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An Evidence-Based, Cross-Sector Competency Framework for Chaplaincy: A Model for Competency-Based Education with Complex Professions

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Professional chaplaincy is a complex, relational field practiced across diverse institutional contexts, and it remains fragmented in its competency standards, hindering coherent educational and certification models. This study develops and validates a unified, cross-sector competency framework grounded in Competency-Based Education (CBE) principles. Employing a multi-phase design research process, the authors synthesized over a dozen frameworks through a "human-in-the-loop" AI-assisted normalization procedure. The result yielded 36 standardized competencies across six domains, each defined by Observable Performance Indicators. A cross-sector survey of 353 chaplains assessed the importance, frequency of use, and educational preparation for each competency, revealing substantial gaps. The resulting framework, the Center for Chaplaincy Studies (CCS) Competencies, provides theological educators and certifying bodies with a replicable, evidence-based tool for curricular alignment and demonstrates how CBE methodologies can be extended to other fragmented, high-complexity professions.

Keywords: chaplaincy competencies, evidence-based practice, professional standards, competency-based education, pastoral care, spiritual care, cross-sector analysis

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Competency-Based Education (CBE) aims to align education with professional practice by focusing on the demonstrated mastery of specific skills rather than on time spent in a curriculum. The CBE field faces a profound challenge: how do we apply structured competency frameworks to professions built on relationships, nuance, and context? This challenge is particularly pronounced in fields like chaplaincy, where competencies shift across diverse settings and hospital chaplains function quite differently from their military or corporate counterparts. This professional diversity, combined with the absence of unified competency standards, creates an ideal laboratory for developing robust CBE models.

Consequently, the necessity for a coherent educational model in this field is particularly acute. The landscape of chaplain formation remains uneven. For many, graduate theological education is the sole formal preparation for this demanding and diverse work, while some pursue additional clinical training through Clinical Pastoral Education (CPE). Competency-Based Education represents a promising path forward, but it remains unexplored territory for most theological institutions.

However, this landscape is beginning to change. The Association of Theological Schools (ATS), the primary accrediting body, has initiated a major shift in its standards. The ATS Commission on Accrediting has moved from a purely "inputs-based" model of assessment to an "outcomes-based" one, a change designed to allow for "greater flexibility and innovation" in program design (Gin et al., 2025). This change signals a pivotal moment of potential transformation for the entire field of theological education.

Chaplaincy is not unique in its lack of unified standards; as Batt et al. (2021) observe, healthcare professions more broadly have faced unclear guidance in developing competency frameworks, leading to variable methods and inconsistent reporting. Our study addresses this challenge through a systematic, evidence-based process, an approach that mirrors that of Tackett et al. (2023), who recently tackled a similar issue in the field of Health Research Ethics (HRE). They successfully developed a comprehensive competency framework through a stakeholder-driven, mixed-methods process that began by defining the HRE system, systematically engaging experts to brainstorm and sort concepts, and validating the resulting framework with international stakeholders. This multi-phase approach, which combines expert synthesis with empirical validation, provides a methodological precedent for developing evidence-based standards in complex, relational fields such as chaplaincy.

To address these disparities, we designed a two-phase investigation. First, we synthesized the profession's scattered standards into a unified framework of 36 competencies, each anchored by observable performance indicators. We subsequently validated this framework empirically through a cross-sector survey of 353 practicing chaplains to identify which competencies matter most in their daily work and where their education had served them well or left them underprepared. Using a cross-sector survey, we quantified the perceived importance and frequency of use for each competency, allowing us to also measure the self-reported "educational gap" between these professional demands and the preparation chaplains received from their graduate theological education.

We present both the methodology and the results, offering a replicable, data-driven model for CBE implementation that extends beyond chaplaincy to other complex professions. In doing so, it provides a robust empirical response to several key questions outlined in the published research agenda for competency-based education (DeBacker et al., 2024), particularly those related to Conceptualization and Design Research. Specifically, it offers a model for competency design across diverse settings and analyzes how perceptions of educational alignment vary based on clinical training and professional context.

Research Questions

This study offers a timely and essential model for theological schools, responding to the call from their accrediting body (the Association of Theological Schools) to develop the very "new educational models" required to foster "adaptive leadership" in their graduates (Gin et al., 2025). To build this evidence-based roadmap, three central research questions guided our work:

1. How can a unified, evidence-based competency framework be developed from the fragmented, multi-sector standards of professional chaplaincy?
2. To what extent is there an "Educational Gap" between the functional demands of contemporary chaplaincy practice (i.e., competency importance and frequency) and the preparation provided by graduate theological education?
3. How do these functional demands and perceived educational gaps vary across key professional contexts (sector) and levels of experiential training (Clinical Pastoral Education)?

While the first two questions address the development and validation of the framework itself, the third question is essential for understanding its practical implications. This third question investigates two key variables: professional context (sector) and experiential training (CPE). An analysis of the professional sector is necessary to test the framework's core claim that it is both cross-sector and context-specific. Similarly, the analysis of CPE attainment is essential, as CPE is the primary modality for practical and formational training in the profession, functioning as the spiritual care equivalent of a clinical residency, in which students engage in supervised, hands-on practice within institutional settings. Given that the full version of this training happens after completing graduate school, its inclusion as a variable is critical for understanding how clinical immersion serves as a retrospective lens for evaluating the adequacy of graduate theological education.

Existing Competency Frameworks and Theoretical Contributions

Our research began with a systematic analysis of chaplaincy standards published by major certifying bodies and professional organizations. Central to this phase was

the Common Qualifications and Competencies (CQC), a foundational framework developed through an unprecedented collaboration among five organizations: the Association of Professional Chaplains (APC), the Association for Clinical Pastoral Education (ACPE), the National Association of Catholic Chaplains (NACC), Neshama: Association of Jewish Chaplains (NAJC), and the Canadian Association for Spiritual Care/Association *canadienne de soins spirituels* (CASC/ACSS). Together, this group produced a shared set of 32 competencies organized into four categories: Integration of Theory and Practice, Professional Identity and Conduct, Professional Practice Skills, and Organizational Leadership. While unified in this framework, each organization also maintains complementary standards tailored to its own theological and institutional context. In addition to the CQC, we also included competency information from the Spiritual Care Association (SCA), another U.S.-based national organization that credentials chaplains.

Beyond these broad-based frameworks, we examined several influential sector-specific competency guidelines, each reflecting a distinct emphasis. For example, the College of Pastoral Supervision and Psychotherapy (CPSP) emphasizes integrating theological reflection and psychological theory, with particular attention to trauma-informed care and ethical accountability. The UK Board of Healthcare Chaplaincy (UKBHC) focuses on reflective practice, interdisciplinary collaboration, and organizational adaptability within healthcare settings.

Sector-specific frameworks further illustrate the diversity of chaplaincy practice. The National Association of Veterans Affairs Chaplains (NAVAC) and the National Association of Military Chaplains (NAMC) emphasize systems-level leadership, ritual facilitation, and institutional advocacy within military contexts. The Association of Hospice and Palliative Care Chaplains (AHPCC) outlines competencies for end-of-life care and bereavement support, while the American Correctional Chaplains Association (ACCA) addresses the distinctive challenges of providing spiritual care in correctional environments.

To supplement the formal competency frameworks of professional organizations, our analysis incorporated key scholarly and empirical literature to capture the full breadth of contemporary practice. First, we conducted a close, chapter-by-chapter review of Wendy Cadge and Shelly Rambo's edited volume, *Chaplaincy and Spiritual Care in the Twenty-First Century* (2022). The goal was to identify additional, implied competencies embedded in the contributors' discussions of chaplaincy across diverse contexts. For instance, while the volume broadly emphasizes the chaplain's role in facilitating meaning-making, one chapter's attention to navigating spiritual care beyond traditional religious boundaries led us to articulate a more specific competency: translating between sacred and secular discourses. This competency highlights the chaplain's role in bridging diverse worldviews, particularly in pluralistic or non-religious settings.

By drawing on both the explicit claims and the implicit practices described throughout the volume, we expanded and refined our framework to better reflect the nuanced and evolving demands of contemporary chaplaincy. This process allowed us to operationalize key aspects of chaplaincy that had previously remained undefined,

enriching the framework with competencies grounded in lived professional realities.

Second, to ground the framework in the real-world demands of hiring, we examined contemporary empirical research. One particularly influential source was the study conducted by Fleenor et al. (2025) at Rush University Medical Center, which significantly enriched our understanding of chaplaincy competencies from the perspective of hiring professionals. This research was vital because it identified nine key themes prioritized by healthcare chaplaincy hiring managers, emphasizing practical competencies such as interpersonal skills, teamwork, proficiency in spiritual assessment, and knowledge of healthcare systems. The Rush study also highlighted the growing expectation that chaplains engage in evidence-based practices, including competencies like research literacy and outcomes-oriented care. These empirical findings affirmed the need for chaplains to be not only spiritual caregivers but also interdisciplinary professionals, reinforcing the importance of expanding the framework beyond traditional spiritual competencies to address these evolving, evidence-informed demands.

Our selection of these specific sources was intentional, designed to create a 360-degree view of the profession by triangulating its official standards, key scholarly definitions, and current empirical demands. The organizational frameworks (such as the CQC, UKBHC, etc.) were essential as they represent the codified standards used for certification and practice across the field. The Cadge and Rambo volume was included as it is widely considered a major seminal scholarly text on chaplaincy. Finally, the Fleenor et al. (Rush) study was vital for providing a recent, data-driven, empirical perspective from hiring managers on the practical skills they actively prioritize. By integrating professional, academic, and empirical sources, we aimed to build a framework that was not only comprehensive but also uniquely practical and grounded in the field's multiple, overlapping realities. This compilation enabled us to move forward with a systematic analysis, guided by a standardized language structure, to ensure that competencies were compared and validated consistently.

Analysis and Synthesis

The primary investigative team consists of two scholars. Zachary Moon is a Director of Chaplaincy Studies and a scholar of chaplaincy. Callid Keefe-Perry is a scholar of Contextual Education and Public Theology, specializing in practical theology and mixed-methods research. Together, we developed this unified, evidence-informed competency framework through a multi-phase process. We combined our field expertise with AI-assisted analysis and Competency-Based Education (CBE) principles, which allowed us to integrate a wide range of existing standards while producing a coherent, assessable structure aligned with contemporary educational practice.

