CLERGY SPOUSE WELL-BEING

by

Scottie Jane Stamper

A dissertation submitted to the faculty of The University of North Carolina at Charlotte in partial fulfillment of the requirements for the degree of Doctor of Education in Educational Leadership

Charlotte

2016

Ap	proved by:
Dr.	Claudia Flowers
Dr.	Jae Hoon Lim
Dr.	Mark D'Amico
— Dr	Susan Furr

©2016 Scottie Jane Stamper ALL RIGHTS RESERVED

ABSTRACT

SCOTTIE JANE STAMPER. Clergy spouse wellness. (Under the direction of DR. CLAUDIA FLOWERS)

The needs of clergy members and clergy family members present researchers with a unique and complex set of variables. While an ever-increasing body of research related to work-related stress and high rates of chronic disease and depression among clergy is available, clergy spouses are often excluded from the studies. Unlike other professions, the work of clergy impacts the whole family, for better or worse. Through qualitative thematic analysis, this study explores the well-being of clergy spouses through the lens of McLeroy's Ecological Model for Health Promotion, exploring intrapersonal, interpersonal, institutional, community, and policy factors. Two research questions were posed: "What is the current state of clergy spouse well-being?" and "What can be done to nurture the well-being of clergy spouses?"

Two forms of qualitative data were collected. Personal interviews were conducted with six spouses of active United Methodist clergy. Also, previously collected focus group transcripts from archival data were obtained from Duke University Divinity School's Clergy Health Initiative. Based on the analysis of data, clergy spouses report feelings of isolation and resentment. Expectations for clergy spouses by church congregations vary, but are still prominent in many churches, with some clergy spouses feeling like unpaid staff members. Participants also report the United Methodist Church's denominational system of itinerancy causes stress for clergy spouses. Although clergy spouses experience difficulties, the participants who were interviewed emphasized a strong commitment to partner with their spouse in ministerial endeavors. This study also

explores participants' suggestions for solutions to stress-inducing factors related to the church, both locally and denominationally.

DEDICATION

Mom & Dad - My next great endeavor is to figure out how to express my love and gratitude to you in a way that matches the overwhelming feelings of love I have for you.

Jeanna and Avery - You're the greatest siblings on the planet. Thank you for your gifts of encouragement and humor.

Rick and Lisa - You're the greatest siblings-in-law on the planet.

Scott and Katie - Thank you for allowing me to be the best aunt I can be. LYMLYMLYI.

DAC (Bo, Woody, Randy, Angela, Brian) - You are chosen.

ACKNOWLEDGMENTS

I would like to thank Dr. Claudia Flowers for her incredible support and encouragement throughout the process of proposal, development, and completion of this dissertation.

The members of my dissertation committee, Dr. Mark D'Amico, Dr. Jae Hoon Lim, and Dr. Susan Furr, have been incredibly gracious, supportive, and thorough . . . a doctoral candidate's "dream team".

Thank you, too, to my fellow doctoral colleagues, for the joy of sharing in this great adventure with you.

I am also grateful for the support provided by the Graduate Assistant Support Plan (GASP) and the Phillip Morris Educational Leadership Doctoral Fellowship.

TABLE OF CONTENTS

CHAPTER I: INTRODUCTION	1
CHAPTER II: LITERATURE REVIEW	12
CHAPTER III: RESEARCH DESIGN AND METHODOLOGY	25
CHAPTER IV: FINDINGS	39
CHAPTER V: DISCUSSION AND RECOMMENDATIONS	76
REFERENCES	86
APPENDIX A: CONFIDENTIALITY POLICY	01

CHAPTER I: INTRODUCTION

Overview

Researchers have sought to explain the relationship between work-related stress and well-being. The needs of clergy members and their families present researchers with a unique and complex set of variables. While a large body of research related to the stress and working environment of the clergy person is available, clergy spouses and family members are often excluded from the studies. Unlike other professions, the work demands of clergy impact the whole family.

In the study of clergy spouse well-being, it is vital to provide a framework of wellness or well-being. Well-being is a holistic, multi-dimensional understanding of healthy humans. Myers, Luecht, and Sweeney (2004) described a four-factor model of wellness to include cognitive-emotional wellness, physical wellness, spiritual wellness, and relational wellness. The cognitive-emotional dimension encompasses thoughts, feelings, and attitudes of the individual. The dimension of physical wellness includes how individuals attend to exercise and nutrition to keep the body strong and healthy. Spiritual wellness refers to a person's value and belief system. The dimension of relational wellness encompasses an individual's social network.

By exploring the work of clergy, the impact on clergy spouses and families is better understood. The United States (US) Department of Labor (2012) estimated that

there were nearly 239,600 clergy persons representing all faith groups in 2012, with a projected growth rate of 10% by 2022. The work of clergy is multifaceted and broad inscope. At least six distinct roles of clergy have been identified (Blizzard, 1985). In the role of "ritualist", clergy administer sacraments such as baptism and communion, as well as officiate weddings and funerals. As "pastor", clergy interact with individuals as spiritual counselor, including offering encouragement and comfort to sick, imprisoned, or bereaved congregants. The third role of clergy is "preacher", which includes providing communication, oral and written, related to spiritual guidance and inspiration. Closely related to "preacher" is the role of "teacher", in which a broad scope of educational programs, formal and informal, related to faith and denominational efforts are managed. As "organizer", clergy might interact with other community groups for the promotion of social justice or lead denominational activities. Finally, the sixth role is "administrator", as clergy are responsible for management of budget, church staff, committees, and buildings. Any combination of these responsibilities often occurs within the same day, creating a fragmented and busy lifestyle. According to Frame and Shehan (1994), the criteria for clergy success includes increasing congregational membership, raising funds to build and maintain church programming, and "maintaining a favorable image." A pastor, then, is deemed "successful" if able to meet the high standards set for the pastor, the pastor's congregation, and the pastor's family. In a study related to denominational hierarchy and clergy satisfaction, Rugenstein (2005) relayed the story of a pastor who reported difficulty in reaching the denominational standards without congregational support. Asked to look at his palms, the pastor was then asked to display the nail prints in

his hands by denominational representatives, referring to the nail prints mentioned in the biblical stories of Jesus' crucifixion.

Those who are considered clergy are people who feel a unique call from God to their vocation. In addition to the personal desire to serve God through ministry, a larger faith community affirms the clergy person to serve as spiritual leader. It is unlike other professions in that people of varying background affirm members of the clergy. Generational, racial, socioeconomic, and occupational diversity often exist within one congregational unit, with the common component of belief system. One further complication for clergy is the expectation of matching theological and ideological values within the congregational body with which the clergy is affiliated. Additionally, members of the congregation often view the behavior of clergy spouses and family members as an extension of the clergy.

The stress-related physical health effects of clergy are of particular interest for denominational entities. A 2001 study by the Evangelical Lutheran Church of America found that 68% of survey participants were overweight or obese, compared to 61% of the American population (Halaas, 2002). In a more recent study of United Methodist clergy in North Carolina, Proeschold-Bell and LeGrand (2010) found that in addition to a higher obesity rate (11% higher), clergy who participated in the survey also had higher rates of diabetes, arthritis, high blood pressure, and asthma than compared to the larger general population.

The organizational structure of the United Methodist Church is subject to its own set of stressors for clergy and clergy family. Since its inception, and based on the ideology of its founders, brothers John and Charles Wesley, the United Methodist clergy

have been itinerant. While some UMC clergy appointments last 10 years or longer, pastorates of four years are common. Within the UMC, "local pastors", lay ministers licensed by the UMC, are appointed to 31% of North Carolina UMC congregations.

Local pastors tend to itinerate less frequently and less widely than their ordained and masters-level counterparts, called elders. Elders are guaranteed a full-time clergy appointment every year, including healthcare and housing benefits. As local pastors do not receive the same guarantee, many hold other jobs and tend to be longtime residents of the communities they serve. United Methodist clergy and their families have little to no say in relocation decisions (Morris & Blanton, 1995; Murphy-Geiss, 2011).

In addition to the stress related to the clergy's scope of work is the inclusion of the highly visible family of the clergy person. The high expectations of congregants for clergy members are often equally expected of clergy family members. Lee and Iverson-Gilbert (2003) have addressed four clergy family stressors: personal criticism, presumptive expectations, family criticism, and boundary ambiguity. Other clergy spouse and family stressors include a "fishbowl" existence, inadequate finances, loss of control related to the personal living environment, routine absence of spouse, and lack of spiritual care and personal growth (Valeriano, 1981).

A significant majority of Protestant clergy is married (94%) and the overwhelming majority of clergy are men (85%) (Hileman, 2008). The unpaid, but demanding, role a spouse serves as a type of professional assistant, was first conceptualized as part of a 'two-person single career' by Papanek in 1973 (Murphy-Geiss, 2011).

Considering the uniqueness of the clergy family and the ever-increasing research related to clergy health and wellness, this research study relates primarily to the health and well-being of the spouses of clergy.

Purpose of the Research

Clergy spouses, who are still mostly wives, are often considered an integral part of the clergy's ministry. While the stressors facing clergy spouses are numerous, studies have indicated many are coping well with the unique challenges (LeGrand, S., Proeschold-Bell, James, & Wallace, 2013; McMinn et al., 2005;). Coping, however, often takes the form of intrapersonal self-care, perhaps perpetuating the isolation of the individual (McMinn et al., 2005).

For this study, two sources of data were incorporated in order to examine the current state of clergy spouse well-being. First, six spouses of active United Methodist clergy were interviewed, focusing on the current state of their personal well-being and also offering suggestions for what can be done to nurture the well-being of clergy spouses. Second, the question was asked to United Methodist clergy participating in eleven focus groups held throughout North Carolina, "What can be done to nurture the health of clergy spouses?" While the second research question was posed, verbatim, to the previously collected focus group data, the groups' responses also addressed the current state of clergy spouse well-being. Both sources of data, therefore, offered responses applicable to the two research questions.

Statement of the problem

Being married to a person in the profession of ministry is complicated. The expectations of clergy by congregations, community members, and the institution of the

church, both locally and denominationally are high. The family is impacted by financial strain, lack of privacy, frequent relocations, the clergyperson being available 24 hours daily, and the clergy person's service to others.

Research questions

This study asks the questions, "What is the current state of clergy spouse well-being?" and "What can be done to nurture the health of clergy spouses?" Respondents were comprised of six individual interviews with spouses of active United Methodist clergy in North Carolina and from 11 previously collected, archival data of focus groups comprised of North Carolina United Methodist clergy. The research questions were asked in relation to other inquiries focused on the health and well-being of clergy.

Significance and Need for the Study

Increasing attention is being given by Protestant denominations to the stresses affecting the lives of clergy, clergy spouses, and clergy families. An ever-increasing body of research is available related to the health and well-being of clergy. Likewise, research related to the mental and emotional health of clergy families is available. However, very little research related to clergy spouses is available. This study not only created awareness about the well-being of clergy spouses, but has implications for spouses of other high-stress, high profile professions (i.e. police officers, teachers, politicians). Furthermore, United Methodist bishops, district superintendents, staff-parish committee members, and members of congregational groups may benefit from this study as they assist clergy and clergy spouses to achieve a sense of well-being and work/life balance. Understanding the health and well-being of clergy spouses is necessary in developing interventions tailored to address stress, boundaries, and self-identity.

Plan for Study

The plan for this study was two-fold. First, personal interviews with spouses of active United Methodist clergy in North Carolina was coded and analyzed (n = 6). Questions designed for the personal interviews related specifically to the six participants' current state of well-being, as well as to seek input as to how to nurture the well-being of clergy spouses. Secondly, the plan of study included the analysis of archival data received from the Clergy Health Initiative, a program designed to analyze and provide wellness interventions to enrolled United Methodist pastors in North Carolina (n = 1295). Specifically, the archived data includes the transcriptions of eleven focus groups, held throughout the state of North Carolina. The questions of focus in this study are, "What is the current state of clergy spouse well-being?" and "What can be done to nurture the health of clergy spouses?"

The transcripts of the personal interviews, as well as the focus groups were coded and analyzed based on thematic interpretation. Five specific themes, based on McLeroy's Ecological Model for Health Promotion, will be included in the study: intrapersonal, interpersonal, institutional, community, and policy.

Intrapersonal factors include self-concept. An individual's knowledge, attitudes, and behaviors will be considered in exploring the intrapersonal factors. Interpersonal factors include an individual's social network, including familial, and friendship relationships. Institutional factors include the exploration of formal and informal rules and regulations within the local United Methodist congregation. Community factors affecting clergy spouses include informal networks within defined boundaries. For this study, an example of a community factor might include the neighborhood in which the

community of faith is situated and/or the neighborhood in which the clergy family resides, as well as opportunities for employment for the clergy spouse. Finally, public policy includes the exploration of district, conference, and national guidelines and policies of the larger United Methodist denomination and the impact on clergy and clergy spouses.

Limitations/Delimitations/Assumptions

The limitations of this study are related specifically to the chosen population. Several studies are available exploring the well-being of clergy and clergy families. Very little research has been published related to the well-being of clergy spouses. This study examined clergy spouses in one specific denomination, as opposed to a variety of denominations or religious groups. A larger study including spouses of clergy from other denominations and religious groups would offer a greater diversity in the experiences of clergy spouses. The subjects surveyed in this study are from the two annual conferences in North Carolina, limiting the study geographically and denominationally.

Definitions and Key Terms

Annual Conference. Annual conference has three separate meanings within the context of the United Methodist Church. As a regional body, the annual conference may cover the state, only part of a state, or several states. The United States has 57 annual conferences, two of which are in North Carolina. As an organizational body, the annual conference has a central office, staffed by the bishop and professional staff to coordinate conference-wide activities and communication. Annual conference sessions are the annual gathering of an equal number of clergy and lay members to conduct the business

of the conference, usually lasting four days. The bishop presides over the annual conference session. (UMC.org)

Appointment. An appointment is the field of service assigned to clergy by the bishop.

Apportionment. An apportionment is the share of monies paid by a local congregation or annual conference to support regional (annual conference), national, and international mission efforts.

Bishop. The bishop is elected to this office, and serves as the general superintendent of the annual conference. Responsibilities include seeing that the rules and regulations developed by the General Conference are carried out within the bishop's respective annual conference.

Charge. One or more local congregations, governed by the charge conference, and to which a clergy person is appointed. In rural areas, a four-point charge is common, meaning the clergy person serves four separate congregations.

Clergy. Within the context of the UMC, clergy are individuals who are commissioned as ministers, deacons, elders, and local pastors under appointment. Clergy are annual conference members who are commissioned, ordained, or licensed.

District. A district is a group of congregations within a specific region, supervised by the district superintendent. Among the two annual conferences in North Carolina, there are 15 districts.

District Superintendent. The district superintendent is appointed by the bishop to serve as the superintendent over a regional body of congregations. A primary

responsibility for district superintendents is assisting the bishop in making clergy appointment assignments.

Elder. In the United Methodist Church, an elder is a minister who has completed formal academic and systemic preparation for the ministry. An elder is synonymous with minister and clergy. The Bishop guarantees UMC elders an appointment.

General Conference. The General Conference is the highest legislative body of the United Methodist Church. An equal number of clergy and lay delegates make up the voting membership of the General Conference, which occurs every four years.

Itinerancy, or Itinerancy, is the system by which the United Methodist Church appoints pastors to congregations. Pastors are obligated to serve where appointed. The itinerancy system dates back to the beginnings of Methodism, with John Wesley's belief that pastors should not remain with one congregation for a significant amount of time.

Local Pastor. Local pastors are licensed pastors who are supervised by a fully ordained and connected pastor. The Bishop does not guarantee local pastors, unlike elders, an appointment.

