

Clergies and self-care during the COVID-19 pandemic: A challenge to pastoral care

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On the 15th of March 2020, the current president of the Republic of South Africa, Mr Cyril Ramaphosa, declared a National State of Disaster as a response to the coronavirus disease 2019 (COVID-19). A range of regulations and directions were effected in many countries to respond to this pandemic. Essential service workers were deployed across the country to help minimise the spread of the virus. Some of these essential service workers lost their lives in the line of duty. Clergies found themselves having to bury more people in a short period of time. The increase in the death rate resulted in an increase in funerals. Therefore, clergies were also part of the essential workers during this pandemic. Clergies also found themselves having to bury fellow clergies. Congregants and clergies became mourners. The church found itself having to adjust to the 'new normal', because the way church nine-function has changed, it will never be the same again. Clergies like many South Africans became chief mourners because they also had to bury their relatives. However, they also had to bury members of their own congregations because of COVID-19 related illnesses. This challenged the way pastoral care has always been done. It challenged clergies to find new ways of doing pastoral care while keeping social distance, protecting themselves and others. This article looked at the practice of practical theology during the COVID-19 pandemic, reflected on caregiving during the pandemic, referred to literature to encourage clergies to acknowledge their own pain and also briefly discussed the change in ministry since the beginning of the pandemic. The aim of this article was to challenge pastoral care to look deep into caring for clergies, especially during the COVID-19 pandemic. As they care for others, they also need to be cared for.

Intradisciplinary and/or interdisciplinary implications: The contextual perspective challenged by this research is the understanding of self-care for clergies, especially during the COVID-19 pandemic. This research calls for a change in the traditional cause of Practical Theology. This research will be done using a literature review on suicide according to both Christianity and psychology.

Keywords: caring; care-givers; clergies; pandemic; COVID-19; pastoral care; death; stress; ministry.

Introduction

Ministry has changed since the announcement of lockdown level five. Ministers were forced to make huge adaptations in the way they do their pastoral work. They needed to search for new answers on increasingly difficult questions, such as if the coronavirus disease 2019 (COVID-19) was the will of God, where is God when people are dying at such a high rate, and whether COVID-19 was a punishment from God or not. To affirm this, Louw (2020:27) says that in Christianity, spirituality and pastoral caregiving, the core religious question is 'where is God during the pandemic?' The needs and suffering of people they have to care for pastorally grew exponentially bigger; clergies also had to come to terms with their own fears and anxieties as this also affected and infected clergies directly and their own families. According to Louw (2020:126), COVID-19 brought about a crisis that touches every human being on earth. It brought about the turmoil of uncertainty and the dreadful anxiety that death is anew a reality demarcating all spheres of life. This turmoil of uncertainty is not only limited to the congregants but also to clergies. This research aims to challenge pastoral care to find ways to care for clergies during and beyond COVID-19. You could say COVID-19 brought a new culture of human interaction far from the spirit of ubuntu, where people use to share, shake hands, and give exchanges of love through hugging.

According to Lartey (2015:61) 'pastoral care and counselling are informed by culture at every point'. Lartey (2015:61) further argues that pastoral counsellors face challenges in exploring cultural realities today. This is because of the added realisation of particular challenges

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faced by the multicultural and multifaith world in which we live. Clergies who are also counsellors during the pandemic find themselves facing the challenge of exploring cultural realities of today, especially with regard to change on how ministry is done because of the restrictions in place. Clergies are faced with questions on whether God is silent about COVID-19 or not. Clergies often pray for members during their loss, during their good times, during their celebrations, etc. but who prays for clergies when they are going through their own losses or when the workload is too much and the possibility of a breakdown is there? Congregations value the role of prayer in pastoral church, they value the presence of clergies during their good and bad times. De Backer (2021:5) argues that during the COVID-19 pandemic, there should be accessible acknowledge on the importance of mental health and well-being within the broader social context hence a culture of recovery needs to be encouraged and supported. With the rise in depression and suicides worldwide, this pandemic might result in such cases, especially among essential service workers who have been the front line workers since the beginning of lockdown. According to research performed by Nock et al. (2008:133), suicidal behaviour is a leading cause of injury and death worldwide.