Our process began with the collection and review of chaplaincy competency frameworks and related scholarly literature. Drawing on field expertise and input from practicing chaplains and educators, we assembled a comprehensive set of sources, prioritizing competencies that appeared across multiple frameworks or were

identified in the literature as foundational. This aggregation resulted in an extensive but unstructured inventory that included both clearly defined competencies and more implicit capacities, such as those related to pluralism or trauma-informed care.

To bring clarity to this diverse material, we undertook an interpretive synthesis that translated the raw data into draft competency statements. This initial list captured a wide array of terms and concepts but revealed significant variation in scope, phrasing, and granularity. For instance, the initial list of competencies ranged from broad, high-level concepts like "Be a team player" and "Professionalism" to discrete, granular skills such as "Read an EKG strip" and "Use XYZ Software." Some items labeled as "competencies" in source materials were, in practice, better understood as specific knowledge, skills, or dispositions. These items functioned as *components* of broader competencies rather than as standalone constructs.

A further complication arises when source frameworks conflate educational inputs with professional outcomes. For example, listing "Theology" or "History" as competencies confuses the subject matter a student studies with the integrated capacity to use that knowledge in practice. Distinguishing these knowledge domains from actual competencies is not merely a semantic exercise; it is a structural necessity for valid assessment. When misclassifying content areas as competencies, educational programs risk simply renaming their existing syllabi without shifting their pedagogy, effectively masking the gap between "knowing about" a subject and "competently functioning" in a professional role.

To resolve these inconsistencies and bring structure to the framework, we adopted the principles of Competency-Based Education (CBE), drawing specifically on the CBE Quality Framework by the Competency-Based Education Network (C-BEN). This framework provided not just a model for clarity and alignment but also a way to differentiate between competencies and their Observable Performance Indicators (OPIs). Using backward design and a commitment to accessibility, we shaped the framework so that each competency included OPIs across knowledge, skill, and disposition domains. This CBE foundation was essential not only for usability in educational settings but also for configuring the logic that guided our next phase of analysis.

With this structured foundation in place, we engaged GPT-4o as a computational tool for semantic normalization to support an iterative gap analysis operated under human supervision. We configured the AI into a custom GPT using a C-BEN-informed logical rule: a competency was defined as a high-level, transferable capability, while Observable Performance Indicators (OPIs) were defined as the specific knowledge, skills, or dispositions that provide evidence of that competency. This logic allowed the AI to distinguish between full competencies and component behaviors, enabling us to reassign misplaced or overly narrow "competencies" from the source material as OPIs under broader, thematically aligned categories. The tool compared our developing framework with the complete archive of source material, flagging any concepts, functions, or capacities that were not yet semantically represented. Consequently, we ensured our process included a "human-in-the-loop"

approach (Wang, 2019), in which the team reviewed each set of flagged items, made refinements or additions to the framework, and then re-ran the analysis.

We repeated this process until we had accounted for all substantive content from the source materials. In addition to surfacing omissions, the AI helped us make clearer distinctions between general domains and specific expressions of practice, ultimately improving the clarity, parsimony, and conceptual alignment of the framework. Our intent is that, though the language may not be identical, readers can find all the previously existing competencies from the source frameworks in some form within the aggregated list.

To address potential concerns about methodological opacity or a "black box" effect associated with AI use, this study employed a deliberately structured, multiphase methodology with human oversight. The AI was not used as an autonomous decision-maker but as a powerful analytical tool within a replicable, human-governed workflow. Every step of the process was guided by specific, detailed prompts, which are available upon request. Crucially, the AI's output at each stage served as a draft for human evaluation, not a final conclusion. It is evidenced by the human spot-checks of the initial data extraction, the iterative nature of the analysis where the researchers implemented and re-verified the AI's findings, and the final, decisive human-led review that refined the language, structure, and content of the resulting framework. This structured interaction ensured that the final 36 competencies were the product of human interpretive authority, with the AI serving to enhance the systematicity and comprehensiveness of the analysis.

After we completed the framework design, we presented it to a group of practicing chaplains for initial peer review. The chaplains had representative experience in military, higher education, and hospital chaplaincy. Through a combination of written feedback and direct consultation, we refined the wording and structure of each competency to better align with professional language and experience. This step functioned as an informal pilot and face validity assessment, helping ensure the framework was intelligible and meaningful across diverse chaplaincy contexts. Although we did not conduct formal cognitive interviews, we used this feedback to begin an internal iterative clarification. This process involved the research team systematically reviewing the feedback, drafting revisions to address noted ambiguities, and then re-evaluating our own revisions against the original comments to enhance the usability of the final list.

The completed framework, designated here as the Center for Chaplaincy Studies (CCS) Competencies, includes 36 competencies organized into six thematic domains of care. These domains reflect the expanding spheres of chaplaincy influence, beginning with the practitioner's own formation, extending through care for individuals, families, and communities, and concluding with competencies related to institutional systems and professional identity. The total of 36 competencies is not presented as a permanent or exhaustive limit; instead, it reflects the structure that organically emerged from our synthesis process. These groupings are meant to aid educational clarity and practical application, while still honoring the integrated, relational nature of chaplaincy work.

Table 1
The Center for Chaplaincy Studies (CCS) Competencies

Domain of Care	Numbering	Competencies
Self	1.1	Adaptive Practices for Self-Care
Self	1.2	Reflective Practice
Self	1.3	Theological and Traditional Self-Understanding
Self	1.4	Engagement in Supervision and Peer Review
Self	1.5	Professional Development
Self	1.6	Ethical Decision-Making and Accountability
Individual	2.1	Empathetic Presence and Cultural Sensitivity
Individuals	2.2	Engaging with Loss and Grief
Individuals	2.3	Addressing Trauma and Moral Distress
Individuals	2.4	Supporting Addiction and Recovery
Individuals	2.5	Crisis Intervention and Response
Individuals	2.6	Spiritual Assessment
Family	3.1	Understanding Family Dynamics in Spiritual Care
Family	3.2	Developmentally Appropriate Spiritual Care
Family	3.3	Supporting Family Communication and Conflict Resolution
Family	3.4	Providing Support for Families During Crisis and Grief
Family	3.5	Supporting Families Impacted by Domestic Violence
Family	3.6	Addressing Family Resilience and Growth in Spiritual Care
Communities	4.1	Group Dynamics and Facilitation
Communities	4.2	Interfaith Understanding and Practice
Communities	4.3	Cultural Competency and Sensitivity
Communities	4.4	Physical and Environmental Design for Spiritual Care
Communities	4.5	Facilitating Worship and Group Spiritual Experiences
Communities	4.6	Appropriate Use of Prayer
Context	5.1	Developing Contextual Adaptability
Context	5.2	Systems Advocacy for Spiritual Care
Context	5.3	Community Organizing for Spiritual Care
Context	5.4	Professional Communication and Collaboration
Context	5.5	Bridging Sacred and Secular Worldviews
Context	5.6	Recognizing and Addressing Systemic Injustice
Profession	6.1	Maintaining Integrity and Standards
Profession	6.2	Program Development and Implementation
Profession	6.3	Evaluating & Applying Research for Best Practice
Profession	6.4	Clinical/Professional Documentation
Profession	6.5	Incorporating Interdisciplinary Insights
Profession	6.6	Technological Literacy for Spiritual Care Practice

As significant an advance as this framework represents toward greater coherence, it remains provisional. The synthesis and normalization process produced a comprehensive, structured model, but its relevance and applicability still require empirical testing. Our survey-based validation offers essential insight into how chaplains perceive, prioritize, and practice these competencies across sectors, evidence that will guide further refinements to ensure the framework reflects real-world chaplaincy practice and effectively informs education, certification, and professional development.

Survey Design

The survey design for the empirical validation of chaplaincy competencies reflects the profession's complexity and diversity. The survey used a consistent five-point Likert scale to assess each competency from three perspectives: its importance to the chaplaincy profession, its frequency of use in practice, and the educational preparation provided by graduate theological education. Although Clinical Pastoral Education (CPE) is a significant component of chaplain training, we excluded it from the survey because it is not required universally across chaplaincy sectors. Instead, we focused on graduate theological education, which is nearly universal for professional chaplains in any setting. The inclusion of CPE would introduce inconsistencies in eligibility and data interpretation, as not all respondents have completed CPE or experienced it comparably. By centering the survey on graduate theological education, we ensured the data reflected a consistently shared element of chaplain preparation across the field.

While the competencies are presented in a standardized form across all sectors, the survey's demographic section allows respondents to identify their primary and secondary chaplaincy roles. Researchers can then explore whether differences in the perceived importance or use of competencies may correlate with specific sectors. For example, a chaplain working in healthcare may also serve in a community-based capacity, contributing insights from both perspectives. This broad representation ensures the framework captures the diversity of chaplaincy practice.

We developed the competencies included in the survey through a process informed by Observable Performance Indicators (OPIs), which helped us conceptually align knowledge, skills, and dispositions. Many of the source documents aggregated during the framework development phase included statements labeled "competencies" that, when evaluated through the lens of Competency-Based Education (CBE), did not meet the fully articulated competencies as defined by C-BEN. These statements often represented either specific skills, pieces of knowledge, or even desirable attitudes, but lacked the integration and performance-based articulation required of a true competency.

Rather than discarding these important insights, we incorporated them into the OPIs that support and define each competency. In this way, the richness and specificity of the original materials were preserved within the framework's structure, even if not all source statements appear as standalone competencies. While the OPIs were

instrumental in shaping the competency definitions, the survey itself presents only the finalized competencies and their definitions for evaluation. This decision simplifies the process for respondents, allowing them to focus on the core elements of the framework without introducing additional complexity.