Methodist, Methodism. Methodist, and Methodism, as well as Wesleyan, are terms used to describe the movement associated with John Wesley and his brother, Charles. While studying at Oxford, John and Charles Wesley, along with others, developed a highly structured approach to worship, prayer, and study. Students outside the group first used the term "Methodist" derogatorily.

Parsonage. The parsonage, owned by the local congregation, or charge, is the residence provided for the pastor. The parsonage is often located on the same property the church occupies.

Pastor-Parish Relations Committee. The Pastor-Parish Relations Committee (PPRC) is essentially the local congregation's personnel committee. The PPRC confers with the Bishop or the District Superintendent regarding the appointment of the pastor. The PPRC has a rotating membership, with members usually serving between two and four years. Also called the Staff-Parish Relations Committee (SPRC).

United Methodist Church. The United Methodist Church is a denomination formed by the union of the Methodist Church and The Evangelical United Brethren Church in 1968.

Wesley, John. John Wesley (1703 – 1791) is considered the founder of Methodism.

Summary

The limited study of clergy spouse well-being serves as the basis for this study. Through the framework of McLeroy's Ecological Model for Health Promotion, five specific levels of clergy spouse wellness is explored. Through qualitative analysis, this study of North Carolina United Methodist clergy spouses allows for a unique perspective of well-being as it relates to the clergy profession.

CHAPTER II: LITERATURE REVIEW

This chapter begins with a brief description of literature related to stress and burnout from helping professions. The chapter continues with a description of the clergy vocation within the United Methodist Church (UMC) denominational system, including previous research related to stressors and demands of the vocation of clergy. Following the description of the denominational system, a literature review of clergy family dynamics and structure will further allow for a fuller contextual review of literature related to the third section, the well-being of clergy spouses. The final section of the chapter will describe research related to the five themes of McLeroy's Ecological Model for Health Promotion, the overlying premise of this study on clergy spouse well-being.

Clergy Vocation

Job description

The job descriptions of clergy vary from denomination to denomination and from congregation to congregation. Typically, clergy function as a spiritual leader. However, many other job functions are required to maintain and build a church and/or congregation. In an extensive study, Blizzard (1985) found several three distinct categories of clergy roles: traditional, neo-traditional, and contemporary.

Traditional roles include preacher, priest (sacramental role), and teacher. Blizzard (1985) contends the traditional roles are oriented towards ideas, with the purpose of

communicating ideas through spoken words and symbolic behaviors or rituals. The role of pastor is considered to be a neo-traditional role. In a traditional sense, the pastor visits the sick and infirm, but in a more contemporary context, the pastoral role demands a deeper understanding of psychology and counseling techniques. Finally, the contemporary roles include those of administrator and organizer. Financial administration and fund-raising, physical plant operations, and church/community marketing are tasks associated with the administrative and organizing portion of the clergy job description.

Kuhne and Donaldson (1995) separated the roles of clergy into the four categories of professional, decisional, interpersonal, and informational. The professional role incorporates caregiving, mentoring, preaching, and teaching. Fund-raising, financial administration, and conflict resolution are considered decisional tasks. The interpersonal role highlights the leadership function of clergy, and the informational role focuses on the ability to communicate vital information to a congregation or larger community.

The sacred work of clergy and its impact on clergy wellness can be viewed from two distinct perspectives. Given that clergy understand their role as valuable and critical to the growth and harmony of a community, a member of the clergy might seek out the opinions and feedback from supervisors, thereby investing in their career growth (Proeschold-Bell, Miles, Toth, Adams, Smith, & Toole, 2013). For other clergy, the sacredness of the work may cause them to behave such that the commitment of living out God's call is more important than self-care (i.e., taking vacations, working reasonable hours, spending time with family) (Proeschold-Bell et al., 2013).

The United Methodist Church

Rugenstein (2005) recognized two levels of expectations in a study related to denominational hierarchy. Not only does the local congregation have expectations of their assigned clergy, but the organized church leadership places demands upon clergy as well. The United Methodist Church (UMC) operates under a well-defined structure.

Although clergy serve individual congregations, the UMC Annual Conference employs them. There are 63 Annual Conferences in the United States. The Annual Conference of North Carolina United Methodist Church (NCUMC) consists of two smaller conferences—the North Carolina conference (NCCUMC) and the Western North Carolina (WNCCUMC) conference, each led by a Bishop. The conferences are further divided into districts, each led by a District Superintendent. The District Superintendents report to the Bishop. Pastors, appointed by the Bishop, report directly to their District Superintendent. Bishops, District Superintendents, and pastors were considered clergy for the purposes of the study. Clergy appointments generally last three to five years depending upon the needs of the congregation, as well as the needs of the pastor.

Several categories of pastoral ordination must also be considered. Elders are pastors who have completed a graduate seminary degree, the UMC's examination process for ordination, and a probationary period. Local pastors may have no, or incomplete, seminary training and are licensed, rather than ordained. While elders are guaranteed an appointment with full benefits, local pastors serve from year-to-year, based on the needs of the conference. Elders and/or local pastors may serve anywhere from one to five congregations, depending on congregation size and location. Within the context of the local congregation, the elder and local pastor carry similar work-related responsibilities, including worship planning, congregational administration, and providing the sacraments.

Income

Compensation for professional occupations is often based on experience, education, market trends, and performance. However, clergy salary is usually determined by a congregation's operating budget, traditions, philosophy, and vision of lay leadership. The average clergy pay ranks in the lower 25% (325 of 432 professional occupations surveyed) of professional income (Morris & Blanton, 1994). Financial stress is a common theme among studies related to clergy and clergy spouses (Morris & Blanton, 1994; Morris & Blanton, 1998; Van Dyke Platt & Moss, 2010). The median base salary for full-time clergy in the two annual conferences of the UMC in North Carolina is \$45,000 annually (Proeschold-Bell, LeGrand, James, Wallace, Adams, & Toole, 2009).

In the UMC system, the Annual Conference not only determines clergy appointments, but indirectly determines clergy salary. Bishops use a salary scale in the appointment process (Proeschold-Bell et al., 2009). Clergy salaries are public knowledge of congregations, as well as clergy peers. Due to earnings differences between the early-career or small church clergy and late-career or large church, stress and resentment have been noted by UMC clergy (Proeschold-Bell et al., 2009).

Effects on health

The research related to physical health statistics for clergy is somewhat limited. In a 2001 survey of Evangelical Lutheran clergy, 68% of the participants were overweight or obese, compared to 61% of Americans (Halaas, 2002).

Halaas (2002) also reports high depression rates among Evangelical Lutheran clergy, with 16% of male clergy and 24% of female clergy reporting a diagnosis of depression, compared to 6% of men in the U.S. and 12% of women in the U.S. within a

period of one year. In a more recent study, researchers from Duke University found that clergy of the North Carolina United Methodist Church had higher rates of obesity, diabetes, high blood pressure, arthritis, and asthma than other North Carolinians (Proeschold-Bell & LeGrand, 2010). The study showed the clergy obesity rate to be 11 percentage points higher than non-clergy North Carolinians (Proeschold-Bell & LeGrand, 2010).

Clergy stress and burnout

A recent study showed high depression rates (11%) and high anxiety among North Carolina United Methodist clergy, adding to the evidence that the work of clergy poses a risk to mental health (Proeschold-Bell et al., 2013). Burnout is correlated with depression, with burnout being completely associated with an individual's occupation (Doolittle, 2010). Burnout is different than job-related stress, in that burnout can be the result of cumulative stressors, specifically a low sense of personal accomplishment, high emotional exhaustion, and a high degree of depersonalization (Doolittle, 2010). The psychological process of burnout among clergy is related to the individual's inability to differentiate between self and role (Beebe, 2007). Overfunctioning is a characteristic often observed in clergy (Grosch & Olsen, 2000). The need to please other people is likely a carryover from childhood behavior in which rewards were used heavily (Lee, 1995). Clergy burnout may occur when the pastor's need to please is met with the perception that the congregation is not appreciative of the pastor's efforts, which results in the pastor working harder to achieve rewards. Lehr (2006) suggests the term "burnout" is a politically correct term for codependence, a term often associated with the field of addictions and treatment.

Hall (1997) showed that the number of hours spent in daily congregational work is associated with high levels of burnout. However, the use of professional/social support, having a flexible schedule, and taking time off for family vacations correlate with lower burnout rates (Hall, 1997).

Structure and Dynamics of Clergy Families

The unique nature of clergy families

The marriages and families of clergy are highly visible, and often, symbolic unions for members of the congregation and/or community (Presnell, 1977). For many years, the clergy profession has been considered a "two-person" career, which assumes the spouse of the clergy person will participate fully in the life of the congregation, yet goes unpaid (Hileman, 2008; Morris & Blanton, 1994; Murphy-Geiss, 2011). Children, too, are often expected to be active in children's and youth ministries, while being models of behavior for other children and youth (Fredrickson & Smith, 2010; Murphy-Geiss, 2011).

Pressures and demands

Managing family roles presents unique challenges among clergy families. Heavy work responsibilities, hectic schedules, lack of boundaries, interruptions in study, feelings of inadequacy, loneliness/isolation, and unrealistic expectations of oneself are stressors common in the clergy family experience (Gleason, 1977; Hileman, 2008; Lee & Iverson-Gilbert, 2003; Morris & Blanton, 1994). An earlier study by Presnell (1977) listed five areas of concern for clergy: money, time, concern for self, worry, and marital conflict. The stressors identified for clergy families vary slightly from the stressors identified by clergy as individuals.

As Bronfenbrenner (1979) explained, the clergy family is considered a microsystem, a system in which roles are clearly defined, and members of the system behave according to the specific role (i.e., parent to child, spouse to spouse). The adults' workplace is typically exosystemic, meaning clear responsibilities apart from the family exist. Clergy families, however, experience "microsystem/exosystem boundary ambiguity", in which boundaries are less defined. Mellow (2002) mirrored the theory of boundary ambiguity with the statement that many pastors work from home, where the line between "public" work and "private" family life becomes blurred. Mellow contended that ill-defined boundaries serve to expand a professional's work rather than the individual's family life.

Congregational intrusiveness

"Congregational watch-dogs" can lead clergy families to feel as though they must live perfect lives, in order to meet the congregation's expectations (Darling, Hill, & McWey, 2006; Morris & Blanton, 1994). Other terms clergy use to express the feeling of being watched include "living in a glass house" or "in a fishbowl" (Cattish 2012; Fredrickson & Smith, 2010; Hill, Darling, & Raimondi, 2003; McMinn et al., 2005; McMinn et al., 2008; Rowatt, 2001) suggests that because clergy are "supposed" to be kind and accommodating, they often have difficulty identifying authentic and immediate needs. "Minister's wives report being watched in the supermarket to see what kind of food they buy on a pastor's salary" (Lee, 1995, p. 3).

Lee and Iverson-Gilbert (2003) conducted a study across five denominational groups, using several hundred clergy, showing that the higher the perceived intrusive demands of the congregation, the lower sense of well-being and life satisfaction. The

researchers emphasized that the clergy's perception, not the frequency of congregational demands, made a greater impact on well-being.

Monahan (1999) offered another explanation for the sense of intrusion on clergy by congregation members. While clergy are usually paid staff members, the congregation, who are volunteers, shares the tasks required to maintain a congregation. "The findings on the distribution of control over church work support the claim that the boundaries around clergy and lay roles in churches are blurred" (Monahan, 1999, p. 382). Isolation

While clergy spend a large portion of time in relationships with people, the ministerial role often separates them from social situations. In a recent study, 70% of clergy reported not having a close friend with whom to confide (Meek, McMinn, Brower, Burnett, McRay, Ramey, Swanson, & Villa, 2003). Brunette-Hill (1999) suggested the isolation is two-fold for clergy families. First, members of clergy and their families often have difficulty developing and/or maintaining social relationships with members of the congregations. Second, clergy's time with church-related activities results in time away from the family. Valeriano (1981) suggested that not only is loneliness a result for clergy families, but resentment as well.

Effects of congregational conflict

Another unique aspect of clergy work is the possible mismatch of congregation and clergy. Theological and ideological viewpoints do not matter much in most professional working relationships. The working relationship of clergy and congregations are often centered on the theological convictions or ideological philosophy (Mueller & McDuff, 2004).

Congregations operate in systems theory as nuclear families, with denominational hierarchies operating as extended families (Friedman, 1985). The pastor and congregational relationship is analogous to marriage (Friedman, 1985). Congregations, like families, have conflict. Financial, theological, personality, and leadership expectations are areas in which clergy are often challenged.

Relocation

Relocation adversely affects overall life satisfaction (Hill et al., 2003; Lee, 1999; Lee & Iverson-Gilbert, 2003; Morris & Blanton, 1994; Morris & Blanton, 1998; Proeschold-Bell et al., 2009). Relocation pulls clergy and family away from established support systems, which may include extended family members. Significant adjustments to new people, settings, moving costs, and the moving process were identified as the most stressful aspects of relocation (Hill et al., 2003).

The UMC system operates under the itinerancy system; meaning clergy are obligated to serve congregations according to the Bishop's direction. The purpose of itinerancy is to ensure that church members do not become reliant upon one specific pastor's leadership. Relocation for clergy families can be as frequent as every year or two. Four or five years of service with one congregation or charge are more common. It is significant to note that frequent relocations among UMC clergy disrupts consistent medical care for clergy and family members (Proeschold-Bell et al.,2009).

Gender differences

LeGrand, Proeschold-Bell, James, and Wallace (2013) report that female clergy, who make up about 25% of UMC pastors in NC, are less likely to protect personal time (i.e., vacation, time off), and sometimes fear being judged by clergy peers.

Congregationally, female clergy are shown less respect than male counterparts, and receive direct confrontation from church members saying women should not be ministers. However, McDuff and Mueller (2002) found that female clergy received more social support than male clergy.

Mellow (2002) recognized that female clergy are expected to be exemplary parents and dedicated professionals, but female clergy are more likely to lack spousal support. Of the 20 interview participants in Mellow's study, five of the female clergy members brought young children to the interview, while twelve male clergy had young children at home.

Clergy Spouses

The study of clergy and clergy families continues to rise, while the role of the spouse is often explored only in the context of the clergy family (Darling et al., 2004; Frame, 1998; Hileman, 2008; Hill, Darling et al., 2003; Lee, 1995; McMinn, et al., 2005; Morris & Blanton, 1994; Morris & Blanton, 1998; Richmond, Rayburn, & Rogers, 1985). While clergy have built-in support systems through denominational networking, clergy spouses often experience depression, sadness, loneliness, and alienation from the community, especially in the relocating process (Frame, 1998).

In a 1990 study involving only clergy wives, Brunette-Hill (1999) suggested that Protestant clergy wives do less church-related activities as compared to clergy wives from as early as 1960. Clergy wives often taught Sunday School, played the piano or organ, and participated in other pastoral activities such as visiting the sick and counseling, averaging five tasks per clergy wife (Brunette-Hill, 1999). In 1990, though,

less than 75% of clergy wives were active in five or less church-related activities, and none were involved in pastoral tasks (Brunette-Hill, 1999).

Clergy spouses struggle with isolation (Hill et al., 2003). Clergy spouses expressed a belief that they were viewed differently than other congregants because of their status as "clergy spouse", especially among clergy wives. In a study conducted by Valeriano (1981), nearly 20% of the participants expressed a belief that they were avoided due to their status of "pastor's wife".