According to Alexander (2008:57–58), emotional distress and anguish of continued dislocation result in some people being unable to adapt and to fully function, this is influenced by an addiction becoming the substitute of a normal lifestyle. Clergies are neither immune to depression nor are they immune to suicide. It may be difficult for pastors to work or do their pastoral responsibilities during this time of COVID-19. They are expected to work as though things are normal, and in the process, they become targets of COVID-19. Pastors are expected to provide healing even when they themselves are emotionally wounded. While they continue to provide care and counselling to members, they do not receive this care, yet they too are suffering the loss of members of their church and family. They become wounded healers.

Relevance and methodology of the study

According to Maddox (2015):

[T]he subject matter of Practical Theology is identified as General Christian (or human) praxis due to the theological need to create a space for caring for different people in the church. (p. 160)

Caring for different people includes caring for caregivers, therefore there should be space and time where clergies can gather and care for one another or seek professional spaces where they can be listened to and cared for.

Steyn and Masango (2011:7) posit that Practical Theology cannot be freed from its praxis. Steyn and Masango (2011:7) add that although Practical Theology is motivated through theological convictions and its phenomenon, Practical Theology cannot be separated from its practical ongoing working of the faith it professes. Therefore, Practical

Theology cannot be separated from pastoral caregivers who are also part of the body of Christ.

According to Miller (2015:281), practical theologians should seek understanding and influence as practiced in daily lives in specific social settings. This research is relevant for clergies who also seek practical ongoing working practice in caring for themselves and their own families in dealing with the work load that has increased since the beginning of the pandemic. Practical Theology bridges the gap that exists between the interaction of theory and praxis to achieve divine will in society (Ikenye 2016:34). This study will be a literature study, the literature gathered will be used to argue the need for a pastoral theological challenge for clergies during the COVID-19 pandemic.

Change in ministry

When the president made the call to close all places of worship, many congregations turned to virtual services, including telephone discussions, SMS, WhatsApp, Skype, Zoom and Microsoft Teams. These services were however not accessible to everyone because of data challenge and also technological challenges as a result of age or lack of resources for some members of the church. The beginning of lockdown was the beginning of a series of losses experienced by people; losses which are inevitable, but nevertheless, unpleasant. Losses that many were not prepared for – unlike everything else in life that insurance companies prepare us for – ironically – the ‘unknowing’, ‘emergencies’ or ‘in the unlikely event of’, but somehow COVID-19 was not calculated into the ‘unlikely event of’. No amount of money or insurance could have protected people from this unpleasant visitation. As it is, individuals find themselves in a place of uncertainty. Some have already experienced numerous losses. Some big, some small, but all leaving an enduring mark on their identity. The author refers to ‘identity’, because the past, the present and the future are encapsulated by the abstract concept of one’s identity. Hopes, dreams, fears and of course, people’s faith are the building blocks of who they think they are. When one’s identity is threatened sometimes even faith is threatened. So clergies did not only have to find ways to minister to their congregants but they also had to find ways to bring hope to them and claim their anxieties. According to Hausmann and Fritz (2020:1) the crisis and its consequences have created a new awareness of the vulnerability of human beings in their relationships and the challenges they face in dealing with each other, especially because of social restrictions. Social relationships are central to human coexistence and communication is essential.

During this period fellow clergies also need to take care of themselves: physically, emotionally and spiritually. An ill clergy cannot do much if they are exhausted, drained and suffering from emotional and spiritual emptiness. This change in ministry requires clergies to reflect on their own spiritual discipline, to connect with colleagues and keep in contact with their local leadership team.

COVID-19 has made the ministry of presence virtually impossible, strict social distancing guidelines prevent clergies from being present with their members during the most difficult moments of their lives. It was hard for many clergies not being allowed to visit their members, but this time also afforded clergies the opportunity to re-image what it means to care for my congregation and to spend more time with their families.