The survey's ultimate goal is to provide a strong empirical foundation for validating and refining the chaplaincy competency framework. The results will identify the competencies most valued and frequently used across the profession, highlight gaps between educational preparation and professional demands, and offer insights into improving chaplaincy education. The survey represents a significant step toward ensuring the competency framework remains robust, relevant, and responsive to the evolving needs of chaplaincy practice. Each competency is evaluated using three distinct measures:

1. **Importance**: Respondents rate the perceived significance of each competency to chaplaincy practice on a five-point Likert scale, ranging from "Not Important" to "Extremely Important." This metric highlights which competencies are prioritized within and across sectors.
2. **Frequency of Use**: This measure assesses how often chaplains actively employ each competency in their roles, with options ranging from "Never" to "Always." Comparing this with importance ratings reveals discrepancies between what chaplains value and what they can apply in practice.
3. **Educational Preparation**: This metric evaluates the degree to which chaplains' theological education prepared them for each competency, using a scale from "It didn't help at all" to "Helped extremely well." These data are critical for identifying gaps between formal training and real-world requirements.

The analytical focus on graduate theological education, rather than Clinical Pastoral Education (CPE), was a deliberate methodological choice. Graduate theological education represents a nearly universal expectation for professional chaplaincy roles across all settings, making it a more consistent common denominator for preparation analysis than CPE, which is not universally required across all chaplaincy sectors. This focus ensured greater consistency in response eligibility and data interpretation.

The survey is designed to achieve several key objectives. First, it aims to verify the comprehensive coverage of the synthesized competencies, ensuring that the framework accurately reflects the realities of professional chaplaincy across all major sectors. To this end, the survey also included an open-ended question for respondents to suggest additional competencies; an analysis of those qualitative responses is part of a subsequent study and falls outside the scope of this paper. Second, it seeks to identify sector-specific variations in competency valuation and application, providing targeted insights into the distinct challenges and priorities within each context. Third, the survey assesses the alignment between theological education and the practical needs of chaplaincy, yielding actionable recommendations for enhancing academic curricula and professional training programs. Finally, the data will empirically support the standardization of chaplaincy competencies, contributing to the establishment of cross-sector benchmarks for certification and practice.

We conducted the empirical validation of the chaplaincy competency framework using an online survey delivered via Qualtrics, a platform selected for its accessibility and robust features. This platform enabled chaplains from diverse geographic locations and professional sectors to participate conveniently, ensuring a broad and representative sample. To recruit a diverse and representative sample of currently practicing chaplains across sectors, we utilized a multi-modal recruitment strategy. The study was promoted via email lists from professional associations (e.g., APC, NACC, ACPE), social media channels, and denominational networks.

In addition, one of the co-investigators, Zachary Moon, who previously served as a chaplain in multiple contexts, leveraged his extensive personal and professional network to directly invite participation. His outreach through the Center for Chaplaincy Studies also encouraged snowball sampling, asking recipients to share the survey with colleagues engaged in chaplaincy practice. The inclusion criteria specified that respondents be actively functioning as chaplains, regardless of certification status. To verify participation by actual chaplains while maintaining anonymity, respondents were invited to submit their names and email addresses via a separate, unlinked form at the conclusion of the survey. This procedure permitted light-touch verification (e.g., via institutional email addresses) without compromising the integrity or confidentiality of the response data. This strategy resulted in robust participation across chaplaincy sectors.

This study was conducted in accordance with ethical standards for human subject research and received full approval from Boston College's Institutional Review Board (IRB Protocol No. 25.132.01e). We presented potential participants with a digital information sheet detailing the study's purpose, procedures, potential risks, and confidentiality measures. All participants were required to provide informed consent by digitally affirming their voluntary participation before gaining access to the survey questions.

Results

A total of 379 responses were collected through the Qualtrics platform for the "Chaplain-Assessed Chaplaincy Competencies in North America" survey. Following a data-cleaning process consistent with best practices in quantitative research, 26 responses were excluded due to incomplete data, ineligibility, or failure to meet verification criteria. The final analytic sample included 353 practicing chaplains across diverse sectors.

We exported the survey data from Qualtrics and examined it in Excel and SPSS (v29), streamlining our analysis with a consistent variable-naming scheme. Each of the 36 competencies was evaluated on three dimensions: perceived importance (IMP), frequency of use (FREQ), and adequacy of educational preparation (PREP). This three-pronged approach allowed us to see not only what matters most to chaplains, but also where their education falls short of real-world practice.

To maximize the use of available data, we employed pairwise deletion for the analysis. This method retains all responses for a given calculation, excluding only

cases with missing data on the specific variables involved. In doing so, it minimizes data loss and preserves statistical power. Although some optional demographic and open-text items had higher nonresponse rates, the key variables (i.e., competency ratings and primary setting) had minimal missing data (<5%). Therefore, using pairwise deletion did not meaningfully alter the sample or introduce bias, validating it as a reasonable approach for this exploratory cross-sector study.

Prior to analysis, we inspected all scale-based columns for non-numeric entries and recoded where necessary. Likert responses were treated as interval data, meaning that the numerical differences between response categories (e.g., between "somewhat important" and "very important") were treated as equal intervals, a standard approach in social science research that enables the use of parametric statistical tests. The cleaned dataset included standardized variable names and domain-level identifiers, enabling both aggregate and domain-specific analyses. All transformations and derivations were documented in syntax to promote reproducibility and transparency.

We asked chaplains to rate each competency on a five-point Likert scale for importance, frequency of use, and perceived adequacy of educational preparation (e.g., from 1 = "Not at all important" to 5 = "Extremely important"). Although Likert scales are ordinal by design, we treated responses as approximately interval-level for the purposes of calculating means and applying parametric statistics, in line with established practice in social science research (Norman, 2010; Sullivan & Artino, 2013). Given our sample size ($N = 353$), the Central Limit Theorem further supports the robustness of these analyses.

Distributions were visually inspected and summary statistics reviewed for skewness and variance. While some items clustered toward the upper end (e.g., consistently high ratings for competencies such as Ethical Integrity), no items showed floor or ceiling effects sufficiently extreme to warrant nonparametric treatment. The 36 competencies were not designed to function as items on a unidimensional scale but rather as distinct, conceptually grounded elements of chaplaincy practice. Accordingly, internal consistency analyses (e.g., Cronbach's alpha) and factor analysis were not applied, as these methods assume underlying latent constructs and item interchangeability, which are not appropriate to the competency-based structure. The following analysis begins by establishing a baseline professional consensus across the 353 practicing chaplains in the sample. We first present descriptive statistics for the three primary metrics evaluated for each competency: perceived importance to the profession, frequency of use in daily practice, and adequacy of graduate-level educational preparation. This initial overview identifies the competencies most central to the profession and reveals the first indications of potential misalignments between practice and training.

Importance: A Strong Professional Consensus

The Importance ratings ranged from a high of 4.87 for "6.4 Clinical/Professional Documentation" to a low of 3.28 for 5.3 Community Organizing for Spiritual Care (from the full list). In general, the consistently low standard deviations in the Impor-

tance ratings indicate a strong professional consensus regarding what is considered vital to the chaplaincy profession. For a 5-point Likert scale, standard deviations well below 1.0, such as those observed (e.g., as low as 0.36 for 6.1 Maintaining Integrity and Standards and 0.41 for 2.1 Empathetic Presence and Cultural Sensitivity), signify that respondents' perceptions are tightly clustered around the mean, reflecting high agreement.

Even for competencies with the highest standard deviations, such as 5.3 Community Organizing for Spiritual Care (*SD* = 1.07) and 6.6 Technological Literacy for Spiritual Care Practice (*SD* = 1.02), this level of variability is not indicative of a fundamental disagreement on importance. Rather, it suggests differences in perceived relevance likely tied to the varying prevalence of these activities across diverse chaplaincy sectors, a nuance further explored in the cross-sectoral analysis. This overall pattern of low variability across most competencies is a highly desirable characteristic for an empirically validated, unified competency framework, as it underscores a shared understanding of core professional requirements.

The analysis of competency ratings revealed several core areas of chaplaincy practice that are consistently perceived as highly important by chaplains across diverse sectors. Table 2 presents the top eight competencies based on their mean Importance ratings. These competencies exhibit not only high average importance but also relatively low standard deviations, indicating a strong professional consensus regarding their foundational role in chaplaincy.

Table 2
Top 8 Competencies based on Their Mean Importance Ratings (N = 353)

Competency	Importance	
	M	*SD*
6.4 Clinical/Professional Documentation	4.87	0.97
2.1 Empathetic Presence and Cultural Sensitivity	4.84	0.41
2.2 Engaging with Loss and Grief	4.72	0.54
4.3 Cultural Competency and Sensitivity	4.62	0.62
5.5 Bridging Sacred and Secular Worldviews	4.60	0.69
4.2 Interfaith Understanding and Practice	4.59	0.68
2.3 Addressing Trauma and Moral Distress	4.57	0.68
5.4 Professional Communication and Collaboration	4.56	0.62

Frequency: The Daily Demands of Practice

Beyond the perceived importance, understanding the frequency with which chaplains utilize specific competencies in their daily practice provides crucial insights into the demands of contemporary chaplaincy roles. The Frequency of Use ratings ranged from a high of 4.79 for 6.4 Clinical/Professional Documentation to a low of 2.70 for 5.3 Community Organizing for Spiritual Care (from the full list). Similar to Importance ratings, many competencies exhibited relatively low standard deviations, indicating a consistent application in practice among respondents. Com-

petencies such as 2.1 Empathetic Presence and Cultural Sensitivity (*SD* = 0.48) and 6.1 Maintaining Integrity and Standards (*SD* = 0.49) showed particularly high consensus in their frequency of use.

However, some frequently reported competencies, notably 6.4 Clinical/Professional Documentation (*SD* = 1.11) and 6.2 Program Development and Implementation (*SD* = 1.04), exhibited higher standard deviations, suggesting more varied application frequencies that likely reflect the diverse operational demands across different chaplaincy types, a topic further analyzed in subsequent sections. This pattern highlights both universal aspects of chaplaincy practice and areas where professional activities may diverge across settings. Table 3 presents the mean Frequency of Use ratings and corresponding standard deviations for the top eight competencies, ordered from most to least frequently reported.

