Ethics and Social & Cultural Diversity with Religion

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Learning Objectives

1 Select from 5 moral decision-making models

2 Utilize two experiential activities with participant's personal values and identifiers

3 Identify variations and guidelines of social & cultural diversity identifiers for NBCC, APA, AAMFT, NASW, ACA

4 Evaluate 3 considerations and 3 goals of inclusion, diversity, and equity for ethical dilemmas

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1

Select From 5 Moral Decision-Making Models

Decision-Making Considerations

Many associations state therapists will use and document, as appropriate, a credible ethical decision-making model.

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Ethical Decision-Making

Most dilemmas are not right vs. wrong, but right vs. right dilemmas.
- Autonomy – It is right to control the direction of one's life.
- Beneficence – It is right to work for the good of others.
- Nonmaleficence – It is right to prevent harm.

Kidder, 1995; American Psychological Association, 2017; American Counseling Association, 2014

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Ethical Decision-Making

- Fidelity – It is right to honor commitments and to disclose limitations.
- Integrity – It is right to promote accuracy, honesty, and truthfulness.
- Justice – It is right for all to treat others with equality and fairness.

Kidder, 1995; American Psychological Association, 2017; American Counseling Association, 2014

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Moral Paradigms

Truth vs. Loyalty
Duty to paying parents vs. Duty to minor patient

Individual vs. Community
Patient needs vs. Family needs

Confidentiality and Mandated Reporting

Short-Term vs. Long-Term Goals
Work demands vs. Family demands

Justice vs. Mercy
Respect for autonomy vs. Respect for others

Kidder, 1995; Forester-Miller, 2016

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5 Moral Decision-Making Models

Moral Decision-Making Models

1. Standards-Based Model

Rules, laws, and policies provide the best basis for

determining action

Steps:

Determine dilemma

Ethical standards

Reason to deviate

Decide on course of action

Barrett, 2013

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Moral Decision-Making Models

2. Principles-Based Model

Clarify
- Determine dilemma
- Key ethical principles and values involved

Evaluate
- Any ethical principles violated?
- Facts vs. beliefs, theories, opinions
- Credibility of sources
- Weigh benefits, burdens, and risks

Decide
- Evaluate alternatives and determine consequences
- Prioritize ethical principles/values

Consider worst case scenario and apply principles
- Implement
- Maximize benefits and minimize costs and risks
- Monitor and modify

Barrett, 2013

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Moral Decision-Making Models

3. Virtues-Based Model

   Dispositions and habits allow us to act to the highest potential of our characters and on behalf of our values

   What kind of person will I become if I do this?

   Use virtues in considering options

   Make decisions

Barrett, 2013

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Moral Decision-Making Models

4. Moral Reasoning Model

    Recognize moral issue

    Make a judgment

    Establish intent

        Individual and situational variables

        Factors of opportunity and significant others

Moral Intensity (effect of decision on others):

    Concentration of effect (individual or group)

    Probability of effect (likelihood of harm)

    Proximity (closeness to the issue)

    Social consensus (agreement with society)

    Temporal immediacy (closeness in time)

    Magnitude of consequence (impact)

Act

Barrett, 2013

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Moral Decision-Making Models

5. Practice-Based Integrated Model
       Recognize there is a dilemma
       Determine the actor(s)
       Gather the relevant facts
       Test for right vs. wrong issues
       Test for right vs. right paradigms
       Determine resolution principles involved
              Ends-based
              Rule-based
              Justice or fairness-based
              Care-based
              Virtue-based

Barrett, 2013

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Moral Decision-Making Models

5. Practice-Based Integrated Model (continued)
>>> Investigate possibilities for action
>>> Consult
>>> Weigh benefits and burdens
>>> Consider additional dilemmas
>>> Make the decision
>>> Formulate a justification for the decision
>>>> List reasons and arguments
>>>> Recognize shortcomings
>>> Anticipate objections
>>>> Recognize limitations in perspective
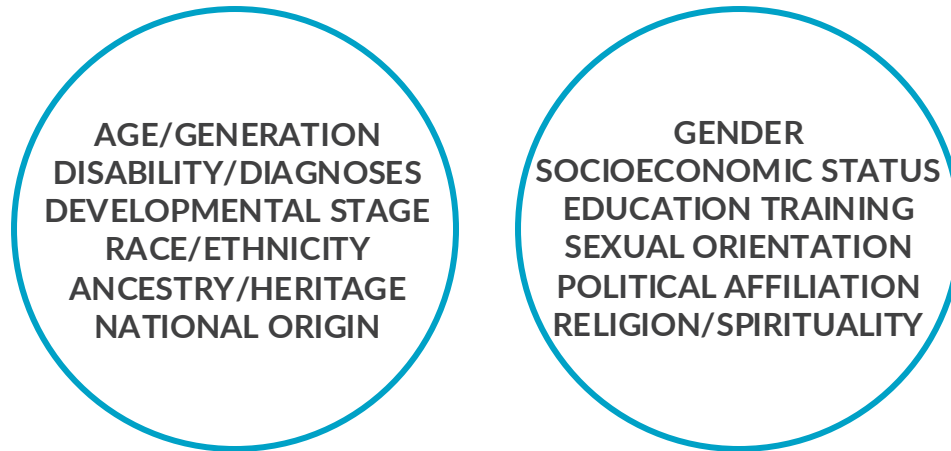>>> Document
>>> Review and reflect on decision

Barrett, 2013

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Was there a model you identified
using in the past or present?