The practice of practical theology during COVID-19

When Ganzevoort and Roeland (2014:94) define praxis in Practical Theology as the object of the study, they refer to the everyday practices of people in all religious beliefs. Practical Theology is not limited to the Christian faith. It includes caring even for those outside the Christian faith. Practical Christian theology attempts to not merely preach the gospel, but to 'care' for the person as a human being first without prejudice to that person's religion. Clergies during funerals find themselves also caring for all mourners who do not necessarily belong to the Christian faith such as the bereaved families who might not always belong to the Christian faith. Ganzevoort and Roeland (2014:97) argue that there has always been a history of Practical Theology as pastoral theology, where theologians had different views on Practical Theology and *theologia speculativa*. The clerical life is rooted in the concept of Practical Theology and focuses on the improvement of the praxis of ordained ministry. Clerical life has been there before the formation of practical theology by Frederic Schleiermacher. It was after its formation that Practical Theology helped the clergy to carry out the task of Christian ministry including the field of counselling in a much better way. There cannot be an improvement of the praxis of the ordained ministry when the ministers are overwhelmed or when they do not receive pastoral care themselves especially during critical times such as the COVID-19 pandemic that people are currently facing.

Practical Theology should also shape and determine practice. To affirm this, Stadelman (1998:220, 221) argues that Christian life practices are based on a relationship with God and with other people, which is what theology is about. This argument by Stadelman has been understood by clergies over the years. The focus of ministry has always been caring for others and doing the work of God, putting themselves, their health and their family lives last. For Ackermann and Bons-Storm (1998:16) Practical Theology is essential, because it has to do with living, communicating and practicing of their faith life. The goal of this theology should remain clear, it is to restore the lives of people faithfully within the community at large. Swinton and Mowat (2016:09) state that 'practical theology should locate itself within the diversity of human experience, making its home there, in the complex web of relationships and experiences that form the fabric for all'.

According to Anderson, Jané-Llopis and Cooper (2001:14), practice takes priority over theory. Ministry tends to be based

on pragmatic results rather than prophetic revelation. 'Practical Theology should be practical for both the church and clergies. Clergies hurt, clergies get tired and clergies go through pain and uncertainty. Therefore, Practical Theology is not only essential to the communities but also to clergies as they also form part of the community.

Reflection on caregiving during the pandemic

Clergies need to admit it to each other and to acknowledge the fear and the anxiety among themselves before they can even begin to assist others pastorally. Over the past year, the whole world and each one's personal world (including clergies') have changed dramatically and permanently. There have been changes in the way in which clergies approach the ministry to the congregations since the beginning of lockdown in South Africa and there seems to be a clear indication that these changes will be part of us for a very long time. Clergies need to honestly admit to each other that deep down inside themselves they have the feeling that their own health and future are not certain. There is also little to no indication of COVID-19 coming to an end. So, the following days, weeks and months will have a big impact on us, our ministry and our families.

According to Vaccarino and Gerritsen (2013:69), it is generally understood and expected that a clergy cares for others; however, one often forgets that a clergy also needs attention. This affirms that clergies need to take time to care for their own needs. When a clergy is overwhelmed, they may not be effective in supporting others. Even very competent clergy may suffer huge physical, mental, emotional and spiritual strain while trying to sustain their callings.

Previous studies on clergies have found that many clergies may experience high levels of anxiety and stress and may burnout within the ministry, because they have life's priorities out of balance. However, the exact figures of clergy burnout are difficult to find as many members of the clergy do not admit that they are experiencing some degree of burnout. According to Barnard and Curry (2011:49), burnout is 'a decline in energy, motivation and commitment'. Burnout is not a sign of weakness and should not be seen as such even by clergies who are expected to be the strongest even during times of storms. Horsfall (2010:52) asserts that 'it is so easy for those who are carers of others to neglect their own welfare. We give ourselves to other people – listening to their hurts, mending their wounds – yet fail to care for themselves. Oswald (1991:5) adds that 'self-care is a commitment we make to God when we accept the role of resident religious authority'. Horrex (n.d.:6) highlights that clergy self-care 'is not an optional extra', but needs to be an integral and central element of clergy life. Horrex (n.d.:6) argues that self-care not only assists clergy to live a more balanced life but it also helps them to be better equipped to reach out and care for others. Self-care is not a nice-to-know theoretical construct that could

be applied on an ad hoc basis. Self-care is essential and obligatory. Self-care needs to be a key ingredient for a healthy and balanced clergy life. Kelcourse (2002:146) said that pastoral counselling can be understood as a form of prayer: through faith hearing another attend to that of God in them. Pastoral counsellors also need pastoral counselling. This affirms the need for pastoral care to pastoral care givers not only during this time of COVID-19 but throughout one's ministry.