Table 3
Top 8 Competencies based on their Mean Frequency of Use Rating (N = 353)

Competency	Frequency of Use	
	M	*SD*
6.4 Clinical/Professional Documentation	4.79	1.11
2.1 Empathetic Presence and Cultural Sensitivity	4.76	0.48
5.4 Professional Communication and Collaboration	4.34	0.73
6.1 Maintaining Integrity and Standards	4.34	0.49
1.2 Reflective Practice	4.32	0.76
2.2 Engaging with Loss and Grief	4.32	0.69
4.3 Cultural Competency and Sensitivity	4.31	0.75
5.5 Bridging Sacred and Secular Worldviews	4.30	0.73

Understanding which competencies are utilized most frequently provides a baseline for what the profession demands. The crucial next step, however, is to determine whether chaplains, through their graduate education, feel adequately prepared to meet these on-the-ground responsibilities. The following analysis of Educational Preparation ratings directly addresses this by measuring the perceived effectiveness of formal training for each competency. This comparison is essential for identifying potential misalignments in which high-frequency, critical skills may be underserved by existing academic curricula, revealing potential gaps between professional practice and educational focus.

Educational Preparation: Graduate School Development

An essential aspect of this study is to assess the extent to which graduate theological education prepares chaplains for the competencies deemed important and frequently used in practice. Table 4 presents the mean Educational Preparation ratings and their corresponding standard deviations for the top eight competencies by Function Importance, ordered from the lowest to the highest reported levels of preparation.

Table 4
Top Eight Competencies based on their Mean Educational Preparation Ratings(N = 353)

Competency	Educational Preparation	
	M	*SD*
6.4 Clinical/Professional Documentation	1.89	1.07
6.6 Technological Literacy for Spiritual Care Practice	2.00	1.29
3.5 Supporting Families Impacted by Domestic Violence	2.06	1.04
2.4 Supporting Addiction and Recovery	2.11	0.94
5.2 Systems Advocacy for Spiritual Care	2.16	1.14
2.5 Crisis Intervention and Response	2.29	1.04
2.6 Spiritual Assessment	2.32	1.13
6.3 Evaluating and Applying Research for Best Practices in Chaplaincy	2.33	1.01

The Educational Preparation ratings demonstrated a broader range than Importance or Frequency, spanning from a low mean of 1.89 for 6.4 Clinical/Professional Documentation to a high mean of 3.86 for 1.3 Theological and Traditional Self-Understanding on the 5-point scale. Notably, competencies perceived as highly important and frequently used, such as 6.4 Clinical/Professional Documentation and 2.6 Spiritual Assessment, showed some of the lowest reported levels of educational preparation.

Furthermore, the standard deviations for Educational Preparation were consistently higher than those for Importance and Frequency. While Importance *SD*s primarily ranged from 0.36 to 1.07, and Frequency *SD*s from 0.48 to 1.11, Preparation *SD*s frequently exceeded 1.0, with several reaching 1.19 (3.2 Developmentally Appropriate Spiritual Care) and even 1.29 (6.6 Technological Literacy for Spiritual Care Practice). This elevated variability indicates a significant lack of consistency in how theological education addresses these areas, suggesting that some graduates feel well-prepared while others feel inadequately prepared for the same competency. This divergence, rather than being a universal shortfall, points to varied experiences among graduates and highlights critical areas for potential realignment in theological education curricula.

Calculating "Functional Importance"

To analyze the combined perceived relevance of each competency in practice, we constructed a composite variable, Functional Importance (FI), for each competency. We calculated this variable as the average of respondents' Importance (IMP) and Frequency of Use (FREQ) ratings, as shown below.

$$FI = \frac{IMP + FREQ}{2}$$

The FI variable was developed to consolidate two closely related yet distinct aspects of a competency's professional salience into a single, comprehensive metric. While perceived importance highlights what chaplains *value*, frequency of use indicates what they *actually do*. By averaging these two measures, FI provides a more holistic and robust representation of a competency's practical relevance within the professional context, reflecting not just its theoretical significance but also its real-world application. Our approach allowed for a streamlined primary unit of analysis for overall relevance, particularly when investigating perceived gaps in educational preparation by comparing FI directly with the Educational Preparation (PREP) ratings. Specific competencies will be addressed in detail below, where this composite variable may reveal nuanced or potentially problematic discrepancies.

While advanced psychometric models, such as those from Rasch measurement, can convert ordinal observations into true interval-level measures (Iramaneerat et al., 2008), we selected the simpler composite approach of averaging the ratings for its direct utility. The resulting Functional Importance score provides a single, intuitive metric of a competency's practical relevance in the field. For the intended audience of curriculum designers and professional standard-setting bodies, this unified score is more readily interpretable for evaluating the overall salience of 36 distinct competencies than for tracking two separate variables for each. In applied research focused on informing practice, such direct interpretability is a critical goal (Fidler & Cumming, 2008)

Table 5 presents the top eight competencies with the highest Functional Importance means, along with their respective standard deviations.

Table 5

Top Eight Competencies based on their Mean Functional Importance Ratings(N = 353)

Competency	Functional Importance	
	M	*SD*
6.1 Maintaining Integrity and Standards	4.83	0.86
2.1 Empathetic Presence and Cultural Sensitivity	4.80	0.66
2.2 Engaging with Loss and Grief	4.52	0.76
4.3 Cultural Competency and Sensitivity	4.46	0.90
1.6 Ethical Decision-Making and Accountability	4.45	0.74
5.4 Professional Communication and Collaboration	4.45	0.80
4.2 Interfaith Understanding and Practice	4.43	0.85
1.2 Reflective Practice	4.43	0.95

While the competencies listed in Table 5 represent the high-frequency, high-importance tasks that form the daily core of chaplaincy work, the Functional Importance metric can also mask revealing tensions within the data. A different insight emerges when we analyze the discrepancy between a competency's perceived importance and its frequency of use.

This lens allows us to identify a distinct category of professional responsibilities: high-stakes, low-frequency skills. These are competencies that chaplains hold as vital to their professional identity and ethical duty, even if the opportunity to apply them is rare. This dynamic is most starkly illustrated by 3.5 Supporting Families Impacted by Domestic Violence. It stands as a distinct outlier in the data, with an Importance-Frequency difference of 1.13, while the next largest difference for any other competency is 0.63.

The significant gap between the high importance (4.01) and the lower frequency (2.88) for 3.5 Supporting Families Impacted by Domestic Violence can be understood through its unique nature and the diversity of chaplaincy sectors. The profound ethical and spiritual weight of domestic violence makes it a universally important issue for chaplains. However, unlike daily tasks, direct intervention in these situations is a high-intensity, low-frequency event for many.

This dynamic is amplified across different professional settings: a chaplain in a hospital emergency department might encounter this issue more frequently, while one in a corporate or university setting may do so rarely. These varied sectoral experiences not only pull down the average frequency rating, creating the large gap from importance, but also contribute to a higher standard deviation in the frequency score (0.89). This variability reflects the lack of a uniform experience with this competency, suggesting chaplains perceive it as a critical responsibility they must be prepared for, even if its direct application is highly situational.

Calculating "Educational Gap"

To assess the alignment between professional demands and educational formation, a new variable, Educational Gap (Gap), was calculated for each of the 36 competencies. We computed this metric by subtracting the mean rating for Educational Preparation (PREP) from the mean rating for Functional Importance (FI):

$$Gap = FI - PREP$$

The rationale for creating the Gap variable is to provide a direct, quantitative measure of the discrepancy between the perceived practical relevance of a competency and the extent to which theological education prepares chaplains to perform it. This "gap" calculation is a direct application of methods used in needs assessment and gap analysis, such as the Borich Needs Assessment Model (Borich, 1980) and Importance-Performance Analysis (Martilla & James, 1977). These models calculate a discrepancy score by subtracting a respondent's perceived level of preparation from the perceived importance of a competency, thereby quantitatively identifying the most urgent areas for curricular reform.

This gap approach is further validated by its direct use in established, psychometrically sound instruments, most notably the Hennessy-Hicks Training Needs Analysis (TNA) Questionnaire (Hicks et al., 1996). This instrument, originally developed and validated for use with primary health care teams, calculates its Train-

ing Needs Index using the same method: subtracting the "performance/skill" score from the "criticality/importance" score. Its continued validity and widespread use in healthcare settings have been confirmed by recent reviews (Markaki et al., 2021). This approach is also consistent with the methodology used to develop Educational Priority Indices for schools, which creates a "risk index" by weighting various social factors to predict the probability of poor educational outcomes, specifically accounting for the cumulative effects of multiple disadvantages (Sammons et al., 1983).

A large positive Gap score indicates a professional deficit, signifying that a competency is considered functionally important for chaplaincy practice but is not adequately addressed in educational programs. Conversely, a score near zero would suggest strong alignment, while a negative score would indicate that preparation exceeds the perceived need. This metric enables systematic identification of specific areas where theological curricula may need revision and enhancement to better meet the real-world needs of practicing chaplains.

We acknowledge the statistical limitations and scholarly debates surrounding difference scores. Critics have argued they can suffer from low reliability, particularly when component scores are highly correlated (Peter et al., 1993). However, we deliberately chose this method for its unparalleled diagnostic power and interpretability. A large positive gap score provides an unambiguous signal to theological educators, accreditation bodies, and curriculum committees, pinpointing the precise competencies, such as 6.4 Clinical/Professional Documentation and 5.2 Systems Advocacy for Spiritual Care, that require urgent pedagogical attention.

While more complex latent variable modeling could be employed, the directness of the Gap = FI − PREP calculation makes the source of the professional deficit immediately transparent. In the context of applied educational reform, this level of actionable clarity is paramount and, in our judgment, justifies the methodological trade-off (Fidler & Cumming, 2008). Furthermore, our approach is supported by research demonstrating that the unreliability of difference scores is often overstated and that, under practical conditions (such as the unequal variances found in our own data), they can be highly reliable (Chiou & Spreng, 1996).

Figure 1 and Table 6 below present the eight competencies with the largest Educational Gap means, highlighting the most significant areas where preparation appears to lag behind the profession's functional demands.

