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Overcoming Barriers: Helping Navy Chaplains Understand the Need and Implementation of Self-Care

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OVERCOMING BARRIERS: HELPING NAVY CHAPLAINS UNDERSTAND THE
NEED AND IMPLEMENTATION OF SELF-CARE

A Major Applied Project
Presented to the Faculty of
Concordia Seminary, St. Louis,
Department of Practical Theology
in Partial Fulfillment of the
Requirements for the Degree of
Doctor of Ministry

By
Carl Muehler
June 2019

Approved by:	Dr. Mark Rockenbach	MAP Advisor
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Justina: Eternal thanks for your never-ending support and encouragement in life, ministry, and this project. I could not do any of it without you. You handle the challenges of Navy life with grace and humor and always love for your family and the God we serve. Aidin, Kayla, Logan, and Josiah: Thanks for maybe not always understanding but always supporting and making the best of what the Navy life has thrown your way.

A man's life and the health of his organs and the proper condition of his body are gifts of God, the Creator. Therefore care is to be taken particularly of one's health.

-Martin Luther

By his patient, sympathetic labors with the men, day in and day out, and through many a night; every chaplain I know contributed immeasurably to the moral courage of our fighting men. None of the effort appears in the statistics. Most of it was necessarily secret between pastor and his confidant. It is for that toil in the cause both of God and country that I honor the Chaplain most.- Fleet Admiral Chester W. Nimitz, USN, May 1946.

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ABBREVIATIONS

CACO	Casualty Assistance Case Officer
ILC	Intermediate Leadership Course
IRB	Internal Review Board
JPME	Joint Professional Military Education
LC	Large Catechism
<i>LW</i>	<i>Luther's Works</i> , American ed. 55 Vols. Philadelphia: Fortress; St. Louis: Concordia, 1955–1986
MRE	Meals Ready to Eat
MBTI	Meyers Briggs Trait Inventory
PDTC	Professional Development Training Course
PTSD	Post -Traumatic Stress Disorder

GLOSSARY

Billet: The assignment a Navy Service member is given to support and duties to execute under orders, usually for two to three years in length.

Junior Chaplain: A chaplain who is in their first or second assignment and still viewed as new to the Navy and Chaplain Corps.

Operational Billet: A unit that requires time away from home station which may include a deployment at sea or in a foreign location to include combat operations.

Shore Billet: A unit that is land based and not expected to deploy overseas.

ABSTRACT

Muehler, Carl B. "Overcoming Barriers: Helping Navy Chaplains Understand the Need and Implementation of Self-care." Doctor of Ministry. Major Applied Project, Concordia Seminary, 2019. 115 pp.

The Navy Chaplain serves with Navy, Marine, and Coast Guard personnel throughout the world and often in challenging environments including at sea and combat operations. The Navy Chaplain is unique because the chaplain has complete confidentiality and may be the only caregiver with a deployed unit, which can take its toll on the chaplain. Self-care is critical for the chaplain on a personal level and to maintain effectiveness in the support to the personnel in the unit. This project examines the elements of healthy self-care and the motivation to implement self-care from a theological and evidence-based perspective, including interviews with active duty Navy Chaplains. This research and project will result in training materials to help chaplains implement consistent self-care.

CHAPTER ONE

INTRODUCTION

The Problem Identified

How can Navy chaplains implement a consistent self-care plan and overcome the potential barriers to self-care, especially in an operational billet?

“Self-care” has various connotations and is not easily defined. A simple broad definition of self-care is what one does for one’s own wellness.¹ Self-care involves both the process and outcome of actively choosing to take care of one’s mind, body, and spirit. For chaplains, the desired outcome is to be healthy in order to most effectively support those whom they are called to serve, especially in dynamic, challenging, and possibly kinetic environments. This project will examine how to overcome barriers in this process, allowing chaplains to consistently practice self-care.

Consistent self-care is a challenge for clergy as it is for any caregiver. Due to the demands of military culture and life, especially in an operational setting, chaplains face additional barriers and challenges. I have identified this problem in my own life, as well as in those with whom I serve in the United States Navy Chaplain Corps.

During the course of my ministry as a pastor and active duty chaplain there have been both seasons of fulfillment and joy, and seasons of challenges and stresses. Three specific events helped me understand that my approach to ministry and life was not the best and adjustments needed to be made in what I will characterize as self-care.

¹ Elizabeth Venart, Sonya Vasos, and Heather Pitcher-Heft refer to Myer and Sweeney’s definition of wellness: “Wellness is both an outcome and process, at once an overarching goal for living and a day-by-day, minute-by-minute way of being.” (Myers and Sweeney, 2005, 9) Wellness involves actively maintaining choices to create and maintain balance and to prioritize health of mind, body, and spirit.” “What Individual Counselors Can Do to Sustain Wellness,” *Journal of Humanistic Counseling Education and Development* 46 (Spring 2007): 50.

The first experience occurred during my second year at my first church. I was taking on the various challenges and burdens of ministry, especially attempting to help specific individuals, but not finding healthy outlets for myself. I was taking everything in, but nothing was coming out. This affected how I reacted and interacted with others, especially my family. I needed to find ways to deal with stress and my burdens in a healthy manner. I struggled to set any type of boundary between my work and ministry and myself as an individual, especially on an emotional level. Self-care was missing from my life and I needed to make adjustments. Thankfully, my wife was able to bring this to my attention before I headed down the path to burnout. She noted that my behavior was different than it was in seminary or when I began to serve.

The next example happened early in my time as a Navy chaplain. On my first deployment, I fell into the trap of feeling that I should always be available for anyone and everyone who came through the door asking for counseling or chaplain assistance. After a month, I had no energy and found myself struggling to have empathy for those who came to talk to me. I realized I needed to set better boundaries and take time for myself spiritually and physically. I promised myself I would do better. Although I improved my balance during that deployment, the trap was still there.

The third moment occurred a few years later when I was serving on a different assignment. One day at home, my work cell phone rang. It was an emergency type situation that required me to come into work. One of my children asked the simple, but challenging question “Dad, why does it always have to be you?” This particular situation did require me to go, but the point was well taken that I had fallen back into the trap of always being available. My son’s question reminded me that there were times I could have and should have protected time with my family.

These three examples, though personal, reflect situations and challenges facing many

chaplains. Intentional training and conversation about self-care, especially during my time as a new pastor and chaplain, may have helped to mitigate these situations.

During my training and education in seminary, self-care was talked about at a very basic level, but I would not characterize it as a point of emphasis. Most of the teaching focused on taking a day off, spending time with your family, and appropriate boundaries. During my few years as a parish pastor, there was not much discussion or training at the circuit or district gatherings on self-care. My experience was similar when I made the transition into the Navy and into the Fleet. Senior chaplains talked about taking care of yourself and your families. Yet there were not any intentional conversations on what self-care looked like and how to personalize it, nor any training self-care and its importance. The one exception in my personal experience is the Ministry to the Armed Forces for The Lutheran Church—Missouri Synod, which addressed self-care in the annual training it provides to its chaplains and brought in professional care-givers who addressed the topic and walked participants through elements of self-care.

One of the challenges for all caregivers is to maintain healthy boundaries and to take care of themselves in the midst of constantly giving of themselves. This is especially challenging when working with people who are struggling or going through crises. This can lead to compassion fatigue and/or burnout if a healthy self-care plan is not consistently maintained. Pastors and chaplains are especially at risk due to the nature of their vocation and always being ‘on call.’ They are often the first or perhaps even the only person people go to for assistance when a personal tragedy occurs.

I am a Navy Chaplain with thirteen years of experience, over half of which is operational Experience, meaning assigned to a command that has units that deploy and spends significant time away from home base. The unit could deploy to locations ranging from a neutral to a hostile

threat environment. Every individual on a deployment, including the chaplain, experiences some type of stress and strain. The chaplain faces the additional stress and strain of helping others deal with that operational stress and strain. Chaplains are the only individuals who have total confidentiality, which comes with the burden of bearing secrets and struggles of other individuals.

In addition to the normal stress of operational billets, chaplains often work with those in crisis, including a personal hardship, loss, or relationships with loved ones back home. A crisis involving the loss of a Marine or Sailor affects the whole command and especially impacts those who knew the Service member. Chaplains may not have an opportunity to process the personal impact of crises, including losing a Marine or Sailor. When I attended a leadership training class, I was struck by how many of my peers had the similar experience of having lost Marines and Sailors, but not the opportunity to talk about it with peers or a supervising chaplain.

