

Church Systems Task Force Report

Online Appendix

May 2011





The Church Systems Task Force presents its findings and recommendations.

*A joint publication of the General Board of Pension and Health Benefits and
the General Board of Higher Education and Ministry of The United Methodist Church.*

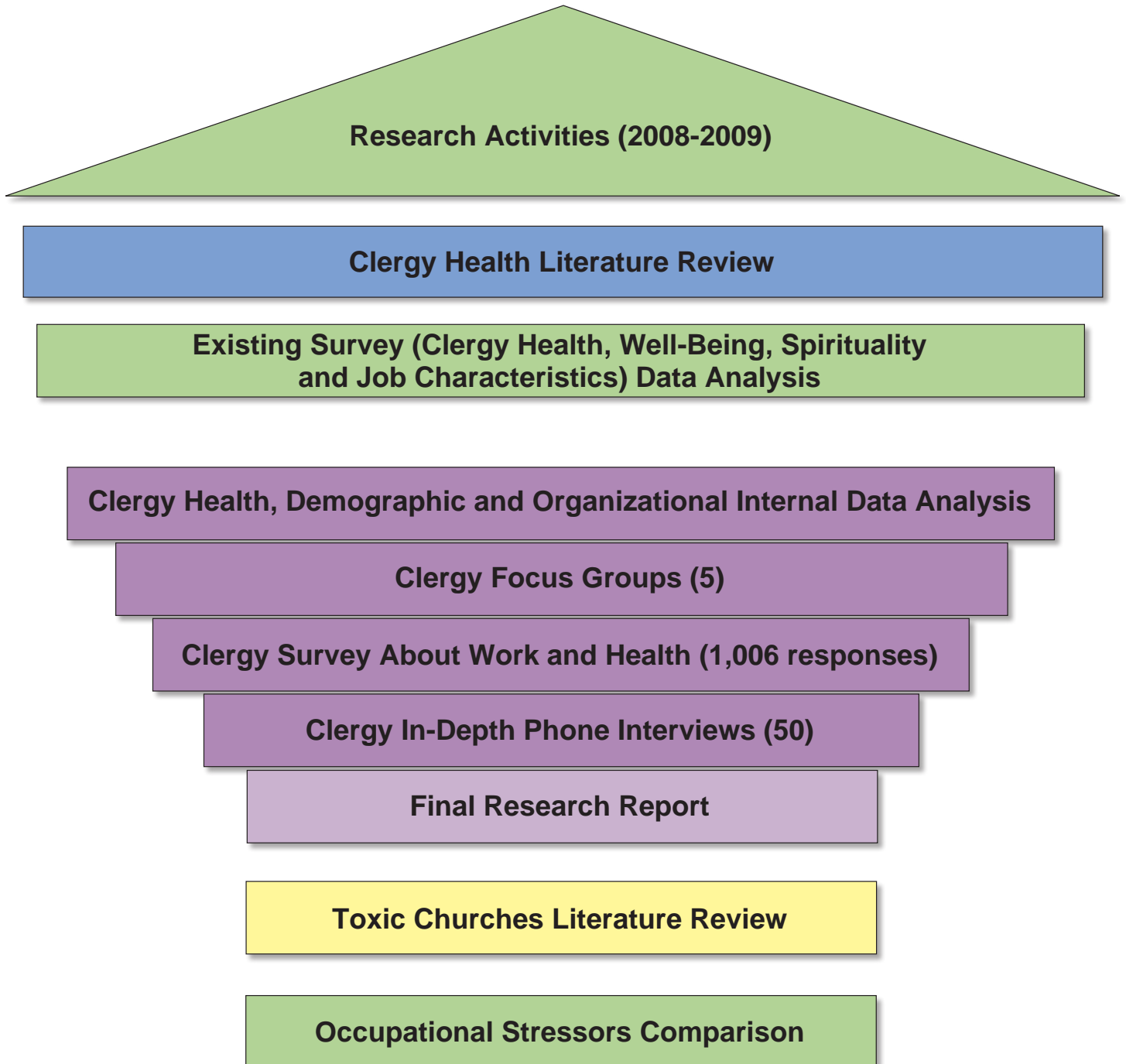
Cover photo: Thomas Coke was ordained by John Wesley on September 12, 1784 to become superintendent for the Methodists in America, who were largely deprived of ordained clergy able to offer a sacramental ministry. This stained glass window, showing Wesley laying hands on Coke before sending him to America, was made in England and installed in 1910 in the Wesley Memorial Church in downtown Atlanta, the site of the first North Georgia Methodist Center. In 1967, it was moved to the United Methodist Center chapel on Ralph McGill Boulevard. The window is now in its third and current location at the United Methodist Center at Simpsonwood Conference and Retreat Center, Norcross, GA.

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Research Approach



The research approach resulted in identification of factors of the employment systems and culture of the Church that adversely affect clergy health.

Summaries of Research Shared with the Church Systems Task Force

Clergy Health: A Review of Literature—Executive Summary

Lewis Center for Church Leadership, Wesley Theological Seminary; January 2009

Introduction and Scope

The health of any organization's workforce is important to its overall success and productivity. The church gets no religious exemption from this requirement. Just as many companies have begun to look more seriously at the health and well-being of their employees, many denominations also have begun to look at the health of the clergy that serve in their churches. Collecting and analyzing workforce health data has allowed many corporations to help their workers lead healthier and more productive lives, which can improve a company's overall success. Denominations, too, are beginning to see how focusing on clergy health might enhance their fruitfulness in spreading the good news of Jesus Christ.

Three criteria were used to determine which works would be included in the review:

1. Did the work involve primary research with clergy? Every effort was made to locate studies that asked clergy to provide specific facts, data, views, and opinions on their health and well-being.
2. Was the primary focus the emotional or physical health of clergy?
3. Is the work current, or at least the most recent available research on the subject?

Although the review focuses on clergy health research, other materials (such as health guides, self-help materials, and other writings) were used to define the scope of the review.

Definitions and Theology

A comprehensive definition of clergy health and well-being supported by the literature includes not only traditional medical indices of physical and mental health but also self-care practices and access to health care resources; supportive personal and professional relationships; balance and coping skills; positive attitudes and outlook; and a passion for ministry grounded in a robust spiritual life. All clergy health literature places the issue in a larger theological framework that views health from the perspective of a theology of ministry and God's ultimate intentions for creation.

Emotional Health

Emotional health is an important component of overall health and well-being. "Clergy work-related poor psychological health, stress, and burnout pose an increasingly serious problem for the leaders of denominations throughout the world, as the particular circumstances related to the spiritual and religious leadership in the community have a special unique dynamic." (Lewis 2007, 2)

Despite reporting high job satisfaction there are common complaints related to emotional health. Areas investigated under emotional health included job satisfaction, stress, pastoral demands, demands of family and self, and the age of entry into ministry.

Physical Health

Detailed studies focusing on the physical health of clergy are a relatively recent phenomenon. Mirroring the heightened concern for health in contemporary society, interest in the state of clergy health has increased in recent years. Several major U.S. denominations—the Presbyterian Church (USA), the Evangelical Lutheran Church of America, the Episcopal Church, and The United Methodist Church (UMC)—have begun to look at the issue of clergy health, collecting data and developing strategies to address emerging issues. The review focuses on both lifestyle risk and medical risks that clergy face.

Conclusions

There are some patterns and themes that emerge from these statistics, findings, and studies. Six particular conclusions are worth lifting up for consideration.

- 1. Clergy health is a mixed picture.** While there are some problem areas that clergy share with the general population (i.e. weight) and areas that need more research (i.e. medical issues), this should not obscure some of the hopeful aspects of the findings. In general, clergy report better health than the population as a whole and exercise more often. The available research shows that clergy smoke less, drink less, exercise more often, and take more safety precautions than the population as a whole. These habits provide The United Methodist Church with a solid foundation for efforts to improve clergy health.
- 2. Medical risks are present for clergy and need further study.** While clergy do experience emotional health problems, evidence suggests that they are more prone to medical issues like blood sugar, blood pressure, cholesterol, and the like. While clergy may be doing better than the general population in some of these measures, there is less clear of a distinction here than there is on matters of lifestyle risk, such as alcohol and tobacco use. There is a lack of direct evidence on many of these concerns. Much more work is necessary to assess the physical health of clergy and to address the issues that emerge.
- 3. Clergymen and clergywomen differ in their level of health and their perceptions of health.** This is shown to be true study after study. Some of the difference is biological in origin; but other factors also play a role in determining health. Women are less likely than men to say they are healthy. Women and men also differ in the types of ailments they report. Any strategy addressing clergy health will need to take these differences into account.
- 4. Age is a factor in physical and emotional health.** Younger clergy are physically healthier than older clergy, but research shows the opposite to be true from emotional health. Younger clergy are more likely to experience problems with emotional health than older counterparts. Older persons entering the ministry as second careers are not at the same risk for emotional health problems as younger clergy entering the ministry.
- 5. The balance of church and home is the issue most addressed in the literature.** The need to balance the demands of work with home life is the issue most commonly raised in the literature. How the boundary between home and congregational life is drawn is of vital importance to the health of individual clergy and to the health of clergy families, as well. This is an important issue with regards to clergy retention.

6. Stress and job satisfaction are largely a function of the nature of congregational life.

“Although stress and satisfaction were related significantly to working hours, salary and benefits, they were much more strongly related to characteristics of the congregation’s functioning, including its morale, the presence of conflict, lack of a shared understanding of the role of pastor and problems with other staff or lay leaders.” (Royle 2005, 24) Several lines of research, including Royle’s quoted above, suggest that the overall systemic problems clergy face have a greater impact on their overall health than specific incidents involving congregation members.

Recommendations

Given these conclusions, what can United Methodist’s do to improve clergy health? First, any recommendations or actions must:

1. Take into account the particularities of age and gender.
2. Give equal weight to medical issues. Because emotional issues have received more attention in past research, a greater emphasis on physical health issues is needed now.
3. Consider the interplay between congregational life and clergy health. Because this consideration involves not only the clergy themselves but the environment in which they work, it may be the most difficult to include in any plan.

Further Research

There is still much more to learn on issues of clergy health. This review points up several areas that warrant further review and research.

1. Issues surrounding itinerancy and clergy health require attention. In all likelihood there are both positive implications, such as sense of job security, and negative implications, such as feelings of helplessness.
2. Issues related to access to health care deserve consideration. Most, if not all, United Methodist clergy have health insurance; but clergy have varying access to health care because of their geographic location or difficulties in finding health care providers that accept their insurance.
3. Collecting data on clergy health in The United Methodist Church on a regular and ongoing basis would allow for comparison, the monitoring of progress, and the early detection of trends that will allow the church to be proactive rather than reactive.
4. Increasing the research and collection of information around medical issues and the clergy to learn what strengths and weaknesses are present.

Lewis, Christopher A., Douglas W. Turton, Leslie J. Francis. 2007. Clergy work-related psychological health, stress, and burnout: An introduction to this special issue. Mental Health, Religion and Culture. 10, no. 1 (January): 1-8.

The Church Benefits Association Survey: Clergy Job Stress, Health and Pharmaceutical Medication Utilization—Summary Report Addendum

Duke University Center for Spirituality, Theology and Health; April 2009

Introduction

At the inaugural meeting of the Church Systems Task Force (CSTF) in January 2009, results were presented using UMC specific data from a multi-denominational study of clergy and lay workers completed in 2006.

The original analyses evaluated five outcomes:

- 1) Physical health
- 2) Mental health
- 3) Job stress
- 4) Presence of any pharmacy claims (2005)
- 5) For those with claims, the number of pharmaceutical claims

During the meeting, task force members determined that in addition to the initial evaluation of relationships between clergy health and social support, spiritual beliefs and practices, and job stressors, analyses were needed to compare the same outcomes to church and clergy service characteristics. In particular, the CSTF was interested evaluating gender and age in this sample.

These additional variables include:

- 1) Lifetime years of service
- 2) Number of churches served (lifetime)
- 3) Current service to more than one church
- 4) Setting of current primary church (rural/suburban/urban)
- 5) Estimated primary church size
- 6) Estimated primary church attendance
- 7) A ratio of church attendance to church size (calculated)

Primary church means the largest church a person currently serves. If they serve only one congregation, then it is this congregation. If they serve more than one, it is the largest. The clergy who responded to the survey determined which church they described in answering questions about their primary church.

The same sample of 999 UMC clergy used in the prior report is utilized here as well.

Important Results—Clergy and Church Service

Gender

For women compared to men, significant relationships exist for:

- Being unmarried (female clergy are over 11 times more likely to be unmarried than male clergy)
- Serving rural churches (34% higher for women)
- Serving multiple churches (58% higher for women).

For unmarried women, the likelihood of serving rural churches (32% higher) and of serving multiple churches (52% higher) were not significant but are of interest.

Taken together, these results suggest that women, particularly unmarried women, are more likely to serve multiple churches at once—and that women are more likely to serve rural churches.

Age

- Age was not significantly associated with gender, marital status, church setting, or serving multiple churches.

Number of Churches Served (lifetime)

- Gender, marital status, and currently serving multiple churches were significantly associated with the number of churches served.
 - *Specifically, being male, being currently unmarried and currently serving multiple churches were associated with a larger number of churches served in one's lifetime.*

Lifetime Service (in years)

- Gender and church setting were significantly associated with the length of service.
 - *Women and those serving rural churches had shorter lifetime tenure as clergy.*

Church Size, Church Attendance and Ratio of Attendance to Size

- Church setting and serving multiple churches were significantly associated with church size and church attendance.
 - *Larger churches were associated with being in non-rural settings and not currently serving multiple churches.*
- There were no significant relationships with the church attendance/size ratio variable.

Important Results—Outcomes

Job Stress

- Gender and presently serving multiple churches were significantly related to job stress.
 - *Being female and serving multiple churches are associated with higher job stress.*
- Including variables significantly related to job stress in the first analyses resulted in age (older—lower score), social isolation (more isolated—higher score), and exercise (more exercise—lower score) also having significant relationships.
- Gender and serving multiple churches remained significant with these other variables included.

Physical Health

- Gender was significantly associated with physical health.
 - *Men had better physical health.*
- The addition of age and exercise resulted in both being significantly associated with physical health.
 - *Being older and exercising more were associated with better physical health for both men and women.*

Mental Health

- Serving multiple churches and church setting were significantly associated with mental health.
 - *Serving multiple churches and serving rural churches were associated with poorer mental health.*
- In this assessment, gender was not significant, suggesting that the demands of a rural setting and serving multiple churches affect men and women similarly.

