



# **Electronic Thesis & Dissertation Collection**

J. Oliver Buswell Jr. Library  
12330 Conway Road  
Saint Louis, MO 63141

[library.covenantseminary.edu](http://library.covenantseminary.edu)

This document is distributed by Covenant Seminary under agreement with the author, who retains the copyright. Permission to further reproduce or distribute this document is not provided, except as permitted under fair use or other statutory exception.

The views presented in this document are solely the author's.

1D  
1401  
.C62  
T54  
2010

**PHYSICAL SELF-CARE PRACTICES FOR  
SUSTAINABLE PASTORAL LEADERSHIP IN LOCAL  
CHURCH MINISTRY**

By

ALLEN R. TAHA

A DISSERTATION SUBMITTED TO THE  
FACULTY OF COVENANT THEOLOGICAL SEMINARY  
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS  
FOR THE DEGREE OF DOCTOR OF MINISTRY

ST. LOUIS, MISSOURI

2010



**PHYSICAL SELF-CARE PRACTICES FOR  
SUSTAINABLE PASTORAL LEADERSHIP IN LOCAL  
CHURCH MINISTRY**

By

ALLEN R. TAHA

A DISSERTATION SUBMITTED  
TO THE FACULTY OF  
COVENANT THEOLOGICAL SEMINARY  
IN PARTIAL FULFILLMENT OF THE  
REQUIREMENTS FOR THE DEGREE OF  
DOCTOR OF MINISTRY

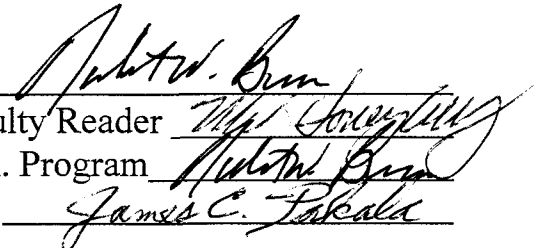
Graduation Date May 21, 2010

Dr. Robert W. Burns, Faculty Advisor

Dr. Michael W. Honeycutt, Second Faculty Reader

Dr. Robert W. Burns, Director of D.Min. Program

Rev. James C. Pakala, Library Director



## ABSTRACT

Frequent transition and burnout are companions of ministers today. The pressures of ministry and secondary stress have a negative impact on pastors as they lead. The literature focuses on spiritual self-care for ministers. This focus overlooks the value and simplicity of the pastor caring for himself physically. In order to help pastors sustain leadership in local church ministry, physical self-care practices were identified which contributed to pastors sustaining themselves in leadership. Therefore, the purpose of this study was to understand what senior/solo pastors identified as the most helpful physical self-care practices for sustaining themselves in pastoral leadership in local church ministry.

Four research questions guided this study: (1) What are the physical self-care practices of pastors in local church ministry? (2) Why do pastors value physical self-care for sustainable pastoral leadership in local church ministry? (3) In what ways does a pastor's physical self-care contribute to sustaining pastors in leadership in local church ministry? (4) What motivates a pastor's physical self-care to change during years of leadership in local church ministry? The study used qualitative research methods, employing semi-structured interviews with six pastors. The pastor's physical self-care was analyzed and the most helpful practices for sustaining pastoral leadership were described.

The findings of this study were that pastors who engaged in physical self-care practices may be better equipped to endure stress and challenges in ministry. Physical self-care activities seemed to put the pastors in the research group in a better position to sustain their pastoral leadership. Physical self-care also supports a holistic view of life, in

agreement with biblical theology, while restoring personhood to pastors instead of reducing their identity to a role.

By understanding and describing the physical self-care practices of ministers, the study provided several helpful conclusions and points of application. The first conclusion was that a minister's stress levels, which are a source of burnout and ministry impairment, could be mitigated and managed through physical self-care. The second conclusion was that pastors who participated in physical self-care possessed resources to sustain pastoral leadership in the face of personal or church difficulties. The third conclusion was that pastors who utilized physical self-care practices may be better equipped and prepared for everyday ministry tasks. In addition, physical self-care practices were shown to possibly offer a higher quality of life, as measured in The Life Satisfaction Scale. Therefore, physical self-care practices may enable pastors to sustain pastoral leadership in local church ministry settings.

To Tracy

## **TABLE OF CONTENTS**

### **CHAPTER ONE: INTRODUCTION**

Problem Statement	3
Purpose of the Study and Research Questions	5
Significance of the Study	6
Definition of Terms	8

### **CHAPTER TWO: LITERATURE REVIEW**

Framework	12
Recovering the Holistic Approach in Ministry	13
Biblical Basis for Self-Care	14
Physical Self-Care as a Biblical Command	17
Obesity and Self-Care	19
Burnout and Self-Care	20
Personhood, Identity, Role and Life Satisfaction	22
Systems Theory Applied to Congregations	24
Church Leader's Influence in the Congregational System	26
Self-care and Sabbath Keeping	28
The Depressed Pastor	29
Pastoral Self-Care	30
Self-Care Is Not Self-centeredness	31
Physical Self-Care and Exercise	33
Self-care as Limiting Work Hours	35



The Example of Self-care in Psychiatry	37
Self-care as Schedule Management	40
Self-care in an Organization's Culture	41
Connecting Congregational Health and Pastoral Health	43
Physical Fitness for Pastors	44
Self-Care and the Physical Body	45
Pastoral Self-Care Connected to the Congregation	46
Physical Self-Care and Long-Term Pastorates	50
Physical Self-Care and the Minister's Family	51
Physical Self-Care Assessment	53
Self-care and Foreign Cultures	53
Conclusion	54

### **CHAPTER THREE: PROJECT METHODOLOGY**

Design of the Study	55
<i>Interview Design</i>	57
Pre-Interview Sample Selection	60
Interview Subject Selection	61
Research Subjects	64
Data Collection	65
Data Analysis	65
Researcher Bias and Assumptions	66
Study Limitations	67
Summary	68

## **CHAPTER FOUR: FINDINGS**

Physical Self-Care Practices of Pastors in Local Church Ministry	69
Team Sports	69
Peer Driven	70
Elevated Activity Level	71
Home Projects	72
Reduced Liquid Calories	73
Rest and Sleep	73
Time Off	73
Summary of Helpful Physical Self-Care Practices	75
The Perceived Value of Physical Self-Care	76
Holistic Impact of Physical Self-Care	76
Stress Management	76
Positive Health Benefits	78
Life Satisfaction of Clergy	78
Ways Physical Self-Care Contributes to Sustainable Leadership	82
Credibility and Enhanced Job Performance	82
Physical Self-Care and Clergy Tenure	82
Priority of Physical Self-Care	83
Physical Self-Care and Differentiation	84
Increased Time with Congregants	85
Physical Self-Care as Renewal	85
Healthy Emotional State	86

Changes in Physical Self-Care over Time	87
Reasons for Change	87
Continuing Physical Self-Care through Aging	87
Finishing is the Goal	88
Early Sports Participation Influenced Activity Choice	88
Dietary Changes	89
Ministry Stage Motivates Change	89
Summary	91

## **CHAPTER FIVE: DISCUSSION AND RECOMMENDATIONS**

Increased Physical Activity Level	93
Implications of an Increased Activity Level	94
Long Duration Physical Activity	96
Peer Support	97
Nutrition and Physical Self-Care	98
Avoiding High-calorie Beverages	98
Diet Implications	99
Rest, Sleep, and Vacation	99
Determination to Continue Physical Activity	100
Conclusion	103

<b>BIBLIOGRAPHY</b>	105
---------------------	-----

## **CHAPTER ONE**

Pastor Robert<sup>1</sup> is in his mid-fifties, and he has served the same church for more than fifteen years. At a time when he should be enjoying ministry, he is feeling anything but pleasure. He needs more energy. He wakes up exhausted every morning and forces himself to drive to the office. He has lost the spring in his step, and gone are his younger days and his ability to keep up with the pace of ministry. The years have worn on him, and he has given up the dream of finishing well. Indeed, he now doubts whether he will finish his ministry at all. He no longer has time to pursue his outdoor hobbies of hiking and fishing. In fact, he cannot remember the last time he broke a sweat.

David is a recent college graduate in his mid-twenties. He entered seminary because of his desire to glorify God and change the world. Full of ideas for future ministry, he engaged in his studies with enthusiasm. At least he did during the first two years of seminary. Now, however, the vast amount of sedentary time he spends studying behind a desk are starting to show. He is at least twenty-five pounds overweight. He used to be active, especially when playing with his kids, but now he finds himself out of breath after going up the stairs to his second floor apartment. His wife worries about his health, especially after the doctor told David that he might become diabetic if he does not change his diet and exercise habits.

When Pastor Bill gets dressed on Sunday mornings, he barely fits into his suit. He estimates that he is fifty pounds overweight but refuses to step on a scale or go to the doctor. His head throbs from last night's wine. He thinks to himself that if the people he

---

<sup>1</sup> Names have been changed and stories are composites of real-life examples.

leads were not so difficult, he would not have to drink so much. The effort of getting himself dressed breaks him into a cold sweat. His skin is clammy, and he half wonders whether he is having a heart attack. He thinks about the text for his sermon, Galatians 6:23, and wonders how he can preach about self-control without being a total hypocrite. Then he realizes that he is one.

Pastor Brian is in his mid-sixties, but you would never know it. His face is weathered, but that is probably from all the smiling he does. He is trim and fit. During last year's Mexico mission trip, he outworked many of the younger men. He doesn't like to sit behind a desk. He can often be found walking the church halls or sanctuary pews with a commentary in his hands. He likes to run, bike, and hike. He seems full of life and energy even though the church he pastors recently endured a bitter split over something petty. As he contemplates retirement, ministry looks like it has done Pastor Brian well rather than done him in.

In each of these four composite situations, how the pastor physically cares for himself is an important factor. For pastors to finish ministry well, they must consider how their physical condition influences longevity in ministry. The link between physical self-care and finishing ministry well is the subject of this project. If a pastor neglects the physical body God has given to him, then his ministry could suffer as physical complications arise. The energy level and effort level needed for ministry might be related to this. If a pastor is not feeling well or not in good physical condition, he will struggle to sustain the effort level needed for pastoral ministry in a local church. Pastoral ministry is also stressful. If a pastor does not properly manage stress through physical self-care, then his ministry may suffer and the personal health of the minister may decline

as well. One Presbyterian pastor frames the subject with this confession: “As pastors, myself included, we are notorious in running flat out to care for our congregations while we abuse, neglect, and torture ourselves into depletion. I speak for myself when I say I rarely have time to read Scripture for my own personal well being.”<sup>2</sup> Good pastoral ministry must include a component of the pastor’s care for self.

### **Problem Statement**

“In denomination after denomination, there is little variation from the national norm of four years for the length of time a pastor stays where he is.”<sup>3</sup> Many times the reason for leaving is everyday stressors not appropriately addressed through physical self-care.<sup>4</sup> Physical self-care can also help to address low job satisfaction<sup>5</sup> and the fact that “although clergy rank in the top 10 percent of the population in terms of education, their salaries rank only 325 out of 432 occupations.”<sup>6</sup> Low pay and high stress are a particularly detrimental combination for sustainable pastoral leadership.<sup>7</sup>

Compounding the problem is an overemphasis on the spiritual side of life to the neglect of the minister’s physical body.<sup>8</sup> As a result of this neglect, pastors may struggle with burnout or leave the ministry prematurely. Many pastors are well-equipped in the spiritual realm by their seminary training, yet lack motivation to engage in more mundane

---

<sup>2</sup> Jeanne Stevenson-Moessner, *A Primer in Pastoral Care*, Creative Pastoral Care and Counseling Series (Minneapolis: Augsburg Fortress, 2005), 54.

<sup>3</sup> Richard W. Brown, *Restoring the Vow of Stability: The Keys to Pastoral Longevity* (Camp Hill, PA: Christian Publications, 1993), 28.

<sup>4</sup> “Most notable about the main conflicts experienced by ministers who left parish ministry is their ‘everyday,’ prosaic nature.” Dean R. Hoge and Jacqueline E. Wenger, *Pastors in Transition: Why Clergy Leave Local Church Ministry*, ed. Jackson W. Carroll, Pulpit and Pew (Grand Rapids: Eerdmans, 2005), 84.

<sup>5</sup> “Lawyers and ministers are opposites in one important sense: lawyers are paid well but often find their work meaningless, while ministers consistently find meaning in their work but tend to be poorly paid.” Ibid., 16.

<sup>6</sup> Gwen Wagstrom Halaas, *The Right Road: Life Choices for Clergy* (Minneapolis: Fortress Press, 2004), 3.

<sup>7</sup> Hoge and Wenger, 59.

<sup>8</sup> Beth Felker Jones, “Marked for Life,” *Christian Century* 124, no. 10 (2007): 20.

physical self-care practices. Dean R. Hoge and Jacqueline E. Wenger researched why pastors left the ministry:

Numerous ministers...left because of strain, weariness, burnout, and frustration. They did not attribute the problem to specific conflicts within the congregation or with denominational officers; their complaints were more general, more colored by self-doubt, and more typical of individuals who are depressed.<sup>9</sup>

Everyday issues and conflicts require everyday physical self-care practices that combat the stress and strains of ministry.<sup>10</sup> Sustainable pastoral leadership in local congregations depends in part on pastors exercising physical self-care to prevent burnout and take care of their bodies through stress management, nutrition, rest, and exercise.

The primary areas of physical self-care that emerge in the literature are stress management, nutrition, rest, and exercise. Each of these four areas contributes to the physical self-care of clergy for sustainable pastoral leadership in local church ministry. Stress management relates to how pastors perceive their situation and improve resiliency. Improvement of resiliency, sometimes called coherence,<sup>11</sup> creates a sense of fulfillment and life satisfaction which motivates and perpetuates both self-care agency and self-care efficacy, leading to longevity in ministry.

Nutrition describes what pastors take into their physical body and how this intake curtails or enhances physical self-care. Rest describes how pastors implement the fourth commandment and whether they take days off from work. This area also considers the amount and quality of a pastor's nightly sleep and explores Sabbaticals and vacation time. Exercise is the last category of a pastor's physical self-care. Research in this

---

<sup>9</sup> Hoge and Wenger, 115.

<sup>10</sup> "To keep ministers in local parish ministry requires giving attention principally to more mundane problems, the kind most people deal with day in and day out. Conflict, burnout, feeling unfulfilled, and experiencing family and marriage problems are the main culprits in draining the supply of parish ministers." Ibid., 198.

<sup>11</sup> Gary Gunderson and Larry Pray, *Leading Causes of Life: Five Fundamentals to Change the Way You Live Your Life* (Nashville: Abingdon Press 2009), 4.

category explores how physical activity influences physical condition and contributes to health and a feeling of well-being.

Without pampering or indulging themselves, pastors can take care of themselves physically through stress management, good nutrition, proper rest, and vigorous exercise. In fact, “self-care on the part of pastors is not a matter of selfish pampering, it is essential to maintaining an effective ministry over the long term.”<sup>12</sup> Since the physical body of a Christian “is a temple of the Holy Spirit,”<sup>13</sup> a pastor’s body is an important component of calling.<sup>14</sup> Ministers are called to “present your bodies as a living sacrifice”<sup>15</sup> because the body is an important part of life, worship, and service. Through stress management, good nutrition, rest, and exercise, pastors refresh and renew themselves to engage in pastoral leadership with more energy and vigor. Good physical self-care practices in each of the four areas (stress, nutrition, rest, and exercise) are the proper response to the importance of the calling of a pastor for longevity in ministry.

### **Purpose of the Study and Research Questions**

The benefits of long-term ministry on pastors and congregations, together with the benefits of physical self-care for holistic well-being of clergy, motivated this study. Therefore, the purpose of this study was to understand what senior/solo pastors identify as the most helpful physical self-care practices for sustainable pastoral leadership in local church ministry.

---

<sup>12</sup> Peter Brain, *Going the Distance: How to Stay Fit for a Lifetime of Ministry*, 2nd ed. (Kingsford, Australia: Matthias Media, 2006), 10.

<sup>13</sup> 1 Corinthians 6:19 All Scripture quotations are from *The Holy Bible: English Standard Version*, (Wheaton: Crossway, 2001).

<sup>14</sup> “For all their talk of the body as a temple of the Holy Spirit, many clergy actually ignore or even harm their bodies.” Donald R. Hands and Wayne L. Fehr, *Spiritual Wholeness for Clergy: A New Psychology of Intimacy with God, Self, and Others* (Herndon, VA: Alban Institute, 1993), 75.

<sup>15</sup> Romans 12:1



The following research questions were established in order to describe how physical self-care practices interacted with sustainable leadership:

1. What are the physical self-care practices of pastors in local church ministry?
2. Why do pastors value physical self-care for sustainable pastoral leadership in local church ministry?
3. In what ways does a pastor's physical self-care contribute to sustaining pastors in leadership in local church ministry?
4. What motivates the pastor's physical self-care to change during years of leadership in local church ministry?

### **Significance of the Study**

The study has significance for anyone who is entering the ministry, as well as for established pastors. "Although data is limited, research indicates that some of the most critical issues facing clergy appear to be in the areas of weight, mental health, heart disease and stress."<sup>16</sup> The physical issues that cause pastors to struggle show no signs of abating. One Pulpit and Pew Study found that "76 percent of clergy were either overweight or obese."<sup>17</sup> Weight issues for pastors have an ethical dimension since the Bible denounces indulgence and commands self-control. Overweight clergy may be unable to address the sin of gluttony and promote self-control without their bodies betraying the contradiction between what is preached and what is lived.

This study will also benefit those training for the ministry. Good physical self-care practices need to be established when pastors are younger and more apt to mend

---

<sup>16</sup> Bob Wells, "Which Way to Clergy Health?", Duke University <http://www.pulpitandpew.duke.edu/clergyhealth.html> (accessed July 8 2008).

<sup>17</sup> Ibid.

unhealthy life patterns. These patterns of physical self-care may then be implemented over the course of a lifetime of ministry for sustainable pastoral leadership in the church.

Any member of the clergy will benefit from an improved physical condition, exercise, and better health. Physical self-care is a vital issue since, “Other studies of religious professionals found that Protestant clergy had the highest overall work-related stress and were next to the lowest in having personal resources to cope with the occupational strain.”<sup>18</sup> Without resources to mitigate stress,<sup>19</sup> pastors will find it more difficult to sustain pastoral leadership. Studies have shown that pastors often experience stress similar to that experienced by counselors when interacting with those who have been traumatized. This is especially true in the pastoral counseling role. However, unlike professional counselors, pastors receive little to no training in how to manage this stress.<sup>20</sup>

Diseases of stress plague clergy to such an extent that a study published in 1999 found that “clergy have one of the highest death rates from heart disease of any occupation.”<sup>21</sup> The benefit of researching physical self-care practices for pastors is that these practices will enhance longevity in both life and ministry. If pastors recognize that an improved physical condition can better equip them for ministry and for dealing with the hazards of stress, then their ministry can be sustained long-term. Without integrating a self-care plan to address stress, pastoral leadership is at greater risk for impairment.

---

<sup>18</sup> Halaas, 3. Halaas references C. A. Rayburn et al., “Men, Women and Religion: Stress Within Leadership Roles,” *Journal of Clinical Psychology* 42, no. 3 (1986): 540-46.

<sup>19</sup> “The helping professions can be quite stressful, even when workers are not first-responders in acute disaster situations.” Kyle D. Killian, “Helping Till It Hurts? A Multimethod Study of Compassion Fatigue, Burnout, and Self-Care in Clinicians Working with Trauma Survivors,” *Traumatology* 14, no. 2 (2008): 40.

<sup>20</sup> “The difference is that professional therapists have been informed about the psychological effects of working with clients in crisis and ways to proactively manage stress and, until recently clergy have not.” Margot Holaday and others, “Secondary Stress, Burnout, and the Clergy,” *American Journal of Pastoral Counseling* 4, no. 1 (2001): 54.

<sup>21</sup> Wells.

In addition to benefiting pastors and those entering the pastorate, congregations will benefit from this research. Congregational health and the pastor's health are linked. When a congregation can encourage the pastor toward physical health,<sup>22</sup> then longer pastorates are encouraged and "long-term pastorates tend to lead to healthier congregations."<sup>23</sup> The role reversal that occurs when the congregation must care for the caregiver is troubling and anxiety-inducing in a congregation. Churches that must care for the pastor physically will find ministry difficult with an incapacitated or physically weak leader. Congregations have a vested interest in seeing their pastor develop a strong constitution for the challenges of ministry through physical self-care.

### **Definition of Terms**

Body Mass Index (BMI) – The BMI is one non-invasive way to measure body fat on an individual. BMI is calculated by use of a formula in which weight in pounds is multiplied by 703 and then is divided by height in inches squared ( $W \times 703/H^2$ ). A result from 18.5 to 25 is generally understood as a healthy weight, 25 to 30 as overweight, and 30+ as obese. Sometimes BMI may yield an inaccurately high number in those with a muscular build.

Burnout – This is "a state of fatigue or frustration brought about by devotion to a cause, way of life, or relationship that failed to produce the expected reward,"<sup>24</sup> characterized by a cycle of expending effort with "less time for personal renewal."<sup>25</sup> Burnout usually results in diminished results and a lack of fulfillment. Burnout can also be described as a

---

<sup>22</sup> Brain, 199.

<sup>23</sup> Ibid., ix.

<sup>24</sup> Freudenberger, Herben *Burnout: The High Cost of High Achievement* (New York: Doubleday, 1980), quoted in Roy M. Oswald, *Clergy Self-Care: Finding a Balance for Effective Ministry* (Herndon, VA: Alban Institute, 1991), 59.

<sup>25</sup> Brown, 139.

prolonged state of overexertion accompanied by a prevailing feeling of dread regarding future activities.<sup>26</sup>

The Life Satisfaction Scale – In order to determine whether pastors were suffering the effects of burnout, a five question Likert scale assessment was undertaken by research subjects. This scale provided a way to assess the positive effects of physical self-care in a pastor's life. Life Satisfaction is a sense of fulfillment arising from a person's circumstances and how they interpret and perceive the status of their situation.. This diagnostic test was chosen by the researcher because of factors discussed in detail in chapter 3.

Pastor – A pastor is an ordained and recognized leader in a church. Pastors in the Presbyterian Church in America (the research group) have been ordained as teaching elders and serve in leadership with ruling elders who act as peers. They have successfully accomplished a credentialing process and usually have attended seminary.

Self-care – Self-care describes activities and practices designed to take care of the self. These methods can be utilized to assist in many different areas of life: physical, emotional, relational, and spiritual. Self-care supports sustainable leadership by addressing concerns such as burnout and stress. “Far from being a reason for self-indulgent laziness or an incentive for pastoral hypochondriacs, self-care is really a way of ensuring that we will remain effective in the great work God has given us to do.”<sup>27</sup> “Self-care must never be a cover for selfishness, or a cowardly holding back in the interests of self-protection.”<sup>28</sup>

---

<sup>26</sup> Bob Sitze, *Not Trying Too Hard: New Basics for Sustainable Congregations* (Herndon, VA: Alban Institute, 2001), 28.

