

CPE Resident Didactic: Introduction to Research

Patricia E. Murphy, Ph.D.

George Fitchett, D.Min., Ph.D.

Rationale

For a number of years one of the goals of the Department's research program has been to transform the profession of health care chaplains into "a research-informed profession." That goal is shared by a growing number of colleagues in health care chaplaincy. For example, in 2009 the Association of Professional Chaplains adopted Standards of Practice for Professional Chaplains in Acute Care

(<http://www.professionalchaplains.org/content.asp?admin=Y&pl=198&sl=198&contentid=200>).

One of the Standards is about research.

Standard 12: Research The chaplain practices evidence-based care including ongoing evaluation of new practices and when appropriate, contributes to or conducts research.

Interpretation

Chaplaincy care has for many years been provided based on the concept of "presence" and non-directive active listening, and on the chaplain's sense that their offerings are effective (sometimes based on direct feedback from families, patients or staff). However, other health care disciplines, over the past 10 years, reviewed their practices and have begun to base their practice on research evidence. Increasingly, chaplains have been asked to demonstrate that they, too, practice out of a research base, and explicitly make a contribution to health care. Chaplaincy care is amenable to research in many ways; its practitioners should be sufficiently familiar with existing evidence to present it to their health care colleagues from other disciplines, read and reflect on new research's potential to change their practice and be willing and able to integrate that which is better for patients, families, or staff. In some cases, where the chaplain has sufficient skills and support, this will also mean participating in, or creating, research efforts to improve clinical chaplaincy care.

Since the residency year is most often used as preparation for a career in health care chaplaincy, we believe graduates of our residency program should be informed consumers of research. That is, they should be able to find research that is relevant to their ministry, read and understand such relevant studies, and be able to describe the implications of the studies for their ministry.

Description

In this seminar, the residents will learn basic concepts about research by reviewing research articles whose findings are relevant for health care ministry. The aim of the seminar is to help chaplain residents integrate findings from research into their ministry without sacrificing essential values such as empathic presence. The seminar will also include a brief introduction to the ethics of research. The overall aim of the seminar is not to turn chaplains into researchers, but to help chaplains become informed research consumers.

Seminar Goals

As a result this seminar, residents will:

1. Develop informed and critical understanding of research in order to apply results thoughtfully to evidence based practice.
 - a. Be able to read and understand a simple research paper;
 - b. Be able to describe the implications of a study for their pastoral ministry;
2. Become familiar with research that shows the negative physical and emotional effects of religious struggle and its implications for pastoral ministry.

Seminar Format

The format for most of the sessions will have the residents working in teams (2-3 residents) to present a summary of a research paper to the other seminar participants. That summary will include a description of how the research is relevant for healthcare chaplaincy. The residents will use the standard research summary form to guide their summary of the research they present.

Syllabus

Seminar 1

- A. Introduction: Some Chaplains' Approach to Research
- B. PubMed

Readings:

1. The Following are included in Chapter 1 of *Handbook: An Invitation to Chaplaincy Research: Entering the Process*. Eds Myers, G. E. & Roberts S., (2104) Accessed on line December 1, 2014.
http://www.healthcarechaplaincy.org/docs/publications/templeton_research/hcc_research_handbook_final.pdf
King, S. D. Chaplains' journey: Why do chaplains decide to do research?, pp. 1-7
Iler W. Chaplains' journey: Why do chaplains decide to do research?, pp. 8- 11
Dimmers, M. Step by Step: My baby steps in learning about research chaplaincy, pp. 12-15.

Seminar 2

- A. Introduction to Research for Chaplains: A Spirituality for Research-Literate Chaplains, George presentation
location TBD
- B. Using PubMed to locate research relevant for your spiritual care

Readings:

1. Jankowski KR, Handzo GF, Flannelly KJ (2011). Testing the efficacy of chaplaincy care. *Journal of Health Care Chaplaincy*, 17, 100-125. (If you only read one article, make it this one!!)
2. Flannelly KJ, Jankowski KRB, Tannenbaum HP (2011). Keys to knowledge: searching and reviewing the literature relevant to chaplaincy. *Chaplaincy Today* 27(1):10-15.

Seminar 3

- A. Presentation and Discussion of Qualitative Research by Team 1
- B. Introduction to Research Study Designs (Pat presentation)

Readings:

1. Ragsdale, J. R., Hegner, M. A., Mueller, M., Davies, S. (2014) Identifying religious and/or spiritual perspectives of adolescents and young adults receiving blood and marrow transplants: A prospective qualitative study. *Biology of Blood and Marrow Transplantation*, 20, 1238-1257.
2. Bockrath, M. F., & Pargament, K. I. Chapter 5: Choosing research methodologies. (2014). *Handbook: An Invitation to Chaplaincy Research: Entering the Process*. Eds Myers, G. E. & Roberts S. pp. 51-67.
3. Summerfeldt, T. & Villines, D, (2104). Chapter 6: In pursuit of the truth: Statistical tools. (2014). *Handbook: An Invitation to Chaplaincy Research: Entering the Process*. Eds Myers, G. E. & Roberts S. pp. 51-67
4. Flannelly, L. T., Flannelly, K. J., & Jankowski, K. R. B. (2014). Fundamentals of measurement in health care research. *Journal of Health Care Chaplaincy*, 20:2, 75-82, DOI: 10.1080/08854726.2014.906262
5. Flannelly, K. J., Jankowski, K. R. B., & Flannelly, L. T. (2014). Operational definitions in research on religion and health. *Journal of Health Care Chaplaincy*, 20:2, 83-91, DOI: 0.1080/08854726.2014.909278

Seminar 4

- A Discussion of Winkelman et al.: Team 2:
- B. Discussion of Iler et al.: Team 3:

Readings:

1. Winkelman WD, Lauderdale K, Balboni MJ, Phelps AC, Peteet JR, Block SD, Kachnic LA, VanderWeele TJ, Balboni TA. The relationship of spiritual concerns to the quality of life of advanced cancer patients: preliminary findings. *J Palliat Med*. 2011 Sep;14(9):1022-8.
2. William L. Iler, Don Obershain, Mary Camac (2001). The Impact of Daily Visits from Chaplains on Patients with Chronic Obstructive Pulmonary Disease (COPD): A Pilot Study. *Chaplaincy Today*, 17(1):5-11.

Seminar 5

1. Introduction to the Ethics of Research
2. Team A article report (paper selected and presented by residents)

Readings:

1. Ethical Issues in Clinical Research, Chapter 3 in LG Portney and MP Watkins, *Foundations of Clinical Research: Applications to Practice*, Third Edition (Upper Saddle River, NJ: Pearson Education, Inc., 2009), pp. 47-59.

Seminar 6

- A. A Review of Research about Chaplaincy (George presentation)
- B. Team B article report (paper selected and presented by residents)

Reading:

Fitchett, George and Grosseohme, Daniel (2012). Health care chaplaincy as a research-informed profession. In S. B. Roberts (Ed.) *Professional Spiritual & Pastoral Care*. Woodstock Vermont: Skylight Paths Publishing, pp. 387-406.

Seminar 7

- A. Presentation and Discussion of Research
 - Papers selected and presented by residents, Team C and Team D

Seminar 8

- A. Presentation and Discussion of Research
 - Papers selected and presented by residents, Team E and Team F
- B. Evaluation of the seminar