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- The addition of age, social isolation, private religious activity, and job stress (the significant variables from prior analyses) resulted in serving multiple churches dropping out as a significant association but in addition to church setting, all four of the prior significant variables had significant associations with mental health scores.
 - *Serving rural churches, being younger, rarely engaging in private religious activities, and being more socially isolated were each associated with poorer mental health.*
 - *In general, this suggests that personal factors and habits have more impact on mental health than contextual ones.*

Any Pharmaceutical Claims

- There were no significant relationships between having any pharmaceutical claims and gender, church setting or for serving multiple churches.
- The addition of physical health and age to the model resulted in significant associations observed in the prior research.
 - *Being older and in poorer physical health were both significantly associated with having pharmaceutical claims.*

Number of Pharmaceutical Claims

- Gender was significantly associated with the number of pharmaceutical claims.
 - *Being female is associated with more pharmaceutical claims.*
- The addition of age, job stress and exercise to the model resulted in additional significant associations for age and exercise.
 - *As in the earlier analyses, being male and exercising more frequently were associated with fewer claims while being older was associated with more pharmaceutical claims.*

Implications

Gender, a rural church setting, and serving multiple churches at once all show up in significant relationships in these analyses. Female clergy are more likely to serve rural churches and to serve more than one church at a time. In that they had already been identified in the previous report at having higher job stress scores, poorer physical and mental health, and a larger number of pharmaceutical claims, this may point to system level issues worthy of further exploration. Given that these data come from a convenience sample, caution should be exercised in generalizing this observation to all female clergy but at least those who participated in this survey have these associations.

Because of the negative effects of job stress on health, these findings support further investigation of church setting (specifically rural churches), who is serving these congregations, and whether or not they are serving more than one church. It may be that additional social support mechanisms need to be fostered for clergy in these situations. Or, it may mean that whether someone is married or not and whether or not they are female, may bear some consideration when assignments are made. Perhaps a more equitable assessment would be to evaluate mental health prior to assignment rather than limiting considerations to immutable characteristics like gender. At the very least, serving a church in a rural setting affects clergy job stress differently when compared to suburban and urban churches and as such, the potential for increases in job stress should be anticipated.

Church Systems Task Force: Clergy Health, Demographic and Organizational Internal Data Analysis

Richard Day Research; December 2008

Overview

The goal of this research was to identify predictors of clergy health status using internal data provided by The United Methodist Church.

- Health status was measured by use of a Retrospective Health Risk Score, calculated using medical and pharmacy claim data for the 24-month period from January 2006 to December 2007.

Variables of Interest

Demographic data

- Age
- Gender
- Marital status
- Ethnicity
- Metropolitan vs. non-metropolitan area
- Years of service

Financial data

- Annual salary
- Housing type (parsonage vs. other)

Appointment data

- Organization type (church, conference office, etc.)
- Clergy status (elder, local pastor, etc.)
- Position type (lead vs. associate pastor)
- Charges and churches served

Congregation data:

- Yearly membership
- Average weekly attendance

Overview of Analysis

Three main analyses were conducted. In all cases the goal was to find predictors of the 2006-2007 Health Risk Score:

- Analysis 1: Used demographic data only
- Analysis 2: Used aggregated financial and appointment data from years 2002-2006 (averaged across years)
- Analysis 3: Used financial and appointment data from year 2006 only

Conclusions

The following variables were examined in our analyses:

Predicted Health Risk Score	Did Not Predict Health Risk Score
Age	Years of service
Gender	Metropolitan vs. non-metropolitan area
Marital Status	Ratio of attendance to membership
Ethnicity	Type of position (lead vs. associate)
Salary	Housing type (parsonage vs. other)
Church membership/attendance	
Changing appointments	
Number of churches served	
Organization type and clergy status	

- Age, gender, marital status, and ethnicity affect clergy health in ways similar to other populations:
 - Older clergy, women, those who are unmarried, and African Americans have higher health risk scores
- Understanding the impact of these demographic variables may help you design appropriate programs and interventions. For example you might consider:
 - Support programs for the unmarried
 - Programs to help women modify their health risks
- You may also decide to recruit younger clergy, which would shift the health profile of your clergy base.
- The appointment and itineracy system, and other organizational factors, relate to health as well:
 - Clergy with multiple appointments, those who serve smaller churches, and those who move frequently have higher health risk scores
 - Clergy with lower salaries have higher risk scores, as do “rank and file” clergy compared to those in higher administrative posts
- These organizational variables are things you may address more directly, pending a deeper understanding through primary research.

Focus groups in 2009 will be the first phase of primary research, and will explore in more depth the issues suggested by these findings (especially appointments and the itineracy system). A subsequent quantitative survey will explore additional areas for understanding, including church context and demographics, career trajectories, church systems and support, spiritual practices, and so on.

Caveats

While the data showed clear and measurable relationships among key variables of interest, it is important to note that the effects are quite small.

- A multivariate analysis that combined all predictors into one model accounted for only 9 percent of the variance in clergy risk scores, and 7 of that 9 percent came from the inclusion of age alone
- We should be cautious about reading too much into these variables

Also, remember that correlation does not always mean causation. For example, while changing appointments may lead to stress and cause poor health, it is also possible that poor health is itself a cause of career instability. Once we have a solid understanding from the focus groups and a quantitative survey, individual in-depth phone interviews with clergy will probe these issues and tell us more about why and how these factors are related.

Church Systems Task Force: Focus Groups—Summary Report

Richard Day Research; March 2009

Background

Richard Day Research conducted five focus groups with clergy of The United Methodist Church to learn about church systems factors that may adversely affect clergy health. The objective was to brainstorm hypotheses and ideas that could be tested in a subsequent large-scale survey.

The focus groups were conducted between January 29 and March 2, 2009 and averaged two hours in length. One was conducted in-person and the other four were conducted via telephone with an Internet survey component. The five groups were composed as follows:

- Experts: 12 members of the Church Systems Task Force convened in Jacksonville, FL on January 27-28, 2009
- Healthy Men and Women: five male and five female clergy randomly selected from the top 10% based on health risk scores
- Unhealthy Men: seven male clergy randomly selected from the bottom third of health risk scores
- Unhealthy Women: 10 female clergy randomly selected from the bottom third of health risk scores
- Covenant Group Participants: three clergy currently participating in covenant groups; one male and two females

Each focus group began with brainstorming exercises intended to capture a variety of unique ideas about clergy health. The discussion then turned to 10 key topic areas:

1. Church Context
2. Career Trajectory
3. Attitudes and Beliefs
4. Life Unpredictability
5. Financial Factors
6. Workload and Stress
7. Physical Demands of the Job
8. Physical and Mental Health Practices
9. Social Support
10. Spiritual Practices

For each topic area, participants were asked to review a list of potential health factors and to suggest revisions and additions to that list. They were also asked to vote on the two factors from each list that they thought had the most influence on clergy health, and the two that they thought had the least influence. *The key deliverable resulting from the focus groups is a comprehensive survey that will test a wide range of hypotheses about factors affecting clergy health.*

Executive Summary of Ideas Generated from the Focus Groups

- Clergy are routinely exposed to health risks as part of their professional lives:
 - Making frequent visits to hospitals or the homes of sick parishioners
 - Shaking many hands on Sundays
 - An abundance of food (particularly rich, unhealthy food) at every meeting
 - Exposure to allergens and toxins in old parishes and parsonages
- Although clergy know they should engage in better health practices, they describe many obstacles:
 - Feeling there is not enough time given the demands of their jobs
 - Feeling guilty for taking time to exercise when there are more important things they should be doing
 - Lots of time spent in the car driving between meetings
 - An inability to afford health club memberships or healthy food on a minister's salary
 - Few fitness clubs and gyms in rural areas
 - Distance to and poor quality of rural medical facilities
- Clergy feel stress in multiple aspects of their professional and personal lives, including:
 - Heavy workloads with little time off
 - Difficulty setting boundaries between professional life and personal life
 - Isolation due to frequent moves and an inability to step outside of the pastoral role
 - The impact of itinerancy on the happiness of one's spouse and children
 - Feeling uncertain and helpless about the trajectory of their careers
 - Competition with and mistrust of other clergy
 - A lack of mentors or support systems to help clergy manage their stress
- They attribute many of their health problems to these high levels of stress.
- Clergy feel they need more support and guidance to help them manage both professional and personal problems:
 - Ministers cannot discuss health problems or concerns (particularly emotional ones) with their district superintendents (DS), as this may adversely affect their careers
 - They are hesitant to confide in other clergy, for fear that a confidant may someday become a DS
 - One possible solution would be the establishment of an independent mentor or chaplain who does not have power over evaluations and appointments
 - Covenant groups may also provide a source of support for clergy, as long as the groups are focused on healthy ways to deal with stress rather than becoming "gripe sessions"
- Clergy feel they need more time to engage in private worship and focus on their own spiritual growth, as this is greatly lacking in their everyday lives.

Illustrative Quotes

“I found out that it was difficult for my congregation to understand my conference leadership roles and understand why I needed to be doing that, when I could be spending all of my time with them.”

“There is an isolation issue that I think is endemic in the itinerant system. It keeps us in a competitive embrace too much.”

“Clergy oftentimes hold that we have to be working constantly in order to be faithful. Just to put aside family time, when we should be spending time with family, and especially exercise time—we feel guilty actually scheduling that on our calendar and that is probably why we don’t get in shape.”

“Many times we are put in situations where we are powerless and we don’t do that well, so I think it does cause us to move towards addiction or ways to try to deal with the stress and powerlessness that we feel.”

“I think that we need to have a budget item—and I don’t know where the money will come from—for specific wellness things for clergy, whether it be retreats, or a Pilates class, or membership to the Y, or, if you are in an isolated area, videos ... But you should have access to the financial ability to take care of yourself.”

“We know that not setting boundaries is bad for us, but the system—whether it is in the local church, or the DSs, or whatever level you want to look at—rewards us for not setting boundaries, for being out of the house, absolutely off-the-wall workaholics. That is what we get rewarded for; the system rewards that, even as it might destroy our health.”

“It is really difficult for me to keep the nutritional diet that I want to keep when I am going to potluck or people’s homes, and ‘Hey, I made this. Please pastor, try some of this.’”

“I think that a covenant group has always helped my physical health, as well as my mental and emotional health, because I’ll manage my stress by eating—that is just my thing—but if I am in a covenant group, that is a real help to me. So I come through that group and I am more grounded and more centered and I am less likely to manage my stress in an unhealthy way.”

“You cannot put down roots anywhere and we all know that, I think, our society fracturing because we all move too much and there is no sense of community, no sense of ‘I belong here’.”

“Pastors never have anyone to minister to them and you know, honestly, we are just people too and we do need people to minister to us from time to time to give us spiritual counsel too.”

Church Systems Task Force: Quantitative Survey—Summary Report

Richard Day Research; June 2009

Executive Summary

Richard Day Research (RDR) conducted an online quantitative survey of 1,006 clergy of The United Methodist Church to learn about church systems factors that may adversely affect clergy health. The objective was to identify the strongest predictors of health from among a wide range of potential variables.

Survey respondents answered approximately 150 questions about their health, personal background, spiritual practices, appointment history, career trajectory, congregational context and fit, work stresses, outlook on life, living and working conditions, and personal finances.

Keep in mind that the survey was not designed to provide a “portrait” of the clergy population’s health, wellness, and happiness in each of these areas. Instead, it was designed to identify factors that are highly correlated with health and that *differentiate* those who are healthy from those who are unhealthy.

The survey data identified 13 key factors highly correlated with health, differentiating those who are healthy from those who are unhealthy.

- **Personal centeredness**—feeling a lack of control over one’s life; ruminating about the past; difficulty experiencing the presence of God
- **Eating habits with work that often involves food**—struggling to maintain a healthy diet with food available at church meetings, social gatherings and home visits
- **Work/life balance**—having difficulty balancing multiple roles; feeling guilty taking time to exercise; avoiding health care because of time demands; struggling to achieve overall work/life balance
- **Job satisfaction**—feeling dissatisfied with one’s appointments; feeling isolated at work; feeling disappointed with ministry; wishing for a way to exit the system
- **Personal finances**—high debt; low income; few assets; little to no personal savings
- **Outside interests and social life**—a lack of hobbies, outside interests and/or participation in group activities for personal renewal; having few friends or people with whom one can share personal issues; feeling detached from one’s community
- **Relationship with congregation**—feeling judged rather than supported; feeling the congregation’s expectations are too high or do not match one’s own beliefs about the appropriate pastoral role; feeling the congregation desires a pastor with a different leadership style; avoiding relationships with congregation members so as to avoid improprieties; avoiding health care for fear that parishioners might find out
- **Stressors of the appointment process**—feeling stressed by the appointment process; feeling reluctant to talk to one’s DS because of the power he or she holds over appointments; feeling resentful about being paid less than laypeople in similar professions
- **Marital and family satisfaction**—low marital satisfaction among clergy with families; low appointment satisfaction among spouses and/or children

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- ***Existential burdens of ministry***—feeling obligated to carry the weight of others’ emotional and spiritual burdens; being overwhelmed by the needs of others and the sheer importance of the issues to be addressed in ministry; feeling expected to solve unsolvable mysteries
 - ***Living authentically***—feeling unable to be one’s “authentic self”; failing to live according to deeply held personal values and beliefs
 - ***Education and preparation for ministry***—feeling unprepared by seminary for the everyday responsibilities of ministry; feeling one lacks the skills and training necessary to excel at pastoral duties
 - ***Appointment changes and relocation***—more frequent appointment changes; more frequent long-distance moves

Additional Information

RDR created a composite measure of health (see items below) that was used to identify the factors that most relate to health:

- Overall self-assessment of health, current and when entering ministry
- Limitations on vigorous physical activity
- Work limitations because of health conditions
- Disability status
- Energy level
- Emotional outlook
- Exercise habits
- Nutrition habits
- Sleep habits
- Body Mass Index (calculated from height and weight)
- Health risk score (from GBPHB HealthFlex claims data)
- Health Risk Assessment (HRA) score (from GBPHB self-administered tool)

The survey demographics were as follows:

	Un-weighted Sample Size = 1,006	Weighted Sample Size = 1,006	Target Population Size = 5,324
Gender			
Female	32%	29%	29%
Male	68%	71%	71%
Age			
35 and under	3%	3%	3%
36-45	10%	11%	11%
46-55	31%	31%	31%
56-65	49%	46%	46%
66 and older	7%	9%	9%
Ethnicity			
White	92%	87%	87%
Non-white	8%	13%	13%
Marital Status			
Married	77%	77%	77%
Not married	23%	23%	23%
Years of Service			
0-5 years	6%	6%	6%
6-10 years	15%	16%	16%
11-20 years	31%	31%	31%
21-30 years	28%	28%	27%
31-40 years	18%	17%	18%
41 or more years	3%	3%	2%
Clergy Type			
Elder (including provisional)	90%	91%	88%
Deacon (including provisional)	2%	1%	2%
Local Pastor (full-time, part-time or student)	4%	4%	6%
Associate Member	3%	3%	2%
Organization Type			
Church Ministry	97%	91%	92%
Conference Office	1%	1%	2%
District Superintendant	1%	1%	3%
Other Extension Ministry	1%	2%	3%
Jurisdiction			
Western	11%	11%	12%
North Central	13%	13%	15%
South Central	29%	29%	25%
Northeastern	22%	22%	20%
Southeastern	25%	25%	28%

Church Systems Task Force: In-Depth Phone Interviews—Summary Report

Richard Day Research; September 2009

Executive Summary

Richard Day Research (RDR) and the Lewis Center for Church Leadership, Wesley Theological Seminary, conducted 50 in-depth interviews with clergy of The United Methodist Church to understand the systemic causes of poor clergy health and to explore steps the Church could take to improve clergy health. The Center for Spirituality, Theology and Health, Duke University, was involved in reviewing the phone interview transcripts.

The goal was to discuss with clergy the 13 factors identified as important to clergy health in the online survey, to identify problems in these areas, and to discuss potential solutions or interventions at the personal level and the systemic level that would improve clergy health.