The experience of losing a Marine or Sailor is just one example of the type of extreme issues and challenges a chaplain will deal with during the time of service. Other issues include providing care for those who have been victims of abuse or sexual assault. Chaplains often work with people having suicide ideation. Other extremely challenging issues include Post Traumatic Stress Disorder (PTSD) or mortal injury. A chaplain may also be asked to support Casualty Assistant Calls Officer (CACO) and provide support to a family who has lost a Service member. It is critically important for a caregiver, especially chaplains, to be aware of the risk of burnout and compassion fatigue and implement a strong self-care plan.

My experience, observations, and interactions with other chaplains reveal that many do not have a consistently implemented self-care plan. This can cause various degrees of compassion fatigue or burnout, including taking a physical toll on the caregiver, making them less effective

in their work and ministry, and affecting their relationships, including with their spouse and family. It is critical for a chaplain to have a self-care plan that can be implemented even in an operational setting.

This is not to suggest that self-care and preventing burnout can be solved by one training class and certainly not by this paper and project. The primary goal is for the conversation and emphasis to be more intentional. The topic of self-care and its importance has grown in recent years, but still not where it needs to be. This project seeks to provide a helpful tool for Navy Chaplains.

Purpose

This project was conceived to create a three-hour workshop (training) to help chaplains implement a consistent self-care plan. The goal is for those who do not have an effective self-care plan to work through the barriers preventing it and put it into action. For those who have a self-care plan, the workshop provides an opportunity to reevaluate and make improvements as needed. Upon completion of the workshop, the participants will have a self-care plan and deeper understanding of the importance of consistent self-care. The overall goal is for this workshop to be shared and led by other chaplains throughout the Fleet, especially to reach first-tour chaplains as they are often billeted to operational settings and may not have the necessary self-care training.

The research seeks to increase the understanding of what comprises a healthy self-care plan and how chaplains can successfully implement it. This will be done through literature and qualitative research with Navy Chaplains. Core elements that should be included in all self-care plans (i.e. there should be a physical, mental, spiritual component for each plan) will be identified.

Common barriers—and those unique to chaplains—to implementing self-care will also be identified. Chaplains will thus gain insight on how to overcome those barriers. An additional critical element will be the reason for implementing self-care, due to the understanding of its impact on one’s personal life and ministry. Ultimately a strong and consistent self-care plan allows the chaplain to be healthy and more effective as a professional Naval chaplain and in his personal relationships.

Assumptions

Various models and categories of wellness are currently available. For example, Sarah Flint, in her review of self-care literature, includes the following self-care triangle: (1) self-awareness, (2) balance, and (3) connection—as proposed by Saakvitne and Pearlman. Gamble proposed three areas: (1) personal, (2) professional, and (3) organizational.² Venart lists wellness models that incorporate as few as three categories (i.e., mind, body, and spirit) and apply these categories to as many as seventeen factors of wellness.³

Although the foregoing models have much to offer, for this project, I view wellness in four main areas: (1) physical, (2) mental, (3) spiritual, and (4) social (emotional). These four areas each contain multiple aspects.

It is reasonable to assume that chaplains have had some education and training in self-care, including its importance. It is also reasonable to assume that chaplains have a basic understanding of the constituent elements of self-care. However, often self-care is not implemented on a consistent basis.

² Sarah McCausland Flint, “Preventing Vicarious Trauma in Counselors Through the Implementation of Self-Care Practices,” *Alabama Counseling Association Journal* 42, no. 1 (Spring 2018): 118.

³ Venart, Vasos, and Pitcher-Heft, “What Individual Counselors Can Do,” 56.

For purposes of this project, I view self-care in an operational setting as vastly different from that experienced in a shore billet. The operational tempo and requirements of the unit creates a significant barrier to self-care. For example, if one is deployed, he may not have the ability to communicate and stay in touch with loved-ones back home.

The majority of the training on self-care was developed based on the work of social scientists, not theologians. Thus, an important aspect of the project will be to demonstrate the benefits derived from theological perspectives, as well as the impact upon chaplains' motivation for self-care.

An essential goal of this project is to find the healthy middle ground of self-care. The far extreme is to take self-care and turn it into self-indulgence. The goal of self-care is taking care of self in order to take care of others and live out a person's various vocations. Self-care is not to be an excuse or escape from living out one's vocation, such as refusing to take a call or refusing to respond to an emergency. Neglecting requisite duties that occur on an allotted-day or during a scheduled time-off may also manifest such escapism. Jeffery Gates summarizes, "Additionally, if we try to care for ourselves without loving God and others, we are being self-indulgent and choosing what is against our well-being, just as we do not love God when we do not care for others."⁴

The motto of the United States Navy Chaplain Corps is "Called to Serve." There is no greater privilege than serving those who serve in challenging environments. By taking care of ourselves, in keeping with God's intent, we can serve others via our vocations more effectively.

⁴ Jeffery Gates, "Self-Care: A Christian Perspective," *Evangelical Review of Theology* 39, no. 1 (January 2015): 9.

CHAPTER TWO

THEOLOGICAL PERSPECTIVE

Self-care is a necessity in the life of a chaplain, because it is in keeping with God's first and third Commandments. Self-care is essentially taking care of the gifts from God, as articulated in The First Article of the Apostle's Creed (i.e., Christians confess that God has made all of creation, including people, with intentionality). Norman Nagel identifies the proper perspective regarding First Article gifts as follows:

The actual sequence is Third Article, Second Article, First Article. The Holy Spirit with the means of grace bestows the salvation gifts won for us by Christ. These gifts are received in faith. ... This faith, enlivened by the Spirit, has Him, then, to thank for this and can call First Article things gifts received in the way of faith ... As First article gifts these are unique to each Christian; the gifts of the Third and Second Article are given to every Christian.¹

Believers are forgiven and redeemed children of God, called through the Gospel. God has made each person with intentionality and designed each person uniquely through His bestowal of First Article gifts. God has appointed each person to love their neighbors (Matt. 22:39) through various vocations (roles and responsibilities). In order to accomplish this calling, it is necessary to take care of both the mind and body God bestows as part of His gifts in the First Article.

One of the common perceptions of the topic of self-care is that it is not a theological issue. It is discussed in the realm of social science and portrayed as optional. However, to be obedient to God's commands, self-care is essential.

A theological understanding sets the foundation for the importance of self-care for all Christians, particularly clergy (e.g., chaplains). Jesus commands us to love our neighbors as

¹ Norman Nagel, "The Spirit's Gifts in the Confessions and in Corinth," *Concordia Journal* 18, no. 3 (July 1992): 236–37.

ourselves (Matt. 22:39). Self-care plays an important role in this love. The Ten Commandments, especially the First and Third Commandments, provide the primary theological lens.

First and Third Commandments

The First Commandment provides the theological foundation of self-care. Martin Luther emphasized that the rest of the Ten Commandments flow from the First Commandment, for by keeping it, one keeps them all. Conversely, breaking the First Commandment breaks them all. This Commandment determines one's heart toward God: "All actions flow from the believer's heart, which is defined by fear and faith."² Therefore, it is critical to theologically examine the idea of self-care through the First Commandment: "You shall have no other gods. What does this mean? We should fear, love and trust in God above all things."³

The Commandment is clear—God is to be first in one's life. Luther's explanation of the First Commandment dispels any ambiguity. God comes first in every possible way. Nothing comes before God in one's thoughts, words, and deeds. The *Explanation to the Small Catechism* explains it this way: "What does it mean to have a god? It means to trust in and rely on something or someone whole-heartedly to help us in times of need and to give us all good things."⁴ Self-care is a First Commandment issue.

This seems counterintuitive. After all, focusing on self implies breaking the First Commandment and God's intent. However, self-care does not equate to being selfish and focused on self—seeking one's own pleasures and needs to the exclusion of God and others. Self-care, viewed in its proper context, is actually a fulfillment of the First Commandment.

² Charles P. Arand and Christopher John Donato, *Perspectives on the Sabbath: Four Views* (Nashville: B&H Academic, 2011), 238.

³ Martin Luther, *Luther's Small Catechism with Explanation* (St. Louis: Concordia, 2017), 13.

⁴ Luther, *Small Catechism*, 58.

Chaplains do not intentionally and consistently engage in self-care for two primary reasons. The first reason is that the chaplain feels the need to continually do more for the individuals he serves. There is no time for self because the chaplain needs to be there for the people they serve. The chaplain may feel that he is the only individual to whom the people served may turn for pastoral care. Chaplains often rationalize this with the belief that as a chaplain, they are called by God to do the work and ministry required of chaplains.

The chaplain must always keep in mind that the primary focus is on God. It is God whom we should fear, love, and trust above all things. Luther, in the Large Catechism states, “So it is with all idolatry. Idolatry does not consist merely of erecting an image and praying to it, but it is primarily a matter of the heart, which fixes its gaze upon other things and seeks help and consolation from creatures, saints, or devils.”⁵

The second reason self-care can become a First Commandment issue is that chaplains, because of the nature of the work, do not take time for self-care and frequently fall into the trap of turning to other things for support and to mitigate stress.

