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Critical Wisdom in the Training of Clinical Psychologists

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Critical Wisdom in the Training of Clinical Psychologists

by

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Presented to the Faculty of the
Graduate School of Clinical Psychology
George Fox University
in partial fulfillment
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Doctor of Psychology
in Clinical Psychology

Newberg, Oregon

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CRITICAL WISDOM IN TRAINING PSYCHOLOGISTS

Critical Wisdom in the Training of Clinical Psychologists

Ross Renfro

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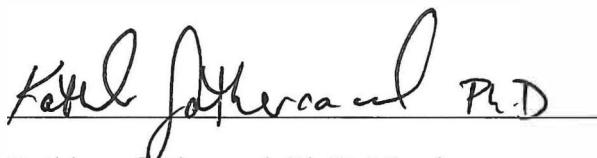
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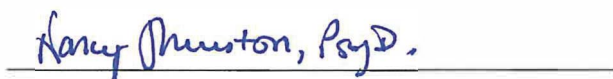
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Critical Wisdom in the Training of Clinical Psychologists

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Abstract

The construct of wisdom has been studied over the past 30 years with the majority of the research focused on wisdom as “expert knowledge in the fundamental pragmatics of life” (Baltes & Staudinger, 2000). In the Christian tradition, wisdom can be divided into two categories: conventional and critical. Conventional wisdom bears striking similarities to the understanding of wisdom used in psychological research. In contrast, critical wisdom addresses the difficult paradoxes of life, but has not been the focus of much empirical study. Critical wisdom could be a helpful construct for clinical psychologists who hope to practice psychology from an integrative faith perspective. This study examines critical wisdom among students at various levels of training in a faith-based clinical psychology doctoral training program. Participants included 96 current graduate students from an explicitly Christian doctoral program in clinical psychology. Both quantitative and qualitative measures were used to assess for differences in critical wisdom across cohorts. Results suggest some evidence the construct of critical wisdom becoming consolidated by the time students are working in postdoctoral fellowships or employed, although

this development is not viewed as linear. Implications are considered for present and future clinicians who hope to practice from an integrative perspective.

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Chapter 1

Introduction

Wisdom has been studied as a psychological construct over the past three decades. Wisdom has shown to have health benefits in both male and females (Ardelt, 1997) and is correlated with life satisfaction in older adults, increased awareness of self and others, and enhanced interpersonal relationships (Ardelt, 1997, 2000; Ferrari et al., 2011; Le, 2011).

Still, studying wisdom has its challenges. Most notably, there is little agreement on effective measurements for wisdom (Bangen et al., 2013), and measurement challenges typically reflect challenges in defining a construct. Wisdom is no exception.

Several definitions have been articulated in past research including components such as: lifespan contextualism (temporal perspective), humility, integrity, enlightened, biographical perspective, maturation, acknowledgement of likelihood of change, and prediction flexibility (Bangen et al., 2013). Even the word “wisdom” has some variation in the literature, as some positive psychologists have preferred the term “perspective” to wisdom (e.g., Park et al., 2004). Wisdom (or perspective) is more than just acquiring or encoding information; -it is putting information to good use based on the context and circumstances of a particular person (Park et al., 2004).

One might assume that even in the absence of good definitions, at least researchers can agree with traditional lore that wisdom increases with age and is most readily found later in the human lifespan. But even this is controversial, as some evidence suggests that the critical

window for growth in wisdom occurs during adolescence, with the greatest growth in wisdom occurring between the ages of 13 and 25, and that very little growth in wisdom occurs after the age of 30 (Pasupathi et al., 2001). Reflecting on the comprehensive life changes faced in adolescence and early adulthood, wisdom is a complex, multidimensional construct reflecting biological changes, affective growth, and exposure to difficult life problems.

Even with its challenges, wisdom is a fitting topic for psychological investigation due to its connection to psychological resiliency, emotional growth, and expanding a person's ability to understand psychosocial stressors (Jeste et al., 2013; Roháriková et al., 2013). It is positively associated with self-exploratory processing of difficult life experiences in the form of meaning making and personal growth (Weststrate & Gluck, 2017). Moreover, the construct of wisdom is historically and culturally rich, having been valued throughout human history, and with different religious and cultural groups formulating using different paradigms to understand the construct (McLaughlin & McMinn, 2015; Walsh, 2015).

The Berlin Wisdom Paradigm

Even before the rapid growth of the positive psychology movement in the United States, the topic of wisdom was studied extensively in different parts of Europe (Baltes & Staudinger, 2000). Baltes and colleagues came to understand wisdom as a multi-dimensional construct that involves expert knowledge in the fundamental pragmatics of life (Baltes & Staudinger, 1993). Baltes's model was consistent with Ardelt's model of wisdom in that it incorporates a finely-tuned coordination of cognition, motivation, and emotion. Baltes and his colleagues used five empirically-based criterion to evaluate wisdom-related knowledge: factual knowledge, procedural knowledge, life-span contextualism, relativism, and uncertainty.

Factual knowledge and procedural knowledge are identified as basic criteria for the meta-model of wisdom. Factual knowledge is concerned with rich, declarative knowledge about the fundamental pragmatics of life. An individual with wisdom in this way likely has a considerable amount of knowledge within a particular domain of life. Another form of basic criteria is rich procedural knowledge in the fundamental pragmatics of life. This form of basic wisdom is concerned with being able to conceptualize higher-form heuristics when solutions are not readily available. For example, if someone's car breaks down on the road, the person needs to have multiple levels of declarative and procedural wisdom to rectify the situation. It becomes a matter of selecting alternative solutions, or having adaptive skills when initial options are not beneficial.

Baltes also describes three meta-criteria specific to wisdom. These criteria were formulated on the basis of lifespan psychology and cognition and personality (Alexander & Langer, 1990; Baltes, 1987, 1997). The first criterion of the theory is lifespan contextualism, which involves considering a problem from a temporal perspective (e.g., an awareness and appreciation of past, present, and future). The second criterion is understanding relativism in values and life priorities. The person who is wise is equipped with discerning tools to evaluate right from wrong while also recognizing that right values can sometimes compete with one another. For example, the values of honesty and kindness may conflict when choosing whether to disclose an annoying habit to one's friend or partner. Values relativism is concerned with evaluating what is good for the common whole, and then separating that person's subjective biases from the judgment. The third meta-criterion from Baltes is that the person who is considered wise lives in a world of uncertainty. The wise person recognizes that there are natural limitations to living in any environment, including what we can know, experience, and

understand about the present reality. Given this understanding, it is difficult to predict the future accurately.

The empirically based efforts by Baltes and others have provided a base for other researchers to study wisdom. However, there may be more to wisdom than understanding the fundamental pragmatics of life.

