

## SECTION 2

# EDUCATION OF PROFESSIONAL CHAPLAINS

### *Editor's Introduction*



In volume 34 of *Reflective Practice* (2014), Kevin Massey started a discussion about the best way to prepare women and men for modern chaplaincy. He noted the growing trend toward evidence-based medicine and patient-centered, outcome-oriented evaluation of medical services. He asked the question, Are modern chaplains sufficiently prepared to deal with these new, emerging models of patient care and medicine? Further, are modern chaplains sufficiently prepared to deal with the complex ethical issues that impact modern hospitals, medical staff, and, of course, patients? Have the demands of modern hospital chaplaincy become so great or so different compared to earlier years that chaplains require a different or augmented kind of training program? In the past, clergypersons often did hospital chaplaincy in retirement, or as a volunteer or on a part-time basis. Chaplaincy is becoming more professionalized. If that is the case, do we not need “new models in forming, training and evaluating chaplains” (p. 144)?

CPE has been the traditional model for the training and professional formation of chaplains. Generally, it has served us well, but is it still enough? Or, to ask a related question, has CPE been too geared toward the task of pastoral identity formation and the training of congregational ministers to adequately train the specialized minister/chaplain? Massey wrote:

CPE has an important role to play in the earlier formation of persons for ministry. At the same time, it may be ill designed to deliver the techniques, skills and advanced competencies needed to work in professional chaplaincy. (vol. 34, p. 147)

Massey proposed a new kind of CPE residency—one that is distinct from level I and level II, one that is tailored to the needs of the person aiming toward a career as a professional chaplain. In concluding, Massey quoted George Fitchett speaking at a meeting of the Association of Professional Chaplains: “Chaplaincy training is broken; let’s fix it.” Three colleagues re-

sponded to Massey's essay with varying degrees of critique, followed by Massey's response to their responses.

In this issue of *Reflective Practice*, volume 35, Alexander F. Tartaglia of Virginia Commonwealth University, in an essay entitled "Reflections on the Development and Future of Chaplaincy Education," continues the discussion. In this well-reasoned and well-documented essay, Tartaglia reviews the history of CPE and places it within its historical context, being attentive to the changes in health care and education that were occurring at the time. He reviews some of the more recent studies of CPE and CPE supervisors themselves. He summarizes the many issues related to the emerging professionalization of hospital chaplaincy, and wonders if CPE is still the most suitable model for the training of chaplains in the twenty-first century. He suggests that, just as Brooks Holifield described the founders of CPE as "moral reformers" within theological education, CPE itself now needs a second moral reformation. Tartaglia then offers a recommendation in the form of a new curriculum model for chaplaincy training that "draws upon the ethical assumptions underlying CPE, the historical development of the movement, and the healthcare environment that calls for a new paradigm" (p. ). The proposed curriculum is a two-year training program that builds upon the CPE foundation but also adds specialized education in chaplaincy to better meet the requirements of board certification by the Association of Professional Chaplaincy and the demands of the modern medical environment. I commend this thoughtful essay to your review. Especially if you are in chaplaincy work, take the time to read this important proposal.

*Reflective Practice* has invited several key leaders in the chaplaincy and pastoral care field to respond to Tartaglia's essay. The first response is by David C. Johnson, who is currently President of the Association for Clinical Pastoral Education, Inc. and has previously served as President of the Association of Professional Chaplains. Secondly, Judith R. Ragsdale, an ACPE Supervisor and Director of Education and Research, Department of Pastoral Care, at Cincinnati Children's Hospital Medical Center, offers her reflections. Thirdly, David A. Lichter, current Executive Director of the National Association of Catholic Chaplains comments. Finally, Joe F. Perez, representing the Association of Professional Chaplains, responds.

I hope that you will find this discussion stimulating and clarifying. Most of all, I hope it contributes to a way to move forward to continue to strengthen the profession of chaplaincy in all its many forms. As I write this introduction, that this discussion about the most suitable way to educate and train professional chaplains is largely an American debate. So I invite reflections and com-

ments from our international readers on this subject to give a more complete picture of what is at stake. How are chaplains trained and formed in your culture, nation and locale? Forward your comments to me or to Dr. Tartaglia. Let's continue and enlarge the dialogue in next year's issue.

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Editor

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