Such things as over-eating, alcohol, and/or other deleterious habits are often relied upon, rather than God. Even ‘good’ things, such as exercise, can become addictions relied upon in lieu of God, and a violation of the First Commandment. The chaplain needs to ask, “Am I depending on or turning to these things rather than relying upon God?” In other words, “Am I trusting in God with all my heart, mind, and strength?”

Gerald May asserts that we become attached to anything to which we turn for comfort and peace, among other things, rather than God. Reliance upon such attachments may become

⁵ Large Catechism I.22 in Robert Kolb, Timothy J. Wengert, and Charles P. Arand, eds., *The Book of Concord: The Confessions of the Evangelical Lutheran Church* (Minneapolis: Fortress, 2000), 388.

addictive. May writes: “It is addiction that creates other gods for us. Because of our addictions, we will always be storing up treasures somewhere other than heaven, and these treasures will kidnap our hearts and souls and strength.”⁶ Edward Welch reminds us that all of humanity is enslaved to addictions because all of us are in slavery to sin. Although we often conceive of certain people with addictions, all of us have “experienced ungodly cravings,” but some “are more noticeable and have more tragic consequences.”⁷

People, including chaplains, have things that help them relax, de-stress, deal with anxiety, frustration, etc., including: food, exercise, sports, craft projects, alcohol, etc. In moderation, all of these things are acceptable and for our benefit. However, if the desire or self-defined need excludes one's reliance upon God, an unhealthy addiction results. May puts it this way:

No we must try to put to rest any notion that addictions are good. The only goodness in them is that they can defeat our pride and lead us to more openness to grace. It may also help to remember that the destructiveness of addiction does not lie in the things to which we are attached, nor even in our simple desires for them. The things themselves are simply part of creation and God made them inherently good. The destructiveness of addiction lies in our slavery to these things, turning desire into compulsion with ugly and loveless consequences for ourselves and our world.⁸

God has given humanity good things in His created world. Sinful desires take His good gifts and makes them first in one's life. Thus, they become the source for hope and comfort, or the needed strength to get through a situation. May's label “addiction” is somewhat easier to hear than Luther's “idolatry,” the breaking of the First Commandment:

Let each and every one, then, see to it that you esteem this commandment above all things and not make light of it. Search and examine your own heart thoroughly, and you will discover whether or not it clings to God alone. If you have the sort of heart that expects from him nothing but good, especially in distress and need, and

⁶ Gerald G. May, *Addiction and Grace: Love and Spirituality in the Healing of Addictions* (New York: Harper, 1988), 16.

⁷ Edward T. Welch, *Addictions: A Banquet in the Grave: Finding Hope in the Power of the Gospel*, Resources for Changing Lives (Phillipsburg, NJ: P&R, 2001), 66.

⁸ May, *Addiction and Grace*, 40–41.

renounces and forsakes all that is not God, then you have the one, true God. On the contrary, if your heart clings to something else and expects to receive from it more good and help than from God and does not run to God, but flees from Him when things go wrong, then you have another god, an idol.⁹

Chaplains face many difficult situations, especially in operational settings. The demands on a chaplain's time and care are constant. In those moments of distress and need, to what is the heart clinging? Is it to God, to other things, or simply relying solely on self? Robert Kolb writes, "With the Large Catechism's explanation of the First Article of the Creed, Luther returned to the point of the First Commandment: our trust identifies our God. What we believe with our heart, we reflect in our actions."¹⁰

Does the chaplain trust in God and what He does through His means of grace? Does the chaplain use the materials and physical gifts of God in service of Him or does he find comfort and solace in these things during stressful and challenging times? Fallen humans are constantly tempted to find other things as one's God. It is equally, if not more so, dangerous for clergy, since few speak the Law to a chaplain, who can justify whatever outlets he chooses for dealing with the burdens of ministry. Ultimately, at the heart of it all, the question must be asked, "What, or who, is the God he is following?"

We have to look outside ourselves for life. And so Luther assumes that as creatures we cannot live without trust in a god. Thus the question of the first commandment is not, "will we have a god?" But "Who or what is your God?"¹¹

Luther asserts that everyone turns to someone or something for comfort, help, and strength. Good self-care begins with fearing, loving, and trusting in God above all things.

⁹ LC I, 28 in Kolb and Wengert, 390.

¹⁰ Robert Kolb, "'That I May Be His Own': The Anthropology of Luther's Explanation of the Creed," *Concordia Journal* 21, no. 1 (January 1995): 35.

¹¹ Charles P. Arand, "Back to the Beginning: Creation Shapes the Entire Story," *Concordia Journal* 40, no. 2 (Spring 2014): 134.

The First Commandment reveals what God has given His people to do—to fear and love and trust in Him above all things. To take care of oneself, one has to know and live each day in the reality that God comes first. Relying on one’s self will never work. The First Commandment teaches the proper theological view of self-care.

The two aspects of the Third Commandment, Sabbath/rest and the need to be spiritually fed, also address self-care.¹² Luther says:

The day itself does not need to be made holy, for it was created holy. But God wants it to be holy for you. So it becomes holy or unholy on your account, depending on whether you spend it doing something holy or unholy. How does such sanctifying take place? Not when we sit behind the stove and refrain from hard work or place a garland on our head and dress up in our best clothes, but as has been said, when we make use of God’s Word and exercise ourselves in it.¹³

We are to be involved in God’s Word. We are to be fed, so that a day may be holy for us as God wants. “The power and force of this commandment consists not in the resting but in the hallowing, so that this day may have its special holy function.”¹⁴ Part of this hallowing, this special function of the Sabbath, is the opportunity to reflect. “Sabbath is not simply a time to remember; it is not just a cessation from labor but an opportunity to reflect on God’s power and his redeeming work in our lives, allowing time to recognize and reflect on God’s transcendence and sovereignty.”¹⁵

This rest and reflection must be intentional. If other chaplains are in the area of operation or even the same platform, a chaplain can be fed by sitting through a worship service or participating in other opportunities. Even if one is the sole chaplain, sermons available online or

¹² “We should fear and love God so that we do not despise preaching and His Word, but hold it Sacred and gladly hear and learn it.” Luther, *Small Catechism*, 74.

¹³ LC I, 87 in Kolb and Wengert, 398.

¹⁴ LC I, 94 in Kolb and Wengert, 399.

¹⁵ Margaret Diddams, et al., “Implications of Biblical Principles of Rhythm and Rest for Individual and Organizational Practices,” *Christian Scholar’s Review* 33, no. 3 (Spring 2004): 315.

via podcasts can provide spiritual sustenance.

A chaplain, like all Christians, needs to be spiritually fed for his own faith and to keep the devil at-bay. Luther, in the Large Catechism, strongly reminds the reader:

You are daily under the dominion of the devil and he does not rest day or night in seeking to take you unawares and to kindle in your heart unbelief and wicked thoughts against these three and all other commandments: For where the heart stands idle and the Word is not heard, the devil breaks in and does His damage before we realize it.¹⁶

The time spent studying and reflecting on God's Word helps the chaplain to have greater impact on those served. "We sanctify the day by devoting ourselves to God's Word, but the Word ends up sanctifying us and thus the day."¹⁷ Since the chaplaincy can be a challenging vocation, the chaplain needs to be strengthened by God and His gifts.

An important dimension of the Sabbath rest in the Third Commandment is the impact on the heart. Psychologist James White suggests this "virtuous rest" includes more than the action (or lack of activity) in taking a Sabbath; it includes a time for reflection.

Rest is also an inward attitudinal respite and reflection on God. Virtuous rest involves the Sabbath heart—the orienting of our hearts and minds towards God, reflecting on His presence, enjoying His creation, and humbly admitting that He is sovereign. A Sabbath heart is able to wholly rest amidst the stress, pain, and upheaval of a broken world.¹⁸

Margaret Diddams points out that there is much to be gained by creating the opportunity for reflection and keeping things in perspective.

In the creation story, God used the Sabbath to reflect on the goodness of his creation: "God saw all that he had made and it was very good" (Gen 1:31a). Likewise, Sabbath reflection invites people to remember that the physical world, including humanity, is good and in the hands of God. Christians can affirm a type of hope, a transcendent hope," even when they do not have control over the pathways of difficulties or over

¹⁶ LC 1, 100 in Kolb and Wengert, 400.

¹⁷ Arand and Donato, *Perspectives on the Sabbath*, 259.

