



CMSM Pre-Assembly

The Role of Leadership in Vocation Work

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Best practices in screening

1. Overview of Proper Law in assessing applicants
2. Use of mental health professional(s)

What to ask for – elements of the assessment

What to expect back

3. A view of how to use the feedback most effectively

Questions – hopefully, ones with easy answers



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Use of Mental Health Professionals

The professional you use should be suited to offer testing across the spectrum of the person's psychological dynamics. Typically, this will be a clinical psychologist. Other licensed psychotherapists (while they may be conversant in psych testing) are not usually licensed to do this type of psychological evaluation.

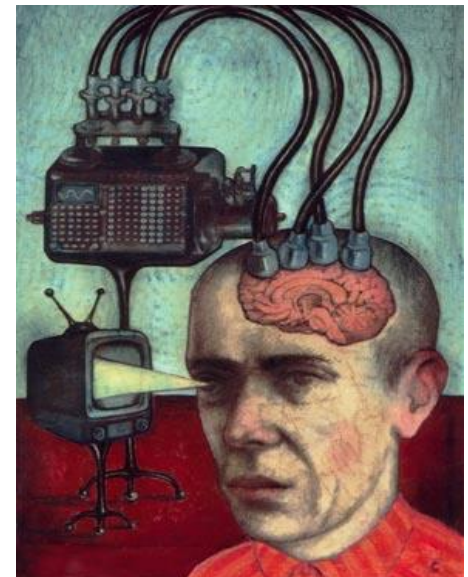
In evaluating a candidate, you want *at least these areas* covered:

Psychological/Characterological Insights

Intellectual Testing

Life History

Behavioral



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Use of Psych Assessment Professionals – Ask for . . .

Psychological Characterological Insights:

Clinical Interview

typically includes: Family of Origin (FOO) information, Mental Status Exam results, and work/educational history

Sexual History: commonly part of the clinical interview but augmented in the case of an applicant to RC seminary. Dating history, previous marriages, etc



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Use of Psych Assessment Professionals – Ask for . . .

Psychological Characterological Insights:

Personality

MMPI/MCMI

16-PF

MBTI, FIRO-B

Versus

Projective testing

Rorschach

Robert's apperception test

Sentence Completion Test



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Use of Mental Health Professionals – Ask for . . .

Intellectual testing yields Intelligence Quotient (IQ) score. Not an indication of learning ability but of potential & perceptual strengths. Perception, dealing with new situations, and abstraction are common areas of exploration.

Common instruments: Wechsler Scales, Stanford Binet, Raven's Progressive Matrix
Yields an IQ score.

IQ Range is 100 +/- 10 points. Therefore:

Very Superior = 130+; Superior = 120-129; Hi Ave = 110-119; Ave = 90-109;

Low Ave = 80-89; Borderline = 70-79; Intellectual Disability (DD) = 69 & below.

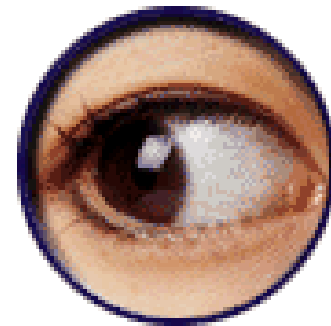
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Use of Mental Health Professionals – Ask for . . .

Life History yields some insight into what candidate may have experienced, possible patterns in coping, stress management, awareness, potential ranges of continue patterns of FOO, and some insight about styles of (interpersonal) interacting.

Two important elements in the current generation of applicants may be

1. Interpersonal Experience
2. Reality Testing/Perception
3. Generational affiliation



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Use of Mental Health Professionals – Ask for . . .

Life History yields some insight into what candidate may have experienced, possible patterns in behavior, perception, potential choices to continue patterns of FOO, and some insight about styles of interacting.

Two important elements in the current generation of applicants will be

1. Interpersonal Experience

- Some applicants will not have had dating experience, been involved in in-person settings in school or after school. They may have extensive online relationships but little experience in one-one interaction. This might be a deficit when entering ministry since most ministerial settings still demand interpersonal skills.

