

## Beware: Pastoring is Hazardous to Your Health!

The data is overwhelming. Pastors are 41% more likely to be obese than the general population.<sup>1</sup> In fact, only 25% of clergy surveyed had a normal weight (as measured by BMI).<sup>2</sup> Clergy also experiences higher rates of many common chronic diseases, including diabetes, asthma, and joint disease, than does the general population.<sup>3</sup> A 1999 study identified the pastorate as among the top ten occupations for heart disease death risk.<sup>4</sup> The Evangelical Lutheran Church of America (ELCA) compared health data for 12,000 church workers (mostly pastors) with the general population and found clergy to be 54% more likely to have hypertension, 69% more likely to have high cholesterol, and 100% more likely to have cancer.<sup>5</sup> Rae-Jean Proeschold-Bell and Jason Byassee of Duke Divinity School may have best characterized the situation as *“a true crisis in clergy physical health.”*<sup>6</sup>



There is no doubt that the demands of leadership can have negative health impacts. Dan Allender in *Leading with a Limp*, comments: *“few leaders, no matter what margins they build into their lives, can glide through their labor unaffected. The physical body suffers in leadership.”*<sup>7</sup> The unique leadership challenges that clergy face – from navigating their congregations through the current tumultuous social and political atmosphere, to managing through COVID, to leading congregants who are also their benefactors, to constantly facing demanding schedules that include multiple meeting nights each week, to the continually taxing emotional work of providing pastoral care – all work together to make the physical risks for pastors likely even more pronounced than for many other leaders. Unfortunately, the response most of us have to the situation is to double-down and work harder – which often comes at our own peril. Sue Magrath in her book on Pastoral Self-Care (*My Burden is Light*) comments: *“it seems like we take better care of our cars than we do our bodies! Everyone knows that when your car starts knocking, you need to get it to the mechanic, but we fail to listen to our body signals enough to recognize when something is wrong. Even worse, we forget that they are sacred vessels.”*<sup>8</sup>

While there are a wide range of components to physical wellness and self-care, I would like to focus on the “big four”: exercise, nutrition and diet, rest and sleep, and stress management. Starting with exercise, research conclusively shows that regular exercise is directly correlated to a higher quality of life. The Duke Clergy Health Initiative Study found this also to be true among pastors, as a higher level of physical activity (both in terms of frequency and activity level) showed direct increases in quality of life scores among pastors and also that pastors who exercised less than 3 or 4 days per week rated their quality of life lower than did the average American.<sup>9</sup> In fact, regular aerobic exercise is likely one of the most critical things we can do to improve our physical wellness, as it helps to reduce stress, decrease the risk of high blood pressure and heart disease, reduces the likelihood of diabetes, and improves mood, weight control, sleep

quality and cognitive function.<sup>10</sup> The US Department of Health and Human Services Physical Activity Guidelines for Americans, published in 2008, recommended at least 150 minutes of moderate-intensity aerobic exercise each week.<sup>11</sup> For many of us, a regular exercise routine does not happen without an intentional commitment and the tenacity to stick with it until it becomes a habit. Some find that the accountability of exercise partners can be a great assist in this effort, while others find that blocking specific time on the calendar is essential for them to “protect” their exercise time. In any case, intentionality is essential.

Nutrition and diet are often a very difficult challenge for clergy who are faced with challenging emotional pastoral care situations, as well as a tendency toward “on the go” meals to accommodate evening meetings and other demands. Consistently eating a healthy diet has been shown to significantly reduce the risk of chronic disease and cardiovascular disease. Sue Magrath offers the suggestion of considering your emotions before you eat – specifically offering the acronym *HALT (are you Hungry, Angry, Lonely or Tired?)* to help assess whether you are truly feeding your body or if you are feeding your emotions instead.<sup>12</sup> Another suggestion is to identify and carry healthy alternatives to fast food and less healthy snack foods, keeping them handy in your office or in your car. Similar to a regular exercise program, a healthy diet and proper nutrition require an intentional mindfulness about: *what, when, where, and how* we are eating.<sup>13</sup> Richard Olson notes, “*it is not only what we eat that matters, but also how we eat it. Mindfulness of what we are eating can make it a spiritual practice. This involves being present to the experience and enjoying the tastes and textures of what is being eaten.*”<sup>14</sup>