_____

Are you considering wanting to use a
different model in the future?

2

Utilize two experiential activities with participant's personal values and identifiers

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Lenses Activity

**AGE/GENERATION
DISABILITY/DIAGNOSES
DEVELOPMENTAL STAGE
RACE/ETHNICITY
ANCESTRY/HERITAGE
NATIONAL ORIGIN**

**GENDER
SOCIOECONOMIC STATUS
EDUCATION TRAINING
SEXUAL ORIENTATION
POLITICAL AFFILIATION
RELIGION/SPIRITUALITY**

1. Draw two circles side-by-side that are not touching. Within these circles, list your various values and identifiers. Suggestions are provided below; you may also add identities that feel significant to your life (ex: college athlete, southerner, etc.).

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Lenses Activity, cont.

Upon filling in the circles, connect the circles in the middle to form the bridge of your "lenses." Next, add an arm on the outside of each circle to complete the frames.

Every interaction we have, every perception we make, and every decision we choose are all colored by our "lenses" or worldview. Each individual looks through their own unique set of lenses based on their beliefs, values, identities, backgrounds, contexts, and experiences.

While we can never fully take off these figurative lenses, we can be aware of their existence in ourselves and in others.

- How might your lenses influence how you perceive the world around you?
- What feelings come up as you reflect on the fact that everyone who interacts with you views you through their own set of lenses?
- Knowing these figurative lenses exist, how can we use this knowledge to help us most effectively work with others?

Adapted from Cameron Houin (2018)

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Cultural Wheel Activity
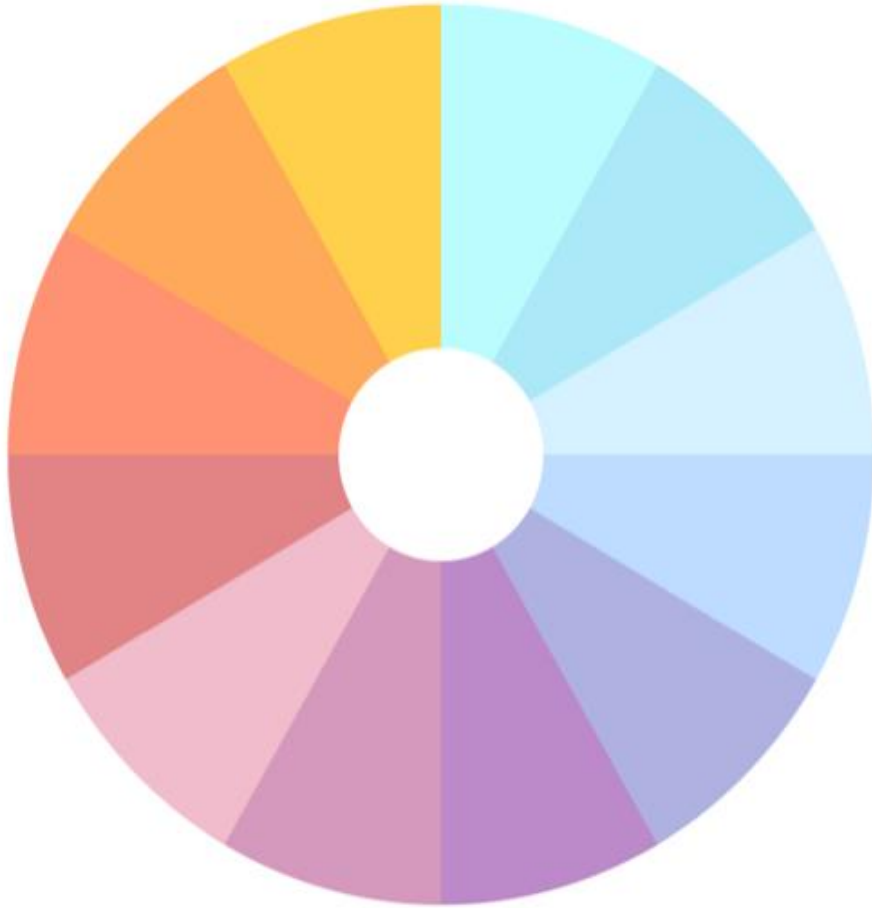
Cultural Wheel Activity

Each individual has values, identifiers, and groups that have shaped them throughout life.

