



# Research-Grounded Encounter Realism Standard

*crainEOS*

Chaplain Resource Network · Marsh Institute for Chaplains

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## 1.4.2 — Research-Grounded Encounter Realism Standard

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**crainEOS Division 1.4 (Media & Storytelling) — third-level chunk.** Sibling of 1.4.1 (Emotion Expression & Nonverbal Communication Reference). Established by Ken, 2026-07-04.

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### 1. Purpose and Scope

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**One sentence:** every scenario encounter is built FROM the issue's research brief — the signs, coping, emotions, nonverbals, and severity a learner sees are the ones the evidence says this issue actually produces — so the scenario validates the chaplain's ability to recognize where the care recipient is and to CARE for them appropriately.

**Why this chunk exists:** the scenario builder offered full rosters (all signs, all coping mechanisms, all emotions) regardless of the issue chosen. A grief scenario could carry hypervigilance signs that belong to trauma; a compassion-fatigue case could skip the numbing the literature says defines it. Realism was author-dependent. This standard makes it evidence-dependent: the 19-source research brief for the chosen CRN-ISS issue drives what the builder offers, what the script shows, and what QA verifies.

**Scope:** all 10 CRN contexts (Public Safety, Healthcare, Military, Corrections, Community, Corporate, Education, Airport / Transportation, Disaster Relief, Sports & Recreation) and every scenario-generated artifact: builder choices, generated prompts, scripts, case-dramatization media, lesson assessments, and the SME sign-off packet.

**Not in scope:** the emotion vocabulary itself (1.4.1 owns morphology), the brief-writing standard (the 19-source / scite / links / Logos gates own that), the chaplain conduct card (Do/Never card owns that).

### 2. The Cascade (canonical selection order)

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The builder and the pipeline follow this order. Each step CONSTRAINS the next.

1. **Context** (field you serve) — one of the 8.
2. **Topic category** → **CRN-ISS issue** — the issue is chosen from the category, and carries its setting.
3. **Research brief read.** The issue's 19-source brief ( `OUTPUTS/CRN/research-briefs/CRN-ISS-NNN-*.md` ) is the evidence base for everything downstream. If the issue has no passing brief, the pipeline STOPS and produces the brief first — no scenario builds on an unbriefed issue.
4. **Care recipient profile** — the person the scenario is built around, plausible for the context and issue demographics per the brief.

5. **Signs that present** (6 dimensions: Physical, Emotional, Cognitive, Behavioral, Spiritual, Relational — ICISF CISM + CRN Relational) — the roster is FILTERED AND RANKED to the signs the brief evidences for this issue. Brief-evidenced signs surface first and are marked; signs the literature contradicts for this issue are suppressed. Open several dimensions, pick all that apply.
6. **Maladaptive coping present** (domain → mechanisms nested) — same rule: the brief's evidenced mechanisms lead the list.
7. **Emotions and nonverbals** — updated to match the research: emotion families and intensities the brief associates with the issue, rendered per the 1.4.1 morphology standard. Presenting emotion and core emotion may differ (see §4.2).
8. **Severity / degree** — chosen on the acuity axis (§3): the same issue presents differently new versus chronic, and the emotion intensities, sign density, and coping entrenchment scale with it.
9. **Everything else** (who else is present, routing, org/program) follows.

**The invariant:** a downstream choice never contradicts the brief. An author may still select an off-list item deliberately (clinical judgment, SME direction), but the builder marks it **off-evidence** and the QA gate requires a one-line justification in the scenario record.

### 3. The Acuity Axis (new-to-chronic severity calibration)

Severity is not one dial; it is WHERE THE PERSON IS IN THE COURSE of the issue. Canonical stages:

Stage	Time frame	How it changes the presentation
<b>First exposure / new</b>	hours-days	Raw, unfiltered affect; acute-stress signs (shock, disorientation); no entrenched coping yet; high emotional accessibility; support network still mobilized
<b>Acute</b>	days-weeks	Full-intensity signs across dimensions; early coping attempts (adaptive and maladaptive) forming; sleep/appetite disruption visible; still narrates the event readily
<b>Episodic / recurrent</b>	weeks-months	Signs cycle with triggers (anniversaries, calls, shifts, diagnoses); coping habits established; masking begins; ambivalence about help
<b>Chronic</b>	months-years	Blunted or flattened presenting affect over a heavy core emotion; entrenched maladaptive coping; identity fusion with the issue ("this is just who I am now"); relational and spiritual erosion dominant; help-seeking fatigue
<b>Compounded / cumulative</b>	career-span	Multiple stacked losses/exposures; generalized signs unmoored from a single event; cumulative-grief pattern; highest masking, lowest self-report accuracy

Rules:

- The builder exposes this axis as one required choice after signs/coping.