Figure 1

Educational Gap (GAP), Functional Importance (FI), and Educational Preparation (Edu Prep)

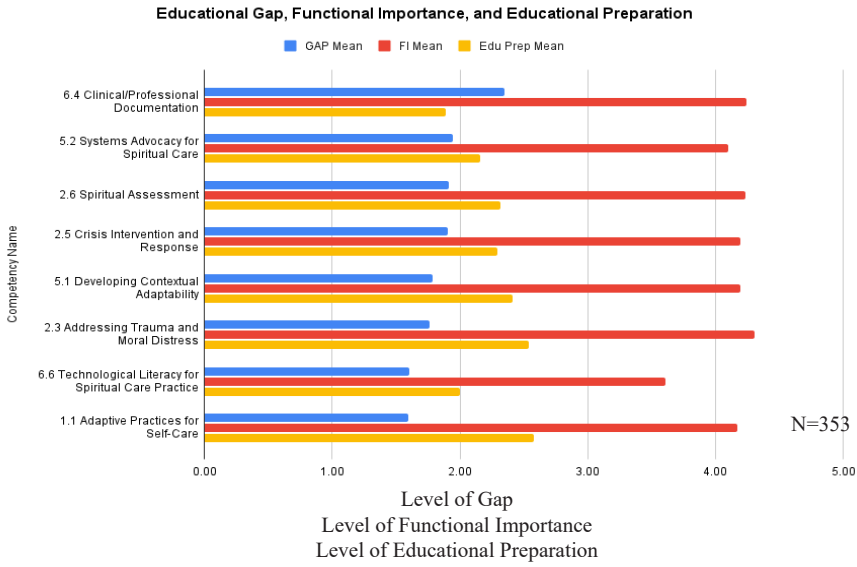


Table 6

Top 8 Competencies with the Largest Educational Gap (N = 353)

Competency	FI *M*	Prep *M*	Educational Gap	
			M	*SD*
6.4 Clinical/Professional Documentation	4.24	1.89	2.35	1.30
5.2 Systems Advocacy for Spiritual Care	4.10	2.16	1.94	1.42
2.6 Spiritual Assessment	4.23	2.32	1.91	1.37
2.5 Crisis Intervention and Response	4.19	2.29	1.90	1.22
5.1 Developing Contextual Adaptability	4.20	2.41	1.79	1.18
2.3 Addressing Trauma and Moral Distress	4.30	2.54	1.76	1.31
6.6 Technological Literacy for Spiritual Care Practice	3.61	2.00	1.61	1.56
1.1 Adaptive Practices for Self-Care	4.17	2.58	1.59	1.24

Notes. FI = Functional Importance; Prep = Educational Preparation

The analysis of the Educational Gap scores reveals a significant and wide-ranging disparity between the functional demands of chaplaincy and the training provided by theological institutions. The Gap scores span a broad spectrum, from a high of 2.35 for 6.4 Clinical/Professional Documentation down to −0.05 for 4.5 Facilitating Worship and Group Spiritual Experiences, the sole competency for which educational preparation reportedly exceeded functional importance. The competencies with the largest gaps are consistently those related to administrative, systemic, and practical skills, such as systems advocacy, crisis intervention, and technological literacy. Conversely, the smallest gaps are found in areas of traditional theological and personal formation, indicating that educational programs are more closely aligned with the profession's historic focus than its contemporary, context-driven demands.

A Note on Inconsistent Preparation

Beyond the average size of these gaps, their standard deviations reveal a further layer of complexity: a significant lack of professional consensus regarding the severity of these educational shortfalls. The Gap *SD*, a composite measure of variability, is notably high for many competencies, including 6.6 Technological Literacy for Spiritual Care Practice (*SD* = 1.56) and 5.2 Systems Advocacy for Spiritual Care (*SD* = 1.42). This high degree of variance is largely attributable to the profound inconsistencies in educational preparation, which, as previously noted, demonstrated greater variability than the ratings for functional importance. This finding suggests that the experience of being underprepared is not uniform. Instead, it points to a fragmented educational landscape where graduates enter the profession with widely divergent levels of readiness for the same core challenges. The nature of the schools at which respondents did graduate theological reflection may be a contributing factor. At the very least, it can be said that there is a lack of consistency in how theological education addresses these areas, leading to varied experiences among graduates, rather than a universal shortfall.

Together, the initial ratings and the composite Educational Gap metric paint a clear, top-level picture: chaplains feel that while their education prepares them well for traditional theological and formational tasks, it is less applicable to the practical, administrative, and systemic demands of their work. The analysis now moves beyond these overall averages to explore how a chaplain's specific work context shapes these realities.

The Impact of Professional Context

Averages tell one story, but beneath these broad strokes lies a more textured narrative. When we examined how hospital chaplains experience these gaps compared to their military or university colleagues, the data revealed not one profession but many, each with its own urgent needs and overlooked strengths. This analysis explores how the perceived importance of competencies and the corresponding edu-

cational shortfalls differ across four key contexts: Hospitals, Hospice, Military, and Higher Education. The data reveal a set of universal training needs alongside highly specific gaps and priorities that underscore the diverse realities of contemporary chaplaincy.

Universal Needs vs. the Acute "Healthcare Gap"

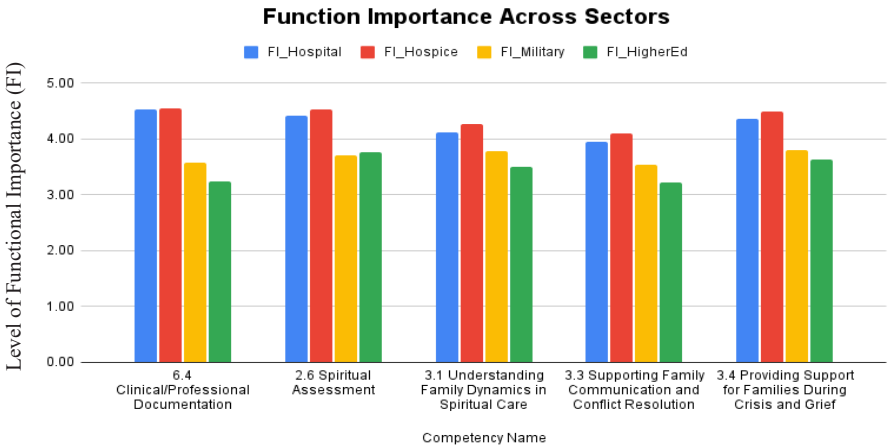
To understand how professional context shapes a chaplain's work, we first compared competency ratings across four key sectors: Hospitals, Hospice, Military, and Higher Education. We designed this analysis to identify both universal training needs that cut across all settings and acute, sector-specific gaps that demand a more tailored educational approach.

A baseline of shared professional need is evident in competencies like 2.5 Crisis Intervention and Response and 2.3 Addressing Trauma and Moral Distress, which show consistently high educational gaps across all four sectors. This finding suggests that these core skills represent a universal deficit in theological education. However, layered on top of these shared challenges is the uniquely acute issue of 6.4 Clinical/Professional Documentation for healthcare chaplains. This conclusion goes beyond a statistical discrepancy; it appears to be a defining feature of the healthcare chaplaincy experience. The Gap score for this competency is notably high for Hospital (2.75) and Hospice (2.72) chaplains, while it is substantially lower for those in Higher Education (1.02). The data suggest that the day-to-day reality of working in a clinical setting, with its emphasis on record-keeping, interdisciplinary communication via charts, and administrative functions, is the single greatest area where education is failing to prepare chaplains for their specific work environment.

Functional Importance Varies by Sector

The data on Functional Importance (FI) further illustrate how the core functions of a chaplain vary across contexts. As seen in Figure 2, the FI for Clinical/Professional Documentation is extremely high in Hospice (4.54) but plummets in Higher Education (3.25), demonstrating its centrality in one context and lower relevance in another. Conversely, competencies like 5.1 Developing Contextual Adaptability and 4.1 Group Dynamics and Facilitation are rated as most functionally important by Military and Higher Education chaplains, respectively. This pattern highlights that the "job" of a chaplain is not monolithic; a university chaplain's role is more oriented toward group programming, while a military chaplain's role requires a unique level of adaptability. The idea of a one-size-fits-all curriculum is directly challenged, highlighting professional identities that require different skill priorities.

Figure 2
Functional Importance (FI) across Sectors (N=353)



This chart provides a visual comparison of how chaplains in four different professional sectors rate the Functional Importance of specific competencies. The length of each bar corresponds to the average importance and frequency of use reported by chaplains in that field. The five competencies displayed here were specifically chosen because they showed the greatest variation in perceived importance across the different professional settings. In the full dataset, these five competencies had the largest gap between the highest-and lowest-scoring sectors. For example, 6.4 Clinical/Professional Documentation is included because it has the most dramatic split, being rated as highly important in Hospice and Hospital settings but significantly less so in Higher Education. In short, this chart highlights the competencies in which the nature of a chaplain's job differs most significantly depending on their work environment.

This variation underscores the need for specialized training pathways. While a foundational set of competencies is essential for all chaplains, the significant divergence in functional importance across sectors suggests that a single, standardized curriculum may not adequately prepare chaplains for the specific demands of their chosen field. For instance, the data indicate that a chaplain intending to work in higher education would benefit from a different educational focus than one preparing for a career in hospice care. Consequently, theological schools and training programs should consider developing distinct tracks or specializations that align with the practical realities of different chaplaincy contexts, ensuring that graduates are not only grounded in core principles but also equipped with the specific skills they will need most.

A Tale of Two Curricula

The analysis of competencies with the smallest educational gaps provides a compelling narrative about the primary focus of contemporary theological education. The two competencies with the lowest gaps are 1.3 Theological and Traditional Self-Understanding (Gap = 0.29) and, most notably, 4.5 Facilitating Worship and Group Spiritual Experiences (Gap = −0.05). The data on worship are particularly revealing: in every sector except Higher Education, this competency received a negative gap score (Hospital: −0.13, Hospice: −0.25, Military: −0.20), indicating that chaplains in these roles feel their preparation actually exceeds its functional importance.

However, the success in these traditional domains throws the numerous, large gaps in other areas into sharp relief. Chaplains report being over-prepared for a task like worship while feeling critically underprepared for the administrative, systemic, and clinical demands of their jobs. The fact that the gap for facilitating worship is slightly positive in Higher Education (0.07) only sharpens the point: this traditional skill retains some relevance in a campus setting but has become secondary elsewhere. The problem, therefore, is not a failure of the traditional curriculum itself, but rather that its scope has not expanded to encompass the full range of competencies required by the modern institutional contexts in which most chaplains now serve.

This pattern, in which preparation for traditional clerical functions appears robust. At the same time, large gaps exist in practical and administrative competencies, which lends support to the hypothesis that the scope of many theological curricula has not kept pace with the evolving, institution-based demands of contemporary chaplaincy. The profound differences between sectors confirm that chaplaincy is not a monolithic profession, particularly in the acute need for documentation skills in healthcare versus the sustained relevance of worship in higher education. Having established the powerful influence of the work *environment*, the analysis now turns to the single most powerful factor correlated with a chaplain's *training*: their level of Clinical Pastoral Education.