Christianity and Wisdom

In the Christian tradition, wisdom has been divided into two distinct areas, conventional and critical (McLaughlin et al., 2018). Conventional wisdom refers to generalizable advice for living a good life, and bears resemblance to the definition used in the Berlin Wisdom Paradigm (Baltes & Staudinger, 2000). Biblical examples of conventional wisdom are found in the Old Testament texts of Proverbs, where strategies are offered for how to live a satisfying life. The person who is living with aspirations for conventional wisdom has hopes for living in reality, while also holding steadfast ethics about what is objectively good and true. The goal is to live in accordance with these values and maintain a level of consistency.

However, there is another form of wisdom—critical wisdom—that helps supplement conventional wisdom in a Christian understanding of the world. Critical wisdom is similar to Baltes and Staudinger's (2000) meta-criterion of managing life uncertainty, but critical wisdom seeks to integrate the divine into the theory. Critical wisdom is understood as “seeking discernment and insight amidst the mysteries and paradoxes of life.” (McLaughlin et al., 2018, p. 504).

Critical wisdom is seen throughout the Hebrew Scriptures, perhaps most famously seen in the book of Ecclesiastes. Though there is scholarly debate about the authorship of Ecclesiastes, the book has often been attributed to Israel's King Solomon, who had been

acknowledged as a particularly wise king. By virtue of his kingly status and personal choices, Solomon was a man that was granted all of his earthly desires, and he did not want for anything. However, Solomon identified that he lacked a quality of wisdom that he could not put into language.

I said to myself, "I have acquired great wisdom, surpassing all who were over Jerusalem before me; and my mind has had great experience of wisdom and knowledge." And I applied my mind to know wisdom and to know madness and folly. I perceived that this also is but a chasing after wind. For in much wisdom is much vexation, and those who increase knowledge increase sorrow" (Ecclesiastes 1:16-18, New Revised Standard Version)

Here the author implies that there will always be a great degree of uncertainty in this life, regardless of social status or position. Solomon had been abundantly fortunate in his life, had no unmet desires, was extremely intelligent and wise, yet he did not feel completely content. Critical wisdom recognizes Solomon's dissonance and addresses the mysterious and paradoxical nature of life itself.

Critical wisdom is also seen in the story of Job. Job is described by the author as a man that is "blameless and upright, one who feared God and turned away from evil." (Job 1:1, NRSV). Job also had many possessions that would qualify him as among the elite of his age. He had a large family, wealth, livestock, the respect of his peers, and an abundance of riches. However, in contrast with Solomon, Job's life fell apart due to a series of unfortunate circumstances. The narrative of the story states that he was visited by Satan, after being granted God's permission. Many iniquities and tribulations fell upon Job. He lost everything valuable in his life. He was then surrounded by friends who were deemed unwise and did not provide him

comfort in his sorrow. Job felt immense shame and guilt about his circumstances. He cursed the day he was born. Ultimately, he was rewarded and given twice as much of everything he originally possessed. On the surface, Job was punished unjustly, but the theological paradox is more compelling. Job faced uncertainty in unimaginable ways, and felt the bitterness and loss that is freely apparent in the world. He confronted God in his anger, and then is silenced by God's majestic reply. The final chapter of the book speaks to Job being a different man entirely. He endured suffering, pain, and ultimately learned a different view of what it means to live well.

The most explicit examples of critical wisdom in the Christian New Testament are in the life of Jesus. Jesus healed a number of people on the Sabbath, which is remarkable not only because of the healing but because of the day of the week he chose. In so doing, he was defying calcified religious practices even while breathing new life into how we understand faith. Similarly, Jesus's disciples are seen plucking heads of grain on the Sabbath according to the gospel of Matthew. He is condemned by the religious leaders of his time (Pharisees), as Jesus and his disciples were violating a law of working on the Sabbath day. Jesus retorted and stated that the Pharisees simply do not understand the meaning of the Sabbath. This type of response is beyond the prevailing wisdom of the day. The famous Sermon on the Mount, recorded in Matthew's gospel (Chapters 5-7) is replete with paradox and countercultural teachings. The message of Jesus does not defy conventional wisdom, but enhances it by offering critical wisdom. Jesus doesn't shy away from the confusing, perplexing paradoxes of life that are difficult to examine concretely.

Doctoral Psychology Training and the Current Study

Clinical psychologists, and mental health professionals in general, have a unique role in society. Psychologists understand that realities people face in the past, present, and future can be

complex (Rusiel, 2006). In a study concerning the measurement of wisdom on specific populations, clinical psychologists were found to be as wise as nominated wisdom exemplars (Baltes et al., 1995). Perhaps this reflects the reality that clinical psychologists are exposed to the complexities of life on a day to day basis to a significantly greater extent compared to the general population. Psychologists who practice clinical work are challenged to conceptualize individuals from many different points of view, to work regularly with competing values, and they confront the mysteries and paradoxes of life in various ways.

Some psychologists hold to a committed Christian faith in their personal lives and seek to integrate both theological and psychological understandings of wisdom (McLaughlin & McMinn, 2015). Several accredited training programs are specifically designed to train these explicitly Christian psychologists. The Christian distinction between conventional and critical wisdom may be relevant and helpful to all psychologists, regardless of religious or spiritual orientation, but it may be particularly salient for Christians practicing in the field. The current study is designed to explore critical wisdom development among trainees in an explicitly Christian doctoral training program for health service psychologists. It is hypothesized that more advanced doctoral students will display more critical wisdom than students in earlier stages of training.

Chapter 2

Methods

Participants

The participants of the study were students and recent graduates from an explicitly Christian doctoral program in clinical psychology. Participants ranged from first year students to graduates who are currently engaged in postdoctoral training or employed. Through classroom visits and email, a total of 141 participants across six cohorts were invited to complete the survey. A total of 96 participants initially engaged with the study, however only 84 completed all items on the survey. Therefore, the overall response rate was 68%. Of the initial given sample, the study included responses from 31 first-year students (32.3%), 20 second-year students (20.8%), 17 third-year students (17.7%), 9 fourth-year students (9.4%), 11 current intern students (11.5%), and 8 graduates of the program or postdoctoral fellows (8.3%). With respect to ethnic background, the participants included those who identified as European American (72.9%), Hispanic or Latino (6.3%), Asian -American (5.2%), African -American (3.1%), other (8.3%), and prefer not to answer (4.2%). The age range of the participants was from 21 to 52 years old, with an average of 27.59 years and a standard deviation of 5.28. The gender identity distribution was 65.6% cisgender female and 32.3% cisgender male. An additional 2.1% of participants declined to disclose their gender identity.

Procedures

Participants were notified through email about the general parameters of the study. They engaged in an informed consent process noting that this empirical study is voluntary. Risks of

volunteering for the study and its outcomes were noted in the informed consent document. Participants were connected to online instruments thru a Survey Monkey link in their student email account. The assessment instruments were completed in electronic form.