A lack of sleep has also been tied to a number of health issues including obesity, type 2 diabetes, high blood pressure, heart disease, stroke and mental health issues.<sup>15</sup> Even short-term sleep disruption or deprivation has been shown to have a negative cognitive impact (often compared to driving under the influence).<sup>16</sup> Researchers consistently emphasize the importance of both sleep hygiene and sleep routine, including finding a consistent time to go to bed and wake up, having an appropriate sleeping atmosphere, limiting exposure to screens and blue light at least an hour before bedtime, and finding time for regular exercise. For those of us who love the taste of coffee, we need to remember that the half-life of caffeine is seven hours (meaning that a quarter of the caffeine in the cup of coffee we drink at 8am is still present in our systems at 10pm).<sup>17</sup> Dorothy Littell Greco emphasizes a theological basis for sleep that focuses on the unique demands on clergy: “*Ministry pulls us in many directions. We pick up the phone on our day off to help the parishioner in crisis. We put the kids to bed and then stay past midnight to craft our sermons. Despite the tendency to make to do lists of tasks which could be accomplished only with the help of multiple assistants, God designed us to sleep. We can cheat this for short seasons, but if we routinely deny our bodies the rest they crave, we will pay.*”<sup>18</sup>

Finally, any discussion of physical self-care must consider the impact of stress. Stress is known to be a key contributor to poor nutrition, overeating and obesity. Stressful jobs and challenging work environments have been linked to higher obesity rates, which is particularly relative for clergy as the average full-time pastor works more than 50 hours per week, compounded by the relational and emotional challenges of pastoral care and leading the congregational flock.<sup>19</sup> Stress essentially creates a vicious cycle relative to physical self-care: higher job stress means more stress eating and also less time for healthy meal preparation and physical exercise, which in turn results in less physical energy and poorer health



outcomes, leading to more stress which continues the negative cycle. A commitment to more successfully manage one's stress is a commitment to one's physical self-care. Being willing to seek support and accountability from others, whether it is focused on your diet or exercise plans or emotionally supportive relationships, is critical. It is also essential to maintain an appropriate sense of boundaries, margins, and limits. Dr. Richard Swenson writes, *"All things have limits – people, governments, buildings, bridges, brains, and organizations. Even more subjective things such as friendships, creativity and adaptability have limits... It is God the Creator who made limits, and it is the same God who placed them within us for our protection. We exceed them at our own peril."*<sup>20</sup>

Ultimately, a commitment to our physical wellness and self-care is a personal decision and a question of honoring God by honoring the gift of our bodies that He provided us. Richard Olson notes, *"Recognizing that God is the source of these wondrously made bodies reminds us that they are a gift... Gratitude to God for these marvelous bodies involves caring for them, treasuring them, honoring them, and being good stewards of them."*<sup>21</sup> Dorothy Littell Greco adds, *"If God dwells in us, what we do with our bodies matters – to Him as well as to us... Leading and serving should not come at the cost of our own health and wellbeing."*<sup>22</sup>

Let us each prayerfully consider how we can make a commitment to honor God's gift of our physical being and carry out our calling in a manner that is less hazardous to that gift.

## Reflection Questions:

- What feelings do you have toward your body? Toward your physical wellness? Toward your physical self-care? What physical self-care areas are particularly challenging for you? What factors contribute to the challenges you face in ensuring appropriate physical self-care?
- What challenges do you face to carve out and protect the time you need to focus on your physical self-care? What steps can you take to more consistently ensure your physical self-care time is essentially "sacred" from interruptions and conflicts?
- What goals do you have for your physical self-care and wellness? What commitments are you willing to make? What support systems would be helpful for you?

## Notes

<sup>1</sup>Proeschold-Bell, R. J., & Byassee, J. (2018). *Faithful and Fractured: Responding to the Clergy Health Crisis*. Baker Academic. 84.

<sup>2</sup>Ibid.

<sup>3</sup>Ibid.

<sup>4</sup>Johnston, J. R. (2012). *An Exploration of Rates and Causes of Attrition Among Protestant Evangelical Clergy in the United States* [PhD Thesis for Doctor of Ministry Degree, Acadia Divinity College]. <https://jerryjohnston.com/wp-content/uploads/2017/03/JerryJohnston-Doctoral-Dissertation-web.pdf>. Citing Calvert, Merling & Burnett. "Ischemic heart disease mortality and occupation among 16-60 year old males." *Journal of Occupational and Environmental Medicine* 1999.

<sup>5</sup>MacDonald, G. J. (2020). *Health and Wellness for Church Leaders: Sacrificing the Body. Building Church Leaders, Christianity Today. 8-11*aster the 3 Ways to Influence People. (2020). Center for Creative Leadership. <https://www.ccl.org/articles/leading-effectively-articles/three-ways-to-influence-people/>.

<sup>6</sup>Proeschold-Bell, R. J., & Byassee, J. (2018). *Faithful and Fractured: Responding to the Clergy Health Crisis*. Baker Academic. xxi.

<sup>7</sup>Allender, D. (2006). *Leading With A Limp: Take Advantage Of Your Most Powerful Weakness*. WaterBrook Press. 34.

<sup>8</sup>Magrath, S. (2019). *My Burden is Light: A Primer for Clergy Wellness*. Cascade Books. 56.



