The church is called to care for persons in need. What do faith communities and their leaders offer those who need physical, psychological, and spiritual healing? What is the role of pastoral counseling in the church’s ministry of pastoral care?

North American pastors and congregations typically encourage their members to seek medical treatment for physical illness while providing visitation and intercessory prayer. Pastors and elders are less likely to refer members to counselors, treatment centers, and twelve step programs for psychosocial/spiritual problems such as depression, marital discord, parenting difficulties, post-traumatic stress, and addictions. Mental health care is sometimes viewed with suspicion as being individualistic, based on a secular belief system not in keeping with the gospel. While such concerns may occasionally be justified, this essay focuses on the role of pastoral counseling as a healing resource for the church, fully compatible with the life of faith.

The church’s traditional response to the need for healing, whether physical, psychological, or spiritual, has focused on the redemptive power of the gospel, specific practices of pastoral care, spiritual direction, “the cure of souls.”¹ Pastoral counseling is prac-

noticed by persons who may or may not be ordained, with ties to recognized congregations that include experience in community leadership. A pastoral counselor’s practice of psychotherapy is theologically grounded, informed by psychological theory, and tempered through supervised clinical experience, as required for membership in the American Association of Pastoral Counselors (AAPC). Pastoral counseling is a specific ministry within the life of the church, much as fully trained chaplains are nationally recognized specialists in pastoral care.\(^2\)

What does it mean to say that the pastoral counselor’s work is “theologically grounded”? Pastoral counselors hold the values of their faith tradition to be normative for their work. This is in contrast to a secular model of counseling that may view self-actualization and personal fulfillment as the highest goals of health, disregarding at times the necessary relational claims that family and community covenants place on individual lives. Like marriage and family therapists, pastoral counselors give attention to relational responsibilities – love of neighbor, love for self – as essential to human wholeness. But pastoral counselors also have a uniquely theological emphasis: they interpret life narratives in the context of God’s love and justice as revealed through scripture and the practices of faith communities. Pastoral counselors recognize the existential relevance for all persons of theological categories such as “ultimate concern” or “Ground of

\(^2\)Male Protestant ministers from the “historic denominations” – Methodist, Presbyterian, Episcopal, Baptist, Disciples, etc., originally dominated the membership of AAPC. With an influx of Catholic women from religious orders, the membership was opened to non-ordained persons. Today, AAPC exists as an increasingly diverse interreligious professional organization that supports clinically trained persons of faith in their practice of psychotherapy. For more information, see the national web site: www.aapc.org.

\(^3\)Clinical Pastoral Education training, or CPE, is to pastoral care what AAPC approved training is to pastoral counseling. Both provide standards for competency in specialized ministries.
Being,” with or without a consciously identified covenant relationship with God.  

The primary role of pastoral counseling specialists in the life of the church is to support congregations and their leaders in their ministries of health and healing. Health is more than physical well-being; it includes integrity, right relationship with self, others, and God. Healing is the redemptive work of God through grace and by people of faith as co-creators of shalom, peace founded on justice and relational harmony. Given these definitions, how does the work of pastoral counseling promote health and healing? A look at the actual pastoral care demands placed on leaders and congregations suggests the kind of support needed and the ways pastoral counselors are equipped to respond.

THE DEMANDS OF CONGREGATIONAL LEADERSHIP

The traditional pastoral role, congregational leadership, requires multivalent talents. The pastor’s skill in pastoral care, her or his role as guide through the joys and sorrows of life, is a foundational dimension of ministry. The successful pastor needs to be an effective “people person” – good at listening and communicating, a dynamic leader, an able administrator, a community organizer, a volunteer coordinator, and a development officer. Gifts as an inspired preacher and teacher, a scholar of scripture, Christian tradition and theology are essential. To undergird all of these pastoral functions, the effective minister needs time apart to maintain his or her own disciplines of prayer, study, spiritual, psychological and spiritual renewal, including periodic retreats, continuing education events, and such basics of self care as adequate sleep, exercise, play, relaxation, and good nutrition.

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As if juggling all of the above were not enough, many pastors are married with children. Edwin Friedman, in his guide to systemic thinking in congregational settings, *Generation to Generation*, notes that congregational leaders live at the intersection of three sets of family systems. First, ministers participate in nuclear and extended family systems, whether by birth or by marriage. Second, ministers interact with family systems that make up the congregation, many interwoven or at odds with one another. Third, to add to the complexity, the congregation exists as a systemic whole, with its own preferred patterns of function and dysfunction.

Family systems theory teaches that we are each partners in an interactive dance learned from our families of origin. Most families (and congregations) are quick to step on the toes of a dancer who gets out of line. It takes a self-aware person to do the dance differently when they disagree with the system. Systems theorists call this “differentiation”: the ability to march to the beat of a different drum when one is convinced one has found a better way.