- Consider and create a list of at least 10 values that describe you and impact your decision-making.
- Identify, reflect, and create a list of at least 5 social and cultural diversity identifiers that describe you: age, race, ethnicity, gender, learning disabilities, intelligence, gender identity, sex, sexual orientation, religious affiliation.
- Identify and create a list of at least 10 social groups: relationships and family roles, hobbies, groups you are a part of including school, church, work, professional associations, and any others that come to mind.
- Fill the spaces on the wheel with the most important and meaningful items. Reflect to determine which ones have the strongest effect on how you see yourself as a person.

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Cultural Wheel Activity, cont.

1. Which of the items you listed on the wheel reflect choice?
2. Did you focus more on values, diversity, or social groups? Why?
3. Have these changed over time? Which ones? Why?
4. Are there reasons for identifiers you did not include (privilege or oppression)?
5. How could the identifiers you chose impact your work with supervisees?
6. What will it be like to work with supervisees who share some of your identifiers?
7. What will it be like to work with supervisees who don't share some of your identifiers?

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References for Guidelines

American Association of Marriage and Family Therapists. (2015). *AAMFT Code of ethics*. American Association of Marriage and Family Therapists. https://txwes.edu/media/school-of-health-professions/graduate-counseling-/program-forms-/AAMFT-Code-of-Ethics.pdf

American Counseling Association. (2014). *ACA 2014 Code of ethics*. https://www.counseling.org/resources/aca-code-of-ethics.pdf

American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct*. American Psychological Association. https://www.apa.org/ethics/code

National Association of Social Workers. (2021). *Code of Ethics*. https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English

National Board for Certified Counselors. (2023). *NBCC Code of Ethics*. https://www.nbcc.org/assets/ethics/nbcccodeofethics.pdf

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2015 AAMFT Aspirational Core Values

1

Acceptance, appreciation, and inclusion of a diverse ==membership==

2

Distinctiveness and excellence in training of marriage and family therapists and those desiring to advance their skills, knowledge and expertise in systemic and relational therapies

3

Responsiveness and excellence in service to members

4

Diversity, equity, an excellence ==in clinical practice, research, education and administration==

5

Integrity evidenced by a high threshold of ethical and honest behavior within Association governance and by members

6

Innovation and the advancement of knowledge of systemic and relational therapies

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2017 APA General Principles

Principle A: Beneficence and Nonmaleficence
Psychologists strive to benefit those with whom they work and take care to do no harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.

Principle B: Fidelity and Responsibility
Psychologists establish relationships of trust with those with whom they work.

Principle C: Integrity
Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology.

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2017 APA General Principles

Principle D: Justice
Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists.

Principle E: Respect for People's Rights and Dignity
Psychologists respect the ==dignity and worth of all people,== and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that ==special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerability impair autonomous decision making.== Psychologists are ==aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status==, and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they ==do not knowingly participate in or condone activities of others based upon such prejudices.==

2023 NBCC Core Values

- Counselors will be civil in their actions and word, avoiding arrogance, assumptions, and hubris. Counselors seek to listen to others with intention and respond with respect. When engage in challenging dialogues, counselors do so to seek answers – not confrontations or harm. Counselors strive to be ==sensitive to differences in attitudes and culture.== Counselors ==always seek to minimize undue harm and take particular care of those who are vulnerable or in anguish.== With respect to all clients and work, counselors ==seek to be mindful of their humanity as they fulfill their counseling duties.==

- Counselors strive to enhance the social and mental well-being of their clients while supporting the overall physical health of each client. Counselors must engage in self-care and self-reflection.

- Access and equity are essential to the profession of counseling and fundamentally important for the success of any society. Counseling services should be provided to achieve the best mental health outcomes. Counselors provide services to all of those in need, utilizing available resources and advocating for the expansion of resources in underserved communities.

- Certified counselors and candidates demonstrate their commitment to ethical behaviors by demonstrating, and representing to their clients, ==sensitivity to multicultural issues, avoiding discrimination, oppression, and/or any form of social injustice.==

2021 NASW Values

Service
Social workers' primary goal is to help people in need and to address social problems

Social Justice
Social workers challenge social injustice.
Social workers pursue social change, particularly with and on behalf of vulnerable and oppressed individuals and groups of people. Social workers' social change efforts are focused primarily on issues of poverty, unemployment, discrimination, and other forms of social injustice. These activities seek to promote sensitivity to and knowledge about oppression and cultural and ethnic diversity.

Dignity and Worth of the Person
Social workers respect the inherent dignity and worth of the person
Social workers treat each person in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity.

Importance of Human Relationships
Social workers recognize the central importance of human relationships.

Integrity
Social workers behave in a trustworthy manner.

Competence
Social workers practice within their areas of competence and develop and enhance their professional expertise.