Caring for the caregivers

Scholars argue that not only social isolation but also domestic violence and concerns about the future have increased (Duncan 2020; Usher et al. 2020).

The crucial function of pastoral care in supporting socially isolated, sick or marginalised groups during the corona crisis has been demonstrated and is still important (Ferrell et al. 2020):

Emotional shock can cause stress reactions, which are called post-trauma stress or critical incident stress. This kind of stress therefore results from experiencing a traumatic incident and can be the result of anything from slight accident to involvement in major disaster. (Parkinson 2000:18)

Clergies experience traumatic incidents during their ministry. They have also tested positive for COVID-19 and other clergies have lost their lives to it and that might have brought fear to fellow clergies and questions to congregants regarding God's presence during the COVID-19 pandemic. Faith leaders play a key role in supporting mental health and preventing the tragedy of suicide because of the beliefs around suicide in the religious society and beliefs. Spiritual and religious leaders of all faiths have a long-standing tradition of advising and guiding people through the full arc of life: from birth to death. These leaders are important sources of hope and strength for their congregants, counsel for those in crisis and comfort and support for those in dismay. To affirm this, research carried out by Roman, Mthembu and Hoosen (2020:2) found that the spiritual care provider plays an important role when families are faced with challenging health risks and the prospect of palliative care.

According to Terr (1991:1) trauma is a sudden emotionally extreme or external event.

According to Greenfield (2001):

When ministers are wounded by certain leaders in the church, those ministers and their families are not the only ones who suffer collateral damages. The only assumption that the people are making is that the church has no problem only the minister does. People assume that the pastor is a being that does not feel any pain or even suffer traumatic situations. When this situation occurs in their lives, congregants and even others on the hierarchy rejects them for being unproductive in the service of the Lord. The church must see to it, to serve the souls of pastors that they become productive instruments of God. The church must create or avail professional counsellors in each and every district for

pastors residing in those areas. It must also create forum where pastors meet to revive one another pastorally. (p. 115)

Clergies have always faced challenges in ministry, some are more challenged than others, however the challenges of COVID-19 are common, the anxiety, funerals, grieving and clergies faced with questions regarding God's presence during this global crisis.

Acknowledging own pain

Pastoral care is widely accepted as a combination of the Latin meaning of the term pastoral, viz. 'tending to the needs of the vulnerable', and care as 'the attentive concern for the other' (McClure 2012:269). Klaasen (2018:6) argues that the caregiver depends on the one cared for, for effective and mutual healing. Knowledge does not reside primarily with the caregiver, but with the person being cared for. The caregiver learns from the one cared for and through that makes sense of the complex fixed meaning. Thousands of healthcare workers were deployed across the country to conduct door-to-door screening in our most vulnerable communities and some have lost their lives in the line of duty. To affirm this, Roman et al. (2020:1) states that the effects of COVID-19 have had a major impact on people's and front line health workers' activities, routines, livelihoods, mental health and well-being and clergies have conducted funerals for years in ministry. One cannot ignore the fear that some clergies had with regard to a funeral of someone who passed on because of COVID-19 related complications. COVID-19 is a new virus, like any new virus it came with its own fears even for clergies. Some research has shown that religion and spirituality are major sources of comfort and support for individuals who rely on their faith to handle the stresses of chronic and serious illness and also that caregivers with strong religious and spiritual beliefs are less anxious and depressed (Koenig 2009; Koronkiewicz 2009; Samuel-Hodge et al. 2000). However, depression is not a sign of weak or strong religious and spiritual beliefs, but rather how different people respond differently to stressful situations. Campbell (1986:41-42) argues that it is only by acknowledging our wounds and confronting our own finitude that 'we too, in a small way, can be healers of others'. Campbell (1986:17) further states that the challenges posed by stress and depression to pastoral care practitioners should be faced with appropriate courage of a Good Shepherd who lays down his life for the sheep. 'For to me, to live is Christ, and to die is a gain' (Phlp 1:21). This is what pastoral caregivers always do through pastoral care to convey to those who are mourning their loved ones through sudden death and death through all sorts. The pandemic and the accompanying phenomena such as exit restrictions affect the mental health of many people. The prevalence of anxiety, depression and stress has increased all over the world (Salari et al. 2020). A consensus is forming that caregiving is associated with poorer mental health: caregivers tend to demonstrate higher levels of stress [3-6] and a higher prevalence and incidence of depression, associations that may be more marked amongst people caring for those with

deme. To affirm this, Joseph Mongezi Gugushe (2014) conducted his masters' degree on 'Traumatic suicide attempt because of lack of remuneration to clergy by the Church', in which highlights stories of clergies who have attempted suicide.