<sup>27</sup> Brain, 20-21.

<sup>28</sup> Ibid., 23.

Physical Self-care – Physical self-care is a subset of self-care and describes the activities and practices in which pastors or others engage specifically to maintain physical health or recover it. These practices fall into four major categories: stress management, nutrition, rest, and exercise.<sup>29</sup> Self-care practices include, but are not limited to, the following: aerobic exercise, physical activity, sleep, rest, vacation time, Sabbath observance, sabbaticals, nutritional habits, and stress management.

Stress – Stress describes the tension and strain experienced in the psyche of the pastor. Stress activates the “flight or fight” neurological response, which manifests itself physically through increased heart rate, release of adrenalin, and muscle tension. Stress comes in many different varieties, including emotional, spiritual, and relational. Stress can have physical manifestations such as high blood pressure, ulcers, headaches, difficulty sleeping, and depression. Stress can also be the result of interacting with those who have been traumatized. This type of stress is known as secondary traumatic stress.<sup>30</sup>

Sustainable Pastoral Leadership – Sustainable pastoral leadership is seven years or more pastoring one church.<sup>31</sup> This is in direct contrast to “the fact that the average length of the American pastorate is 3-5 years.”<sup>32</sup> While “short-term pastorates seem to perpetuate

---

<sup>29</sup> "Three elements of health related fitness and wellness are essential in the lives of clergy: physical exercise, diet/nutrition, and stress management." Donald E. Demaray and Kenneth W. Pickerill, *A Robust Ministry: Keeping a Pure Heart, Clear Head, and Steady Hand* (Nappanee, IN: Evangel, 2004), 47. The researcher has taken these three essential categories and added the category of rest. Rest could be subsumed under stress management, however, the need for rest in physical self-care could establish it as its own category.

<sup>30</sup> "It is well established that individuals who encounter traumatic material or who work with traumatized clients can be profoundly impacted by their experiences. This impact has been referred to by many names including contact victimization, compassion fatigue, and STS." M. Sean O'Halloran and Theresa O'Halloran, "Secondary Traumatic Stress in the Classroom: Ameliorating Stress in Graduate Students," *Teaching of Psychology* 28, no. 2 (2001): 93.

<sup>31</sup> Glenn E. Ludwig, *In It for the Long Haul: Building Effective Long-Term Pastorates*, Long Haul (Herndon, VA: Alban Institute, 2002), 5.

<sup>32</sup> Brown, 5.

instability and stress in the pastor's life,"<sup>33</sup> sustainable pastoral leadership "is more effective for...congregations and more fulfilling for our pastors."<sup>34</sup>

---

<sup>33</sup> Ibid.

<sup>34</sup> Ludwig, ix.

## **CHAPTER TWO**

The purpose of this study was to understand what pastors identify as helpful physical self-care practices for sustainable pastoral leadership in local church ministry. This project explored the connection between ministerial satisfaction and pastoral longevity when physical self-care practices are understood and implemented. Self-care in the United States is a neglected behavior as demonstrated in a study published in the *New England Journal of Medicine* showing that if obesity and smoking rates continue unchanged, life expectancy in the United States will decline by 8.4 months.<sup>35</sup> Western medical practices emphasize a “mentality of mind-body dualism,”<sup>36</sup> which can mean treatment of symptoms, rather than preventative self-care. Such an emphasis has not reversed the obesity epidemic or the rash of behavioral diseases present in society.<sup>37</sup> Obesity (BMI < 30) has a \$147 billion per year estimated annual cost in the United States, even though medical technology is more advanced than ever before.<sup>38</sup> Prevention through physical self-care needs greater consideration.

### **Framework**

In approaching the literature on the subject of physical self-care, there are both chronological and thematic considerations. A chronological approach to the literature shows how progressive developments in science and nutrition contribute to the self-care

---

<sup>35</sup> Susan T. Stewart, David M. Cutler, and Allison B. Rosen, "Forecasting the Effects of Obesity and Smoking on U.S. Life Expectancy," *New England Journal of Medicine* 361 (2009): 2252.

<sup>36</sup> Hands and Fehr, 76.

<sup>37</sup> In the United States, 80% of the health care budget goes to treat five issues which are behavioral, namely, "too much smoking, drinking, eating, and stress, and not enough exercise." Alan Deutschman, "Change: Why Is It So Darn Hard to Change Our Ways?," *Fast Company*, May 2005, 54.

<sup>38</sup> Eric A. Finkelstein and others, "Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates," *Health Affairs* 28, no. 5 (2009): 821.

endeavor. A thematic approach organizes these advances by subject matter, showing the interrelation between what is discovered scientifically and what is experienced anecdotally. Therefore, the researcher has organized this literature review using both chronological developments and tracing how those developments impacted themes and subjects in ministry.

The beginning point of this literature review considers the holistic approach to ministry. The reader will see that self-care is impaired when a holistic view of self is compromised. That leads to a discussion of the biblical view of the body, which supports self-care through the holistic approach to ministry. Then, an appraisal of the current health condition is considered, with an explanation of the modern threat of obesity. The review then moves through the chronological development of the concepts of burnout and aerobic exercise, which influence health and self-care factors.

At this point, the researcher will return to the theme of a holistic view understood as clergy recovering their personhood through physical self-care. Along the way, mental condition, systems theory application, and differentiation are explained as implications to the physical self-care enterprise and the dynamics of congregational life. The review then explores how physical self-care practices impact ministry, including the long-term pastorate, the clergy family, and congregational health. The conclusion demonstrates that physical self-care is a critical component of sustainable pastoral leadership.

### **Recovering the Holistic Approach in Ministry**

As will be seen in the following material, current literature is rediscovering the fundamental physical needs of pastors. As pharmacology grows and develops, many



people are able to maintain an unhealthy lifestyle, forestalling the need for physical self-care through the use of medication. Gary Oswald asserts,

We need to wean people from the notion that they can live a precarious lifestyle, indulging in excesses on a regular basis, all the while expecting medicine to give them the magic bullet — a pill, a by-pass operation, chemotherapy, a facelift, liposuction, a tranquilizer, or ulcer medicine.<sup>39</sup>

Medication, which should be taken to resolve or treat illnesses, has become a lifestyle choice, allowing some people to accommodate their physical unhealth.<sup>40</sup> This practice may mask health problems rather than lead toward health.

### **Biblical Basis for Self-Care**

God's creation of human beings in his image (Genesis 1:26) forms the theological basis for physical self-care. As such, the human body is the vehicle for the fulfillment of the creation mandate in Genesis 1:28. The physical body is not only the instrument of obedience to God, but more: it is a gift from God meant for worship. Romans 12:1-2 makes the point that the sacrifice offered to God as "your spiritual worship" is presenting of the physical body as a "living sacrifice."<sup>41</sup> The importance of the physical body in worship is emphasized in the Old Testament. For example, the prohibition against tattoos in Leviticus 19:28 was meant to separate God's chosen people from pagan practices. This prohibition also meant that the sign of the covenant, namely male circumcision, would be the preeminent physical mark of God's people.

---

<sup>39</sup>Oswald, 199.

<sup>40</sup> Gary Harbaugh reported this interchange with his doctor: "Additional medication now, the doctor advised, would only cover up the symptoms, and that could be dangerous. 'In any event,' the physician said, 'your body is giving you a strong message. You take care of others. You're going to have to take better care of yourself. Even if the tests turn out OK, something has to change!'" Gary L. Harbaugh, *Pastor as Person: Maintaining Personal Integrity in the Choices and Challenges of Ministry* (Minneapolis: Augsburg, 1984).

<sup>41</sup> Romans 12:1-2

The physical body has value not only through creation, but also through the bodily resurrection.<sup>42</sup> Numerous healing accounts of Jesus in the gospels<sup>43</sup> are examples of the God-given inherent dignity of the human body, and they are forerunners to the final healing provided in the bodily resurrection.

Use of the body as a means to glorify God is seen in 1 Corinthians 6. Paul argues that the sin of immorality has greater consequences because “Every other sin a person commits is outside the body, but the sexually immoral person sins against his own body.”<sup>44</sup> This admonition follows: “Or do you not know that your body is a temple of the Holy Spirit within you, who you have from God?”<sup>45</sup> This verse then shows that the physical body is the temple, or dwelling place, of the Holy Spirit. As such, the implication is that the temple must remain consecrated. Verse nineteen goes on to state, “You are not your own,”<sup>46</sup> meaning that the Christian’s physical body belongs to God, since in verse twenty, Christ’s redemptive work extends to the physical body, “for you were bought with a price.”<sup>47</sup> First Corinthians 6 shows that Jesus does not just rescue the soul, but the body as well. The conclusion of the matter in verse twenty is that Christians must, “glorify God in your body.”<sup>48</sup> The location for obedience is inside the body, meaning that God has given a body for the purpose of obeying and glorifying Him. Christianity is not ethereal, but tangible in manifestations and expressions in the physical life, in the body.

---

<sup>42</sup> See Romans 6:5 and 1 Thessalonians 4:16

<sup>43</sup> For examples see Matthew 8:2, 5, 14, 16; 9:2, 20, 27; Mark 7:31, 8:22; Luke 13:11, 14:1, 17:11; John 4:46, 5:1, 9:1, 11:43.

<sup>44</sup> 1 Corinthians 6:18

<sup>45</sup> 1 Corinthians 6:19

<sup>46</sup> 1 Corinthians 6:19

<sup>47</sup> 1 Corinthians 6:20

<sup>48</sup> 1 Corinthians 6:20

Some have taken the position that Paul's use of the term "body" in 1 Corinthians 6 refers to the church as the body of believers, rather than to the physical bodies of individual Christians. J. A. Draper writes, "the meaning of Paul's reference is to the community as the Temple of the Holy Spirit. It is fundamentally and specifically a community image, not an individual image."<sup>49</sup> While Draper believes it is "unlikely that Paul is thinking of individual bodies as individual sanctuaries containing the Holy Spirit,"<sup>50</sup> this could not be Paul's intent, since grammatically he combines a collective command with an individual admonition by writing "glorify God in your [second person plural] body."<sup>51</sup>

In 2 Corinthians, Paul says, "we are the temple of the living God,"<sup>52</sup> joining this assertion with an application, "Since we have these promises, beloved, let us cleanse ourselves from every defilement of body and spirit, bringing holiness to completion in the fear of God."<sup>53</sup> While Draper's communal understanding may fit better in this passage, the individual calling to holiness in the body is also applicable. Regardless of whether the passages in 1 and 2 Corinthians are individual or communal, the emphasis on the localized expression of holiness in the body is inescapable. This physical holiness shows that the body matters to God in creation, in redemption, in sanctification, and in glorification through the bodily resurrection.

Paul joins the physical nature with the spiritual in 1 Timothy 4, where he states, "for while bodily training is of some value, godliness is of value in every way, as it holds

---

<sup>49</sup> J. A. Draper, "The Tip of an Ice-Berg: The Temple of the Holy Spirit," *Journal of Theology for Southern Africa* 59, no. (1987): 60.

<sup>50</sup> *Ibid.*: 64.

<sup>51</sup> *Ibid.*: 60-61.

<sup>52</sup> 2 Corinthians 6:16

<sup>53</sup> 2 Corinthians 7:1

promise for the present life and also for the life to come.”<sup>54</sup> Rather than denouncing physicality, Paul acknowledges that bodily training has “some value.” This value is not on the same level as godliness, since godliness has value now and for the *eschaton*. Nonetheless, “Like the Romans of Paul's day, we also live in a body-conscious age in which the human body is routinely depreciated or idolized.”<sup>55</sup> “Thankful presentation of our bodies—our total beings—to God's service for the benefit of others”<sup>56</sup> is the Christian's spiritual service of worship.<sup>57</sup> Physical training and discipline lend themselves to ministry, and thus to worship.<sup>58</sup> Paul valued the body as a vehicle for ministry to the glory of God.

### **Physical Self-Care as a Biblical Command**

Is self-care merely a good idea, or is it a biblical command? Is physical self-care an expression of wisdom and is it necessary for pastors? In 1 Timothy 4, the Apostle Paul said, “for while bodily training is of some value, godliness is of value in every way, as it holds promise for the present life and also for the life to come.”<sup>59</sup> In this admonition, “holiness carries much more significance than physical training.”<sup>60</sup> As previously discussed, the pursuit of godliness is seen as more of a priority because of its usefulness both for the present and the *eschaton*, but the value of bodily training is not dismissed completely. Paul found some value in bodily training, even in an intensively physical ancient world. In writing about the need for physical exercise, Kathleen Greider writes, “We have a responsibility to develop a constructive relationship with our bodies through

---

<sup>54</sup> 1 Timothy 4:8

<sup>55</sup> Robert A. Bryant, “Romans 12:1-8,” *Interpretation* July (2004): 288.

<sup>56</sup> *Ibid.*: 290.

<sup>57</sup> see Romans 12:1-8

<sup>58</sup> see 1 Corinthians 9:27

<sup>59</sup> 1 Timothy 4:8

<sup>60</sup> Marvin L. Reid, “An Exegesis of 1 Timothy 4:6-16,” *Faith and Mission* 9, no. 1 (1991): 51.

which we become knowledgeable about its powers and vulnerabilities. From this point of view, exercise is no more optional to care of the body than food or sleep.”<sup>61</sup>

Paul knew that for Timothy to succeed in ministry, he needed to take care of himself both spiritually and physically.<sup>62</sup> 1 Timothy 4:8 can be taken together with Paul’s encouragement to Timothy to take care of his stomach ailment.<sup>63</sup> Paul understood the blessing of a healthy physical body, so he encouraged self-care. As has been discussed, physical self-care makes sense when one views the physical body as a gift from God. Clergy are called to be good stewards of their bodies in the understanding that God has made the body good and for his glory. “Ministers who live healthily are good stewards of the gift of life and use their health for the sake of Christian ministry and Christ’s mission.”<sup>64</sup>

Is the value of the created body a good motivation for physical self-care for clergy? Statistics show that at least in one denomination that has studied the issue, clergy remain unmotivated to take care of themselves. Thirty-four percent of ordained Evangelical Lutheran Church in America (ELCA) ministers reported weights in the obese range by body mass index (BMI), compared to 22.5 percent of the U.S. population.<sup>65</sup> “Studies of religious professionals found that Protestant clergy had the highest overall work-related stress and were next to the lowest in having personal resources to cope with

---

<sup>61</sup> Kathleen J. Greider, *Reckoning with Aggression: Theology, Violence, and Vitality* (Louisville: Westminster, 1997), 115.

<sup>62</sup> “To see things in a Christian framework is often half the battle in coping with stress.” Gaius Davies, *Stress: Sources and Solutions* (Ross-shire, Scotland: Christian Focus, 1988), 79.

<sup>63</sup> see 1 Timothy 5:23

<sup>64</sup> Gary L. Harbaugh, Rebecca Lee Brenneis, and Rodney R. Hutton, *Covenants and Care: Boundaries in Life, Faith, and Ministry* (Minneapolis: Fortris Press, 1998), 138.

<sup>65</sup> Halaas, 2.

the occupational strain.”<sup>66</sup> The low-pay<sup>67</sup> and high expectation<sup>68</sup> of ministry creates a unique avenue for stress to take hold in the life of clergy.

Regardless of the failure to act, physical self-care has been part of the collective consciousness of the clergy for some time. In 1870, John Broadus recognized the need for pastors to implement physical self-care practices for improved preaching:

Again, to be a good channel of God's message the preacher should give careful attention to his health. Good health is closely related to good disposition, optimistic outlook, clear thinking, and physical vitality. The long hours in the study should be balanced by a careful diet and regular exercise. While exercise takes many forms, walking is available in all circumstances. A walk through the community may also fulfill a pastoral role.<sup>69</sup>

Charles Spurgeon begins his *Lectures to My Students* by noting the importance of a minister's self-care: “Every workman knows the necessity of keeping his tools in a good state of repair, for ‘if the iron be blunt, and he do not whet the edge, then must he put to more strength.’ If the workman lose the edge from his adze, he knows that there will be a greater draught upon his energies, or his work will be badly done.”<sup>70</sup> Thus, both Spurgeon and Broadus demonstrated their awareness of the need for clergy to engage in physical self-care.

### **Obesity and Self-Care**

Within the past thirty years, obesity rates have risen. Marva Dawn draws the following conclusion:

In spite of all the evidence that maintaining one's bodily health has numerous benefits, statistics show that people in the U.S. continue to engage in bad habits

---

<sup>66</sup> Ibid., 3.

<sup>67</sup> Hoge and Wenger, 59.

<sup>68</sup> “But the pay isn't the biggest thing. The low pay combined with high stress and long hours, I think that's the triple combination that's really lethal.” Ibid.

<sup>69</sup> John A. Broadus, *On the Preparation and Delivery of Sermons*, ed. Vernon L. Stanfield, 4th ed. ed. (New York: Harper and Row, 1870; reprint, 1979), 16.

<sup>70</sup> Charles Spurgeon, *Lectures to My Students: Complete and Unabridged*, 11th ed. (Grand Rapids: Zondervan, 1980), 7.

that put us out of shape physically and, consequently, out of sorts emotionally and mentally. It strikes me as rather silly that pastors often seem to be the worst at caring for their own bodies, often with the excuse that they are too busy with their spiritual duties.<sup>71</sup>

In 2007, the Centers for Disease Control (CDC) reported that forty-nine states have adult obesity rates of at least twenty percent. According to the CDC, adult obesity is defined as having a BMI greater than thirty. The state of Colorado is the lone exception to the national rise in obesity rates.<sup>72</sup> It should be noted that the legitimacy of using the BMI as a standard has been questioned by some in relation to individuals with a muscular build.<sup>73</sup> In spite of this problem, the BMI measurement system demonstrates that the overall trend is toward a heavier U.S. population. When obesity rates began to increase, a growing body of literature began to emerge in the 1970's and 1980's focusing on physical conditioning and aerobic exercise. One such book was written by Dr. Kenneth Cooper, who is considered the father of the modern fitness movement.<sup>74</sup> He published *The Aerobics Program for Total Well-Being* in 1982.

### **Burnout and Self-Care**

Along with the rise of aerobic exercise, the 1980's also saw an increasing awareness of the phenomenon of burnout. Christina Maslach's landmark work, *Burnout: The Cost of Caring*, makes the connection between the psychological impact of burnout and its physical manifestation. Maslach writes that burnout "is a response to the chronic

---

<sup>71</sup> Marva J. Dawn, *The Sense of Call: A Sabbath Way of Life for Those Who Serve God, the Church, and the World* (Grand Rapids: Eerdmans, 2006), 180.

<sup>72</sup> Centers for Disease Control, "Obesity and Overweight for Professionals: Data and Statistics: U. S. Obesity Trends", Centers for Disease Control and Prevention <http://www.cdc.gov/obesity/data/trends.html> (accessed July 2 2009).

<sup>73</sup> Jeremy Singer-Vine, "Beyond Bmi", Dallas Morning News [http://www.dallasnews.com/sharedcontent/dws/dn/opinion/points/stories/DN-singer-vine\\_02edi.State.Edition1.2066eef.html](http://www.dallasnews.com/sharedcontent/dws/dn/opinion/points/stories/DN-singer-vine_02edi.State.Edition1.2066eef.html) (accessed September 1 2009).

<sup>74</sup> Lance C. Dalleck and Len Kravitz, "The History of Fitness", The University of New Mexico <http://www.unm.edu/~lkravitz/Article%20folder/history.html> (accessed July 2 2009).

emotional strain of dealing extensively with other human beings, particularly when they are troubled or having problems. Thus, it can be considered one type of job stress.”<sup>75</sup>

Maslach also connects burnout’s psychological impact with physicality.<sup>76</sup>

While Maslach’s work in the field of burnout is considered foundational, much of her work was designed primarily for psychologists. For example, her burnout assessment is copyrighted and controlled in its distribution. As a result of this limitation, other psychological assessments arose after Maslach’s to help people self-diagnose burnout and related issues. Ed Diener, along with Robert A. Emmons, Randy J. Larsen, and Sharon Griffin, designed The Satisfaction With Life Scale in 1985. This assessment can be given without special training and consists of five brief questions that were answerable with a Likert scale. The nature of the assessment arose because of the need “for a multi-item scale to measure life satisfaction as a cognitive-judgmental process.”<sup>77</sup> Life satisfaction levels can be used to diagnose burnout as subjects interpret their own life situation. The assessment can also be used to evaluate other problems, such as depression, that are related to burnout. The Life Satisfaction Scale also allows for the existence of individualistic and relativistic self-perception and interpretation of those perceptions. The results of the assessment are a means to gain an understanding on a subject’s “overall evaluation of their life, rather than summing across their satisfaction with specific domains, to obtain a measure of overall life satisfaction.”<sup>78</sup>

---

<sup>75</sup> Christina Maslach, *Burnout: The Cost of Caring* (Edglewood Cliffs, New Jersey: Prentence-Hall 1982), 3.

<sup>76</sup> *Ibid.*, 75.

<sup>77</sup> Ed Diener and others, "The Satisfaction with Life Scale," *Journal of Personality Assessment* 49, no. 1 (1985): 71.

<sup>78</sup> *Ibid.*



### Personhood, Identity, Role and Life Satisfaction

Gary L. Harbaugh's work, which brings together the physical maladies of obesity and stress specific to the pastoral ministry, complements Diener's work of connecting burnout with life satisfaction. His book, titled for its holistic approach, *Pastor as Person*, articulates the modern pastoral dilemma as follows: "The problem for the pastor is how to maintain a good and faithful balance between filling the pastoral role and living a healthy, happy personal life."<sup>79</sup> Harbaugh's solution is to apply an understanding of Mark 12:30, "And you shall love the Lord your God with all your heart and with all your soul and with all your mind and with all your strength," acting from an understanding of the "person as a whole person, an irreducible whole."<sup>80</sup> The "psychophysical unity"<sup>81</sup> of a person requires a holistic response since "most difficulties pastors face in the parish arise when the pastor forgets that he or she is a person."<sup>82</sup>

The holistic approach that Harbaugh advocates requires a physical response. However, he reports that the physical dimension of life was ranked lowest in the holistic model by pastors and seminarians.<sup>83</sup> Furthermore, "nutrition, physical exercise, and other forms of self-care were at lower levels [for pastors] than for the general population."<sup>84</sup> The neglect of the physical aspect of self-care has led some to conclude that "If we would just treat our bodies, minds, and spirits with the same tender, conscientious care we do our automobiles or our pets, we certainly would be healthier and happier."<sup>85</sup>

---

<sup>79</sup> Harbaugh, *Pastor as Person*, 10.

<sup>80</sup> Harbaugh, *Pastor as Person*, 18-19.

<sup>81</sup> *Ibid.*, 19.

<sup>82</sup> *Ibid.*, 9.

<sup>83</sup> *Ibid.*, 47.

<sup>84</sup> *Ibid.*

<sup>85</sup> Halaas, 44.