The Influence of Clinical Pastoral Education (CPE)

Given that Clinical Pastoral Education (CPE) is a primary modality for the practical and formational training of professional chaplains, a detailed analysis was conducted to determine its influence on competency perception and educational preparedness. To further investigate the factors shaping chaplains' professional views, the subsequent analysis examines the role of intensive clinical training. A categorical variable was created to represent distinct milestones in CPE attainment: individuals with no CPE units (None), those with foundational exposure of one to three units (Some CPE), and those who have completed four or more units, typically signifying a full residency (4+ CPE). This grouping is substantively meaningful as it reflects common benchmarks in a chaplain's training journey, from a baseline of no clinical experience to the completion of the standard requirement for board certification.

The analytical process began with a series of Multivariate Analyses of Variance (MANOVAs) to test whether the level of CPE training had a significant *overall* ef-

fect on the three primary metrics of this study (Functional Importance, Educational Preparation, and Educational Gap). The results of these analyses were profound, indicating that CPE attainment is a powerful and statistically significant predictor of chaplains' perceptions across all three domains. A particularly strong and consistent pattern emerged for Functional Importance (FI): chaplains who completed a full residency (4+ CPE) consistently assigned a significantly higher degree of practical relevance to competencies related to direct clinical care, crisis intervention, and family dynamics than their peers with less or no CPE training. Similar, though distinct, patterns of significant differences were also found for how these groups assessed their educational preparedness (Prep) and the resulting educational gap.

The detailed results of the MANOVA representing one-way ANOVA follow-ups are presented in the tables that follow, beginning with the findings for Functional Importance. To aid digestibility and focus on the most practically significant results (represented by the partial eta-squared, η_p^2), the following tables are trimmed to display only those competencies with a medium or large effect size ($\eta_p^2 > .06$). This approach prioritizes the magnitude of the finding over simple statistical significance, which can be a misleading indicator of importance, especially with a large sample size (Lakens, 2013).

Table 7
One-Way ANOVA Follow-up Results of Three Levels of CPE on Functional Importance (FI)

Competency	Mean FI (No CPE)	Mean FI (Some CPE)	Mean FI (4+ Units)	*F*	*p*	η_p^2	Significant Pairings ($p < .05$)
6.4 Clinical Doc.	3.30	3.81	4.57	41.254	<.001	0.236	3>2, 3>1, 2>1
2.2 Loss & Grief	4.09	4.30	4.70	32.827	<.001	0.197	3>2, 3>1
2.6 Spiritual Assess.	3.53	3.90	4.47	31.464	<.001	0.191	3>2, 3>1
3.1 Family Dynamics	3.64	3.65	4.20	16.014	<.001	0.107	3>2, 3>1
3.4 Families in Crisis	3.71	3.99	4.37	15.873	<.001	0.106	3>1, 3>2
3.3 Family Comm.	3.45	3.51	3.99	12.671	<.001	0.087	3>2, 3>1
4.3 Cultural Comp.	4.12	4.30	4.59	11.683	<.001	0.080	3>1, 3>2
2.5 Crisis Intervention	3.92	4.02	4.33	9.741	<.001	0.068	3>1, 3>2
6.5 Interdisc. Insights	3.95	4.01	4.37	8.939	<.001	0.063	3>1, 3>2

The results detailed in Table 7 reveal a powerful and consistent narrative regarding the formative impact of Clinical Pastoral Education. The dominant trend is a clear "dose-response" relationship, a pattern where an increase in CPE units corresponds to a significantly higher rating of a competency's Functional Importance (FI). This pattern is particularly strong for skills at the core of clinical practice, such as Clinical Documentation, Spiritual Assessment, Engaging with Loss and Grief, and a suite of competencies related to family dynamics and crisis care. The post hoc analy-

ses confirm that for these items, the "4+ CPE" group consistently rated the FI higher than the "Some CPE" and "No CPE" groups. These results suggest that as chaplains gain more intensive, hands-on experience, their understanding of the real-world importance and frequency of use of these clinical skills is significantly solidified.

Conversely, a noteworthy countertrend emerged in competencies such as 6.2 Program Development and Implementation and 4.5 Facilitating Worship and Group Spiritual Experiences. For these items, chaplains with no CPE experience assigned a significantly higher FI rating than their peers who had completed some or all of their residency. A possible indication that chaplains with less exposure to intensive clinical settings conceptualize their role with a greater emphasis on programmatic or traditional liturgical functions. As training progresses, a chaplain's focus may shift from these broader duties toward the individualized clinical encounter, thereby altering their perception of what is most functionally important in their daily practice.

In stark contrast to the widespread influence of CPE on Functional Importance, the follow-up results of the level of CPE on Educational Preparedness (Prep) revealed a much more focused, counterintuitive result. The follow-up ANOVA results showed no statistically significant differences among the three CPE groups for nearly every competency, indicating that chaplains, regardless of their level of clinical training, generally rated the contribution of their graduate education similarly.

The sole exception was 2.6 Spiritual Assessment, which yielded a statistically significant overall difference ($F(2, 267) = 3.330$, $p = .037$, $\eta_p^2 = .024$). However, a more conservative Tukey HSD post hoc analysis (a statistical test that controls for multiple comparisons to reduce the likelihood of false-positive findings) did not find a significant difference between any two groups at the $p < .05$ level. Despite this, an examination of the group means exposed a noteworthy trend. Chaplains with the most clinical training (4+ CPE units) reported the lowest level of preparedness from their graduate education ($M = 2.16$), while those with "Some CPE" ($M = 2.54$) and "No CPE" ($M = 2.50$) reported higher levels of preparedness. This comparison suggests that while CPE does not broadly impact perceptions of prior education, the intensive experience of a full residency may uniquely equip chaplains with a more critical lens through which they re-evaluate their foundational training in the complex and nuanced art of spiritual assessment.

A starkly different and more powerful narrative emerged from the final follow-up ANOVA, which examined the relationship between the three levels of CPE training and the perceived Educational Gap. The analysis revealed widespread, highly significant effects across a large majority of competencies. A critical observation emerges from these data: as chaplains acquire more clinical training, the perceived gap between their graduate education and professional practice widens. The detailed findings, including the specific group differences identified by the Tukey HSD post hoc tests, are presented in Table 8 below.

Table 8
One-Way ANOVA Follow-up Results of Three Levels of CPE on Educational Gap (GAP)

Competency	Mean Gap (No CPE)	Mean Gap (Some CPE)	Mean Gap (4+ Units)	*F*	*p*	η_p^2	Significant Pairings ($p < .05$)
6.4 Clinical Doc.	1.35	1.71	2.81	26.264	<.001	0.167	3>2, 3>1
2.6 Spiritual Assess.	1.1	1.34	2.31	25.303	<.001	0.162	3>2, 3>1
2.2 Loss & Grief	0.92	0.94	1.63	14.257	<.001	0.098	3>2, 3>1
3.4 Families in Crisis	0.75	1.11	1.65	12.343	<.001	0.086	3>2, 3>1
2.3 Trauma/Moral Distress)	1.45	1.34	2.01	9.434	<.001	0.067	3>2, 3>1
3.1 Family Dynamics	0.83	0.62	1.3	9.292	<.001	0.066	3>2, 3>1

The results in Table 8 illustrate a clear and consistent trend across a wide range of professional competencies: as chaplains engage more deeply in Clinical Pastoral Education, their perception of the gap between a competency's functional importance and their graduate-level preparation for it grows significantly. This effect is most pronounced in core clinical areas. For instance, in 6.4 Clinical Documentation and 2.6 Spiritual Assessment, which show the largest effect sizes, the mean gap score for chaplains with four or more CPE units is more than double that of chaplains with no clinical training. This pattern holds true for other critical domains, including Engaging with Loss and Grief, providing care in Families in Crisis, and addressing Trauma and Moral Distress.

The Tukey HSD post hoc comparisons reveal the specific dynamics of this trend. For the most affected competencies, the analysis consistently shows that the mean gap reported by the "4+CPE" group is significantly larger than that of both the "Some CPE" and "No CPE" groups. Furthermore, in several key areas, such as Developmentally Appropriate Care, the "Some CPE" group also reported a significantly larger gap than those with no CPE. This "stair-step" effect strongly suggests that it is the experiential, field-based learning of CPE itself that brings the perceived shortfalls of prior academic training into sharp focus. The practical demands of chaplaincy appear to provide a new, more critical lens through which chaplains re-evaluate their foundational education, thereby widening the gap.

In summary, the series of follow-up ANOVAs to the statistically significant and practically important MANOVA results revealed a complex and substantively strong narrative. The level of Clinical Pastoral Education shows a strong and broad correlation with chaplains' professional perceptions. A clear dose-response relationship is evident in the data: increased CPE units are associated with higher functional importance ratings for clinical skills and, simultaneously, a wider perceived "educational gap." This counterintuitive finding is consistent with the hypothesis that intensive, field-based training provides a new lens through which practitioners re-evaluate their academic formation. While this study cannot establish causality, the data strongly suggest that the CPE experience is an important factor associated with how chap-

lains come to view the demands of their profession and the relative adequacy of their graduate education.

Discussion

This study sought to develop and empirically validate a unified, evidence-based competency framework for the multi-sector field of professional chaplaincy while answering three central questions about CBE implementation in complex, relational professions. The findings from our cross-sector survey of 353 practicing chaplains provide robust empirical evidence that both validate our unified framework and reveal significant insights about the current state of chaplaincy education and practice.

Competency Framework Validation

Our systematic approach successfully demonstrated how CBE principles can identify transferable competencies across diverse professional contexts. The normalization process, grounded in C-BEN methodology and Observable Performance Indicators, transformed fragmented sectoral standards into 36 coherent competencies with strong empirical support. The consistently low standard deviations for importance ratings (most below 0.70) provide compelling evidence of professional consensus, validating our approach to identifying core, transferable competencies that transcend sectoral boundaries while maintaining contextual relevance.