2. Reality Testing/Perception.

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Use of Mental Health Professionals – Ask for . . .

Life History yields some insight into what candidate may have experienced, possible patterns in behavior, perception, potential choices to continue patterns of FOO, and some insight about styles of interacting.

Two important elements in the current generation of applicants will be

1. Interpersonal Experience
2. Reality Testing/Perception
 - Some candidates will have a world view which is limited in scope. This can appear as a naïve approach to life & may be a challenge in ministry with a broad spectrum of people, since they see the world as “Catholic” vs. “Non-Catholic” or “Obedient” vs. “non-Obedient.”

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Use of Mental Health Professionals – Ask for . . .

Life History yields some insight into what candidate may have experienced, possible patterns in behavior, perception, potential choices to continue patterns of FOO, and some insight about styles of interacting.

Two important elements in the current generation of applicants will be

1. Interpersonal Experience
2. Reality Testing/Perception
3. **Generational Affiliation**
 - Boomers (1946-64)
 - Gen X (1965-79)
 - Millennials (1980-94)
 - iGen (1995-2010)
 - Alpha (2011-24)

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Use of Mental Health Professionals – Finally ask for . . .

Behavioral – We know that “The past is best predictor of future.”

Set general goals for change & specific change goals within specific time frame.

Measure growth & success incrementally and in concrete terms. i.e., a candidate who drags his feet getting application paperwork to Vocation Director will (likely) drag his feet in other ways. A candidate who has difficulty with finances before & while applying, will (likely) have difficulty with finances in the future. Paying off his bills is only one aspect of his growth.

Can he prioritize tasks effectively & maintain the practice of financial restraint going forward? Are the real questions

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A view of how to use the feedback most effectively

- Major superior access to information in small bits. Do not leave experts alone to weigh in; superior ought to know basics. For example, observations noted by the Vocation Director, personal observations when meeting the applicant, interpersonal traits noted by others & reported to superior all get added to impressions of the psychologist. Finally, when the candidate is interacting more closely with the formators, in a pre-novitiate setting, etc. all the information is collated to give a general impression of the candidate's suitability.
- “What” & “How Much” questions need to be asked when change/growth is needed?
- How many? How much? Exactly what is observed?

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A view of how to use the feedback most effectively

- Major superior access to information in small bits.
- “What” & “How Much” questions need to be asked when change/growth is needed?
What is the desired change? Specifically, what are you looking for in change?
For example, a candidate is often late to prayer in the pre-novitiate house. Do we structure him up with reminders & external prompts (external locus of control)? Or do we plan an intervention where we talk about the issues getting in his way, decide on a way to address them, and see if he independently responds adequately? (internal locus of control).
- How many? How much? Exactly what is observed?

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A view of how to use the feedback most effectively

- Major superior access to information in small bits.
- “What” & “How Much” questions need to be asked when change/growth is needed?
- How many? How much? Exactly what is observed?
 - “you are often late to prayer. It is distracting for myself and others. Can we agree that you will be in the chapel five minutes before the allotted time?”

Then the community/staff track whether he is there five minutes before. Simple yes or no data. Then we see if 3 out of 5 or 5 out of 5 times per week he can adapt and self-regulate.

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Finally, words to the wise

After the psychological assessment, if the psychologist, leadership team, or the formulators believe the candidate needs some counseling, consider the following:

1. The evaluating psychologist is NOT the one to do the follow-up counseling. That person has a specific role in your evaluation process. Do not complicate the role of evaluator of candidate with on-going therapy.
2. Have a set of psychological consultants you can use to review specific aspects of your acceptance process. You may have concerns about the contents of the psych report or questions about the exact nature of the counseling needed. You ought to have people to give you feedback whom you trust regarding how best to proceed.
3. Sending someone to do psychotherapy always involves a referral question. Express the need for counseling in a specific area of functioning and with a clear referral goal. Simply identifying that "this guy needs counseling" is not sufficient.



Questions?



Everyone seems
normal until you
get to know them

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Brief Bibliography of Relevant Documents

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