¹⁸ Jama White, Amanda Blackburn, and Mary Plisco, "Rest as a Virtue: Theological Foundations and Application to Personal and Professional Life," *Journal of Psychology and Theology* 43, no. 2 (2015): 99.

their ability to enact solutions. They can affirm that there is a power outside of the physical realm that can impact outcomes. This positive appraisal among Christians has been shown to result in higher well-being and less stress.¹⁹

Much in life seems out of control, especially in the midst of an operational billet. A chaplain constantly experiences this lack of control in the stressors of operational requirements of his assignment. He also walks beside people experiencing similar stressors. These same people may have additional stress at home: relationships issues, family problems, loved ones going through difficult times including health issues and perhaps even losing loved ones. Deployment complicates the stress, since the military member is often unlikely to be able to go home to provide support and help.

The chaplain needs constant reminding that God is in control; his hope is in Christ. The chaplain must take time to reflect on God's grace and goodness, to enable the chaplain to better minister to those whom he may be called to serve. The chaplain needs to take time to be fed and to hear God's Word of promise and forgiveness. This rest also provides time for the chaplain to reflect on what God has accomplished in and through the chaplain's life. Though this aspect of Sabbath rest is difficult to implement, particularly in an operational setting, it is vitally important.

A chaplain may not be able to attend a worship service, but time in a corporate Bible study or in personal reading of God's Word and prayer is essential. Luther says: "Therefore vocation, which involves the total of a person's relationships in his situations, can be properly fulfilled only by constantly renewed prayer."²⁰ All Christians, especially chaplains, should be in continuous prayer. McCormick, in summarizing Karl Barth's perspective on the importance of

¹⁹ Diddams et al., "Implications of Biblical Principles," 320.

²⁰ Gustaf Wingren, *Luther on Vocation* (Eugene, OR: Wipf & Stock, 2004), 192.

Sabbath and prayer in a theologian's life, describes it this way:

Prayer flows through their lives like a river, carrying them into deeper waters of study, and always bringing them to rest on the shore. The object of their rest is not some 'thing', but rather, some 'One' who is never mute. Consequently, the task of theological work consists in listening to Him, the One who speaks through His work, and in rendering account of His word to oneself, the Church and the world.²¹

Chaplains are tempted to feel too busy or too important to spend time in the Word and prayer. However, McCormick reminds his readers that no one, not even the great theologians of history, is too important or too busy.

Barth recalls that it was not by the brilliance of their virtues, wisdom or piety that the work of God was accomplished in people like Calvin or Luther. Rather, it was by prayer—humble prayer arising from human weakness; audacious prayer rooted in the belief that Jesus Christ, the call for help is not only heard but it is indeed, already answered.²²

Another way to illustrate and highlight the importance of this need to be constant in prayer and study of God's Word is through Martin Luther's approach to the theology and spirituality of *oratio* (prayer), *meditatio* (meditation) and *tentatio* (temptation). John Kleinig sums up Luther's approach in this way:

These three terms describe the life of faith as a cycle that begins with the prayer for the gift of the Holy Spirit, concentrates on the reception of the Holy Spirit through meditation on God's Word, and results in spiritual attack. This in turn leads a person back to further prayer and intensified meditation.²³

For Luther, the study of theology and therefore the work of chaplains begins with prayer and is a journey that continues throughout life.²⁴ This prayer life is not all that is needed, but leads to the next level of meditation which is hearing God's Word as it is spoken to him

²¹ Frances Rice McCormick, "Sabbath Rest: A Theological Imperative According to Karl Barth," *Journal of American Academy of Religion* 62, no. 2 (Summer 1994): 549.

²² McCormick. "Sabbath Rest," 151.

²³ John W. Kleinig, "*Oratio, Meditatio, Tentatio*: What Makes a Theologian?" *Concordia Theological Quarterly* 66, no. 3 (July 2002): 258.

²⁴ Kleinig, "*Oratio, Meditatio, Tentatio*," 260.

personally and is more than an “inward, mental activity, but an outward ritual enactment” that reaches “the very center of his being.”²⁵ Leopoldo Sánchez highlights that Luther’s idea of *meditatio* includes others.

One becomes a strong and disciplined theologian not primarily in the privacy of one’s own soul’s dealings with God (though there is a time for personal faith), but in the company of fellow theologians who share reliance on God’s wisdom through their corporate prayers and study of God’s Word. Theologians are made in the open as they gather together for worship and care for one another amid life’s struggles and afflictions.²⁶

The chaplain needs to spend time in prayer and in God’s Word on a personal level and also with others through corporate worship or Bible study. It is imperative to spend this time because the *tentatio* (temptation) is a reality for a chaplain, especially in an operational setting.

The word *tentatio* (Ger. Anfechtung) goes beyond the idea of enticing or seducing into sin found in the English word *temptation* as is more broadly described as “all the doubts, turmoil, pang, tremor, pains, despair, and desolation and desperation which invade the spirit of man.”²⁷

The challenges facing a chaplain in an operational setting are more than a temptation to fall into sin, which is certainly constantly present. As described earlier, the operational setting can be extremely challenging in both the environment and the continuous ministry challenges a chaplain may encounter. The struggle can be constant and if one turns to oneself and one’s own abilities or strengths, it is idolatry (that is, reliance on self rather than God for resilience) and a chaplain’s spiritual health and faith could be at risk.

If, however, in the midst of the struggle, one turns to God and His Word one “experiences the sweetness and loveliness of God’s Word with his whole being, rather than just with the

²⁵ Kleinig, “*Oratio, Meditatio, Tentatio*,” 262.

²⁶ Leopoldo A. Sánchez, *Sculptor Spirit: Models of Sanctification from Spirit Christology*, (Downers Grove, IL: InterVarsity Press Academic, 2019), 102 Kindle.

²⁷ Sánchez, *Sculptor Spirit*, 101.

emotions; he experiences the power and strength of God's Word with His whole being rather than just with the body."²⁸ Through the cyclical rhythm of *oratio*, *meditatio*, and *tentatio*, a chaplain trains himself in the keeping of the Third Commandment, and in so doing not only maintains healthy self-care but also grows stronger in his faith.

The other important aspect of the Third Commandment is the idea of rest. Beginning with the creation account in Genesis, the idea of Sabbath as a day of rest has been established. "By the seventh day God had finished the work he had been doing; so on the seventh day he rested from all his work. Then God blessed the seventh day and made it holy, because on it he rested from all the work of creating that he had done" (Gen 2:1).

As with everything God does, this is intentional and for His creation. The seventh day was set aside for a specific purpose.

God's work culminates in rest on the seventh day. David Adams calls this state of rest, "the *telos*, or goal of God's creative activity." In other words, the movement toward the seventh day "reveals God's intention that this state of rest should characterize all that he had made, and should be the on-going experience of His creation"²⁹!

God designed rest for His creation and wants His creation, especially people, to experience it. Throughout the Old Testament, particularly with the people of Israel, the idea of observing the Sabbath was established as a day of worship and a day where no work was to take place. By the time of Jesus' ministry, this had been taken to the extreme and was a constant source of contention with Jesus and the religious leaders. Many challenged Jesus on the propriety of healing on the Sabbath. Jesus declared that the Sabbath was made for man, not man for the Sabbath (Mark 2:27). It is intended to be a gift from God.

²⁸ Kleinig, "*Oratio, Meditatio, Tentatio*," 264.

²⁹ Arand, "Back to the Beginning," 141.

Setting time aside to celebrate God's creation both expresses a creaturely faith that acknowledge the rule of God and is in turn strengthened by God's creative work. It provides opportunity for us to slow down and even stop. For it takes time to watch attentively and observe what God has done.³⁰

For Martin Luther, the idea of a general day of rest is what is meant by the term Sabbath.

This rest reflects God's day of rest at the end of the week of creation. As Arand summarizes Luther's point "Our Creator did not design us to be on the go 24-7, 365 days a year ... the observance of the Sabbath was intended to serve the needs of God's human creatures for rest and refreshment."³¹

Luther speaks of the Sabbath and other holy days in his meaning to the Third Commandment:

We observe them (holy days), first, because our bodies need them. Nature teaches and demands that the common people-menservants and maidservants who have gone about their work or trade all week long-should also retire for a day to rest and be refreshed.³²

A chaplain could argue that he doesn't need the rest or that operational demands require constant service. Yet God commands rest. Martin Marty says, "If God owns man's rest time, and man really believes in God, then man is asked to rest in God, as part of God's plan."³³ God wants us to rest. To not take time to rest is violating His desire for us. This command is also a gift, as Veith describes

When Jesus was accused of breaking the Sabbath by helping people, He set forth an important principle: "The Sabbath was made for man, not man for the Sabbath" (Mark 2:27). That is to say, the Sabbath is God's gift to busy, distracted, weary human beings. He gives us a break, time to recharge our lives by spending time with Him, our families, and ourselves. Above all the Sabbath speaks to us of Christ. That

³⁰ Arand, "Back to the Beginning," 142.

³¹ Arand and Donato, *Perspectives on the Sabbath*, 254.