In order to increase the likelihood of participation for the study, the survey was administered during specific class times of the respective cohorts. However, this could not be done with the current interns and the graduates of the program. Therefore, these participants were given detailed instructions for the survey in the email.

Instruments

The Complex Postformal Thought Questionnaire

The Complex Postformal Thought Questionnaire (PFT) is a 10-item questionnaire designed to assess complex cognitive capacity and multidimensional levels of postformal thinking. Its items are scored on a 7-point Likert-type scale (1 = *not true*, 7 = *very true*). The PFT has three factor loadings including *Multiple Elements*, *Subjective Choice* and *Underlying Complexities*. The scale was developed by Jan Sinnott and has a reliability coefficient of 0.63 (Cartwright, Galupo, Tyree, & Jennings, 2009).

The Wise Thinking and Acting Questionnaire

The Wise Thinking and Acting Questionnaire (WTHAQ) is a 13-item self-report using a 4-point rating scale. This scale primarily measures the cognitive attributes of wisdom. The WTHAQ has three subscales including *Practical Wisdom*, *Dialectical Thinking*, and *Awareness of the Uncertainty*. Dialectical thinking is most closely related to the construct of critical wisdom. The scale has a reported internal consistency of 0.74 (Bangen, Meeks, and Jeste, 2013).

The Duke University Religion Index

The Duke University Religion Index (DUREL) is a 5-item self-report measure of religious involvement. The measure is designed to assess levels of organizational religious involvement and intrinsic religious activity. This scale will allow for a measure of correlation between postformal thought and organized religious involvement. The scale has a test-retest reliability of 0.91. Cronbach's alpha was measured from a range of 0.78 to 0.91. The measure has high convergent validity with other measures of religiosity, with r 's ranging from 0.71 to 0.86 (Koenig & Bussing, 2010).

The Spiritual Well-Being Scale

The Spiritual Well-Being Scale (SWBS) is a 20-item self-report measure that is designed to assess vertical spirituality, life satisfaction, and emotional well-being. The purpose of including the SWBS is to include a personal, subjective evaluation of the participants' perceived spiritual health. Correlations between perceived spiritual health and critical wisdom will be analyzed. The SWBS has consistently displayed test-retest reliability of 0.85. Internal consistency was evaluated at 0.84 or higher in seven different samples, indicating good reliability (Bufford et al., 1991).

The Satisfaction With Life Scale

The Satisfaction With Life Scale (SWLS) is a 5-item self-report instrument designed to measure global cognitive judgments of satisfaction within one's own life (Diener et al., 1985). The SWLS is a 7-point Likert response scale. The range of scores is from 5-35, with "20" representing a neutral point on the scale. The coefficient alpha has ranged from .79 to .89, suggesting high internal consistency (Pavot & Diener, 2008).

Clinical Vignettes

Clinical vignettes were used to measure critical wisdom from a qualitative perspective. The vignettes were shaped with the purpose of measuring paradoxical or nuanced thinking in relation to life situations. The participants were given two scenarios and tasked to provide insight and clinical wisdom from a psychological perspective. Vignette responses were scored by computing a sum of numbers by scoring both the *pathway* and the *complexity* of the responses. That is, could the participant offer both a path for resolution for the individual in the scenario, and also manage to offer ways to interpret the complexity of the case scenarios. The scores of both scenarios were summed into an aggregate total. The scenario sums were evaluated for interrater reliability.

Chapter 3

Results

Data Analysis

This is a mixed-methods study, meaning there are both quantitative and qualitative dimensions. The quantitative approach was utilized with the scales noted in the previous chapter. Descriptive statistics can be found in Table 1.

In addition to descriptive statistics, analyses of variance (ANOVAs) were used to compare students at various levels of training on the dependent measures with Least Square Difference (LSD) post-hoc comparisons used to identify cohort differences on scales where overall differences were detected. Also, the relationships between religious involvement, spiritual well-being, and wisdom were evaluated through correlational analyses. Qualitative methods were utilized with the two clinical vignette responses, using content analysis to rate responses to the vignettes. Each response was rated for pathway and complexity, where the former identifies a way forward in the situation presented in the vignette and the latter acknowledges that easy answers will not suffice given the nuances of the scenario. An overall score combining pathway and complexity ratings was computed for each participant and each scenario. These overall scores were then used to determine if differences exist at various levels of training. Two raters computed scores for pathway complexity using a three-point scale (1 = *not present*, 2 = *present*, 3 = *enriched*) and then these two values were summed for the overall wisdom rating. The inter-rater reliabilities using Pearson product moment correlations were

acceptable (Scenario 1 = .68, Scenario 2 = .76) so one of the rater's sums were used for all subsequent analyses.

Table 1

Means and Standard Deviations of Scales

Scale	<i>n</i>	CFT-M <i>M</i> (SD)	CFT-S <i>M</i> (SD)	CFT-C <i>M</i> (SD)	WTA- PW <i>M</i> (SD)	WTA- DT <i>M</i> (SD)	WTA- AU <i>M</i> (SD)	SWB-R <i>M</i> (SD)	SWB-S <i>M</i> (SD)	Duke-O <i>M</i> (SD)	Duke-N <i>M</i> (SD)	Duke-I <i>M</i> (SD)	SWL <i>M</i> (SD)	Scen 1 <i>M</i> (SD)	Scen 2 <i>M</i> (SD)
Year in program															
First year	31	5.38 (.80)	5.14 (.78)	5.50 (.94)	3.09 (.37)	3.28 (.38)	2.42 (.60)	4.64 (1.08)	4.74 (.53)	3.97 (1.30)	3.77 (1.55)	3.68 (1.07)	4.81 (.93)	3.83 (.83)	3.87 (1.04)
Second year	20	5.15 (.88)	4.62 (1.17)	5.58 (.66)	2.78 (.37)	3.20 (.38)	2.28 (.62)	4.09 (1.49)	4.74 (.64)	3.80 (1.32)	2.85 (1.53)	3.62 (1.21)	5.03 (.88)	4.00 (.97)	4.20 (1.20)
Third year	17	5.25 (.98)	4.67 (.85)	5.29 (.58)	3.09 (.38)	3.40 (.32)	2.39 (.47)	3.92 (1.16)	4.87 (.70)	3.41 (1.46)	3.18 (1.59)	3.37 (1.03)	4.73 (.98)	3.75 (.86)	3.44 (.81)
Fourth year	9	5.50 (.63)	5.11 (1.12)	5.85 (.73)	3.19 (.26)	3.35 (.44)	2.48 (.57)	4.64 (1.40)	4.90 (.32)	3.43 (1.99)	3.71 (1.98)	3.62 (1.19)	5.26 (.85)	4.67 (1.21)	4.33 (1.37)
Intern	10	5.78 (.67)	5.00 (.74)	5.43 (.72)	3.08 (.45)	3.44 (.31)	2.74 (.64)	4.78 (1.21)	4.89 (.39)	3.11 (1.36)	3.78 (1.48)	3.74 (1.12)	5.29 (1.13)	4.00 (.58)	3.83 (1.17)
Postdoctoral/ Graduate	7	5.68 (.67)	5.00 (.96)	6.38 (.49)	3.14 (.43)	3.31 (.26)	2.67 (.51)	4.51 (1.15)	4.90 (.54)	3.00 (1.29)	2.57 (1.51)	3.76 (0.76)	5.40 (.82)	5.17 (.75)	4.67 (.82)
Total	94	5.38 (.82)	4.91 (.94)	5.57 (.78)	3.03 (.39)	3.31 (.36)	2.44 (.58)	4.38 (1.25)	4.80 (.56)	3.62 (1.40)	3.36 (1.60)	3.61 (1.07)	4.97 (.93)	4.02 (.94)	3.95 (1.09)

