

Developing Evidence-based Spiritual Care

Kelsey White^[1] and George Fitchett^[2]

Editors' Note: The PHRS Bulletin regularly features articles on the teaching of religion, spirituality, and public health. Healthcare chaplaincy is one of the many primarily clinically oriented professions that is allied with public health and has overlapping concerns. This article profiles a training program for health care chaplains that was offered in the School of Public Health at University of Illinois, Chicago.

Developing Evidence-based Spiritual Care: Some Background

For several decades chaplains have recognized the importance of research for better understanding and improving their work (Fitchett, 2002; Gleason, 2004; VandeCreek, 1988, 1992; Weaver et al., 2008). Specifically, research helps chaplains evaluate and improve their clinical care (O'Connor and Meakes, 1998). Additionally, it helps chaplains describe their work and its impact to healthcare colleagues who look to research to guide decisions (Handzo et al., 2014). Professional chaplaincy organizations have emphasized chaplains' abilities to demonstrate the integration of research within clinical care and prioritize evidence-based practices, regardless of setting, by including research literacy and collaboration among their core Standards of Practice (Association of Professional Chaplains, Standards of Practice for Professional Chaplains). More recently, demonstrating basic research literacy was added to the competencies required for chaplaincy Board Certification (Association for Professional Chaplains, BCCI Certification).

Despite these initiatives, for the most part healthcare chaplains remained primarily consumers of the growing research about religion and health and rarely contributors to it. A fundamental reason for this was that almost no chaplains had training in research. To address challenges posed by new needs and requirements for research capacity, one of the present authors (GF) and his colleagues launched the Transforming Chaplaincy project with funding

from the John Templeton Foundation and, as you will see described below, created multiple avenues to expand research and research literacy within chaplaincy. To date, the Transforming Chaplaincy project has published a book to guide research literacy education, launched a resource website, guided research literacy efforts within chaplaincy education programs, and supported 17 Fellows through public health degrees. In the following sections we sketch the history of the Transforming Chaplaincy project, its ongoing impact on professional chaplaincy and chaplaincy research, and describe implications for the field of public health.

The Transforming Chaplaincy Project

The Transforming Chaplaincy project began in 2015 with grants from the John Templeton Foundation, and additional support from several professional chaplaincy organizations in the US. It was co-led by George Fitchett (Rush University Medical Center), who had trained in chaplaincy and epidemiology, and Wendy Cadge (Brandeis University), a sociologist of religion with an interest in chaplaincy (Cadge, 2013).

The central component of the initial phase of the Transforming Chaplaincy project was Research Fellowships that supported 17 board-certified chaplains to receive a master's degree from an accredited school of public health. The Fellows completed these degrees at schools of public health across the country, but they all completed a course titled Religion, Spirituality and Health: A Critical Examination, taught remotely through the

University of Illinois SPH. The course, described in a chapter in Doug Oman's book, *Why Religion and Spirituality Matter for Public Health*, provided an introduction to the literature about religion, spirituality and health (Lyndes, et al., 2018). Course activities included critical reading and presentations of published research and presentations by leading researchers in the field. The course challenged the Fellows to examine the mechanisms linking religion, spirituality, and health and provided a foundation for their future research.

Additional Accomplishments of Transforming Chaplaincy 2015-2019 (Initial Phase)

In addition to the 17 Fellows, the initial phase of the project also supported a number of initiatives to expand research capacity among chaplains throughout the US and around the world. We provided research literacy curriculum development grants to 68 Clinical Pastoral Education residency programs, approximately one-third of the chaplaincy training programs in the U.S. With grant support, these programs provided research literacy education to over 850 chaplains in training plus 100 staff colleagues. In July 2018, we published *Evidence-Based Healthcare Chaplaincy: A Research Reader* (Fitchett, White & Lyndes, 2018), a book featuring 21 important chaplaincy research articles and currently in use as a text in chaplaincy research education around the world.