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2014 ACA Core Professional Values

1
Enhancing human development throughout the life span

2
Honoring diversity and embracing a multicultural approach ==in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts==

3
Promoting social justice

4
Safeguarding the integrity of the counselor-client relationship

5
Practicing in a competent and ethical manner

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Explanation of Discrimination

1.1 Nondiscrimination   AAMFT
Marriage and family therapists provide professional assistance without discrimination on the basis of ==age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, sexual orientation, gender identity or relationship status.==

3.01 Unfair Discrimination   APA
In their work-related activities, psychologists do not engage in unfair discrimination based on ==age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status==, or any basis proscribed by law.

NBCC
   7. Counselors shall demonstrate multicultural counseling competence in practice. Counselor will not use counseling techniques or engage in any professional activities that discriminate against or show hostility toward individuals or groups based on ==gender, ethnicity, race, national origin, sex, sexual orientation, disability, religion,== or any other legally prohibited basis.

   14. Counselors shall not engage in unlawful discrimination.

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Discrimination, cont.

4.02 Discrimination NASW
Social workers should not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical ability.

C.5. Nondiscrimination   ACA
Counselors do not condone or engage in discrimination against prospective or current clients, students, employees, supervisees, or research participants based on age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law.

Relationships

1.3 Multiple Relationships   AAMFT
Therapists, therefore, make every effort to avoid the conditions and multiple relationship with clients that could impair professional judgment or increase the risk of exploitation. Such relationship include, but are not limited to, business or close personal relationship with a client or the client's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists document the appropriate precautions taken.

3.05 Multiple Relationships   APA
A multiple relationship occurs when a psychologist is in a professional role with a. person and 1)at the same time is in another role with the same person, 2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or 3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A.6.b. Extending Counseling Boundaries ACA
Counselors consider the risks and benefits of extending current counseling relationships beyond conventional parameters.... In extending these boundaries, counselors take appropriate professional precautions such as informed consent, consultation, supervision, and documentation to ensure the judgement is not impaired and no harm occurs.

Relationships, cont.

NBCC

22. Counselors shall be mindful of engaging in counseling relationship with those individuals with whom another relationship, such as a community connection, friendship, or work relationship exists (i.e., multiple relationships). Counselors strive to avoid multiple relationship with clients, to the extent possible, except in cases when it is ==culturally appropriate== or therapeutically relevant. In the event that a multiple relationship develops in an unforeseen manner, the counselor shall discuss the potential effects with the client, and shall take reasonable steps to resolve the situation, including termination and the provision of referrals. This discussion shall be documented in the client's record.

1.06 Conflicts of Interest   NASW

b) Social workers should not take unfair advantage of any professional relationship or exploit others to further their ==personal, religious, political, or business interests==.

c) social workers should not engage in dual or multiple relationship with clients or former clients in which there is a risk of exploitation or potential harm to the client. In instances when dual or multiple relationship are unavoidable, social workers should take steps to protect clients and responsible for setting clear, appropriate, and ==culturally sensitive boundaries.==

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Competency

3.1 Maintenance of Competency   AAMFT
Marriage and family therapists pursue knowledge of new developments and maintain their competence in marriage and family therapy through education, training, and/or supervised experience.

3.10 Scope of Competence   AAMFT
Marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competences.

2.01 Boundaries of Competence APA
Psychologists provide services, teach, and conduct research with populations and in areas only with the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.

Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or economic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation or supervision necessary to ensure the competence of their service, or they make appropriate referrals, except as provided in the Standard of Providing Services in Emergencies.

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Competency, cont.

2.03 Maintaining competence APA
Psychologists undertake ongoing efforts to develop and maintain their competence.

1.04 Cultural Competence   NASW
a) Social workers should demonstrate ==understanding of culture== and its function in human behavior and society, recognizing the strengths that exist in all cultures.

b) Social workers should demonstrate knowledge that guides practice with clients of various cultures and be able to demonstrate skills in the provision of ==culturally informed services== that empower marginalized individual and groups. ==Social workers must take action against oppression, racism, discrimination, and inequities, and acknowledge personal privilege.==

c) Social workers should demonstrate awareness and ==cultural humility== by engaging in critical self-reflection (understanding their own bias and engaging in self-correction), recognizing clients as experts of their own culture, committing to lifelong learning, and holding institutions accountable for advancing cultural humility.

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Competency, cont.

d) Social workers should obtain education about and demonstrate understanding of the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, and mental or physical ability.

C.2.a. Boundaries of Competence   ACA
Counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Whereas multicultural counseling competency is required across all counseling specialties, counselors gain knowledge, personal awareness, sensitivity, dispositions, and skills pertinent to being a culturally competent counselor in working with a diverse client population.

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Values

Client Autonomy
1.8 Client Autonomy in Decision-Making AAMFT
Respect the rights of clients to make decisions and help them to understand the consequences of those decisions. Therapists clearly advise clients that clients have the responsibility to make decisions regarding relationships such as cohabitation, marriage, divorce, separation, reconciliation, custody, and visitation.