Almost all (94%) Protestant clergy in the United States are married (Hileman, 2008). The phenomenon of the two-person single career for clergy and spouses continues to be prevalent among Protestant congregations, with female spouses often acting as an assistant (Murphy-Geiss, 2011). Male spouses of clergy, however, appear to have a more non-traditional role, most working in non-clergy professional roles (Murphy-Geiss, 2011). The high percentage of married clergy, coupled with the lack of research related to clergy spouses lends itself to further research opportunities.

McLeroy's Ecological Model of Health Promotion

The task of examining well-being offers the opportunity to consider several models of wellness. Wellness promotion has emerged as a desired model in the prevention of illness, as opposed to a traditional medical model used in the treatment of mental or physical illness.

Disease prevention and health promotion in the United States has been a topic of intense study since the mid-twentieth century (McLeroy, Bibeau, Steckler, & Glanz, 1988). In the context of disease prevention and health promotion, the variables are numerous. The epidemiological causes of chronic and infectious diseases are certainly

considerations in better understanding leading causes of death, but links to age, health care costs, and personal behavior also important factors (McLeroy et al., 1988). A memorable example of research linking social behavior to mortality is the AIDS epidemic of the 1980s (McLeroy et al., 1988).

The ecological framework, first developed by Urie Bronfenbrenner, allows for the exploration of individual behavior and environmental determinants (McLeroy et al., 1988). Bronfenbrenner first applied the framework to child and family policy and educational practice (Bronfenbrenner, 1994). Bronfenbrenner's framework included five layers of systemic relationships: microsystems, mesosystems, exosystems, and macrosystems, and chronosystems (Bronfenbrenner, 1994). A microsystem defines a specific arena in which a person is engaged, such as a family or peer group (Bronfenbrenner, 1994). The mesosystem comprises the connections between two or more settings, such as home and school (Bronfenbrenner, 1994). The exosystem consists of two or more settings, with at least one of the settings having an indirect influence on the subject (Bronfenbrenner, 1994). An example of an exosystem might include a child's home and the workplace of the child's parent.

Bronfenbrenner's model has been used as a framework for behavior-based research, such as Type A personalities (McLeroy et al., 1988). McLeroy's Ecological Model for Health Promotion is a variation on Bronfenbrenner's model. The ecological health promotion model seeks to connect chronic and infectious disease rates can be changed based on changes in the host, the agent, or the environment (McLeroy et al., 1988). Using McLeroy's multi-faceted framework, health-related support, influences, and changes are explored personally, organizationally, and in terms of the larger community.

Just as the exploration of chronic and infectious disease is multi-layered, the implications of incorporating an ecological model for health promotion are equally layered. Developing organizational support is necessary for health promotion implementation (McLeroy et al., 1988). Extending individual behavior changes through the physical environment, or corporate culture is also implicated. Training programs, areas of specialization, and the physical environment directly relate to an individual's perception of health promotion practice (McLeroy et al., 1988). Third, needs assessments and ongoing evaluation allows organizations to develop understanding about specific interventions. Finally, the role of an individual's health cannot be discounted or generalized in determining environmental influences on health promotion (McLeroy, et al., 1988).

The overarching role of ethics cannot be minimized, according to McLeroy (1988). "While strategies based on an ecological model tend to minimize the likelihood of victim blaming, they can result in charges of coercion." (McLeroy et al., 1988, p. 368). The line between the promotion of good health practice and invasion of privacy or emotional manipulation can be perceived as a very thin line (McLeroy et al., 1988).

Summary

While the literature related to clergy spouse wellness is somewhat limited, the review of literature related to clergy well-being and the well-being of clergy families allows for further study. Exploring the work of clergy, as well as exploring the unique relationship between clergy families and congregations provides the foundation for this research. Incorporating the framework of McLeroy's Ecological Model for Health Promotion allows for a multi-layered, objective view of a specific population.

CHAPTER III: METHOD

Introduction

The primary questions posed in this dissertation are: "What is the current state of clergy spouse well-being" and "What can be done to nurture the health of clergy spouses?" This study used data collected from interviews conducted by the researcher and from archival data obtained from a larger research study from the Duke University Divinity School's Clergy Health Initiative. The purpose of the Duke study was to develop a health intervention program for clergy affiliated with the North Carolina United Methodist Church. The current study focused on clergy spouse well-being, which has not been studied from the collected data.

This chapter will describe the research design, initial collection, and the additional analyses that was conducted for this study. A socioecological framework was used as a lens through which to analyze the data. Proposed by Bronfenbrenner (1979), human several levels of influence affect behavior. McLeroy et al. (1988) modified the socioecological framework as it applies to health promotion.

The researcher conducted personal interviews with spouses of active United Methodist clergy. Volunteer participants were spouses of active members of the United Methodist clergy in North Carolina. The questions for the personal interviews were semi-structured, similar to the question protocol used with the previously collected focus group data.

Participants of the focus groups, the source of the archival data, were selected from United Methodist clergy in North Carolina. Focus groups were used in order to allow participants to reflect on their vocational experiences in relation to fellow clergy. Unstructured to semi-structured questions were included in the focus group guide.

Research Design

The design of this study is basic qualitative research, a common type of interpretive study. The purpose of this type of research design is to better understand how people make meaning of their life's experiences. The collection of data for a basic qualitative design may include personal interviews, observations, or review of documents, and is based on a theoretical framework identified by the researcher. Analysis of the data includes the description or identification of themes, supported by anecdotes or other markers within the data.

The theoretical framework for this study is McLeroy's Ecological Model for Health Promotion. Each of the five categories (intrapersonal, interpersonal, institution, community, policy) was applied to the two research questions. Data were initially categorized by research question (i.e., "current state" or "what can be done"), then by categories based on McLeroy's model. Finally, thematic identifications were made based on personal and narrative anecdotes.

For this study, the data collected from the personal interviews and the previously collected archival data resulted in responses to both research questions. Conversations related to the current state of clergy spouse well-being, as well as responses related to suggestions for nurturing clergy spouse well-being were found within the personal interviews and the previously collected focus groups' data.

Participant Characteristics

Personal interviews

The researcher conducted personal interviews with spouses of active North Carolina United Methodist clergy. A call for volunteer participants resulted in six spouses of active clergy. The six participants were evenly divided among the two North Carolina Conferences, three in the North Carolina Conference, and three in the Western North Carolina Conference. There were five female participants and one male participant. The participant's spouses have served as minister from 15 to 28 years. Three of the participant's spouses entered the field of ministry as a second career. All of the clergy spouses who were interviewed have children. Two participants have children currently attending elementary, middle, or high school. Two participants have children in college, and two have adult children. Five of the six participants were female and held full-time jobs outside the home. The one male participant also worked full-time, but was able to work remotely, from home.

Table 1: Demographic characteristics of interview participants (n = 6)

Gender		
	Female	83%
	Male	17%
Age		
	31 - 40	17%
	41 - 50	33%
	51 - 60	50%
Race		
	Caucasian	100%
Career		
	First	50%
	Second	50%
Years in min	nistry	
	10 - 20	67%
	21 - 30	33%

Eligibility criteria for focus groups (archival data)

Four focus groups were initially conducted, two each from the two North Carolina United Methodists conferences. Invitations were offered via email and telephone, to pastors of diverse age, gender, and race. Excluding the Bishops and District Superintendents, all participants (n = 33) of the initial four focus groups were currently serving at least one congregation. Using a grounded theory approach, the data from the first four focus groups determined that specific kinds of clergy had different perceptions regarding their personal health and the health of their spouse. Four additional focus groups were conducted to include female pastors, pastors of large churches (memberships from 600 to 4,000 members), local pastors, and pastors under the age of 35. Finally, three more focus groups made up of District Superintendents were conducted based on the thematic material indicating the impact of the UMC organizational structure on clergy wellness. The two NCUMC bishops did not participate in the focus groups, but 29 District Superintendents participated in the three final focus groups. In total, there were 11 focus groups that will provide data for this study. The 11 focus groups were comprised of 88 participants. Focus group participants' years in ministry included clergy with 1 to 43 years of experience, with a mean of 18 years. Most participants were Caucasian men with at least a master's degree in divinity.

As described in Chapter 2, the United Methodist structure is hierarchical, which has shown to have an impact on clergy health. There are two bishops in North Carolina, one to lead each of the two United Methodist conferences in the state. The conferences are further divided into districts, overseen by a District Superintendent. District Superintendents supervise the work of clergy who live and work in their district. The

Bishop, with the support and advice of the District Superintendents, appoints clergy to local congregations. Not only does the clergy report to the District Superintendent, but to representatives of the local congregation as well. This group of representatives is often called the Pastor-Parish Relations Committee.

Table 2: Demographic characteristics of focus group participants (n = 88)

Gender		
	Male	61%
	Female	39%
Age		
J	21 - 30	7%
	31 - 40	10%
	41 - 50	22%
	51 - 60	40%
	61 - 70	18%
	71+	2%
Race		
	Caucasian	91%
	African American	6%
	Native American	3%
Ordination 3	Status	
	Elder	64%
	Local Pastor	23%
	Deacon	4%
	Other	9%
Current App	pointment	
	District Superintendent	34%
	Solo pastor, single church	27%
	Solo pastor, multiple churches	13%
	Associate pastor	15%
	Head of staff	10%
	Other	2%

Sampling Procedure

Method of Sampling

Two methods of collecting data for the study were used. Personal interviews with spouses of active clergy were conducted through phone calls. Archival data were obtained from Duke University Divinity School, and were collected by researchers for the Clergy Health Initiative.

The six clergy spouses participating in the interview by the researcher were invited via social media. Per the proposed protocol, a one-time announcement appeared on the principal researcher's FaceBook page profile, reading:

"Are you the spouse of an active clergy person serving a United Methodist Church in North Carolina? If so, your assistance would be appreciated. I am seeking volunteers to participate in my doctoral research project on Clergy Spouse Well-being. I am requesting from participants an hour-long phone interview related to your well-being as the spouse of clergy. If you are interested, please send a message through FaceBook. Thank you for your consideration." Six clergy spouses responded within a week of the announcement. Therefore, no further recruitment was required. The interview participants are divided equally between the two North Carolina conferences--three from the Western North Carolina Conference and three from the North Carolina Conference. Each participant responded by private message to the Facebook request for volunteers, letting the researcher know of their interest. Per the protocol, participants were asked to read and complete a consent form, which was sent electronically to the participant. Phone call interviews were scheduled after the signed consent form was returned to the researcher electronically. Each participant was interviewed by phone. The interviews lasted between 17 minutes and 41 minutes, with an average of 30 minutes.

The sample of focus group participants was drawn from United Methodist clergy persons from the North Carolina and Western North Carolina Conferences.

Approximately 2,100 congregations are represented by the two conferences. The median church size of United Methodist congregations in North Carolina is about 50 persons, based on an average weekly worship attendance. The majority of churches are considered

rural, at 60%. Female pastors lead approximately 25% of the UMC congregations in North Carolina. The median salary for UMC pastors in North Carolina is about \$45,000. However, many pastors receive additional funds for housing allowance or are provided a house (parsonage) owned by the church they currently serve.

Pastors selected to participate in the first four focus groups were evenly divided among the North Carolina Conference and the Western North Carolina Conference. In order to achieve a heterogeneous sample, particular attention was paid to age, race, gender, and rurality of the participants.

Consistent with a grounded theory approach, data from the focus groups offered thematic material showing that certain types of clergy had specific health concerns. In the original study, focused on clergy health, the following four focus groups were selected based on theoretical sampling. Six female pastors, seven pastors representing large churches, six local pastors, and seven pastors under the age of 35 were included in the second wave of focus groups.

The third wave of focus groups included the 29 current and incoming District Superintendents in North Carolina. They were included because researchers learned that some clergy health concerns were directly related to the hierarchical and itinerant organizational structure of the United Methodist Church.

Settings and location

The initial four focus groups were held in four locations throughout the state of North Carolina in January and February of 2008. In both North Carolina Conferences, a rural and an urban location were chosen as host sites. The four additional focus groups of specific types of pastors met during four separate times in the same location in May and

June of 2008. Finally, the final three focus groups, consisting only of district superintendents, met in June 2008. Focus groups, lasting approximately 60 to 90 minutes, were audiotaped. The Duke University Institutional Review Board approved the initial data collection for this study.

Agreements and/or payments

Participants selected for the focus groups by the Duke University researchers were provided lunch and travel reimbursements. For this study exploring clergy spouse health, I agreed to the Confidentiality Policy provided by Duke University (Appendix A). The archival data were collected following successful completion of the dissertation proposal and upon obtaining permission from the Institutional Review Board of the University of North Carolina at Charlotte.

Measurements/Instrument

The questions for the personal interview guide, as well as the focus group guide, were unstructured to semi-structured by design. Perceptions of well-being, barriers to well-being, and the impact on spousal well-being of the clergy's work were included on the individual interview guide. The personal interview question guide is found in Table 3. Perceptions of health to include facilitation of good health, barriers to good health, and the impact of the relationship between the congregation and pastor on the pastors' health were included in the focus group guide. For this study, questions related to clergy spouse health, as well as the impact of congregational relationships on clergy spouse wellness were considered.

Merriam (2009) suggested semi-structured and unstructured questions offer flexibility and are more conversational, with a goal of learning to formulate questions for

further interviews. The development of the questionnaire for the previously collected focus groups changed slightly over time. As thematic matter related to clergy health emerged in the first four focus groups, researchers discovered that health and wellness behaviors varied among specific types of clergy: female pastors, pastors of large churches, local pastors (ordination type), and pastors under the age of 35. For the purposes of this study, a large church is defined as a congregation supporting more than one pastor. The age of 35 years old was chosen because 6% of the UMC pastors in North Carolina are 18 to 34 years of age. Therefore, four focus groups representing these specific criteria were conducted.

Participants in the focus groups were given instructions and an overview of the purpose for the study. "The purpose of the focus group is to learn about United Methodist pastors as a whole, to guide our planning of a seven-year project. It is NOT to collect information about your health or health-related behavior as individuals." Pastors were further instructed to consider all of their colleagues in ministry as questions were answered. The focus group question guide is found in Table 4. Following the interview using the focus group guideline question, pastors were then asked to complete a demographics questionnaire.

Throughout the focus groups process, collection and data analysis was ongoing. A large body of research was developed regarding the health of clergy from the data, which was the stated purpose of the Clergy Health Initiative. With permission from the principal investigator, the secondary data analysis of the archival data further explored thematic material related to clergy spouse health.

Table 3: Clergy spouse interview guide

- 1. How would you, as the spouse of a clergy person, define well-being?
- 2. When do you, as the spouse of clergy, think about your well-being?
- 3. How do you think clergy spouses attend to their well-being?
- 4. How about you? How do you attend to your well-being?
- 5. What aspects of well-being are hardest for clergy spouses to attend to?
- 6. What about you? What aspects of well-being are difficult for you to attend to?
- 7. What kinds of programs/resources related to well-being are clergy spouses most likely to participate?
- 8. How about you? What kinds of programs/resources related to well-being are you most likely to participate?

 On you identify any structural or expensivational aspects of the United Methodist Church (UMC) that effect the
- 9. Can you identify any structural or organizational aspects of the United Methodist Church (UMC) that affect the well-being of clergy spouses?
- 10. How about you? What organizational aspects of the UMC affect you?
- 11. How does the state of the congregation a pastor is leading affect the well-being of clergy spouses?
- 12. How about you? How does the state of your current congregation affect your well-being?
- 13. What could be done to improve the state of congregations, in order to ultimately improve the well-being of clergy spouses?
- 14. How about your current congregation?
- 15. How often do you spend time, physically or virtually, talking with other clergy spouses?
- 16. Can you think of anything you'd like to talk about related to clergy spouses or clergy spouse well-being?