Additionally, we created an eight-week on-line introductory course to research for practicing chaplains. Of the 98 chaplains who have completed the course, many report that the course sessions helped them to understand and apply research findings to their clinical context. We also developed an experiential week-long Chaplain Research Summer Institute (CRSI) for practicing



Transforming Chaplaincy Fellows at 2019 capstone meeting

chaplains, with a total of 90 chaplains participating from 2017 through 2019.

Chaplains' increased engagement with research has moved beyond educational opportunities. They have also eagerly taken advantage of online resources and expanded collaboration efforts. In November 2017, the project launched a chaplaincy research and research education website (transformchaplaincy.org). The site became the go-to space for chaplains and others to learn about research literacy and research design, to network and find research collaborators, and to build resources for the teaching of research and research literacy. In 2020, the website welcomed 12,864 new users and garnered 45,571 page views. In addition to the website, we maintain an active social media presence as well as a monthly email newsletter with more than 2,000 subscribers. Our Twitter account makes, on average, 3,797 impressions per month, with over 570 followers (@TransformChap1). These efforts help ensure that Transforming Chaplaincy reaches people at all points in their chaplaincy career, transforming how the profession communicates its role, and energizing those exploring their entry into the field.

Ensuring a stable foundation for professional spiritual care also requires financial support that can initiate long-term viability and fund vital research. Building on the initial project activities, we secured \$1.07M in support for additional initiatives, including a grant from the Luce Foundation to study the academic and clinical components of chaplaincy education (see Cadge et

al., 2019, 2020; Clevenger et al., 2020). In addition we completed a project supported by the Carpenter Foundation and others to study healthcare executives' understanding and evaluation of their spiritual care programs. Reports from this project are currently under review. The need for research within chaplaincy goes beyond understanding the individual implications of spiritual care and requires that researchers engage in dialogue with healthcare administrators to ensure system-wide inclusion.

Transforming Chaplaincy Research Fellows – Results

By the end of the initial phase in 2019 the Transforming Chaplaincy project had supported 17 Chaplain Research Fellows who completed a Master of Public Health or related degrees (see photo). These degrees were earned at a number of different schools including University of Michigan, University of Minnesota, University of Illinois, Emory University, University of South Carolina, Virginia Commonwealth University, and University of Louisville. As of the end of the fellowship program (June 2019), the Fellows were authors or co-authors of nearly 30 articles or book chapters (see below). Petra Wahnefreid Sprik, one of the Fellows, received 3rd prize in the 2018 Spirituality & Public Health Student Essay Contest (Oman & Long, 2019). The Fellows also made over 100 presentations, including three at international meetings.

As of Fall 2020, four of the Fellows are in PhD programs, and of these, two are PhD Candidates. These Fellows, with their schools/departments and areas of research, are as follows:

Kristin Godlin is in the Community Health program at University of Illinois. The focus of Kristin's research is on religious coping with Intimate Partner Violence (IPV). She has examined faith-related variables as predictors of posttraumatic growth in female survivors of IPV. Her dissertation will explore women's conceptualizations of forgiveness and their

relationship to three health outcomes: decisions to stay in abusive relationships, resilience, and well-being.

Geila Rajae is a PhD Candidate in the Department of Health Behavior and Health Education, University of Michigan, School of Public Health. Her research interests include spirituality/religion, chaplaincy, management of chronic disease, and behavioral interventions to improve health outcomes. Geila is particularly interested in preventable chronic diseases (e.g., diabetes) and the role of chaplains in mitigating and managing adverse health outcomes.

Timothy J. Usset is in the Health Services Research, Policy & Administration program in the Health Policy & Management Division, University of Minnesota, School of Public Health. Tim has worked extensively with moral injury, spiritual distress, and posttraumatic stress disorder on numerous research projects and clinical areas within the Veterans Health Administration. In his PhD, Tim plans to expand his focus to examine the impact of moral distress, moral injury, and burnout on healthcare worker well-being and patient health outcomes.

Kelsey White is a PhD Candidate in the Department of Health Management and System Sciences, School of Public Health and Information Sciences, at the University of Louisville. Her studies focus on health services research and organizational theory. Specifically, she is exploring how healthcare delivery systems provide access to professional spiritual care and utilize chaplains.