NBCC

17. Counselors shall take proactive measures to ==avoid harming their clients and avoid imposing personal values== on those who receive their professional services. Counselors will seek to minimize unavoidable or unanticipated harm, and where possible seek to address unintentional harm.

A.4.b. Personal Values   ACA
Counselors are aware of ==and avoid imposing their own values, attitudes, beliefs, and behaviors==. Counselors respect the diversity of clients, trainees, and research participants and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor's values are inconsistent with the client's goals or are discriminatory in nature.

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Counselor Education

NBCC
90. Counselor educators will practice cultural responsiveness in their teaching, and respect the ==cultural identity, values, sexual orientation, and gender identity==, of their students.

Responsibilities to Colleagues   NASW
Respect
2.10 Respect
b) Social workers should avoid unwarranted negative criticism of colleagues in verbal, written, and electronic communication with clients or with other professionals. Unwarranted negative criticism may include demeaning comments that refer to colleagues' level of competence or to individuals' attributes such as ==race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, and mental or physical ability==.

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Counselor Education, cont.

6.04 Social and Political Action   NASW
c) Social workers should promote conditions that encourage respect for cultural and social diversity within the United States and globally. Social workers should promote policies and practices that demonstrate respect for difference, support the expansion of cultural knowledge and resources, advocate for program and institutions that demonstrate cultural competence, and promote policies that safeguard the rights of and confirm equity and social justice for all people.

D) Social workers should act to prevent and eliminate domination of, exploitation of, and discrimination against any person, group, or class on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical ability.

Counselor Education, cont.

Termination   ACA
A.11.b. Values Within Termination and Referral
Counselors refrain from referring prospective and current clients based solely on the counselor's personally held values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor's values are inconsistent with the client's goals or are discriminatory in nature.

Supervision
F.2.b. Multicultural Issues/Diversity in Supervision   ACA
Counseling supervisors are aware of and address the role of multiculturalism/diversity in the supervisory relationship.

F.11.a Faculty Diversity   ACA
Counselor educators are committed to recruiting and retaining a diverse faculty.

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Counselor Education, cont.

F.11.b. Student Diversity   ACA
Counselor educators actively attempt to recruit and retain a diverse student body. Counselor educators demonstrate commitment to ==multicultural/diversity competence by recognizing and valuing the diverse cultures== and types of abilities that students bring to the training experience. Counselor educators provide appropriate accommodations that enhance and support diverse student well-being and academic performance.

F.11.c. Multicultural/Diversity Competence   ACA
Counselor educators actively ==infuse multicultural/diversity competency== in their training and supervision practices. They actively train students to gain awareness, knowledge, and skills in the competencies of multicultural practice.

Multicultural Orientation:
3 Pillars

1

2

3

Cultural
Humility

Cultural
Comfort

Cultural
Opportunities

Wilcox et. al., 2022.

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Cultural Humility

Way of "being" focused on interpersonal and relational process in both therapy and supervision

Interpersonal stances that are other-oriented in relation to aspects of cultural identity that are most important to the [person].

Wilcox et. al., 2022; Winkeljohn
Black et. al, 2024

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Cultural Humility, cont.

Cultural humility focuses on developing a strong therapeutic bond through a greater appreciation of what cultural values and beliefs add to the healing process.

Therapist understands:
- own cultural values and worldview
- cultural background and experiences underneath values
- multiple cultural lenses through which individuals and groups view the world

Fit within the scope of client's cultural lens

Mosher, et. al., 2017

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Cultural Humility, cont.

4 Parts of Cultural Humility:

Self-examination and self-awareness
Therapeutic alliance
Repairing cultural ruptures
Navigating value difference

5 Components of Cultural Humility:

Openness
Self-awareness
Being egoless
Supportive interaction
Self-reflection

4 Key Ingredients Cultural Humility:

Accurate sense of self
Receiving feedback mindfully
Accurate empathy
Openness or curiosity toward others

Mosher, et. al., 2017;
Foronda et. al., 2016;
Winkeljohn Black et. al, 2024

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Cultural Comfort

Engage in cultural conversations with internal ease, comfort, confidence and attunement to discomfort

Ease and lack of distress in having conversation about culture and identity

Wilcox et. al., 2022; Winkeljohn Black et. al, 2024

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Cultural Opportunities

Identify, create, or take advantage of cultural opportunities

Recognize and act on cultural markers in discussion or create opportunities to discuss salient cultural themes

Wilcox et. al., 2022; Winkeljohn Black et. al, 2024

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Research on Cultural Humility

Varied Research on Cultural Humility
Higher cultural humility
Higher sociocultural awareness
Lowered cultural concealment

Negative cultural humility did not impact therapy outcome
Working alliance and therapy had a positive impact on therapy outcome
Positive cultural humility was associated with worse therapy outcome

Chong et. al., 2024; Coleman et. al., 2024

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In your state, what identifiers are considered cultural and social diversity?