Challenges to Clergy Health

Clergy describe a number of stressors associated with the appointment process that they believe affects their health:

- A lack of transparency in the appointment process creates stress and uncertainty, as clergy feel they don't have control over their futures.
 - Neither pastors nor congregations are given much input into appointment decisions, and clergy feel family circumstances are not given enough consideration.
- Clergy interpret appointment decisions as a one-shot, top-down evaluation of their performance, and it is a system that fosters jealousy and competition among pastors.
- Some clergy say that district superintendents are too busy to get to know their pastors and congregations, and thus fail to appropriately match pastors' gifts to the needs of the church.
- Short appointment tenures don't allow clergy and congregations enough time to develop trust and to work through their conflicts, which negatively affects their relationships with their congregations and hence their job satisfaction.

Itinerancy presents additional sources of stress and dissatisfaction:

- Frequently moving can be difficult for pastors' spouses and children, who are forced to look for new jobs, change schools, and leave friends behind.
- Moves present a host of financial challenges, including moving expenses, salaries that are tied to the resources of the local church, and the need for spouses to take lower paying jobs or give up their careers entirely.
- Many clergy feel incoming pastors know little to nothing about new appointments when they arrive, leaving them unprepared for challenges they may face in the new congregation.
- Appointment changes are a grieving process for all involved, but the transition is usually too quick to allow pastors and congregations time to grieve for their losses or to become comfortable with their new situation.

Heavy workloads with little time off negatively affects the ability of many pastors to achieve a healthy work-life balance, pursue outside interests and a social life, feel centered and grounded, and spend quality time with their families. Clergy say the UMC has a fair vacation policy, but busy schedules and demanding parishioners make it hard for them to actually take advantage of the vacation time allowed.

Although they recognize the importance of having a supportive social network for health, many clergy struggle to make friends. They are discouraged from befriending parishioners, but have trouble getting close to other clergy due to competition and fear that one's fellow pastor may one day be one's DS.

Additional Clergy Health Challenges

- Nearly all clergy agree that financial issues affect their health because of the stress they experience from significant seminary debt, low pay (especially in the early years when debts are high), and their inability to build equity through home ownership.
- Clergy have difficulty maintaining healthy eating habits given that high-sugar, high-fat food is often available at church meetings and gatherings, and the pastor is expected to partake.
- Clergy say they rarely have the opportunity to attend to their own spiritual development, due to time constraints and the lack of a spiritual guide beyond the DS.
 - Many clergy say the DS is too busy and has too much power over their careers to serve as the “pastor’s pastor.”
- Clergy generally agree that while seminaries provide a good theological education, they do not often prepare pastors for the everyday challenges of church administration or pastoral care.
- Clergy become overwhelmed when serving congregations that have unrealistically high expectations about the pastoral role—expecting them to do everything for the church and to always be available.
 - Some clergy are frustrated by the lack of commitment among the laity, which seems to care more about being entertained than about serving God and their church.
 - This negatively affects their job satisfaction, relationships with congregations, and ability to live authentically and achieve work-life balance.
- Clergy feel there is a lack of open, healthy communication at all levels of the Church—including among pastors, between pastors and congregations, and between pastors and DSs.
- Some clergy note that pastors who are unfit for ministry do not have a graceful way to exit the system.

Recommendations to Improve Clergy Health

Personalized Help and Support

- Clergy would benefit from more training in a variety of areas, including church administration, organizational skills and time management, personal finance management, conflict resolution, and family systems theory.
 - This training could be provided as part of the seminary curriculum, through continuing education courses, or in special workshops and training sessions.
- Clergy stress the importance of having access to low-cost mental health services or counseling to help both pastors and their families better handle the stresses of ministry.
- They recommend the UMC provide access to nutritionists through the denominational health plan, and develop more programs aimed at encouraging, and perhaps incentivizing, healthy eating and exercise among clergy.
- Encouraging clergy to form confidential support groups or covenant groups would help them find a safe outlet to discuss the many stresses of ministry and share strategies for achieving a healthy work-life balance, developing better relationships with parishioners, and handling the existential burdens of ministry.
 - Given the competition and lack of trust among clergy, a necessary first step might be to develop programs or structured events aimed at encouraging friendships and trust among clergy.
- Worship services, retreats or study groups specifically for clergy would give them the opportunity to focus more on their own spiritual growth and development.
- Some clergy recommend job placement services or counseling for those wishing to exit the ministry.

Structural Changes

- Many clergy desire an appointment system that is more collaborative and less secretive than the one currently in place.
 - This includes giving both clergy and congregations more input into the decision process, frequently updating them throughout the process, and explaining the reasons behind final appointment decisions.
- More generally, clergy would like the UMC to develop processes for facilitating ongoing, bi-directional communication at all levels.
 - This might include regular, structured discussions between pastors and Church leadership, as well as coaches or training programs to facilitate open communication between pastors and congregations about the mission of the church and expectations about the pastoral role.
- In many areas, clergy feel congregations should be educated about how to keep their pastors healthy.
 - This includes ensuring that their pastors eat well, exercise, and take time off for their own spiritual growth, to spend with their families, or simply to refresh and renew.
 - The Staff Parish Relations Committee plays a key role here—clergy recommend they be held accountable for making sure the congregation supports the pastor in his or her efforts to be healthy.
- Although clergy agree the DS is not in a position to be the “pastor’s pastor,” they disagree about how best to solve this issue.
 - Many clergy express the desire for a confidential spiritual director or counselor other than the DS.
 - But some suggest additional training for DSs on how better support and minister to their pastors.
- Some clergy stress the importance of mentor relationships between older and younger clergy, and suggest the UMC implement a mentorship program that extends beyond the provisional (formerly known as probationary) period.
- Programs to offset the costs of seminary education and facilitate long-term home ownership would reduce some of the major financial stressors associated with a career in ministry.
- A number of clergy recommend longer appointment tenures to allow pastors and parishioners enough time to work through their issues and grow together, leading to healthier clergy and healthier congregations.
- Clergy would like more lead-time and UMC-provided resources when going into a new appointment. This might include:
 - Providing a profile of the new congregation, including an honest accounting of its history, so the pastor can prepare to deal with any pre-existing issues.
 - Providing more time to transition between appointments, perhaps through a structured series of welcome events so the pastor can get to know the congregation and the SPRC.
 - Training programs, websites and books that teach pastors and their families about the transition process and share strategies for effective transitions.
 - Allowing pastors and their families the opportunity to see their new parsonage prior to moving day.
- Clergy recommend the UMC clarify denominational expectations about the pastoral role, educate congregations about what they should expect of their pastor, and facilitate communication between pastors and congregations about their respective roles in the church.
- Internships or work programs in local churches would allow seminary students to gain practical hands-on experience in running a church, leaving them feeling more prepared and less overwhelmed when they begin their first appointment.
- In cases of congregational grief or trauma, the UMC could provide specially-trained interim pastors to prepare parishioners for a healthy relationship with a new pastor.
 - More generally, clergy would like the Church leadership to be more proactive about intervening in cases of congregational conflict, trauma, or when a pastor appears to be in trouble.

- This includes training DSs in how to recognize the signs that a congregation or pastor is in trouble and how to effectively intervene.
- Some clergy recommend greater salary parity to reduce competition among clergy and to ease some of the anxieties associated with switching appointments.

Additional Information

The phone interviews demographics were as follows:

Gender	
Female	38%
Male	62%
Age	
35 and under	6%
36-45	10%
46-55	30%
56-65	46%
66 and older	8%
Ethnicity	
White	94%
Non-white	6%
Marital Status	
Married	80%
Not married	20%
Years of Service	
0-5 years	10%
6-10 years	10%
11-20 years	30%
21-30 years	28%
31-40 years	22%
41 or more years	0%
Clergy Type	
Elder (including provisional)	92%
Deacon (including provisional)	2%
Pastor (full-time, part-time or student)	6%
Associate Member	0%
Organization Type	
Church Ministry	90%
District Superintendant	4%
On Leave or not otherwise appointed	6%
Jurisdiction	
Western	22%
North Central	20%
South Central	18%
Northeastern	14%
Southeastern	26%

Clergy Spouses and Families in The United Methodist Church, Part II: Local Church Expectations and What Clergy Spouses Most Want the UMC to Know

General Commission on the Status and Role of Women of The United Methodist Church; August 2009

What You Most Want The UMC To Know

Clergy spouses' comments about what they most want the UMC to know fell into four basic categories: positive, mixed, negative, and other. Regarding the positive comments, the main theme was that respondents loved their situations and wouldn't change a thing. The mixed comments were about the partnership aspect of the role, which is judged by some to be great, and others to be unrealistic or outdated. Another mixed set of comments were related to the fact that the "job" is demanding, again considered by some to be a welcome challenge, and by others, seen as an aspect that is unappreciated and therefore disappointing. The negative comments were focused on one of three larger themes: 1. loneliness, 2. bad treatment in the local church or from the hierarchy, directed at the clergy spouse respondent or their clergy partners, and 3. aspects of United Methodist ministry, specifically moving and appointment making, parsonage living, the heavy time commitment, and low pay. Finally, a number of comments did not fit into those three categories, and will be discussed as "other." Although there is no single overarching theme linking the comments in this last group, gender arose as one fairly common concern, along with a number of other somewhat unique concerns that merit mention, even if just briefly.

Positive Comments

The satisfaction and unabashed joy that 256 spouses expressed in this section was palpable, even in a written survey. There is little to say in explanation of their comments because their message is simple and clear: they are thrilled to be married to clergy, feel blessed, some mention their own call, and a few even put a positive spin on the more difficult aspects of the role, such as itinerancy. In their own words, the following represent some of their most positive sentiments:

"I consider it an honor to serve God in this capacity, one I never dared hope to have. I am thrilled to be the spouse of a clergyperson. I feel like I've landed in a pot of jam."

"I am very fortunate to have shared the last 54 years with my favorite pastor. We have been supported in the local church and have always felt loved."

"I have had a great experience as a clergy spouse. My husband is ordained, I am a lay person, but our calling to ministry came as a mutual experience."

"I have been called to be a clergy spouse. I think it is essential that all spouses are called. I feel truly blessed to be a clergy spouse!"

"I love being a pastor's wife. It was my childhood dream come true and a prayer answered by God. I love working side by side with my husband...This is the best, happiest and most rewarding life a girl could ever have! This is my calling."

"It has been a good life. We didn't get rich, but we lived richly."

“That my life is as rich as it gets for someone whose passions are the UMC, Africa, community-based health care, and writing. I have a loving spouse also dedicated to mission service...I give God thanks everyday for the abundance that has been given to me as I serve so many who have so little materially and yet offer me so much of themselves.”

“I appreciate my wife’s call and the life we have because of it. I appreciate the opportunity to support my wife and her work physically, emotionally, and financially.”

“I am privileged to share in my wife’s call to ministry. Her call has been a blessing to me and has occasioned growth in my own faith and devotion to the Lord Jesus Christ.”

“I am grateful for the opportunity. Living through the appointment system can be a little intense, but just another reminder that God is in control of our futures.”

“I get tired of hearing other spouses complain so much about ‘expectations’ and my husband’s job. I love being a clergy spouse and feel called to do God’s work.”

Mixed Comments

The uncompensated but highly demanding position in which a wife serves as a kind of professional assistant to her husband was first conceptualized as part of a “two-person single career” by Papanek (1973). This model may have been more prevalent in the past, but it remains common in some careers today, most visibly among heads of state and other high level politicians, military officers, and Protestant clergy. In virtually all of the literature, the model has been gendered, focusing on male employees and their wives. The few times male spouses are mentioned, it is simply to note that they are different, and therefore not expected to participate in their wives careers as unpaid assistants in the same way. Taylor and Hartley (1975) wrote specifically about its applicability to ministry, citing pertinent characteristics of the model in regard to clergy and their spouses, such as the male-dominated nature of the job, and that the spouses’ contributions are not formally acknowledged, but are widely expected, such that one’s failure to participate as such may jeopardize the pastor’s career. Over its relatively short history, the Protestant ministry has been a “two-person single career,” and based on these clergy spouses’ comments, that is still the case. Some embrace it, as in the comments cited above, calling their ministry a “team effort,” while others reject it, but the model persists. Here are a few comments from those who hope the model is changing:

“I am not for free. I have my own job and responsibilities. They did not hire me—they only get what I have time for and am willing to give. They already have my husband.”

“I did not receive a call—my spouse received the call. I support my spouse but I should not be expected to be a second pastor and I will not be a second pastor...Sometimes even the conference appears to think that clergy spouses received a call—they need to get out of the 1950s. Churches need to be told—you get one pastor, who just happens to have a spouse.”

“Why should the spouse be expected to be very involved? I am not the assistant pastor. I work full-time, and at our current church, do not find most of the women’s groups of interest...I am not willing to go to meetings just because I’m the pastor’s wife.”

Nine respondents specifically noted that they attended church elsewhere, or would like to. One woman said, “I have considered attending a different church in the community but am afraid of the repercussions for my husband.” Perhaps this is the most obvious way to avoid the two-person career role, but that is not the only motivation. One said she needed to detach from her husband’s church to protect herself, trying to avoid being hurt when there are conflicts in the church. Another said it was a defense against bonding with people and then being forced to move away and disconnect. That way, if a future appointment was fairly close by, she might be able to keep her church, even if her husband had to change his. At least one was a member of another denomination, and one simply said, “Not all clergy spouses are believers.”

Clearly there are large differences of opinion about the expectation that the ministry is a two-person single career. Some seek it, others accept it, and some avoid it, while others strongly reject it. That it was overtly referred to by 100 clergy spouses as the one main thing they wanted the UMC to know means that it is still present in the churches, and in some places, even at the conference level, but there were also plenty of comments that indicated that things are changing. In particular, those who found it problematic often also referred to work outside the home or other obligations, making such a role impossible. Removing retirees from the analysis, 86% of these spouses work outside the home (both part and full time), whereas the number of dual worker married couples in the United States is only 53% (U.S. Census 2007), which means that clergy and their spouses are more likely to be juggling two jobs than other Americans. In other words, it is a wonder that the ministry as two person single career remains as an ideal at all. Social change is slow though, and we may now be seeing just the tip of the iceberg. While some clergy spouses are likely to continue to enjoy the more demanding role of partner in ministry, that model is also likely to become increasingly uncommon, and therefore less and less expected by church members.

Some clergy spouses made comments about other ways The United Methodist Church seems outdated to them, and in need of renewal. Very often, these comments were linked to itinerancy, saying that they found it difficult to find new jobs every time their spouse gets moved. Others complained about gender issues, like the lack of inclusive language or an inability to deal with male spouses, or a mix of the two. One spouse said:

“The number of male clergy spouses in the UMC increases every year but still we are ignored. Many long-time participants in clergy spouse organizations still use language like “ladies” or “wives” and hold teas. At events I have attended in the past, I have had older women ignore me or even tell me I am in the wrong place. Times are a-changing. It’s time we were made to feel welcome.”

Another issue related to gender and changing times was raised by this man, married to a clergywoman:

“Being the husband of clergy is probably more difficult than being the wife. In almost all cases, the husband is supporting the family with his income when compared to the clergy, but the church expects me to drop everything when my wife has to visit a sick person or attend a meeting. Gone are the days where the spouse is female, plays the organ, teaches Sunday School, and heads up the United Methodist Women. The church needs to react to the different times.”