- Emotion INTENSITY (1.4.1 mild/core/intense) is calibrated to the stage: new-acute skews intense-and-labile; chronic skews mild-surface-over-intense-core.
- Sign density and dimension spread scale with the stage (new = concentrated; chronic = spread across all 6 dimensions, especially Spiritual and Relational).
- Coping entrenchment scales with the stage: new = experimental; chronic = defended, rationalized, resistant to naming.
- The brief's course-of-condition findings override these defaults where they differ.

## 4. Realism Requirements (beyond the cascade)

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These are the additional evidence-based realism mechanics every scenario encounter carries, so the learner practices RECOGNITION, not checklist-matching.

### 4.1 Incongruence cues

What the person SAYS and what their body SHOWS must diverge somewhere in the encounter ("I'm fine" with a 1.4.1 sadness-core face). The learner's task is noticing the gap. At least one deliberate incongruence beat per scenario.

### 4.2 Presenting vs core emotion (outside-in)

Per the CRN Encounter Model: the person opens with the presenting emotion (often anger, irritability, flatness) and the core emotion (grief, fear, shame) sits beneath. The script reveals the core only as the chaplain earns it through open questions. Never open on the core.

### 4.3 Masking and guardedness scale with context and stage

Public Safety, Corrections, and Military personnel mask harder and longer (occupational culture); chronic-stage recipients mask more than new-stage. The builder's context + acuity choices set the masking level the script must honor.

### 4.4 Protective factors present

Real people bring resources, not only deficits: faith practices, family, unit/shift cohesion, humor, prior survived losses. Every scenario names at least one protective factor the chaplain can help the person reconnect to (the Empower step of CARE).

### 4.5 Ambivalence, not compliance

The care recipient wants and does not want help in the same encounter. Scripts show approach-withdraw movement; a scenario where the person simply opens up on request is a realism defect.

## 4.6 Setting constraints shape the encounter

The setting carried by the issue (rig bay, bedside, cell block, fellowship hall, disaster staging area) constrains privacy, time, interruptions, and proxemics (1.4.1 §3.2). Scripts honor the interruption and time-pressure profile of the setting.

## 4.7 Cultural and faith-tradition fidelity

Expression norms for emotion, grief, and help-seeking vary by culture and tradition; the brief's population findings govern. All 3 Abrahamic faiths are represented across the library per the SME packet rule; aggregate diversity per the character-diversity rule.

## 4.8 Safety thresholds honored

If the brief's evidence for the issue includes elevated risk (suicidality, violence, abuse, medical emergency), the scenario includes the recognition-and-referral beat — the chaplain recognizes threshold signs and connects to the appropriate resource. Never an unaddressed safety cue, and never a crisis raised that the scenario leaves unsurfaced (chaplaincy-voice rule).

## 4.9 The CARE validation frame

The scenario exists to validate the chaplain's ability to: **Connect** (presence, trust), **Assess** (recognize the signs, coping, emotion, and stage the builder encoded — See/Hear/Sense/Learn), **Respond** (within the Do/Never card), **Empower** (protective factors, next steps, referral). The lesson's assessment items map each encoded element to a recognition or response behavior — if the builder encoded `sadness-core masked by annoyance-mild, chronic stage, isolation coping`, the assessment tests whether the learner CAUGHT that, not trivia about the topic.

# 5. Data Layer

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**Where the data comes from (remediation, Ken 2026-07-04):** the pre-existing 19-source brief did NOT systematically collect presentation data — it collected teaching evidence, DSM-5-TR/ICD-11 correlates, and faith framings. Three amendments close the gap:

1. **New mandatory brief section — "Encounter Presentation Profile"** (rubric item A10): signs by the 6 dimensions, maladaptive coping (domain → mechanism), emotion families + intensity ranges, course of condition across the §3 stages, risk thresholds + referral triggers, protective factors, and population/cultural presentation notes — every cell cited.
2. **Source #20 — Clinical Practice Guidelines corpus** (VA/DoD CPGs, SAMHSA TIPs, NICE, WHO mhGAP): the evidence-graded home of sign inventories, course staging, severity criteria, and protective factors.

3. **Source #21 — validated assessment instruments** (ProQOL, PCL-5, PHQ-9/GAD-7, PG-13/ICG, MBI, FICA/HOPE): operationalized sign lists with severity anchors that calibrate the acuity axis. Referenced conceptually, never reproduced (instrument copyright). Existing briefs written before 2026-07-04 lack section A10 and get a **backfill pass** (extract the profile from their already-cited literature plus the #20/#21 sources) before their issues become builder-selectable with filtering; until backfilled, the builder flags `no-research-profile` per below.