Harbaugh's work also recognizes the problems created for a spiritual ministry when one neglects the physical realm. Pastors care for others spiritually while neglecting their own physical condition. Because of the spiritual nature of pastoral ministry and the tendency that pastors have to see life dualistically rather than holistically, pastors are inherently in danger of taking self-denial to the "extreme, leav[ing] little room for healthy self-care."<sup>86</sup> In addition, the lack of holistic clergy self-care is hypocritical in the sense that it is the neglect of "the greatest commandment to love the Lord with all our heart, mind, soul, and strength, and to love our neighbors as we love ourselves."<sup>87</sup>

While Harbaugh's holism focused on pastors, Stewart Friedman more recently integrated a holistic view of life with any leadership role in *Total Leadership*. He discovered the connection between how he conducted himself in his personal life and professional life. What he did personally mattered to the way he acts/performs at work.<sup>88</sup> He saw an opportunity to sustain leadership through "developing leadership capacity for all of life. Total leadership became my shorthand for a new way to think about leadership, from the point of view of the whole person."<sup>89</sup> Friedman encourages an approach to leadership that counteracts the fragmented success a person may experience at work in contradistinction with failure at home or vice-versa. His approach encourages "positive spillover"<sup>90</sup> from one area of life into the other. Work and life are not held in balance; instead success in one realm carries over into the other realm. A sense of well-being and good feelings about leadership are the result of a holistic view of leadership.

---

<sup>86</sup> Harbaugh, *Pastor as Person*, 72.

<sup>87</sup> Halaas, 44.

<sup>88</sup> Stewart D. Friedman, *Total Leadership: Be a Better Leader, Have a Richer Life* (Boston: Harvard 2008), xii.

<sup>89</sup> *Ibid.*, xiv.

<sup>90</sup> *Ibid.*, 88.

Daniel Goleman, Richard Boyatzis, and Annie McKee incorporate this holistic trend in leadership through their vision for leadership programs that reach beyond work. “Focus[ing] on the whole person or on the discoveries that lead to sustainable change”<sup>91</sup> means starting “with a holistic vision of one's life, in all its richness” then using self-care practices “to achieve improved business performance,” remembering along the way that “leaders need to be emotionally engaged in their self-development.”<sup>92</sup> Therefore, applying this idea to pastors, a pastor’s sense of personhood is an important characteristic of sustainable leadership. Leaders must be persons before they are roles. If leaders become so “submerged in their professional role that they seldom live in a ‘private’ or personal mode,”<sup>93</sup> then sustainable leadership will eventually falter as leaders run out of personal resources on which to draw in a crisis. “The crucial point for the clergyperson to consider is this: Do I have a personal life and unique relationship to God? Or am I totally defined by the ministry that I carry out to others?”<sup>94</sup>

### **Systems Theory Applied to Congregations**

During the mid-1980’s, research continued to develop in the fields of burnout, stress, and fitness. Part of this research focused on pastoral self-care for sustainable pastoral leadership in the larger context of both the family and the congregation. It was in 1985 that Edwin H. Friedman published his seminal work on systems theory, *Generation to Generation*. His work increased the focus on how psychological dynamics impacted religious communities and families. Friedman showed how anxiety injured both personal and corporate relationships. He noted, “what most unites all spiritual leaders is not a set

---

<sup>91</sup> Daniel Goleman, Richard Boyatzis, and Annie McKee, *Primal Leadership: Realizing the Power of Emotional Intelligence* (Boston: Harvard, 2002), 232.

<sup>92</sup> *Ibid.*, 119.

<sup>93</sup> Hands and Fehr, 58.

<sup>94</sup> *Ibid.*, 61.

of beliefs or practices but the factors that contribute to our stress.”<sup>95</sup> Such a bold premise created an avenue for secular appraisal of religious life previously rejected by fundamentalism. Now, congregations and religious leaders had a different set of priorities and values for evaluation and guidance. No longer were spiritual solutions the only course. Friedman introduced an understanding of how practical wisdom based on systemic group dynamics could aid religious communities and leaders.

Friedman used Bowen’s systems theory and applied it to religious communities. He put the pastor in a primary relationship to the health of these communities and their constituents. He saw that,

With regard to the nature of pastoral counseling, the family model strongly suggests that no other member of society is in a better position to foster these existential encouragements to healing than the clergy because of the unique entree into family systems our community position has given us...This entree gives us unusual therapeutic potential.<sup>96</sup>

Since clergy are present for people in important life transitions and crises, they play a critical role in the lives of parishioners. However, such a privileged place in life is not without tremendous cost in stress or anxiety as defined by systems theory. Clergy are subject to this anxiety and often experience trauma in a secondary role or capacity.

Given their important place in the lives of religious communities, Friedman connected the pastor’s functioning level with the health of the organization. He saw a direct connection between the two when he wrote that,

The overall health and functioning of any organization depend primarily on one or two people at the top, and that this is true whether the relationship system is a personal family, a sports team, an orchestra, a congregation, a religious hierarchy, or an entire nation.<sup>97</sup>

---

<sup>95</sup> Edwin H. Friedman, *Generation to Generation: Family Process in Church and Synagogue* (New York: Guilford, 1985), 1.

<sup>96</sup> *Ibid.*, 5.

<sup>97</sup> *Ibid.*, 221.

### **Church Leader's Influence in the Congregational System**

Peter Steinke, writing twenty years later, articulated Friedman's point about the importance of leadership: "no group shapes and influences a congregation's health, efficiency, and growth more than church leaders. The way in which the leader functions arises out of who the leader is. The leader's being and functioning are twin to each other."<sup>98</sup> Steinke offers the practical strategy that clergy "cannot be as anxious as the people they serve."<sup>99</sup> Anxiety in the system creates reactions that are not favorable for sustained leadership in congregations. Therefore, he humorously reminds pastoral leaders that "To be a nonanxious presence, you focus on your own behavior and its modification rather than being preoccupied with how others function. In a hospital, a rule for caretakers reads: 'In case of cardiac arrest, take your own pulse first.'"<sup>100</sup>

Together, Steinke and Friedman have sought to scientifically explain congregational responses to pastoral leadership through systems theory. Friedman reasoned that leadership is important because "leadership in families...is essentially an organizational, perhaps even biological phenomenon."<sup>101</sup> By grounding the clergy's experience and role in community life through psychology, Friedman opened the way for scientific theory and thought to interact with the social dynamics of a religious body. This is something Stienke's work continues to emphasize. These authors demonstrate how systems theory became an ally in community religious and organizational development.

Friedman's work made scientific developments useful tools for those thinking through the social dynamics and stressors that clergy face. It was in the late 1980's that

---

<sup>98</sup> Peter L. Steinke, *Congregational Leadership in Anxious Times: Being Calm and Courageous No Matter What* (Herndon, VA: Alban Institute, 2006), xi.

<sup>99</sup> Ibid., xii.

<sup>100</sup> Ibid., 31.

<sup>101</sup> Friedman, *Generation to Generation*, 221.

applications of personality theory and models of stress began to be applied to the life of pastors. Gavis Davies wrote one of the first books from a Christian perspective about stress. About the same time, Roy Oswald and Otto Krueger published *Personality Type and Religious Leadership*, which applied the Myers-Briggs temperament assessment to clergy. They contributed to the new understanding that clergy fulfilled complicated roles in society, using temperament-based psychology to establish this point. The complex role of clergy necessitated interpretation and assistance from the social sciences, such as personality theories, leading to the connection between stress and parish ministry.

Oswald and Krueger stated the connection between stress and ministry this way: “Being a parish pastor is a very complex role. Trying to be a religious authority with so many different expectations of us can easily drive us to stress and burn-out.”<sup>102</sup> Their connection between the difficult nature of pastoral leadership and stress acknowledged what pastors knew all along, but few articulated. It is not easy to be God’s man for God’s people.

Oswald and Krueger noted that congregational expectations were a contributing factor in pastoral stress. After listing twenty-one separate tasks for parish ministers, they acknowledged that “When a congregation calls a pastor it expects that s/he will be good at all of the above activities. People tend to have non-rational, unconscious expectations of their resident holy person.”<sup>103</sup> These non-rational expectations work to undermine sustainable pastoral leadership. Other research confirms this finding that “ministers are at risk for emotional burnout due to the multiple roles they must fulfill and the pressures

---

<sup>102</sup> Roy M. Oswald and Otto Kroeger, *Personality Type and Religious Leadership* (Herndon, VA: The Alban Institute, 1988), 9.

<sup>103</sup> *Ibid.*, 28.

they feel from all sides.”<sup>104</sup> Oswald and Krueger encouraged religious leaders to work within the limitations and abilities of their individual personalities. Their solution was to focus pastors on what they could realistically do well, and then encourage them to live and work content with these limitations.

### **Self-Care and Sabbath Keeping**

There also arose in the late-1980’s an increased interest in rest and Sabbath issues. Marva Dawn’s work in this area brought a new perspective on the holistic understanding of the Christian life. She wrote that “One of the main causes of modern stress is that we have too much to do. Consequently, Sabbath days—when we don’t have to do anything—can release us from the anxiety that accompanies our work.”<sup>105</sup> Dawn also introduced a practical side to rest as she noted that she “was able to finish my class papers and projects more quickly because my Sundays of rest enabled me to work longer and more effectively the other six days of the week.”<sup>106</sup> This opened the way for even the most driven personalities to reconsider rest as a way of achieving more efficiency. While it was not Dawn’s intention, the pragmatics of handling stress were introduced as strategies for sustainable pastoral leadership. Dawn connected the need for physical rest and the role it plays in sustainable pastoral leadership. She also theorized that hobbies encourage longevity in the pastorate.<sup>107</sup> Rest and recreation had become part of going the distance in ministry.

---

<sup>104</sup> Hoge and Wenger, 129.

<sup>105</sup> Marva J. Dawn, *Keeping the Sabbath Wholly: Ceasing, Resting, Embracing, Festing* (Grand Rapids: Eerdmans, 1989), 23.

<sup>106</sup> *Ibid.*, 66.

<sup>107</sup> See *Ibid.*, 75..

## The Depressed Pastor

A few years later, the words “clergy” and “depression” appeared together in a book by Welton Gaddy. In this book, Gaddy, a Presbyterian pastor, recounts his own journey through admission in a psychiatric facility as a patient for depression. His work was unprecedented in its candor and showed how the stress and complex role of pastors had a psychological cost to sustainable pastoral leadership. The movement to recognize pastors as people and the necessity of this recognition was seen in Gaddy’s personal journey.

Gaddy’s ministry was put on hold during his treatment for depression. This delay created awkwardness and problems for his pastoral leadership. He theorized that if depression could be prevented through self-care, pastoral ministry work could be better accomplished. While he does not use the term “self-care,” he articulates the concept well when he advises pastors to, “Take care of yourself and your family. No one is going to watch out for the best interests of yourself and your family like you.”<sup>108</sup>

Gaddy’s own life and experience yielded hard-learned lessons of sustainable pastoral leadership. He warned pastors not to expect churches as employers to set sensible clergy work schedules. Instead, “employers and peers frequently support a person’s senseless work habits by affirmation and praise.”<sup>109</sup> The hunger for affirmation and praise played a role in his own depressive decline as he stayed focused on pleasing others rather than caring for himself.<sup>110</sup>

---

<sup>108</sup> C. Welton Gaddy, *A Soul under Siege: Surviving Clergy Depression* (Louisville: Westminster, 1991), 157.

<sup>109</sup> Ibid.

<sup>110</sup> “One common source of stress is the desire of most pastors to please and be accepted by others.” Harbaugh, *Pastor as Person*, 44.



While Gaddy can be credited with articulating the problem of clergy overwork and stress, he was short on solutions. He hoped common sense work patterns would overcome illogical and unhealthy work ethics. Gaddy noted:

A recent report within my own denomination revealed that in the last calendar year, aside from maternity benefits, among pastors more health-insurance money was paid for medical claims arising from stress-related problems than for any other difficulty. And the costliest hospital claims among pastors and their families were for the treatment of psychosis. Something is wrong in pastor-congregation relations.<sup>111</sup>

Gaddy may not have been able to articulate the whole scope of the problem, given that his closeness to his own situation could limit his objectivity. However, soon after the publication of Gaddy's work, Roy Oswald wrote the first book to specifically address clergy self-care. It is important to understand how this book rose out of the need for sustainable pastoral ministry and the recent social science developments that had taken place in the 1980's. It is also important to note that Oswald used the term "clergy self-care" for his title, identifying the solution to the problems articulated by Gaddy and pointing the way toward sustainable pastoral leadership.

### **Pastoral Self-Care**

Roy Oswald connected the burnout research that had emerged in the 1980's with the need for pastoral self-care. In his introduction, he points to the lack of pastoral self-care by relating composite case studies and then declaring, "In all of these cases, lack of self-care is at the core of their difficulties."<sup>112</sup> Oswald also blamed denominational agencies for giving little support to clergy physical self-care in the context of the sometimes insatiable demands of ministry. He called for systemic organizational change,

---

<sup>111</sup> Gaddy, 162.

<sup>112</sup> Oswald, *Clergy Self-Care*, viii.

including focus and effort toward clergy physical self-care.<sup>113</sup> Oswald insisted that self-care increased ministerial effectiveness.<sup>114</sup>

Ministerial effectiveness and success was defined by Oswald's view of holistic health. Oswald theorized that to have a healthy congregation, the pastor must be healthy. "The only way we will be a healthy presence among our people," Oswald wrote, "is to keep ourselves healthy."<sup>115</sup> He goes on to write, "that's where self-care comes in-doing all that is necessary to win out against the twin destroyers, stress and burnout."<sup>116</sup>

Oswald championed self-care as kingdom work.<sup>117</sup> This self-care was for the pastor, but in a very real sense, it was also for the congregation,<sup>118</sup> since greater ministerial effectiveness was achieved through holistic self-care in the areas of "physical, emotional, intellectual, and spiritual well-being."<sup>119</sup> Others have reached the same conclusion in seeing the importance in pastors caring for themselves for the sake of others: "Far from being a reason for self-indulgent laziness or an incentive for pastoral hypochondriacs, self-care is really a way of ensuring that we will remain effective in the great work God has given us to do."<sup>120</sup> Physical self-care for pastors is not self-centered. It is part of caring for others, as healthy clergy are better able to sustain pastoral leadership.

### **Self-Care Is Not Self-Centeredness**

Pastoral self-care is necessarily distinguished from self-centeredness. Peter Brain proposes that "The reason for self-care is not so that pastors can become indulgent

---

<sup>113</sup> Ibid., xi.

<sup>114</sup> Ibid.

<sup>115</sup> Ibid., 4.

<sup>116</sup> Ibid.

<sup>117</sup> Ibid., 5.

<sup>118</sup> "When our bodies give out, the church has an invalid on its hands." Ibid., 79.

<sup>119</sup> Ibid., 5.

<sup>120</sup> Brain, 20-21.

hypochondriacs, always concerned about their own welfare, or even to avoid the twin ravages of growing older and the fatigue of hard work and pastoral concern.” Instead, Brain asserts a connection between the health of the congregation and the health of the pastor. He admonishes, “self-care must never be a cover for selfishness, or a cowardly holding back in the interests of self-protection.”<sup>121</sup> Instead, “self-care is not selfish. We are stewards of our bodies just as we are stewards of other gifts received from God. Self-care means understanding the meaning of positive health and working toward it.” In this way, Brain follows Oswald’s conclusion that clergy self-care increases ministerial effectiveness.

Parker Palmer gives additional support, with an application beyond the clergy, in summing up why self-care is not selfish:

Self-care is never a selfish act—it is simply good stewardship of the only gift I have, the gift I was put on earth to offer to others. Anytime [sic] we can listen to true self and give it the care it requires, we do so not only for ourselves but for the many others whose lives we touch.<sup>122</sup>

Oswald frames the question of how to become a better pastor in terms of “How can I be a healthier, more whole person?”<sup>123</sup> Noticeably absent in his methodology were the ministry techniques, church programs, and Christian fads on which Evangelicals commonly rely. His work focuses on reminding pastors that they live within the context of physical limitations in which ministry must be accomplished.<sup>124</sup> Oswald’s emphasis on clergy becoming more healthy people, instead of focusing on improving in the pastoral

---

<sup>121</sup> Ibid., 23.

<sup>122</sup> Halaas, 45.

<sup>123</sup> Oswald, *Clergy Self-Care*, 10.

<sup>124</sup> “But when it comes to himself or herself, the pastor tends to forget that he or she is an embodied person.” Harbaugh, *Pastor as Person*, 48.

role, means that “Pastors, like anyone, need resources for health--physical and mental--including proper diet, exercise, and access to good medical care.”<sup>125</sup>

While Gaddy’s story was one of depression, Oswald shared about his positive experience with running, commending the “exhilarating benefits of a hard physical workout”<sup>126</sup> to all of his readers. He even went so far to describe physical exercise as a “means of grace”<sup>127</sup> in his life and wrote about how God spoke to him on his runs.<sup>128</sup> Such a priority on physical self-care led Oswald to conclude that “staying healthy-physically, emotionally, and spiritually-is key to my effectiveness and credibility...it's a professional expense I can't live without.”<sup>129</sup>

### **Physical Self-Care and Exercise**

As has already been seen in the literature, exercise is vital to maintaining sustainable pastoral leadership. However, David Wells asserts that “They must avoid the cult of health, beauty, and fitness so prominent in our day, with its near exclusive emphasis on looks and physique.”<sup>130</sup> Perfectionism, especially perfectionism in physical fitness, is self-defeating.<sup>131</sup> In discussing the proliferation of health clubs in the face of declining churches, David Wells notes, “the workout has become our secular worship. The treadmill is our path to eternal life. Or, at least, a way of beating back the aging process. The pounding of the sole, we think, just may save the soul.”<sup>132</sup>

---

<sup>125</sup> Gunderson and Pray, 181.

<sup>126</sup> Oswald, *Clergy Self-Care*, 142.

<sup>127</sup> Ibid.

<sup>128</sup> Ibid., 110.

<sup>129</sup> Ibid., 27.

<sup>130</sup> Wells.

<sup>131</sup> Richard Winter, *Perfecting Ourselves to Death: The Pursuit of Excellence and the Perils of Perfectionism* (Downers Grove, IL: Intervarsity, 2005), 31.

<sup>132</sup> David F. Wells, *The Courage to Be Protestant: Truth-Lovers, Marketers, and Emergents in the Postmodern World* (Grand Rapids: Eerdmans, 2008), 164.

With Wells' cautions in mind, exercise and physical self-care can become part of sustainable leadership. Oswald's understanding of leadership went beyond numerical success or organizational developments<sup>133</sup> to qualities such as wellness and contentment, which come from feeling good. Oswald contributed to an understanding that physical self-care is central to wellness. He recommended staying with a physical activity longer than an hour,<sup>134</sup> not for the sake of physical conditioning alone, but because of beneficial endorphin release, the so-called runner's high, and the outlet that vigorous exercise gives for anger, anxiety, and stress.<sup>135</sup> For Oswald, exercise and other hobbies are means by which a pastor can release his cares and concerns so that he can focus again. These methods "reverse the effects of the fight/flight response to novel or threatening situations,"<sup>136</sup> which are a source of stress, fatigue, and burnout. He uses this helpful illustration:

Having a workable letting-go technique under your belt is like having good solid downspouting on your house. There is no way you can stop rain from drenching your home. But you can channel that rain through downspouts so that it doesn't do damage to the foundation or the flower beds.<sup>137</sup>

While exercise is central to Oswald's view of physical self-care, he also advocates diet and rest. Diet helps to counteract the stresses on a pastor's body:

Poor eating patterns compound the difficulties related to excessive stress and burnout. When our bodies are assaulted by battering rams of emotional turmoil all day, and then we assault them even more with caffeine, sugar, salt, fat, alcohol, and refined flour, it's like a one-two punch.<sup>138</sup>

Poor diet can compound physical problems and prevent proper pastoral self-care.

---

<sup>133</sup> "Members of our congregations probably are similarly disappointed when they come to church and their pastor is too stressed to listen to them and too burned out to show any real caring." Oswald, *Clergy Self-Care*, 5.

<sup>134</sup> Ibid., 110.

<sup>135</sup> Ibid., 145.

<sup>136</sup> Ibid., 115.

<sup>137</sup> Ibid.

<sup>138</sup> Ibid., 152.

## Self-Care as Limiting Work Hours

One of the most radical and least practiced recommendations that Oswald makes for clergy self-care is taking two days off each week. Oswald explains:

I would recommend scheduling two consecutive days off per week because for some of you it is too difficult to relax when you have important events happening the next day. Two days off in a row gives you one unpressured day out of your clergy role.<sup>139</sup>

Furthermore, Oswald advocates limited work hours as part of a successful clergy self-care pattern. “When we work more than fifty hours per week, one of three things tends to go awry in our lives: our bodies deteriorate because there is not enough time to rest, exercise, or eat properly.”<sup>140</sup> In 2006, when Fred Lehr wrote *Clergy Burnout*, he subtitled the book, *Recovering from the 70-Hour Work Week and Other Self-Defeating Practices*. Lehr came to an understanding that more hours logged in ministry were not necessarily better. Other research shows that “At over 50 hours a week, [a pastor’s] productivity level drops, [and his] sermon preparation is cut short...so it winds up hurting the pastor and the congregation.”<sup>141</sup> Supposed herculean clergy work efforts, Lehr realized, were “what got those clergy rewarded in their ministries,” but those same efforts were “also the very thing that was wrecking their personal, spiritual, and family lives.”<sup>142</sup>

The pattern of daily overwork also carries over to the way that clergy handle their yearly vacation time. One does not have to look far to find clergy who, for whatever reason, do not take their full vacation each year.<sup>143</sup> Appropriate work hour limits

---

<sup>139</sup> Ibid., 123.

<sup>140</sup> Ibid.

<sup>141</sup> Hoge and Wenger, 59.

<sup>142</sup> Fred Lehr, *Clergy Burnout: Recovering from the 70-Hour Work Week and Other Self-Defeating Practices* (Minneapolis: Fortress, 2006), 3.

<sup>143</sup> Oswald, *Clergy Self-Care*, 125.

contribute to clergy self-care, and thus effectiveness, because “depleted clergy have nothing to give.”<sup>144</sup>

When clergy appropriately limit work time (an expression of physical self-care), they foster their own effectiveness and sustainable pastoral leadership. Oswald and Broadus encourage regular downtime for this purpose. “Every pastor should have a day off,” asserts Broadus. “Since he works strenuously on Sunday,<sup>145</sup> he should have a day during the week which may be used for rest, recreation, mediation, or uninterrupted study. A day’s recreation will return a pastor to his parish invigorated and ready for work.”<sup>146</sup> This invigorated state, brought on by rest, is part of the physical self-care picture, enabling pastors to better lead their congregations.

Regular time off is one of the ways that pastors practice self-care. Researchers studying the reasons that pastors resign have noted that, “the main conflicts experienced by ministers who left parish ministry is their ‘everyday,’ prosaic nature.”<sup>147</sup> Everyday, ordinary problems require a regular approach to physical self-care over the course of time.

