

Competent Spiritual Assessment

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NEW ORLEANS
BAPTIST THEOLOGICAL SEMINARY

ANSWERING GOD'S CALL

Objectives

1. Participants will examine professional ethical standards governing the practice of Spiritual Assessment.
2. Participants will evaluate techniques and models for performing Spiritual Assessments with a range of populations and presenting problems.
3. Participants will consider the implications of Spiritual Assessment for goal setting and treatment planning.



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Professional Counseling ethics require competent Spiritual Assessment.



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Ethical Codes and Professional Standards that address Spiritual Assessment:

- ACA Code of Ethics (2014) and ASERVIC Competencies (2014).
- JACHO (2020); *Spiritual Assessment required since 2001.*
- NASW (2017)

ACA Code of Ethics Preamble

The American Counseling Association (ACA) is an educational, scientific, and professional organization whose members work in a variety of settings and serve in multiple capacities. Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.

Professional values are an important way of living out an ethical commitment. The following are core professional values of the counseling profession:

1. enhancing human development throughout the life span;

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3. promoting social justice;
4. safeguarding the integrity of the counselor–client relationship; and
5. practicing in a competent and ethical manner.



ASERVIC Competencies

Association for Spiritual, Ethical, and Religious Values in Counseling

Preamble

The Competencies for Addressing Spiritual and Religious Issues in Counseling are guidelines that complement, not supersede, the values and standards espoused in the ACA Code of Ethics. Consistent with the ACA Code of Ethics (2014), the purpose of the ASERVIC Competencies is to “recognize diversity and embrace a cross-cultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts” (p. 3). These Competencies are intended to be used in conjunction with counseling approaches that are evidence-based and that align with best practices in counseling.



Culture and Worldview

1. The professional counselor can describe the similarities and differences between spirituality and religion, including the basic beliefs of various spiritual systems, major world religions, agnosticism, and atheism.
2. The professional counselor recognizes that the client's beliefs (or absence of beliefs) about spirituality and/or religion are central to his or her worldview and can influence psychosocial functioning.



Counselor Self-Awareness

3. The professional counselor actively explores his or her own attitudes, beliefs, and values about spirituality and/or religion.
4. The professional counselor continuously evaluates the influence of his or her own spiritual and/or religious beliefs and values on the client and the counseling process.
5. The professional counselor can identify the limits of his or her understanding of the client's spiritual and/or religious perspective and is acquainted with religious and spiritual resources, including leaders, who can be avenues for consultation and to whom the counselor can refer.



Human and Spiritual Development

6. The professional counselor can describe and apply various models of spiritual and/or religious development and their relationship to human development.



Communication

7. The professional counselor responds to client communications about spirituality and/or religion with acceptance and sensitivity.
8. The professional counselor uses spiritual and/or religious concepts that are consistent with the client's spiritual and/or religious perspectives and that are acceptable to the client.
9. The professional counselor can recognize spiritual and/or religious themes in client communication and is able to address these with the client when they are therapeutically relevant.

Assessment

10. During the intake and assessment processes, the professional counselor strives to understand a client's spiritual and/or religious perspective by gathering information from the client and/or other sources.



JCAHO SPIRITUAL ASSESSMENT REQUIREMENTS

JCAHO (2001) stipulates that practitioners conduct an initial, brief spiritual assessment with clients in many settings, including hospitals and behavioral health organizations providing addiction services.

The same framework, however, is used in all settings. At a minimum, the brief assessment should include an exploration of three areas:

1. denomination or faith tradition,
2. significant spiritual beliefs, and
3. important spiritual practices.

Hodge, 2006

Competent Spiritual
Assessment requires authentic
spirituality on the part of the
counselor.



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Competent Spiritual Assessment is conducted with sensitivity to specific populations and diagnoses.



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Established techniques for Spiritual Assessment.



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Brief Assessment Model that Conforms to the JCAHO's Spiritual Assessment Recommendations

1. I was wondering if spirituality or religion is important to you?
2. Are there certain spiritual beliefs and practices that you find particularly helpful in dealing with problems?
3. I was also wondering if you attend a church or some other type of spiritual community?
4. Are there any spiritual needs or concerns I can help you with?

Hodge, 2004



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HOPE method of taking a spiritual history.

H addresses the person's basic spiritual resources, such as sources of *Hope*, without immediately focusing on religion or spirituality.

O focuses on the importance of *Organized religion* in patients' lives.

P focuses on the specific aspects of their *personal* spirituality and *personal* religious *practices*. If patients relate meaningful experiences at this point, then the interviewer can proceed with more specific questions regarding religion and personal spirituality. If not, then one can ask open-ended follow-up questions to open the door for patients to discuss important spiritual concerns they may have.

E focuses on the *Effects* of a patient's spiritual and religious beliefs on medical care and end-of-life issues. These questions help re-direct the discussion back onto clinical issues and medical-decision-making.

Anandarajah & Hight, 2001

FICA tool

F—Faith, Belief, Meaning

I—Importance and Influence of religious and spiritual beliefs and practices to the individual

C—Community or Church connections

A—Address/Action in the context of medical care

Borneman, Ferrell & Puchalski, 2010



FAITH tool

F—Do you have a Faith or religion that is important to you?

A—How do your beliefs Apply to your health?

I—Are you Involved in a church or faith community?

T—How do your spiritual views affect your views about Treatment

H—How can I Help you with any spiritual concerns?

King, 2002



Incorporating Spiritual Assessment in treatment planning.



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Diagnosis and Treatment (ASERVIC)

11. When making a diagnosis, the professional counselor recognizes that the client's spiritual and/or religious perspectives can a) enhance well-being; b) contribute to client problems; and/or c) exacerbate symptoms.

12. The professional counselor sets goals with the client that are consistent with the client's spiritual and/or religious perspectives.

13. The professional counselor is able to a) modify therapeutic techniques to include a client's spiritual and/or religious perspectives, and b) utilize spiritual and/or religious practices as techniques when appropriate and acceptable to a client's viewpoint.

14. The professional counselor can therapeutically apply theory and current research supporting the inclusion of a client's spiritual and/or religious perspectives and practices.



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