Table 4: Focus group question guide

- 1. How would you define health? (5 minutes)
- 2. When do pastors think about their health? (10 minutes)
- 3. How do pastors attend to their health? (5 minutes)
- 4. Deleted after focus group 2.
- 5. What aspects of health are hardest for pastors to attend to? (5 minutes)
- 6. We would like to hear your ideas on the kinds of health promotion activities that you would be interested in being offered by the Clergy Health Initiative. What kinds of programs and resources would you like to participate in? (10 minutes discussion)
- 7. Pastors were asked to rank the top five health promotion activities that the Clergy Health Initiative potentially could offer from a list that was given to each group member. The list included the following activities:
 - Health coaching (telephone or in-person coaching to help you identify your goals and track your progress)
 - b. Peer support groups
 - c. Paid health club memberships
 - d. Counseling delivered by a pastoral counselor, marriage and family therapist, psychologist, social worker)
 - e. Physical exam with individualized follow-up consultation with a physician
 - f. Incentives or rewards for participation or achieving certain health goals
 - g. Spiritual direction
 - h. Consultation with a dietician/nutritionist
 - i. Personal trainer
 - j. Mentoring
 - k. Individual financial advising, e.g. retirement planning
 - 1. Retreats, alone or with spouse
 - m. Continuing education programs
 - n. Other service you would use:

(5 minutes to fill out and tally, 5 more minutes discussion with the follow-up question, "Is there anything else you would like to add about programs you might participate in?")

- 8. Focus group participants were then asked to consider clergy spouses with the question, "What can be done to nurture the health of clergy spouses?" (10 minutes)
- 9. How does the state of the congregation one is leading affect the health of the pastor? (5 minutes) What could be done to improve the state of congregations, in order to ultimately improve the health of pastors? (5 minutes)
- 10. Have you ever participated in a clergy peer-to-peer program or series of meetings? (5 minutes)
- 11. What did you like or dislike about these peer-to-peer experiences? (10 minutes)
- 12. We wanted your feedback to help us make this program as valuable as possible to pastors. Is there anything we missed? (5 minutes)

Procedures

Six spouses of active North Carolina United Methodist ministers were interviewed. The semi-structured interview questions were designed to correspond to the questions posed to the focus groups. Interview participants volunteered in response to a notification placed on the social media outlet, FaceBook. Phone call interviews were conducted with the six participants after the individual's consent notification was received.

The archival data was collected throughout the first six months of 2008 by researchers affiliated with the Duke University Clergy Health Initiative (CHI). The overarching purpose of the CHI was to develop an intervention program related to clergy health based on the information received from the focus groups. An intervention program focused on clergy health was developed partially through the analysis of the focus groups. However, questions related to clergy spousal health and the states of the congregations were not included in published research or included in the clergy health intervention protocol. The second research question for this study, drawn from the focus group guide, is "What can be done to nurture the health of clergy spouses?"

Data analyses occurred in three phases: data management, data reduction, and interpretation. During data management, secured verbatim transcription of the audio recordings were obtained from the original researchers. Audio-recording and verbatim transcription reduce threats to internal reliability (Creswell, 2007). Data reduction and interpretation was a continuous process throughout the analysis of the data. Through discussion in meetings with the dissertation committee, the researcher analyzed data concurrently and recursively for emergent themes and incorporated procedures to address

credibility, transferability, and dependability (Charmaz, 2006; Lincoln & Guba, 1985; Patton, 2002).

Two criteria, internal homogeneity and external heterogeneity, were used for judging the quality of the category system. Internal homogeneity refers to the consistency of a category, which indicates how well the data within a specific category holds together. External heterogeneity refers to the extent to which discrete categories do not overlap (Patton, 2002). During data reduction, a peer debrief with the dissertation committee members who have knowledge of the research topic were used to probe the researcher's biases and to ensure that the codes and categories are accurate reflections of the data.

During the interpretation phase, reconstruction of the data was conducted to reveal connections and relationships among categories and themes. Analyses included examining themes that cut across populations and were unique for specific groups.

McLeroy's Ecological Model for Health Promotion (Figure 1) is a variation of Bronfenbrenner's socioecological model indicating multiple layers of influence affect behavior. Intrapersonal factors would include self-concept, skills, values, and attitudes of the individual. Interpersonal factors include the individual's social support network such as family unit and friendships. Institutional factors are related to organizational characteristics. In this study, institutional factors include both the local congregation to which the individual belongs. How community organizations relate to each other make up the fourth level of environmental impact. For the purposes of this study, the community level considers potential for employment and community resources available to the clergy spouse. Finally, the policy level is the broadest environmental factor

including district, conference, and national guidelines found within the larger United Methodist Church.

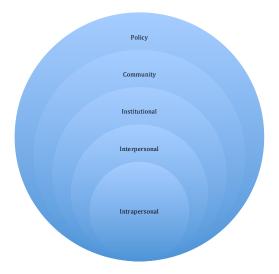


Figure 1: McLeroy's Ecological Model for Health Promotion

Thematic Interpretation

Both interview and focus group data were used to examine the two research questions. The approach of the current study included categorization, coding, and analysis of the data of the focus groups' responses regarding clergy spouses. Specific terms in the data (i.e. "family", "children") were also included to examine familial stressors. Researchers affiliated with the Duke University's Clergy Health Initiative used a similar approach in analyzing the data related to clergy health.

The five categories for research were based on McLeroy's Ecological Model for Health Promotion including interpersonal factors, intrapersonal relationships, institutional expectations and involvement, community involvement, and policy implications—specifically related to the larger United Methodist Church corporate body. It is important to note that the focus groups (archival data) were comprised of clergy members.

Therefore the focus group responses were from the secondary source.

Responses indicating reported personal feelings of clergy spouses (i.e., loneliness, isolation, guilt) were included in the intrapersonal category. Interpersonal responses include those related to terms indicating personal friendships, family, and marital relations. Institutional relationships include responses indicating expectations of local church members. Community involvement and clergy spouse occupational and volunteerism endeavors were included in the category related to Community. The final category, Policy, included responses related to the systemic policies within the United Methodist Church such as financial and housing compensation.

After responses from the interviews and focus groups were organized into the five categories from McLeroy's ecological model, the researcher analyzed each of the categories for sub-themes. Sub-themes were identified by repeated words, common phrases, and patterns appropriate to each category. A deductive approach in analyzing the data allowed for numerous revisions of sub-themes.

Summary

The job stressors associated with clergy health are well documented. Using personal interviews and secondary archival data, this study will explore the health and well-being of clergy spouses. The use of McLeroy's socioecological model of health promotion will provide the lens through which to view the data. This theoretical model reflects a holistic understanding of health to include mental, spiritual, emotional, and physical well-being in the context of self, family, and community.

CHAPTER IV: RESULTS

A report of the analysis of the interviews with clergy spouses and the archival data from the focus groups who participated in Duke University's Clergy Health Initiative is the focus of Chapter 4.

Participants

Personal interview participants were spouses (n = 6) of active United Methodist clergy in North Carolina, recruited by the researcher. Clergy spouses were recruited with a post on the social media outlet, Facebook. Of the six interviews, three were in the Western North Carolina Conference and three were in the North Carolina Conference, representing both conferences equally. Also included in the study were previously collected, archived focus group data from the Clergy Health Initiative, a program designed to study and offer health promotion interventions to United Methodist clergy in North Carolina. The focus group participants were clergy members, providing a secondary perspective of clergy spouse well-being.

Research Question #1 - What is the current state of clergy spouse well-being?

The first research question is "What is the current state of clergy spouse well-being?" Based on the McLeroy's Ecological Model of Health Promotion, responses were categorized into one of five areas: intrapersonal, interpersonal, institutional, community, or policy. Within each of the five categories, multiple themes were identified from the data analysis. Themes are qualified with verbatim quotations by the participants,

substantiating the theme. Interview participants' names, spouse's and children's names, and locations have been substituted with pseudonyms. Focus group participants are identified as male or female only.

Intrapersonal

The participants' reports of personal attitudes and feelings are included in the intrapersonal dimension. The participants who were interviewed, as well as the focus group participants were first asked to define well-being. Participants' responses are included in the category of intrapersonal perceptions, due to the personal nature of the responses. Other themes presented in the data include isolation and resentment. The fourth theme related to the intrapersonal category is the call to partner with their spouse in ministry and the personal commitment to life in ministry.

Definition of well-being

The participants presented multiple definitions of well-being. Clergy and spouses alike had similar ideas of well-being, in that it is multidimensional. Physical well-being, along with mental, spiritual, emotional, and social well-being were mentioned in the interviews and in the focus groups.

Many participants began their description of well-being with the physical dimension. Three of the six participants who were interviewed named physical wellness before naming other dimensions. Matthew said, "I would define well-being as physical, mental, and emotional well-being . . . relatively good health physically, as in blood pressure in check, weight relatively in check . . ." Jennifer said that well-being meant that she is "taking the best medical care of myself to stay healthy." Susan expanded her response to the question, "What is your definition of well-being?" She said,

"it means being healthy physically, mentally, and spiritually. I think it's probably even more than that, but at least those . . . oh, let me add another one . . . socially. I heard someone call it an absence of 'dis-ease' a while back. I like the way they said the word 'dis-ease'. It goes beyond disease physically. It's mental, emotional, social. But I also think we have to be intentional about it, so it can't just be the absence of 'dis-ease', but daily upkeep and progression.

Interestingly, one clergy spouse couched her response about well-being in terms of spiritual and emotional well-being. Kim said, "My first immediate thing that comes to my thought is a relationship with Christ and a relationship between the husband and wife that is worshipful and prayerful and God-led. For me, spiritually, health starts there."

Clergy participants in the focus groups were also asked to define well-being. A male participant in Focus Group #10, all of whom were under 35 years of age, stated, well-being is "a very holistic thing that has to do with not just the physical but also mental and emotional and spiritual components." Another male in Focus Group #10 responded by saying, "I think this is a new subject for us. We don't talk about this very much. That's why we're kind of quiet. There's an old John Wesley question, 'How is it with your soul?' And we don't ask that very much. We're not asked about that very much. And now this question about well-being that's not only about soul, but our whole body, our whole essence."

The term 'balance' or 'alignment' was used in reference to well-being by several participants. One male participate from Focus Group #9, a group of pastors from multistaff, large churches, gave this figurative explanation of well-being: "Emotional and physical balance. Emotional meaning partly, of course, spiritual. But I think balance is-

it's easy to get out of balance. And the issues surrounding ministry--being selfless, taking care of other people. You're supposed to put the oxygen mask on your face first, but that often doesn't happen with clergy well-being issues, emotional and spiritual and physical."

A female participant from Focus Group # 5, a group of local pastors, said, "Wellbeing is body, soul, and mind alignment. When one is off kilter, the others will be too.

You have to have all three aligned."

Isolation

Clergy are assigned to a local congregation by the Bishop, based on a several criteria gathered from the congregations and the District Superintendents. Clergy act as servant leaders of the local congregations, but they also report as employees to the local congregation and District Superintendents. The precarious position of clergy and clergy spouses often leads to a feeling of loneliness or isolation.

Clergy spouses experience a sense of isolation for a variety of reasons, according to the gathered responses. One clergy spouse, whose father was also a pastor, admitted her active choice and involvement in becoming isolated. "At this point, since I have lived in it all my life, I feel like I've got a good hold on that [emotional well-being], just because you learn to build this wall around yourself. Just because you have to to survive what gets thrown at you. Because what gets thrown at you and/or your spouse...you have to just sit there and watch it or listen to it. So, if you're not guarded and protected, you fall all to pieces, then you really have a mess."

"When asked to describe the feeling of 'building the wall', Jennifer said, "well, it does make you somewhat hard-hearted if you're not careful." She continues, "but you

just have to be a tough person. So, if you're not careful, you can come across as having no compassion. And especially since you keep hearing the same stories over and over and over. 'My husband's left me.' or 'My child's on drugs.' It's the same situation everywhere. The only difference is people's names and faces change."

A female minister from Focus Group #4 acknowledged the difficulty some clergy spouses have in developing trusting relationships, as well as the potential impact on one's physical well-being. She said, "The spouses don't really have a place to vent their frustrations. It's not like they can vent with the other ladies of the church. And in this community everybody's related so you don't know who to talk to. The could be so-and-so's cousin. Everybody's related. So they keep their frustrations inside and eventually makes them sick."

Isolation among male clergy spouses

While participants expressed feelings of isolation, clergy spouses who are male seem to experience isolation even within the context of clergy spouses. In the United Methodist Church, about 75% of clergy are male. Therefore, male clergy spouses are in the minority at clergy spouse events.

Matthew, a clergy spouse, stated that he knew of other male clergy spouses, but did not have the type of relationship that invited discussion of feelings or attitudes.

Because he works remotely, he has few friends from his work environment, as well. "I feel a bit, what's the word? Isolated, in that regard." He continued, "I probably sound like a hermit. I don't really have a guy group or a group of friends that I hang out with on a regular basis, so this isolation topic seems to keep turning up, which is interesting."

When asked if he had entertained the idea of connecting with clergy spouses, he

explained, "There was one time at the Annual Conference -- a group that was meeting was the clergy spouses and it was very obvious that it was pretty much all women and they kind of jumped on my because I was fresh meat. I could tell right away that I was going to be the only guy in a room full of women. I did not feel comfortable at all."

A female pastor from Focus Group #9, speaking on behalf of her clergy spouse, said, "and they discriminate because it's different for males." She continued, "I mean if you go to conference, my husband has never wanted to go to a clergy spouse thing. He went to one. He said, 'I walked in and they looked at me like 'what are you doing here?" I think they are very much an animal that doesn't fit anywhere."

Resentment

Participants also expressed feelings of not being treated fairly. The continuum of fairness, according to participant's claims, is broad--from lack of time for self-care to being unable to pursue career choices.

Beth said, "I think I let myself take the back burner, because I know Neil is so busy . . ." Jennifer said, "It's like you constantly have to think about, and put others first . . . and then you begin to think, 'well, when's my turn?' It's reactionary, instead of being proactive."

Susan gave up her career aspirations as a dance teacher. Her childhood dream included having a dance studio, an endeavor that happens over a number of years and through intentional relationships in a centralized location. She wanted to teach young children to dance, and mentor young adults in the art of teaching dance. When her husband began seminary, in the United Methodist tradition, she realized she would be unable to fulfill her dream due to the itinerant nature of the denomination. She said she

doesn't feel resentful consistently, but she seems to realize it most in the spring, when dance recitals are held.

Clergy are typically available at all hours every day. Should emergencies arise, and spiritual support is requested, church members will reach out to their minister. A female clergy participating in Focus Group #9 (large, multi-staff pastors) stated her husband would sometimes say he felt like she was having an affair, an infringement on their time together, "but yet it's a battle he doesn't want to fight." She said he'll ask, "I mean, who am I battling? God?"

Call to partner in ministry

Despite the difficulties of ministry as expressed by clergy spouses in the interviews, the call to partner in ministry seems to override the feelings of disappointment. People experience the call to ministry at different times in life. Some realize they will be ministers before going to college. Others turn to ministry as a second or third career, sometimes returning to school to pursue a Masters degree in Divinity. Some of the participants who were interviewed acknowledged the importance of the call to ministry, not only in their clergy spouse's life, but in their life as well.

Debbie and Susan both knew their spouses were going to be clergy in the United Methodist Church. Debbie explained, "When I first met my husband, he was in the process of being ordained, so I knew to a degree what I was getting into." When Matthew married Marie, she was a school teacher. "I never imagined when we got married that she would end up being a clergy person. That was a complete surprise to both of us. It's not like it was ever planned or foreseen at all."