Our findings tell a story of both unity and diversity. All chaplains, regardless of setting, report that their graduate education in crisis intervention and trauma response was less than its importance. Nevertheless, the data also reveal striking contextual differences: healthcare chaplains report feeling a deficit in preparation for clinical documentation (gaps of 2.75 and 2.72), while their colleagues in higher education barely register this as a concern (1.02). Context, it seems, shapes competency. The finding that healthcare chaplains rate clinical documentation as extremely functionally important (4.54), while higher education chaplains rate it much lower (3.25), challenges any notion of a monolithic chaplaincy role and empirically supports our framework's balance between universal and sector-specific competencies.

Perhaps most significantly, our Educational Gap metric successfully quantified the misalignment between educational preparation and professional demands. The broad range of gap scores (from −0.05 to 2.35) provides a precise measurement of where theological education succeeds and fails. A pattern is discernible: education excels in traditional domains (worship facilitation, theological self-understanding) but demonstrates substantial deficits in contemporary institutional demands (clinical documentation, systems advocacy, spiritual assessment).

Educational Gap Findings

Our results provide robust empirical evidence of a significant "theory-practice gap" in chaplaincy formation, a phenomenon in which academic learning fails to align with the realities of professional practice. This aligns with DeShon's (2010) national survey of United Methodist clergy, which found that while pastors felt highly

competent in theology and scripture, they reported significant deficits in administration and management, skills they described acquiring only through a "trial by fire." Our data reveal that this bifurcation between theological adequacy and organizational deficit also occurs in the chaplaincy sector.

The outcomes in educational preparedness illustrate this. On the one hand, theological education effectively fulfills its historic mission, as evidenced by the minimal gaps in traditional domains like 1.3 Theological and Traditional Self-Understanding (Gap = 0.29) and 4.5 Facilitating Worship (Gap = −0.05). In stark contrast, the largest gaps cluster around the administrative, systemic, and clinical skills that define contemporary institutional chaplaincy.

The discrepancies are deepest in 6.4 Clinical/Professional Documentation (Gap = 2.35), 5.2 Systems Advocacy for Spiritual Care (Gap = 1.94), and 2.6 Spiritual Assessment (Gap = 1.91). However, these three areas represent only the most acute edge of a systemic shortfall. The data reveal significant educational gaps across 30 of the 36 competencies, indicating that a piecemeal solution focusing only on the "worst offenders" would be insufficient. Notably, two of these primary deficits, documentation and assessment, are competencies central to Clinical Pastoral Education (CPE), which some, but not all, chaplains complete after graduation. This underscores the critical role CPE currently plays in bridging the gap between academic theology and professional practice, effectively compensating for the most urgent omissions in graduate curricula. This pattern aligns with literature (Roth et al., 2014) suggesting that formal education often excels at imparting theoretical knowledge ("knowing *of* practice") while struggling to cultivate the applied wisdom required on the job ("knowing *in* practice").

The competencies with the smallest gaps represent the traditional core of seminary education, namely 1.3 Theological and Traditional Self-Understanding (Gap = 0.29) and 4.5 Facilitating Worship and Group Spiritual Experiences (Gap = −0.05). In distinct contrast, the largest gaps consistently cluster around the administrative, systemic, and clinical skills that define contemporary institutional chaplaincy. This pattern suggests the issue is not a wholesale failure of the curriculum, but rather a "scope limitation": theological education has not yet expanded to meet the full range of competencies required by modern chaplaincy contexts.

These educational gaps offer theological educators a clear mandate for change. The disparities regarding practical, institutional demands are most pronounced. Clinical documentation peaks at (2.35), followed by systems advocacy (1.94) and spiritual assessment (1.91). These represent urgent priorities for curricular attention. However, such reforms must be nuanced, recognizing both sectoral differences and demographic variations in professional priorities. The goal should be to preserve the clear success in traditional areas while strategically expanding the curriculum's scope to address these evidence-based, contemporary demands.

Implications for Clinical Pastoral Education (CPE)

One significant finding is the relationship between Clinical Pastoral Education (CPE) and the perceived educational gap. The data point to a powerful "externality

effect" (Sammons et al., 1983), where the high concentration of need in the clinical setting influences the student's entire perception of the profession. The data indicate that as chaplains accrue more CPE units, the gap between their needs and their prior academic training widens (Table 8). While this may seem counterintuitive, literature on Professional Identity Formation (PIF) from medical education offers a compelling explanation (Cruess et al., 2014; Mount et al., 2022).

We posit that CPE functions as a powerful, immersive experience that catalyzes PIF through professional socialization. Through this process, chaplains develop a more sophisticated and critical understanding of their role, providing them with a new "practitioner's lens" through which they re-evaluate their seminary education. Thus, the widening gap does not signify a failure of CPE, but rather its success in fostering the mature professional judgment necessary to see the limitations of an education that primarily offers theoretical knowledge (Szilagyi et al., 2024). This experience functions as the "consciousness raising" that Martin (1976) advocates, as it is often the first time that chaplains are forced to grapple with the limitations of their prior academic formation.

Beyond formation, these findings hold clear directives for the broader field. For professional certification, a strong consensus on the importance of competency supports the development of standardized, competency-based benchmarks. Our framework provides an empirically validated foundation for such standards, with clear priorities indicated by both functional importance and educational gap data. Similarly, in chaplaincy practice, the finding that different sectors prioritize different competencies should inform continuing education and mentorship, ensuring chaplains are prepared for the specific contexts in which they serve.

Implications for Graduate Theological Education

For theological education, our findings suggest that closing the educational gap requires more than simply adding new courses. The issue is rooted in a cultural disconnect between the "hidden curriculum" of the academy and that of the clinical workplace (Hafferty, 1998). The former implicitly values theological depth and academic discourse, while the latter implicitly values practical efficiency, interdisciplinary communication, and institutional navigation. To truly prepare chaplains for practice, theological institutions must intentionally "un-hide" the curriculum of professional practice by making competencies like documentation, advocacy, and interdisciplinary collaboration explicit, valued, and integrated components of formation, rather than treating them as ancillary skills to be learned later.

This recommendation of "un-hiding" the curriculum aligns directly with foundational theory on this topic. Martin argued that the most powerful response to a hidden curriculum is not just to change the setting, but to "show it to those destined to be its recipients" (Martin, 1976, p. 148). By making the implicit expectations of the clinical setting the explicit subject matter of the seminary's "curriculum proper," theological institutions can engage in a form of "consciousness raising." This pedagogical move equips students with the critical knowledge to assess and resist the hidden curriculum, rather than simply being its passive recipients.

Beyond pedagogical transparency, this transition requires a commitment to conceptual precision. If theological education moves toward outcomes-based models, there is a risk that "competency" becomes a buzzword applied loosely to traditional subject matter. To avoid this, institutions must resist labeling entire fields of study, for example, "History," as if "History" itself were a competency. Content input is not the same as professional outcomes. When a field like History is categorized as a competency, assessments usually default to content mastery rather than applied skill, allowing programs to simply re-label existing courses without shifting their underlying pedagogy. In contrast, a genuine competency defines the application of that knowledge, such as Leveraging Historical Analysis for Contemporary Advocacy. Only by maintaining this distinction can educators move beyond measuring what students know to accurately assessing what they can know, do, and be; thereby ensuring that the move to CBE results in genuine curricular transformation rather than semantic rebranding.

Implications for Broader CBE Application

While this study focused specifically on professional chaplaincy, the methodology and core findings are relevant to a broader class of complex, relational professions that lack coherent, cross-sector credentialing standards. This methodology speaks to professions beyond chaplaincy. Consider the similar challenges faced by social workers, community mental health providers, instructional designers, or academic advisors. Each field navigates multiple sectors with competing standards, struggles to distinguish personal qualities from professional skills, and lacks coherent frameworks for defining competence. Our approach offers these fields a path forward, a way to honor complexity while creating clarity. Similarly, future research could replicate this design with ministers and clergy to assess the importance of traditional theological education programs that seek to address competencies. In each of these fields, the lack of standardized and observable performance-based competencies hinders both educational alignment and workforce readiness.

The design of this study, beginning with multi-source competency aggregation, followed by AI-assisted synthesis into a standardized framework, and validated through an empirical field survey, offers a transferable model for how complex professions might move toward competency-based coherence. By grounding the framework in C-BEN-aligned CBE principles and employing functional importance and educational gap metrics, the methodology balances theoretical rigor with field-tested relevance. It demonstrates that even in professions where outcomes are often interpersonal, emotional, and values-driven, it is possible to operationalize competencies in ways that are assessable, teachable, and empirically validated.

For the broader CBE research community, this project contributes a scalable, replicable model for advancing outcomes-based education in professions that have traditionally resisted such formalization. Rather than imposing reductive technical metrics on nuanced relational work, the framework respects the integrity of complexity while offering a path toward greater alignment between professional preparation

and actual practice. This balance may be especially instructive for sectors looking to implement CBE without eroding the formative, dispositional, and justice-oriented dimensions of their work.

Limitations

This study has several limitations. First, the data are based on self-report surveys, which are subject to potential biases. For example, perceived preparedness is not an objective measure of actual performance. Second, this article deliberately limits its analysis to the variables of the professional sector and Clinical Pastoral Education (CPE). Although our survey collected data on demographics, a full analysis of the differences found across gender and race/ethnicity was excluded from this already lengthy manuscript to maintain a clear focus. The complexity of the data reinforced this decision. For instance, the "non-white" group (n = 60) was significantly smaller than the "white" group (n = 279), and our need to group all non-white chaplains into a single category represents a painful compromise that flattens distinctions. We must therefore acknowledge that this current article, by focusing on sector and CPE, omits a full discussion of critical demographic factors, which will be the subject of a subsequent publication.

Third, this study deliberately focused on professional and sectoral factors rather than religious or denominational variables. While this allowed us to establish foundational competencies that appear to transcend theological boundaries within multiple chaplaincy settings, it may have overlooked variations in how different faith traditions approach spiritual care. The decision to prioritize sectoral analysis over denominational analysis was strategic, given our primary research questions. However, this represents a significant gap that future research should address, particularly as denominational differences may influence both competency prioritization and educational preparation approaches.

Fourth, this quantitative analysis identifies what the gaps are, but cannot fully explain why they exist from an educational or pedagogical perspective. The high variability in educational preparation ratings suggests inconsistency across theological institutions, but institutional-level factors require further investigation. Finally, the cross-sectional design captures perceptions at a single time point, potentially missing changes in competency perception over career stages.