To keep ministers in local parish ministry requires giving attention principally to more mundane problems, the kind most people deal with day in and day out. Conflict, burnout, feeling unfulfilled, and experiencing family and marriage problems are the main culprits in draining the supply of parish ministers.<sup>148</sup>

Time off becomes especially vital for longer pastorates. Oswald notes that burnout is higher in long pastorates “because the longer they are in place, the more

---

<sup>144</sup> Lehr, 45.

<sup>145</sup> Why are pastors so tired on Sundays after only a few hours work? Oswald offers this truism: “If you preach every Sunday, you expend as much psychic energy in three hours on Sunday morning as in a ten-hour day.” Oswald, *Clergy Self-Care*, 123.

<sup>146</sup> Broadus, 16.

<sup>147</sup> Hoge and Wenger, 84.

<sup>148</sup> *Ibid.*, 198.

responsibility they seem to accumulate.”<sup>149</sup> This increasing responsibility can lead to ministry impairment in longer pastorates, even when relational trust has been built. In this case, a Sabbatical may be used to sustain a long-term pastorate. Oswald states clearly that a sabbatical is not a vacation;<sup>150</sup> instead it is an active renewal and refreshment through a change in routine leading to better ministerial effectiveness.<sup>151</sup>

### **The Example of Self-care in Psychiatry**

Even though Oswald wrote in 1991, his work mirrors recent developments in the medical field in the 2000s. It seems that medical personnel are more attuned to their own physical needs and to how those needs are tied to their capacity and ability to care for patients. Perhaps this is because of necessity or because clergy justify their neglect of self-care as sacrificing or spiritual service.

Psychiatrists utilize two terms which are helpful for understanding how the caring professions are personally affected by their work. The term “compassion fatigue” explains how care-takers are negatively affected by helping others. This explains how caring and empathy “extracts a cost under most circumstances.”<sup>152</sup> Charles Figley defines compassion fatigue as “a form of caregiver burnout.”<sup>153</sup> He notes that people in helping professions and care-givers cannot turn emotion off, or avoid caring.<sup>154</sup>

An earlier work by Figley connected compassion fatigue with a second concept that psychologists utilize to identify how caring professionals are affected in their work:

---

<sup>149</sup> Oswald, *Clergy Self-Care*, 126.

<sup>150</sup> Ibid.

<sup>151</sup> For Sabbatical planning information see *Sabbatical Planning* by Richard Bullock published by the Alban Institute.

<sup>152</sup> Charles R. Figley, "Compassion Fatigue: Psychotherapists' Chronic Lack of Self-Care," *Psychotherapy in Practice* 58, no. 11 (2002): 1434.

<sup>153</sup> Ibid.: 1433.

<sup>154</sup> Ibid.: 1434.



secondary stress disorder.<sup>155</sup> Secondary stress disorder is defined as “the natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other—the stress resulting from helping or wanting to help a traumatized or suffering person.”<sup>156</sup> Secondary stress acknowledges the dynamic resulting from “close encounters between provider and recipient” and how those encounters “play a central role in the development of burnout.”<sup>157</sup> Secondary stress has been termed by others as “vicarious traumatization.”<sup>158</sup>

### Secondary Stress Disorder

Secondary stress disorder may be best understood as a form of post-traumatic stress disorder. Secondary stress disorder was included in the Diagnostic and Statistical Manual of Mental Disorders, a manual clinicians use to diagnose and treat psychological disorders in 1980 as “the provision that one could be traumatized both by being in harm’s way and by bearing the distress of others who are.”<sup>159</sup> Figley’s work emphasizes that caregivers are at risk when they over-identify with the client or relate the client’s condition to their own.<sup>160</sup> In the caring event, counter transference is possible, with the caregiver emotionally reacting to the client.<sup>161</sup> What may arise is a phenomenon called “compassion stress,” which is defined as “the residue of emotional energy from the empathic response to the client and is the on-going demand for action to relieve the suffering of a client. Like any stress, with sufficient intensity it can have a negative

---

<sup>155</sup> Ibid.: 1435.

<sup>156</sup> Ibid.

<sup>157</sup> Maslach, 34.

<sup>158</sup> Holaday and others: 54.

<sup>159</sup> Figley: 1434.

<sup>160</sup> Ibid.: 1435.

<sup>161</sup> Ibid.

impact” on the caregiver.<sup>162</sup> This is especially true when the truth that “interactions with other people can be a source of burnout”<sup>163</sup> is understood.

Even though research on secondary stress in psychology is developed and ongoing, Marva Dawn is one of the few writers from a biblical perspective to name secondary stress as a problem in ministry. She writes, “Those who serve God, the Church, and the world need to understand that our souls are repeatedly battered by the sufferings of those we serve, by our own losses, by battles that seem insurmountable.”<sup>164</sup> She offers “A Sabbath way of life” as a solution since it “is essential to allow us enough time to retreat from these cares and griefs to attend to our needs for soul healing and body tending.”<sup>165</sup> She further connects the necessity of bodily rest with spiritual rest, showing that good physical self-care will “prepare us for other forms of placidity.”<sup>166</sup>

In writing about secondary stress, also known as secondary trauma, Judith Herman articulates why the caring professions are stressful: “The core experiences of psychological trauma are disempowerment and disconnection from others.”<sup>167</sup> This disconnection and disempowerment impacts both the survivor of the trauma and the counselor, pastor, or caring profession member. Thus, pastors may experience isolation and inability to help sufferers of trauma. As a result, employing self-care practices can help empower survivor and helper alike. However, new primary or secondary trauma may interrupt, impair, or disrupt self-care practices.<sup>168</sup> Those in the helping professions must return to these practices, since “the physioneurosis of post-traumatic stress disorder

---

<sup>162</sup> Ibid.: 1437.

<sup>163</sup> Maslach, 34.

<sup>164</sup> Dawn, *Sense of Call*, 183.

<sup>165</sup> Ibid.

<sup>166</sup> Ibid., 41.

<sup>167</sup> Judith Herman, *Trauma and Recover: The Aftermath of Violence—from Domestic Abuse to Political Terror*, Revised ed. (New York: Basic Books, 1997), 133.

<sup>168</sup> Ibid.

can be modified with physical strategies. These include the use of medication to reduce reactivity and hyperarousal and the use of behavioral techniques, such as relaxation or hard exercise, to manage stress.”<sup>169</sup> The ability to sustain and reconstruct<sup>170</sup> physical self-care practices when disrupted is an expression of resilience and health.

The good news for both the caregiver and the client is that compassion fatigue is “highly treatable once workers recognize it and act accordingly.”<sup>171</sup> Education in symptoms and self-care can be utilized to help prevent onset.<sup>172</sup> “Gain[ing] mastery of distress” is vital for caregivers since empathy and caring cannot be turned off.<sup>173</sup> Mitigating stress, rather than avoiding it, is the way for clergy maintain a caring stance toward their congregation, which the people need, without encountering or engendering their own ministry impairment.

### **Self-care as Schedule Management**

At least one study argues that the main factor in therapist well-being, in this case meaning the avoidance of symptomatic post secondary stress or vicarious trauma, was “the number or percentage of trauma cases on the therapist’s caseload.”<sup>174</sup> In other words, self-care practices were not a primary source of relief for counselors. The implication that “those who feel traumatized may not be balancing life and work adequately and may not be making effective use of leisure, self-care, or supervision” has been the focus regarding “intervention strategies with therapists.”<sup>175</sup> “The contrary findings of this study, however, show “that the primary predictor of trauma scores is hours per week spent working with

---

<sup>169</sup> Ibid., 160.

<sup>170</sup> Ibid., 161.

<sup>171</sup> Figley: 1436.

<sup>172</sup> Ibid.: 1438.

<sup>173</sup> Ibid.: 1440.

<sup>174</sup> Ted Bober and Cheryl Regehr, “Strategies for Reducing Secondary or Vicarious Trauma: Do They Work?,” *Brief Treatment and Crisis Intervention* 6, no. (2006): 2.

<sup>175</sup> Ibid.: 8.

traumatized people,” such that “the solution seems more structural than individual.”<sup>176</sup>

Other more recent research contradicts these findings, indicating “a tentative relationship between self-care, compassion fatigue, burnout, and compassion satisfaction.”<sup>177</sup>

What can clergy learn from these studies? Controlling caseload seems to be a primary factor in reducing symptomatic effects of secondary stress. However, it should be noted that at least one previous study did find a negative correlation “between stress and self-care activities and leisure time.”<sup>178</sup> This correlation must exist on a regular or maintenance level, since “There is no evidence that using recommended coping strategies [including self-care] is protective against symptoms of acute distress.”<sup>179</sup> The problem that remains, regardless of the findings, is that many clergy cannot control their caseload. National disasters, major illnesses, death, accidents, and personal crises are all unscheduled. Limiting time spent with the traumatized can go against the pastoral calling and ministerial obligation. Pastors are essentially challenged to maintain boundaries and compensate in their schedules where possible.

### **Self-care in an Organization’s Culture**

Recent literature in self-care advocates the formation of a culture of self-care in the organization alongside the individual. By creating a self-care environment in the organizational system, client and caretaker alike benefit.<sup>180</sup> Even schools “must put needed resources into self-care training and activities, integrate self-care opportunities

---

<sup>176</sup> Ibid.

<sup>177</sup> Karen Alkema, Jeremy M. Linton, and Randall Davies, “A Study of the Relationship between Self-Care, Compassion Satisfaction, Compassion Fatigue, and Burnout among Hospice Professionals,” *Journal of Social Work in End-of-Life and Palliative Care* 4, no. 2 (2008): 117.

<sup>178</sup> Bober and Regehr: 6.

<sup>179</sup> Ibid.: 7.

<sup>180</sup> Jeffrey E. Barnett and Natalie Cooper, “Creating a Culture of Self-Care,” *Clinical Psychology Science and Practice* 16, no. 1 (2009): 19.

into students' schedules....”<sup>181</sup> Unfortunately, most of this discussion is limited to the psychological realm as regards client/therapist care dynamics and is not applied to pastors.

According to the literature, psychologists seem to readily admit the stressful nature of their work and their need for self-care, even going so far as to label self-care as a core competency.<sup>182</sup> Pastors, however, are reticent to strive for health in this area, and statistics from short clergy tenures seem to show that pastors put less of an emphasis on self-care.<sup>183</sup> Perhaps self-care is seen as self-centered, tantamount to resisting Jesus’ call of sacrifice. By contrast, therapists see self-care as anything but an indulgence and as part of their professional identity.<sup>184</sup> Clergy, unlike psychologists, appear not to see self-care as an “ethical imperative.”<sup>185</sup> It would seem that more study is needed to explore why clergy do not connect self-care with their calling as others in the helping professions do. Long ago, Broadus knew that the pastor’s physical condition influenced how people perceive him and his ministry: “To stand before a waiting congregation is a great challenge. Physical trim will add to mental acuteness and vitality. Good health promotes effective speech.”<sup>186</sup>

Why do pastors have problems practicing physical self-care? Several possible reasons emerge, including the fact that pastors face pressures and expectations in their organizational role in the church arising from the clergy’s unique combination of

---

<sup>181</sup> Ibid.

<sup>182</sup> Ibid.: 17.

<sup>183</sup> “There are plenty of materials on the importance of nourishing one’s spirit with spiritual food and an abundance of books for the nurturing of one’s mind, but rarely are these two connected with an emphasis on caring for the physical temple of one’s body.” Dawn, *Sense of Call*, 179.

<sup>184</sup> Barnett and Cooper: 17..

<sup>185</sup> Ibid.:18.

<sup>186</sup> Broadus, 16.

spiritual, personal, and professional roles.<sup>187</sup> “The clergy role is *sui generis*, for it is the only profession that wraps personal identity, professional identity, and religious all in the same package.”<sup>188</sup> This unique role and accompanying expectations can lead pastors to strive to please others. As they strive to please others, to keep the peace, “they have become estranged from self, from the people closest to them, and from God.”<sup>189</sup> In the face of this estrangement, Candace Benyei espouses the need for personal responsibility. That “personal responsibility is about healing the self so that one can love one's neighbors.”<sup>190</sup> Ministerial effectiveness, especially where sustainable pastoral leadership is involved, becomes measured not just by what is happening outside of pastors, but by what has happened inside of them, how pastors are managing themselves.

### **Connecting Congregational Health and Pastoral Health**

How can pastors bring life to others if they fail to maintain and develop their own health? Marva Dawn articulates the need for Christians to look differently at progress:

We do not progress in the Christian life by becoming more competent, more knowledgeable, more virtuous, or more energetic. We do not advance in the Christian life by acquiring expertise. Each day, and many times each day, we return to Square One...we hear Jesus say, “Unless you turn and become like children, you will never enter the kingdom of heaven” (Mt.18:3). And so we become as little children...we adore and we listen.<sup>191</sup>

In addition to looking at success differently, writers have noted that clergy health and congregational health are connected. The authors of *Leading Causes of Life* grasp this concept of connection between pastoral and congregational health. The authors noted

---

<sup>187</sup> David N. Mosser, "Manging the Public Life, Freeing the Personal Life," *The Christian Ministry* 23, no. 2 (1992).

<sup>188</sup> G. Lloyd Rediger, *Beyond the Scandals: A Guide to Healthy Sexuality for Clergy* (Minneapolis: Fortress, 2003), 22.

<sup>189</sup> Hands and Fehr, 13.

<sup>190</sup> Candace R. Benyei, *Understanding Clergy Misconduct in Relious Systems* (New York: Haworth Press, 1998), 146.

<sup>191</sup> Dawn, *Sense of Call*, 91.

that they “spend a lot of time with clergy and laypersons, sometimes focusing on their individual health and sometimes on their communities' health. It turns out to be the same subject.”<sup>192</sup>

In spite of this connection,

One of the ironies of our time is that many people who serve in caring professions experience poor health. Perhaps the most ironic of all is the strikingly below average health of clergy. Age for age, clergy have significantly greater incidences of chronic disease, heart and GI tract conditions, and stress, which is a bit embarrassing for a group preaching about life every week.<sup>193</sup>

Preaching about life every week is not enough to stave off the effects of neglecting the physical body. “Clergy today have, on average, a pattern of health that is significantly worse than the average American.”<sup>194</sup> Contemporary clergy lifestyles have led these authors to conclude that “This generation of clergy, from almost all denominations, has health indicators that rank them among the most unhealthy professions in the country.”<sup>195</sup>

It may be deduced from Gunderson and the recent emergence of the Duke’s Clergy Health initiative that clergy may not be able to sustain congregational health for the long term if they neglect their physical health.

### **Physical Fitness for Pastors**

In writing about sustainable pastoral leadership, Peter Brain admits his own difficulty maintaining physical fitness. But he quickly notes, “Everybody wins when we are in reasonably good shape.”<sup>196</sup> His use of the term “reasonably good shape” points the way toward a standard fitness level for pastors. G. Lloyd Rediger asserts that pastors need

---

<sup>192</sup> Gunderson and Pray, 164.

<sup>193</sup> Ibid., 179.

<sup>194</sup> Ibid.

<sup>195</sup> Ibid., 138.

<sup>196</sup> Brain, 168.

not be obsessive<sup>197</sup> about their physical condition,<sup>198</sup> for this is unhealthy.<sup>199</sup> Instead, Rediger explains that a reasonable fitness level “is not about muscles, marathoning, and physical beauty, it is about being the best that we can be.”<sup>200</sup> He continues, “simple changes in nutrition, exercise, work, and rest habits” can bring about fitness changes which enable pastors not “to be overwhelmed by the criticisms, abuses, tough decisions, and inertia of spiritually sick congregations, all of which are now normal in pastoring.”<sup>201</sup> “Reasonable health” is better than the term “optimal health,” which Oswald uses. However, Oswald means much the same: “What does good self-care look like? The term optimum health may provide some glimpses. This means striving for the best that we can be given our age, genes, liabilities and disabilities, and life experiences.”<sup>202</sup>

### **Self-Care and the Physical Body**

The challenges of being a pastor necessitate reasonable, or adequate, physical fitness. For, as Oswald explains, a pastor’s ministry will not go where his body cannot take it.<sup>203</sup> Eugene Peterson reasons that clergy fitness is a matter of consistency and integrity:

If those entrusted with the care of the body cannot be trusted to look after their own bodies, far less can those entrusted with the care of souls look after their own

---

<sup>197</sup> “The fitness is not perfection--it is about being the best that you can be, as you are and can become.” Also, “A further distraction from reality is the glamour and performance paradigm that attracts or repels us with illusory images of muscles, physical beauty, and marathon-type endurance.” G. Lloyd Rediger, *Fit to Be a Pastor: A Call to Physical, Mental, and Spiritual Fitness* (Louisville: Westminster John Knox Press, 2000), x.

<sup>198</sup> “I remind myself that I don’t have to be perfect, nor do I have to struggle and strain in order to be fit. I simply follow my simple, daily fitness pattern and let the satisfactions and successes of being fit reassure me...Fitness is not perfectionism.” Ibid., 28.

<sup>199</sup> “Intense, even masochistic exercise can be a troubled reaction to dislike for the body, or a guilty response to self-abuse of the bodies. Other psychic wounds or obsessive-compulsive tendencies can induce counterproductive fervor in exercising and stressing the body.” Ibid., 83.

<sup>200</sup> Ibid., 17.

<sup>201</sup> Ibid., 28.

<sup>202</sup> Oswald, *Clergy Self-Care*, 5.

<sup>203</sup> “All great religious leaders eventually learn that they must do ministry within the confines of a human body.” Ibid., 71.



souls, which are even more complex than bodies and have a corresponding greater capacity for self-deceit.<sup>204</sup>

What other problems do pastors face that necessitate self-care? Some research suggests that the very nature of pastoral ministry generates dynamics that negatively impact pastors personally. Bob Wells articulates the risks inherent in ministry, “Much of the clergy health problem may be rooted in the very nature of ministry today—what Stephanie Paulsell, a visiting lecturer on ministry at Harvard Divinity School and author of *Honoring the Body*, calls ‘the overwhelmingness’ of ministry.”<sup>205</sup> The “overwhelmingness” of ministry carries with it inherent risks for clergy health. Self-care represents a solution, but there is also the need for “creating and cultivating within the church a holistic approach to health that addresses wellness in all its physical, emotional, social, spiritual, and intellectual dimensions.”<sup>206</sup> Cultural changes within the church offer a solution for pastors. Through the organizational structure of a church, a preventative approach<sup>207</sup> may be implemented where clergy health is valued.

### **Pastoral Self-Care Connected to the Congregation**

Most of the literature focuses on what pastors can do in their lives to sustain their own health. Perhaps because churches tend to resist change, or because clergy must first and foremost be responsible for themselves, there is not much discussion of how a church might help the pastor experience reasonable health. A systems theory perspective sees the pastor as the most responsible and thus the one “who can most affect calm, focus, and

---

<sup>204</sup> Eugene H. Peterson, *Working the Angles: The Shape of Pastoral Integrity* (Grand Rapids: Eerdmans, 1987), 165.

<sup>205</sup> Wells, “Which Way to Clergy Health?”.

<sup>206</sup> Ibid.

<sup>207</sup> Barnett and Cooper: 17.

change in the group.”<sup>208</sup> The hope for change, then, lies with the pastor rather than with the congregation.<sup>209</sup> This concept from systems theory brings a realistic note to the idea of pastoral self-care. Only pastors can control their own actions. Ronald Richardson, in writing about healthy church dynamics from a systems perspective, advises church leaders to maintain differentiation. According to Richardson, differentiation is “the ability to be in charge of self, even when others in the emotional field are actually trying to make us be different from how we are.”<sup>210</sup> He concludes that “The better differentiated we are, the more we can behave in ways consistent with our own professed beliefs.”<sup>211</sup>

Richardson adds the illustration of a compass to make his point. When a pastor is not differentiated, his internal compass may be drawn toward the emotional field of others, or influenced by it, instead of the true direction needed for the situation.<sup>212</sup> As a result of differentiation, the pastor is enabled to choose vision over relationships, or, as Israel Galindo puts it, “practice a kind of redemptive ruthlessness,” which is at times necessary for kingdom progress.<sup>213</sup>

A similar view on the dynamics of church life and interactions between clergy and congregations comes from Peter Steinke. He believes “that health comes from empowering people to take responsibility for their own health.” The application to the congregation then comes from an understanding that “The health of a congregation is no

---

<sup>208</sup> Peter L. Steinke, *How Your Church Family Works: Understanding Congregations as Emotional Systems* (Herndon, VA: Alban Institute, 1993), 104.

<sup>209</sup> “I feel the most important variable in the issue of pastoral longevity is the pastor himself. The other players in the drama--churches, denominational leadership and educational institutions--play their own significant roles. but the pastor is in the best position to know more, teach more and manage better the issues of longevity than anyone else.” Brown, 128.

<sup>210</sup> Ronald W. Richardson, *Creating a Healthier Church: Family Systems Theory, Leadership, and Congregational Life*, Creative Pastoral Care and Counseling (Minneapolis: Fortress, 1996), 87.

<sup>211</sup> *Ibid.*, 182.

<sup>212</sup> *Ibid.*, 87.

<sup>213</sup> Israel Galindo, *The Hidden Lives of Congregations: Discerning Church Dynamics* (Herndon, VA: Alban Institute, 2004), 74.

different. It comes from individuals being responsible, being stewards of the whole. Healthy people create healthy congregations. The congregation's health and the people in it are connected.”<sup>214</sup> Pastoral health cannot be left out of this equation since interpersonal and organizational issues are the main factors contributing to “pushing pastors away from local ministry.”<sup>215</sup> Gary Harbaugh suggests forming a covenant bond of mutual concern and love between congregation and clergy:

The purpose of self-care, collegial, and congregational support, of course, is to take care of the leader for the sake of the people who are dependent on the leadership of the leader. It is not a matter of privilege, but rather of responsibility. The leader is responsible to provide leadership. It is responsible to take whatever precautions may be necessary to make certain that the needed leadership can continue to be provided.<sup>216</sup>

Bob Sitze’s work in *Not Trying too Hard* aims to assist pastors in working appropriately toward sustainable congregations. He introduces the concept that pastors frequently try too hard and burn out through overexertion. Overexertion is sometimes rewarded by the congregation with praise or through other means. When the clergy are dysfunctional or burned out, “continuing dysfunction of one leader quickly infects others.”<sup>217</sup>

Sitze makes the case for an optimal effort level, an avoidance of both overwork and laziness. This type of effort level achieves desired results for the long haul, producing a sustainable congregation. He borrows concepts from sports psychologist Mihalyi Csikszentmihalyi, since ministry is also a team or cooperative endeavor, to explain this optimal effort level. It is possible that a pastor may experience what Csikszentmihalyi

---

<sup>214</sup> Peter L. Steinke, *Healthy Congregations: A Systems Approach* (Herndon, VA: Alban Institute, 1996), 81.

<sup>215</sup> Hoge and Wenger, 198.

<sup>216</sup> Harbaugh, Brenneis, and Hutton, *Covenants and Care*, 101.

