therapists

- <u>Average years clinical</u> (SD=10 yrs)
- <u>Religion</u>:
 - 43% Christian
 - 12% None
 - 11% Catholic
 - 8% Other
 - 7% Buddhist
 - 2% Jewish
 - 1% Muslim
 - 1% Native American
- <u>Rating</u>: 15% = "Very religious" vs. 43% = "Very spiritual"
- Training: 89% no prior RS training





RESULTS

	t	p	Pre	Post
Attitude	3.07	.003	6.25	6.41
Knowledge	14.06	<.001	4.81	5.80
Skills	11.28	<.001	4.01	5.00

 Spiritual competencies significantly increased from pre- to post-training on all measures of attitudes, knowledge, and skills.



QUANTITATIVE FEEDBACK

- How **helpful** was this training in preparing you to engage in spiritually integrative psychotherapy?
 - Extremely 37%, Very 53%, Somewhat 10%, Not very 1%
- How **relevant** was this training to your clinical work?
 - Extremely 32%, Very 50%, Somewhat 16%, Not Very 2%

- How **satisfied** were you with this training program?
 - Extremely 39%, Very 50%, Somewhat 10%, Not very 1%
- Would you **recommend** this program to your colleagues?
 - Yes 95% Maybe 5%
- Did you find the online learning format easy to use?
 - Yes 97% No 3%



QUALITATIVE FEEDBACK

"This was very informative. It helped me see that spirituality and <u>religion could be</u> <u>integrated without it being seen as</u> <u>'conversion'</u> or trying to put your viewpoints on others. But rather, using where they are already coming from as a source of healing and understanding." "This training has definitely <u>increased</u> <u>my comfort level</u> in integrating spirituality and religion more often with the clients that I see. In addition, it has <u>increased</u> <u>my therapeutic confidence</u> in knowing where to go when this presents as a piece of a client's identity and/or a piece of the presenting concern."



WHY WAIT?





JTF Study: 2021-2024 (\$5.3 million)

SRCP OVERVIEW

Sub-Project 1 Objective: Strengthen graduate education via enhancement, implementation, evaluation, and dissemination of standardized modular components in R/S training into existing courses

Sub-Project 3 Objective: Understand status of R/S training in graduate education via large-scale needs assessment survey of views, behaviors, experiences, supports, and barriers of core training faculty

Long Term Goal:

Every mental health clinician in the U.S. will possess basic competencies to address religious and spiritual dimension of

clients' lives.

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Sub-Project 2 Objective:

Promote research and clinical training in religious/spiritual competencies via development of empirically supported assessment tools and training methods

Sub-Project 4 Objective:

Overcome systemic barriers to integration of religious/spiritual competencies in mental health professions via coordinated set of systems-level change activities

www.spiritualandreligiouscompetenciesproject.com

SPIRITUAL COMPETENCY TRAINING IN MENTAL HEALTH (SCT-MH) WITH GRADUATE STUDENTS

OUR CHALLENGE:

To significantly improve graduate students' basic awareness, knowledge, and skills for attending to peoples' spirituality or faith

HOW?

By enhancing and integrating the standardized SCT-MH curriculum into one of their required clinical courses



HYBRID SCT-MH CURRICULUM

SRC

1. Online SCT-MH course

• Added video case critiques and clinical practice applications

2. In-class activities

- 6 Class discussions (30 minutes each)
- 2 Role plays (90 minutes each)
- All materials provided in Instructor Guidebook, with detailed weekly outline



METHODOLOGY

Recruitment and Training:

- Recruited faculty from 20 accredited programs from psychology, social work, and counseling
- Train in teaching SCT-MH
 Replaced 15% of content of a required clinical course with the hybrid SCT-MH curriculum (e.g., Practicum, Diversity)

Implementation:

- Taught enhanced SCT-MH (case critiques, application) Spring 2023
- Faculty were facilitators and not experts
- Flipped classroom approach
- Instructor guidebook with with weekly outline and classroom exercises (e.g., role-plays, guided discussions)

Evaluation:

- Waitlist control-design: No R/S material in Weeks 1-6; SCT-MH curriculum in Weeks 7-12
- Assessments at Baseline, Pre/Week 6, and Post/Week 12
- N = 309 student participants; 88% response rate, 87% retention rate



HYPOTHESES

- *Hypothesis 1:* Scores on validated measures of <u>attitudes</u>, knowledge, and skills (i.e., competencies) related to R/S will increase from pre- to post-training; no reliable changes will be observed during the 6-week waitlist control period.
- *Hypothesis 2:* The SCT-MH integrated curriculum approach will be a feasible, helpful, and <u>relevant</u> way to deliver training on spiritual/religious competencies in mental health graduate coursework



MEASURES

Religious/Spiritually Integrated Practice Assessment Scale (Oxhandler et al., 2016)

- Attitudes
- Skills (self-efficacy and current behaviors)

Spiritual Competency Questionnaire (Pearce et al., 2020)

- Attitudes (3 items)
- Skills (7 items)
- Subjective knowledge (6 items)

Religious and Spiritual Knowledge Questionnaire

 Objective knowledge—3 parallel forms (23 items)

Final Case Study Grade

• 15% of final course grade; rubrics for standardized grading

Process Assessment Data

• Satisfaction, helpfulness, relevance, intention to use, etc.