- <sup>9</sup> *Summary Report: 2014 Statewide Survey of United Methodist Clergy in North Carolina* (p. 8). (n.d.). Duke Clergy Health Initiative. 20.
- <sup>10</sup> Olson, R., Rosell, R., Marsh, N., & Jackson, A. (2018). *A Guide to Ministry Self-Care: Negotiating Today's Challenges with Resilience and Grace*. Rowman & Littlefield. 111.
- <sup>11</sup> Ibid. 111-112.
- <sup>12</sup> Magrath, S. (2019). *My Burden is Light: A Primer for Clergy Wellness*. Cascade Books. 60.
- <sup>13</sup> Swenson, R. A. (2004). *Margin: Restoring Emotional, Physical, Financial and Time Reserves to Overloaded Lives*. NavPress. 102-104.
- <sup>14</sup> Olson, R., Rosell, R., Marsh, N., & Jackson, A. (2018). *A Guide to Ministry Self-Care: Negotiating Today's Challenges with Resilience and Grace*. Rowman & Littlefield. 115.
- <sup>15</sup> Ibid. 116.
- <sup>16</sup> Magrath, S. (2019). *My Burden is Light: A Primer for Clergy Wellness*. Cascade Books. 63.
- <sup>17</sup> Ibid.
- <sup>18</sup> Greco, D. L. (2020). *Health and Wellness for Church Leaders: Building—And Maintaining—The Temple*. Building Church Leaders, Christianity Today. 5.
- <sup>19</sup> *Summary Report: 2014 Statewide Survey of United Methodist Clergy in North Carolina* (p. 8). (n.d.). Duke Clergy Health Initiative. 8.
- <sup>20</sup> Swenson, R. A. (2004). *Margin: Restoring Emotional, Physical, Financial and Time Reserves to Overloaded Lives*. NavPress. 41, 57.
- <sup>21</sup> Olson, R., Rosell, R., Marsh, N., & Jackson, A. (2018). *A Guide to Ministry Self-Care: Negotiating Today's Challenges with Resilience and Grace*. Rowman & Littlefield. 107.
- <sup>22</sup> Greco, D. L. (2020). *Health and Wellness for Church Leaders: Building—And Maintaining—The Temple*. Building Church Leaders, Christianity Today. 4-5.

## Additional Resources:

If you are interested in a deeper exploration of the clergy health crisis and physical self-care strategies, I recommend these readings as well as two powerful ongoing support opportunities.

My favorite books discussing the clergy health crisis and physical self-care strategies to combat it include:

- *Faithful and Fractured: Responding to the Clergy Health Crisis* (Baker Academic) by Rae-Jean Proeschold-Bell and Jason Byassee.
- *My Burden is Light: A Primer for Clergy Wellness* (Cascade Books) by Sue Magrath.
- *A Guide to Ministry Self-Care: Negotiating Today's Challenges with Resilience and Grace* (Rowman & Littlefield) by Richard Olson, Ruth Lofgren Rosell, Nathan Marsh and Angela Barker Jackson.

In addition, the Pastoral Respite Ministry at Silver Bay YMCA (Silver Bay, NY) offers online Pastoral Self-Care Cohorts where groups of pastors come together to support each other and explore different wellness topics, including physical self-care. Please contact Rev. Garth Allen ([gallen@silverbay.org](mailto:gallen@silverbay.org)) or Rev. Bruce Tamlyn ([btamlyn@silverbay.org](mailto:btamlyn@silverbay.org)) if you are interested in joining a pastoral self-care cohort or in initiating a spiritual direction relationship to further support your self-care efforts.

Finally, if you are interested in exploring either a short-term or ongoing mentoring relationship to strengthen your leadership and management skills, or to accompany you on your broader self-care commitment, please contact me at [ChrisClark@NorthernElmMentoringGroup.com](mailto:ChrisClark@NorthernElmMentoringGroup.com) (additional information on mentoring services is available at [www.NorthernElmMentoringGroup.com](http://www.NorthernElmMentoringGroup.com)). All mentoring engagements are conducted on a pro-bono basis, with the request that participants prayerfully consider a donation to Silver Bay YMCA's Pastoral Respite Program in lieu of mentoring fees.

## About The Author:



Chris Clark is a strategic, passionate, faith-based, retired executive with over 20 years of executive leadership with a successful global med-tech company, as well as extensive lay leadership experience. Chris seeks to help address what he refers to as “The Crisis in Comprehensive Pastoral Health” through public and lay advocacy, and by walking alongside pastors in individual mentoring relationships focused on providing leadership and management insights. You can learn more about Chris and his ministry, Northern ELM Mentoring Group, at [www.NorthernElmMentoringGroup.com](http://www.NorthernElmMentoringGroup.com).