³² LC I, 83 in Kolb and Wengert, 397.

³³ Quoted in Arand and Donato, *Perspectives on the Sabbath*, 255.

God wants us to honor Him by not working is a reminder that we are not saved by works, that in Christ we enjoy a Sabbath-rest.³⁴

The Sabbath is created for God's creation and is a specific command for His people. The need for time away from work and ministry for spiritual nourishment plays an important role for God's servants. This is demonstrated in the New Testament. Jesus often withdrew by Himself to pray (Mark 1), not just for spiritual renewal, but also to prepare for encountering big decisions or events (Luke 5). Jesus intentionally invited the disciples to come away with Him, after they returned from being sent out, to be refreshed and renewed (Mark 6:31–32). Peter, in Acts 10, was praying when God gave him a vision about Gentiles being accepted.

Chaplains need the time to be recharged physically and to be fed spiritually. Sabbath rest forms a critical component of self-care for chaplains. Although consistent self-care may be quite challenging while serving in an operational billet, it is highly important for a chaplain to intentionally strive to achieve this goal.

First Article and Vocation

In the First Article of the Apostle's Creed, we confess that God has made us and all creatures according to His purpose. This purpose is to serve Him by serving others, which is tied into the doctrine of vocation. Martin Luther lays out his vocation primarily based on the fact that God works through people. This includes various 'jobs' that exist in the world, but also the various relationships that we have (e.g., parent, spouse, child, co-worker). God has created the world and it is our responsibility to take care of it as stewards of His creation. Kolb ties creation and vocation this way: "By God's design we are threads in a finely woven tapestry, a carefully

³⁴ Gene Edward Veith, *God at Work: Your Christian Vocation in All of Life*, Focal Point Series (Wheaton, IL: Crossway Books, 2002), 64–65.

designed interactive community of care and concern”³⁵

Self-care includes taking care of ourselves, keeping in mind that our bodies are God’s creation. We are made in God’s image and intended to have dominion over the creation. According to Gen 2:15, dominion means neither domination nor autonomy, but responsibility for the care and cultivation of the earth. This *dominium terrae* is a call to responsibility, to oversee the earth and see to it that it continues to provide what is needed for the promotion and preservation of life.³⁶

If people are responsible to be stewards over all of God’s creation, surely that implies that we should start with what God has made in His own image, our bodies and minds. Caring for ourselves is in fulfillment of God’s desire and allows us to care for the rest of His creation.

We confess in the First Article of the Apostle’s Creed that “[We] believe in God the Father Almighty, Maker of heaven, and earth.” Martin Luther amplifies this in his meaning to the First Article:

I believe that God has made me and all creatures; that He has given me my body and soul, eyes, ears, and all my members, my reason and all my senses, and still takes care of them. He also gives me clothing and shoes food and drink, house and home, wife and children, land, and animals, and all I have. He richly and daily provides me with all that I need to support this body and life. He defends me against all danger and guards and protects me from all evil. All this He does out of fatherly, divine goodness and mercy, without any merit or worthiness in me. For all this it is my duty to thank and praise, serve and obey Him. This is most certainly true.³⁷

God had created us as His “chief and foremost of all visible creatures.”³⁸ As J.T. Mueller describes, man is the crown of creation for man was formed by God out of dust and breathed into

³⁵ Kolb, “That I May Be His Own,” 34.

³⁶ Charles Arand, “Personal Autonomy versus Creaturely Contingency: The First Article and the Right to Die,” *Concordia Journal* 20, no. 4 (October 1994): 396.

³⁷ Luther, *Luther’s Small Catechism*, 156.

³⁸ Edward W. A. Koehler, *A Summary of Christian Doctrine; A Popular Presentation of the Teachings of the Bible* (St. Louis: Concordia, 1971), 47.

and made in the image of God, that is, made to be an intelligent and rational being to rule in His stead over the world.³⁹ The Psalmist reminds us that we are “fearfully and wonderfully made” (Ps 139:14). Paul echoes, “Or do you not know that your body is a temple of the Holy Spirit within you, whom you have from God? You are not your own, for you were bought with a price. So glorify God in your body” (1 Cor 6:19–20). Lockwood comments:

But the biblical view is that the body, as the physical aspect of a person and an essential part of human beings, created by God, is to be honored. A Christian’s body is God’s property, an integral part of a person he has redeemed and claimed for the resurrection.⁴⁰

One’s physical body is God’s property, and there is no greater way to honor God and this gift than to take care of it. Additionally, God has made people and given them physical bodies to perform tasks He has given them to do. He created us to be good stewards over His creation. Naturally, this would include taking good care of the bodies He has provided.⁴¹ Eating healthy meals, exercising, getting an appropriate amount of sleep, etc. are all important elements of self-care. Bruce Epperly summarizes another pastor’s perspective on this important idea:

Healthy pastors see spiritual and physical well-being as interdependent. They recognize that exercise and diet can be prayerful in nature. They also see care of their bodies as the most intimate and important area of personal stewardship ... Neglecting my body is one of the worst forms of ingratitude. I say thank you to God by caring for this wondrous gift of my body in all its fragility and complexity.⁴²

A Christian needs to take care of the mind and body that God has given to him so that he can serve and obey Him.

Christians serve God by serving others. Charles Arand sums up this idea: “In the doctrine

³⁹ Theodore Mueller, *Christian Dogmatics: A Handbook of Doctrinal Theology* (St. Louis: Concordia, 1955), 184.

⁴⁰ Gregory J. Lockwood, *1 Corinthians*, Concordia Commentary (St. Louis: Concordia, 2000), 217.

⁴¹ Luther, *Luther’s Small Catechism*, 161.

⁴² Bruce Gordon Epperly, *A Center in the Cyclone: Twenty-First Century Clergy Self-Care* (Lanham: Rowman & Littlefield, 2014), 66.

of creation, Christians confess that we do not have life from ourselves. We are not our own.”⁴³

One serves God by serving in our various vocations and the First Article is tied together with the doctrine of vocation. Veith, when discussing vocation, observes, “God has chosen to work through human beings, who in their different capacities and according to their different talents, serve each other.”⁴⁴ Wingren, summarizes Luther’s perspective on vocation:

Instead of coming in uncovered majesty when He gives a gift to man, God places a mask before his face. He clothes himself in the form of an ordinary man who performs his work on earth. Human beings are to work, “everyone according to his vocation and office” through this they serve as masks for God, behind which he can conceal himself when he would scatter his gifts.⁴⁵

A vocation is more than an occupation from which an individual draws a paycheck.

A critical piece of the doctrine of vocation is the fact that chaplains have responsibilities and callings above-and-beyond those of their ministries. It is easy for a chaplain to rationalize that he is doing “God’s work” through his ministry and, therefore, higher and more important than other vocations and responsibilities. Luther argued against the idea that religious orders and works are better than those of other vocations:

That faith produces good works, Luther insisted. But he rejected the medieval understanding of the distinction between sacred or religious good works and profane or secular good works. He taught that many religious good works violate God’s will because they focus attention on the human performance of works which do not serve others or praise God. Instead, he taught that the true good works are those which God commands within the structure of the three estates or situations (home, including daily work: community or state: and congregation or church) in the callings in which he gives each person responsibilities for the care of others.⁴⁶

People are created to care for each other. God works through the individual and the various

⁴³ Arand, “Personal Autonomy,” 390.

⁴⁴ Veith, *God at Work*, 14.

⁴⁵ Wingren, *Luther on Vocation*, 138.

⁴⁶ Robert Kolb, “God, Faith, and the Devil: Popular Lutheran Treatments of the First Commandment in the Era of the Book of Concord,” *Fides et Historia* 15, no. 1 (Fall-Winter 1982): 82.

roles they have in life to provide for their neighbor. This care for others begins with the vocations of home, and then community and church. “But the household—that is the family—is the primary estate and the site of our most important earthly vocations.”⁴⁷ The vocation of being a parent, a spouse, a child, and members of a community are equally as important as that of the work being done as a chaplain. A chaplain should be intentional in setting boundaries for his other vocations. Practicing good self-care allows a chaplain to fulfill these vocations.

Biblical Examples of Self-care

Biblical examples provide the final piece of the foundation for the theological basis for self-care and highlight the importance of having a right relationship with God and with others. The term ‘self-care’ does not appear in Scripture and there are no direct corollaries to a chaplain serving in the military. However, some Biblical examples can illustrate the importance of having the right relationship with God (First and Third Commandment) especially in the midst of struggle, using God’s gifts for His purpose as He has called us and in relationship to others (First Article and Vocation).

