

RELIGIOUS/SPIRITUALLY INTEGRATED PRACTICE ASSESSMENT SCALE

Source: Oxhandler, H. K. (2019). Revalidating the Religious/Spiritually Integrated Practice Assessment Scale with five helping professions. *Research on Social Work Practice, 29*(2), 223-233. doi: 10.1177/1049731516669592

Purpose: The purpose of this scale is to assess your familiarity with and views about integrating clients' religion and spirituality into clinical practice, which is also called religious/spiritually integrated practice.

Definitions to guide interpretation of scale items (Please read):

1. *Religion* is "a system of beliefs and practices observed by a community, supported by rituals that acknowledge, worship, communicate with, or approach the Sacred, the Divine, God (in Western cultures), or Ultimate Truth, Reality, or nirvana (in Eastern cultures)," relies on scriptures, teachings, and offers a moral code of conduct (Koenig, 2008, p.11).

2. *Spirituality* is "the personal quest for understanding answers to ultimate questions about life, about meaning, and about relationship to the sacred or transcendent, which may (or may not) lead to or arise from the development of religious rituals and formation of community" (Koenig, et al., 2001, p.18)

In addition, while religion and spirituality have two distinct definitions (as shown above), the two terms share many common elements and are often used interchangeably to describe an important area in many people's lives. For the purpose of this scale, please consider the terms religion and spirituality as interchangeable as you respond to the items. In addition, please interpret the term "client" to include patients and "treatment" to include care, depending on the term that is most appropriate for your profession.

The scale contains four sections. Please follow the instructions under each section.

Religious/Spiritually-integrated practice has not been widely disseminated in many clinical training programs. Therefore, like many other practitioners, you may know little about this concept. Nevertheless, please answer all items to the best of your ability, even if you are unsure of your answer, have no opinion, or have had little to no experience with this in practice.

All responses are anonymous; please answer each item according to how you really view religious/spiritually integrated practice.

Thank you for your time and willingness to share your thoughts and opinions on this area in practice! We are truly grateful and hope you enjoy the survey!

Section I. Self-Efficacy with Religious/Spiritually Integrated Practice

Please indicate the response to the right that best fits how much you agree or disagree with the statements regarding religious/spiritually integrated practice.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I know how to skillfully gather a history from my clients about their religious/spiritual beliefs and practices.	SD	D	N	A	SA
2. I am able to recognize when my clients are experiencing religious/spiritual struggles. (e.g. tension or conflict with his/her Higher Power, religious/spiritual community, spiritual beliefs, etc.)	SD	D	N	A	SA
3. I know what to do if my client brings up thoughts of being possessed by Satan or the Devil.	SD	D	N	A	SA
4. I consider the unique needs of diverse clients with different religious/spiritual backgrounds in my practice.	SD	D	N	A	SA
5. I am able to recognize when my clients utilize positive religious/spiritual coping strategies. (e.g. trying to find a spiritual lesson in the presenting issue, etc.)	SD	D	N	A	SA
6. I am able to ensure my clients have access to religious/spiritual resources if they see this as an important aspect to their healing process. (e.g. religious/spiritual reading materials, pastoral counseling, contact information to local clergy, or a prayer room/place of worship).	SD	D	N	A	SA
7. I feel as though I have the skills to discuss my clients' religious/spiritual strengths.	SD	D	N	A	SA
8. I feel confident in my ability to integrate my clients' religious/spiritual beliefs into their treatment.	SD	D	N	A	SA
9. I know when it is beneficial to refer my client to pastoral or religious counseling.	SD	D	N	A	SA
10. I feel as though I have the skills to discuss my clients' religious/spiritual struggles.	SD	D	N	A	SA
11. I am able to recognize when my clients utilize negative religious/spiritual coping strategies. (e.g. viewing the presenting issue as punishment from his/her Higher Power, etc.)	SD	D	N	A	SA
12. I know what to do when my client has religious/spiritual beliefs that I am unfamiliar with.	SD	D	N	A	SA
13. I am comfortable discussing my clients' religious/spiritual struggles.	SD	D	N	A	SA

Please proceed to the next page.