These limitations point toward several productive research directions. Future studies should examine how religious tradition and denominational affiliation influence perceptions of competency and preparation, particularly given the diverse theological contexts within which chaplains are educated. Institutional-level analysis could examine how different theological schools approach chaplaincy preparation, potentially identifying effective pedagogical practices. Longitudinal studies could track how competency perceptions evolve throughout career development, while qualitative research will be needed to explore the experiential factors that contribute to the sectoral and CPE-based differences we identified.

Conclusions

This study successfully demonstrates how CBE principles can be applied to develop a unified competency framework for a complex, multi-sector profession. Our 36-competency framework, empirically validated through a large-scale, cross-sector survey, represents a significant step forward in grounding chaplaincy standards in practitioner-informed evidence. The findings paint a clear picture of a profession in transition, where traditional theological education excels in its historic functions but struggles to address contemporary expectations and emerging needs. Our Educational Gap metric offers a clear, interpretable tool for identifying these critical misalignments between training and real-world demands, providing an empirical foundation for curricular enhancement.

The primary contribution of this research is the delivery of a practical, evidence-based tool for educational reform. The framework, available in Appendix, is designed for immediate application; each competency is undergirded by a set of Observable Performance Indicators (OPIs) that provide the behavioral specificity necessary for competency-based assessment, curriculum alignment, and professional development. The resonance of this model was confirmed further during a recent professional consultation, where a diverse group of practicing chaplains and ministers reviewed the framework with significant enthusiasm, affirming its face validity and potential to clarify professional expectations in real time. This detailed, assessment-ready structure is particularly timely, as it directly supports theological schools in responding to the Association of Theological Schools' (ATS) increasing focus on outcomes-based accreditation. As such, this framework is not just a conceptual model but a ready-to-implement tool for advancing programmatic coherence and educational accountability.

While this study stands on the shoulders of foundational work done by numerous chaplaincy organizations, our contribution addresses a unique challenge: the need for a common, evidence-based language for those who educate chaplains. For a seminary whose graduates enter fields as diverse as healthcare, corrections, and corporate life, the variety of existing rubrics presents a pedagogical puzzle. This cross-sector framework offers a solution. By providing a unified, foundational curriculum, it gives educational institutions confidence that their graduates possess the core capacities for effective ministry, ready to build upon that foundation with the specialized skills demanded by their chosen path.

Finally, this study contributes to the broader research agenda on competency-based education by demonstrating a mixed-methods, practitioner-informed design that is transferable across disciplines. In addressing the challenge of a fragmented profession, this work empowers a new generation of chaplains to provide the highest standard of care and offers a model for how other fields can develop competencies that are empirically tied to the evolving demands of practice.

As the landscape of spiritual care continues to evolve, the demand for institutionally adept and professionally agile chaplains will only intensify. This research provides more than a list of competencies; it offers a foundational blueprint for the

"new educational models" necessitated by the profession's evolution. This framework empowers theological educators to close the critical gap between historical training and contemporary practice demands. In doing so, it equips theological institutions not only to meet the outcomes-based mandates of the future but also to form chaplains who lead with competence, advocate with evidence, and serve with integrity in every context.

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Appendix – Competency Framework for Chaplaincy[1]

Domain 1: Spiritual Care of Self

Definition: Engage in a holistic approach to self-care that sustains personal well-being, fosters ongoing professional growth, and builds resilience essential to the chaplaincy role.

1. **Adaptive Practices for Self-Care**
   Develop adaptable, evidence-based self-care strategies that foster resilience, balance, and well-being to support effective chaplaincy and prevent burnout in diverse professional contexts.
2. **Reflective Practice**
   Engage in self-reflection to gain insight into personal growth and professional impact, enhancing self-awareness, integrity, and compassionate spiritual care practices.
3. **Foundational and Theological Self-Understanding**
   Understand and articulate one's theological or spiritual traditions and frameworks, using this awareness to meaningfully navigate and engage with others' beliefs and practices.
4. **Engagement in Supervision and Peer Review**
   Participate in supervision and peer review to enhance self-awareness, professional growth, and resilience through feedback and reflective learning.
5. **Professional Development**
   Commit to lifelong learning by staying informed about chaplaincy best practices and emerging knowledge, ensuring high-quality and relevant spiritual care delivery.
6. **Evaluating and Applying Research for Best Practices in Chaplaincy**
   Critically evaluate and integrate research findings into chaplaincy practices, making evidence-based decisions to address complex needs and maintain high spiritual care standards.

Domain 2: Spiritual Care of Individuals

Definition: Provide compassionate, culturally sensitive, and effective spiritual care that addresses individuals' diverse spiritual, emotional, and cultural needs.

1. **Empathetic Presence and Cultural Sensitivity**
   Establish meaningful, empathetic relationships and adapt care to recipients' diverse cultural contexts, fostering trust and understanding in spiritual care interactions.
2. **Engaging with Loss and Grief**
   Provide compassionate support to recipients experiencing loss and grief, utilizing grief theories and interventions aligned with emotional, cultural, and spiritual needs.

[1] Domains are shown with definitions. Operational Performance Indicators (OPIs) are listed for each domain.

3. **Addressing Trauma and Moral Distress**
   Offer trauma-informed care, creating safe environments to support recovery from trauma and moral distress while promoting healing and resilience.
4. **Addressing Addiction and Recovery**
   Provide compassionate care to individuals in recovery, integrating spiritual resilience, recovery principles, and tailored interventions for support.
5. **Crisis Intervention and Response**
   Assess and respond to crises with appropriate intervention techniques to stabilize and support recipients' immediate spiritual, emotional, and practical needs.
6. **Spiritual Assessment**
   Conduct thorough and respectful assessments of recipients' spiritual needs using culturally appropriate tools and methods to guide care.

Domain 3: Spiritual Care of Family

Definition: Provide compassionate and context-sensitive spiritual care that recognizes the intricate relationships within families, supporting both individual and collective family needs.

1. **Understanding Family Dynamics in Spiritual Care**
   Apply family systems theory to spiritual care, recognizing how family relationships impact individual well-being and tailoring interventions accordingly.
2. **Developmentally Appropriate Spiritual Care**
   Provide age-appropriate care, adjusting communication and practices to align with recipients' cognitive, emotional, and spiritual development levels.
3. **Supporting Family Communication and Conflict Resolution**
   Facilitate respectful family communication and support conflict resolution to improve spiritual and emotional well-being.
4. **Providing Support for Families During Crisis and Grief**
   Help families navigate crises and loss by offering spiritual and emotional support that promotes resilience, grounding, and comfort.
5. **Supporting Families Impacted by Domestic Violence**
   Provide informed, context-sensitive spiritual care to families affected by domestic violence, prioritizing safety, dignity, and collaborative care with interdisciplinary resources.
6. **Addressing Family Resilience and Growth in Spiritual Care**
   Foster resilience in families by empowering them with shared spiritual practices and values to strengthen bonds and support mutual growth.

Domain 4: Spiritual Care of Communities

Definition: Design and facilitate inclusive, meaningful rituals, worship services, and group spiritual practices that respond to diverse community needs and contexts.

1. **Group Dynamics and Facilitation**
   Apply facilitation skills to create meaningful group experiences while managing dynamics and ensuring equitable participation.
2. **Interfaith Understanding and Practice**
   Demonstrate practical knowledge of diverse religious traditions, fostering mutual respect and engagement in interfaith contexts.
3. **Cultural Competency and Sensitivity**
   Recognize cultural differences, adapting spiritual care approaches to align with recipients' unique cultural values and practices.
4. **Physical and Environmental Design for Spiritual Care**
   Design inclusive, accessible environments that foster shared spiritual experiences and accommodate diverse participant needs.
5. **Facilitating Worship and Group Spiritual Experiences**
   Lead inclusive, meaningful group worship practices that promote connection, participation, and reflection across diverse populations.
6. **Appropriate Use of Prayer**
   Offer contextually sensitive, inclusive prayer in diverse settings, respecting participants' beliefs and comfort levels.

Domain 5: Spiritual Care of Context

Definition: Work effectively within and across institutional structures, demonstrating competence in documentation, collaboration, and advocacy.

1. **Developing Contextual Adaptability**
   Adapt spiritual care knowledge and practices to fit institutional settings, navigating organizational structures and protocols effectively.
2. **Systems Advocacy for Spiritual Care**
   Advocate for the value of spiritual care within institutions, demonstrating its contribution to comprehensive, holistic care.
3. **Community Organizing for Spiritual Care**
   Mobilize communities to address shared spiritual and social needs, fostering collective action through strategic engagement and leadership.
4. **Professional Communication and Collaboration**
   Build effective relationships with colleagues and stakeholders through clear communication and teamwork to support comprehensive care delivery.
5. **Program Development and Implementation**
   Design, implement, and evaluate spiritual care programs to address institutional and recipient needs while aligning with organizational goals.
6. **Clinical/Professional Documentation**
   Maintain accurate, professional documentation that meets institutional standards, ensuring confidentiality and accessibility of records.

Domain 6: Spiritual Care of the Profession

Definition: Advance the chaplaincy profession by upholding ethical standards, maintaining professional integrity, and actively contributing to the field.

1. **Maintaining Integrity and Standards**
   Uphold ethical standards and professional boundaries, ensuring confidentiality, self-reflection, and accountability in spiritual care practices.
2. **Bridging Sacred and Secular Worldviews**
   Translate spiritual principles across sacred and secular contexts to provide inclusive care that resonates with diverse perspectives.
3. **Ethical Decision-Making and Accountability**
   Use sound ethical frameworks to navigate challenges and maintain professional integrity through responsible decision-making and accountability.
4. **Recognizing and Addressing Systemic Injustice**
   Provide care informed by systemic inequities, advocating for justice and addressing barriers to equitable spiritual care.
5. **Incorporating Interdisciplinary Insights**
   Integrate insights from psychology, human development, and other fields into spiritual care, ensuring ethical, personalized, and comprehensive practice.
6. **Technological Literacy for Spiritual Care Practice**
   Use digital tools effectively in spiritual care, balancing personal connection with technological accessibility and ethical considerations.