The first is that of Moses, called by God (vocation) to lead His people out of slavery in Egypt to the Promised Land. Moses was hesitant to assume such a challenging and overwhelming responsibility, doubting his First Article gifts. However, Moses acquiesced to God’s call, depending on Aaron to speak for him (Exod 4). Moses had his moments of struggle and doubt and certainly what sustained him was his unique relationship with God. Moses spent a great deal of time with God (Third Commandment). In Exod 33:11, we read that God spoke to him like a friend, face-to-face.

⁴⁷ Gene Edward Veith and Mary J. Moerbe, *Family Vocation: God’s Calling in Marriage, Parenting, and Childhood* (Wheaton, IL: Crossway, 2012), 25.

Yet, despite this close relationship, Moses needed others in his life, such as Aaron and Joshua. He also needed someone like Jethro to hold him accountable since even Moses could fall into the trap of idolatry and depending only on himself rather than God or others. As discussed above, one of the traps into which chaplains often fall is the notion that the chaplain is the only individual who can address the concerns of those seeking assistance. Exodus 18 reveals how Moses fell into a similar trap. It took the intervention of his father-in-law, Jethro, to remind Moses he needed to take care of himself to enable him to lead the people for the long-term. “Moses’ father-in-law said to him, ‘What you are doing is not good. You and the people with you will certainly wear yourselves out, for the thing is too heavy for you. You are not able to do it’” (Exod 18:17–18). Moses heeded Jethro’s advice and shared the burden with others.

Elijah’s vocation was that of a prophet. He also had a close relationship with God, yet had his moment of *tentatio* and thus he needed God and others. First Kings 19 describes Elijah being afraid and running for his life from Queen Jezebel. Elijah was experiencing *tentatio* in that every part of his being was struggling and he simply wanted to die. The Lord provides for Elijah’s physical needs of food and rest and then reminds Elijah he is not alone. The Lord is with him and there are 7,000 others who have not fallen away, and Elisha will be his companion and eventual successor. Elijah is renewed physically, mentally, and spiritually and continues his ministry.

In the New Testament we see the example of Paul. Paul’s vocation was to be an apostle to the Gentiles (Acts 9). Paul spent time in personal prayer as well as fellowship with other believers (Acts 17) and through God’s miraculous intervention in his life he received a unique vision (2 Cor 11). Yet, he was not without his struggles and within those struggles he relied on God and His Word and grace (2 Cor 12). Paul also benefited greatly from his relationship with other believers who encouraged him greatly, especially during his hardships and times in prison

(Acts 3: 15, 1 Cor 16: 17, Col 4:11, 2 Tim 4: 11).

The Biblical examples of Moses, Elijah, and Paul show the importance of the various elements of self-care. All three used their First Article gifts to serve in their vocations and were called by God to a specific purpose. Yet all three had moments of struggle where they relied on God and others for their physical and spiritual needs.

The theological perspective provides the answer to the “why” of self-care for a chaplain. For chaplains will have moments of struggle, perhaps constant ones in the midst of an operational setting. Martin Luther writes in his work “Comfort When Facing Grave Temptations,” that in those moments of struggle one cannot rely on himself, but rather only trust in God and His Will to be done.⁴⁸ The chaplain is called to serve God and depend on Him alone for all things. This includes time to rest and to be refreshed both physically and spiritually for his vocation as chaplain and vocations other than the chaplaincy, which are of equal importance.

Luther continues on that in those moments of struggle it is critical to remember one is not alone in the struggle and that there is a reason for the struggle (though that reason is often hidden from us).⁴⁹ The chaplain is called to this ministry and he is not alone in the struggle. The chaplain in practicing good self-care theologically can not only endure the challenges, but can become stronger as a person and theologian.

⁴⁸ Martin Luther, *Devotional Writings 1*, ed. Martin O. Dietrich, vol. #42, *Luther's Works* (Philadelphia, PA: Fortress Press, 1969), 183.

⁴⁹ *LW* 42:183. Luther also notes the importance of drawing comfort from the company of saints who intercede for us amid life struggles (see *LW* 42:185).

CHAPTER THREE

RECENT RESEARCH

Caregivers, including chaplains, tend to not take care of themselves as they should. There is danger in not keeping oneself healthy, dismissing signs that may be present. Research shows that self-care both makes one more effective and prevents burnout, which is essentially the result of not practicing self-care. Teater and Ludgate offer some observations in answer to the question, “Why do caregivers neglect self-care?”

It could be that we don’t place a very high priority on keeping ourselves well and healthy. We may also deny our own challenges, which can lead us to avoiding dealing with them. You may make a false attribution about what is going on or what you really need. ... You may decide that improved self-care is not feasible.¹

Herbert Freudenberger was one of the first to identify and research burnout and define it as “A depletion or exhaustion of a person’s mental and physical resources attributed to his or her prolonged yet unsuccessful striving toward unrealistic expectations, internally or externally derived.”² Edelwich and Brodsky define burnout as “Progressive loss of idealism, energy, and purpose experienced by people in the helping professions.”³ Two of the leading researchers in the area, Christina Maslach and Michael Leiter, offer a more thorough definition:

Burnout is the index of the dislocation between what people are and what they have to do. It represents an erosion in values, dignity, spirit, and will—an erosion of the human soul. It is a malady that spreads gradually and continuously over time, putting people into a downward spiral from which it’s hard to recover.⁴

Burnout is something that happens over time and may be subtle. Wicks observes, “the

¹ Martha Teater and John W Ludgate, *Overcoming Compassion Fatigue: A Practical Resilience Workbook*, (Eau Claire, WI: Pesi, 2014), 20, Kindle.

² Robert J Wicks, *The Resilient Clinician* (New York: Oxford University Press, 2008), 20.

³ Wicks, *Resilient Clinician*, 20.

⁴ Christina Maslach and Michael P Leiter, *The Truth About Burnout* (San Francisco: Jossey-Bass, 1997), 17.

causes of burnout are often so quiet and insidious that we fail to notice them until they have caused a great deal of harm.”⁵ Flint highlights that, even in the best of times, caring for the mental health of others is a taxing endeavor, but even more so when there is high productivity demands, challenging client populations, mandates for short-term interventions and other personal life stressors.⁶ Research reveals that self-care is the answer to preventing burnout. Its inclusion as part of the ethical requirements for the American Counselor’s Association betrays this importance.⁷

Even for clergy, the rise of burnout has led to an increased awareness of the need for the discussion, training, and encouragement to practice self-care. While burnout was initially researched and applied to other professions, studies have demonstrated similarities between religious leaders and social workers as indicated on the “Maslach Burnout Inventory.”⁸ Adams, Hough, Proeschold-Bell, Yao, and Kolkin note that although clergy attrition numbers are unknown, burnout was among the top reasons for clergy attrition, and 14 percent of clergy who left the ministry stated that burnout was the main reason.⁹ A more blunt perspective is offered:

Clergy work-related poor psychological health, stress, and burnout pose an increasing serious problem for the leaders of denominations throughout the world, as the particular circumstances related to spiritual and religious leadership in the community have a special and unique dynamic. . . . Combined with the sense of urgency attached to the church’s mission, clergy and church leaders frequently become the victim of their own humanity and frailty.¹⁰

⁵ Wicks, *Resilient Clinician*, 18.

⁶ Flint, “Preventing Vicarious Trauma in Counselors,” 116.

⁷ “2014 American Counselor Association Code of Ethics,” American Counseling Association, (December 1, 2018): 8, https://www.counseling.org/docs/default-source/ethics/2014-code-of-ethics.pdf?sfvrsn=2d58522c_4.

⁸ Scott Lovell and Rachel Greg, “The Rural Pastors Initiative: Addressing Isolation and Burnout In Rural Ministry,” *Pastoral Psychology* 64, no. 1 (2015): 77.

⁹ Christopher J. Adams et al., “Clergy Burnout: A Comparison Study with Other Helping Professions,” *Pastoral Psychology* 66, no. 2 (April 2017): 150.

¹⁰ Kelvin J. Randall, “Clergy Burnout: Two Different Measures,” *Pastoral Psychology* 62, no. 3 (June 2013): 333.

Compassion fatigue causes a similar danger for caregivers. Compassion fatigue usually refers to the incidence of post-traumatic stress disorder symptoms in those who work with people who have experienced trauma. Compassion fatigue, unlike burnout, occurs suddenly.¹¹ Mattioli et al. note that compassion fatigue happens when one forfeits one's own needs through the reduction in boundaries, resulting in the inability to protect one's energy. This often leads to cynicism, exhaustion, sadness, and distancing from those to whom care is intended to be provided. As a result, the provider becomes emotionally isolated.¹² Chaplains in operational billets, due to the constant presence of stress, face a high risk for compassion fatigue.