A few mentioned the lack of family time as another outdated concept, noting that one day off a week is inadequate today, and in particular, that fathers now want to be more engaged with their children, necessitating new models for being pastors that allow for more active parenting.

Finally, there were mixed comments about the fact that the role of clergy spouse is demanding, and while some enjoyed this challenge, others felt they were doing a lot, but that it went unnoticed and/or unappreciated. From the rest of their comments, many of these respondents sounded like they were dutifully fulfilling the traditional two-person single career role, but perhaps in places where this was no longer expected, so therefore it wasn't appreciated. A less specific "type" of clergy spouse shared this more general comment that would apply to most in this group: "Though often treated as invisible, we are not. The sacrifices we and our children have made are real and have made the UMC's appointment system possible. Appreciating, not ignoring, is in order. Thank you for offering this opportunity to share my concerns. It's the first time anyone has ever asked."

Negative Comments

About half of those who answered the question about what they most wanted the UMC to know focused on or mentioned something negative. As noted above, these can be divided into three categories: 1. loneliness, 2. bad treatment of themselves and/or their spouses, 3. issues related to United Methodist ministry, specifically itinerancy, parsonage problems, heavy time demands on clergy, and financial struggles due to low clergy salaries.

Loneliness was the single most common complaint, often voiced by spouses who were otherwise happy. Others were severely lonely, and are looking forward to their spouse's retirement or are considering a divorce. The loneliness was related to a number of circumstances. First, many respondents felt they had few close friends, either because they themselves kept church members at arm's length, or the church members felt awkward as a friend of the pastor's spouse. Some referred to the challenge of forging deep friendships in small, rural communities, in which everyone has lived since birth, and they know you are just passing through. Moving, in fact, was a large reason for loneliness. Some respondents said that they are lonely after leaving friends behind, while other say they intentionally limit friendships because they assume they will be moving eventually. Others noted that they have been moved away from family members who they miss seeing on a regular basis, and a few mentioned that they are now living separately from their spouses because of appointment changes that are too far from the clergy spouse's job or avoiding the disruption of moving children while in high school or too frequently. One spouse said that although married, she actually felt like a single person, "alone and forgotten."

Another problem was that a number of spouses wished to have a pastor, as they couldn't accept their spouse in that role. Along with that, they felt limited in their ability to pursue their own spiritual growth because of the demands of the churches. One woman recounted how much she missed going to Sunday School, no longer possible in her husband's two-point charge, where she is expected to attend both services of worship. This lack of pastoral connection and spiritual growth makes for a solitary kind of religious life, even while in the midst of a congregation. Along with missing a pastor, others felt they would like to go to a counselor to have someone to talk with about their personal problems, but that if found out, the spouse and/or his/her clergy partner would be stigmatized, so counseling services are avoided.

Another commonly mentioned reason for loneliness was the ubiquitous absence of the clergy partner. Spouses wrote about frequent nights and holidays spent alone, sometimes due to incessant meetings, but other times due to parishioner emergencies that arise. One woman said, “I never ask my husband to choose between his family and the church, because I know that the church would always win.” Another said, “You are expected to even give up your precious vacation time to everyone...It is all about the parishioners. I would never do this if I had the chance to do it over.” Another particularly powerful respondent said, “How lonely it is being the mistress to the pastor who has the church for his wife.”

While one respondent reported that she was abused by her husband and felt she had no place to turn, this was the exception. Most spouses reported excellent relationships with their clergy partners, and a desire to be supportive and make sacrifices as needed, but also knew well the loneliness that comes from feeling like a second-class citizen in one’s spouse’s life, while also feeling disconnected from family and friends, and unable to seek out professional help. While some spouses called for clergy spouse support groups or retreats at which they could talk to others who uniquely understand their situation, others did not want such services. Some said they were employed full-time and therefore have little free time, while others said that when they have attended such events in the past, they felt they were narrowly focused on the traditional stay-at-home clergy wife, and provided little support for working spouses, male spouses, and the like. It is impossible to create a one-size-fits-all kind of support program for clergy spouses, but that support is widely desired is indisputable.

Respondents reported receiving *bad treatment*, primarily from parishioners, but occasionally from the church hierarchy as well. They also described the pain they feel when bad treatment is directed at their clergy partners, especially because they feel there is so little they can do in response. Not all respondents provided much detail about this kind of treatment, saying they were “treated as dirt by our conference” or “bishops were uncaring and had only their own interest at the center of their actions.” This particularly terse statement summarized more than a few others: “The UMC does not give a damn about its pastors, nor does it care about their health or spiritual needs.”

Regarding bad treatment directed at the responding spouse, many were related to the fact that they felt ignored in discussions about moves or complaints about badly maintained parsonages, and so on. These topics will be taken up later when talking about issues related to ministry. There were others though, connected to being a clergy spouse and relating to people in the churches, calling them “small minded,” “cold hearted, selfish and mean spirited,” and “nasty, negative, power-hungry sad individuals.” More specifically, one spouse said, “Some folks in the church are truly cruel...One member in a previous church would say things like, ‘Oh, the garden was so much nicer when Harriet was here!’” Another said, “My experience as a clergy spouse has turned me against the church and church members. Once we can retire, I hope to *never* be involved with dysfunctional or any churches or annual conferences ever again. I believe if Jesus Christ came here himself, that churches would drive him and his ideas away.”

About the same number (49 reported bad treatment of self and 46 reported bad treatment of their clergy partner) of respondents raised the issue of harm to their clergy partner, which hurt them by association. One woman said, “Even though I don’t feel expectations placed upon me, I am keenly aware of all the expectations placed upon my clergy husband. Sometimes I have to ‘step in front’ of the church.” Another wrote, “I worry about my husband and his health when it comes to the day-to-day activities and disruptiveness of a family church. That kind of church can tear a person down and make them question their faith.” One longer comment well expresses the emotional angst that can be caused by parishioner:

“I have been hurt many times by members of my church family. You begin to feel like you can’t really trust or let your guard down to anyone in the church. It is very hard to hear negative comments from church members about my spouse when I know that he is working so hard and doing the best that he can. The gossip can be brutal. Sometimes during worship I realize that instead of focusing on the message and feeling connected to God, I am consumed with worry about what others are thinking of my husband as he preaches. I find that I am bracing myself and praying that each statement he says will not offend or make someone angry. I feel like we are walking on eggshells all of the time.”

Aspects of the ministry, some of them particular to The United Methodist Church and other similarly structured denominations, such as itinerancy and parsonage life, were named by many respondents. Often these concerns were linked, as distress over an unwanted move may have been exacerbated by a filthy parsonage or a drop in salary, but each was voiced in such detail that they warrant discussion as separate concerns. *Itinerancy* was the most problematic, mentioned by 143 respondents. Most felt that their concerns and especially their jobs were not considered important to the church, and therefore were ignored in appointment making decisions. One said, “Our careers aren’t even considered, although I make twice what my husband does...we are expected to shut up and pack up, interesting in this era.” Using a more positive spin, another spouse wrote, “To the extent that I was allowed to follow my own profession and have it considered when my spouse was considered for an appointment change, I received the greatest fulfillment.” Interestingly, both male and female spouses felt that their careers were not valued as much as spouses of the other sex.

Some mentioned lack of concern for their children as well. Focusing on the frequency and timing of moves, one respondent wrote, “I have not always felt that the needs of spouses and families are considered. Three out of four of my children were moved in the middle of their first grade year. Two of my children were moved twice in their high school years, which led to both of them dropping out of school.” Another parent pointed to the nature of the church to which her husband was appointed, saying there was no youth group as it was an older congregation, so it was hard for her high school aged children to get involved. More than a few recounted stories of moving to areas with poor school systems, or where the grade-level standards were much different than a previous school, making academic placement difficult.

One spouse suggested that like promotions in other occupations, pastoral moves should be offered, but clergy should be allowed to pass if they feel their family would be served better by staying where they are. Describing the unique reality for clergy families, another spouse said, “The lack of control over my own life is crippling. I don’t get to choose where I live (the town or the house) or where I worship. Church is utterly meaningless to me now and I dread going each week. I love my husband, but I wish I’d known how much I would hate the clergy lifestyle.”

Forty six respondents spoke about problems they had had living in *parsonages*, and in fact, only two people said they thought parsonages were preferable to housing allowances or salaries adequate to owning and furnishing one’s own home. A few comments focused on the placement of parsonages (on busy streets where young children couldn’t go out to play or in dangerous neighborhoods or immediately adjacent to the church, offering little privacy), and others referred to the sense of not having a place to call their own. One spouse told of church members regularly letting themselves into the parsonage and coming and going as they please, considering the house theirs. Another told of her child who, while helping to pack for a move, had to keep asking what was theirs and what stayed with the parsonage. Some respondents commented on the lack of ability to build equity in

a home and prepare for retirement, or having to wait so late in life to establish residential roots, but most comments were directed at the poor condition of parsonages and if furnished, the miserable quality of the furniture, some of it donated, or redirected while “on its way to the dump.” Perhaps the worst conditions were described in this way: “We have lived in parsonages with mold. We’ve lived in parsonages with horse manure in the ‘garage.’ We’ve had sewage back up into the bathtub. We’ve lived in parsonages that I wouldn’t put my enemy in, much less my kids. Our kids want nothing to do with the church because of their experiences.” But even if everyone’s experience was not as bad as that, there was clearly a great deal of discontent with parsonage living.

The burden on spouses related to the heavy *time demands* on clergy was noted by 59 respondents. Some focused on the seemingly incessant demands of parishioners, while others complained about the excessive amount of time spent in meetings. One spouse simply wrote, “The people are friendly but their meetings are way too long.” Regarding the need for personal and family time, the single day off each week was protested, as were constant evenings and weekends at church. One spouse’s church told them that they could take vacation, but it had to start after church on Sunday, and they had to be back for church the following week. Many spouses admitted that their clergy spouses are workaholics, but they felt the church encourages this rather than helping clergy to set healthy boundaries. One respondent said that change needs to come from the top, pointing out that “bishops and DSs who are overworked are not good examples.”

Often linked to unwanted moves and excessive time demands was inadequate compensation. Sixty six respondents mentioned *financial struggles* as one of their main concerns. The high expenses of seminary and mandatory ordination retreats at the beginning of ministry were noted, as were costs in the middle and the end of a career, noting fears around sending children to college, affording long term health care, and eventually buying a home and retiring. In cases where spouses had well paying jobs, financial stress was less, but when asked to move and leave that job, spouses were more than a little concerned. Some reported that they left and suffered financially, while others remained in the previous town, struggling with commuter marriages and the challenges of what became like single parenthood. Quite a few noted that living on one salary, especially that of a pastor, was impossible and something that the denomination should acknowledge and consider when requiring moves. One of the more difficult situations, linking a number of these problematic factors, was described by this respondent:

“It has been a killer...We are expected to live in substandard housing on substandard pay and like it. Having to move at the beck and call of the conference has virtually destroyed my career; after our children are grown, I expect to leave my husband to be able to find some satisfaction before I die instead of living like we’re expected to in the name of ‘sacrifice’ and ‘service.’”

Other Comments

In naming what spouses most wanted the UMC to know about their experiences, issues related to being a male spouse were mentioned 54 times, which some notably common themes. As mentioned earlier, most said there were few if any expectations on them, as many of the traditional expectations of a clergy spouse are gendered feminine and therefore not considered appropriate for these men. Specifically, few were expected to cook for events, lead United Methodist Women, sing in the choir, or work with the children’s program. While a few said they tried to help in things like cooking when asked, they were rarely asked, and were far more likely to do work associated with males, like building maintenance and lawn care. Some wanted programs and other kinds of support for their invisible role, while others enjoyed the

freedom to construct their role uniquely and as they desire. One respondent said, “As a male spouse of a female UMC minister with my own 26-year career outside the church, I don’t really have any needs or expectations of support.” This is truly a new group in the Protestant denominations that ordain women—one that is likely to change the role of clergy spouse for everyone, men and women alike. For now, they live with ambiguous or no expectations and they surprise people, whatever they do. Women spouses with full time jobs outside the church are still often expected to be full participants in their husband’s churches, but these male spouses are not, and as in the case mentioned earlier, it is the clergywoman who is expected to fill both roles, of clergy and spouse, preaching and cooking, counseling and cleaning—a form of “the second shift” (Hochschild 1989), in which women work both outside the home for money and inside the home for the family. Men, more typically, work only one shift, while helping at home, but not primarily responsible for what happens there.

All of the other responses were quite varied, and often only noted by one respondent, but there were a few small patterns. There were a number of clergy spouses who are also clergy themselves, who thought the questionnaire was ineffective in assessing their experiences, and it appears that they were correct. In fact, because they themselves are clergy, we assumed they would not have the same experiences of non-clergy clergy spouses, and constructed the survey accordingly. We were wrong though, as some reported serving their own churches while also being expected to fill the role of clergy spouse at their partner’s church. This phenomenon seemed common enough that it probably warrants further investigation.

There were also a few people who seemed angry to be surveyed at all, saying things like, “What will you do with the information...very little I suspect,” or “Nothing. This questionnaire is a stupid waste of time,” or even “The United Methodist Church has ruined my life. Not that any of you care. I hope you are happy.” These were few and far between though, and far more respondents thanked the Commission on the Status and Role of Women for asking about their experiences, such as this: “Thanks for asking! This is the first time that I have felt that I really mattered with the UMC as a spouse. Bless you!”

Finally, a few stood alone or with just a few others respondents with them, but they probably represent more than just themselves. Some of the more interesting comments were:

“We are all different.”

“Being clergy is not easy and being in a same-sex partnership makes that even harder. The one place that should be a sanctuary (home, family, partnership) is fraught with potential loss of call, ministry, safety, home, finances.”

“I expect the best way to care for clergy spouses is to treat the appointed clergyperson with care and respect.”

“Clergy spouses must have some role in their church beyond simply sitting in the pew on Sunday.”

“Every spouse of every person, regardless of vocation, has pressures and concerns. I believe singling out clergy spouses as some defined group with unique needs is wrong.”

“I wish I had the trust needed to answer this question truthfully.”

“It is much better than being the spouse of an incarcerated felon.”

Conclusions and Recommendations

Perhaps the first quote in the previous section best summarizes the sentiments of the spouses of United Methodist Clergy—they are all different. Some are very happy playing the traditional role of helper/assistant to the pastor, while others resist that role and work hard to create new models. Others are happy because they feel free to be themselves, and feel no confinement from expectations. Many work outside the home, and see their role as clergy spouse as truly secondary, while others try to strike a balance between what they see as two important roles—work and church, and often also family. Older spouses and church members tend to be more traditional, as do those outside of the south, but the most nontraditional spouses are often male. Churches aren't always sure what to do with a male spouse, so these men are carving their own niches, also unique to each one. As with women, some see themselves as partners with their wives, and others are busy at work, and do not see the role of pastor's spouse as central at all. There is no single clergy spouse model, as there may have once been, and there is no one kind of person fulfilling those many roles.