**HOW PASTORAL COUNSELING SERVES THE MINISTER**

Being a differentiated leader can be a lonely job. Well-intentioned laity, family, and friends do not always understand the professional responsibilities of ministry. The woes of ministers overwhelmed by the demands of their role include children who get into trouble, affairs, divorce, depression, exhaustion, addictions, and loss of faith. Is it any wonder that by their third job after ordination 37 percent of women and 26 percent of men are no longer serving in congregational settings?6

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Pastoral counseling specialists support congregational leaders through consultation, supervision, referrals, and denominational “nurture and certification” committees as well as offering personal support for the minister and his or her family. Every minister could use a pastoral counseling consultant with whom to be in dialogue about their own needs and the needs of the congregation, in the same way that pastoral counselors and chaplains receive on-going supervision. What frequently stops ministers from seeking support is a “god complex” – the belief that while the minister should be prepared at all times to meet the needs of others, ministers do not or should not need support for themselves. To deny one’s own legitimate human need for support and encouragement in such an emotionally demanding profession is to fail to model the appropriate self-care ministers encourage for their members.

Pastors, like parents, lead best by example. But pastors cannot be expected to be gracious and effective role models if they lack the personal support that each of us needs to do our best. Where are they going to find it? Not from their congregational members – too much emotional reliance on members is ineffective at best, dangerous at worst. As for peers, most ministerial associations do not offer the substantive support that a clergy group with a trained leader and standards of confidentiality can afford.7 If the pastor, as healer, is to effectively “hold” the anxiety and pain within a congregation, someone needs to hold them as well. Pastoral counselors, trained in dialogical discernment, can provide the holding pastoral leaders require.

I remember being a young minister fresh out of seminary nearly twenty years ago without the benefit of Clinical Pastoral Education. Looking out over the congregation on Sunday morning, I felt overwhelmed by the needs of the members: the woman in chronic pain, the couple contemplating divorce, the lay leader beset by mental illness, the family preparing for transplant surgery, the woman facing the lingering death of her husband, the ever-active gossip, and the

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7Lilly Endowment-funded projects such as the Indiana Clergy Peer Group Study Program and the Clergy Renewal Program encourage congregations to invest in the care and maintenance of their ordained leaders.
disgruntled members critical of the minister. I viewed all these needs as demanding a response from me.

This was just the tip of the iceberg, the part I could see. Below my conscious awareness loomed my own insecurities as a leader, my need to please and lack of a differentiated perspective. The congregation’s former pastor of twenty-five years was still in town, performing funerals and weddings on request. My attitude towards him alternated between resentment and deference; I felt it was unethical for him to undermine my leadership through continued contact with the congregation, yet I respected his years of experience.

As if the strains of this setting were not enough to shipwreck a young pastor on her maiden voyage in leadership, there was stress within my own family from repeated pregnancy loss. These private losses began to take their toll. Recognizing signs of depression, I got a referral from a seminary friend to see a pastoral counselor. I remember feeling grateful that, as a pastor, he could understand the multiple demands of ministry as few lay people do.

Coming from a “stiff upper lip” family that did not value introspection or emotions other than cheerful resignation, therapy opened a new world to me, the world of my own inner life. Dialogue with a pastoral counselor prepared the way for a fresh narrative of faith. I accepted God’s blessing to set my own course and become master of my own vessel, with all the thrills and perils that entails, recognizing that to navigate effectively I would need to keep filling my sails with the breath of the Holy Spirit.

Following my congregational assignment, I applied what I had learned about my own subjective experience to the ministry of pastoral care and counseling. Through five units of CPE and four years of clinical training in pastoral psychotherapy, marriage and family therapy, and group therapy, I learned to discern, in dialogue with others, the truth that would set them free (Jn 8:32). What began as personal support in time of need become for me the direction of God’s call as I learned firsthand how to heal mind, body, and soul through dialogue, curing souls by means of the “talking cure.” Today I am able to do for ministers and lay leaders what that first pastoral
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counselor did for me, offering support during difficult times and helping them to chart a course that is life-giving and Holy Spirit filled.

Ministers need access to their own inner lives so that they can effectively self-supervise, monitoring their responses to the emotionally demanding circumstances that naturally arise as part of their pastoral work. If they can’t effectively care for themselves, they will not be effective in caring for others. Often additional clinical training, through CPE, individual, family, or group psychotherapy and/or supervision from a clinically experienced minister, is required. Even when the pastor feels no need of support from a counselor, it is a rare congregation that doesn’t have its share of “difficult people.” Some are so difficult that the life of the congregation suffers because of them. Persuading people who could benefit from counseling to seek help may not be easy, but the minister who has experienced healing through psychotherapy in her or his own life can confidently refer others to pastoral counselors who respect their faith.