Note. CFTQ-M = Complex Postformal Thought (Multiple Elements). CFTQ-S = Complex Postformal Thought (Subjective Choice). CFTQ-C = Complex Postformal Thought (Underlying Complexity). WTA-PW = Wise Thinking and Acting Questionnaire (Practical Wisdom). WTA-DT = Wise Thinking and Acting Questionnaire (Dialectical Thinking). WTA-AU = Wise Thinking and Acting Questionnaire (Awareness of Uncertainty). SWB-R = Spiritual Well Being-Scale (Religious Well-Being). SWB-S = Spiritual Well-Being Scale (Existential Well-Being). Duke-O = Duke University Religion Index Organized Religious Activities. Duke-N = Duke University Non-Organized Religious Activities. Duke-I = Duke University Religion Index Intrinsic Religiosity. SWL = Means of the 7 items of the Satisfaction with Life Scale. Scen 1 = The means of the sum of scores of the first case vignette. Scen 2 = The means of the sum scores of the second case vignette.

Between Group Differences

Repeated measures ANOVAs were used to determine any statistical differences between the groups (cohorts). The hypothesis of this study is that students would differ in critical wisdom, with more advanced students and graduates showing greater levels of wisdom than those earlier in training. There were significant differences in the complexity subscale of the PFT, $F(5,88) = 2.47, p = .041$. LSD post-hoc comparisons revealed that postdoctoral participants scored significantly higher than first-year students ($p = .007$), second-years students ($p = .018$), third-year students ($p = .002$), and interns ($p = .013$). They did not differ significantly from the current fourth-year students ($p = .17$).

There was also a significant difference for the first vignette scores between groups, $F(5,79) = 3.25, p = .01$. Again, based on LSD post-hoc comparisons, the postdoctoral cohort scored higher than the first- ($p = .001$), second ($p = .006$), and the third-year cohorts ($p = .001$). Fourth-year students scored higher than first-year ($p = .038$) or third-year participants ($p = .033$).

Finally, there was a significant difference between groups for the practical wisdom on the Wise Thinking and Acting Questionnaire, $F(5,86) = 2.50, p = .0374$. This subscale is more strongly related to conventional wisdom rather than critical wisdom. Second-year participants scored lower than all other groups, including first-years ($p = .005$), third ($p = .014$), fourth-year students ($p = .011$), current interns ($p = .045$), and postdoctoral participants ($p = .029$).

Correlational Analyses

Pearson product-moment correlations were computed to examine relationships between the dependent variables, both qualitative and quantitative. Although not many of the correlation coefficients found were particularly strong, a number were statistically significant. Pertaining to the hypothesis, the Dialectical Thinking subscale of the WTHAQ was moderately correlated with

the Multiple Elements subscale of the PFT ($r = .41$). Also, the Multiple Elements subscale was moderately correlated with the Complexity subscale of the PFT ($r = .49$). The Multiple Elements subscale was moderately correlated with the Awareness of Uncertainty subscale on the WTHAQ ($r = .43$). Not surprisingly, the Religious Well-Being subscale of the SWB scale correlated strongly with the Intrinsic Religiosity subscale of the DUREL ($r = .80$), and it also correlated highly with Non-Organized Religious Activity subscale of the DUREL ($r = .65$).

Wisdom Nominations

The majority of the assessment materials were of self-report nature. In an effort to balance this, the students were asked to nominate three members of their cohort who they deem as wise using the operational definition of critical wisdom. The number of times a person with a unique identification number was nominated was correlated with scores on other dependent variables. There were not any strong correlations for the number of times a participant was nominated and their corresponding case scenarios summed scores, postformal thinking, or wise-thinking and acting scores. However, there was a significant correlation between number of times nominated and the Organized Religious Activity subscale of the DUREL ($r = .28$).

Chapter 4

Discussion

The goal of this study was to investigate the development of critical wisdom in an explicitly Christian doctoral psychology program. While there are many definitions of wisdom in historical and scientific literature, critical wisdom is a theological construct. In the literature, there have been many studies on the development of wisdom from a conventional perspective. These studies have focused on the cognitive and motivational factors of wisdom. Critical wisdom is a subset of wisdom which is not commonly discussed. For the purposes of this study it was operationalized as a combination of postformal thought, nuanced thinking, and making sense of the difficult paradoxes of life. As a whole, the study has enigmatic qualities due to the abstract nature of the construct and the difficulties mentioned in the measurement of critical wisdom.

The hypothesis of the study purported there would be significant differences between groups in critical wisdom as students progressed through their graduate training program. This was found to be only partially true. Statistically speaking, there were significant differences between the group of postdoctoral students on the complexity element of postformal thinking, and also for the first vignette item. However, the hypothesis assumes a linear trajectory of critical wisdom, but the data does not reflect this assertion. Still, postdoctoral respondents scored higher on two measures of critical wisdom than students in the first three years of doctoral training.

By the time students have earned their doctoral degree in psychology, -they understand some consistencies of how human behavior operates, but they also understand that not all is

predictable. This was particularly reflective of the postdoctoral students in the responses of the first case vignette. Their responses reflected a certain clinical maturity, awareness, and acceptance of the realities in clinical work. Generally, the qualitative responses of this group were longer and displayed greater intuitional depth. In comparison, other groups responses were less elaborate and did not entertain the thought of the difficult nuances often seen in clinical work.

Clinical implications of the study may focus on the value and rigor of graduate training and the role of critical wisdom in its influence on budding psychologists. Graduate school is difficult. There are many developmental changes a growing clinician might encounter during training (i.e., relational stressors, the aging of parents, financial stress, adaptation to a new environment, etc.). In parallel to personal development, students are being transformed intellectually and emotionally in their clinical training as they are exposed to myriad clinical techniques, interventions, theories, and are expected to consolidate this knowledge through practice. The growing clinician is exposed to many different clients, but also different methods of teaching and supervision. The exposure to different types of cases and predicaments allows for intellectual and affective stretching. This exposure could allow for a greater influx of critical wisdom development, but could also vary depending on a variety of factors.