While many spouses are happy with their lives in the church, there were a number of common concerns, often voiced with great pain and passion. Expectations of church members can feel oppressive, as can what seems like uncaring dictates from the denominational hierarchy. The greatest concern, even among those who are otherwise happy, is around the loneliness they feel. They have trouble making and keeping friends for a variety of reasons, and their spouses are busy to the point of complete absence in some cases. There are numerous challenges around moving, parsonages, and compensation, which are likely to pose continuing problems to an increasingly challenging itinerant system. Itinerancy may have never been easy, but when the spouse is working a job that is fulfilling and economically necessary, moving can be impossible, and family separations (short- and long-term) are often the result.

The Commission on the Status and Role of Women took up this study of clergy spouses with two major goals in mind: to assess and understand the lives and concerns of United Methodist clergy spouses, and also to discern how the Church might better respond to their concerns and support them. The full report explains the first, so let us now turn to the second concern—how can The United Methodist Church support the spouses of the clergy? The following suggestions, in no particular order, are taken directly from the respondents. While some ideas may be more do-able than others, surely all should be considered.

1. Make clergy relocations, not as demands, but as offers, which can be rejected, even if only once or twice. In that way, clergy and their families would feel a bit more in control of their lives. This occasional veto rule could be very empowering.
2. Be intentional about discussing spousal careers and children's needs when considering moves. Although this may happen in most situations, many spouses are not aware of it.
3. Create a system for excellent care of parsonages, and look toward the elimination of the parsonage system overall. While parsonages may be less expensive for the church, especially in areas where home prices are high, and they make it easier for clergy to relocate quickly and often (something these spouses do not want), they also make for a sense of "homelessness" for clergy families. Helping clergy rent or buy homes would go a long way toward countering the feeling of never being "at home."
4. Institute a denomination-wide schedule whereby clergy would be expected, or even required, to take two days off each week, and take their full vacations. In general, better attention to the maintenance of clergy's personal time will positively impact their spouses and families.

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5. Better conflict resolution skills should be taught to and readily used by clergy and cabinet leaders, such that local church conflicts are controlled quickly and effectively, before people are harmed. Clergy spouses report pain at watching church members treat their partners badly, and they feel powerless to respond. Such conflicts are all too common and many could be managed more successfully. While much of this is dependent on the competence of the clergyperson him/herself, resources from the denomination and support from cabinets could be helpful as well.
 6. At introductory meetings between churches and clergy, all parties should discuss their expectations regarding the pastor's family, with the primary purpose of letting the clergy spouse name his/her desires regarding attendance, leadership, role expectations, and so on. It should also be overtly stated that spouses and children are allowed, or even encouraged to attend other churches, or none at all. In general, the spouse and children must be empowered to set their own boundaries, as they should not be considered unpaid employees of the church. Although many enjoy serving in an employee-like capacity, many do not, so each person must be allowed to communicate his/her desires in that regard, and any precedents set by previous spouses must be discarded with each new appointment.
 7. Conference or district-wide events or meetings for clergy spouses should be offered, knowing that all spouses will not be interested. Such events must be intentional in focusing broadly, beyond the traditional "stay-at-home, clergy wife/assistant to the pastor" model. They must also be offered at various times and places, taking into account the busy work and family lives of most spouses. For example, weekend retreats might appeal to some, but many more would be able to attend a dinner with a short program, focused on conversation between spouses to address the widespread issue of isolation and loneliness.
 8. Compensation for clergy must be improved as much as possible, especially to reflect the level of education required and the time commitment given. This is a professional position, and should be compensated as such. No clergy family should qualify for food stamps or other poverty-related benefits. This may require the painful closing of struggling churches or the consolidation of small congregations, or other larger-scale organizational shifts, but the embarrassingly low salaries for some clergy contributes to a significant morale problem for many spouses. Spouses, even the least involved among them, want to feel that their clergy partners are appreciated by the church.
 9. Spouses themselves should also work toward the elimination of universal expectations, as individuals and as a group, to the extent that they are willing to organize. For example, some said that all spouses should be called to the role, while many others would disagree. The denomination can do much more to support its clergy spouses, but the spouses themselves are in the best place to make their desires known. Male spouses, in particular, who have been faced with few if any expectations, have been leading in setting new standards in some ways, but more as individuals than as a group. Perhaps The United Methodist Church can provide some organizational beginnings for clergy spouses to gather and assert their opinions, as they have in this survey, toward the ultimate end of seeing them as many and varied individuals, some of whom love The United Methodist Church and want to be fully involved, and some who do not.

There is little anyone can suggest that will meet the needs of all spouses, but if the central focus of all efforts is on treating clergy spouses as unique persons with many visions of their roles, both inside and outside of the church, progress will be made. As one spouse said, "We need to bring The United Methodist Church into the 21st century by re-evaluating the clergy family." This study is one major step in that direction.

Literature Review: Characteristics of Toxic Churches

Duke University Center for Spirituality, Theology and Health; September 2009

A Two Page Primer on Toxic Churches

These two pages provide a quick and accessible introduction to the concept of toxic churches in the context of clergy health. It is organized using questions as a way to introduce relevant issues. Following this short introduction, there is a longer document with more in-depth citation and referencing of literature and resources concerning toxic churches and the health effects on clergy of such environments.

There are two meanings of the phrase “Toxic Churches” in the health and social science literature.

- 1) *An organization in which the collective/cumulative effect of multiple stressors of a dissonant nature intrude upon the relationship of a clergyperson and a congregation resulting in dissatisfaction for both parties and very often, health consequences for the clergyperson.*
- 2) *An organization that has lost focus from its traditional foundations and misappropriated a marketing/business approach to attract congregants; very often an organization in which the focus is on works, in which “doing” is much more important than “being”. In this instance, both clergy and congregation are focused in the same direction of organizational promotion. Over time, it is possible for both congregants and clergy to be exploited in the allegiance to “doing” thereby demonstrating the practical (arguably, secularized) value of faith and church participation. Worship for the glorification of God and education to nurture spiritual formation and health among congregation members is lost as foundational foci for the organization. This environmental tenor can be insidious.*

The former concept is most congruent with the mission of the Church Systems Task Force in its focus on what The United Methodist Church might structurally undertake to improve clergy health and well-being.

- 1) Can the key/critical characteristics of toxic churches be articulated?
No set of characteristics of a toxic church seem to be universal. What may be a toxic environment to one clergyperson may not be to another.

What can be said of toxic environments is that there is dissonance between the pastor and the congregation. Matching of clergy strengths and congregational needs in the appointment process can go a long way toward fostering a healthy relationship between clergy and congregation.

Functional congregations have in common:

- i. support for clergy*
 - ii. balance of clergy influence and congregational autonomy*
 - iii. openness of the congregation to the clergy*
 - iv. community involvement by clergy*
 - v. church goals/policies rooted in theology and tradition.*
- 2) How would these characteristics/elements match with a clergyperson’s characteristics/behaviors?
There is little specific research assessing and detailing characteristics of both church environments and the pastors for whom it is toxic. Mueller and McDuff (2004) observed in one sample of clergy, pastors who were more theologically and socially liberal than their congregation were significantly less satisfied than those whose beliefs were matched more closely with the beliefs of their parishioners. Other factors include gender, ethnicity, age, salary satisfaction, church size and location [small metropolitan and large urban congregations engender less satisfaction compared to small rural churches (Nelsen and Everett 1976)].

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- 3) What are some of the “remedies” for clergy to deal with a toxic church?

Clearly some methods brought in from program planning may be of merit here. Identifying an organizational mission and how clergy and congregation can work together to pursue a common purpose would be foundational cornerstones in efforts to “turn the ship about” or foster an attitudinal “sea change”. This means asking the right questions of the right people; to be willing to ask the hard questions—why something is the way it is.

As a corollary to this program planning approach, congregations for which the focus remains on doctrine (particularly justification by faith and the role of mission) and that nurture a loving and supportive environment are more likely to be able to foster the characteristics of functional congregations noted above.

- 4) It seems that the SPRC has some role to play in a toxic church situation. Can the role be described in terms of both the SPRC’s positive influence (part of the remedy) and negative influence (part of the cause)?

Where the SPRC is supportive of characteristics of functional congregations, their role can be invaluable. By the same token, if the SPRC lacks confidence in the ability of the clergy to address the needs of the congregation, this can surely be detrimental.

- 5) Do we know if toxic churches cause people to go on disability, to seek extension ministries, to exit ministry?

There is some evidence that toxic churches lead pastors to desire to exit the ministry (Nelsen and Everett, 1976) or to change churches (Wildhagen, Mueller and Wang, 2005) but nothing explicit re: disability. This suggests an opportunity to do some qualitative work with people on disability or who have left the ministry to find out why.

Literature Review: Characteristics of Toxic Churches

There are a variety of issues that have been shown to plague the relationships between ministers and their parishioners. These issues can lead to emotional exhaustion (Miner 2007; Doolittle 2007), stress (Weaver, Flannelly, Larson, Stapleton & Koenig 2002), clergy familial problems (Frame & Shehan 1994; Darling, Hill & McWey 2004), and the desire to leave the ministry (Nelsen & Everett 1976) or current church (Hang-yue, Foley & Loi 2005). The issues may manifest themselves in a variety of ways including:

- Openness of congregation;
- Community involvement;
- Congregational generosity;
- Congregational support;
- Authority of clergy within church; and
- Role of clergy within the church.

The degree to which the congregation is open to the minister's ideas seems to have an effect on the relationships between a pastor and his/her parishioners. Nelson and Everett (1976) have suggested that parishioners' "willingness to study and be trained" has an impact on clergy satisfaction. It has also been found that controversial sermon topics, stances, and views on doctrine lead to quarrels between parishioners and ministers (Mitchell 1967) suggesting that congregations whose members are more willing to consider and discuss ideas different from their own would be more supportive of and open to a greater number of clergy.

The commitment by clergy and parishioners to community involvement may be an indicator of the toxicity of the church. Ministers who are involved in their communities are less likely to be searching for other jobs (Wildhagen, Mueller & Wang 2005), and members' desire to share their witness increases clergy satisfaction (Nelson & Everett 1976). The *Book of Discipline of The United Methodist Church* also encourages community involvement and sharing the gospel (§122) as part of the process of carrying out the mission of the church.

Windhagen et al. (2005) found that ministers are less likely to search for other jobs if they feel they are being compensated fairly for the work they do, and a large church budget decreases the likelihood that a minister is searching. Mitchell (1967) found that both the youngest and oldest members of the clergy receive the lowest salaries, possibly leading to a perception of unfair compensation. These associations may reflect a relationship between the level of tithing and a general sense of generosity within a congregation and the members' relationship with the clergy.

Congregational support was also found to be a significant factor in the clergy-congregation relationship (Windhagen et al. 2005). This finding holds no surprise, and it is not a leap to assume that an unsupportive attitude would contribute to the level of openness, generosity, and community involvement.

Another issue related to congregational support for clergy may be the level of authority given to the clergy. Chaves (1994) has suggested that secularization is not declining religion as has been theorized but that "secularization is best understood ... as the declining scope of religious authority." He says evidence of this declining authority has been seen in the United States. Rassieur (1982) suggests that weakened authority in the church may relate to low self esteem (cited in Miner, Sterland, & Dowson 2006). Miner et al. suggest that the authority given to clergy by individuals is declining and is evidenced by individuals "shopping around" for churches (citing Whetham & Whetham 2000) and results in clergy work overload (citing Willimon 1989). Furthermore, Mueller and McDuff (2004) found that autonomy and participation in decision making increased job satisfaction in a sample of clergy. Miner et al have developed the *Orientations to the Demands of Ministry Scale* that may be useful

in future research on clergy. Congregations who do not value clergy authority may not be allowing the minister to live out his/her role as described in the *Book of Discipline*: “Ordained ministers are called to interpret to the Church the needs, concerns, and hopes of the world and the promise of God for creation” (§ 138). This limitation would likely be a major cause of stress for the clergy.

The role or roles that clergy assume within their congregations may also contribute to the relationship that he or she has with parishioners. Different congregations have different expectations of pastors, and these expectations, as well as the fit of these expectations with clergy’s ideas and gifts (Wildhagen et al. 2005) have an impact on clergy’s satisfaction. Conflicts about administrative tasks seem to cause much unrest in the pastor—parishioner relationship (Mitchell 1967) as does the expectation for ministers to counsel their parishioners (Mitchell 1967; Rolfe 1985). Rolfe suggests that this role of minister as psychotherapist may lead to decreased opportunity for clergy to experience friendship within the congregation and decreased contact with parishioners involving Christian education, service opportunities, spiritual growth, and church doctrine and tradition. Clergy may be expected to tend to parishioners during all times of the day, including times traditionally spent with family and friends (Rolfe). This expectation is associated with “intra-family strains,” a major source of stress for both clergy and their spouses (Darling, Hill & McWey, 2004).

Several larger issues may contribute to the stressors described above which can create a toxic church. The age of a minister is related to several factors that influence the minister’s level of satisfaction including salary, the relationship he/she has with parishioners, the role assumed within the church, and the tendency to bring up controversial issues (Mitchell 1967). Size and location of the congregation seems to be important: ministers serving small metropolitan churches and large urban churches seem particularly unsatisfied, and ministers serving small rural churches are especially satisfied (Nelsen & Everett 1976). Therefore, more research needs to be done to clarify the characteristics of small, moderate and large churches in urban, metropolitan and rural areas in order to examine their defining characteristics. A mismatch between clergy and parishioners should also be examined in more depth. Mueller and McDuff (2004) found that in one sample of clergy, pastors who were more theologically and socially liberal than their congregations were significantly less satisfied than those whose beliefs were matched more closely with the beliefs of their parishioners. These issues may be underlying causes for poor congregational support, the level of clergy authority, lack of relationship with parishioners and other disagreements, but more research is needed to determine the nature of these possible associations.

John Setser, author of *Broken Hearts, Shattered Trust*, and others, however, believe that leaders (i.e. pastors) perpetuate, if not begin, the process of a congregation becoming a toxic church. Bill Jackson provides a summary of *Toxic Faith* by Stephen Arterburn and Jack Felton in which a toxic faith is described as an addiction in which the leader of a toxic faith system is a “Persecutor” who claims “a special pipeline to God which places them at a level above all the others in the church.” This language may cast the pastor as too much of a villain for most situations, but the description of the active church member as the enabler may hit closer to home. “They are getting their worth serving something ‘significant’.... They hope for but are afraid to work for change. Instead, they work like beasts of burden because they feel responsible for everything.” In a blog by Melanie Dobson, Shelley Bates describes the heroine in her book as suffering from “the insidious toxicity known as ‘salvation by works.’” Bates says that “one of the hallmarks of a toxic church is an emphasis on working one’s way to salvation instead of rejoicing in the grace that is ours because of the sacrifice of Jesus.” This is of course in direct contradiction to the doctrine of The United Methodist Church which says, “We are accounted righteous before God only for the merit of our Lord and Saviour Jesus Christ, by faith, and not for our own works or deservings” (*Book of Discipline*, § 103, Article IX).

According to the discussion above, functional congregations seem to have several things in common: congregational support for the clergy, a balance of clergy influence and congregational autonomy on committees and in decisions, openness of the congregation to the clergy, community involvement, and church goals and policies rooted in theology and tradition. Clergy and congregations should strive to build relationships with these characteristics and to maintain focus on church doctrines such as justification by faith, being a missional church, and clergy authority among others. Mollenkott (1993) suggests that if we take Micah 6:8 to heart and that if the structure of the church supports its mission, “each [church] must be restructured in such a way as to do justice to everyone, to love kindness toward everyone, and to walk humbly with our God within everyone.” This loving and supportive model of a church must also apply to the relationship between the congregation and the clergy.