THE HEALING ROLE OF CONGREGATIONS

I have focused so far on the work of congregational leaders and the ways that pastoral counselors can support them. While a full consideration of congregations’ nurturing and healing functions is beyond the scope of this article, it is important that this role be acknowledged. For example, at the beginning of life, congregations that value children and effectively meet the needs of their growing minds and bodies can become an important second home. Children benefit greatly from being known, celebrated, and accepted by the community of faith. In these congregations, the belief that “God is love” is modeled through the care children and their families receive.8

At the other end of life, congregations provide respectful pastoral care for the frail elderly, the dying, and their families. Healthy persons of retirement age express a renewed sense of purpose by

providing much of the volunteer service churches require. Couples find their marriages and parenting efforts strengthened by marriage encounter weekends and parenting classes offered through the church. Congregations heal by teaching the stories of their faith traditions, offering inspiration and hope in difficult times. Congregations promote wholeness when the milestones of life are celebrated – marriage, birth, learning, coming of age, growing in wisdom, aging, loss, and death. The community of faith itself can and should be a place of healing. But congregations can wound as well as heal. Christian communities can indulge in gossip, promote conflict by avoiding direct communication, spread blame while avoiding responsibility, project perceived evils onto others, and frequently take refuge behind a shallow self-righteousness that fails to support dialogue across perceived boundaries of difference.  

WHAT CAN PASTORAL COUNSELING DO FOR CONGREGATIONS?

The pastor, often a relative newcomer to the congregation, is not always in a favorable position to mediate between warring factions in the church or insist that a difficult person who holds a prominent leadership position is avoiding their own need for healing at the expense of community life. Pastoral counselors can assist congregational healing as outside consultants who are able to make the recommendations pastors and denominational leaders are unwilling to voice for fear of alienating powerful members.

In response to congregational needs, church based and Samaritan counseling centers have arisen around the country. National health maintenance organizations have issued invitations to Fellow level pastoral counselors to join their networks because most persons seeking psychotherapy prefer to see a counselor who respects their

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Some hospital based pastoral counseling centers, like the one at Miami Valley Hospital in Dayton, Ohio, have formed covenant relationships with surrounding churches. In exchange for an annual contribution to the counseling center’s operating costs, all members of participating congregations can be seen for counseling at a reduced fee.

Some pastors fear that counseling centers based in other churches will steal their members. Dan Moseley’s experience as senior pastor at Vine Street Christian Church in Nashville, Tennessee demonstrates that this is not the case. While those who came to his church for counseling generally did not join the congregation, the church based counseling center was recognized as a significant service to the community. Members of other churches, grateful for an effective referral, felt even greater loyalty to their own minister and congregation than before.10

HOW DOES PASTORAL COUNSELING HEAL?

The most basic function of the pastoral counselor is to listen. In the first session the person seeking help generally talks about the problem as they see it, describing the painful feelings and experiences that motivated them to seek help. People who haven’t been in therapy often say, “I don’t need to pay a therapist to listen to me, I have friends and family who can do that.” But what generally happens when one confides one’s distress to family and friends is that distress makes them uncomfortable; they want to “fix” the problem, to make it go away. When the problem involves a partner or spouse, family and friends are apt to take sides, escalating couple conflicts. The therapist serves as an impartial observer whose role is to help an individual, couple, or group to be clear about what they want from their relationships and how best to realize their goals.

10Dan Moseley, Herald B. Monroe Professor of Practical Parish Ministry, Christian Theological Seminary, personal communication.
Unlike some secularly trained psychotherapists, the pastoral counselor’s orientation to healing is not “value free.” As a person of faith, the pastoral counselor attempts to speak to “that of God” in another, trusting that the counselee, couple, or congregation has access to an inner knowing that will lead them to the best available course of action or life narrative – if they will heed it.\textsuperscript{11}

**PASTORAL COUNSELING AND THE ETERNAL NOW**

Pastoral counseling can be understood as a form of prayer; through faithfully hearing another we attend to that of God in them. In therapy, an interpersonal field forms between pastoral counselor and counselee where God is invited to be present. The Eternal Now, the Realm of God, becomes a shared present where the past can be retold in new ways and the future transformed.\textsuperscript{12}

Ultimately, whether the need for healing presents itself as physical, psychological, or spiritual, it is still souls, our God-given body/spirit energy, that need to be cured. In partnership with pastors and congregations, the role of the pastoral counselor is to represent God’s steadfast love and the hope of redemptive grace for all who suffer.

\textsuperscript{11}Like other mental health professionals, the pastoral counselor has a duty to intervene if the counselee presents an immediate threat of harm to self or others.