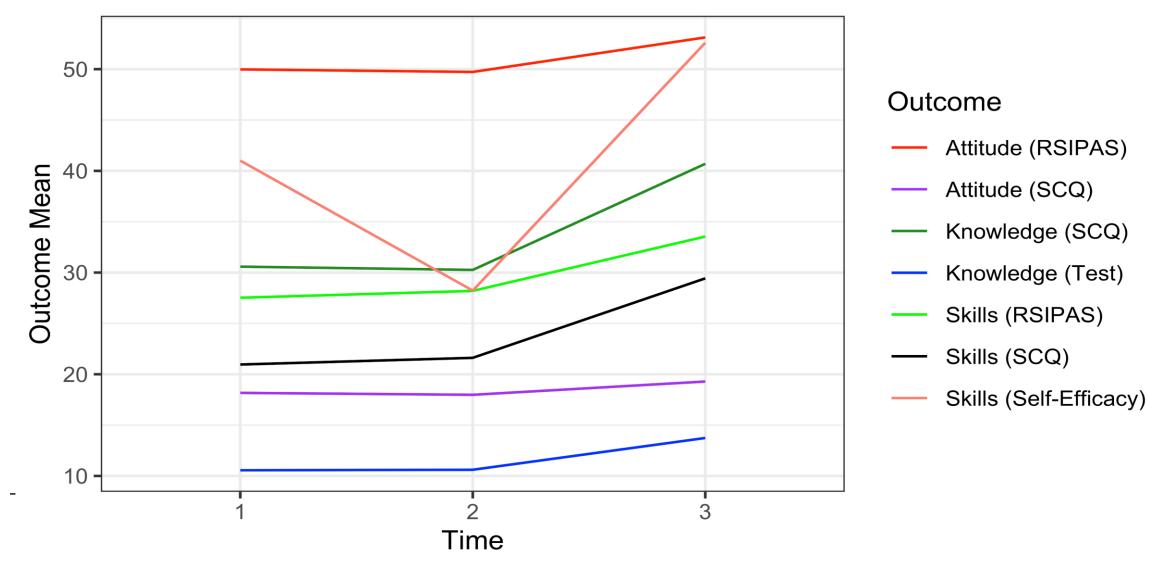


STUDENT PARTICIPANTS

- N = 309
- 85% <u>Female</u>; mean 30 <u>years old (SD = 8)</u>
- <u>Race</u>:
 - 60% Caucasian
 - 18% Hispanic
 - 10% African American
 - 6% Asian
 - 6% Other
- <u>Discipline</u>:
 - 43% Counseling
 - 31% Social Work
 - 26% Psychology

- <u>Religion</u>:
 - 33% Christian (Christian, Nondenominational, & Orthodox)
 - 28% None
 - 13% Catholic
 - 10% Other
 - 3% Buddhist
 - 6% Jewish
 - 1% Muslim
- <u>Rating</u>: 8% = "Very religious" vs. 26% = "Very spiritual"
- <u>Training</u>: 46% no prior R/S competence training

Statistical Results



HYPOTHESIS 1: CHANGES IN R/S COMPETENCE

<u>Attitudes</u>	<u>Knowledge</u>	<u>Skills</u>
 ✓ RSIPAS subscale (attitudes) +3.43, p <.001 ✓ SCQ subscale (attitudes) +1.22, p < .001 	 ✓Knowledge Questionnaire +3.22, p < .001 ✓SCQ subscale (knowledge) +10.51, p < .001 	 ✓ RSIPAS subscale (self-efficacy) +12.07, p <.001 ✓ RSIPAS subscale (skills) +6.44, p <.001 ✓ SCQ subscale (skills) +9.00, p <.001

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HYPOTHESIS 2: PARTICIPANTS' PREFERENCES AND FEEDBACK

- <u>Feedback</u>: Largely very positive for content and hybrid format
 - 93% "extremely" to "somewhat" helpful
 - 92% "extremely" to "somewhat" relevant
 - 96% "extremely" to "somewhat" satisfied with training materials
 - 97% "very often" to "some of the time" envision using spiritually integrated therapy techniques with my clients