Kim's husband was also in the world of business prior to becoming a minister. She'd grown up in the United Methodist Church, and he was Catholic. He started attending the church Kim attended only because 'sister was looking for a church to get married in." They met, and eventually married, and both became very involved in the youth ministry of the church. After their second child was born, Kim's husband told her he felt like he should go into the work of ministry. "I was serving on the Staff-Parish [Relations Committee] for the church at the time, and I said, 'no', because the church loves volunteers but once you're on staff they get a lot more critical . . . this is a huge sacrifice, but through prayer, God did some great things in my heart during that time and really confirmed what was going on in my husband's life." Kim further explained that by the end of her spouse's seminary experience, they entered into the ministry as though they were a team.

Jennifer, who was also the daughter of a minister said, "So growing up in a pastor's home, I said, 'I will not ever . . . I will NOT marry a preacher. I will not do that. I don't want to live like this for the rest of my life.' So we had been married 10 to 12 years and then Mark finally just said . . . and he didn't want to tell me because he know I didn't want it. But I knew this was going to happen. I knew it. He looked at me and said 'We gotta talk . . .' and I just said, "Mark, I know what it's about. It's okay.' So when he could relax and we were on the same page . . . we knew this is where God was leading."

An interesting contrast found in the data resources may be examined in the theme of ministerial call to partner with the clergy. Clergy spouses who were interviewed spoke of their commitment to partner with spouses as a "call" to minister. Interviewees spoke of

their "call" positively, indicating a sense of purpose. Previously collected material from focus group participants did not acknowledge spousal involvement in the same manner. Interpersonal

The interpersonal category of McLeroy's model generally speaks to the relationships of the subject. For the purpose of this study, the interpersonal category revealed a theme of strong family relationships among the participants. In the marriage relationship, the second theme derived from the data, the spouses reported playing the role of counselor and teammate, aside from being the marriage partner. Some participants acknowledged knowing clergy families that have separated due to divorce. Others knew of ministers who had left full-time ministry due to the relational pressures on self and family. A small number of participants spoke of friends outside the church setting, the third theme relating to the interpersonal category. Finally, a fourth theme revealed an absence in relationship. Several participants mentioned the absence of a pastor in the lives of the clergy spouses, an absence of pastoral support.

Family

Beth states that "family is where our strength comes from." However, her family has endured challenges that demanded the focus return to her family. Her oldest child has a mental illness that requires therapeutic and familial support. "We have faced some health issues in our immediate family that really caused all of us to refocus and realize we needed to think more about our family." Beth and Neil, her clergy husband, have been very intentional about housing and ministerial placement, especially in the past six years. For example, for an upcoming move to a different congregation, at Neil's request, they

both attended a meeting with the District Superintendent to discuss their desires and needs about the appointment.

In conversation with Kim, she emphasized intentionality throughout the interview. In terms of family, Kim speaks to the establishment of boundaries: "I'm fortunate in that my clergy husband is very family-oriented and he doesn't let the church take all of his time and I've never, throughout this 20 years of ministry, felt like I was competing for his time. And I don't think our children ever felt that either. If we needed him, he was always available to us. He put us first, not the church job." Kim also spoke about others' struggles in maintaining boundaries. "It's like they're completely married to the church . . . and I do see families struggling." Kim also spoke about the role her extended family plays in her well-being. She first asked the rhetorical question, "Where do you go when you're hurting and struggling?" She continued, "I'm thankful that I've got great sisters that I can talk to that love and appreciate my husband even though . . . you know, I can share thoughts sometimes in our struggles."

Based on the history of his mother-in-law, one pastor in Focus Group #2 explained the he and his spouse established guidelines for the family early in his career. He explained, "My wife's mother was the daughter of a minister. And she left the church. So my wife and I recognized early on that one, our children were not going to go to church every time the doors were open. They went to worship, because that's what we would do even if I was not a pastor. But if they wanted to sing in the children's choir or youth choir they did. If they didn't that was fine with me."

Another participant in Focus Group #2 named a term that is described in the literature by saying, "the goldfish bowl that is the pastor's family life." Even for clergy

and clergy spouses without children, privacy is difficult to maintain. A female pastor in Group 10 (Young Pastors under 35) said she had been married for just two years, but "everybody in the church, especially all the women, asks me at least once a day, 'When are you having babies?' They don't ask, 'Do you want to have children? Are you able to have children?' It's just, 'When are you having babies? You'd better get started. You've been married two years now.'"

Marriage

Participants also spoke about the variation of roles they play within the context of marriage. Protector, counselor, assistant, and teammate were some of the terms used either by a clergy spouse during the course of the interview, or by clergy in their respective focus group.

Isolation was a theme described by participants in the intrapersonal category, by clergy and clergy spouses alike. Participants stated that talking about personal struggles with the District Superintendent or church members is typically not an option. Therefore, the marriage partner is often the default counselor in the relationship. Matthew seemed to acknowledge being somewhat uncomfortable in the role of counselor. He said, "I have no training at all, as far as what a good listener is and giving advice. I'm just a regular guy... I'm don't know what I'm doing." A pastor in a multi-staffed, large church shared with his focus group, "My wife looked at me one time when I was needing to share some stuff with her. And she looked at me and I got a little upset when she didn't respond like I needed her to. She pointed her finger in my face and said, 'I'm not your therapist or your spiritual director. Go get one.' And I was mad at her and did my pouting thing and she was right. And now I have a spiritual director."

Some clergy spouses described the choices made by their partner to focus on marriage and family first, then the work of the church. Debbie spoke of her husband's focus on their marriage throughout his 28 years of ministry, "My spouse is very supportive of whatever we need to do to keep ourselves in check. He makes rooms for our priorities." Kim said, "Our [ministry] was a partnership."

The health and well-being of either the clergy or the clergy spouse seems to affect the other, according to the data. Jennifer and her husband's child is now in college, so they joined a fitness club in their area, another intentional act to strengthen not only their physical well-being, but their marriage as well. Susan and her spouse, Adam, attend Weight Watchers meetings together and try to walk a minimum of 10,000 steps daily. The clergy also acknowledge the impact of health and well-being of their spouse on their work as ministers. A male participant in Focus Group 1 said, "If my wife gets sick and that takes my focus away from other things, it has an impact on the church." One of the District Superintendents said, "I think the statistics indicate that our spouses are probably sicker than we are healthwise. We're sick enough. But one of the things I learned fairly early was that I could come home and I could unload all the junk on my wife and then she did not have anybody to unload to and then she internalized it and thus became ill. So I had to learn not to dump all that stuff on her because it made me feel better, in that respect." A female pastor participating in the 11th focus group said, "When I'm happy and healthy, that makes a world of difference to him [my spouse]. So he doesn't have to listen to me."

Friends outside the church setting

Friendships with people outside the church membership alleviate feelings of isolation. Susan said, "I'm definitely more authentic with my college friends. I feel like I can relax with people who knew me before we were in ministry." Susan had kept in touch with her friends from college. Often though, in the itinerancy system, new friendships must be made and nurtured. A male participant in one of the District Superintendents' Focus Groups said, "Well, my wife explained it to me this way, 'You have a place to go to. I don't.' The moderator asked, "Do you mean like a group of friends?" "I think that if there are friends, yes, you have to start with new friends. In other words, when we got to a new community, we [clergy] have our identity already. We're the pastor, we're going into this church and so forth. Our spouses, well, they're the minister's wife, that's basically it. And I'm not sure they really enjoy being that that much." Another District Superintendent, participating in the same group said, "I know many times my wife has said to me, "it's difficult for me to make real, close, tight sister girlfriends," if you know what sister girlfriends are, 'in a local church.'" Another pastor, participating in the Focus Group consisting of clergy under the age of 35, said, "And there's almost a culture there [in the church he is currently serving] that she should not even try and make friends outside of the church group." In rural communities, the search for friendship is made difficult because of the size and scope of the community. A female member of Focus Group #4 said, "The spouses don't really have a place to vent either. It's not like they can vent with other ladies of the church. And in this community, everybody's related, so you don't know who to talk to. This could be so-and-so's cousin. Everybody's related."

Absence of pastoral support

Many participants of the interviews and focus groups mentioned the void of pastors for clergy, as well as for clergy spouses. Even though the office of District Superintendent is designed to serve a pastoral role for pastors and their families, the overriding perception of the District Superintendent is that of supervisor, who in consultation with the bishop, makes decisions about a pastor's placement, or appointment. The clergy spouses who were interviewed for this study did not talk about the absence of a pastor, but clergy members participating in the focus groups realized the absence for their spouses.

A female pastor in Focus Group 4 shared with her colleagues a comment her husband had recently made. "He kind of said, 'It's not you, but I miss having a pastor.' You can't pastor your own family. I'm mom. They know all my weaknesses." Another pastor in the same group shared that his family attended another church while he was in his first appointment. "They need a pastor. I'm a husband. I'm a father. I'm not a pastor to them."

Institution

While the United Methodist denomination has standards and guidelines for churches to follow, the local congregations vary greatly depending on the congregational members. The local congregation has autonomy to determine music styles for worship, outreach efforts, mission projects, committee needs and membership, and many other aspects of church life. According to the data for this study, three specific themes were identified as having direct impact on clergy spouse well-being. The church's expectations of the clergy spouse, the lack of privacy for clergy families, especially for those who live

in the local congregation's parsonage, and congregational struggles were named as situations that seemed to be difficult to navigate by clergy spouses.

Expectations of clergy spouses

Unlike other professions, the clergy spouse is invited, and even encouraged, to be an active part of the clergy's work in a local congregation, as evidenced by the participants' contributions to this study.

Beth stated that there were expectations for her in the first two churches her husband served as pastor, but she did not elaborate as to what the roles were. She did, however, offer an explanation for the expectations church members voice. "It may be a sign that in the smaller church, when you're first just starting out, there aren't many people in the churches and they need all the help they can get . . . all the teachers they can get, all the piano players they can get, and all the childcare workers they can get, and they see the spouse and say, 'oh boy, let's use her.' I think it may be more about the size of the church . . . the need for help in the smaller churches."

Kim had chosen not to work full-time when her husband began ministry, but now works full-time. As far as her involvement in his ministry, she says, "I'm doing my thing, and he does his thing and then we try to meet together in the middle and I participate in church stuff, but I can't own it, like I did in the beginning."

Many of the focus group participants spoke about clergy spouse expectations, including one pastor who spoke of his own expectations of his spouse in the context of the work of the church. The pastor, a participant in Focus Group #1, said, "My wife goes with me on every visit I make unless I know that something private needs to be

discussed. So she's as much a part of ministry, except for preaching on Sunday morning, as I am. But yet she gets no compensation in any way whatsoever."

A pastor in Focus Group #5 confirmed by saying, "There is still the expectation that the spouse . . . for the church to expect the spouse to be an unpaid second helper." Another pastor in Group #5 concurred with the example of a clergy spouse stepping in to preach when the pastor got sick, and "she is not clergy". Another male pastor, participating in Focus Group #4 said, "Folks still expect my wife to [inaudible] even though she's not a part of the ministry in terms of know Christian problems. She's not a part of the profession. They still expect her to be a Sunday School teachers, to do Children's Church."

When asked the question, "Is there any way to change the expectations of the church?", one of the District Superintendents jokingly told other participants, "Tell young ladies who expect to marry a minister, don't learn to play the piano." Another District Superintendent agreed that the expectations of churches are not realistic. "They think that the church today is like it was 40 years ago. And they want the spouse to fit the same role than 40 years ago and it's just not practical anymore." One of the defining leadership committees in a local congregation is the Staff Parish Relations Committee or the Pastor Parish Relations Committee. At least one District Superintendent said he has heard "Pastor Parish committees say, 'We want a pastor whose spouse is going to be intricately involved in things.' And they have their own idea of whether that's playing the piano or leading a Sunday School class. And they may not get specific in conversation such as this, but they are specific that that's one of their expectations, that the spouse will be that unpaid—they don't say that, but that is the expectation, that they're unpaid staff."

The expectations of spouse's involvement seem to focus mainly on female spouses of clergy. One pastor said, "They don't know what to do with my husband. They don't expect him to be the President of Methodist Women and head up Vacation Bible School and play the piano."

On the hand, one male pastor in Focus Group #3 said, "I think we're in a time of transition from years ago when the clergy spouse was almost considered part of a package deal. With the pastor and clergy spouse might have been seen more as a part of that pastor's ministry. And it could be that there are still some expectations in some parish settings that that's sort of what they hope."

Lack of privacy

For clergy who live in a local congregation's parsonage, privacy is often disturbed by congregation members who understand the parsonage to be part of the church's property, with little regard for the residents. Beth has lived in several parsonages throughout the years. "I think parsonages, generally speaking, that are on church properties are often treated like annexes to churches in a lot of situations. We lived in a parsonage one time that was used as an annex . . . the basement was used as a storage unit basically. People would stop over all the time asking to go to the basement to get Christmas decorations, Boy Scout stuff, whatever." She continued, "I've lived in two parsonages that were in the parking lot of the church, and I've lived in, well, three in the parking lot, and two that weren't. The two that weren't in the parking lot aren't treated the same. Because, for one thing, they're not pulling up into your driveway every Sunday or Wednesday night or whenever the doors to the church are open." She told another enlightening anecdote about living in a parsonage her family nicknamed, "the Annex

Parsonage". "Several times, some of the older ladies would stop in on a Saturday morning and ask to use our kitchen to heat up a casserole for a church function."

Congregational struggles

The state of congregational health has an impact on clergy spouse well-being according to the participants. To the question "How does the state of the congregation affect clergy spouse well-being?", Beth said, "Oh wow! That's huge. I have to be honest . . . in the past, it has been real easy to let the church and their issues become our issues." She explained that the church employed another staff member who had health problems, but the staff member would not acknowledge the health issues. She continued, "So we kind of became an enabler for the staff member . . . the congregation enabled him to stay in the position, and the staff did extra work to make up for the work he wasn't doing. There was a lot of dysfunction around that, and there was a lot of tension on staff and it trickled down to our home. It absolutely did."

Matthew spoke more generally, saying, "Church people, in a lot of ways, are like any typical person. We're all broken people and have bad habits and sometimes don't handle things the right way." He then gave an example of a struggle within his wife's congregation. Matthew's wife was responsible for a week-long Vacation Bible School program, including recruiting and training volunteer leaders. "She had a volunteer who, at the very last minute says, 'Well, I don't want to . . . I'm going to bail out on you for Vacation Bible School because you've got a practicing homosexual who's also a leader for Vacation Bible School.' So, I end up knowing that because, it affects Marie. It eventually affects me because I help her out so much for Vacation Bible School."

Kim was also very expressive about the state of a congregation as it relates to clergy spouse well-being. She said, "Well, when I think things are going well, the clergy and the spouse's well-being is very good, but when things are going bad, there's incredible stress. Incredible . . . to a breaking point kind of stress. And you just don't know . . . it's tough." In one local church situation that was particularly difficult, Kim said there were "a lot of sleepless nights, a lot of tears, a lot of health issues and chest pain, and . . . just a lot of brokenness."

Susan also shared an example of a difficult situation that affected her well-being, as well as the well-being of her marriage. "This one lady had a sick dog and she asked my husband to go with her to the vet every other week. She was an older lady, very controlling, and manipulative. She was the chair of the SPRC, sang in the choir, and was our next door neighbor . . . oh, and the church property had been her family's land. So my husband really didn't feel like he could say 'no' to her." Susan explained that therapy helped them navigate the difficult situation.

Debbie offered a different perspective when she said she was aware of situations in which congregations "are out to get the pastor and, since it doesn't affect just one person, the spouse and the family too." She continued, "I will say though that we're very transparent, so we really don't get into those situations. It's more exposing of them that it exposes us. We just lay it out from the beginning and that's that."