Including, but not limited to:

Religion
Gender
Sexual orientation
Ethnicity
Ability difference
Race

Texas:

Gender identity
Language
National origin
Culture
Socioeconomic status
Age

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What are 3 considerations of inclusion, diversity, and equity for ethical dilemmas?

Personal values and biases

Client or guardian's values and biases

Child's values and biases

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What are 3 goals for cultural & social diversity?

First Goal: Become and remain aware of our own cultural backgrounds, influences, and biases

Second Goal: Acquire and continuously seek knowledge about how cultural backgrounds, influences and biases operate in the lives of our clients/audience

Third Goal: Demonstrate awareness and appreciation of how diversity impacts clients/therapists/students/audience needs, case conceptualization, clinical treatment and perspectives.

Association for Play Therapy, 2022

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First Goal: Awareness
Ethical Bracketing

First goal: Become and remain aware of our own cultural backgrounds, influences, and biases

Definition of Bracketing:
"intentional separating of a counselor's personal... or professional values... to provide appropriate counseling to all clients, especially those whose worldviews, values, belief systems and decisions differ significantly from those of the counselor."

American Counseling Association, 2005; Jones & Washington, 2021

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Awareness: Personal Values-Based Conflict Model

1. Determine nature of values-based conflict
   a. cultural, religious, moral, beliefs, life experience, countertransference
2. Explore core issues/potential barriers to providing appropriate standard of care
   a. perspectives, biases, or barriers
3. Seek assistance/strengthening to provide appropriate standard of care
   a. colleagues, supervisors, code of ethics, publications, research
4. Determine/evaluate possible courses of action
   a. set aside beliefs, values, further knowledge, or refer with an action plan
5. Ensure that proposed actions promote client welfare

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Awareness: Professional Values-Based Conflict Model

1. Determine nature of conflict
   a. Confirm conflict is from professional issue
2. Explore core issues and potential professional barriers
   a. countertransference, lack of expertise, training, or competence
3. Seek assistance/strengthening measures
   a. CE, code of ethics, professional action plan, training/skills building
4. Evaluate possible courses of action
   a. Is referral necessary or ethical?, Clarify rationale for referral, Will plan eliminate need for future referrals?
5. Does action plan ensure client well-being lessons learned?

Kocet & Herlihy, 2014; Jones & Washington, 2021

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Second Goal: Knowledge
3 Assessment Levels

Second goal: Acquire and continuously seek knowledge about how cultural backgrounds, influences and biases operate in the lives of our clients/audience

Three Assessment Levels:
  Demographic – descriptive, know what people do
      - screening with yes/no questions
  Cultural – patterns, styles, philosophies of living
      - open-ended questions, How often do you?
  Universal – intrinsic character quality of individual

Piedmont & Wilkins, 2013; Piedmont & Wilkins, 2020; Currier et. al., 2023

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Knowledge: Ecological Systems Approach

Become and remain aware of our own cultural backgrounds, influences, and biases

Four Levels:
Individual Level:
Theme 1: Identify processes
Theme 2: Emotions/coping

Family Level:
Theme 3: General family experiences
Theme 4: Family support

Katz-Wise et. al., 2022

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Knowledge: Ecological Systems Approach

Community Level:
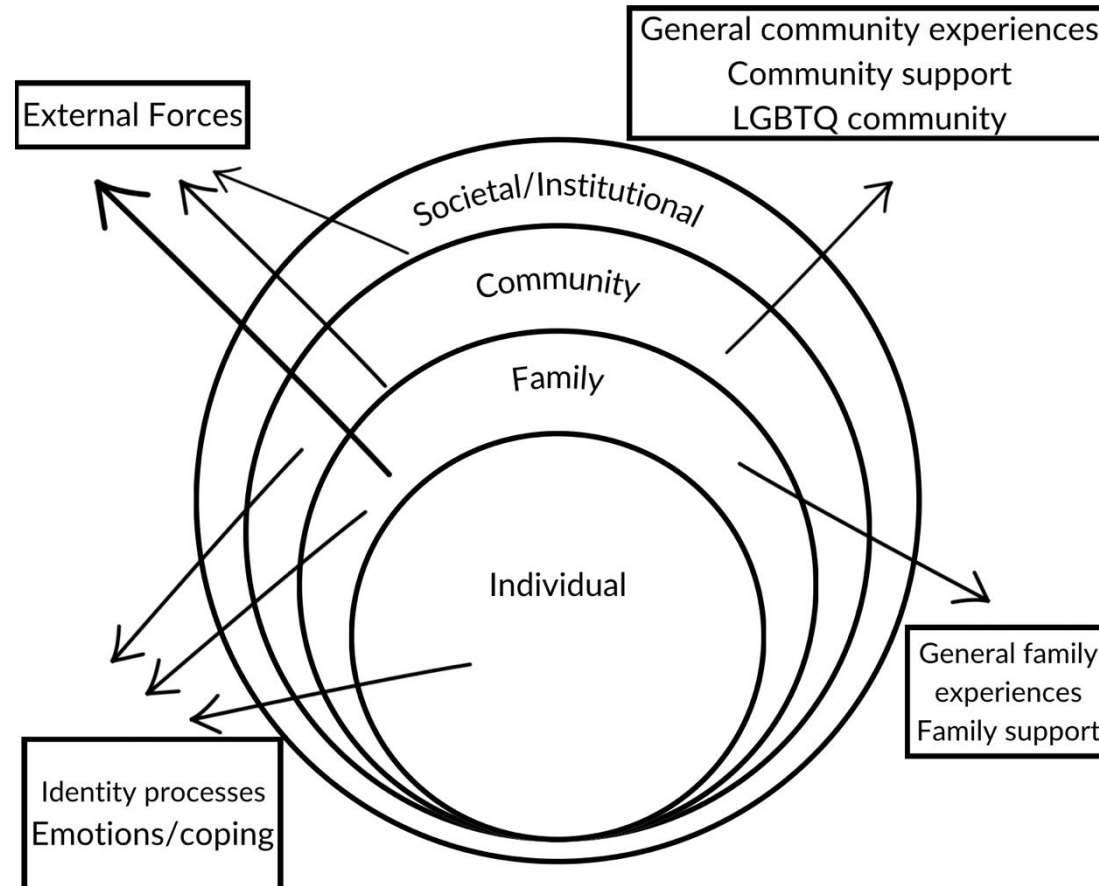Theme 5: General community experiences
Theme 6: Community support
Theme 7: Common community