Boundaries are difficult to achieve and maintain. The demand for constant support may drain one's energy. Julie Merriman emphasizes that self-care is one of the most essential factors to protect against compassion fatigue.¹³

The need for self-care advocated by Merriman, Wicks, and multiple other researchers applies to pastors and chaplains. Chandler states that "[I]n the literature review of pastoral burnout, three practices have been identified as crucial for burnout prevention: (a) (spiritual renewal) (b) rest-taking and (c) active support systems."¹⁴ This chapter will synthesize the theological points addressed earlier with current research.

Spirituality

From a theological perspective, as expressed in the First and Third Commandments, self-

¹¹ Greg Scott, "The Rural Pastors Initiative," 73.

¹² Dana Mattioli, Linda Walters, and Emily Cannon, "Focusing on the Caregiver: Compassion Fatigue Awareness and Understanding," *MDSURG Nursing* 27, no. 5 (October 2018): 323.

¹³ Julie Merriman, "Enhancing Counselor Supervision Through Compassion Fatigue Education," *Journal of Counseling & Development* 93, no. 3 (July 2015): 372.

¹⁴ Diane J. Chandler, "Pastoral Burnout and the Impact of Personal Spiritual Renewal, Rest-Taking, and Support System Practices," *Pastoral Psychology* 58, no. 3 (June 2009): 275.

care is critical. Current research and secular caregiving professionals use terms such as mindfulness and self-compassion. Although these terms are not synonymous with the First and Third Commandments, one can compare the research goals of secular caregivers with what was discussed earlier.

Similar to the dangers discussed regarding breaking of the First Commandment, those who fail to implement self-care soon find themselves in a conundrum. The desire to be all things to all people, while neglecting self-care leads to avoidable maladies. White, Blackburn, and Plisco conclude that one of the barriers to rest and self-care is the inner turmoil experienced and the internal messages received. Caregivers often delude themselves into thinking that they must do more or their job will not be adequately done. Such delusional thinking “feeds the prideful guilt that perceives one has not done enough, which seems an outgrowth of the age-old deception that we are at the center of everything and that ‘it all depends on me.’”¹⁵ The dependence on the caregiver, the focus on the self, rather than God, violates the First Commandment.

Chandler’s look at 270 members of the clergy concluded that clergy often attempt to always be available and put ministerial functions first:

This finding confirms the importance of providing healthy boundaries within the context of ministry activity in order to promote positive self-care boundaries within the context of ministry active in order to promote positive self-care and ample opportunity for rest and renewal.¹⁶

Similarly, Hotchkiss and Leshner concluded that an important component is for caregivers to have boundaries, which include manageable work hours. Caregivers must “be able to say no to inappropriate requests from patients and families.”¹⁷ The cost of not having manageable working

¹⁵ White, Blackburn, and Plisco, “Rest as a Virtue,” 113.

¹⁶ Chandler, “Pastoral Burnout,” 285.

¹⁷ Jason T. Hotchkiss and Ruth Leshner, “Factors Predicting Burnout Among Chaplains: Compassion Satisfaction, Organizational Factors, and the Mediators of Mindful Self-Care and Secondary Traumatic Stress,”

hours is real and can physically and mentally impact the individual. Epperly concludes: “Studies indicate that if pastors work consistently more than fifty or fifty-five hours a week, they become candidates for stress-related illness, emotional fatigue, and physical exhaustion.”¹⁸

This could be challenging for a chaplain, especially in an operational billet, where a chaplain lives with the people he serves twenty-four hours a day, seven days a week. The operational tempo and situations that arise often do not allow a normal schedule. Yet, it is important for a chaplain to set boundaries, knowing that flexibility may be required. It is also important to reserve time for self-care, not only for the individual, but also for the potential message and impact on others. Venart notes: “In contrast, when counselors are committed to self-awareness and pursuit of their own wellness, they can serve as role models for clients, and their joy can have a ‘contagious effect.’”¹⁹ By modeling self-care, chaplains may influence those they serve and possibly impact the culture as a whole.

The Third Commandment establishes the importance of taking rest and being fed by God through His Means of Grace. Observance of the Sabbath and time for rest/renewal is an essential boundary. Although research in counseling makes no reference to terms consonant with a theological understanding, the basic theme is verified. For example, one definition of spirituality suggests:

Spirituality in counseling has been defined as the capacity and tendency present in all human beings to find and construct meaning about life and existence and to move toward personal growth, responsibility, and relationship with others.²⁰

Journal of Pastoral Care & Counseling: Advancing Theory and Professional Practice through Scholarly and Reflective Publications 72, no. 2 (June 2018): 95.

¹⁸ Epperly, *A Center in the Cyclone*, 94.

¹⁹ Venart, Vasos, and Pitcher-Heft, “What Individual Counselors Can Do,” 50.

²⁰ Susannah C. Coaston, “Self-Care Through Self-Compassion: A Balm for Burnout,” *The Professional Counselor* 7, no. 3 (October 2017): 288.

Secular researchers acknowledge that spirituality has a positive impact on people. Pink notes that studies have shown that spirituality appears to be a fundamental part of the human condition. In fact, spiritual, mystic thoughts, and metaphysical experiences may be a part of our neurophysiology. He goes on to describe various studies that demonstrate that spirituality improves our lives, both on the physical (e.g., lower blood pressure, alleviation of stress-induced maladies) and mental (e.g., attitude toward life, finding purpose and meaning in love and life) planes.²¹ Spirituality is an important component of self-care.

Rest, renewal and spiritual refreshment are essential to one's health. Chandler, in a study conducted upon pastors, illustrates the Biblical mandate:

As spiritual dryness emerged as a primary predictor of emotional exhaustion, the need for ongoing spiritual renewal, not only to replenish spiritual reserves also to reenergize emotional energy, is strategic in the prevention of pastoral burnout.²²

Chandler concludes that "the importance of balancing pastoral activity with adequate amounts of rest and renewal cannot be overstated."²³ The spiritual renewal that accompanies rest shares importance with the physical benefits of rest. Exhaustion often leads to extreme health issues, such as diabetes, heart disease and depression.²⁴

Brené Brown notes that, for many people, exhaustion is almost a status symbol. Lack of sleep, however, is biologically detrimental. Working to the point of exhaustion is sometimes seen as a status symbol is a part of Military culture. Admittedly, over-working is sometimes necessary and unavoidable due to mission requirements, but this legitimate requirement is rare. More often,

²¹ Daniel H. Pink, *A Whole New Mind: Why Right-Brainers Will Rule the Future* (New York: Riverhead, 2006), 221–22.

²² Chandler, "Pastoral Burnout," 283.

²³ Chandler, "Pastoral Burnout," 285.

²⁴ C. Brené Brown, *The Gifts of Imperfection: Let Go of Who You Think You're Supposed to Be and Embrace Who You Are* (Center City, MN: Hazelden, 2010), 101.

working to exhaustion is a way in which to show value or to manifest a competitive spirit. Chaplains are susceptible to this, as the research interviews revealed.

Mental health professionals may know the importance of taking time for rest, to include that of a Sabbath, but do not always do so on a consistent basis. White et al. conclude:

Regular rhythms of rest and Sabbath-keeping are necessary for the mental health professional, but many report these practices are not an integral or consistent part of their personal and professional lives. Those who do keep a regular day without work (Sabbath) have a greater satisfaction with the amount of rest and quality of rest.²⁵

Yet those who do take time for rest feel better on a physical level and are more satisfied and effective at what they do. All of these have a direct impact on the individual and lower the risk for burnout.

For those on deployment, as well as those in an operational setting, adequate rest can be challenging due to the demands of the mission and requisite tasks. Necessary rest should be obtained whenever possible. As has been discussed above, there is always more that can be done in ministry. There are always visits that can be made, people looking to talk to a chaplain, reports that need to be sent, etc. This is especially true for the chaplain in an operational setting. Irrespective of the demands, rest is a critically important aspect of self-care.

Sabbath includes not only rest, but silence and solitude.²⁶ Prayer is an important aspect of the Third Commandment. Secular research acknowledges the importance of prayer in self-care, due to its associated improvements in health and well-being.²⁷

For a Christian, the keeping the Third Commandment often includes not only the weekly worship, but time spent daily studying God's Word and prayer. Lutherans confess and believe

²⁵ White, Blackburn, and Plisco, "Rest as a Virtue," 114.

²⁶ Wicks, *Resilient Clinician*, 89–90.

²⁷ Coaston, "Self-Care Through Self-Compassion," 293.

that God works through His Word. This impacts one's entire life. Although current research does not acknowledge God working via such means, benefits from devotional practices are implicit in this research.