According to Ganesan (2008:47), burnout is a phenomenon that is becoming a serious problem among doctors, social workers and other helping professions. Ministers, devout and dedicated are not free of it. This appears to be a universal problem. Lack of sleep and workload are generally considered to be one of the many contributing factors to 'burnout' among clergies, hence clergies need to acknowledge their own pain and own limits.

Clergies and self-care as a challenge to pastoral care

Oates (1974:4) mentions that 'for centuries the pastor, priest or rabbi has been the primary person responsible for dealing with the needs of people. This is the traditional expectation'. Oates (1974:4) argues that ministry for clergy men and woman is one that is filled with burnout, which will lead to stress if they do not take regular time for themselves apart from the ministry. Clergies are not immune from the debilitating effects of burnout and stress. 'The task and responsibility, problems and privileges that belong to the pastor can be overwhelming' (Oates 1974:4). Clergies themselves need pastoral care and counselling. The principles used to care for the congregants apply also to clergies who undergo stress and burnout. Results from several studies indicate that spiritual practices (e.g. reading sacred texts, listening to religious music, watching or listening to religious programmes, singing praise songs, attending faith-based services, engaging in private devotional practices or praying/requesting prayer) tend to improve coping skills and social support, foster feelings of optimism and hope, promote healthy behaviour, reduce feelings of depression and anxiety and encourage relaxation (Bannan & Montgomery-Smith 2008; Beck 2009). According to Magezi (2016:1), an aspect of pastoral care is the utilisation of a variety of healing (therapeutic) methods to help people handle their problems and crises in a more developmental way. Karl Barth ([1933] 1968:445) emphasises that all charismata come from God and therefore 'disrupt' one's life. If such a charisma is placed upon a person and the person becomes aware of it, the responsibility to use this charisma in God's service weighs heavily on the person.

The clergies should do the following to care for themselves during the COVID-19 pandemic:

- After a weekend of hard, stressful work, it is important to schedule relaxing and distracting activities for a day or two. One can refer it to as a day to care for oneself only for a day or two, away from church activities and services
- There should be weekly psychological and/or pastoral counseling sessions for clergies, for example, seeing a professional to talk to – preferably someone unknown to the clergy.

- Every pastor needs a pastor and a mentor within ministry – someone they trust.
- Ministers should develop a support group of other ministers. This can be done at the local church by church management or church council.
- To explore ways of bringing clergies together for healing, such as retreats for ministers and their families where possible.

Conclusion

COVID-19 disrupted our societies on a deeper level than we might realise at this moment. It became clear that this social and economic disruption will have lasting effects, even on the way we 'do church' and express our spirituality.

It is evident from this research that clergies need to care for themselves as much as they care for others to avoid burnout and stress, especially during this demanding time for essential services workers. Through discussion of the practice of Practical Theology, acknowledging one's own pain, caring for oneself and the change in ministry, this research proved that research on stress and burnout of clergies has always been an ongoing study. Literature has proven the importance of self-care for clergies. When clergies take care of themselves, especially in times of crisis, they can respond well to the demands of the situation. Challenges differ from minister to minister and church to church depending on the church context, social circumstances and personality. Some clergies might find it difficult to provide pastoral care remotely, especially in the context of bereavement support, others experience difficulty reaching more isolated church members while some clergies do not have the technological means at their disposal to reach their parishioners via social media or holding services electronically. It is difficult to hear of other churches holding their services via Zoom or YouTube and not having the know-how to do it oneself. It's easy to feel not only particularly isolated but also isolated from our calling and also having to deal with one's own fears, workload and uncertainty that comes with the pandemic.

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H.P.K.-N. is the sole author of this article.

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