The other 13 Fellows are working as chaplains or chaplain researchers in major medical centers across the country. Together the Fellows have substantially expanded the number of healthcare chaplains who can advance spiritual care through

research – operating as bridge builders between disciplinary fields. They are also active in teaching research literacy to their chaplaincy colleagues and chaplains in training.

Continuing to Transform Chaplaincy

Transforming Chaplaincy has built on its initial four-year phase and is becoming an on-going center for spiritual care related research and research literacy education for chaplains. Through Rush University Medical Center, we currently offer two on-line research literacy courses for chaplains covering topics of evidence-based spiritual care and research literacy. Recently 50 staff chaplains from a large healthcare system in Texas all completed the first of these courses, and the other course has engaged an international audience with chaplains from Europe and Australia. We plan for the in-person Chaplain Summer Research Institute to resume in the summer of 2022.

The second ongoing focus for Transforming Chaplaincy is supporting chaplains to directly apply their newly enhanced research skills in interdisciplinary and spiritual care research efforts. To accomplish this we developed eight research networks that bring together chaplains, chaplain researchers, and non-chaplain researchers who share an interest in a common area. Among the areas addressed by the networks are spiritual care in hospice and palliative care, spiritual care in cancer care, including out-patient care, and spiritual care for people who have experienced trauma.. We are also building new initiatives around spiritual care in the Covid-19 pandemic and examination of racial differences in spiritual care. We are eager to have non-chaplain clinical and research colleagues participate in the networks. More information about the networks and how to join them is available at the Transforming Chaplaincy website.

Seeking Partners

Finding funding for research about spiritual care is at least as challenging as finding funding for

research about religion, spirituality and health. For Transforming Chaplaincy, a key strategy for advancing this research is to develop partnerships with interested research colleagues and organizations. We have begun to build partnerships with clinicians and researchers in some areas such as palliative care. We are eager to expand these partnerships and networks and would welcome hearing from readers of the *Bulletin* who would like to know more about our work or to explore potential collaborations. To stay informed about our work we invite you view our website where you may also sign up for our monthly Transforming Chaplaincy newsletter (www.transformchaplaincy.org/).

Chaplaincy Research in the 21st Century

Enhanced research on chaplaincy holds promise for fostering improved integration of chaplaincy with other professions and activities within healthcare systems, and enhancing systemic functioning and patient outcomes in ways that have long been recognized as vital by public health. The utilization of research within healthcare chaplaincy will continue to evolve as chaplains, at all stages of their careers, expand their research literacy and integrate in research communities. We hope that these efforts not only provide a strong evidence-base for spiritual care, but that we also begin to see chaplains assume a more prominent role within public health education and community public health efforts. Future research must expand beyond examining the importance of religion and spirituality for health, and examine chaplaincy care within public health services, such as preventative screening, and chaplaincy care at the organizational level. For example, such research may explore how chaplaincy care influences utilization of preventive health services, adherence to medical treatments, or advance into health economic evaluation to document the cost-benefit or cost-effectiveness of chaplaincy interventions (Oman & Brown, 2018). As chaplaincy research grows so does chaplains' integration and collaboration with public health professionals and with professionals across the spectrum of healthcare delivery.

Transforming Chaplaincy is one example of work that attempts to link a variety of interlocking fields: spiritual care, clinical care, public health, and research. We hope that our efforts embolden others towards initiatives that build cross-disciplinary skill sets that can expand and deepen our shared capacity to care for all aspects of human health and wellbeing, particularly in times of struggle.

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[1][^] Kelsey White, MSc, MDiv, BCC, is a PhD Candidate in the Department of Health Management and System Sciences, School of Public Health and Information Sciences, University of Louisville and a Research Assistant for the Center for Health Organization Transformation at UofL.

[2][^] George Fitchett, DMin, PhD, BCC, is the Director of the Transforming Chaplaincy project and Professor of Religion, Health and Human Values, Rush University Medical Center (please direct correspondence about this article to him at george_fitchett@rush.edu).