A female participant from Group 3 stated the problem, showing the impact of congregational struggles on the clergy spouse and family, "People calling you at all times of the day or night, saying really nasty things to you, saying nasty things to your spouse and children who don't want to ever go back to church again. Just tearing your family

apart. Another pastor in Group 3 agreed, adding, "I have served in health congregations and I have served dysfunctional ones. And the dysfunctional ones are life-threatening. There are several books on topics like clergy killers and dysfunctional congregations.

And I just can't emphasize enough how much of a toll that takes on a clergyperson's health."

Community

For the purposes of this study, the category of "community" encompasses non-church entities with which clergy spouses interact. Schools, stores, fitness facilities, and recreational venues were considerations when reviewing the data. Duke University's Clergy Health Initiative study with clergy revealed food deserts and a lack of recreational facilities for many of their participants (n = 1295). However, the limited nature of this study only revealed one area of concern for clergy spouses. If the spouse of a clergy person is employed outside the home, often they will need to seek employment in the new community.

A male pastor in Focus Group #2 shared a story about his wife's experience in finding work in the context of the appointment process. "We enter into ministry and it's an itinerancy system. We recognize that. And I remember, every year they used to ask on the application, 'What can we do to be aware of your spouse and children.' And every year I filled it out and said, 'Well, my wife's a CPA. She needs to be close to a major area.' And every year, or every move, I got sent somewhere where there was no CPA firm. And finally when they asked me the last time I put on there, 'I have answered this question every time I've moved and you don't read it so I'm not going to answer it.' And I got moved somewhere where there's a CPA firm."

A pastor in Focus Group #8 spoke about clergy spouses' relationships to community in the context of moving to a new appointment. "The spouses have to find a niche, they have to find friends, they have to find a job. The names of all the people in their world are different. The location of the laundry, the dry cleaners, the beauty shop, the supermarket, all different. It's as though you took this family and put them on a different planet because their whole world is suddenly new."

Policy

The final category represented by McLeroy's Ecological Model of Health
Promotion is Policy. For the purposes of this study, the context of "policy" includes any
hierarchical organizations of the United Methodist denomination beyond the local
congregation. Decisions made at the Districts and Annual Conference levels have the
most impact on clergy and clergy spouses. Decisions regarding itinerancy have an impact
on clergy spouses, the primary theme derived from the data. While denominational
leaders are inclined to develop programming specifically for clergy spouses,
communication regarding events is ineffective, as well as the programming content,
combined to review the second theme, resources for clergy spouses.

Itinerancy

One of the defining practices of United Methodist clergy is itinerancy, a system in which pastors are appointed to local congregations. Pastors who itinerate in any given year generally move during the final week of June. The clergy spouses participating in the interviews and the clergy members participating in the focus groups offered multiple stories of difficulties experienced during a move.

Beth told the following story, but called it a "funny example". "We really wanted to live in a neighborhood because our children were little. Our former house was on a busy two-lane road and we were just concerned because they liked to run in the yard. And so, the District Superintendent, [going by the form submitted by the church], said, 'Oh, they've written here that your parsonage is in a neighborhood. Well, it's not quite in a neighborhood, but it backs up to a neighborhood and it's really quiet.' And it ended up that it was on a busy two-lane road."

Bishops, with information provided by the District Superintendents, make appointments based on the needs of local congregations. Kim seemed to indicate there was little consideration for the clergy in the case of her husband's experience. "It was quite surprising to find out that he'd been appointed back to a church without anyone ever coming to talk to him about it." He had been working as an educator for the Foundation, a fund-raising branch of the United Methodist Church. Her spouse was asked to "do a church start, from scratch" in another city. He declined the offer, saying, "we don't feel called to that". The bishop eventually convinced Kim's husband to take the appointment, as appointments are typically non-negotiable. Once they arrived in the new community, they were asked by other churches in the United Methodist denomination to find another place to reach out to potential members of the new church, the new church which the Bishop and District Superintendent charged Kim's husband with beginning. As Kim describes it, "Another church in our denomination says, "Oh, but this is too close to our church. Don't talk to people in this area. This is our neighborhood. That's our zip code. That's our territory. Don't come here." The move took a physical toll and financial toll on Kim and her husband.

Jennifer also shared a story about a move her family made, but felt they were "being moved from a church for the wrong reason". She stated the congregation was experiencing several losses including a pastor, and associate pastor, and a youth pastor. Several members of the congregation left to go to other churches. Jennifer believed that because the required apportionment was not satisfied, "they may consider putting you somewhere else. Although, you know you're doing your best to try to keep the church afloat and to keep it from sinking. We knew that if they moved us, it would finish tearing the church to pieces. And that's what's very upsetting . . . when it's not all looked at in the right perspective. They're not looking at the health of the church and how stability would help it. I felt like they were just looking at the dollar." Members of the congregation petitioned for Mark to stay on as their pastor and the Bishop conceded. Jennifer and her spouse have since enjoyed many enjoyable years with this congregation. She said the congregation continues to experience noticeable growth.

Debbie spoke to the inconsistency in housing options for appointments. "It definitely added stress to the years when we've had to make a transition from not having a parsonage to having a parsonage and so, you know, having to provide a home in some situations and not, in others or having to sell a home before you go to the next one."

Susan also alluded to the difficulty of the itinerant system. She suggested, "the system of moving from place to place really should be revisited. I think John and Charles Wesley [UMC founders] would even agree that it was developed for a different time and place. It's hard and it's inconvenient and it leads to stress for our families."

Clergy participating in the focus groups also spoke about the impact of moving to new appointments on their spouses and families. A female pastor in Focus Group #2

spoke about the grief process families and spouses experience. She concluded her thought with, "The spouses are very often left out of that deal [appointment decisions]." When asked "What can we be doing to promote well-being for clergy spouses?", a male participant in Focus Group #5, whose wife is also clergy, jokingly replied, "allow us to live in the same county?" His wife added, "This is the first time we have been this close. We're three miles apart and we live in the same house." As clergy age, they may experience a desire or need to feel more settled. A clergy in Focus Group #9 said, "I think as we have gotten older, especially for my wife, it has gotten more difficult. And we have always, we enjoy what we do, but that is a tough issue. You want to nest. You want to have your own place."

One of the District Superintendents acknowledged the difficulty spouses have with relocation. "Our system hasn't really changed in 200 years, but our culture has. We spend most of our time making appointments. Regarding relocation, most problems are with the spouse." He continued, "I remember visiting a pastor unpacking a box and I told him the resources available to him. I am still haunted by the spouse who asked me, "Mr. Superintendent, what do you have to offer me?" Another District Superintendent reminded his group of an important factor in the itinerancy system by saying, "The stress of moving . . . and I really do think this is relevant to this health issue. The stress of moving can be just almost unbearable upon our clergy. Because they're having to start over, moving itself, and that fact that the Annual Conferences do not really provide the financial support that you'd need in order to move adequately. And so many of our pastors are using U-Hauls and for six to eight weeks when they arrive, they're not worth

shooting." Another male in the group added, "And we're not dealing with the other part which is dealing with the spousal anguish."

In some appointments, clergy move into housing that is owned by the church, the parsonage. Others are given a housing allowance, monies set aside specifically for rent, utilities, etc. One of the District Superintendents said, "I think this whole issue of homes being owned by the church is very destructive to the overall psychological health of our clergy spouses." The itinerancy is certainly an impactful issue for clergy, clergy spouses, and clergy families.

Resources for clergy spouses

Resources for clergy spouses are seemingly sparse. Beth stated, "They [District and Conference level resources] do a pretty good job, for the most part, with the pastor, but they don't think about the spouses. Spouses, I don't think, are on the radar." First of all, communication with clergy spouses seems to be a difficult undertaking. Kim, who had been involved in clergy spouse programming early in her husband's ministry said, "communication was always a hard thing to get . . . being able to communicate with clergy spouses and with the Methodist churches. When the pastors are moving and their email addresses change . . . in that time, you know, email addresses were always changing. But you never knew how to get in touch with the spouse. It was always having to contact the pastor to get the spouse's information." It goes without saying that if communication was difficult, programming and other resources made available to clergy spouses were not consistent.

According to the data collected from clergy spouses and clergy who participated in the focus groups, very few effecting programs for clergy spouses have been sponsored

by the United Methodist Church conferences in North Carolina. Participants spoke of occasional retreats or gatherings at Annual Conference. According to participants who were interviewed, none are currently participating in denominational or district events for clergy spouses. Some participants have been active in the past.

Beth said she was aware of a spring retreat for clergy spouses, and a gathering at the Annual Conference, but does not participate, partially because consistent and quality child care is not available at the events. She was unaware of district-level events, but also acknowledged that since the district structure changed in 2011, (reducing the number of districts from 15 to eight in the Western North Carolina Conference), finding a central location for everyone is more difficult than in previous years.

Matthew, whose wife is a minister in the North Carolina district, attended a clergy spouse meeting, but did not feel welcomed by the group, who were all women with his presence the exception. He stated he has no further plans to attend clergy spouse events, whether sponsored by the district or denomination. Kim enjoyed working with other clergy spouses as her husband began his ministry in North Carolina. She held leadership roles and helped to organize events for clergy spouses for about six years. She is now working full-time as a nurse and stated, "clergy spouse things are not a priority in my life or where my focus is at the moment."

Jennifer stated she understands the need for the support, but also said she does not attend clergy spouse events very often. "Maybe it's because my daughter was older and I was spending more time with her in my spare time. But I can see that there is a need for spouse get-togethers. We have a situation with some dear friends . . . it's not turning out to be a good situation . . . and you know, sometimes spouses will let you in and then

sometimes they won't. They just don't want their laundry . . . they don't want to talk about it."

Spouses are invited to attend educational events held for clergy occasionally.

One pastor in Focus Group #1 called such events "tagalong opportunities". However, the costs can be prohibitive. "And if your spouse wants to come, it's a hundred dollars extra.

And you know, which is fine, but she may or may not be interested in that [topic]."

Another pastor in Focus Group #5 said, "Please don't make it something that cost so much! Don't require it and make it so expensive that poor pastors and their spouses can't afford to go."

One of the District Superintendents said he'd talked with his wife about clergy spouses in his district. He reported, "She has said that this is a really tough nut to crack. She said, 'We meet together, but we don't know each other. We don't work in the same place. Our children are different ages. The only thing we have in common is that we're married to clergy and that's not really enough to form a cohesive bond there.'" Another District Superintendent in the Western North Carolina conference said, "We don't have a clergy spouse group in [our] district because they can't come. If you try to do it in the daytime, most of them are working. You try to do it at night, well that's the time they're with the children or doing their own thing or whatever. So we just gave up on trying to get them together. It makes it so they don't know each other. So, to be able to have a way for them to share concerns or whatever is exceedingly difficult."

A female participant in Focus Group #4 gave this anecdote: "We got a thing in the mail recently and my husband it hanging on to it. 'We're having a spouse retreat.' Well, lap quilting and having a manicure is not his thing." The flyer suggests bringing favorite

projects to the retreat. It concludes with "We'll go shopping and get manicures." Another participant's wife received the same flyer. He said, "My wife threw it away because she said, 'Tell me we're going to go to the Bahamas for a few days . . . ""

Research Question #2 - What can be done to nurture the well-being of clergy spouses?

The second research question posed in this study was a question originally included on the focus group questionnaire created by the Duke University Divinity School Clergy Health Initiative. Responses to the second research question include direct suggestions, as well as indirect statements reflecting clergy spouse's desires for inclusion or consideration, as they relate to functions of the United Methodist Church, locally and denominationally. Interestingly, the data contained fewer responses related to solutions for clergy spouse well-being than the current state of clergy spouse well-being. Intrapersonal

Clergy spouse participants who were interviewed, as well as clergy who participated in the focus groups, speaking on behalf of their clergy spouse acknowledged both personal joys and struggles in their relationship with the United Methodist Church. When asked, "What can be done to nurture the well-being of clergy spouses?", only three anecdotes were made as related to the intrapersonal category of McLeroy's Ecological Model of Health Promotion. In terms of dimensions of well-being, emotional and spiritual coping skills were mentioned. Debbie's expressed feelings related specifically to itinerancy, but was focused on her internal preparation, "[Moving] has not been fun, but I've always been prepared to do it and I'm ready to do it when the time comes. It's always just being flexible and restructuring . . . I knew what I was getting into when we married "

Kim spoke about her personal coping skills in the context of a sudden and unexpected move for her family. She said, "The way the move happened was a struggle and that's where you've got to keep the faith and keeping our devotion time and prayer time together because that move could have torn us literally apart."

Similarly, Susan suggested an internal adjustment as well. "Pastors and their spouses really have to step up and grow a backbone in some situations. I used to tell Adam [Susan's spouse] that it's important for the church that he models good confrontation skills. So many pastors are like, 'thank you, sir, may I please have another?' and they just keep getting . . . I wouldn't say abused, but maybe taken advantage of."

Interpersonal

The word, "cautionary" seems to best describe the approach clergy spouses make in the development of relationships, in response to the question, "What can be done to nurture the well-being of clergy spouses?" Three themes were identified in the process of analyzing the data: establishing boundaries, seeking pastoral care in the absence of pastoral support for clergy spouses, and enriching marriage and family relationships.

Establishing boundaries

Establishing boundaries within relationships is an intentional skill for clergy and clergy spouses. Kim explained her family's intentional establishment of boundaries in terms of time and priorities for her husband, "I think we've done a good job of keeping boundaries up." Jennifer stressed the importance of "building a wall around yourself" in order to protect oneself. Susan specifically talked about the establishment of boundaries. She said, "I've been a real stickler this time about my boundaries--getting involved only

in what I want to be involved in, showing up when I want to show up. She even suggests "offering workshops or creating a Sunday School curriculum about boundaries and self-care. She also believes training the Staff Parish Relations Committee about establishing and maintaining boundaries would be helpful for clergy, clergy spouses, and congregations.

Pastoral support

As discovered from the data, the absence of pastoral support was acknowledged by clergy and clergy spouses. In addressing this absence, some clergy spouses choose to attend a different community of faith, apart from their spouse's appointment. One focus group member described the spouse's attendance at another congregation as "radical". The clergy want their spouses and families to be part of a community of faith too. One female pastor participating in Focus Group #4 said, "There were a couple of times when H was thinking that he could join another church. And I was like, 'Be my guest.' I would like him here, but if he wanted to go somewhere else, go somewhere else. Wherever he'd be happy and the kids the same way." A female District Superintendent seems to express surprise as she talked about a clergy spouse in her district. She said, "The pastor's spouse found her niche--she wasn't working outside the home--but she found her niche in a different church. Now that's a bit radical. I think it says something about their desire to be part of a faith community . . ." Another pastor serving a large church indicated that his senior pastor's spouse "goes to a different church and always has." Each family is different. Some choose to worship together even though their spouse or father is the pastor. Others choose to practice their faith in a separate community of faith. Spouses are

not required by the denomination to attend the church to which the spouse is appointed, but expectations of the congregation may influence the family's decision.

Marriage and family enrichment

Another theme related to the nurture of clergy spouses derived from the data was for clergy and clergy spouses to engage in marriage enrichment events, including taking uninterrupted vacations, and participating in intentional retreats focused on strengthening marriage relationships. A male participant in Focus Group #1 said, "Clergy families are under unique stress. Help us develop top-notch quality marriages. Because people look at us. They expect us to have a perfect marriage. And many of us--and please don't take this personally--many of us have marriages that are hanging by a thread. God and the church has almost a hundred percent of our time. We need something for us. If you're looking at making my family healthier, help us be well-rounded people and not just church people." A participant in Focus Group #5 said, "I think it would be nice if retreats would require spouses, and we are side by side doing all that we are doing . . . together, not just meetings, but spiritual growth . . . we are separated enough."