Many theoretical orientations have attempted to assert the challenge of holding competing thoughts in tension. While critical wisdom is viewed as a theological construct which can have an effect on personal psychological wellness, it bears remarkable similarities to ideas in contemporary therapies. Contextual behavioral science offers postmodern therapies that offer meaning and purpose, differentiating themselves from more traditional orientations. Marsha Linehan purports in her heavily influential philosophy of Dialectical Behavior Therapy that one

becomes increasingly mindful and aware when engaged with dialectical tension (Chapman, 2006). Thus, holding two ideas in tension can help foster an attitude of radical acceptance. When we accept reality as it is, coping becomes easier. Similarly, the philosophy of accepting the present moment in Acceptance and Commitment Therapy encourages the individual to name their thoughts, emotions in a nonjudgmental, graceful manner (Zettle, 2011).

Learning these theories during early years of training may not have the same impact on critical wisdom as practicing them late in training and early in one's career. The results of the study reveal that students in the postdoctoral cohort scored higher on two measures of critical wisdom compared to the other cohorts. This may suggest that these clinicians who have spent significant time in practice develop a higher threshold of critical wisdom. Although students learn theoretical knowledge during their graduate program, the results of critical wisdom do not bear fruit until they are working full time. Given time, instruction, and experimental freedom with appropriate supervision, a growing clinician may have an increased ability to hold tension.

Various limitations of the study should be noted. The distribution of the participants was not equal. Namely, there were four times the number of first year participants compared to postdoctoral students. This raises the possibility of response bias, where those who chose to respond might be systematically different than those who did not respond. Relatedly, the number of participants in the first three cohorts were administered the survey during their class time, and the fourth-years, current interns, and postdoctoral members were administered through email. This likely had an effect on the responses, as the ones who completed the survey on their time did not have the social pressure of completing the assessment during class time.

As previously noted, there are significant measurement issues when studying a complex construct such as critical wisdom. For example, the scales used were almost exclusively

positively worded. Although the title of the survey was labeled “Perspective” for the participants, it is possible, perhaps likely, the participants could have scored themselves higher on scales to create a more favorable social impression. There is also the issue of the scales being exclusively self-report, with one exception: participants were asked to rank members of their cohort they deemed as wise. The purpose of this was to hope to find correlations with self-report measures, but this was not supported. Another consideration to the limitations of this study is the natural development of critical wisdom. Although critical wisdom could be developed through the rigors of graduate school clinical work, this cannot be said as being the only way. Though research has focused on wisdom being developed in middle or late adulthood, there is also evidence that little develops after 30 (Pasupathi et al., 2001). Given the average age of 27 for the participants of this study, there is reason to believe that critical wisdom could be developing due to outside circumstances (life experience, relational growth, spiritual growth) or stressors unrelated to the participants’ graduate training.

Future research in this area could focus on re-evaluating critical wisdom within different populations of developing psychologists for comparison purposes. Although a strength of this study was the ability to evaluate a community of graduate students at different phases of training, it could be interesting to evaluate practicing psychologists from different cultural and religious backgrounds. Another method of research that could be helpful in the future is to develop a scale of measurement which adequately measures the construct of critical wisdom. One of the challenges of measurement for this study was using multiple scales to validate one construct. If a specific scale was developed to measure critical wisdom, there could be increased utility and clinical application for the associated findings.

Conclusion

Holding multiple truths in tension is a challenging task. It requires maintaining attention to one's own cognitions, affect, motivation, and context. Postmodern behavioral science has brought a significant shift in how we hold tensions and conceptualize competing values. Living with complexity can also be seen in the Christian theological notion of critical wisdom. Christians who are trained psychologists are presumably in a good position to develop critical wisdom as a central practice.

In this study, there is some evidence that budding psychologists practicing from an integrated, Christian worldview are developing critical wisdom. There will need to be increased empirical studies on its formation, development, and other issues related to psychometric utility for a greater understanding.

References

- Alexander, C. N., & Langer, E. J. (Eds.). (1990). *Higher stages of human development: Perspectives on adult growth*. New York, NY: Oxford University Press.
- Ardelt, M. (1997). Wisdom and life satisfaction in old age. *The Journals of Gerontology: Series B: Psychological Sciences and Social Sciences*, *52*, 15–27.
- Ardelt, M. (2000). Intellectual versus wisdom-related knowledge: The case for a different kind of learning in the later years of life. *Educational Gerontology*, *26*, 771–789.
- Bangen, K. J., Meeks, T. W., & Jeste, D. V. (2013). Defining and assessing wisdom: A review of the literature. *The American Journal of Geriatric Psychiatry*, *21*, 1254–1266.
- Baltes, P. B. (1987). Theoretical propositions of life-span developmental psychology: On the dynamics between growth and decline. *Developmental Psychology*, *23*, 611–626.
- Baltes, P. B. (1997). On the incomplete architecture of human ontogeny: Selection, optimization, and compensation as foundation of developmental theory. *American Psychologist*, *52*, 366–380.
- Baltes, P. B., Staudinger, U. M., Maercker, A., & Smith, J. (1995). People nominated as wise: A comparative study of wisdom-related knowledge. *Psychology and Aging*, *10*, 155–166.
- Baltes, P. B., & Staudinger, U. M. (1993). The search for a psychology of wisdom. *Current Directions in Psychological Science*, *2*, 75–80.
- Baltes, P. B., & Staudinger, U. M. (2000). Wisdom: A metaheuristic (pragmatic) to orchestrate mind and virtue toward excellence. *American Psychologist*, *55*, 122–136.
- Bufford, R. K., Paloutzian, R. F., & Ellison, C. W. (1991). Norms for the Spiritual Well-Being Scale. *Journal of Psychology and Theology*, *19*, 56–70.

- Cartwright, K. B., Galupo, M. P., Tyree, S. D., & Jennings, J. G. (2009). Reliability and validity of the Complex Postformal Thought Questionnaire: Assessing adults' cognitive development. *Journal of Adult Development, 16*, 183–189.
- Chapman, A. L. (2006). Dialectical behavior therapy: Current indications and unique elements. *Psychiatry, 3*(9), 62–68.
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment, 49*, 71-75.
- Ferrari, M., Kahn, A., Benayon, M., & Nero, J. (2011). *Phronesis, sophia, and hochma: Developing wisdom in Islam and Judaism. Research in Human Development, 8*, 128-148.
- Jeste, D. V., Savla, G. N., Thompson, W. K., Vahia, I. V., Glorioso, D. K., Martin, A., & Depp, C. A. (2013). Association between older age and more successful aging: Critical role of resilience and depression. *American Journal of Psychiatry, 170*, 188-196.
- Koenig, H. G., & Büssing, A. (2010). The Duke University Religion Index (DUREL): A five-item measure for use in epidemiological studies. *Religions, 1*, 78–85.
- Le, T. N. (2011). Life satisfaction, openness value, self-transcendence, and wisdom. *Journal of Happiness Studies, 12*, 171-182
- McLaughlin, P., & McMinn, M. R. (2015). Studying wisdom: Toward a Christian integrative perspective. *Journal of Psychology and Theology, 43*, 121–130.
- McLaughlin, P. T., McMinn, M. R., Morse, M., Neff, M. A., Johnson, B., Summerer, D., & Koskela, N. (2018). The effects of a wisdom intervention in a Christian congregation. *The Journal of Positive Psychology, 13*, 502–511.
- Park, N., Peterson, C., & Seligman, M. E. P. (2004). Strengths of character and well-being. *Journal of Social and Clinical Psychology, 23*, 603–619.