Occupational Stressors Comparison

Center for Health, General Board of Pension and Health Benefits of The United Methodist Church;
September 2009

Summary of Findings

Clergy share much in common with other “helping, healing, caring, teaching” occupations when examining stressors and stress remediation.

- Clergy consistently rank high in terms of job satisfaction, general happiness and the prestige of the profession—yet, clergy stress and burnout are oft-cited in studies associated with clergy health and well-being
- Clergy, however, share similar occupational stressors with others in the “helping, healing, caring, teaching” occupations
- Occupational stress may be viewed through two models; clergy emanates from both:
 - Demand-Control (DC)—emphasizes a distinct combination of job characteristics [e.g., decision authority, skills discretion, job demands (physical and psychological)]
 - Effort-Reward (ER)—focuses on the imbalance between efforts spent and rewards received
- Occupational stress manifests itself in a variety of ways; clergy are not unique in terms of some of the manifestation of stress (e.g., burnout, work-family conflict, depression, marital stress) although some manifestations are less prevalent (e.g., job dissatisfaction, turnover, absenteeism, job insecurity)
- It’s instructive to learn from similar professions what interventions they suggest for stress remediation such as:
 - Supervisor/managerial support
 - Colleague support
 - Counseling
 - Time off/vacation time

Comparative Tables

Tables below compare stressors, manifestation of stress and remediation of stress by occupation.

Stressors by Occupation

Occupational Stressors	Clergy	Teacher	Social Worker	Physician	Nurse	Professor
Challenge of the Job	X	X	X	X	X	X
Expectations	X			X		X
Job Autonomy		X	X		X	
Role Ambiguity	X	X	X			X
Role Conflict	X	X	X			
Long Hours	X	X	X	X	X	X
Workload	X	X	X	X	X	X
Competing/Mismatch of Value	X	X	X	X	X	X
Lack of Promotion Opportunities	X	X	X		X	X
High Client (Patient/Student) to Caregiver/Teacher Ratio	X	X	X	X	X	X
Lack of Financial Rewards	X	X	X		X	X
Graduate School Debt	X		X	X		X
Dealing with Life and Death or Difficult Issues	X		X	X	X	
Changes in Staffing Patterns*	X	X	X	X	X	X

* For example, increased use of unlicensed assistive personnel in nursing, adjunct professors at universities, teacher's aides in schools

Notes:

- Items in random order.
- A stressor is a “demand, situation or circumstance that disrupts a person’s equilibrium and initiates the stress response of increased autonomic arousal,” Social Work, Stress and Burnout: A Review, Journal of Mental Health (2002) 11, 3, p. 256.

Manifestation of Stress by Occupation

Stress Manifestation	Clergy	Teacher	Social Worker	Physician	Nurse	Professor
Turnover			X		X	
Burnout	X	X	X	X	X	X
Job Dissatisfaction			X		X	
Absenteeism		X	X		X	
Loss of/Reduced Personal Accomplishment	X	X	X		X	
Mismatch Between Worker and the Job	X	X	X			X
Unable or Feels Unable to Control Work Conditions	X	X	X	X	X	X
Depression	X	X	X		X	X
Work-Family Conflict*	X	X		X	X	
Marital Stress	X			X		
Job Insecurity		X	X		X	

* Work perceived as interfering with family can also be perceived when family is interfering with work.

Notes:

- Items in random order.
- Burnout, according to the Mayo Clinic is defined as: Burnout is a state of physical, emotional and mental exhaustion caused by long-term exposure to demanding work situations. Burnout is the cumulative result of stress (www.mayoclinic.com/health/burnout/WL00062).

Remediation of Stress by Occupation

Potential Stress Mediators	Clergy	Teacher	Social Worker	Physician	Nurse	Professor
Supervisory/Managerial Support	X	X	X	X	X	X
Remuneration		X	X		X	
Promotional Opportunities			X		X	
Counseling	X	X	X	X	X	X
Job Clarity			X		X	
Flexible Schedules/Flexibility of Work Hours	X	X	X		X	
System of "Coverage" for the Caregiver/Provider	X	X	X	X	X	
Spousal Support	X	X	X	X	X	X
Colleague Support	X	X	X	X	X	X
Number of Hours Worked	X	X	X	X	X	
Time Off/Vacation Time	X	X	X	X	X	X

Note:

- Items in random order.

Similarities and Differences

There is a similarity of many of the stressors generally associated with the “helping, healing, caring, teaching” occupations. Occupational stress leads to mental and/or physical health problems and typically has a negative impact on satisfaction with life. Clergy, though, report high job satisfaction and general happiness; teachers also report high job satisfaction. Additionally, clergy are among several of the “helping, healing, caring, teaching” professions that rank high in prestige along with nurses, doctors and teachers.

High job strain has been associated with greater prevalence of three forms of depression (major depressive episode, depressive syndrome and dysphoria [an emotional state marked by anxiety, depression, and restlessness] for individuals working in occupations with high psychological strain (high psychological demands and low decision authority) ["Psychosocial work environment and depression: epidemiologic assessment of the demand-control model"; *American Journal of Public Health*, 2000 Nov; 90(11): 1765-70]. This association was found to be stronger for women. For men, being unmarried was the strongest association.

Interestingly and to a degree, similarly, the Church Benefits Association survey of UMC data indicated the following associations for job stress:

- Antidepressant claims decline when job stress decreases
- Female clergy experience higher levels of job stress than male clergy
- Unmarried clergy experience higher stress than those who are married

Occupational stress is often viewed through two models:

- Demand-Control (DC)—emphasizes a distinct combination of job characteristics (e.g., decision authority, skills discretion, job demands [physical and psychological])
- Effort-Reward (ER)—focuses on the imbalance between efforts spent and rewards received ["Psychosocial stress and disease risks in occupational life. Results of international studies on the demand-control and the effort-reward imbalance models"; *Bundesgesundheitsblatt Gesundheitsforschung Gesundheitsschutz* (article in English from German); 2008 Mar; 51(3): 305-12]

Several of the professions seem to have stress associated with DC and ER:

Occupation	Demand-Control (DC) and Effort-Reward (ER) Stress	Mostly Effort-Reward (ER) Stress
Clergy	X	
Teacher	X	
Social Worker	X	
Physician		X
Nurse	X	
Professor		X

Across many occupations, work overload and irregular work schedules are predictors of work-family conflict—which, in turn, can be related to poor mental health and negative organizational attitudes ["Nurses' work demands and work-family conflict: a questionnaire study"; *International Journal of Nursing Studies*; 2008 Sep; 45(9): 1366-78]. Moreover, low "global" satisfaction with psychosocial work conditions is associated with increased levels of sickness absence. Given clergy typically report high job satisfaction, it is not surprising that absenteeism would be relatively less prevalent than for other occupations.

Each profession has some aspects of occupational stress that may be unique; for example:

- Clergy—Very high role expectations; need to keep some distance from those they serve; isolation; long hours
- Teachers—Parent intrusion; large class sizes; low achievement students
- Nurses—Little power or control in a physician-dominated authority structure; shift work; work overload
- Social Workers—Little control over the nature and length of contacts with clients; the value placed by others on their work (work colleagues and the public)

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- Physicians—Inherent uncertainty involved in patient care; challenges of contemporary medical practice
 - Professors—“Publish or perish” pressures; increasing importance of student evaluation

Yet, clergy have much in common in terms of specific occupational stressors with, in particular, social workers such as:

- Competing values/philosophy between administrators and the social worker/clergy person
- Range of expert functions requested to be carried out
- The need to be helpful is a primary motive in the choice of profession and this need can easily lead to over involvement with patients/parishioners thereby contributing to stress
- Facing ever increasing pressures as the problems they deal with reflect the societal changes and the increasing stress of everyday life
- Little control over whom they see
- Low remuneration

Clergy in the UMC have the additional stress of itineracy—moving to a new neighborhood is a stressful, anxiety-filled experience; the other professions identified here do not have this stressor as an integral part of their occupation every three to five years or so. On the other hand, a guaranteed appointment offers an aspect of job security—which minimizes stress—not typically found in other professions.

Additionally, the link between promotional opportunities as it were and the appointment-making system is unique to United Methodist clergy. New appointments are not always greeted as a “step up”. Clergy see a lack of transparency in how appointments—and promotions, for example, to “big steeple” churches—are made.

Yet, many of the other professions do not necessarily have “career paths” that are conducive to easy and/or rapid advancement within the particular occupation. Consider:

- How many teachers who might be interested in becoming a principal have the opportunity to do so?
- How many associate professors are able to become assistant professors or full professors?
- How many social workers are promoted to more decision making social work positions?
- How many nurses are able to advance to become shift supervisor?

Response to Stressors

Remediation measures are crucial to managing occupational stress. Some of the measures suggested by the occupational stress literature include:

- Reduce excessive workload
- Reduce irregular schedules
- Ensure manager/supervisor support
- Have regular supervision
- Provide counseling
- Participate in peer support group
- Allow flexibility to juggle personal, family and spiritual needs
- Design interventions to reduce emotional stress and depression

Interventions can be grouped into 1) person-directed such as cognitive-behavioral, relaxation, and therapeutic massage; and 2) work-directed such as support from colleagues, participatory problem solving and decision making, attitude change and communication, and change in work organization.

Successful interventions that improve psychological health and levels of sickness absence use training and organizational approaches to increase participation in decision making and problem solving, increase support and feedback, and improve communication. This might be particularly instructive when interacting with SPRCs. In addition, clergy often cite the use of continuing education as a mediating factor to stress.

Implications for Clergy

It is important to understand that many of the occupational stressors for clergy are not unique to the clergy profession although the uniqueness of the UMC itineracy and appointment-making systems which can exacerbate the workplace stress for United Methodist clergy is recognized. Remediation measures suggested from other occupations can be instructive for possible UMC employment system changes associated with areas such as: employment system changes associated with areas such as:

- Supervision—supportive, open and meaningful relationship with DS
- Mentoring—regular, meaningful, effective communication between mentor and mentee; good match between mentor and mentee
- Education and preparation—include conflict management training and leadership training in seminary and continue in continuing education
- Appointment-making—better alignment of skills to work conditions
- Itineracy—for minimization of work-family conflict
- Time off/time away for recreation—life beyond church
- Strengthened participation in decision making and problem solving—particularly useful regarding SPRC and congregational matters
- Social/peer support—covenant groups, support groups, accountability partners
- Flexibility for time for spiritual nurturing and growth—Sabbath time, retreats
- Counseling/coaching—constructive to speak with others about the pressures and stresses

Gender differences can exist for psychosocial stressors; thus, this suggests that some stressors faced by clergy affect male clergy differently than female clergy although any remedies that reduce the occupational stress should benefit both genders, some interventions might be gender-focused. Recommendations and interventions should be posited with an understanding that occupational stress can stem from either and/or both Demand-Control and Effort-Reward “imbalances”. Recommendations and interventions need to address both person-directed (personal) and work-directed (systemic) remedies for improving clergy health. Clergy have characteristics of the congregational setting that can be stress-producing. Interestingly, clergy stress may not be as related to congregational size as, for example, classroom size may be for teachers and professors.

Like most professions, stress and satisfaction for clergy are significantly related to working hours, salary and benefits—but for clergy it is also strongly related to characteristics of the congregation’s functioning including:

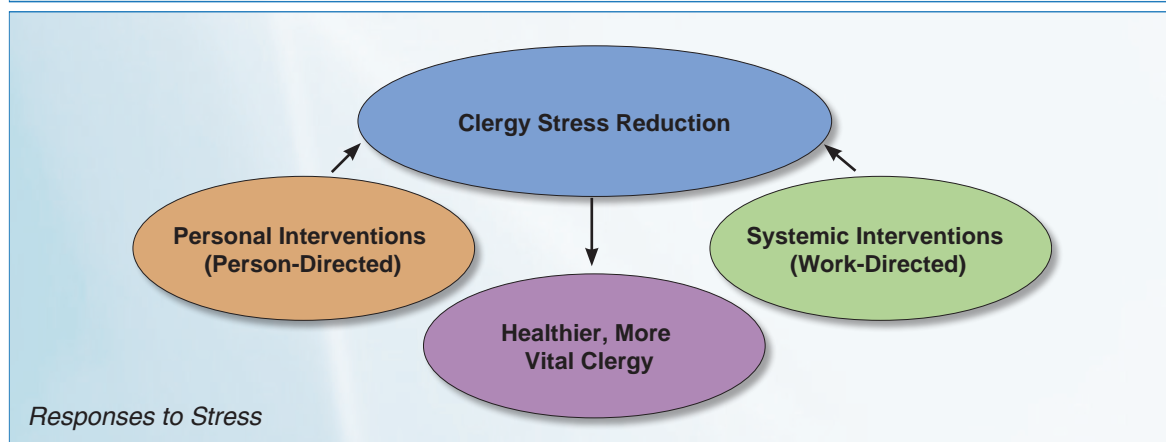
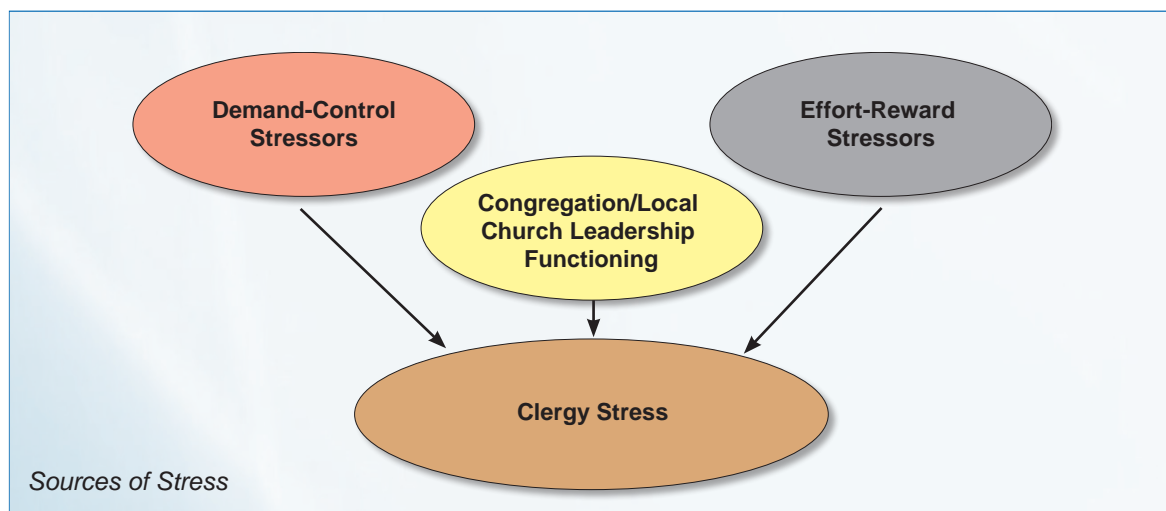
- Congregation’s morale
- The presence of conflict
- Lack of a shared understanding of the role of the pastor
- Problems with other staff or lay leaders
- Match in terms of the views (e.g., theologically and socially) of the clergyperson and parishioners

Interpersonal conflict, relationships between clergy and laity and conflict over leadership style are greater stressors for clergy than, for example, conflict over programs and buildings and even changes

in worship or music style. Thus, the match between clergy and congregations would seem to be important for minimizing clergy stress.