Section II. Attitudes About Religious/Spiritually Integrated Practice

Please indicate the response to the right that best fits how much you agree or disagree with the statements regarding religious/spiritually integrated practice.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. It is essential to assess clients' religious/spiritual beliefs in practice.	SD	D	N	A	SA
2. Integrating clients' religious/spiritual needs during treatment helps improve client outcomes.	SD	D	N	A	SA
3. Practitioners who take time to understand their clients' religious/spiritual beliefs show greater concern for client well-being than practitioners who do not take time to understand their clients' religious/spiritual beliefs.	SD	D	N	A	SA
4. Integrating clients' religious/spiritual beliefs in treatment helps clients meet their goals.	SD	D	N	A	SA
5. I am open to learning about my clients' religious/spiritual beliefs that may differ from mine.	SD	D	N	A	SA
6. Attending to clients' religious/spiritual needs is consistent with the principles of meeting the client where he/she is at.	SD	D	N	A	SA
7. Sensitivity to clients' religious/spiritual beliefs will improve one's practice.	SD	D	N	A	SA
8. I am open to referring my clients to religious or pastoral counseling.	SD	D	N	A	SA
9. Attending to clients' religious/spiritual beliefs is consistent with my profession's code of ethics.	SD	D	N	A	SA
10. Empirically-supported religious/spiritually integrated treatments are relevant to my practice.	SD	D	N	A	SA
11. There is a religious/spiritual dimension to the work I do.	SD	D	N	A	SA
12. I refuse to work within my clients' religious/spiritual belief system if it differs from my own.	SD	D	N	A	SA

Please proceed to the next page.

Section III. Feasibility for You to Engage in Religious/Spiritually Integrated Practice

Please indicate the response to the right that best fits how much you agree or disagree with the statements regarding religious/spiritually integrated practice.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I have enough time to assess my clients' religious/spiritual background.	SD	D	N	A	SA
2. I have enough time to identify potential strengths or struggles related to my clients' religion/spirituality.	SD	D	N	A	SA
3. My primary practice setting does not support the integration of religion/spirituality into practice.	SD	D	N	A	SA
4. I don't have enough time to think about incorporating a religious/spiritually integrated approach to practice.	SD	D	N	A	SA
5. Given the many issues that must be addressed in treatment, I still find time to integrate my clients' religion/spirituality if they communicate a preference for this.	SD	D	N	A	SA
6. I have been adequately trained to integrate my clients' religion/spirituality into treatment.	SD	D	N	A	SA

Please proceed to the next page.

Section IV. How Often Do You Currently Engage in Religious/Spiritually Integrated Practice?

For this section, please indicate the response that best fits the *frequency* with which you currently engage in religious/spiritually integrated practice.

Behavior	Frequency				
	Never	Rarely	Some of the time	Often	Very Often
1. I seek out consultation on how to address clients' religious/spiritual issues in treatment.	1	2	3	4	5
2. I read about ways to integrate clients' religion/spirituality to guide my practice decisions.	1	2	3	4	5
3. I read about research evidence on religion/spirituality and its relationship to health to guide my practice decisions.	1	2	3	4	5
4. I involve clients in deciding whether their religious/spiritual beliefs should be integrated into their treatment.	1	2	3	4	5
5. I use empirically supported interventions that specifically outline how to integrate my clients' religion/spirituality into treatment.	1	2	3	4	5
6. I conduct a full biopsychosocial <i>spiritual</i> assessment with each of my clients.	1	2	3	4	5
7. I link clients with religious/spiritual resources when it may potentially help them (e.g. religious/spiritual reading materials, contact information to local clergy, or a prayer room/place of worship).	1	2	3	4	5
8. I help clients consider ways their religious/spiritual support systems may be helpful.	1	2	3	4	5
9. I help clients consider the religious/spiritual meaning and purpose of their current life situations.	1	2	3	4	5