- Pasupathi, M., Staudinger, U. M., & Baltes, P. B. (2001). Seeds of wisdom: Adolescents' knowledge and judgment about difficult life problems. *Developmental Psychology, 37*, 351–361.
- Pavot, W., & Diener, E. (2008). The Satisfaction With Life Scale and the emerging construct of life satisfaction. *Journal of Positive Psychology, 3*, 137–152
- Roháriková, R., Špajdel, M., Cviková, V., & Jagla, F. (2013). Tracing the relationship between wisdom and health. *Activitas Nervosa Superior Rediviva, 55*, 95-102.
- Ruisel, I. (2006). About the effect of rational, dialectical and critical thinking on wisdom. *Studia Psychologica., 48*, 81-94.
- Walsh, R. (2015). What is wisdom? Cross-cultural and cross-disciplinary syntheses. *Review of General Psychology, 13*, 278–293.
- Weststrate, N. M., & Glück, J. (2017). Hard-earned wisdom: Exploratory processing of difficult life experience is positively associated with wisdom. *Developmental Psychology, 53*, 800–814.
- Zettle, R. D. (2011). The evolution of a contextual approach to therapy: From comprehensive distancing to ACT. *International Journal of Behavioral Consultation and Therapy, 7*(1), 76–82.

APPENDIX A

Informed Consent

The purpose of this study is to study a psychological construct known as “perspective.” Participating will take approximately 20 minutes to complete this survey, which includes both items with particular rating-scale options and some short written answers.

Your participation in this study is completely voluntary. There are no foreseeable risks associated with this project. However, if you feel uncomfortable with any of the questions, you are free to withdraw from the study at any point.

Your survey responses will be strictly confidential and the data from this research will be reported only in the aggregate. If you have any questions about the study, please contact Ross Renfroe (renfroe17@georgefox.edu) or Mark McMinn (mmcminn@georgefox.edu).

APPENDIX B**Scales****Complex Postformal Thought Questionnaire**

Please respond to each item below by circling the number that best describes you on the following scale: 1 = Not True (of self) and 7 = Very True (of self)

1. I see paradoxes in life (Paradoxes are inherent contradictions in reality).

1 2 3 4 5 6 7

2. I see more than one method that can be used to reach a solution or decision on a problem or issue.

1 2 3 4 5 6 7

3. I am aware that I can decide which reality or truth to experience at a particular time; but I know that reality and truth is really multi-level and more complicated.

1 2 3 4 5 6 7

4. There are many “right” ways to define any life experience; I must make a final decision on how I define the problems of life.

1 2 3 4 5 6 7

5. I am aware that sometimes “succeeding” in the everyday world means finding a concrete answer to one of life’s problems, but sometimes it means finding correct path that would carry me through any problems of this type.

1 2 3 4 5 6 7

6. Almost all problems can be solved by logic, but this may require different types of “logics.”

1 2 3 4 5 6 7

7. I tend to see several causes connected with any event.

1 2 3 4 5 6 7

8. I see that a given dilemma always has several good solutions.

1 2 3 4 5 6 7

9. I realize that I often have several goals in mind, or that life seems to have several goals in mind for me. So I go toward more than one in following my path in life.

1 2 3 4 5 6 7

10. I can see the hidden logic in others’ solutions to the problem of life, even if I don’t agree with their solutions and follow my own path.

1 2 3 4 5 6 7

The Wise Thinking and Acting Questionnaire

Please respond to each item below by circling the number that best describes you on the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree

1. Through the experience and the knowledge I have obtained so far, I have built well-formulated views and attitudes as far as important moral matters of modern life are concerned.

1 2 3 4

2. Owing to my various experiences in life, I feel competent enough to handle different situations or -when asked- advise people who face similar situations.

1 2 3 4

3. The way I act in everyday life is not only defined by what my sense, experience or heart says, but mainly by what my principles dictate to me.

1 2 3 4

4. When people ask for my advice regarding a dilemma, I usually try my advice to serve, first of all, the values that rule life (e.g., the value of life, of family).

1 2 3 4

5. When I want to fully understand an important event that has happened to me, I usually try to look at it from different angles. That is, look at it not only from my point of view but also from the perspective of those who were involved in this event or of a third party who views event from a distance.

1 2 3 4

6. When I have to reach an important decision, I take into account as many aspects as possible. That is, I take into consideration what my sense, my heart, my experiences, my principles, etc., say.

1 2 3 4

7. When I come up across a difficult situation, I usually try to consider various factors which may have affected the formation of this situation (e.g., from luck to intentional action, from my affect to external circumstances)

1 2 3 4

8. I am usually open to and interested in different viewpoints, because this way I can form a more complete and clear opinion about an issue.

1 2 3 4

9. When I hear different or opposing views on a matter or a person, I usually search for common ground that may underlie these views.

1 2 3 4

10. When I discuss with other people or with myself about life issues, I can usually distinguish different arguments, e.g., which are the strongest in terms of reason or the strongest from a more subjective, experiential point of view.

1 2 3 4

11. When I plan tomorrow's schedule, I usually think about the possibility that something happens and as a result my plans would be reversed.

1 2 3 4

12. The saying "it changes in an hour what happens not in 7 years" is almost always true for me when I plan my future.

1 2 3 4

13. I often think about death. This makes me get cold feet and on the other hand, it teaches me not to pay much attention to transient glory, wealth and the small daily problems.

1 2 3 4

The Spiritual Well-Being Scale

Please read the following items and select a response. The responses range from "1" to (Completely Disagree) to "6" (Completely Agree)

1. I don't find much satisfaction in private prayer with God.

1 2 3 4 5 6

2. I don't know who I am, where I came from, or where I'm going.

1 2 3 4 5 6

3. I believe that God loves me and cares about me.

1 2 3 4 5 6

4. I feel that life is a positive experience.

1 2 3 4 5 6

5. I believe that God is impersonal and not interested in my daily situations.

1 2 3 4 5 6

6. I feel unsettled about my future.

1 2 3 4 5 6

7. I have a personally meaningful relationship with God.

1 2 3 4 5 6

8. I feel very fulfilled and satisfied with life.

1 2 3 4 5 6

9. I don't get much personal strength and support from my God.

1 2 3 4 5 6

10. I feel a sense of well-being about the direction my life is headed in.

1 2 3 4 5 6

11. I believe that God is concerned about my problems.

1 2 3 4 5 6

12. I don't enjoy much about life.

1 2 3 4 5 6

13. I don't have a personally satisfying relationship with God.

1 2 3 4 5 6

14. I feel good about my future.

1 2 3 4 5 6

15. My relationship with God helps me not to feel lonely.

1 2 3 4 5 6.