If, in general, clergy can exert a great deal of control over their working conditions, perhaps when interpersonal relations go amiss or when clergy and laity are in conflict over leadership styles, clergy perceive a loss of control over how they do their job, causing significant stress in a situation that had been manageable up until that point. Hence the need for training (e.g., leadership, conflict management, communications) to equip clergy to deal constructively with conflict is important because church conflict, especially interpersonal conflict, appears to be highly related to stress. Consider, too, that since clergy work largely with volunteers and staff members whose motivations often resemble those of volunteers, training in working with volunteers may also be useful.

Nearly all of a clergyperson's life is spent on-the job, either formally or informally; thus, problems in the work setting, when they do occur, have the potential to overwhelm all of life to an extent that is much greater than for other professions. All clergy need to be encouraged to take regular time away from the church, develop other interests and have friends outside the church. Church leaders (SPRC) need to be told of the importance of such activities for the long-term well-being of their clergy and their congregations and encouraged to hold their clergy accountable for having and using time off. DSs need to hold clergy accountable for taking time off. The spouse of the clergyperson needs to be part of the solution to address stress.



Sustainability Advisory Group: Final Report

Sustainability Advisory Group of The United Methodist Church; May 2009

Executive Summary/Overview

The General Board of Pension and Health Benefits' March 2009 Conference Forum with conference benefits officers (CBOs) began a conversation on the challenges in funding future pension benefits, exacerbated by the recent historic downturn in the financial markets.

A strong consensus emerged that The United Methodist Church's benefits, compensation and infrastructure in the U.S. are neither affordable nor sustainable. As an outcome of this discussion, the Sustainability Advisory Group (SAG) was formed to examine the underlying impacts of benefits, compensation and infrastructure on Church finances. This dedicated group of volunteers represented 15 conferences. Staff from the General Council on Finance and Administration (GCFA) and the General Board of Pension and Health Benefits (GBPHB) provided support to SAG and participated in the discussion.

The initial pension funding conversation expanded to a discussion about clergy benefit eligibility, guaranteed appointments and local church sustainability with the growing realization that all Church systems, including financial systems, are connected. SAG's mission was to study, share and offer observations on the UMC's infrastructure, ministries and workforce compensation with three criteria in mind: adequacy, affordability and sustainability.

SAG's efforts were guided by the UMC mission—to make disciples of Jesus Christ for the transformation of the world—and the need for the financial sustainability that it demands. SAG looked at both ministries and finances by taking a denominational perspective and a holistic approach.

SAG released an interim report to the Call to Action committee in September 2009.

This final report includes consensus opinions from SAG members, but not necessarily the views of their respective conferences or general agencies. Dissenting opinions are also provided to further illustrate the rich and diverse perspectives shared during SAG meetings and open discussions.

Three teams were formed to fulfill SAG's broad mission, focused on both short-term and long-term solutions. The three teams and their areas of focus were:

1. **Ministries, Infrastructure and Systems:** analyzing and understanding current infrastructure costs, assessing conference and local church income and expenses, and identifying areas which appeared to be out of alignment with productive and sustainable use of financial resources.
2. **Future Workforce Compensation:** salaries and benefits (particularly retirement benefits) that would be adequate, affordable and sustainable into the future.
3. **Current Compensation and Impacts:** current lifetime costs of clergy (including compensation and benefits).

To obtain a copy of the full **Sustainability Advisory Group, Final Report**, please go to:
<http://www.umc.org/sagreport2010>.

Note: This concluding Sustainability Advisory Group (SAG) report includes consensus opinions from SAG members, but not necessarily the views of their respective conferences or general agencies.

**UMC Call to Action: Vital Congregations Research Project (Towers Watson),
Findings Report for Steering Team—Highlights for Church Systems Task Force**

Center for Health, General Board of Pension and Health Benefits of The United Methodist Church;
July 2010

Drivers of Congregational Vitality

The four key drivers of vitality (shown below) are fairly consistent across different types of churches:



Of interest for potential alignment with the CSTF factors is the “pastor” driver of vitality; this encompasses:

- Leadership effectiveness and
- Length of appointment.

Leadership Attributes

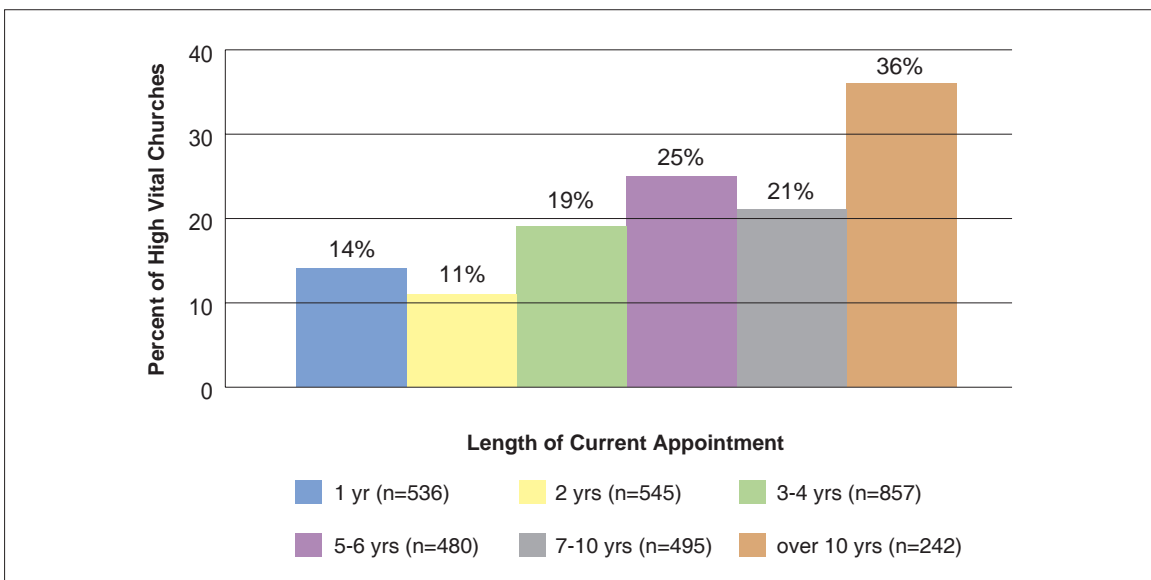
The four key leadership attributes of pastors that have stronger impact on some of the factors of vitality than others are:

- Focusing on developing, coaching and mentoring to enable laity leadership to improve performance;
- Influencing the actions and behaviors of others to accomplish changes in the local church;
- Propelling the local church to set and achieve significant goals through effective leadership; and
- Inspiring the congregation through preaching.

Length of Appointment

Length of appointment for a pastor has a strong impact on church vitality; contribution of the pastor to vitality is evident after three years.

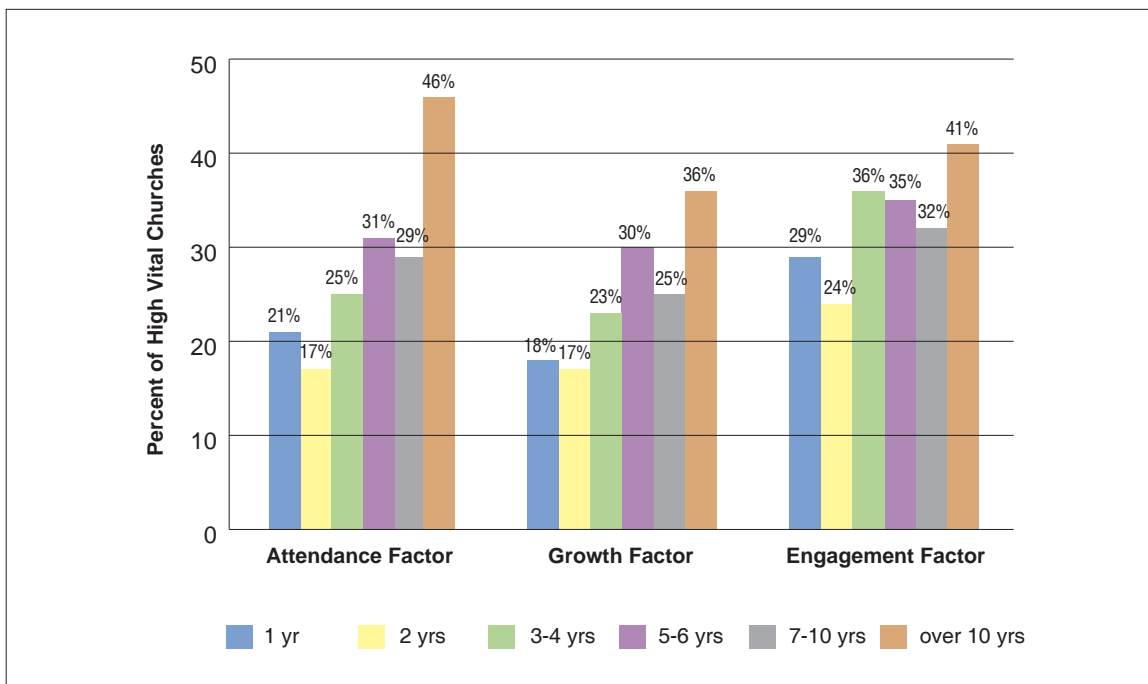
Length of Pastor's Appointment and Affect on Church Vitality



Note: Patterns and findings are consistent when pastors who had several short-term appointments are included or removed from analysis.

The pastor contribution to vitality builds quickly for the engagement part of vitality compared to the other two sub-factors (attendance and growth).

Length of Pastor's Appointment by Church Vitality Sub-Factor and Affect on Church Vitality



Additional Findings

Several factors around the pastor did NOT have a significant impact on vitality:

- Graduating from seminary or not
- Years engaged in pastoral ministry
- Whether pastoral ministry is first or second career

The four key drivers of the indicators of vitality (small groups, lay leadership, worship service, and the pastor) are consistent regardless of church size, predominant ethnicity, and jurisdiction. In addition to the four key drivers of the indicators of vitality, some nuances by church size and jurisdiction include:

- Nuances by size of church include:
 - For large churches (average worship attendance of 350 or more), being representative of the community around them and having pastors who spend more time on preaching, planning and leading worship has a strong relationship with vitality

-
- Nuances by jurisdiction include:
 - In the South Central and Southeastern jurisdictions, the length of tenure of the clergy as pastors has a strong relationship with vitality
 - In the Northeastern jurisdiction, pastors spending more time on personal devotion and worship has a strong relationship with vitality
 - In the Western jurisdiction, churches that are representative of the community around them and have a pastor that leads in the context of the community have a higher association with vitality
 - No variations by predominant ethnicity

Supporting Information

Healthy Work/Life Balance

Template for SPRC/PPRC to Provide Support and Information for Clergy Spouses and Families

To support the health and wellness of clergy spouses and families, each SPRC/PPRC should have available for its clergy a complete set of information that identifies the resources and assistance available to clergy spouses and families. Such information should be available in a variety of formats (e.g., conference website, hardcopy and electronic pamphlet). The goal of the provided information is to communicate what specific resources are available to improve the health of clergy spouses and families whether related to physical, emotional, spiritual, social or financial health. The SPRC/PPRC role must include encouraging healthy living and self-care for clergy, and calling for the committee to become familiar with and encourage use of conference and other connectional resources for the support of clergy and clergy families. This information and tools should mitigate the stress associated with acclimating to a new community. The information below should be considered as suggestive, providing examples of the types of resources that will prove vital to the health and well-being for clergy spouses and families.

Methods for Communicating with Clergy Spouses and Families; *for example:*

- ❑ Spouses and Families newsletter
- ❑ Spouses monthly meetings/gatherings
- ❑ Website with “family’s corner”
- ❑ SPRC/PPRC contact person(s) for spouses and families issues/concerns
- ❑ “Kits” (e.g., Virginia Conference’s Thrival Kit)
 - ◆ The Thrival Kit is a resource notebook provided to clergy families. The scope of the Thrival Kit is to assist clergy in the wide range of family situations: single, married, first career, and second career, as well as clergy couples and clergy spouses. The kit contains information and advice, not a set of rules.
- ❑ Monthly announcements with any information about gatherings/outings/retreats
- ❑ How to be added to mailing lists (“snail” mail and e-mail)

Committees and Individuals to Assist Spouses and Families; *for example:*

- ❑ Clergy Family Enrichment Committee—and contact information
 - ◆ Committee composed of clergy spouses (both lay and clergy) and a member of the Board of Ordained Ministry who are committed to providing support to clergy families and clergy spouses
- ❑ Clergy Spouse Support Coordinators—and contact information
 - ◆ Provides a clergy spouse support coordinator on each district. They attempt to connect clergy spouses to each other in confidential and supportive dialogue.
- ❑ Parsonage Committee—and contact information

Parsonage Information and Needs; *for example:*

- ❑ Parsonage Committee contacts
- ❑ Parsonage standards
- ❑ Guidelines for parsonage: entrance, upkeep and exit
- ❑ Resources and contacts for parsonage upkeep (e.g., appliance repair, lawn care, snow removal, carpet cleaning)
- ❑ Emergency contact(s) for parsonage issues (e.g., flooding, appliance failure)
- ❑ Insurance information (e.g., renter’s insurance) and contact(s)

Conference Resources and Supports Available to Clergy Spouses and Families; for example:

- ❑ Clergy spouse groups
- ❑ Care facilities
 - ◆ Local medical facilities/hospitals
 - ◆ Day care facilities
 - ◆ Elder care facilities
 - ◆ Camp facilities
 - ◆ Exercise facilities (e.g., YMCA/YWCA, local gyms/fitness centers)
- ❑ Counseling services on retainer with the conference or through the health plan
 - ◆ Mental health services
 - ◆ Pastoral counseling
 - ◆ Family counseling
 - ◆ Life coaching from UMEA life coaches
 - ◆ Employee assistance programs
- ❑ Legal assistance/recommended attorneys by practice area (e.g., wills, health power of attorney, divorce, taxes)
- ❑ Financial assistance (e.g., local financial seminars, Ernest & Young link from GBPHB)
- ❑ Babysitting services
- ❑ Walking programs

Children's Programs and Services; for example:

- ❑ Schools
- ❑ After school programs/activities, (e.g., dance and gymnastic programs, Boy Scouts, Girl Scouts)

Goods and Services in the Community; for example:

- ❑ Grocery stores/warehouse clubs
- ❑ Pharmacy/household items/hardware store
- ❑ Restaurants, theaters

Moving Resources; for example:

- ❑ Local moving companies
- ❑ Local "U-haul" companies
- ❑ Resources for packing supplies
- ❑ Moving "tips and tricks"

Health and Welfare Benefits Offered by the Conference; for example:

- ❑ Retirement Plans with appropriate contact information for questions
 - ◆ Clergy Retirement Security Plan (CRSP)
 - ◆ United Methodist Personal Investment Plan (UMPIP)
- ❑ Welfare Plans with appropriate contact information for questions
 - ◆ Comprehensive Protection Plan (CPP; clergy plan)
 - ◆ UMLifeOptions
 - ◆ Long-Term Care Insurance
- ❑ Health Plans with appropriate contact information for questions
- ❑ Enrollment kit for each of the above and where appropriate wallet cards

Itineracy and Appointment-Making

Retiree Health Benefits for Clergy with Service in Multiple Conferences or General Agencies

The Issue

Unlike clergy pension benefits, for which each conference is responsible for providing benefits for the years the clergyperson served in that conference, retiree health benefits typically are currently provided solely by the conference from which the clergyperson retires, based on the eligibility and cost-sharing rules of that conference. This can cause problems for clergy who serve across conference lines under ¶346.1 of *The Book of Discipline*, or outside the local church in another conference or with a general agency under ¶344, or through a transfer of membership after a long period of service in one conference to another conference. This conflict can disrupt the connectional nature of the denomination and the Church's mission by impeding (i) church planters from fully utilizing their abilities, and (ii) clergy from serving late in their careers at general agencies, as missionaries, or in other extension ministry settings.