<sup>217</sup> Sitze, 39.

termed “flow,” or “optimal experience,” which is “an almost visceral certainty that your life is complete at this moment, in this place, among this group of people.”<sup>218</sup> In the flow of their calling, a pastor will experience the most fulfillment, and a congregation has the greatest chance for organizational health. What is good for the pastor also seems good for the congregation. In fact, the long-term pastorate is “At the end of our analysis...the one advantage that outlasts, outweighs, and outshines all the disadvantages.”<sup>219</sup> This is important since “the physical and emotional health of their leaders impact[s] the work and vitality of the church.”<sup>220</sup>

When congregations and pastors work together well, a long-term pastorate may be the result.<sup>221</sup> A cooperative relationship between the pastor’s leadership and the congregation is evidenced through a long-term pastorate of seven years or more.<sup>222</sup> However, long-term pastorates are difficult to achieve, since “In the accounts of pastors faced with congregational conflicts, two themes came up again and again. One was that churches, even those that say they want to grow, are unwilling to make the changes necessary to do it.”<sup>223</sup> Long-term pastorates seem to be cooperative efforts, but pastors must be warned that research shows “an assumption that if there's a conflict in the church, the pastor must be somehow at fault.”<sup>224</sup> While the literature points to the difficulty of achieving a long-term pastorate, long-term pastorates can be seen as beneficial to both the congregation and the pastor.

---

<sup>218</sup> Ibid., 32.

<sup>219</sup> Ludwig, x.

<sup>220</sup> Halaas, 4.

<sup>221</sup> “It seems that pastors who take the vow of stability have the opportunity to meet one of the greatest needs of a changing secular society.” Brown, 4.

<sup>222</sup> Ludwig, 5.

<sup>223</sup> Hoge and Wenger, 93.

<sup>224</sup> Ibid., 95.

### Physical Self-Care and Long-Term Pastorates

Glenn Ludwig notes that “There is every reason to believe that the long-term pastorate is more effective for our congregations and more fulfilling for our pastors,” than serial pastoral transition.<sup>225</sup> Others have noticed “the fact that the average length of the American pastorate is 3-5 years,” and how “short-term pastorates seem to perpetuate instability and stress in the pastor's life.”<sup>226</sup> Most pastorates do not reach what Ludwig writes about: “something happens in a pastorate somewhere between five and seven years”<sup>227</sup> leading to relational health and ministry breakthrough. One of the strategies Ludwig advises for counteracting one of burnout’s symptoms, depression, is with exercise, since “There is no better antidote to depression than exercise. We need to get those endorphins working for us in positive ways.”<sup>228</sup> Depression can contribute to ministry transition and impairment as previously discussed in Welton Gaddy’s book *A Soul Under Siege: Surviving Clergy Depression*. As a pastor unloads accumulated stress through exercise, positive benefits can support sustainable leadership for the long-term pastorate. In discussing sustainable leadership in general, Jim Loehr and Tony Schwartz point out that “We live in a world that celebrates work and activity, ignores renewal and recovery, and fails to recognize that both are necessary for sustained high performance.”<sup>229</sup> The high performance of a long-term pastorate is difficult to maintain without activity, rest, and “toughening.” Loehr and Schwartz explain,

Building physical energy capacity is sometimes referred to as “toughening.” In the largely sedentary world of white-collar workers the absence of any regular

---

<sup>225</sup> Ludwig, ix.

<sup>226</sup> Brown, 5.

<sup>227</sup> Ludwig, 7.

<sup>228</sup> Ibid., 43.

<sup>229</sup> Jim Loehr and Tony Schwartz, *The Power of Full Engagement: Managing Energy, Not Time, Is the Key to High Performance and Personal Renewal* (New York: Free Press, 2003), 37.

physical demand precludes the natural toughening that occurs simply from a physically active life. The result is that as we age, most of us have less energy available to cope with challenging and stressful situations.<sup>230</sup>

So as pastors age in their pastorates, an active lifestyle may work against natural forces of tiredness, or reduced energy, that come with increasing age.

In commending the long pastorate to others, David Hansen writes about his experience of staying in his church for four years, which was longer than any of the church's other recent pastors had stayed. He explains that "by staying four years, and showing no signs of leaving, I caused the church dissonance, something like the turbulence a jet hits just before it breaks the sound barrier."<sup>231</sup> Hansen's sustainable leadership fostered a ministry breakthrough, made possible through longevity in ministry—in his case four years.<sup>232</sup> Exercise and physical activity may help pastors achieve longevity by mitigating physical, and perhaps some psychological limiting factors through exercise. More study is needed to see how clergy's exercise habits impact pastoral tenure.

### **Physical Self-Care and the Minister's Family**

Physical self-care, because of its use in stress reduction, has a positive impact not only on congregations and ministers, but on their families as well. The families of ministers are not immune to the effects of stress,<sup>233</sup> whether those effects may be termed tertiary (in response to the pastor's secondary stress), secondary (as related to the pastor's

---

<sup>230</sup> Ibid.

<sup>231</sup> David Hansen, *Loving the Church You Lead: Pastoring with Acceptance and Grace* (Grand Rapids: Baker, 1998), 66.

<sup>232</sup> "In denomination after denomination, there is little variation from the national norm of four years for the length of time a pastor stays where he is. Somehow, the vow of stability has gotten lost in the frantic search for whatever it is pastors and churches are looking for." Brown, 28.

<sup>233</sup> "Traditionally research on clergy life has focused on the stressors and environment affecting the life of the minister...However, the professional life of the clergy often dramatically spills over into the family to a greater degree than most other professionals." Bruce Hardy, "Pastor Care with Clergy Children," *Review and Expositor* 98, no. 4 (2001): 545.

primary stress), or primary (difficulties in life inside or outside the church).<sup>234</sup> A study investigating causes of stress in pastoral families “found that expectations for a perfect marriage, lack of time, and the lack of privacy were sources of pastoral stress in the marriage.”<sup>235</sup> Proper boundaries can offset the impact of stress in a pastor’s marriage and family. “Clergy can relieve their overall stress by knowing when and how to say ‘No.’ Set[ing] boundaries and learn[ing] to resist taking on inconsequential, unimportant, and often trivial demands”<sup>236</sup> are vital to family satisfaction in ministry.

“As members of the clergy family, clergy children do in fact have documented experiences that distinguish them from other families.”<sup>237</sup> These differences are expressed in three categories: unprecedented demands, ethics of confidentiality, and lack of free weekends, since “parishioner’s holidays are the church’s holydays and therefore the clergy must work.”<sup>238</sup> Pastors must address these differences and unique stressors with their spouses and children as they journey toward sustainable pastoral leadership. The alternative is that the pastor will suffer, taking his family with him on the journey of psychological and physical decline.<sup>239</sup> One of the primary means for pastors to nurture their families is through their own physical self-care. As previously discussed, the benefits that a church family receives from their leader’s health will also apply to the leader’s family.

---

<sup>234</sup> G. Wade Rowatt, “Stress and Satisfaction in Ministry Families,” *Review and Expositor* 98, no. 4 (2001): 524.

<sup>235</sup> *Ibid.*: 525.

<sup>236</sup> *Ibid.*: 531.

<sup>237</sup> Hardy: 547.

<sup>238</sup> *Ibid.*

<sup>239</sup> “The demise of the clergy marriage and disruption of the family due to professional demands would be a tragic irony when the faith community so strongly encourages family health and discourages divorce.” *Ibid.*: 554.

### **Physical Self-Care Assessment**

Since physical self-care is portrayed as important in the literature, contributing to both the health of the clergy, congregation, and clergy family, then the ability to measure self-care could help to establish a trend and explain its benefits. However, until 2008, there was “no instrumentation for which reliability and validity of self-care [had] been established.”<sup>240</sup> In 2008, Karen Alkema, Jeremy M. Linton, and Randall Davies developed the Self-Care Assessment Worksheet. This multi-faceted assessment evaluates self-care in multiple areas of life.<sup>241</sup> However, this assessment has yet to be adopted as a standard. Measuring self-care in relation to the ministry dynamics of burnout and depression becomes difficult without a standard assessment tool. How does one know whether self-care practices are effective in stymieing the effects of stress? Perhaps further study could lead to the creation of a diagnostic so that self-care can be objectively measured in patterns of well-being, overall life satisfaction, and health.

### **Self-Care and Foreign Cultures**

Measuring and assessing self-care practices may be more difficult in different cultural contexts. Since values can differ from culture to culture, the need for self-care may change across nationalities.<sup>242</sup> Differences in values make self-care difficult to define outside Western culture. While it is outside the scope of the researcher’s work, an implication for self-care in foreign cultures may relate to missionaries and the challenges they face. For example, physical exercise may make little sense in locales where food is

---

<sup>240</sup> Mineko Yamashita, “The Exercise of Self-Care Agency Scale,” *Western Journal of Nursing Research* 20, no. 3 (1998).

<sup>241</sup> Alkema, Linton, and Davies: 115.

<sup>242</sup> Yamashita: 378.



scarce or personal safety is a concern. Each culture may define self-care in its own way, forcing those serving pastorally in a foreign culture to contextualize their own self-care.

## Conclusion

Gwen Halaas summarizes the literature on self-care by stating that “Self-care is essential to being healthy,”<sup>243</sup> yet “some confuse self-care with selfishness and think that taking the time to tend to oneself is time unfairly taken from attending to the needs of others.”<sup>244</sup> However unpopular the notion, “taking responsibility for one's own health is a sign of maturity and wisdom.”<sup>245</sup> Clergy who sustain pastoral leadership will find that “we never outgrow our need for self-care; we will always benefit from it.”<sup>246</sup> The sooner<sup>247</sup> clergy establish self-care patterns<sup>248</sup> as an expression of the “as yourself” love commanded in the scripture,<sup>249</sup> the greater their chance for sustainable pastoral leadership. Self-care should become “a lifelong habit.”<sup>250</sup>

Therefore, the purpose of this study was to understand what pastors identify as helpful physical self-care practices for sustainable pastoral leadership in local church ministry. A pathway toward longevity in ministry may be established through physical self-care practices. Physical-self care is a contributing factor for sustainable pastoral leadership in local congregations.

---

<sup>243</sup> Gwen Wagstrom Halaas, *Clergy, Retirement, and Wholeness: Looking Forward to the Third Age* (Herndon, VA: Alban Institute, 2005), 5.

<sup>244</sup> Ibid.

<sup>245</sup> Ibid., 6.

<sup>246</sup> Ibid., 8.

<sup>247</sup> “This means that earlier in a career when stress may be more acute and self-care practices are more critical for stress mitigation, self-care practices may be neglected.” Alkema, Linton, and Davies: 115.

<sup>248</sup> “Those who establish the habits of good self-care from an early age will maximize their health and vitality.” Halaas, *Clergy, Retirement, and Wholeness*, 7.

<sup>249</sup> Mark 12:31 *The Holy Bible: English Standard Version*.

<sup>250</sup> Halaas, *Clergy, Retirement, and Wholeness*, 7.

### **CHAPTER THREE**

The purpose of this study was to understand the physical self-care practices pastors utilize to sustain pastoral leadership in local church ministry. The assumption of this study was that pastors who identify physical self-care practices as helpful are able to sustain their pastoral leadership in the midst of the everyday stresses they face. This study investigates the correlation between good physical self-care practices and longevity in pastoral ministry. Sustaining pastoral leadership in local churches can be difficult for clergy and failure to practice physical self-care may undermine ministry leadership. Therefore, a qualitative study was proposed in order to examine how physical self-care practices might contribute to sustainable pastoral leadership.

#### **Design of the Study**

Sharan Merriam, author of *Qualitative Research and Case Study Applications in Education*, wrote that “the product of a qualitative study is richly descriptive.”<sup>251</sup> Qualitative research fits the goal of this study since it describes the leadership and lives of pastors who practice physical self-care.<sup>252</sup> In a qualitative study, the researcher “build[s] toward theory from observations and intuitive understandings gained in the field.”<sup>253</sup> The “essential characteristics of qualitative research” are used in “eliciting

---

<sup>251</sup> Sharan B. Merriam, *Qualitative Research and Case Study Applications in Education* (San Francisco: Jossey-Bass, 1998), 8.

<sup>252</sup> Ibid., 6.

<sup>253</sup> Ibid., 7.

understanding and meaning” with “the researcher as primary instrument of data collection and analysis.”<sup>254</sup>

The researcher identified and interviewed participants that were currently sustaining pastoral leadership in a local church setting. Sustaining pastoral leadership in a local church setting means that clergy can be described as “fresh and enthusiastic for the work of pastoring for as long as possible.”<sup>255</sup> Further, clergy who are sustaining pastoral leadership avoid “joyless survival and the unsatisfying experience of living on the edge”<sup>256</sup> through their “attitude to self-care” which “will keep [them] from premature burnout.”<sup>257</sup> Sustainable pastoral ministry is more than just surviving, but is about the “freshness and vitality to thrive” in ministry.<sup>258</sup> The researcher looked for clergy who fit that description, seeking subjects for whom physical self-care was being used as a resource to sustain pastoral leadership, since “unquestionably, the most effective religious leaders are those who focus their efforts on the primary prevention of ministry impairment.”<sup>259</sup>

Once subjects were identified, interviews were conducted using a semi-structured format. In each interview, the research subjects were asked questions about their physical self-care practices. The researcher divided the questions into categories of physical self-care used by the literature.<sup>260</sup> Questions were asked in four different areas: stress

---

<sup>254</sup> Ibid., 11.

<sup>255</sup> Brain, 20.

<sup>256</sup> Ibid., 10.

<sup>257</sup> Ibid.

<sup>258</sup> Ibid., 21.

<sup>259</sup> Len Sperry, *Ministry and Community: Recognizing, Healing, and Preventing Ministry Impairment* (Cellegeville, Minnesota: The Liturgical Press, 2000), 106.

<sup>260</sup> “Three elements of health related fitness and wellness are essential in the lives of clergy: physical exercise, diet/nutrition, and stress management.” Demaray and Pickerill, 47. The researcher has taken these three essential categories and added the category of rest. Rest could be subsumed under stress management, however, the need for rest in physical self-care could establish it as its own category. Gwen Halaas explains

management, nutrition, rest, and exercise. In their recommendations for instructing graduate psychology students, M. Sean and Theresa O'Halloran give recommendations which help formulate these four categories:

Caring for one's physical self while dealing with issues of trauma and violence is critical to maintaining balance and health. We encourage students to eat balanced meals, take nutritional supplements or medications if recommended by their health practitioner, get plenty of sleep, and include exercise in their schedules... We also stress the importance of relaxation, recreation, and play.<sup>261</sup>

Ted Bober, Cheryl Regehr, and Yanqiu Rachel Zhou similarly understood physical self-care categories by noting that "Other forms of self-care reported as helpful include physical activity, attention to diet and rest, and diversionary activities."<sup>262</sup>

This study is considered a best practices study. No one was interviewed that did not engage in good and active physical self-care practices or who was not effectively sustaining pastoral leadership in a local church. Instead, research was conducted with those who were enjoying the benefits of good physical self-care practices and experiencing fulfillment in ministry.

### **Interview Design**

The four categories of physical self-care – physical exercise, nutrition, rest, and stress management – were used to organize interview questions. Stress and how it is managed or mitigated can determine how a pastor experiences his leadership role in a congregation.<sup>263</sup> "Growing and recent research shows that depression and other complex disorders of the mind and body are exaggerated and made worse under conditions of

---

that "Sleep is too often considered the most expendable activity of our day." Halaas, *Clergy, Retirement, and Wholeness*, 28.

<sup>261</sup> O'Halloran and O'Halloran: 95.

<sup>262</sup> Ted Bober, Cheryl Regehr, and Yanqiu Rachel Zhou, "Development of the Coping Strategies Inventory for Trauma Counselors," *Journal of Loss and Trauma* 11, no. (2006): 73.

<sup>263</sup> "Failing to be a good steward of our life and health won't do ourselves or our ministries any good either." Oswald, *Clergy Self-Care*, 5.

chronic stress.”<sup>264</sup> Unmanaged stress can lead to burnout, and burnout contributes to lack of life satisfaction and pastor drop out or transition.<sup>265</sup> Since a pastor’s stress-management techniques are factors in sustainable pastoral leadership, “pastors need to know all they can about stress.”<sup>266</sup> In fact, research has shown that “Various stresses and problems build up over time so that what might have been an easily resolvable problem in its early stages becomes a major crisis expelling a pastor from the church.”<sup>267</sup>

Questions about nutrition were also asked, since “The self-care imperative is to eat balanced nutritious meals and to hydrate oneself adequately during the day.”<sup>268</sup> Increased exercise cannot always overcome poor nutritional habits in the battle against weight gain, since “weight gain is primarily due to overeating.”<sup>269</sup> “While vigorous exercise can help control weight, a body of research shows that physical activity levels do not necessarily predict weight gain.”<sup>270</sup> Nutrition is a contributing factor as to whether pastors can mitigate the effects of stress or work-related difficulties. “Exercise, rest and nourishing food aren’t meant to be luxuries but the staples of good self-care.”<sup>271</sup> Good nutrition can encourage health and healthy living practices across the spectrum of a person’s life, in part because eating is something that people do every day. “Food and

---

<sup>264</sup> Richard Boyatzis and Annie McKee, *Resonant Leadership: Renewing Yourself and Connecting with Others through Mindfulness, Hope, and Compassion* (Boston: Harvard Business School, 2005), 52.

<sup>265</sup> In response to the Pulpit and Pew survey question “Did you experience stress because of the challenges you faced in that congregation?” the percentage of former ministers responding “yes” was UMC-63%, PCUS-71%, ELCA-65%. Current ministers in the same denominations responded “Yes” 43%, 49%, and 49%, respectively. In the same study, 83% of pastors who left reported they “felt stress due to challenges from the congregation.” Hoge and Wenger, 243.

<sup>266</sup> Harbaugh, *Pastor as Person*, 43.

<sup>267</sup> Hoge and Wenger, 200.

<sup>268</sup> John C. Norcross and James D. Guy Jr., *Leaving It at the Office: A Guide to Psychotherapist Self-Care* (New York: The Guilford Press, 2007), 67.

<sup>269</sup> David A. Kessler, *The End of Overeating: Taking Control of the Insatiable American Appetite* (New York: Rodale, 2009), 7.

<sup>270</sup> *Ibid.*, 8.

<sup>271</sup> Adele Ahlberg Calhoun, *Spiritual Disciplines Handbook: Practices That Transform Us* (Downers Grove, IL: Intervarsity Press, 2005), 71-72.

eating reveal the presence of God; they can also express the deepest values of our community.”<sup>272</sup> Poor nutritional habits may lead to interrupted sleep, illness, or weight gain that reduces physical activity levels.

Nutrition and exercise go hand in hand during the process of establishing good physical self-care practices. “Associations between exercise and well-being have been documented repeatedly for decades.”<sup>273</sup> “Increasing physical activity from your current level of activity has the benefit of increasing energy, improving mood, increasing strength and flexibility, and focusing your mind as well as maintaining or decreasing your weight.”<sup>274</sup> Exercise exists in the modern age because of the emphasis on labor-saving devices and technology.<sup>275</sup> “Avoiding activity is the American way of life. We are surrounded by the tools of convenience.”<sup>276</sup> When a lifestyle that embraces labor-saving devices comes together with modern calorie-dense processed foods, the combination leads to weight gain.<sup>277</sup> Weight gain makes physical activity and exercise more difficult and creates an unhealthy cycle. “The rise in the percentage of people who are obese and overweight has been attributed not only to what we eat but also to how infrequently we exercise.”<sup>278</sup> The more weight that is gained, the more difficult, and sometimes dangerous, exercise becomes.

---

<sup>272</sup> L. Shannon Jung, *Food for Life: The Spirituality and Ethics of Eating* (Minneapolis: Augsburg Fortress, 2004), 10.

<sup>273</sup> Norcross and Jr., 69.

<sup>274</sup> Halaas, *Right Road*, 20.

<sup>275</sup> Americans are overweight because of too much food and too little activity...portion sizes of American food are a significant part of the obesity problem.” Ibid., 17.

<sup>276</sup> Halaas, *Clergy, Retirement, and Wholeness*, 26.

<sup>277</sup> Our sedentary behavior is having a significant impact on our health--our weight, our strength, our flexibility, our balance, and our bodily functions.” Halaas, *Right Road*, 14.

<sup>278</sup> Jung, 64.

### **Pre-Interview Sample Selection**

In order to find interview subjects, the researcher first networked with other pastors to inquire which members of the clergy community had reputations for good physical self-care. Since the researcher was inquiring with pastors in his own denomination and geographic area, assessment was enhanced. Pastors were asked which clergy exercised, ate healthful foods, and took care of themselves. From these initial inquiries, a select group of pastors who engaged in physical self-care emerged.

Casual observation of these pastors was used to confirm whether the pastor's physical self-care translated to maintaining an appropriate weight. In addition, the researcher took into account factors regarding the ministry outlook for each pastor and the congregational health of the church they were leading. Was the church growing? Was the church successful in supporting its vision consistently with the church's values? These questions helped to identify the possibility of pastoral burnout, or lack of vitality, indicating the absence of sustainable leadership. Some possible subjects were eliminated from the sample during this pre-interview stage. The assumption was that the pastor's physical self-care practices were not developed enough to make an appreciable difference in the personal life of the pastor and/or the organizational life of the church.

Longevity in ministry was also taken into consideration. Since the pastors in the sample group were known by the researcher, he could assess whether pastors in the sample group were sustaining ministry towards the long-term pastorate. What were their plans for the future? Did they have long-term visions for their ministries and their churches? Did they have plans to leave their churches? All these questions helped to establish whether a long-term pastorate was present or, if not present, was a goal. Long-

term pastorates have benefits (and hazards) which have been previously discussed. To further narrow the sample size, potential subjects were then asked whether they were willing to talk about their physical self-care experiences and how those experiences impacted their leadership in local church ministry during a ninety minute semi-structured interview.

### **Interview Subject Selection**

After the pre-selection process, six subjects were identified and interviewed in order to utilize qualitative research methodology to draw descriptions of physical self-care trends. Each of the pastors interviewed engages regularly in a physical exercise regimen. The sample group was used to describe patterns of physical self-care practices and how those practices relate to sustaining pastoral leadership.<sup>279</sup>

Each interview subject was a senior or solo pastor. This placed the subject in the primary leadership position in their context. Each pastor was also the leader of a local church. Some churches were well-developed in ministry history and programmatic development, while other churches were newer, with the subject having planted the church.

As explained in the pre-interview selection process, the researcher sought subjects who had reputations for taking care of themselves. The researcher talked with others about this project and sought recommendations as to who exhibited appropriate work boundaries and physical self-care. The researcher's relational network was used to vet potential candidates for the study in the pre-interview process. In addition, the researcher interviewed two elite athletes and one recreational athlete to further inform and frame the

---

<sup>279</sup> "It is better to explore the causes of life and to look for their expression and development as the way thriving people have learned to adapt to the changing circumstances along the way." Gunderson and Pray, 97.



interview questions. These pre-interviews helped the researcher to learn about interviewing.