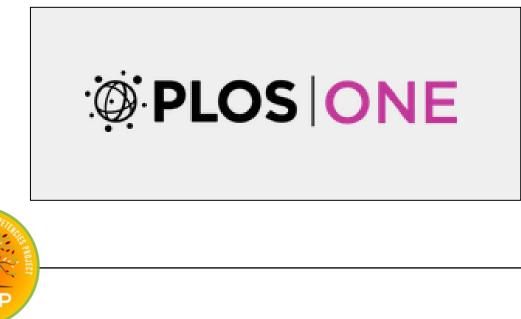
QUALITATIVE FEEDBACK

- "I was surprised that this <u>opened my mind</u>, <u>because I really hate religion</u> more than most things in life. But honestly, everyone has a right to their beliefs and to be an ethical social worker, <u>I need to be okay talking with my clients</u> about their religion."
- "Before taking this training I would never explore the topic around spirituality or religion with clients. After taking this training, although there is a lot more training and practice and learning I need to do, I can say that I feel comfortable enough being able to bring up this topic to clients and learn to integrate it as effectively as I can to help their treatment plan goals have a higher success outcome."



REFERENCE

Pearce, M. J., Pargament, K. I., Wong, S., Hinkel, H., Salcone, S., Morgan, G., Kemp, D., Brock, B., Kim, E., Oxhandler, H. K., Vieten, C., Fox, J., Polson, C., & Currier, J. M. (2024). Enhancing training in spiritual and religious competencies in mental health graduate education: Evaluation of an integrated curricular approach. *PLOS ONE*.



(Thank you to Dr. Kenneth Pargament)



• Tip 1: Take a deep breath.





• Tip 2: Be self-aware.





SRO

• **Tip 3:** Give yourself permission to raise R/S issues in psychotherapy.



• **Tip 4:** Remember that R/S issues should be integrated into rather than set apart from psychotherapy.





• **Tip 5:** Remember you are discussing sacred matters with your clients.





• **Tip 6:** Tailor R/S resources to clients' specific needs, preferences, and problems.





• **Tip 7:** Remind clients that it takes time to reap the benefits from R/S resources.





• **Tip 8:** Be ready to address barriers to integrating R/S resources in psychotherapy.





• **Tip 9:** Work within your own professional and personal boundaries.



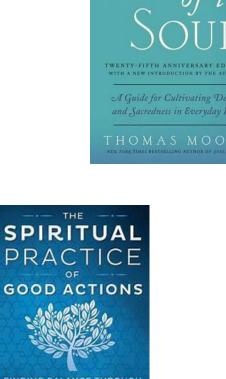


• **Tip 10:** Have additional R/S resources on-hand for clients interested in learning more.

Learn How To Meditate



Audio Book



FINDING BALANCE THROUGH THE SOUL TRAITS OF MUSSAR "The Spither Analysis of Spither Andrew Spither Spither Analysis of Spither Andrew Spither Andrew Analysis of the Spither Spither Andrew Andrew Andrew Analysis of the Spither Spither Andrew Analysis of the Spither Spither Andrew Analysis of the Spither Andrew Andrew Analysis of the Spithe

GREG MARCUS PhD



SPIRITUAL COMPETENCY RESOURCES

For Providers: Online EdX Training Program in Spiritual Competency

- <u>https://www.edx.org/course/spiritual-competency-training-in-mental-health</u>
- 6 CE credits (\$89)

For Educators and Graduate Students

- All curriculum materials are freely available on website:
 - <u>https://www.spiritualandreligiouscompetenciesproject.com/resources/sct-mh</u>
 - (Online edX SCT-MH course, instructor guidebook, sample syllabus, role play worksheets, discussion questions)



SPIRITUAL COMPETENCY RESOURCES

Study Publications:

- Pearce, MJ, Pargament, KI, Oxhandler, H., Vieten, C., & Wong, S. (2019). A novel training program for mental health providers in spiritual competencies. *Spirituality in Clinical Practice.* Online first DOI: 10.1037/scp0000195
- Pearce, MJ, Pargament, KI, Oxhandler, H., Vieten, C., Wong, S., & Hahn, J. (2020) Online Training Program Improves Providers' Spiritual Competencies in Mental Health Care. *Spirituality in Clinical Practice*, 7(3), 145–161. https://doi.org/10.1037/scp0000208.
- Pearce, M. J., Pargament, K. I., Wong, S., Hinkel, H., Salcone, S., Morgan, G., Kemp, D., Brock, B., Kim, E., Oxhandler, H. K., Vieten, C., Fox, J., Polson, C., & Currier, J. M. (2024). Enhancing training in spiritual and religious competencies in mental health graduate education: Evaluation of an integrated curricular approach. *PLOS ONE*.
- Salcone, S., Currier, J., Hinkel, H.M., Pearce, M., Wong, S., & Pargament, K., (2023). Evaluation of spiritual competency training in mental health (SCT-MH) a replication study with mental health professionals. *Professional Psychology: Research* and Practice.



THANK YOU!



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