A District Superintendent participating in Focus Group #6 said, "I think time away is really a very . . . these are very dedicated, resilient people and it's amazing what just some retreat time can do to renew them. If the pastor can get away and they would actually have some family time." A District Superintendent in Focus Group #7 offered a specific suggestion related to enriching the marriage of clergy and clergy spouses, by suggesting taking 18 couples away for a weekend retreat at least every two years. Some clergy spouses have a different, less-structured idea about marriage enrichment. A male participant said, "My own wife said, 'The last thing I want to do is go away for a

weekend with a group of clergy . . . I just want to go with you. The last thing I want to do is go with a bunch of church people."

A female participating in Focus Group #11 also spoke of the importance of having time with her husband. Not only did she emphasize the importance of spending time together, but also stressed the importance of the church's affirmation for time spent together. "My husband and I need time together. We tend to run in two different directions and meet each other in the driveway sometimes. We just got back from a forced wedding trip that he didn't want to go on, but he went with me anyway. And it was just four days of being together. And I hadn't seen my husband that long in four days, in that period of time, in forever. So, we need time together. And we need the church to affirm that time together . . ."

Institution

Three themes were identified from the data regarding the nurturing of clergy spouses by way of the local congregation. Education for pastors and congregants and changes in congregants' expectations of clergy spouses seemed to resonate with participants. Finally, the need for assistance in dealing with congregational struggles was identified as the third theme.

Education

Education in the United Methodist Church is achieved through Discipleship and Sunday School curricula. United Methodist teenagers are encouraged to go through confirmation classes, which then allows them to become full-fledged members of the congregation. Confirmation classes are include lessons about Methodist history, church polity, and UMC doctrine. One clergy spouse suggested the adult congregants receive

more education about church polity. When asked what might improve the state of congregations, Jennifer replied, "A lot of education from the pastors. The congregation, the administrative chair, the SPRC, members of finance . . . they don't know their rights. They don't know a lot about the church polity. Nobody's ever told them much about 'well, we've got this Book of Discipline here . . . let's look and see what happens in this situation.' What can a church do? What are we allowed to do or say? We were in a more rural church before we came here, and they needed to remodel the sanctuary. So, there's Duke Endowment . . . and a pastor who know that, knows there's free money for rural churches. The people just don't know."

A participant in Group 3 said education was foundational to clergy and clergy spouse well-being: "Only through education can they [congregations] become aware that maybe there is a problem and then at that point begin to address it [clergy well-being].

Change in expectations

The expectations of churches for clergy spouses is mixed. Some congregations, including congregational leaders, want the clergy spouses to be very active in the clergy's work. Others congregations realize the clergy's work is just that, the work of the employed clergy, not that of the clergy spouse.

Beth said she decided to manage expectations of congregations by choosing to participate in activities that appealed to her. "I wanted to start things, and I did start things because there was a need for them. I think that's one of my gifts that I can use because I have been in many churches. I kind of like for the new churches to learn from what I've learned, so I've actually started some things, but it wasn't at all because I felt pressured to or obligated to. It's more of me wanting to."

One male participant in Focus Group #10 said, "It takes your wife going ahead and saying, 'No, I'm not the preacher's wife. I'm John's wife. But I also have my own life and I do my own thing." Another pastor in Group 10 said his wife is a medical doctor who has on-call hours and a very demanding career. "She can't be the prototype minister's wife. And there's been some tension I guess with that . . . again, that's just changing the culture." Another pastor reported a similar encounter that happened to a colleague's spouse. He said, "one of the first questions that people asked his wife was, 'So F, do you sing in the choir?' 'No.' 'Do you play the piano?' 'No.' 'Do you host the United Methodist Women monthly at your house?' 'No.' 'Do you type?' 'No.' 'What is it you do for M?' And she said, 'I'm his wife. I think that's enough.' And the congregation respected that."

Addressing congregational struggles

While many shared stories of how congregational struggles affected clergy and clergy spouses, when asked "what can be done to affect change in congregational struggles?", very few responses were forward-thinking. Most participants with past experiences of struggling congregations continued to share their experiences.

One of the pastors in the Focus Group #3 suggested the use of a third party in assisting with congregational assessments. "Maybe not just as intervention but more of a preventative model of congregational health assessment. I'm not exactly sure what that would look like but something that was more routine as opposed to crisis intervention." Along the same lines, another pastor suggested a "consultant type of person to come in and help you with the evaluation of your church."

Community

The community category of McLeroy's model as it relates to the second research question received quite a limited response. One participant spoke to the issue of community as it relates to nurturing clergy spouse well-being. Jennifer said she is intentional about becoming involved in the community. "I've tried to be knowledgeable about community stuff. It opens my eyes to the broader area. So I see things, and hear things that I normally wouldn't see and hear. It's wise to just get out of our own little church world." She also indicated that joining a local fitness facility had helped her achieve weight loss goals, "and it had nothing to do with church."

The itinerancy system is a defining element of the United Methodist Church denomination. However, participants in this study expressed thoughts or ideas that might alleviate some of the stressors associated with the appointment process.

Susan said, "I wish there was more transparency in the appointment system. I don't feel it so much now, but there have been times when I didn't trust the District Superintendent. They're human too and I always felt like they had their favorites. I think all the people who work in churches work hard, and are trying to please so many people. It just seemed like people who were in healthy churches were lucky and got good appointments. We've always had mostly good appointments, but I've seen some pastors get 'demoted' and were sent to smaller or struggling congregations."

Beth attended a meeting about the appointment process with her husband and the District Superintendent. Her spouse set up the meeting with the District Superintendent and then asked if Beth could attend. Beth said of her husband, "you don't have to meet

with the District Superintendent if you're going to move, but he always does. He just feel like it's important. Everybody fills out a form and it's due in December and you set your intent there as well, but he just like the face to face." She continued, "I think for the District Superintendents to go to the churches is important and see the individual church's personality is important in the appointment process." At the end of 2015, there were 1,086 congregations in the Western North Carolina Conference, divided into eight districts. In 2014, there were 808 congregations among the eight districts of the North Carolina Conference, which encompasses 56 counties from Elon to the coast, and from the South Carolina border to the Virginia border. The size and scope of North Carolina's 16 districts make it virtually impossible for each District Superintendent to visit each congregation on multiple occasions.

Resources for clergy spouses

While occasional programming at the district and conference levels is available for clergy spouses, some of the participants responded with ideas that may spur better attendance, and perhaps, more consistent programming. First of all, currently neither the North Carolina nor Western North Carolina Conferences have regular communication designed for clergy spouses. A database with clergy spouse information also seems to be nonexistent. In discussing her involvement with other clergy spouses, Susan said, "I'd at least like to have an email list of other clergy spouses."

Second, the programs offered to North Carolina clergy spouses are sporadic and unappealing to participants of this study. Beth said, "I would like to see the conference do more. You know they did the Clergy Health Initiative. I would really like to see something for the spouses or even workshops . . . on setting boundaries, so many

different things." One female participant in Group 1 stated, "I wish some focus for husbands of clergy members. Every mail that he gets seems to be focused toward women." Another participant said, "They need something for working spouses too. My wife's in the chemistry industry. She would much rather do something besides needlepoint."

A male participant in Group 3 believes that any programming offered for clergy spouses should not be "connected to the hierarchical structure that we have through districts and conferences. In other words, something of their own choosing. Not something mandated. Not something sponsored by the office of the District Superintendent or the office of the Bishop. Some of those carry some baggage with it, you know."

Summary

Analyzing the data through the framework of McLeroy's Ecological Model of Health Promotion provides a multi-level, multi-faceted perspective of clergy spouse well-being. Life struggles, relationship development, and impassioned service are recognized in examining the categories of the intrapersonal, interpersonal, institution, community, and policy. In reviewing the results, the opportunity for supporting and nurturing clergy spouse well-being is equally multi-level and multi-faceted.

CHAPTER V: DISCUSSION AND RECOMMENDATIONS

Chapter 5 offers a culminating summary of the research problem and the research findings, followed by a discussion of the study in relation to current literature.

Limitations of the study are introduced, and the chapter concludes with recommendations for future studies in clergy spouse well-being.

Research problem

Clergy spouse well-being within the context of the United Methodist Church in North Carolina provided the basis for the research. This study was created with the desire to better understand the current state of clergy spouse well-being and to seek ways in which to nurture clergy spouse well-being. Duke University Divinity School's Clergy Health Initiative was instrumental in the development of this study. The Clergy Health Initiative, which began in 2008, was a program designed to better understand the determinants on the well-being of clergy, as well as provide health promotion interventions for clergy including health coaching, health screenings, and conversations with United Methodist leaders. The limited study of clergy spouse well-being served as the primary impetus for this study.

For this study, two research questions were posed: 1) What is the current state of clergy spouse well-being and 2) What can be done to nurture the well-being of clergy spouses? Themes derived from the data were categorized based on McLeroy's Ecological Model for Health Promotion. The five categories included in the study were:

intrapersonal, interpersonal, institutional, community, and policy and were addressed separately for each of the two research questions.

Findings

Research question #1: What is the current state of clergy spouse well-being?

In light of McLeroy's Ecological Model of Health Promotion, clergy spouses named several elements that impact their well-being. The precarious position of clergy families led to feelings of isolation and resentment for some clergy spouses. Isolation among male clergy spouses is described even within the context of clergy spouse gatherings. For many clergy spouses, the sense of having a call from God to partner with their spouse in ministry allowed for expressions of contentment.

Four themes were identified within the interpersonal category. Clergy spouses have strong connections within the family unit. In addition to being the marriage partner, clergy spouses expressed feelings of taking on the roles of counselor and teammate for their spouse. Authentic relationships are difficult to achieve with members of the church's congregants. Friendships developed outside the context of the church, though, allow for authenticity and depth. Clergy spouses also realize the absence of pastoral, or spiritual, support within their lives.

The congregation's expectations of clergy spouses, lack of privacy, and struggles within the congregation were themes identified in the category of institution. The size of the church, needs of the congregations, and resistance to changing old habits contribute to the expectations of the congregation. The close proximity of the parsonage, and the church's ownership of the parsonage contributes to lack of privacy for some clergy spouses. The struggles of the congregation are detrimental to the well-being of clergy and

clergy spouses. The struggles of the congregation are mirrored in the lives of clergy and clergy spouses, manifested as physical illnesses, emotional turmoil, and relationship problems.

Of the five categories described in McLeroy's model, the category of community seems to be the least impactful on clergy spouses. Because United Methodist clergy are itinerant, clergy spouses are often unable to establish long-term careers. Finding employment in new, sometimes rural communities is a challenge.

The fifth category of McLeroy's model is the broadest arena of impact - policy. For the purpose of this study, policy related specifically to guidelines and policies of the larger United Methodist Church, to include district, conference, and national level. Itinerancy is a very stressful element for United Methodist clergy spouses. The guarantee of itinerancy is a non-issue for clergy spouses as it is characteristic of the United Methodist Church. The manner in which itinerancy occurs, though, allows for very few choices made by clergy spouses. The lack of resources for clergy spouses goes beyond itinerancy. Communication with, and among, clergy spouses is sparse. Programming for clergy spouses seems to be oriented to female clergy spouses, and is somewhat superficial in content.

Table 5: Identified themes found related to research question #1

Intrapersonal	Interpersonal	Institution	Community	Policy
Definition of well- being	Family	Expectations of clergy spouses	Employment potential	Itinerancy
Isolation	Marriage	Lack of privacy		Resources for clergy
Isolation among male clergy spouses	Friends outside the church setting	Congregational struggles		spouses
Resentment	Absence of pastoral support			
Call to partner in ministry				

Research question #2: What can be done to nurture the well-being of clergy spouses?

Participants in the study were less able to offer suggestions for improving the current state of clergy spouse well-being. Responses to the question were fewer in number and less-developed in content. Still, some suggestions were made for each of the five categories.

Emotional and spiritual coping skills highlighted the intrapersonal component for some clergy spouses. Internal preparation for new appointments, being faithful to God's call to partnership in ministry, and refusing to take on the role of victim were elements participants stated as helpful attitudes from the perspective of clergy spouses.

Relationally, or interpersonally, clergy spouses acknowledged the need to develop strong boundaries for self and family in dealing with congregational members. Seeking pastoral support, either from other pastoral relationships, or by joining another congregation were offered as nurturing behaviors in the absence of pastoral care and support. Retreats related specifically to marriage enrichment for clergy and their partners, and uninterrupted time away from church functions was also viewed as nurturing elements for clergy spouses.

Nurturing clergy spouses in the local congregation, or McLeroy's institution category, could be introduced to pastors and congregants through educational curricula about denominational resources and United Methodist Church polity. The District Superintendent could be instrumental in effecting change in culture for some congregations, especially as it relates to the congregation's expectations of the clergy spouse. The determination of the clergy spouse to set a personal agenda within the context of the local congregation is also a beneficial factor.

The study did not reveal a great deal of thought related to nurturing elements within the community, the fourth category. However, one participant suggested that learning about the larger community could be beneficial for personal well-being and perspective.

Finally, the study highlighted the desire for more consideration for clergy spouses in the appointment process. Numerous participants suggested transparency, and more involvement by, and with, the District Superintendent in the appointment process. The development of resources specifically designed for clergy spouses and families could also nurture the well-being of clergy spouses. The resources could include workshops and retreats with substantial content such as setting boundaries. A clergy spouse database shared with clergy families is also a desire of many participants.

Table 6: Identified themes related to research question #2

Intrapersonal	Interpersonal	Institution	Community	Policy
Spiritual coping skills	Establishing boundaries	Education	Knowledge of community resources	Itinerancy
Internal adjustments	Seeking pastoral support	Changes in expectations		Resources for clergy spouses
	Enriching marriage and family relationships	Congregational struggles		

Discussion

Relevant responses to the first research question, "What is the current state of clergy spouse well-being?", were assigned to one of five categories attributed to McLeroy's Ecological Model of Health Promotion: intrapersonal, interpersonal, institutional, community, and policy.

Myers, Luecht, and Sweeney (2004) describe a 4-factor model of wellness, including cognitive-emotional wellness, physical wellness, spiritual wellness, and

relational wellness. When asked to define 'well-being', clergy and clergy spouses named dimensions that corresponded to the 4-factor model of wellness, which served as a framework for the understand of well-being. The language of well-being is consistent with clergy and clergy spouses alike.

In a return to the literature, several aspects of clergy spouse well-being were affirmed by the data collected from clergy spouses and focus groups. Isolation and resentment (Brunette-Hill, 1999; Hill, et al., 2003, Valeriano, 1981) are well-documented among clergy spouses. Congregational expectations of clergy spouses have changed over the past several decades (Brunette-Hill, 1999). However, the prevalence of a two-person single career among Protestant congregations, with female spouses in the role of pastoral assistant continues (Murphy-Geiss, 2011). While some of the participants in this study believed that the trend was moving toward more independence for clergy spouses, others realized the expectations of clergy spouses by congregants remained intact within individual congregations.

Several studies have shown that relocation of clergy families affects overall life satisfaction of family members (Hill et al., 2003, Lee, 1999; Lee & Iverson-Gilbert, 2003; Morris & Blanton, 1994; Morris & Blanton, 1998; Proeschold-Bell et al., 2009). Clergy spouses have many areas of frustration as individuals. The inability to have life-long careers with one employer was a specific area of dissatisfaction discussed by the participants in this study.