**Per-issue research profile:** `STATE/issue-research-profiles/CRN-ISS-NNN.json` — extracted from the issue's brief on brief approval. Fields: `issue_id`, `contexts`, `signs` (per dimension, each with an evidence pointer to the brief section), `coping` (domain → mechanisms), `emotions` (family + intensity range), `course` (stage-specific notes), `risk_thresholds`, `protective_factors`, `population_notes`, `brief_path`, `extracted_ts`.

- The profile is a PROJECTION of the brief, never a second source of truth. Brief changes regenerate the profile in the same change.
- The builder reads the profile at issue-select time; missing profile = the builder shows the full roster UNFILTERED and flags `no-research-profile` on the captured scenario (visible on /pipeline and blocking at the QA gate).

## 6. Interfaces (by number)

Interface	Direction	What crosses
1.4.1 Emotion & Nonverbal Reference	consumes	Morphology for every emotion the profile selects; intensity calibration per §3
8.1 Autonomous Pipeline & Terminal SME Gate	consumed by	The research-match invariant + <code>off-evidence</code> justifications enter the QA/diff gate and the SME packet
7.1 Gold Master Standard	consumed by	Realism requirements (§4) join the diff-QA checklist
Scenario builder ( <code>T00LS/dashboard/scenario-builder-v2.html</code> )	implements	The cascade (§2), acuity axis (§3), profile-driven filtering (§5)
<code>STATE/scenario-prompt-template.md</code>	implements	Generated prompts carry the profile's evidence, stage, masking level, incongruence beat, protective factor, and CARE validation map
Research briefs ( <code>OUTPUTS/CRN/research-briefs/</code> )	consumes	The evidence base; the 19-source / scite / links / Logos gates precede this standard
CRN Encounter Model + CARE method + Do/Never card	consumes	Outside-in emotion flow, Connect/Assess/Respond/Empower frame, chaplain conduct bounds

## 7. PRE checklist (before a scenario builds)

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1. Issue has a PASSING brief (scite, links, Logos gates green).
2. Research profile exists and is newer than the brief's last edit.
3. Builder selections carry zero unjustified `off-evidence` items.
4. Acuity stage chosen; emotion intensities consistent with it.
5. Incongruence beat, protective factor, and masking level present in the capture.
6. **Clearance processed:** every third-party resource the build consults appears in `STATE/source-clearance-registry.tsv` with a CLEARED or REFERENCE-ONLY verdict; any item not yet in the registry is processed (license posture verified, verdict + boundary recorded) BEFORE the build proceeds; BLOCKED items are not consulted as inputs.

## 8. POST checklist (before SME sign-off)

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1. Script's signs/coping/emotions trace to the profile (spot-check three against the brief).
2. Presenting-vs-core emotion structure present; core revealed through questions, never announced.
3. Safety cues (if profile carries risk thresholds) recognized and referred in-script.
4. Assessment items map to the encoded recognition targets (§4.9), not topic trivia.
5. Acuity stage visibly shapes the performance (1.4.1 morphology at the calibrated intensity).
6. **Clearance verified:** the shipped artifact reproduces nothing from a REFERENCE-ONLY or BLOCKED registry item (spot-check against `STATE/source-clearance-registry.tsv`); every consulted resource carries its registry verdict in the build record.

## 9. Self-Healing

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Failure	Root cause	Fix	Prevention
Scenario built on unbriefed issue	Cascade step 3 skipped	Stop; produce the brief; rebuild	Builder blocks capture when no passing brief is registered
Signs contradict the literature	Full roster shown unfiltered	Regenerate profile; re-select	<code>no-research-profile</code> flag blocks the QA gate
Chronic case plays like an acute one	Acuity axis ignored at render	Re-direct performance per §3 calibration	POST checklist item 5
Compliant, maskless recipient	§4.3/§4.5 skipped in scripting	Rewrite with ambivalence + masking	Prompt template carries both as mandatory beats
Assessment tests trivia	§4.9 map not built	Rebuild items from the encoded targets	SME packet includes the validation map

## 10. Metrics

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- Scenarios with passing brief + fresh profile at build time: target 100%.
- Unjustified off-evidence selections reaching the SME gate: target 0.
- Scenarios carrying incongruence beat + protective factor + acuity stage: target 100%.
- Assessment items traceable to encoded recognition targets: target 100%.

## 11. Change Control

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This chunk derives from crainEOS Division 1.4 and Division 1.3 (Education) and operates under the kernel's change-control rule. The cascade order (§2) and acuity stages (§3) change only with Ken's decision; realism requirements (§4) extend by SME recommendation through the terminal SME gate. Every change is version-logged and propagates to the builder, the prompt template, and the profile extractor in the same change.

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