Interview subjects were asked their height and weight at the interview to confirm pre-interview selection assumptions. This information was utilized to calculate Body Mass Index (BMI), which indicates a participant's level of physical fitness. Fitness is important for sustaining pastoral leadership since, "the physically fit individual meets daily demands more readily and has greater opportunity for productivity throughout all years of ministry."<sup>280</sup> Physical fitness for clergy also has a spiritual component, since "To honor the body as 'the temple of the living God' certainly enriches one's capacity for service, increases well-being, and models care of God's gift of life."<sup>281</sup> Clergy fitness is also a resource for sustaining pastoral leadership and is connected to the health of a congregation. Steinke explains: "Congregational leaders are the key stewards of the congregation as a unit in itself. They, by virtue of their positions in the system, can most promote congregational health."<sup>282</sup> Senior and solo pastors may sustain leadership without fitness as a resource while being overweight or out of shape, however, they miss an opportunity to encourage holistic health since "Clergy are the ideal group to guide people toward fitness,"<sup>283</sup> supported by their unique place in the congregational system.<sup>284</sup>

No consideration was given as to the age of the participants. Instead, the researcher looked to identify subjects who had held the solo/senior pastor role in the same local church for more than seven years. Since Glenn E. Ludwig's work categorizes seven

---

<sup>280</sup> Demaray and Pickerill, 51.

<sup>281</sup> Ibid., 22.

<sup>282</sup> Steinke, *Healthy Congregations*, 26.

<sup>283</sup> Rediger, *Fit to Be a Pastor*, 13.

<sup>284</sup> Friedman, *Generation to Generation*, 5.

years as a long-term pastorate, this was considered a significant criteria for the researcher in evaluating sustainable pastoral leadership. However, too few subjects who made it through the pre-interview elimination process also had a seven year pastorate. Therefore, the selection criteria were modified to increase sample size. Deference was given to longer pastorates, but some extenuating circumstances were introduced in order to find suitable subjects who held high physical self-care standards.

Modifications helped to increase the number of research subjects. For example, when pastors planted a daughter church with a core group consisting of members from the mother church spanning at least seven years, they were admitted into the study. This continuity simulated the long haul aspect of church ministry that is desirable in a pastorate. In addition, one subject was admitted into the study with only four years of experience at the same church because his previous career tenure was thirty years. He had proven his ability to sustain leadership in his primary career, which could translate to his secondary career as a pastor. He was also admitted because his physical self-care practices, especially regarding exercise, were the most established of any subject.

In addition to the BMI requirements and pastoral experience, all pastors who were interviewed took The Life Satisfaction Scale to assess their lives and ministries. The Life Satisfaction Scale was utilized to briefly assess levels of stress, burnout, and depression. Each of the six research subjects scored higher than average on the Life Satisfaction Scale. The Life Satisfaction Scale was not used to screen interview subjects. Instead, it was used to measure the way in which physical self-care practices had positively impacted their leadership experience and perception of their life.

## **Research Subjects**

Information about the research subjects and their situations in ministry is given here. Pseudonyms have been assigned to maintain confidentiality, and they are listed in order of age.

### Paul

Pastoring is his second career after he retired with thirty-one years of experience in his other job. Even though he is the oldest research subject at the age of sixty-one, he has the most muscle mass. He is planting a church and has been ordained for five years.

### Pete

Pete has served at the same church for more than fifteen years. He has been ordained for twenty-two years, which is the longest among the research subjects. He is fifty-seven, and he loves to play team sports.

### Case

He was the only research subject of the group that did not regularly exercise to stay in shape. Instead, he is involved in active work and outdoor projects which regulate his weight. He planted the church he has been serving for the last eleven years and has been ordained for seventeen years. He is fifty-three years old.

### Todd

After serving as an assistant pastor for eight years at one church, Todd planted a daughter church. The new church is more than a year old, and the core group from the church is made up of members he served as an assistant pastor. He is forty-three years old.

### Rick

This was the pastor that knew the most about nutrition. He had the lowest BMI of the research subjects. He has served the same church for six years and was affiliated with the same church for eight additional years when he was involved in campus ministry. He is forty-one years old.

### Josh

He planted the church he has been pastoring for the last seven years, and he has been in ordained ministry for a total of twelve years. He had the highest BMI of the research subjects and is forty years old.

## **Data Collection**

Interviews took place at each respective subject's office or home. The setting was relaxed and unhurried. Each interview was recorded using a digital voice recorder. A semi-structured interview protocol was employed using the four categories of questions established for physical self-care. Additional information or questions of clarification were also asked. Each participant was advised of the purpose and use of the research according to the policies of the Doctor of Ministry Program at Covenant Theological Seminary. Each participant also signed a consent form. As soon after the interview as possible, an administrative assistant transcribed the interviews. The interviews were then printed and the hardcopy studied by the researcher using the constant comparative method.

## **Data Analysis**

Each interview transcript was studied to determine points of continuity among the subjects' self-care practices. The analysis sought to identify physical self-care patterns in

pastors who were sustaining pastoral leadership.<sup>285</sup> The constant comparative method was utilized to evaluate the interview data.<sup>286</sup> Each interview was compared to previous interviews as the interview process progressed. The constant comparative method led to some helpful categories for data collection during successive interviews. Common themes in the interview were noted and highlighted on the transcripts.<sup>287</sup> These points were catalogued along with trends and commonalities between the practices of interview subjects, “building a grounded theory.”<sup>288</sup>

### **Researcher Bias and Assumptions**

The assumption in this study was that physical self-care can empower and assist in sustaining pastoral leadership. This is based on the interrelation of the physical state with other aspects of an individual. A holistic model supports this connection. The study assumed that the benefits of physical self-care would carry over into aspects of work and personal life satisfaction and fulfillment.

The researcher benefits personally from physical self-care. The researcher is a regular exerciser who engages in physical exercise to mitigate stress, and he has an active lifestyle. The researcher believes in the practice of good nutrition and adequate rest. The researcher has no known health problems which reduce or curtail activity. He enjoys maintaining a high level of activity and has active hobbies and leisure pursuits.

The researcher is a solo pastor in the Presbyterian Church in America (PCA). Each research subject was also a solo or senior pastor in the same denomination. He is

---

<sup>285</sup> “The analysis usually results in the identification of recurring patterns (in the form of categories, factors, variables, themes) that cut through the data or in the delineation of a process.” Merriam, 11.

<sup>286</sup> “Basically, the constant comparative method involves comparing one segment of data with another to determine similarities and differences.” Ibid., 18.

<sup>287</sup> “The overall object of this analysis [constant comparative] is to seek patterns in the data.” Ibid.

<sup>288</sup> Ibid.

sympathetic to the situation of pastors and has experienced the stress, disappointment, and joys of ministry. The researcher is biased toward wanting pastors to have a good experience in ministry and to derive a sense of fulfillment from the pastoral role. Given his vocation, the researcher has a vested interest in learning how to better sustain pastoral leadership in local church ministry.

### **Study Limitations**

This study has several limitations that relate to the data that was collected. One of these limitations comes from the fact that the PCA as a denomination does not ordain women. Therefore, all research subjects were male. This study does not consider the effectiveness of physical self-care for female members of the clergy. However, it is reasonable to consider that many of the principles would be transferable to female clergy.

The study is also limited in scope by geography. Each research subject, as well as the researcher, reside in Texas. The research subjects live in a variety of metropolitan or small town settings, all within 175 miles of the researcher's community. This limitation has some implications for outdoor activities and weather. The research findings may be skewed toward outdoor activities because of milder weather in Texas. While summers are hot, weather from October through April is considered comfortable for outdoor recreation and exercise.

The small geographic range of this study may limit the types of activities in which research subjects engaged to reduce stress. Sports and activities carry local appeal. Three research subjects live in a city renowned for fitness and outdoor activities. This city has numerous parks, trails, and gym facilities, and the city also schedules city-wide athletic

events (marathons, triathlons, cycling). The city is consistently ranked in the annual top twenty-five healthiest cities in the United States.

### **Summary**

In this chapter, the study methodology was described. Interview subjects were pre-screened using the researcher's relational network among other strategies. After selection, semi-structured interviews were conducted and transcripts produced from the audio recordings of the interviews. The transcripts were studied using the constant comparative method. Commonalities were noted, as well as trends in self-care practices and their application as a resource for sustainable pastoral leadership. These trends became part of the description for the helpful self-care practices which were used to sustain pastoral leadership.

How pastoral leadership is sustained through physical self-care is the subject of the next chapter. The interview data is analyzed for information regarding physical self-care practices for leadership. The analysis is structured according to the research questions in chapter one.

## **CHAPTER FOUR**

The purpose of this study was to describe what senior or solo pastors identify as the most helpful physical self-care practices for sustaining pastoral leadership in local church ministry. Interviews were conducted with six research subjects. The findings of this study are compared and discussed in this chapter in order to address the following research questions:

1. What are the physical self-care practices of pastors in local church ministry?
2. Why do pastors value physical self-care for sustainable pastoral leadership in local church ministry?
3. In what ways does a pastor's physical self-care contribute to sustaining pastors in leadership in local church ministry?
4. What motivates the pastor's physical self-care to change during years of leadership in local church ministry?

### **Physical Self-Care Practices of Pastors in Local Church Ministry**

The first research question addresses physical self-care practices of clergy in local church ministry. This question seeks to assess the level of self-care being implemented in the pastor's life. Several interview questions gave opportunities for pastors to address their self-care practices as they related to stress management.

### **Team Sports**

Three of the pastors interviewed, Pete, Rick, and Todd, engaged in sports that were a regular part of their weekly schedule. This meant that there was a set time and



place they needed to be at every week to exercise. It included a peer component where they met others to participate, and others were depending upon their performance as team-mates or opponents. This introduced a social component to the physical self-care activity that helped motivate regular involvement. Pete plays volleyball once or twice a week. Rick plays tennis and has a weekly standing tennis match. Todd teaches a cycling exercise class. While Josh does not play a sport, he summarized the benefit of the social dynamic of sports: “So it’s been through peer relationships and athletics and mentorship that I’ve become a person who exercises. And so because I wanted to be like a mentor, because I enjoyed competing with my peers, I became a person who exercises.”

### **Peer Driven**

Paul did not participate in team sports, but he has developed several team-like relationships at the gym. His friends expect him to be at the gym before six. If he does not participate when expected, then the next time he shows up, his peers tease him in a good-natured way. This positive peer pressure adds to the motivation for his workouts and creates a team-like atmosphere even though he exercises as an individual. He returns the teasing to others, and this creates a camaraderie that motivates consistently showing up and exercise.

Rick also noted how the team dynamic or peer-driven atmosphere encourages physical exercise. During the interview, he said that one of his staff member’s athletic drive and involvement influenced him (and others in the church) to take care of themselves through exercise. In this particular case, as the activity level increased for the staff and the pastor, it seemed to foster increased physical activity among other people in the church.

Paul has a high percentage of military within his congregation. He describes the dynamic this way: “I’m standing in front of the church, and I need to be an example. The people I’m standing in front of are in shape. I need to be right with them.” The comments of these pastors state that relationships of mutual accountability and encouragement with regard to exercise become a benefit to everyone in the church by uniting an emphasis on both physical and spiritual health.

Team sports participation along with individual sports competition seemed to be great motivators for Pete, Rick, and Todd. The spirit of competition drove performance and desire for better physical self-care. Rick’s tennis extends to “about an hour and a half” while Pete explains that “we shoot for twice a week,” playing volleyball from “five until seven, seven-thirty, or eight o’clock, and Saturday morning we play from nine to noon.” Pastor Todd teaches an exercise class that is forty-five minutes in duration, and if he is not in top shape, he will be unable to keep up with the participants.

Josh, described how he engages in prayer walks. The hour-long walks combine both physical and spiritual self-care. He describes the walks as a means for him to “get perspective” or “arrive at the perspective that you think is best” for weathering conflict in the church and “staying connected to all parties concerned.” While these prayer walks are not at an aerobic pace, their duration made a fitness contribution and were efficiently combined with the ministry of prayer.

### **Elevated Activity Level**

Besides exercise, each of the research subjects shared an elevated activity level. Pete refuses to use the intercom in his office. Instead, he gets up and talks to the church administrator directly. “It appears to me,” he described, “that the way I’m wired, I’m

rarely going to sit at my desk for four or five hours. I'm going to go do something, and then I'll come back and sit for a while." Rick returns home from work, then plays "football or baseball in the yard" with his children. He describes this activity as "athletic - its not aerobic, but I'm out and active now." The physical activity and the time with children both help contribute to the self-care enterprise.

### **Home Projects**

None of the pastors interviewed employed a lawn service. Each pastor saw mowing the lawn as part of his physical activity and self-care. Paul describes taking care of the lawn as a means of physical self-care this way: "If I'm having a bad day, I may blow [off] the day and go home and do something in the yard." Josh described working in the yard "for about an hour and a half or two hours." Rick described yard work this way: "I don't look at it as cutting grass. I look at it as a workout." Case, who lives in a rural setting, often engaged in prolonged outdoor work related to ranching, as well as helping others in the community with active work, such as installing fence.

Pete took up significant home projects, such as painting his house. He also had a mechanical project at home where he was "climbing under, climbing over. So again it's physically moving a lot." He would also walk whenever he played golf, using a pull cart to carry his clubs because "I have a little bit of a back issue." His self-care practices were integrated in the normal course of his life. While this increased activity level was present in each interviewed pastor, it was especially prominent in Pete's life. Therefore, part of physical self-care was an increased physical activity level through home or hobby projects that marked each participant in the study.

### **Reduced Liquid Calories**

None of the six participants that were interviewed consumed high-calorie soft drinks with any regularity. Some of the participants regularly drank diet soft drinks, with Pete exceeding one hundred ounces per day. Rick occasionally drank a soft drink as a treat, however he made it his practice to avoid high fructose corn syrup (HFCS) in his diet. Avoiding HFCS was motivated by his desire to favor fresh food over processed foods. His opinion was that the HFCS added needless calories instead of nutritional value.

Liquid calories were reduced by each participant through their practices of drinking coffee or tea black, preferring water over soft drinks, and moderating their alcohol intake. No participant in the study exceeded two drinks of alcohol per day, with the average alcohol intake being around two to four drinks per week.

### **Rest and Sleep**

Rest and sleep seemed to be less of a factor in determining sustainable leadership for the study participants. Rick used an over-the-counter aid for sleep, and Pete used a prescription sleep aid because “if I’m not medicated, I’ll wake up between three and four in the morning, every night, wide awake.” Todd mentioned the strategy of going to bed earlier than usual to mitigate stress. Each of the pastors occasionally took naps, with the most common time to nap being Sunday afternoon. Duration of naps ranged from ten minutes to forty-five minutes, but none utilized naps with any regularity.

### **Time Off**

Each of the pastors interviewed took at least one day off per week. This day was often described as a Sabbath day for rest and refreshment. Sometimes pastors would

engage in physical activity on their day off. Pete stood alone as taking two days off. He had been in his current ministry setting the longest and understood the two days off to be what was necessary for him. He also had the practice of taking all his assigned vacation at once. Both these practices seem to have contributed to his longevity. Four of the six pastors (Pete, Rick, Josh, and Case) interviewed mentioned taking vacations of two weeks in duration or longer.

Pete, the pastor who generally takes all his vacation at one time, broke with that practice this past summer, when he opted for two trips of shorter duration. The researcher checked back with him for his perspective on which mode of vacation served him better. He stated that the longer vacation block was of better service to him personally, since it allowed him to unload the accumulated stress of pastoral ministry. Pete stated that as a result, he felt the longer vacation block also serves the congregation better.

Only one of the pastors that were interviewed had taken a sabbatical. His Sabbatical was in response to the death of a family member and was utilized to gain strength and support to continue in ministry. Pete, who takes two days off each week, noted that he cannot do this every week, but that he accomplishes it about forty weeks a year. In order to take two days off, he leaves his office on Thursday with what he calls a “preachable” message. He then returns to his office early on Sunday morning to finalize things. He maintains strong boundaries and “rarely work[s] from home...very rare, I mean its two times a month rare, if that. That would be high.” Paul was the exception of those interviewed and took no vacation time—defined as time away from the home ministry setting. He was caring for an elderly relative, and because of the circumstances, it was not feasible to leave.

### **Summary of Helpful Physical Self-Care Practices**

In describing the traits of clergy physical self-care practices, several commonalities arose in the interviews. First, pastors who were sustaining pastoral leadership in the local church setting all maintained an elevated activity level above the norm. None of the pastors interviewed hired a lawn service, and all pastors engaged in non-aerobic activities which increased their physical activity levels. These activities might have been hobbies, home projects, ranch work, or playing with their children.

Second, the interviewed pastors, with the exception of Case, maintained a regular course of both aerobic exercise and weight conditioning. Case had a BMI of twenty-six and made up in physical labor what was not achieved in exercise. Several of the pastors' workouts or sports sessions lasted longer than an hour. Peer relationship accountability, sometimes arising unintentionally, contributed by motivating the pastor's involvement.

Third, none of the pastors negated what they had accomplished in physical exercise or work through poor eating habits. Pete, who ate fast food with the most frequency, also had the longest duration of sports activities. No pastor over-consumed alcohol, and conspicuously absent were the mention of consumption of high-calorie sodas.

Fourth, pastors that were interviewed took regular time off every week. Each of them took one or two of these days weekly. In addition, with the exception of Paul, they all took at least one annual vacation of two weeks' duration or longer. The pattern of activity combined with appropriate rest and nutrition described the self-care practices of those who were sustaining pastoral leadership in local congregations.

### **The Perceived Value of Physical Self-Care**

The second research question asked how pastors perceived the value of physical self-care for sustainable pastoral leadership in local church ministry. Most of the value of physical self-care was related to how pastors experienced stress in their roles. Physical self-care was one of the means that pastors used to mitigate and manage stress. Josh observed that stress was unavoidable in the pastorate and that the goal should not be to avoid stress, but to deal with it, noting that “the goal of the pastorate is not to eliminate stress; it is to pastor people.”

### **Holistic Impact of Physical Self-Care**

“Recogniz[ing] that there is a relationship between my emotional well-being, spiritual well-being, and physical body” was the consensus expressed by Todd on the value of physical self-care. The interconnectedness and holistic view of a pastor’s life and role increased the value placed on physical self-care for sustaining pastoral leadership. If things were going well physically, then this helped the pastors to endure things that went awry in ministry. Physically, they had the resources needed to outlast problems or be part of the solution in dealing with them. Paul said regarding the benefits of exercise, “You get used to knowing you can do something. If you need a reservoir, you’ve got it...being able to work harder and feeling better about work and life.”

### **Stress Management**

In addition, stress management was one of the reasons pastors valued physical self-care. Pete described physical self-care through playing golf in his early years in ministry by saying, “that’s how I managed my stress.” Pastors are in a stressful position because, as Pete put it, “everything rolls uphill,” meaning that problems and conflict have

a way of finding senior and solo pastors. This was the result of the 2005 Pulpit and Pew research published in *Pastors in Transition*. “A second recurrent theme is an assumption that if there's a conflict in the church, the pastor must be somehow at fault.”<sup>289</sup> Dean R. Hoge and Jacqueline E. Wenger further explain factors that contribute to pastors leaving:

In our research we encountered numerous ministers who told us they left because of strain, weariness, burnout, and frustration. They did not attribute the problem to specific conflicts within the congregation or with denominational officers; their complaints were more general, more colored by self-doubt, and more typical of individuals who are depressed.<sup>290</sup>

For Josh, valuing self-care is not about avoiding problems, but rather having the resources to “stay connected to all parties concerned” with a conflict in the church. In his interview, Josh said “the goal of the pastorate is not to eliminate stress, it’s to pastor people...and we can do things to improve that like exercise.” Rick remarked, “physical exercise is the best stress reliever I have found.”

The pastors in this study noted that another benefit of physical self-care is that it provides them with internal resources to endure potential problems and stresses in ministry. Being able to withstand difficult situations, while being part of the solution instead of part of the problem, was seen by them as an asset in ministry. “Suffering is inherent in ministry...and so I think that is a part of ministry leadership,” said Josh. He continued, “there’s a double-edged sword to self-care. There can be a preoccupation with self-care that indulges [the] tendency” to avoid pain at the cost of kingdom progress. “You just have to be on the watch for it.”

All of the pastors who participated in this study agreed that their physical self-care contributed to longevity in ministry by helping them to avoid ministry impairment.

---

<sup>289</sup> Hoge and Wenger, 95.

<sup>290</sup> Ibid., 115.



Two pastors, Josh and Pete, mentioned controlling hypertension through physical activity. Pete said, “You can measure my blood pressure, and if I miss [physical activity] for a couple or three weeks, my blood pressure goes up. If I’m playing on a regular basis, then I don’t have any trouble controlling it.”

The pastors in this study expressed the opinion that sustainable pastoral leadership is an achievement every pastor should strive for because of the benefit it is to the pastor and to the congregation. Pete commented, “Ministry is a marathon. We want to finish well. We don’t want to just...burn out...[and] end up selling insurance...I want to finish well. I want to go the long haul.”

### **Positive Health Benefits**

Each pastor interviewed had established physical self-care practices. Pete explained that he exercises “because I know when I don’t, I don’t do well. And that doesn’t help anybody.” Interview participants who engaged in physical self-care valued the results in bodily health and stamina for ministry. Interruptions with illness were lessened, along with the physical dangers of illness and secondary dangers of hospitalization (e.g. infection). Pete summarizes how his physical self-care habits strengthen his calling: “For the most part, there’s almost never a day that I don’t wake up, and I’m excited to come up here and go to work.” Such fulfillment in ministry is reflected in the interview subjects’ higher than average results of The Satisfaction with Life Scale (SWLS).

### **Life Satisfaction of Clergy**

Each participant was asked to take The Satisfaction with Life Scale.<sup>291</sup> This is a

---

<sup>291</sup> “Life satisfaction refers to a judgmental process, in which individual assess the quality of their lives on the basis of their own unique set of criteria...Therefore, life satisfaction is a conscious cognitive judgment

Likert questionnaire based on a scale from one (strongly disagree) to seven (strongly agree), where participants respond to five statements revealing their self-perceptions about life. The five statements from the SWLS are as follows:

- \_\_\_ 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.

The Satisfaction with Life Scale was chosen for ease of use and availability.

Scores on the SWLS are ranked in the following categories, and the interpretations below are summarized from Ed Diener's descriptions:

Score	Interpretation
30-35	Very high score, highly satisfied Love their lives and feel that things are going very well
25-29	High Score Like their lives and feel that things are going well
20-24	Average Represents the average for life satisfaction in economically developed nations—the majority of people are generally satisfied, but have some areas where they very much would like some improvement.
15-19	Slight below average in life satisfaction Small but significant problems in several areas of their lives, or have many areas that are doing fine but one area that represents a substantial problem for them.
10-14	Dissatisfied Substantially dissatisfied with their lives. People in this range may

have a number of domains that are not going well, or one or two domains that are going very badly

- 5-9      Extremely dissatisfied  
Extremely unhappy with their current life. In some cases this is in reaction to some recent bad event such as widowhood or unemployment. In other cases, it is a response to a chronic problem such as alcoholism or addiction.