The limited availability of literature related specifically to clergy spouses allowed for several discoveries in this study. First, the sense of God's call to share in ministry with the clergy partner was an area of particular surprise. Besides several participants

stating their personal call to ministry was to partner with their spouse in the work of the church, the use of the pronoun "we" in the context of appointments and ministerial projects were scattered throughout the conversations, especially in conversations with clergy spouses. For example, several spouse's began sentences with "When we were called . . ." or "When we talked with the District Superintendent . . .".

Another area of discovery relates to clergy spouse's inability to connect with other clergy spouses. Several participants believed the need for camaraderie was present, but realized the lack of a formal method of connecting. Substantial programming to address evidence-based problems with itinerancy and housing were also areas of discovery for this study.

Limitations

The size and scope of this study was quite small. Six clergy spouse participants volunteered for the personal interviews and the focus groups included 88 pastors. There are over 1,200 United Methodist Church clergy in North Carolina and over 44,000 United Methodist Church clergy in the United States. This study was tangential to Duke University Divinity School's Clergy Health Initiative. Therefore, participants were selected based on their connection to the United Methodist Church in North Carolina, mirroring the participants in the Clergy Health Initiative. The scope of this study was quite broad in that well-being incorporates physical, cognitive-emotional, spiritual, and relational elements of wellness.

Another limitation was the lack of access to clergy spouse information. In order to protect the privacy of clergy and clergy spouses, contact information was not made available following a request to the two bishops' offices in North Carolina, the Western

North Carolina Conference bishop and the North Carolina Conference bishop. Therefore, a post on Facebook was the sole recruiting tool, resulting in the minimum number of clergy spouse interview participants. The use of Facebook as the only recruitment venue also limited the number of readers of the original request for interviewees.

Important themes may be missing due to the method of analyzing the data. The theoretical framework of McLeroy's model was designed to reveal themes within specific categories. Consequently, themes may be present in the data that are not specific to McLeroy's model.

Finally, the questionnaire posed to the interview participants was designed to correspond to the questions asked of the clergy participants in the archival, previously collected, focus group data. A quantitative element in the research may have provided substantial statistical measures, allowing for more generalizable conclusions and findings of the research.

Recommendations for Further Study

There are several factors that limit the conclusions offered in this study. The small sample size and demographics, inaccessibility of contact information, and research methodology are limitations that affect outcomes of this study. In order to deepen the understanding of clergy spouse well-being, there are several suggestions for further study.

First, collecting data from a larger sample may lead to a broader view of the current state of clergy spouse well-being, as well as suggestions for improving the state of clergy spouse well-being. While information was gleaned from the six clergy spouse participants and archival focus group data, the inclusion of more clergy spouses would

have resulted in more anecdotal information on which to base research conclusions.

Focus groups of clergy spouses, individual interviews, and surveys from a larger number of participants would be beneficial.

Second, this study is based on one-time conversations, either in a personal interview or in the focus group. Participants did not have access to the questions prior to the conversations. Giving participants multiple opportunities to respond or giving participants access to the questions prior to conversation would be beneficial, especially for participants who appreciate time to process the meaning and value of the questions.

Third, while the United Methodist Church has unique characteristics that allow for compelling research, the inclusion of clergy spouses from other denominations is vital to understanding this segment of the population. The exploration of denominational characteristics or theological frameworks could provide models on which to base research questions.

Recommendations for Practice

Anecdotes from the data tell the stories of committed, genuine, and resilient people dedicated to their families, marriages, and lives as clergy spouses. Local congregations, the 16 districts, and the two North Carolina conferences could make adjustments to enhance the well-being of clergy spouses.

Within the local congregations, the Staff-Parish Relationship Committee (SPRC) might consider ongoing education with congregation members about the Book of Discipline, allowing congregation members to be reminded, or to learn for the first time, the rights and responsibilities of the clergy, but as importantly, the rights and responsibilities of members of the congregation. During times of pastoral transitions,

local congregations may also consider ways of getting the clergy's spouse connected to resources within the community, based on the spouse's identified needs.

The 16 districts within North Carolina are large, but may consider providing information to clergy spouses about regional resources, to include job-seeking resources, counseling or coaching resources, spiritual directors, and when appropriate, housing options. Although District Superintendents are very busy, meetings with clergy and their spouse is highly recommended when a new appointment is under consideration.

Perhaps one of the easiest recommendations to fulfill is the creation of an electronic, password-protected database, accessible by clergy spouses. The two Annual Conferences might consider accepting the responsibility to create and maintain the database. The database might include filters designed to be usable by zip code, district, city, county, Annual Conference, or by individuals' names.

REFERENCES

- Beebe, R. S. (2007). Predicting burnout, conflict management style, and turnover among clergy. *Journal of Career Assessment*, 15(2), 257-275. doi: 10.1177/1069072706298157.
- Blanton, P. & Morris, M. L. (1999). Work-related predictors of physical symptomatology and emotional well-being among clergy and spouses. *Review of Religious Research* 40(4), 331-348.
- Blizzard, S. W. (1985). The protestant parish minister: A behavioral science interpretation [Monograph]. *Society for the Scientific Study of Religion, 5*.
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Cambridge, MA: Harvard University Press.
- Bronfenbrenner, U. (1994). Ecological models of human development. In *International Encyclopedia of Education, Vol 3, 2nd edition*. Oxford: Elsevier. Reprinted in: Gauvain, M. & Cole, M. (Eds.), *Readings on the development of children, 2nd Ed.* (1993, pp. 37-43). NY: Freeman.
- Brunette-Hill, S. (1999). A life of her own: Role change among clergy wives. *Research in the Social Scientific Study of Religion*, 10, 77-90.
- Cattich, J. (2012). Three models of clergy systems: Analysis of couple processes and spiritual meaning. *Pastoral Psychology*, *61*(2), 179-195. doi: 10.1007/s11089-011-0379-y.
- Charmaz, K. (2006). Constructing grounded theory: A practical guide through qualitative analysis. Thousand Oaks, CA: Sage Publications.
- Creswell, J. W. (2007). *Qualitative inquiry & research design: Choosing among five approaches, 2nd Ed.* Thousand Oaks, CA: Sage Publications.
- Darling, C. A., Hill, E. W., & McWey, L. M. (2004). Understanding stress and quality of life for clergy and clergy spouses. *Stress and Health*, 20, 261-277.
- Darling, C. A., McWey, L. M., & Hill, E. W. (2006). The paradox of children in clergy families. *Journal of Family Issues*, *27*(4), 439-463. doi: 10.1177/0192513X05283980.
- Doolittle, B. R. (2010). The impact of behaviors upon burnout among parish-based clergy. *Journal of Religion and Health*, 49(1), 88-95.

- Frame, M. W. (1998). Relocation and well-being in United Methodist clergy and their spouses: What pastoral counselors need to know. *Pastoral Psychology*, 46(6), 415-430.
- Frame. M. W. & Shehan, C. L. (1994) Work and well-being in the two-person career: Relocation stress and coping among clergy husbands and wives. *Family Relations*, 43, 196 205.
- Fredrickson, J. & Smith, W. (2010). *How the other half lives: The challenges facing clergy spouses and partners*. Cleveland, OH: The Pilgrim Press.
- Friedman, E. H. (1985). Generation to generation: Family process in church and synagogue. New York: Guilford Press.
- Gleason, J. (1977). Perception of stress among clergy and their spouses. *The Journal of Pastoral Care*, *31*, 248-251.
- Grosch, W. N. & Olsen, D. C. (2000). Clergy burnout: An integrative approach. *Journal of Clinical Psychology*, *56*(5), 619-632.
- Halaas, G. (2002). *Ministerial health and wellness*. Chicago, IL: The Evangelical Lutheran Church in America.
- Hall, T. W. (1997). The personal functioning of pastors: A review of empirical research with implications for the care of pastors. *Journal of Psychology and Theology*, 25(2), 240-253.
- Hileman, L. (2008). The unique needs of Protestant clergy families: Implications for marriage and family counseling. *Journal of Spirituality in Mental Health*, 10(2), 119-144. doi: 10.1080/19349630802081152.
- Hill, E. W., Darling, C. A., & Raimondi, N. M. (2003). Understanding boundary-related stress in clergy families. *Marriage and Family Review*, *35*(1/2), 147-166. doi: 10.1300/J002v35n01_09.
- Kamberelis, G. & Dimitriadis, G. (2005). Focus groups. In N. K. Denzin & Y. S. Lincoln (Eds.). *The sage handbook of qualitative research*. Thousand Oaks, CA: Sage Publications.
- Kuhne, G. W., & Donaldson, J. F. (1995). Balancing ministry and management: An exploratory study of pastoral work activities. *Review of Religious Research*, 37(2), 147-163.
- Lee, C. (1995). Rethinking boundary ambiguity from an ecological perspective: Stress in Protestant clergy families. *Family Process*, *34*(1), 75-86.

- Lee, C. (1999). Specifying intrusive demands and their outcomes in congregational ministry: A report on the ministry demands inventory. *Journal for the Scientific Study of Religion, 38,* 477-489.
- Lee, C. & Iverson-Gilbert, J. (2003). Demand, support, and perception in family-related stress among Protestant clergy. *Family Relations*, *52*(3), 249-257.
- LeGrand, S., Proeschold-Bell, R. J., James, J., & Wallace, A. (2013). Healthy leaders: Multilevel health promotion considerations for diverse United Methodist Church pastors. *Journal of Community Psychology*, *41*(3), 303-321. doi: 10.1002/jcop.21439.
- Lehr, F. (2006). *Clergy burnout: Recovering from the 70-hour work week . . . and other self-defeating practices.* Minneapolis, MN: Fortress Press.
- Lincoln, Y. S. & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage Publications.
- McDuff, E. M. & Mueller, C. W. (2002). Gender differences in the professional orientations of Protestant clergy. *Sociological Forum*, *17*(3), 465-491.
- McLeroy, K. R., Bibeau, D., Steckler, A., & Glanz, K. (1988). An ecological perspective on health promotion programs. *Health Education Behavior*, *15*(4) 351-377.
- McMinn, M. R., Lish, R. A., Trice, P. D., Root, A. M., Gilbert, N., & Yap, A. (2005). Care for pastors: Learning from clergy and their spouses. *Pastoral Psychology*, 53(6), 563-581. doi: 10.1007/s11089-005-4821-y.
- Meek, K. R., McMinn, M. R., Brower, C. M., Burnett, T. D., McRay, B. W., Ramey, M. L., Swanson, D. W., & Villa, D. D. (2003). Maintaining personal resilience: Lessons learned from evangelical protestant clergy. Journal of Psychology and Theology, 31, 339-347.
- Mellow, M. (2002). A bulwark in a busy world: The meaning of family for rural clergy. *Journal of Contemporary Ethnography*, 31(6), 706-728. doi: 10.1177/089124102237822.
- Merriam, S. B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco: Jossey-Bass.
- Monahan, S. C. (1999). Who controls church work? Organizational effects on jurisdictional boundaries and disputes in churches. *Journal for the Scientific Study of Religion*, *38*(3), 370-385.

- Morris, M. L. & Blanton, P. W. (1994). Denominational perceptions of stress and the provision of support services for clergy families. *Pastoral Psychology*, 42(5), 345-364.
- Morris, M. L. & Blanton, P. W. (1998). Predictors of family functioning among clergy and spouses: Influences of social context and perceptions of work-related stressors. *Journal of Child and Family Studies*, 7(1), 27-41.
- Morris, M. L. & Blanton, P. W. (1995). The availability and importance of denominational support services as perceived by clergy husbands and their wives. *Pastoral Psychology*, 44(1), 29-44.
- Morris, M. L. & Blanton, P. W. (1994). The influence of work-related stressors on clergy husbands and their wives. *Family Relations*, 43(2), 189-195.
- Mueller, C. W. & McDuff, E. (2004). Clergy-congregation mismatches and clergy job satisfaction. *Journal for the Scientific Study of Religion*, 43(2), 261-273.
- Murphy-Geiss, G. E. (2011). Married to the minister: The status of the clergy spouse as part of a two-person single career. *Journal of Family Issues*, *32*(7), 932-955. doi: 10.1177/0192513X10396660.
- Myers, J.E., Luecht, R.M., Sweeney, T.J. (2004). The factor structure of wellness: Reexamining theoretical and empirical models underlying the wellness evaluation of lifestyle (WEL) and the five-factor wel. *Measurement and Evaluation in Counseling and Development (American Counseling Association)*, 36(4), 194-208.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods, 3rd Ed.* Thousand Oaks, CA: Sage Publications.
- Presnell, W. B. (1977). The minister's own marriage. *Pastoral Psychology*, 25(4), 272-281.
- Proeschold-Bell, R. J. & LeGrand, S. H. (2010). High rates of obesity and chronic disease among United Methodist clergy. *Obesity*, *18*(9), 1867-70.
- Proeschold-Bell, R. J., LeGrand, S., James, J., Wallace, A., Adams, C., & Toole, D. (2009). A theoretical model of the holistic health of United Methodist clergy. *Journal of Religion and Health*, 50, 700-720.
- Proeschold-Bell, R. J., Miles, A., Toth, M., Adams, C., Smith, B. W., & Toole, D. (2013). Using effort-reward imbalance theory to understand rates of depression and anxiety among clergy. *Journal of Primary Prevention*, *34*(6), 439-453. doi: 10.1007/s10935-013-0321-4.

- Richmond, L. J., Rayburn, C., & Rogers, L. (1985). Clergymen, clergywomen, and their spouses: Stress in professional religious families. *Journal of Career Development*, 12(1), 81-86.
- Rowatt, G. (2001). Stress and satisfaction in ministry families. *Review & Expositor*, 98, 523-542.
- Rugenstein, K. (2005). Clergy dissatisfaction: Denominational hierarchy as a salient factor. *The Journal of Pastoral Care and Counseling*, *59*(1-2), 79-86.
- U.S. Department of Labor. Occupational outlook handbook. 2013 ed. Washington: Bureau of Labor Statistics, 2012 [cited 2013 November 17] [http://www.bls.gov/ooh/home.htm].
- Valeriano, P. (1981). A survey of ministers' wives. *Leadership*, 2(4), 64-77.
- Van Dyke Platt, N. & Moss, D. M., III. (2010). The priest's husband. *Journal of Religion and Health*, 49, 233-244. doi: 10.1007/s10943-009-9260-z.

APPENDIX A: CONFIDENTIALITY POLICY

CONFIDENTIALITY POLICY

As a person working with, using data from, or having access to computers on which confidential data might exist within the Duke Center for Health Policy, the Duke Divinity School, or the Clergy Health Initiative study, I understand the importance of maintaining confidentiality with all information. I will never disclose to any individual who does not have express access to this data the identity and or location of study participants, even at the zip code level. This includes pastors.

I will not divulge any information that might identify a person with any health condition who is involved in our research or included in a demonstration project. Such information includes but is not limited to the following information about any individual: name, present location or telephone number, past contact addresses or telephone numbers, infectious diseases clinic, primary physician, case manager or any other personal, medical, or case information.

I agree not to access any individual's records unless expressly necessary for use on a funded research project. Further, before accessing any record of an individual who is personally known to me (regardless of whether the record is required to perform my job), I will consult with my supervisor to determine whether it is appropriate to view the record.

I understand that if I breach the confidentiality of any individual, I will be subject to review by the Research Director and/or Principal Investigator and will be at risk of losing my job. Legal action may be required.

I accept these conditions of work or access to data within the Duke Center for Health Policy and/or the Duke Divinity School. I promise to maintain confidentiality. If I have any questions or concerns regarding this policy, I will contact Rae Jean Proeschold-Bell (919-613-5442).

Witness

	.,
Name (Printed)	<u>Name (Printed)</u>
Name (Signed)	<u>Name (Signed)</u>
Job Title:	
Date:	