Societal/Institutional Level:
Theme 8: External forces
- Impact of finances
- Impact of insurance
- Impact of politics
- Impact of religion
- Impact of school

Katz-Wise et. al., 2022

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Knowledge: Ecological Systems Approach

Katz-Wise et. al., 2022

Knowledge: Training and Models

Online Spiritual Competency Training in Mental Health to target and evaluate the achievement of spiritual 16 competencies including Attitudes, Knowledge, and Skills

Pearce et. al., 2020; University of Baltimore and University System of Maryland

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Knowledge: Competencies

Competencies (written for Religion/Spirituality)

- Demonstrating empathy, respect, and appreciation: Attitude
- Appreciating diversity: Attitude
- Being aware of your own beliefs: Attitude
- Understanding as different but overlapping: Knowledge
- Difference between spirituality and psychopathology: Knowledge
- Recognizing development over lifespan: Knowledge
- Learn about clients' resources: Knowledge
- Recognize harmful involvement: Knowledge

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Knowledge: Competencies, cont.

Competencies Continued..

- Being aware of legal and ethical issues: Knowledge
- Working with diversity: Skill
- Conducting assessment: Skill
- Helping clients identify/access resources: Skill
- Helping clients identify and deal with problems: Skill
- Staying up to date: Skill
- Acknowledging limits: Skill

Pearce et. al., 2020; University of Baltimore and University System of Maryland; Vieten et. al., 2016

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Knowledge: FICA

F

Faith & Belief

"Do you have spiritual beliefs that help you cope with difficult times?" YES/NO
"What gives your life meaning?"

C

Community

"Is there a group of people you really love or who are important to you?"

I
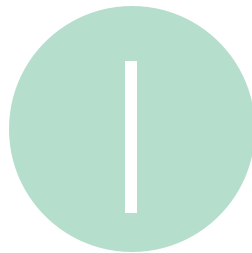
Importance

"What importance does (your) spirituality play in your life?"

A

Address in Care

"How would you like me to address these issues in session?"

Borneman et. al., 2010

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What brings you peace?

Validated single question spiritual inventory designed to use the "concept of peacefulness as a gateway to larger discussions, framed according to patients' values, preferences, and life experiences"

Steinhauser et. al., 2006

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Assessing Religious Beliefs

1. What's motivating you?

2. What are you committed to?

3. How committed to that are you?

4. What keeps you up at night?

5. What are you grateful for?

6. What is this costing you?

7. What question are you afraid to ask?

8. Have you ever asked yourself, "why am I here"?

9. Do you know your purpose?

10. Describe your earliest spiritual or religious memory.

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Assessing Religious Beliefs

11. Describe the person you viewed as a spiritual or religious mentor growing up.

12. Describe how your family addressed spiritual/religious issues in your home.

13. Describe how you interacted with spiritual/religious issues outside of your home.

14. Describe where and how you find meaning or purpose in life.

15. Describe the most important or influential spiritual or religious moment in your life to date.

16. Describe how you developed your spirituality over your life span.

17. When today did I have the deepest sense of connection with God, others, and myself?

18. When today did I have the least sense of connection.

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Live Values Inventory Handout

Brown & Crace, 1996

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Knowledge: Ethical Decision-Making Model

- Define the problem, dilemma, and sub-issues
- Identify the relevant issues
- Review/consult the law, ethics, codes, and institutional policy
- Be alert to personal influences
- Obtain outside perspective
- Enumerate options and consequences
- Decide and take action
- Document decision-making and follow up

Wheeler & Bartram, 2015;
Carnes-Holt et. al., 2016

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Knowledge: SEESAW Decision-Making Model

See and identify the problem
- Any somatic reactions or difficulty remaining objective?