Research subjects scored in the following way:

Name	Age	Satisfaction with Life Scale
Paul	61	25
Pete	57	28
Case	53	34
Todd	43	30
Rick	41	28
Josh	40	24

The results of the SWLS show a higher than average life satisfaction among the research subjects in this study. For the most part, respondents enjoy their lives and have a sense of fulfillment in ministry. The average result of the SWLS in developed nations is between twenty and twenty four. All of the respondents in this study scored higher than the average, with the lowest score being twenty-four, which is at upper level of the average bracket.

Each research subject self-declared their height and weight. Height and weight were used to calculate Body Mass Index (BMI). BMI is calculated by taking the weight in pounds and dividing by the square of the height in inches then multiplying by 703. BMI is considered a quick way to evaluate whether a person is obese and is only one diagnostic tool among many used for such purposes. The following scale is accepted for interpreting Body Mass Index:

BMI	Interpretation
19-24	Normal
25-29	Overweight

30-39	Obese
40-54	Extreme Obesity

Research subjects had the following BMI's portrayed with Satisfaction with Life Scale results:

Name	Subject Age	BMI	Satisfaction with Life Scale
Paul	61	29	25
Pete	57	25	28
Case	53	26	34
Todd	43	24	30
Rick	41	21	28
Josh	40	27	24

The heaviest research subject was Paul, who is the eldest participant. Because of his muscular build, results may be unreliable. He did not appear to be overweight, and he consistently focused on weight lifting and strength building exercises. The lowest BMI (lower interpreted as healthier) was reported by Rick, the participant with the healthiest eating patterns. Only two participants, Rick and Todd, scored a BMI within the normal range. Both of these low BMI scoring participants engaged in long-duration exercise and had established healthy eating patterns. The remaining four participants reported BMI scores in the overweight category. However, no participant in the study was classified as obese.

As has been stated earlier, many do not regard BMI as completely accurate, especially for athletes or those with muscular builds.<sup>292</sup> Others criticize how few people actually rank in the normal category.<sup>293</sup> However, while BMI has its limitations and detractors, it is easy to calculate and non-invasive, giving an initial marker for the study.

---

<sup>292</sup> Singer-Vine.

<sup>293</sup> Ibid.

### **Ways Physical Self-Care Contributes to Sustainable Leadership**

The third research question focused on the ways a pastor's physical self-care contributed to sustaining pastors in leadership in local church ministry. The relationship between the two is a function of the holistic view of ministry. Since the condition of a pastor's physical body can influence their emotional and spiritual state,<sup>294</sup> it was important to explore the physical self-care practiced by the participants.

### **Credibility and Enhanced Job Performance**

The contribution to sustainable leadership varies with each pastor's physical self-care practices and specific ministry. The common thread in each interview was the connection between physical self-care practices and sustainable leadership. During the interviews, the pastors were able to connect how they were treating their bodies with the ministry and sustainable leadership they were employing. For example, Paul summarizes the contribution of physical self-care to sustainable leadership by saying, "Senior pastors and pastors should be in shape, period...Otherwise, you've lost credibility in that aspect of ministry and life." Rick explained that physical self care also affects "job performance, the intangibles in any job are enhanced when you are in shape. Your brain thinks better, you're able to take more stress...if nothing else, being in shape allows you not to worry about how you're feeling and focus on what you're doing."

### **Physical Self-Care and Clergy Tenure**

While this study was not designed to correlate the tenure of pastors with their physical self-care, it is interesting to note the duration of ministry in congregations for

---

<sup>294</sup> "Most important, we have found that leaders who sustain their resonance understand that renewing oneself is a holistic process that involves the mind, body, heart, and spirit." Boyatzis and McKee, 8.

these participants. The following tenures of sustained pastoral leadership in the same local church were identified:

Name	Participant's Years at Same Local Church or Ministry Setting
Paul	4 (31 years in the same non-ministry career)
Pete	15 (21 years total ordained ministry)
Case	11 (16 years total ordained ministry)
Todd	1 (8 years total ordained ministry) <sup>295</sup>
Rick	6 (14 years total ordained ministry)
Josh	7 (12 years total ordained ministry)

The results from this research show that pastors involved in physical self-care activities often stay at a church longer than the national average of three to five years.<sup>296</sup> By removing the two shortest tenured subjects (Todd and Paul), there is an average of 15.75 years of ordained ministry for the remaining four subjects. More study is needed to establish the relationship between physical self-care and longevity in ministry.

### **Priority of Physical Self-Care**

Each pastor interviewed placed a high priority on physical self-care. This priority was especially seen in regular exercise. Pastors talked about regular times during the week or special times weekly that were non-negotiable times of physical exertion. Rick talked about it this way:

It's a hugely positive thing...If there is stress in your life, there's nothing like going out and crushing a tennis ball. It's a very competitive game – we both want to win! And it really helps because it's exertion, and we sleep better. Also, there is the mental side of it. You are strategizing, but in a different way [than normal pastoral work]. So it's mental and physical, and it's a place where I can escape but also engage. The tennis court is a good place for me, a safe place and an engaged place.

---

<sup>295</sup> This subject is planting a daughter church out of the mother church where he served seven years. Since members of the core group were members of the mother church, this shows a similarity in ministry setting even though he has a short tenure in his current calling.

<sup>296</sup> Brown, 5.

This priority seemed to ground each pastor in a routine. Even though ministry is sometimes full of unscheduled events over which the pastor has no control, pastors who regularly exercised could count on that to relieve stress and unload ministry burdens. Rick notes that his tennis “has a marked impact on me emotionally. We play outside. It’s pretty hot, so I’m sweating good, my heart’s pumping. We aren’t resting in between sets...It feels to me like it’s a place where I can do something physical, it’s tangible, it has a beginning, it has an end. You know if you win, you are fired up, and if you lose, you look forward to next week.” Regular physical exercise provided pastors with achievable and tangible tasks to accomplish, in the midst of ambiguous and intangible ministry tasks. Case, who had a career in construction before becoming a pastor, enjoys physical work: “I’ve always been a hands-on person, and I find a lot of stress relief in physical work.” Success in ministry is sometimes hard to measure, and physical exercise allows pastors to set specific achievable and measurable goals.

### **Physical Self-Care and Differentiation**

Physical self-care is one way Josh creates boundaries that protect and help foster good health while “navigating stress.” Physical self-care is also one of the ways the research subjects dealt with ministry disappointments and discouragements. Pete was unable to exercise while recovering from an injury for six months: “It was a difficult six months for me, and for everybody around me. I’m a much happier camper when I get to play volleyball or golf – either one.” Physical self-care contributed to sustainable leadership because, as Josh put it, “exercise and mood have a strong correlation also with sleep. My mood tends to become more downcast, more emotionally ill-equipped to navigate stress, less emotionally resilient when I don’t sleep and when I haven’t

exercised.” Creating and building resiliency is one important facet of sustaining leadership in local churches.

### **Increased Time with Congregants**

Another way physical self-care contributes to sustainable pastoral leadership is through increased time with the congregation. Josh describes “part of the pastoral routine” as “see[ing] a lot of our parishioners at the gym. So it is very common now for me to do what I call a ‘drop by’ pastoral visit at the gym.” Paul found his peer group at the gym to be a source of support and encouragement. Pete participates in sports with several members of his church, bettering relationships while increasing in physical fitness. Todd made a friend at the gym who eventually became a Christian, started attending his church, went with him on a mission trip where he met his wife, and now is returning to the same area as a missionary.

### **Physical Self-Care as Renewal**

Todd summarized the contribution that physical self-care makes toward sustaining pastoral leadership when he spoke about “developing what I would call the habits of good pastoral maintenance...Because those habits are going to be partially what carries you through the time that your enthusiasm wanes.” He went on to describe pastoral ministry as “a labor of being spent.” This raised the question of how physical self-care could help to renew the capacity of sustaining pastoral leadership so that the pastor could continue serving for the glory of God without being consumed by the stresses and strains of ministry.

Recharging and renewing for ministry is probably the most important reason pastors pursued physical self-care. When Todd was experiencing chest pains from stress



and a heavy work load, “at that instant,” he said, “I need to take a break. I took five days off.” This was physical self-care through rest that restored him to ministry. Another participant, Josh, spoke of relational conflict as being the number one stressor in the church, and he discussed how physical self-care helped him remember not to take things personally. His physical self-care allowed him to “de-personalized things” to open the way toward resiliency and the long-term pastorate.

Several pastors who were interviewed spoke of the positive addiction of physical activity. They needed the activity and, with it, the clarity, perspective, and satisfaction that exertion brings. Case asserted that “the biggest result [from physical self-care] is the satisfaction that I can do stuff. I can run after my grandson...with my son I can race bicycles, we can climb and hike on vacation, but it was that sense of satisfaction that I can do that stuff. After you do it, you’re like ‘Wow!’ I could do that.”

### **Healthy Emotional State**

Restoring and maintaining a healthy emotional state was one of the main reasons these pastors practiced physical self-care. Four of the pastors who were interviewed mentioned increased stress levels and feelings of mild depression that accompanied inactivity or skipped workouts. Pete articulated the contribution of physical self-care this way:

Life is just better when I take care of myself. When I don’t take care of myself, my values get blurred, or I work too hard, or I work too much, I hold on too tight. Yeah, I start getting bummed out...Ministry is hard. It’s a lot harder than people realize...So I guess I’m motivated to do the things I do because I just enjoy life more when I take care of myself...I do it because I just love it.

Physical self-care makes important contributions to sustaining the pastor in his leadership position. This is accomplished as pastors utilize physical self-care to make them more fit

for ministry.

### **Changes in Physical Self-Care over Time**

The fourth and final research question was “What motivates the pastor’s physical self-care to change during years of leadership in local church ministry?” As ministers age, their choices in physical exercise and activities change. However, according to these participants, there seems to be a tendency to continue in the same physical self-care practices over the years. At times, these pastors modified the frequency or intensity of activities, particularly as they grew older. Paul mentioned that his workouts “are less intense as I’ve gotten older.”

### **Reasons for Change**

Sometimes this change was necessitated by injury or other physical changes. Todd had shoulder trouble which curtailed physical activity and caused him difficulty sleeping due to pain. This injury changed his weight lifting routine. Paul shifted from running to using a recumbent bike because of knee problems that developed as he aged. He said, “I used to run every day, but I don’t anymore because of knee and foot problems.” Pete hurt his foot, which interrupted his participation in sports for six months. Overall, he says “It takes me longer to recover than it did twenty years ago, for sure.” The physical changes and challenges that come as a natural part of aging influence the pastor’s choices of physical self-care activities.

### **Continuing Physical Self-Care through Aging**

While aging influences self-care activities, it by no means needs to stop physical activity. Pete participates on a team where one of his teammates is sixty-two years of age. He said, “He’s a good player and has had a hip replacement. And he’s still playing.” This

man's participation at sixty-two seems to inspire the others' continued participation and increased activity as a means to secure physical ability in the future.

### **Finishing is the Goal**

The eldest participant in the interviews, Paul, modified his physical self-care routine over the years to "allow myself the latitude to take a day off." He said that when he was younger, he would continue his physical activity regimen "no matter how I was feeling," but now he will take occasional breaks. "As I've gotten older, just doing the exercise and finishing is the focus." Paul does not focus on the metrics of a workout—how fast and how far he goes—but rather on completing the workout, seeking "a good feeling of accomplishment." This shows how aging has brought a shift in perspective. He now finds that completing a workout is what motivates him. Another participant, Case, said that as he has grown older, he has "stopped doing things that hurt myself." He accomplished this by removing some of the risks and electing a *reduced intensity* and effort and by "being careful." He gets blamed for missing plays during church kick ball games, but "my body simply can't do that anymore without getting hurt."

### **Early Sports Participation Influenced Activity Choice**

Pete, Rick, and Todd played sports at younger ages which they still continued to play. The interviews indicated that once a certain sport or physical activity was mastered, the pastors in the study continued that activity. Familiarity and skill with the sport seemed to motivate research subjects' choices in the area of exercise. Even years later, they were still playing the same team or individual sports that they played in high school or college. Examples were volleyball, golf, tennis, and cycling. Rick described the trend of returning to a familiar sport this way: "I played a lot of tennis growing up, so I'm

comfortable on the court. What I found is when I played again two years ago, it felt good, and I wanted to be faster and better. But what I found was after being on the tennis court for awhile, I feel comfortable.” Establishing the pattern of physical activity and sports participation at a young age is by no means a guarantee of future participation, but it certainly predisposed research subjects to develop the skills they needed to play at an older age.

### **Dietary Changes**

Another way physical self-care changed over the years was in the area of diet. As participants aged, their diet impacted them more than in their earlier years. Case stated that he could only eat heavy foods once per week before they caused him to feel sluggish and negative. Josh said he felt “more of a sensitivity to that issue now than I did ten years ago,” stating that he tried to “watch his intake” of greasy foods. Rick said that “just age” motivated him to begin “get[ting] up from the table hungry.” He noted that in using the strategy of “eat[ing] what’s necessary,”<sup>297</sup> he was able to both lose weight (“thirty or forty pounds”) and better control his weight. It seems a slowing metabolism is one reason why age is a factor in weight gain. “Portion control is something that needs adjustment for me,” remarked Rick, noting that he could not eat the same portions or kinds of food he ate in previous years because of changes in metabolism that come with age.

### **Ministry Stage Motivates Change**

Just as age is an influencing factor in physical self-care practices, so is stage of ministry. Establishing sustained pastoral leadership presents special challenges for stress and schedule. Josh, who planted the church he currently leads, noted that in the early days

---

<sup>297</sup> “Small amounts of food can be satisfying.” Kessler, 211.

of the church plant, the “unique pressures of starting” the church led to not taking any vacation. Once the church was more established, he adopted a normal pattern of vacation.

Over the years of practicing physical self-care, it seems the participants in this study were better able to engage and support activity levels which contributed to their sustainable pastoral leadership. Over time, helpful activities which mitigated stress became ingrained habits, and there was a well-established need for these helpful activities. For example, Rick grew up playing tennis, stating, “I’m comfortable on the court, and what I found is when I played again...it felt good and I wanted to be faster and better.” No pastor interviewed was just starting to form good physical self-care habits; each had their own well-established routine. For them, years of involvement in self-care practices brought wisdom for how changing routines and habits contributed to physical self-care. Each pastor knew himself well enough to adjust self-care practices in helpful ways through the changes of ministry and life that come with age. Pete reflected on the possibility of changing sports when he gets too old to play volleyball: “Win, lose or draw...I do it because I just love it. And when the day comes that I can’t play anymore, that’s going to be hard. I mean, it will take me a while to work through that. I’ll get through it because I like golf too.”

The importance of self-care in ministry was emphasized throughout the interviews. Paul said, “Senior leaders who aren’t investing in [the physical side of life] are missing it.” Paul’s comment summarized the attitude of these pastors, who were engaged in physical self-care practices: “This is good for longevity. This is also good for the way I feel on a short-term basis.”

## Summary

Each of the participants valued physical self-care for its ability to help regulate both mood and weight. Managing stress was one of the contributions of physical self-care, along with addressing health factors which could possibly lead to ministry impairment. Several of the participants engaged in regularly scheduled team sporting activities which provided competition and peer support, thus motivating their continued involvement. Physical self-care practices were both formally structured at the team level and informal in an increased activity level ranging from lawn care and home projects to getting out from behind the desk during the work day. Scores from The Satisfaction with Life Scale showed a sense of fulfillment and happiness in the participants that was above the national average. Over the years, the participants modified their physical self-care practices according to their ministry position and limitations brought on by age.

Physical self-care contributed to the participants' health and well-being. Intangible results of elevated mood and life satisfaction were also present. In some ways, the physical self-care practices and perspectives of the participants lead the way forward in describing beneficial theory and practices of physical self-care for sustaining pastoral leadership in local churches. These practices are the subject of the next chapter as their application is described. Self-care practices for sustaining pastors in leadership may be applied both individually and organizationally. Several implications of physical self-care practices and their use in sustaining pastors will also be explored.

## **CHAPTER FIVE**

The purpose of this study was to understand the physical self-care practices that pastors utilize to sustain pastoral leadership in local church ministry. The assumption of this study was that the identification of helpful physical self-care practices would help pastors to sustain their pastoral leadership in the midst of the everyday stresses they face. These stressors contribute to pastoral turnover and resignation. Describing longevity in ministry and exploring its relation to physical self-care were also goals of this study.

Four research questions were framed to guide both the literature review and interviews:

1. What are the physical self-care practices of pastors in local church ministry?
2. Why do pastors value physical self-care for sustainable pastoral leadership in local church ministry?
3. In what ways does a pastor's physical self-care contribute to sustaining pastors in leadership in local church ministry?
4. What motivates the pastor's physical self-care to change during years of leadership in local church ministry?

This chapter presents the conclusions of the study. Several helpful physical self-care practices will be identified, and the manner in which those practices were implemented by pastors will be discussed. In addition, common practices of the research participants will be noted for their contribution to mitigating factors which may hasten pastoral transition or clergy drop out.

Several implications of this study are included in this chapter. Organizations can support the physical self-care enterprise and reap the benefits of longer clergy tenures. Future work in the field of physical self-care is needed, as many pastors have only begun to benefit in better health, reduced stress, and an increased energy level that comes from physical self-care practices.

### **Increased Physical Activity Level**

Related to the first research question, “What are the *physical self-care practices* of pastors in local church ministry?” several themes emerged. In general, regardless of what type of physical activity the participants practiced, they had an increased activity level. Each pastor had access to either a gym (Paul, Todd, Rick, Josh), to exercise equipment (Case), or to an outdoor aerobic sport (Pete). What mattered was not the mode of exercise they chose, but rather the manner in which this activity contributed both to their fitness and to their increased activity level in other areas of life.

This increased activity level ranged from Pete’s getting up and walking over to talk to his administrative assistant to Rick’s returning home from work and entering a neighborhood game of football. An increased activity level was seen in Paul’s decision to “walk whenever I can and park at the far end of the parking lot. I’ll take stairs instead of an elevator,” and in Todd’s yard work. Case would take on active outdoor projects that were physically demanding, such as roofing and building fences, while Josh’s prayer walks helped elevate his activity level. Fitness contributed to an increased daily activity level which seemed to help each of these pastors maintain his health and weight. Activity promoted more activity, resulting in better weight maintenance.



Each of the research participants had an active mindset and were not content to sit throughout the day. While aerobic exercise contributed to their fitness levels, they also walked and moved often during their daily activities. Pete described this higher activity level, "...it just appears to me the way that I'm wired. I'm rarely going to sit at my desk for four or five hours. I'm going to do something, and then I'll come back and sit for a while."

By increasing their physical activity levels above the baseline, research subjects burned more calories than if they were sedentary. Burning more calories came naturally as part of an active lifestyle. This active lifestyle was something with which they associated themselves, and it facilitated a connection to exercise and a propensity for fitness. Exercise was not the only time they would sweat. This active lifestyle positively reinforced continued activity, whether that activity was exercise or some other physical exertion. Paul made the case that "relaxing is activity because work is sedentary." He had reached the point in his life that physical activity was "such a part of your life that you feel uncomfortable if you aren't working out or staying in shape."

### **Implications of an Increased Activity Level**

Were the participants' increased activity levels a result of exercise, or were they the cause of it? Although that question is beyond the scope of this study, it is apparent that the two were related. Perhaps the first step in modifying a sedentary lifestyle is not exercise, but rather an increased activity level, which is an easier and more sustainable place to begin. "When the Bishop of the Iowa Conference of The United Methodist Church convinced many of the clergy to drink eight glasses of water every day, walk 10,000 steps, and read the Bible every day, the increase in insurance costs stopped cold

for four years in a row.”<sup>298</sup> These recommendations were sustainable because they were small, realistic, and prosaic in their nature.

Once pastors have established increased activity levels, then they could consider beginning a fitness program or adopting other physical self-care practices. The reason for this is that the small changes may be easier to sustain since “the most difficult part about changing your life is not making the changes but maintaining them.”<sup>299</sup> In following this plan, a sedentary pastor would begin parking farther from the door and walking, taking the stairs, frequently moving out from behind the desk to talk with an administrative assistant, or conducting a phone conversation while pacing. Once a period of increased physical activity was achieved, the pastor would consult a physician to begin a fitness program. It is possible that such increased physical activity might lead to overcoming the challenges of starting a new exercise program. Keith Johnsgard has this to say about the challenges of beginning a new exercise program:

Whether we are beginners or experienced athletes, the problem often comes down to taking that first step each day. There are all sorts of excuses and reasons that we shouldn't do so: not feeling just right, too much to do, the weather, not enough time, and on and on. Taking the first step is critical no matter what confronts us. Even what seems to be impossible can only be accomplished if we begin. If we can just lean forward and take that first step, the remaining steps will fall into place, and so, very often, will our lives.<sup>300</sup>

Overcoming the inertia of old, unhealthy ways is a good way to start a physical self-care regimen. After all, “The lack of physical exercise is considered by doctors to be the most serious health hazard among North Americans. This includes our children. We have all

---

<sup>298</sup> Gunderson and Pray, 149.

<sup>299</sup> Rochelle Melander and Harold Epply, *The Spiritual Leader's Guild to Self-Care* (Herndon, VA: Alban Institute, 2002), 186.

<sup>300</sup> Keith Johnsgard, *Conquering Depression and Anxiety through Exercise* (Amherst, NY: Prometheus Books, 2004), 267.

become so sedentary that we are jeopardizing our health.”<sup>301</sup> The solution is not just exercise, but also an increased activity level in daily living.

### **Long Duration Physical Activity**

The particular self-care practices in which pastors engaged varied with their personalities and settings. However, each pastor engaged in those activities for more than an hour at a time. The benefits that the clergy received from their long duration of physical activity most likely helped to sustain their pastoral leadership. Roy Oswald supports this claim by noting that “Those who report spiritual feelings as a result of body movement are usually people who stay with their activity for an hour or more.”<sup>302</sup> Each of the participants of this study regularly engaged in physical activity of one hour or more:

Participant	Duration	Type of Activity
Paul	110 minutes	stationary bike, weights
Pete	120-180 minutes	sand volleyball
Case	several hours	ranch type work
Todd	130 minutes	exercise class, aerobic weight lifting
Rick	90 minutes	tennis
Josh	60 minutes	prayer walk

This chart demonstrates that the research subjects who were sustaining pastoral leadership each engaged in long durations of physical activity. For all but two, Case and Josh being the exceptions, the long duration physical activity involved aerobic exertion.

It can be concluded that the benefits of longer durations of exercise seemed to help pastors sustain themselves in ministry. Perhaps the sustained activity level over time mitigated stress better than shorter bursts of activity. Making the time for such activities showed that a priority was placed on physical self-care. The research seems to point

---

<sup>301</sup> Oswald, *Clergy Self-Care*, 142.

