**Family CARS: Rubric for evaluation of answers to scenarios.**

Read the participant’s full answer to all questions/ scenarios. Then give a global rating on each of the white rows below, then rate on the grey rows. If nothing to gauge it at all, leave blank.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Aspect** | **R= Religion**  **S= Spirituality** | **Clear concern 10%** | **Poor, lack of demo. 30%** | **Minimally competent- ballpark**  **50%** | **Competent**  **Solid demo.**  **70%** | **Exemplary 90%** |
| Efficacious |  |  |  |  |  |  |
| Knowledge of R/S diversity | Recognize unique diversities of R/S within and between families |  |  |  |  |  |
| Skillful of R/S diversity | General R/S diversity skills |  |  |  |  |  |
| Conceptualization | Conceptualize R/S issues in couple/family |  |  |  |  |  |
| Intervention | Identifies R/S resources & interventions |  |  |  |  |  |
| Application | Applies theoretical lens/modalities in treating R/S issues |  |  |  |  |  |
| Attitude |  |  |  |  |  |  |
| R/S Affirmative | Demo of proactive willingness to affirm R/S issues as part of tx |  |  |  |  |  |
| R/S Differentiation | Demo willingness to extend self for R/S inclusive care, regardless of own R/S or expertise level |  |  |  |  |  |
| Self-awareness |  |  |  |  |  |  |
| Awareness | Describe awareness of own R/S Aware of affecting own perception |  |  |  |  |  |
| Reflexivity: | Discuss how experience may affect client/ treatment/ alliance/tx |  |  |  |  |  |
| Specific skills |  |  |  |  |  |  |
| Assess for R/S, (IPRI) | Assess R/S readiness of clients |  |  |  |  |  |
| Identify R/S intervention | Identify an appropriate R/S intervention (i.e. prayer, sacred reading, meditation…) |  |  |  |  |  |
| Use of R/S resources | Seek consultation, training, research, professional or R/S type of resources |  |  |  |  |  |
| Use of Family Systems concepts to R/S case | Apply any Family Systems concepts or theories to case |  |  |  |  |  |
| Ethical practice |  |  |  |  |  |  |
| Mention good ethical practice | Describes ethical practices or refer to code of ethics regarding R/S |  |  |  |  |  |
| taking R/S as presented, not changing, | Maintains integrity of client’s R/S avoid manipulating or coercing. work at the level of the client’s interest and current practices |  |  |  |  |  |

**Case #1:**

Dana is a therapist who has a case that presents for family therapy and talks about conflict over their 22-year-old son who is gay and recently announced he would like to marry his boyfriend. The husband in this family is a traditional religious follower and finds this to be a desecration of the family. The mother, however, is also the same religion but believes that there is no problem with being gay in their religion. She supports her son and believes the proper religious response is to actively support the son’s relationship. You can tell the mother is worried about it although her worry is expressed subtly. The son isn’t sure he wants to do family therapy, doubting it will be helpful.

*What does this case bring up in you? What is your awareness of your reaction to the family's religion/spirituality?*

**Case #2:**

A single mom Carmella presents for treatment concerned about her only son Will, who is 15 and has been diagnosed with ADHD and bipolar disorder from a reputable local child psychologist. His teacher says he might need special education and referred the family for mental healthcare. The family is African-American. The mom relies heavily on her family for support and childcare. Will really loves spending time with his grandmother and cousins, and they seem to accept the odd behaviors that come with his diagnosis. The family is heavily involved in a local Muslim community center with her brother and also the grandmother’s African-Methodist Episcopal church. The two religious groups both engage in many local political and community activities including marches, and rallies which Carmella enjoys and finds meaning in being active in the political work. The mom receives a good deal of her financial support for utility bills and food from these two religious groups. An older woman at the AME church told Carmella she thought her son might be cursed by God or have “some kind of demonic influence over him” and states “I know that sounds kind of crazy, and I don’t mean to sound that way, but he’s just so unusual and odd. Sometimes he like sees ghosts when he’s depressed. And he just seems sorta wild. Sometimes I wonder. My brother doesn't think so but a woman at the AME church asked if he had a demon because he whispers all the time” You are the therapist and just met this family.

*How would you conceptualize the role of religion/spirituality in your conceptualization of this case?*

**Case #3:**

A couple presents to therapy where the husband is a Baptist pastor and the wife also works for the church. Their primary presenting issue is the husband has been using pornography which violates their values for sexuality. It doesn’t appear to be affecting his ability to work, or self-care. But the couple is deeply affected by this. The wife caught her husband watching some pornography and brought the incident to another local pastor for advice. Consequently, the husband’s position in the church is threatened by this discovery where he could be sanctioned but is unlikely to be removed from his position for a “first offense.” The wife is just aghast at the “whole affair.” She is having nightmares, and can’t sleep. The husband is contrite and apologetic but more likely to say it’s a moral problem, not a psychological problem. The wife is convinced it’s both. The couple is asking for a forgiveness intervention and want to use prayer to help them through this struggle.

*What would you need to assess for this case to do a good job addressing their religion/spirituality?*

**Case #4:**

David is a Jewish young man, age 30. He does not believe in God or practice his Jewish faith but appreciates the legacy and history of Judaism. He is engaged to Bindi, age 29 ,a Hindu woman who is a pharmacist. She does practice her faith with her family who also live in Boston. Bindi’s family came to the U.S. from Mumbai India before she was born. They are a proud family who have succeeded in the United States after the parents investment and sacrifice-Bindi and her siblings are all professionals. The family is quite respected in the Hindu community, as they are from the Brahman caste and the father was favored by a guru in the Boston area. The couple is living together for a year now and planning a wedding in another year. The reason to seek counseling is that they have had some disagreements about the wedding planning, and about religion. David is glad to just have a Hindu wedding, since religion isn’t important to him but his mother refuses to attend the wedding if it doesn’t include some Jewish traditions. Words like sacrilege were used by the mother at a family meal recently. Bindi states that she can’t even sleep or eat out of anxiety over the problem. She feels as though she can’t possibly handle the stress of the extended family tension. David seems to be minimizing the problem saying that none of their families actually even really believe in a God or gods, but Bindi finds this very offensive. In individual meeting David wonders if they will be able to withstand pressures. Bindi just seems lost and deeply frightened of losing the man she has loved for several years.

*How might you use couple/family therapy principles to help this family navigate their religious tensions with the wedding planning? Please state any specific principles that you might find helpful.*

**Case #5:**

Trace has a new case of a young couple who are Buddhist and heavily involved in meditative prayer and yoga practice. The couple is 2nd generation Malaysian, living in Washington DC., working in a family business, and quite supportive and loving with each other. They requested couple therapy to assist with adjustments with their 5-year-old daughter who is newly diagnosed with autism. The father is especially anxious about the diagnosis and worries he won’t be able to be a good father to a child with autism. The couple would like to use their prayer, meditation, and yoga practices to help them cope with the stress of parenting and be more accepting of the diagnosis. Trace is not that familiar with Buddhism but does engage in some yoga and mindfulness for her self-care. She asks the couple what they were thinking might work for them with the practices and follows their lead. The wife in the couple begins to pursue her husband to engage in practices together, he withdraws, and they have conflict around the practices.

*What intersections of diversity do you notice in this case?*

*What are you aware of that this case brings up in you around religion and spirituality?*

*How might you use your approach to couple/family therapy to help the parents with this tension around religious practices?*

*How might you, as the therapist, use the couple's Buddhist religion as a resource while respecting the couple's different ways that they would like to practice their prayers?*