Explore ethical principles

Evaluate for personal biases
- Any countertransference or biases?

Seek assistance and guidance
- Who is in your support system?

Assess and evaluate all courses of action
- Weigh advantages and disadvantages

Work a plan that prioritizes the client

Warnecke et. al., 2021

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Knowledge: Multi-Perspectival Decision-Making Model

1. Recognizing a problem
2. Defining the problem
3. Determining potential courses of action
4. Choosing a course of action
5. Reviewing Process
6. Implementation and evaluation
7. Continuing reflection

4 Levels
Intrapersonal (within)
Interpersonal (between individuals)
Group as a whole
Supra-group (societal norms and values)

Cottone, 2001; Goodrich & Shin, 2013; Letourneau, 2016

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Knowledge: Multi-Perspectival Decision-Making Model, cont.
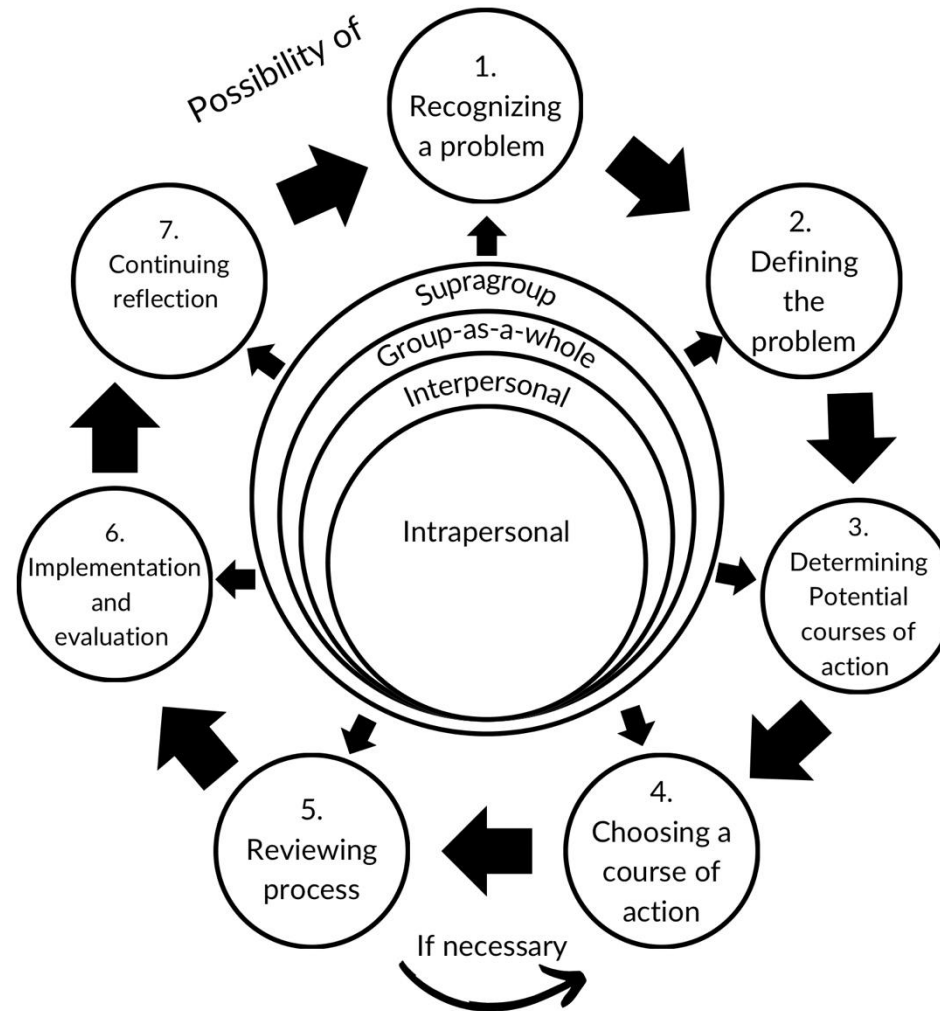
Third Goal: Appreciation Perspective

Third Goal: Demonstrate awareness and appreciation of how diversity impacts clients/therapists/students/audience needs, case conceptualization, clinical treatment and perspectives.

Therapist religion/spiritual beliefs:
1. Self-care and sustaining in helping role
2. Deepen sense of connection and compassion toward clients
3. Commitment to profession through spiritual lens

Duggal & Sriram, 2022; Newmeyer et. al., 2016; Coaston, 2017

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THANK YOU!

Any Questions?

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