<sup>302</sup> *Ibid.*, 110.

toward pastors engaging in long durations of physical activity for sustainable pastoral leadership in local church ministry. Long durations of physical activity are needed since, “This generation of clergy, from almost all denominations, has health indicators that rank them among the most unhealthy professions in the country.”<sup>303</sup> Gary Gunderson and Larry Pray point out that in contrast, “In Bonhoeffer's time it was the opposite, clergy being among the most long-lived professionals on the planet.”<sup>304</sup> They conclude “that nurses aren't so healthy these days. Neither are doctors, social workers, inner city elementary school teachers, pastoral counselors, and a long list of other caring types of people. It turns out it's a dangerous time to care for others.”<sup>305</sup> Such danger points the way towards a new priority in clergy's schedules for long duration activity. Not only was long duration physical activity a factor in sustaining pastoral leadership, but so were the relationships that clergy built to support their continued practice.

### **Peer Support**

Long duration increased activity levels can be lonely. However, four of the clergy interviewed (Paul, Pete, Todd, and Rick) mentioned that peer support motivates their physical self-care behaviors. Peer support is one of the themes related to answering research question two: “Why do pastors value physical self-care for sustainable pastoral leadership in local church ministry?” and research question three: “In what ways does a pastor's physical self-care contribute to sustaining pastors in leadership in local church ministry?”

Paul found peer support at the gym through an “informal accountability, not regimented” that encouraged his participation in exercise at the gym. He talked about

---

<sup>303</sup> Gunderson and Pray, 138.

<sup>304</sup> Ibid.

<sup>305</sup> Ibid., 139.

how his group at the gym “lifts weights together, busts each others’ chops, and laughs!” For Pete and Rick, competition provided peer support and a reason to show up to play even if they did not feel like it. Rick knew that his tennis partner was counting on him to show up and play a challenging game. Todd had an exercise class that depended on him for leadership. These pastors valued physical self-care by setting a regular weekly routine for their activities. Having people who needed them to participate helped each of the pastors to continue their physical self-care activities with regularity. In addition, they found both relationships and relief from the stress and challenges of ministry. Team settings and regularly scheduled exercise provide ways for clergy to support their physical self-care.

### **Nutrition and Physical Self-Care**

Nutrition is an issue which relates to both to the physical self-care practices that pastors found helpful and to the ways that physical self-care has changed through the years. Todd and Rick were the most knowledgeable about nutrition and seemed to have the healthiest eating patterns. This is supported by the fact that the lowest BMI scores of the research participants belonged to Todd (21) and Rick (24). These two research participants demonstrated their nutritional knowledge during the interviews, and they each reported foods they tried to avoid and foods they purposefully consumed. They both reported that their wives participated in these healthy *dietary practices* with them.

### **Avoiding High-calorie Beverages**

No research subject consumed high-calorie soda as part of a daily diet. Rick occasionally had a sugar sweetened soft drink (he avoided high calorie fructose corn syrup) as a treat while others drank diet soda. Each of the pastors drank coffee or tea, but

none reported drinking high calorie coffee drinks. Participants reported alcohol consumption well below the accepted American Medical Association's recommendation of two drinks per day for men.<sup>306</sup> No participant drank alcoholic beverages with any regularity. In most cases, alcohol consumption was limited to one drink or fewer per week. No pastor in the study reported abstaining from alcohol. By avoiding high-calorie soda and moderating alcohol consumption, each of the pastors removed empty liquid calories (which provide little nutrition and satiety) from their diet, helping them to maintain their weight.

### **Diet Implications**

Clergy who are pursuing physical self-care may also need to limit liquid calories. Whether these calories come from sports drinks, soft drinks, or alcohol, liquid calories do not provide satiety and are a hidden source of calories. Limiting processed and fried foods in favor of fresh fruits and vegetables is a long term dietary changes that will enhance physical self-care. Small changes over the long term of a hundred calories fewer per day can result in long term weight loss at the rate of one pound of fat every thirty-five days, or roughly ten pounds per year, if other conditions remain the same. Poor diet can compound physical problems and reduce physical activity through weight gain. Obesity is a chronic problem that requires a chronic solution rather than quick fixes which result in temporary changes that are not sustainable.

### **Rest, Sleep, and Vacation**

The researcher did not find rest, sleep, or vacation to be a major factor in sustaining pastoral leadership. Paul did not take vacation because of his ministry

---

<sup>306</sup> U. S. Department of Health and Human Services, "Dietary Guidelines for Americans 2005" <http://www.health.gov/dietaryguidelines/dga2005/document/html/chapter9.htm> (accessed April 14 2010).

circumstances while planting a church and caring for an elderly relative. Each of the other participants did report taking vacations. Pete, Rick, and Josh each reported vacations that were two weeks in duration or longer. These extended blocks of time away from work may have helped relieve accumulated stress since, “Most persons need two days to begin to relax, so a vacation of four to five days is usually insufficient.”<sup>307</sup> However, conspicuously absent in each of the interviews was a special emphasis on time off, including sabbaticals. Only one participant, Case, had taken a sabbatical, and this was due to a death in his family.

Each of the participants tried to take a least one day off per week. Pete was the only participant who took two days off each week. Paul cited the impossibility of taking two days off per week because of sermon preparation concerns. The other pastors seemed to accept the reality that situations would arise in ministry on occasion making a day off impossible. As a whole, the group was not begrudging of missed time off and was not especially dependent on it. Perhaps over the years of ministry they had found an acceptable work pace. More research is needed on the subject of clergy time off as an aspect of physical self-care to see how it contributes to sustaining pastors in ministry.

### **Determination to Continue Physical Activity**

Related to the fourth research question, “What motivates the pastor’s physical self-care to change during years of leadership in local church ministry?” the researcher discovered that each of the participants was sustaining their physical self-care activities through the years. Chosen physical activities varied, but determination was a key feature of each participant’s continued physical exercise and activity. When Pete, age fifty-seven, injured himself and had to take six months off from his weekly volleyball games,

---

<sup>307</sup> Demaray and Pickerill, 68.

he described how he “did not do well.” He eventually recovered and was determined to resume playing because it was tough not playing, and the emotional benefit he received from it was missed by those around him. He acknowledged that “It takes me longer to recover than it did twenty years ago for sure. But really it’s not bad.”

Pete also talked about the regularity of his participation in games, and he adapted his schedule so that issues like weather did not prevent activity. “I mean if it’s fifty degrees or better, we are out there. We have special socks to keep our feet warm.” The discipline of playing regularly seemed to contribute to the habit of activity, which became part of the active lifestyle that benefited the pastors. Even though the pastor’s responsibility grew over the course of years in ministry, physical exercise and activity did not stop for the participants who were sustaining pastoral leadership.

This determination to continue in physical activity was seen by the other older participants in the study. Paul, the eldest participant at sixty-one, had modified his exercise practices over the years because of knee and foot problems. His aerobic conditioning of choice was a recumbent exercise bike for forty minutes, which allows exertion without aggravating his knee and foot injuries. He said that over the years his workouts grew “less intense as he has gotten older,” but they are still frequent at four days a week. The beneficial stubbornness of continuing physical activity had certainly benefitted Paul. He talked about the physical benefit of being in shape as “being able to work harder and feeling better about work and life.”

Case also made it a point to stay physically active. He said he was “constantly having to fix one thing or another” around his homestead. He would sometimes help a relative with manufacturing work, which required him to be on his feet and lifting boxes



at age fifty-three. While he had “stopped doing things that hurt [him]self” and reduced the intensity level voluntarily, he continued living a physically active life because he said, “if I don’t have much [physical exercise] I feel cranky, moody, short-tempered.”

As the older participants in the study, Pete, Paul, and Case showed a determination to continue physical activity as they aged. They worked to recover from injuries and resume their participation in activities, and they adjusted the intensity of their workouts or their types of exercise, rather than abandoning the activity. They maintained good physical conditioning according to their physical limitations.

As pastors grow older, they may face physical problems. These physical problems may modify physical activity, but the two participants over the age of fifty and the one participant over the age of sixty showed that aging should not stop physical activity altogether. In fact,

John Wesley followed a regular schedule of physical exercise during his eighty-eight years of life (1703-91). Exercise appears to have had a significant role in his longevity. (Wesley lived more than twice as long as the average man of his generation.) He often spoke to his Methodist preachers of the need for exercise, and he himself remained active until very near his death.<sup>308</sup>

In his book, *Primitive Remedies*, he noted “A due degree of exercise is indispensably necessary to health and long life.”<sup>309</sup> Wesley made the case that walking was the best exercise “for those who are able to bear it.”<sup>310</sup> Continuing physical activity through the stages of aging can contribute to longevity in ministry. “Physical flaws do not necessarily prevent one from engaging in Christian ministry; but to honor the body as ‘the temple of

---

<sup>308</sup> Ibid., 48.

<sup>309</sup> Ibid.

<sup>310</sup> Ibid.

the living God' certainly enriches one's capacity for service, increases well-being, and models care of God's gift of life."<sup>311</sup>

## Conclusion

As clergy and congregations alike recover the ideal of a long-term pastorate, they must realize that "Health is not an end but a means to fulfill the purpose of life. Health is a resource for life, not the object of living."<sup>312</sup> Physical self-care practices are a way that clergy and congregations can bring the resource of physical health to the ministry endeavor. Physical self-care seems to engender ministry fitness by relieving stress, improving sleep quality, and providing opportunities to spend time with parishioners. Pastors can utilize self-care to better equip themselves to face ministry challenges. Fit pastors are better equipped pastors, as they are renewed by availing themselves of physical self-care practices that contribute to sustainable leadership. While many people encourage fads, church programs, ministry techniques, and further education as ways to reverse the statistical reality of transitioning clergy, it seems that pastors already possess some resources for sustaining themselves in ministry through physical self-care endeavors.

As clergy see themselves holistically, they must address their physical self-care practices to prevent ministry impairment resulting from stress. While church life holds its stresses and challenges, "Stress reduction and replenishing oneself seems essential for ministers."<sup>313</sup> The essential nature of physical self-care for sustainable leadership in local congregations is within the reach of every pastor. Each pastor can only be responsible for

---

<sup>311</sup> Ibid., 22.

<sup>312</sup> Steinke, *Healthy Congregations*, ix.

<sup>313</sup> Rowatt: 533.

their own self-care, and in pursuing self-care endeavors they, along with the people they minister to, will benefit.

## **BIBLIOGRAPHY**

- Alkema, Karen, Jeremy M. Linton, and Randall Davies. "A Study of the Relationship between Self-Care, Compassion Satisfaction, Compassion Fatigue, and Burnout among Hospice Professionals." *Journal of Social Work in End-of-Life and Palliative Care* 4, no. 2 (2008): 101-119.
- Barnett, Jeffrey E., and Natalie Cooper. "Creating a Culture of Self-Care." *Clinical Psychology Science and Practice* 16, no. 1 (2009): 16-20.
- Benyei, Candace R. *Understanding Clergy Misconduct in Religious Systems*. New York: Haworth Press, 1998.
- Bober, Ted, and Cheryl Regehr. "Strategies for Reducing Secondary or Vicarious Trauma: Do They Work?" *Brief Treatment and Crisis Intervention* 6 (2006): 1-9.
- Bober, Ted, Cheryl Regehr, and Yanqiu Rachel Zhou. "Development of the Coping Strategies Inventory for Trauma Counselors." *Journal of Loss and Trauma* 11 (2006): 71-83.
- Boyatzis, Richard, and Annie McKee. *Resonant Leadership: Renewing Yourself and Connecting with Others through Mindfulness, Hope, and Compassion*. Boston: Harvard Business School, 2005.
- Brain, Peter. *Going the Distance: How to Stay Fit for a Lifetime of Ministry*. 2nd ed. Kingsford, Australia: Matthias Media, 2006.
- Broadus, John A. *On the Preparation and Delivery of Sermons*. 4th ed. ed., Edited by Vernon L. Stanfield. New York: Harper and Row, 1870. Reprint, 1979.
- Brown, Richard W. *Restoring the Vow of Stability: The Keys to Pastoral Longevity*. Camp Hill, PA: Christian Publications, 1993.
- Bryant, Robert A. "Romans 12:1-8." *Interpretation*, no. July (2004).
- Calhoun, Adele Ahlberg. *Spiritual Disciplines Handbook: Practices That Transform Us*. Downers Grove, IL: Intervarsity Press, 2005.
- Control, Centers for Disease, "Obesity and Overweight for Professionals: Data and Statistics: U. S. Obesity Trends", Centers for Disease Control and Prevention <http://www.cdc.gov/obesity/data/trends.html> (accessed July 2 2009).

- Dalleck, Lance C., and Len Kravitz, "The History of Fitness", The University of New Mexico <http://www.unm.edu/~lkravitz/Article%20folder/history.html> (accessed July 2 2009).
- Davies, Gaius. *Stress: Sources and Solutions*. Ross-shire, Scotland: Christian Focus, 1988.
- Dawn, Marva J. *Keeping the Sabbath Wholly: Ceasing, Resting, Embracing, Festing*. Grand Rapids: Eerdmans, 1989.
- \_\_\_\_\_. *The Sense of Call: A Sabbath Way of Life for Those Who Serve God, the Church, and the World*. Grand Rapids: Eerdmans, 2006.
- Demaray, Donald E., and Kenneth W. Pickerill. *A Robust Ministry: Keeping a Pure Heart, Clear Head, and Steady Hand*. Nappanee, IN: Evangel, 2004.
- Deutschman, Alan. "Change: Why Is It So Darn Hard to Change Our Ways?" *Fast Company*, May 2005, 53-62.
- Diener, Ed, Robert A. Emmons, Randy J. Larsen, and Sharon Griffin. "The Satisfaction with Life Scale." *Journal of Personality Assessment* 49, no. 1 (1985): 71-75.
- Draper, J. A. . "The Tip of an Ice-Berg: The Temple of the Holy Spirit." *Journal of Theology for Southern Africa* 59 (1987): 57-65.
- Figley, Charles R. "Compassion Fatigue: Psychotherapists' Chronic Lack of Self-Care." *Psychotherapy in Practice* 58, no. 11 (2002): 1433-1441.
- Finkelstein, Eric A., Justin G. Trogon, Joel W. Cohen, and William Dietz. "Annual Medical Spending Attributable to Obesity: Payer-and Service-Specific Estimates." *Health Affairs* 28, no. 5 (2009): 822-831.
- Friedman, Edwin H. *Generation to Generation: Family Process in Church and Synagogue*. New York: Guilford, 1985.
- Friedman, Stewart D. *Total Leadership: Be a Better Leader, Have a Richer Life*. Boston: Harvard 2008.
- Gaddy, C. Welton. *A Soul under Siege: Surviving Clergy Depression*. Louisville: Westminster, 1991.
- Galindo, Israel. *The Hidden Lives of Congregations: Discerning Church Dynamics*. Herndon, VA: Alban Institute, 2004.
- Goleman, Daniel, Richard Boyatzis, and Annie McKee. *Primal Leadership: Realizing the Power of Emotional Intelligence*. Boston: Harvard, 2002.

Greider, Kathleen J. *Reckoning with Aggression: Theology, Violence, and Vitality*. Louisville: Westminster, 1997.

Gunderson, Gary, and Larry Pray. *Leading Causes of Life: Five Fundamentals to Change the Way You Live Your Life*. Nashville: Abingdon Press 2009.

Halaas, Gwen Wagstrom. *The Right Road: Life Choices for Clergy*. Minneapolis: Fortress Press, 2004.

\_\_\_\_\_. *Clergy, Retirement, and Wholeness: Looking Forward to the Third Age*. Herndon, VA: Alban Institute, 2005.

Hands, Donald R., and Wayne L. Fehr. *Spiritual Wholeness for Clergy: A New Psychology of Intimacy with God, Self, and Others*. Herndon, VA: Alban Institute, 1993.

Hansen, David. *Loving the Church You Lead: Pastoring with Acceptance and Grace*. Grand Rapids: Baker, 1998.

Harbaugh, Gary L. *Pastor as Person: Maintaining Personal Integrity in the Choices and Challenges of Ministry*. Minneapolis: Augsburg, 1984.

Harbaugh, Gary L., Rebecca Lee Brenneis, and Rodney R. Hutton. *Covenants and Care: Boundaries in Life, Faith, and Ministry*. Minneapolis: Fortris Press, 1998.

Hardy, Bruce. "Pastor Care with Clergy Children." *Review and Expositor* 98, no. 4 (2001): 545-556.

Herman, Judith. *Trauma and Recover: The Aftermath of Violence—from Domestic Abuse to Political Terror*. Revised ed. New York: Basic Books, 1997.

Hoge, Dean R., and Jacqueline E. Wenger. *Pastors in Transition: Why Clergy Leave Local Church Ministry*. Pulpit and Pew, Edited by Jackson W. Carroll. Grand Rapids: Eerdmans, 2005.

Holaday, Margot, Trey Lackey, Michelle Boucher, and Reba Glidewell. "Secondary Stress, Burnout, and the Clergy." *American Journal of Pastoral Counseling* 4, no. 1 (2001): 53-72.

Johnsgard, Keith. *Conquering Depression and Anxiety through Exercise*. Amherst, NY: Prometheus Books, 2004.

Jones, Beth Felker. "Marked for Life." *Christian Century* 124, no. 10 (2007): 19-20.

- Jung, L. Shannon. *Food for Life: The Spirituality and Ethics of Eating*. Minneapolis: Augsburg Fortress, 2004.
- Kessler, David A. *The End of Overeating: Taking Control of the Insatiable American Appetite*. New York: Rodale, 2009.
- Killian, Kyle D. "Helping Till It Hurts? A Multimethod Study of Compassion Fatigue, Burnout, and Self-Care in Clinicians Working with Trauma Survivors." *Traumatology* 14, no. 2 (2008): 32-44.
- Lehr, Fred. *Clergy Burnout: Recovering from the 70-Hour Work Week and Other Self-Defeating Practices*. Minneapolis: Fortress, 2006.
- Loehr, Jim, and Tony Schwartz. *The Power of Full Engagement: Managing Energy, Not Time, Is the Key to High Performance and Personal Renewal*. New York: Free Press, 2003.
- Ludwig, Glenn E. *In It for the Long Haul: Building Effective Long-Term Pastorates* Long Haul. Herndon, VA: Alban Institute, 2002.
- Maslach, Christina. *Burnout: The Cost of Caring*. Edglewood Cliffs, New Jersey: Prentice-Hall 1982.
- Melander, Rochelle, and Harold Epply. *The Spiritual Leader's Guild to Self-Care*. Herndon, VA: Alban Institute, 2002.
- Merriam, Sharan B. *Qualitative Research and Case Study Applications in Education*. San Francisco: Jossey-Bass, 1998.
- Mosser, David N. "Manging the Public Life, Freeing the Personal Life." *The Christian Ministry* 23, no. 2 (1992): 10-13.
- Norcross, John C., and James D. Guy Jr. *Leaving It at the Office: A Guide to Psychotherapist Self-Care*. New York: The Guilford Press, 2007.
- O'Halloran, M. Sean, and Theresa O'Halloran. "Secondary Traumatic Stress in the Classroom: Ameliorating Stress in Graduate Students." *Teaching of Psychology* 28, no. 2 (2001): 92-97.
- Oswald, Roy M. *Clergy Self-Care: Finding a Balance for Effective Ministry*. Herndon, VA: Alban Institute, 1991.
- Oswald, Roy M., and Otto Kroeger. *Personality Type and Religious Leadership*. Herndon, VA: The Alban Institute, 1988.

- Pavot, William, and Ed Diener. "Review of the Satisfaction with Life Scale." *Psychological Assessment* 5, no. 2 (1993): 164-172.
- Peterson, Eugene H. *Working the Angles: The Shape of Pastoral Integrity*. Grand Rapids: Eerdmans, 1987.
- Rediger, G. Lloyd. *Fit to Be a Pastor: A Call to Physical, Mental, and Spiritual Fitness*. Louisville: Westminster John Knox Press, 2000.
- \_\_\_\_\_. *Beyond the Scandals: A Guide to Healthy Sexuality for Clergy*. Minneapolis: Fortress, 2003.
- Reid, Marvin L. "An Exegesis of 1 Timothy 4:6-16." *Faith and Mission* 9, no. 1 (1991): 51-63.
- Richardson, Ronald W. *Creating a Healthier Church: Family Systems Theory, Leadership, and Congregational Life*. Creative Pastoral Care and Counseling. Minneapolis: Fortress, 1996.
- Rowatt, G. Wade. "Stress and Satisfaction in Ministry Families." *Review and Expositor* 98, no. 4 (2001): 523-543.
- Services, U. S. Department of Health and Human, "Dietary Guidelines for Americans 2005"  
<http://www.health.gov/dietaryguidelines/dga2005/document/html/chapter9.htm>  
(accessed April 14 2010).
- Singer-Vine, Jeremy, "Beyond Bmi", Dallas Morning News  
[http://www.dallasnews.com/sharedcontent/dws/dn/opinion/points/stories/DN-singer-vine\\_02edi.State.Edition1.2066eef.html](http://www.dallasnews.com/sharedcontent/dws/dn/opinion/points/stories/DN-singer-vine_02edi.State.Edition1.2066eef.html) (accessed September 1 2009).
- Sitze, Bob. *Not Trying Too Hard: New Basics for Sustainable Congregations*. Herndon, VA: Alban Institute, 2001.
- Sperry, Len. *Ministry and Community: Recognizing, Healing, and Preventing Ministry Impairment*. Collegeville, Minnesota: The Liturgical Press, 2000.
- Spurgeon, Charles. *Lectures to My Students: Complete and Unabridged*. 11th ed. Grand Rapids: Zondervan, 1980.
- Steinke, Peter L. *How Your Church Family Works: Understanding Congregations as Emotional Systems*. Herndon, VA: Alban Institute, 1993.
- \_\_\_\_\_. *Healthy Congregations: A Systems Approach*. Herndon, VA: Alban Institute, 1996.



- \_\_\_\_\_. *Congregational Leadership in Anxious Times: Being Calm and Courageous No Matter What*. Herndon, VA: Alban Institute, 2006.
- Stevenson-Moessner, Jeanne. *A Primer in Pastoral Care* Creative Pastoral Care and Counseling Series. Minneapolis: Augsburg Fortress, 2005.
- Stewart, Susan T., David M. Cutler, and Allison B. Rosen. "Forecasting the Effects of Obesity and Smoking on U.S. Life Expectancy." *New England Journal of Medicine*, no. 361 (2009): 2252-2260.
- The Holy Bible: English Standard Version*. Wheaton: Crossway, 2001.
- Wells, Bob, "Which Way to Clergy Health?", Duke University  
<http://www.pulpitandpew.duke.edu/clergyhealth.html> (accessed July 8 2008).
- Wells, David F. *The Courage to Be Protestant: Truth-Lovers, Marketers, and Emergents in the Postmodern World*. Grand Rapids: Eerdmans, 2008.
- Winter, Richard. *Perfecting Ourselves to Death: The Pursuit of Excellence and the Perils of Perfectionism*. Downers Grove, IL: Intervarsity, 2005.
- Yamashita, Mineko. "The Exercise of Self-Care Agency Scale." *Western Journal of Nursing Research* 20, no. 3 (1998): 370-378.