Objective

Minimize the concerns about retiree health coverage eligibility as a barrier to extra-conference (connectional) service by (i) helping ensure access to some sort of retiree health plan where one exists, and (ii) equitably sharing financial responsibility for retiree health benefits proportionally according to years served among conferences or general agencies where service was given, based on the retiree health benefits that would have been earned from each conference or agency had all the clergyperson's service been with that conference or general agency.

Proposal

Retiree health benefits are provided through the conference from which the clergyperson retires, with funding support from any other conferences or general agencies served by the clergyperson, in proportion to the amount of time served with those conferences or agencies and in accordance with each conference's or agency's policies for funding. Clergy retired from conferences which do not sponsor group health plans for retirees could receive any health benefits support from conferences or agencies where they had served in the form of grants, stipends or contributions to Health Reimbursement Accounts (HRA), to be used toward individually-purchased plans.

Concepts

Eligibility:

Amend annual conference retiree health eligibility policies as needed such that service with other conferences or with general agencies counts the same as service within the conference from which the clergyperson is retiring (for retiree health coverage eligibility only, not for contributions toward retiree health benefits).

- For conferences where retiree health eligibility is based on participation in the conference health plan, include participation in other conferences' or in general agencies' health plans.
- For conferences where retiree health eligibility is based on years of service or years with pension benefits from the conference, include service with or service with pension benefits from other conferences or general agencies.

Funding, Cost Sharing:

Each conference or agency where a clergyperson served contributes toward the clergyperson's retiree health benefits at the rate the conference or agency would have contributed had the clergyperson retired from that conference. Basic principles in cost sharing among multiple conferences are:

- A conference's contribution to a retiree's health coverage for the years the retiree was in that conference's health plan (or served in that conference) is the same as it would be *for those years* if the retiree had remained in and retired from that conference. Conferences which provide no funding for retiree health benefits would have no contributions.
- Each conference determines its contribution toward a retiree's health benefits based on its records of the retiree's participation in the conference's health plan (or service in the conference) and its current level of support for retiree health benefits generally.
- If the combined contribution from all conferences exceeds 100% of the retiree's premium, conference contributions are reduced proportionally 100% of the premium. (This scenario is not likely, but possible, if someone had long service in each of two conferences that both had generous funding of retiree health benefits).
- The conference providing the retiree health coverage—the one from which the clergyperson retired—collects retiree health support for the individual(s) from other conferences through a mutually agreeable process. This may also help reduce the accounting liability [through a counterbalancing asset of expected payments from the other conference(s)] for the conference providing the coverage.
- Clergy retiring from conferences which offer no retiree health plan may receive Health Reimbursement Account (HRA) contributions from each conference with which they had service qualifying for funding of retiree health benefits, to go toward the cost of whatever health coverage their conference may provide or that the persons may acquire individually. The HRA contributions would be based solely upon each conference's policies regarding stipends, subsidies or other fixed-dollar contributions toward retiree health coverage.

The above points refer to "conferences" for simplicity and brevity, but the principles are intended to apply to general agencies as well as conferences.

Following are examples of two alternative ways these concepts might be applied, based on retiree health provisions of Conferences A and B. Alternative 1) is more generous for the retiree than Alternative 2), in which the cost for the conference is lower.

- a) Conference A requires 10 years participation in its group health plan to be eligible for retiree health coverage. With 20+ years participation in the conference plan, the conference contributes 70% of the premium for Medicare-eligible participants, currently \$300/month for a Medicare supplement with pharmacy benefits. The conference contribution is reduced by 1/10 for each year less than 20, such that a clergyperson retiring with only 10 years in the conference health plan is responsible for the entire premium.
- b) Conference B requires 15 years participation in its group health plan to be eligible for coverage in retirement and provides funding toward a \$400/month Medicare supplement according to the following schedule of years of participation in the conference health plan:
 - 15 – 19 years: none
 - 20 – 24 years: 10% of total premium
 - 25 – 30 years: 20%
 - 31 – 34 years: 30%
 - 35 – 39 years: 40%
 - 40+ years: 50%

Alternative 1)

Reverend Smith retires from Conference A with 39 years of service, 26 years (or 2/3 of Smith's service) in Conference B's health plan and 13 (1/3 of service) years in Conference A's plan. Conference A contributes 1/3 of 70%, or 23.33%, of \$300/month and Conference B contributes 2/3 of 40%, or 26.67%, of \$400/month toward Smith's retiree health coverage. This calculation is based on prorating for each conference the benefit the clergyperson would have earned if all service had been in that conference.

Alternative 2)

Reverend Jones retires from Conference A with 26 years in Conference B's health plan and 13 years in Conference A's plan. Conference A contributes 3/10 of 70%, or 21%, of \$300/month and Conference B contributes 20% of \$400/month toward Smith's retiree health coverage. This calculation bases eligibility on total service but the benefit from each conference only on years in that conference.

Required Actions

This proposal requires amending *The Book of Discipline*. ¶639.6 currently requires that annual conferences currently requires that annual conferences support clergy access to health care plans in retirement (with funding remaining at the conferences' discretion) and ¶1506.26 currently requires that annual conferences reduce their eligibility requirements for retiree health coverage to written form and publish the policy widely to ensure clergy considering extra-conference appointments are aware of the ramifications with respect to health benefits in both locales. ¶1506.26 will be amended substantially (and carefully to preserve conference flexibility and autonomy) to implement the proposal explained above. Alternatively, ¶1506.26 will be deleted, and a new paragraph added to ¶639 to implement this proposal in a similar manner, with consideration of conferences' need for autonomy and flexibility with respect to these benefits.

Exiting Ordained Ministry

Voluntary Transition Program

*“To every thing there is a season,
and a time to every purpose under the heaven.”*

Ecclesiastes 3

In reviewing the employment systems of the Church, the Church Systems Task Force determined that there seems to be no way for clergy, who are in a covenantal relationship with the Church, to make a graceful exit. Unlike employees in other situations, the nature of the covenant, the call to ministry, the impact on their very identity, and the fact that housing—all of a clergy’s worldly support may be provided in relationship to his or her ministry in the Church may deter individuals who no longer feel the call or who are literally beginning to feel trapped in ministry from exiting ministry. Unresolved deep-seated dissatisfaction can actually take the form of illnesses, even disability or situations where clergy ‘act out’ engaging in behaviors that result in their being ‘forced out.’ Research identifying some of these issues is summarized below, as well as a recommended transition program to address this systemic issue.”

Background

- Some clergy note that pastors who are unfit for ministry do not have a graceful way to exit the system (In-Depth Interviews Report, p. 7)
- Some clergy note that certain pastors are chronically unhappy with their appointments or simply unfit for ministry, but have no assistance or graceful way to exit the system.
 - “I think again, the Board of Ordained Ministry may be trying to defend those who think ministry is a great way to make a living, or a great pension program, and [are not] really called.” (In-Depth Interviews Report, p. 29)
- The UMC could institute a denomination-wide occupational placement program for clergy wishing to exit the ministry.
 - “When I was on the Board of Ministry, when a pastor felt that they needed to change occupations and needed to get out of that, we had a fund and we sent them up to Chicago, to an agency, to help them retool and help them find someplace they could go [where] they would not just be dumped and have no place to go or not know what they could do.” (In-Depth Interviews Report, p. 31)
- If no suitable match is found after multiple appointments, consider moving individual clergy into other roles within the Church, or move them out of the system. (Summary Research Report on Clergy Health Factors, p. 16)

Trigger points: clergyperson, supervisory leaders (e.g., district superintendent (DS), bishop)—but ultimately, since this is a voluntary separation, only the clergyperson can make the final decision.

The Church Systems Task Force Recommendation

Establish a denominational, standardized voluntary transition package, including career counseling services for deacons and elders that choose to withdraw from ministry for a grace-filled exit.

The Voluntary Transition Program

The United Methodist Church will provide transitional benefits to deacons and elders in full connection and in good standing who have served a minimum of five years and are not within two years of eligibility for retirement benefits under paragraph 358.2(b) or (c). In order for the clergy person to receive transitional benefits, the clergy person must:

- consult with conference leadership: i.e., Board of Ordained Ministry, the DS and the bishop. The DS and bishop must agree that a transition program is appropriate for benefits to be paid.
- withdraw from the Ordained Ministerial Office according to ¶360.2.
- surrender credentials (thereby severing the relationship with their respective annual conference).
- sign the Voluntary Transition Program agreement.

1. Financial Allowance

Clergy eligible for transitional benefits under this program will be paid through the last day worked. In addition, the clergy person will be paid a benefit in accordance with the following formula:

Length of Employment

At least five (5) years of service but the clergy person is not within two (2) years of eligibility for retirement benefits under paragraph 358.2(b) or (c).

Transition Benefits

Two (2) weeks of pay for each full year of continuous service up to a maximum of twenty-six (26) weeks based on then current compensation (salary plus housing).

Transition benefits may be paid in a single lump-sum payment to the clergy person at the beginning of the transition period. Tax withholding and reporting necessary through a *Form W-2* or *Form 1099* will be done by the plan administrator or plan sponsor.

2. Health and Life Insurance Continuation

Clergy separating from service are generally eligible for continuation coverage (COBRA-like coverage) under the annual conference's group health plan; usually for a limited duration up to 18 months. Typically the separated clergy person must pay the full cost of this coverage out of his or her own pocket, meaning that he or she pays the "employee" portion plus the portion that the annual conference previously paid during active service. Under the Voluntary Transition Program, the conference will pay the "employer portion" of the premium for clergy eligible for this program for a number of weeks equal to the number of weeks for which the clergy person is eligible for the transition benefits (rounded up to the nearest whole month). If the annual conference plan does not accommodate such continuation coverage, then the conference will provide a health insurance stipend toward individual private health insurance that is equal to the lesser of the former annual conference portion or the cost of the individual coverage. Clergy will remain eligible for continuation coverage after the transition period in accordance with, and as long as permitted by, the plan or policy in which they were enrolled at their own expense.

In addition, the clergyperson, if covered by the Comprehensive Protection Plan (CPP) while in active ministry, will remain eligible for a death benefit from CPP for the number of weeks equal to the number of weeks for which a clergyperson is eligible for transition benefits (rounded up to the next nearest whole month).

3. Career Counseling—Outplacement Assistance

The United Methodist Church will provide up to 90 days of certain outplacement services for clergy who have signed the Voluntary Transition Program agreement, provided that the services are requested within the transitional period and the outplacement service provider and the services to be provided are approved by the administrator in advance. If the clergyperson does not use this benefit within 12 months, then under no circumstances will the value of the assistance benefit be paid to the clergyperson or added to the transition benefit.

Moving Expenses

The conference will be responsible for providing the Voluntary Transition Program recipient reimbursement of reasonable final moving expenses in accordance with its own practices.

Administration

The General Board of Pension and Health Benefits will be the administrator for the Voluntary Transition Program. The conference will be the plan sponsor.

GBPHB roles/responsibilities will include:

- contractual agreement with outplacement service provider;
- distribution of benefits;
- tax reporting [*Form 1099* or *W2*];
- distribution of benefits package election forms to participant; and
- customer service support to participants and conferences.

Conference roles/responsibilities will include:

- consultation between clergyperson and leadership;
- execution and oversight of the Voluntary Transition Program agreement to be signed by the bishop;
- annual conference vote to confirm Withdrawal from Ordained Ministerial Office;
- oversight of the clergyperson's surrender of credentials; and
- oversight of appropriate paperwork to administrator.

Sunset Provisions

The Voluntary Transition Program will be in effect from 1/1/2013 through 12/31/2020. The Program will cease to exist on 1/1/2021.

Disciplinary / Benefits Plan Considerations

The Voluntary Transition Program will be incorporated into the Comprehensive Protection Plan as a new Article 6.

Financial Cost Considerations

The Comprehensive Protection Plan will include the Voluntary Transition Program as a component of the benefits offered.

The annual conference will be responsible for the continuation of health insurance and appropriate final moving expenses.

Listening Sessions

Listening Sessions Schedule

Location	Audience	Date
Wisconsin	Lay/Clergy	August 4, 2010
Desert Southwest/Arizona	Lay/Clergy	August 12, 2010
Ohio	Lay/Clergy	August 17, 2010
Virginia	Cabinet—Lay/Clergy	August 17, 2010
Georgia	Lay/Clergy	August 5, 2010
Mississippi	Lay/Clergy	July 29, 2010
National Federation of Asian-American United Methodists, San Jose, CA	United Methodist Leadership	July 31, 2010
Black Clergy Women Conference, Nashville, TN	Clergy Women	September 6, 2010
Treasurer's Meeting, Simpsonwood Retreat Center, Norcross, GA	Annual Conference Treasurers	September 15, 2010
BOM Mid-Quad Gathering, Denver, CO	Board of Ordained Ministry Registrars and Chairs	September 20, 2010
BOM Mid-Quad Gathering, Baltimore, MD	Board of Ordained Ministry Registrars and Chairs	September 23, 2010
GBHEM Study of Ministry Commission, Nashville, TN	Study Commission Members	October 4, 2010
GCRR Board Meeting, Scranton, PA	Board Members	October 7, 2010
GBHEM Board Meeting, Nashville, TN	Board Members	October 8, 2010
Black Methodists for Church Renewal—SCJ Annual Meeting: New Orleans, LA	Jurisdictional Leadership, Clergy	October 7, 2010
Association of United Methodist Theological Schools Meeting, Nashville, TN	Theological School Presidents	October 18, 2010
AUMCPBO Meeting, Rochester, NY	CBOs /Treasurers /Benefits Administrators	October 28, 2010
GBPHB Board Meeting, Tampa, FL	Board Members	November 13, 2010
BOM Staff Network, Nashville, TN	Board of Ordained Ministry Staff Leadership	November 17, 2010
Wesley Table, Dubuque Theological Seminary	Faculty and Students	November 17, 2010

Listening Sessions Learnings

To obtain a copy of attendee comments from the listening sessions organized by the areas of the General Conference 2008 petition—entering ministry, guidelines for healthy work/life balance, itineracy and appointment-making, supervisory systems and exiting ordained ministry—please e-mail your request to: umc-centerforhealthinfo@gbophb.org.



GENERAL BOARD OF PENSION AND HEALTH BENEFITS
OF THE UNITED METHODIST CHURCH

Caring For Those Who Serve