16. I feel that life is full of conflict and unhappiness.

1 2 3 4 5 6

17. I feel most fulfilled when I'm in close communion with God.

1 2 3 4 5 6

18. Life doesn't have much meaning.

1 2 3 4 5 6

19. My relationship with God contributes to my sense of well-being.

1 2 3 4 5 6

20. I believe there is some real purpose for my life.

1 2 3 4 5 6

The Duke University Religion Index

Please circle the following option that best describes you

1. How often do you attend church or other religious meetings?

1 - Never; 2 - Once a year or less; 3 - A few times a year; 4 - A few times a month;
5 - Once a week; 6 - More than once/week.

2. How often do you spend time in private religious activities, such as prayer, meditation or Bible study?

1 - Rarely or never; 2 - A few times a month; 3 - Once a week; 4 - Two or more times/week; 5 - Daily; 6 - More than once a day

The following section contains 3 statements about religious belief or experience. Please mark the extent to which each statement is true or not true for you.

3. In my life, I experience the presence of the Divine (i.e., God).

1 - Definitely not true; 2 - Tends not to be true; 3 - Unsure; 4 - Tends to be true; 5 - Definitely true of me

4. My religious beliefs are what really lie behind my whole approach to life.

1 - Definitely not true; 2 - Tends not to be true; 3 - Unsure; 4 - Tends to be true; 5 - Definitely true of me 5.

5. I try hard to carry my religion over into all other dealings in life .

1 - Definitely not true; 2 - Tends not to be true; 3 - Unsure; 4 - Tends to be true; 5 - Definitely true of me

The Satisfaction with Life Scale

Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

- 7 - Strongly agree
- 6 - Agree
- 5 - Slightly agree
- 4 - Neither agree nor disagree
- 3 - Slightly disagree
- 2 - Disagree
- 1 - Strongly disagree

____ In most ways my life is close to my ideal.

____ The conditions of my life are excellent.

____ I am satisfied with my life.

____ So far I have gotten the important things I want in life.

____ If I could live my life over, I would change almost nothing.

APPENDIX C**Clinical Vignettes****Case 1**

John is a freshman student at a private, Christian university. John was raised by his parents in an affluent background, and both of his parents are financially successful. They are so successful that they have opted to pay for John's entire college experience, provided that John decides on a major that is pleasing to them. John is interested in foreign languages, international relations, and other liberal arts majors for his future. However, his parents are hopeful he chooses mechanical engineering, economics, or business as a major. What do you think John should do, and why?

Case 2

Mara is a 27-year-old woman from a fundamentalist religious family. During her time in medical school, Mara develops a relationship with Benjamin, from a different religious faith. Mara considered converting to Benjamin's religion, which is his expectation for anyone he would marry, but also worries about the challenges this might cause her family. Indeed, upon learning about the relationship, Mara's father becomes enraged and declares, "If I ever see this man with you anywhere near our home, you will no longer be part of this family." What do you think Mara should do about her predicament?

APPENDIX D**Curriculum Vitae****ROSS B. RENFROE**

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EDUCATION**PsyD Clinical Psychology**

George Fox University, Newberg, OR

2022

APA accredited

Doctoral Dissertation: "Critical Wisdom in the Training of Clinical Psychologists"

Anticipated Graduation May 2022

MA Clinical Psychology

George Fox University, Newberg, OR

2019**MA Counseling Psychology**

The University of Texas at Tyler, Tyler, Texas

2014**BA Psychology- Cum Laude**

The University of Texas at Tyler, Tyler, Texas

2011**LICENSES**

Licensed Professional Counselor – Texas (#73144)

2/2017-Present**CLINICAL TRAINING EXPERIENCE****Pre-Intern—Doctoral Student Clinician****8/2020-6/2021**

Portland State University Student Health and Counseling, Portland, OR

- Population: Primarily nontraditional, ethnically diverse clientele at an urban university counseling center.
- Provided administration of assessment batteries for student concerns often related to attention, learning, and other issues related to executive functioning. This is primarily an assessment practicum rotation.
- Facilitated psychoeducational groups to enhance study skills, academic success, and overall executive functioning improvement

- Supervisors: Karen Ledbetter, PsyD and Lane Weeks-Dewan, PsyD

Practicum II—Doctoral Student Therapist

8/2019-5/2020

George Fox University Health and Counseling Center, Newberg, OR

- Population: Ethnically/racially diverse undergraduate students, nontraditional students, first-generation college students
- Provided individual therapy for students struggling with anxiety, trauma, depression, college-life adjustments, relational issues, spiritual/existential issues with a focus on time-limited therapy.
- Provided psychoeducational assessments for students struggling with issues contributing to their academic performance
- Supervisors: William C. Buhrow, PsyD & Luann Foster, PsyD

Supplemental Practicum— Doctoral Student Therapist

5/2019-8/2019

Behavioral Health Clinic, Newberg, OR

- Population: Ethnically diverse, lower income adult individuals from greater Newberg and Yamhill County in rural Oregon.
- Provided brief, individual behavior therapy from both cognitive behavioral and humanistic perspectives. Individuals presented with challenges related to depression, anxiety, suicidal/homicidal ideations, relational stress, marital stress, and financial concerns.
- Supervisor: Joel Gregor, PsyD

Practicum I— Doctoral Student Therapist

8/2018-5/2019

Linfield College Student Health, Wellness and Counseling Center, McMinnville, OR

- Population: Ethnically/racially diverse undergraduate students, some nontraditional students, first generation college students, student athletes
- Provided individual therapy for students struggling with depression, anxiety, issues related to gender dysphoria, sexual identity, spiritual/existential issues, eating

disorders, personality disorders, and complex medical issues

- Provided psychoeducational assessment batteries to determine appropriate academic accommodations for potential learning disability or neurocognitive disorders
- Supervisors: Sally Godard, MD & Joel Gregor, PsyD

Pre-Practicum Therapist

1/2018-5/2018

- Population: Undergraduate students
- Provided individual therapy for two students from a client-centered orientation
- All sessions video recorded and reviewed by supervisors
- Supervisors: Glenna Andrews, Ph.D & Nicole Ford, MA

OTHER CLINICAL EXPERIENCE

LPC Internship— Qualified Mental Health Professional

9/2014-6/2017

Dallas Metrocare Services, Dallas, TX

- Population: Adult Individuals suffering from pervasive and persistent mental illness throughout Dallas County. Individuals served were ethnically, religiously, and sexually diverse.
- Provided a wide-range of services included but not limited to: individual counseling, group counseling, collaboration of care, triage services, psychosocial rehabilitation, transportation, consultation with interdisciplinary team of professionals, crisis intervention services, and psychoeducational groups.
- Supervised by Paul Cuppett, PsyD, LPC-S and Jessica Martinez, MA, LPC

Psychometrician

7/2013-5/2014

Clinical Associates of East Texas, Tyler, TX

- Population: Lifespan of individuals from Tyler, Texas and surrounding East Texas rural areas. Individuals served ages ranged from 2 years to 84 years.
- Performed administration and scoring responsibilities for a variety of assessment batteries. Assessments referral questions were typically related to ADHD, learning disabilities, neurocognitive impairment, disability evaluation for the state, memory impairment, social or relational problems, and personality assessments for goodness of fit.

Intake Therapist

1/2014-5/2014

Andrews Center, Tyler, TX

- Population: Lower income individuals from Smith County. Individuals were ethnically diverse.
- Provided individual therapy services for individuals on the waitlist and performed screening duties via telephone, skype, and live.

RESEARCH EXPERIENCE

Doctoral Dissertation: “Critical Wisdom in the Training of Clinical Psychologists”

Preliminary Oral Defense was successful in January 2020.

Final Oral Defense was successful via zoom on July 22, 2020.

Dissertation Chair: Mark McMinn, Ph.D, ABPP, Licensed Psychologist

Dissertation Committee Members: Kathleen Gathercoal, Ph.D, and Nancy Thurston, PsyD, ABPP/CL, Certified Psychoanalyst

Research Vertical Team Member

Member of a collaborative team to help support, guide each students research projects to full fruition.

Supervisor: Mark McMinn, Ph.D, ABPP, Licensed Psychologist

PUBLICATIONS

Renfroe, R., McMinn, M., Gathercoal, K., Thurston, N., (2020). *Critical Wisdom in the Training of Clinical Psychologists*. Manuscript in preparation.

TEACHING EXPERIENCE

Teaching Assistant

- Biological Basis of Behavior- Spring 2019
 - Graded essays, provided feedback to students about learning progression, provided study sessions for upcoming exams
- Clinical Foundations- Fall 2020
 - Mentored, instructed, and taught person-centered theory to first-year students in the PsyD program.
 - Met with students weekly to review videos, go over graded assignments, discuss course content, and process acclimation to doctoral school
 - Supervised by Aundrea Paxton, PsyD

SELECTED PROFESSIONAL TRAINING

Clinical Team**2017- Present**

- Consultation group that meets on a weekly basis for clinical training. Students and mentors bring relevant clinical cases from practicum training sites.

- Consultants: Kris Kays, PsyD, Brooke Kuhnhausen, Ph.D, Kenneth Logan, PsyD, and Winston Seegobin, PsyD

Professional Training Experiences

- *Telepsychology Best Practices 101: Clinical Evaluation and Care: Cultural Competencies; Documentation-* Marlene M. Maheu, PhD
 - APA Training presented virtually in light of COVID-19 pandemic
- *Telepsychology Best Practices 101: About the Tech... Video, Email, Text Messaging & Apps-* Marlene M. Maheu, PhD
 - APA Training presented virtually in light of COVID-19 pandemic
- *Telepsychology Best Practices 101: Legal, Regulatory & Ethical Rules of the Road-* Marlene M. Maheu, PhD
 - APA Training presented virtually in light of COVID-19 pandemic
- *Intercultural Communication-* Cheryl Forster, PsyD
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2019 Colloquium, Newberg, Oregon
- *Promoting Forgiveness-* Everett Worthington, Ph.D
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2019 Colloquium, Newberg, Oregon
- *Foundation of Relationships Therapy- The Gottman Model-* Douglas Marlow, Ph.D
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Spring 2019 Grand Rounds, Newberg, Oregon
- *Spiritual Formation and the Life of a Psychologist: Looking Closer at Soul-Care-* Lisa G. McMinn, Ph.D and Mark McMinn, Ph.D
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2018 Colloquium, Newberg, Oregon
- *Working with Patients with Chronic Pain-* Scott Pengelly, Ph.D
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2018 Grand Rounds, Newberg, Oregon
- *Relational Psychoanalysis-* Roy Barsness, Ph.D
 - Presented at The Hilton Inn, Vancouver, WA, May 2018
- *Integration and Ekklesia-* Mike Vogel, PsyD
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Spring 2018 Colloquium, Newberg, Oregon
- *History and Application of Interpersonal Psychotherapy-* Carlos Taloyo, Ph.D
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Spring 2018 Grand Rounds, Newberg, Oregon
- *Telehealth-* Jeffrey Sorhdal, PsyD

- Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2017 Colloquium, Newberg, Oregon.
- *Using Community-Based Participatory Research (CBPR) to Promote Health in American Indian/American Native Children, Youth and Families-* Eleanor Gil-Kashiwabara, PsyD
 - Presentation Presented at George Fox University, Graduate School of Clinical Psychology at Fall 2017 Grand Rounds, Newberg, Oregon.

ASSESSMENTS TRAINED AND SUPERVISED

- Bender Visual Motor Gestalt Test
- Booklet Category Test, 2nd Edition
- Boston Naming Test
- California Verbal Learning Test 2
- Comprehensive Test of Nonverbal Intelligence
- Connor's Adult ADHD Rating Scales
- Connor's Continuous Performance Test II
- Delis-Kaplan Executive Function System
- Grooved Pegboard
- House-Tree-Person
- Mini Mental Status Exam
- Millon Clinical Multiaxial Inventory- III
- Minnesota Multiphasic Personality Inventory 2
- Minnesota Multiphasic Personality Inventory 2 RF
- Montreal Cognitive Assessment
- Nelson-Denny Test of Reading
- Personality Assessment Inventory
- Rey Complex Figure Test and Recognition Trial
- Sentence Completion
- St. Louis University Mental Status Exam
- Thematic Apperception Test
- Wechsler Abbreviated Scale of Intelligence II
- Wechsler Adult Intelligence Scale IV
- Wechsler Intelligence Scale for Children IV
- Wechsler Memory Scales IV
- Wechsler Preschool and Primary Scale of Intelligence IV
- Wide Range Achievement Test 4
- Woodcock- Johnson IV Tests of Achievement
- Woodcock- Johnson IV Tests of Cognitive Abilities

MEMBERSHIPS/LEADERSHIP ACTIVITIES

Student Member, American Psychological Association

2017- Present

Admissions Committee, Doctor of Psychology, George Fox University

2019-2020

REFERENCES

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