The literature on self-care uses the term "mindfulness," which connotes a daily spiritual practice. The basic definition for mindfulness is "awareness of present experience with acceptance."²⁸ A full description is "an awareness of the present moment with a certain width of the mind in which one attempts to observe without interfering."²⁹

Some Christian authors suggest that mindfulness is at the heart of Christian spirituality. This self-awareness is important for transformation and an important aspect of ministry. Halm concludes that mindfulness "allows oneself to respond rather than react to situations."³⁰ Halm suggests that one needs to be intentional, setting as much as ten minutes a day to practice mindfulness. Such intentionality provides a buffer from burnout and promotes greater work and life satisfaction.³¹ Lipsky and Burk emphasize a daily "centering" to achieve this intentional goal.³² Research shows that self-care is both a process and an outcome. The most effective way to maintain the energy and capacity for caring for others is to set boundaries and to be intentional in setting time for one's own spiritual care.

²⁸ Wicks, *Resilient Clinician*, 94.

²⁹ Claudia L. Orellana-Rios et al., "Mindfulness and Compassion-Oriented Practices at Work Reduce Distress and Enhance Self-Care of Palliative Care Teams: A Mixed-Method Evaluation of an 'on the Job' Program," *BMC Palliative Care* 17, no. 1 (December 2018): 2.

³⁰ Margo Halm, "The Role of Mindfulness in Enhancing Self-Care for Nurses," *American Journal of Critical Care* 26, no. 4 (July 2017): 344.

³¹ Halm, "Role of Mindfulness," 346.

³² Laura van Dernoot Lipsky and Connie Burk, *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others*, A BK Life Book (San Francisco: Berrett-Koehler, 2009), 162.

Vocation: Social

The doctrine of vocation reflects the social aspect of our lives. We were created to be in community and our different roles strengthen the community as a whole and benefit us. Current research also supports these concepts. Understanding one's vocation gives depth to what one does. If what we do to earn money is simply a means to an end, simply a job, then there is not much satisfaction.³³ This is particularly true in vocations that deal with people. Individuals who find fulfillment in their vocation are often motivated to implement self-care to avoid burnout.

Wicks states that the manner in which clinicians perceive their work, the events that take place during the day, and the people they encounter along the way, make all the difference.³⁴ The understanding that chaplains serve God by serving people is critical for chaplains to understand the importance of their vocation. Merriman's study reveals, "One notable protective factor is compassion satisfaction, which is defined as the pleasure derived from being able to do one's work well."³⁵

Merriman suggests a daily journal, including recording positive interactions, as a means to monitor and be aware of compassion satisfaction.³⁶ In the midst of operational tempo, especially if there is a crisis, it is easy for a chaplain to lose sight of what they are doing and the reason they are doing it.

Our vocation situates us in community. We need the community and the community needs us. Social support is an important part of a chaplain's self-care.

³³T. Scott Bledsoe and Kimberly Setterlund, "Thriving in Ministry: Exploring the Support Systems and Self-Care Practices of Experienced Pastors," *Journal of Family and Community Ministries* 28 (2015): 60.

³⁴ Wicks, *Resilient Clinician*, 82.

³⁵ Merriman, "Enhancing Counselor Supervision," 372.

³⁶ Merriman, "Enhancing Counselor Supervision," 372.

Often categorized as comprising emotional support, information/cognitive guidance, and instrumental support, social support is optimally effective when the type and timing of the support match the needs of the receiver.³⁷

Chandler and others posit that support from others is critical to preventing burnout and an essential element of self-care.³⁸ Diddams et al. emphasize this aspect:

Building support networks with others have also been shown to increase resilience ... In other words, building social resiliency through relationships with others mitigates the harmful influences of stressful life situations.³⁹

Social support and networking from the community help prevent burnout, and can help an individual better perform their appointed tasks. Chaplains can become better caregivers and improve their interactions with others as they provide help and support. Hotchkiss and Leher, conclude that the community helps caregivers remain empathetic: “[S]upportive relationships, such as mentors, buddies, and supervision are the aspects that help professionals sustain their compassionate care.”⁴⁰ Venart et al., quoting several studies, conclude that counselors need people in their lives to be honest with them and provide support for them. They must allow them to be real and genuine. However, the relationships need to be mutually supportive and the counselors must access the relationships consistently.⁴¹ Another study by Bledsoe and Setterlund makes an even stronger point, noting that support systems, including spouses, colleagues, and mentors, are needed in order to thrive.⁴² These studies show that we should not neglect other relationships and responsibilities for the sake of ministry. All of the vocations require nurturing

³⁷ Randal P. Quevillon et al., “Helping the Helpers: Assisting Staff and Volunteer Workers Before, During, and After Disaster Relief Operations,” *Journal of Clinical Psychology* 72, no. 12 (December 2016): 1350.

³⁸ Chandler, “Pastoral Burnout,” 276.

³⁹ Diddams et al., “Implications of Biblical Principles,” 323–24.

⁴⁰ Hotchkiss and Leshner, “Factors Predicting Burnout Among Chaplains,” 96.

⁴¹ Venart, Vasos, and Pitcher-Heft, “What Individual Counselors Can Do,” 56.

⁴² Bledsoe and Setterlund, “Thriving in Ministry,” 60.

relationships in light of the fact that we are meant to be in community.

The community can provide various degrees of support. This includes an outlet to talk about challenges and frustrations, encouragement, and perspective. Rediger states that, in his work with clergy, isolation is one of the early warning signals of personal and professional problems:

And even though we can make realistic protests that “we do not have time,” “there are no other pastors nearby,” “the other pastors do not reach out to me,” or “who needs another meeting with obligations?” this fact is demonstrable: pastors who are willing to reach out to each other and build trusting relationships are much less likely to commit malfeasance, become unfit, and miss opportunities for fulfillment.⁴³

Although it is easy for chaplains to give reasons why we cannot be in community or have social support, such support is essential and beneficial. It is not only important to be a part of the community, but to be an active member who will take notice and act when needed:

It has been shown (Woods et al., 1985) that 32% of therapists suffer from burnout and depression to a serious enough degree as to impair them in their work, and 26% perceive this in colleagues. The key question is what these individuals do after noticing problems.⁴⁴

Community and social support not only benefits one’s own self-care, but also in serving and supporting fellow chaplains.

First Article: Identity and Physical Care

First Article gifts, which include the physical and mental gifts God has given us are important aspects of self-care. God created the entire world, including people as unique creatures designed for a purpose. There is no one person who is exactly the same as another. Hands and Fehr, in discussing lack of self-care among clergy, conclude:

⁴³ G. Lloyd Rediger, *Fit to Be a Pastor: A Call to Physical, Mental, and Spiritual Fitness* (Louisville, KY: Westminster John Knox, 2000), 156.

⁴⁴ Teater and Ludgate, *Overcoming Compassion Fatigue*, 108, Kindle.

Why do so many of them (clergy) fail to do so (self-care)? From our work, it is apparent that many clergy lack the grounding for consistent self-care, namely, a genuine self-appreciation. We have seen that true intimacy with self involves not only self-knowledge, but also self-appreciation. It means knowing one's worth, knowing one's strengths and talents as well as one's limitations and weaknesses.⁴⁵

In other words, the reminder that they are redeemed children of God plays a key role in a chaplain's self-care.

The First Article reminds chaplains that they are created to serve God with the strengths, skills, and talents that He has given them. The other aspect of the First Article is to take care of the physical and mental gifts that God has given us. Sharpening our God-given mind helps a chaplain become better as professional Navy Chaplains and as theologians. Chaplains should continue to develop as leaders and professional Naval officers through the various opportunities and courses that the military provides. In addition, part of self-care is continuing to learn and study as theologians and grow in one's knowledge and faith. This equips to better serve God's people. Learning also affords the chaplain the opportunity to step outside the current role and to obtain perspective, encouragement, fellowship, and growth.

(There is) a strong connection between ongoing study and joy and satisfaction in ministry. Moreover, according to three studies on the impact of ongoing education on pastors, changes among program participants included "a greater orientation to people and a liberalization of ideas and feelings." Pastors involved in continuing education programs experienced new perspectives on their ministries, a stronger sense of identity as pastor and greater awareness of social change.⁴⁶

Taking seminars or obtaining advanced education via conferences is an important part of mental self-care and will make the chaplain more effective.

The First Article teaches that care for the physical body is important for self-care. Ideally,

⁴⁵ Donald R Hands and Wayne L Fehr, *Spiritual Wholeness for Clergy: A New Psychology of Intimacy with God, Self, and Others* (Washington, DC: Alban Institute, 1993), 66.

⁴⁶ Epperly, *A Center in the Cyclone*, 79.

clergy should serve as an example to others as they take care of their bodies through proper exercise and nutrition. Unfortunately, this is not always the case. Doehring notes that various studies have shown clergy to have at least a 10% higher obesity rate, as well as higher rates of diabetes, hypertension, asthma, and arthritis.⁴⁷

Hands and Fehr, draw similar conclusions, stating that some clergy abuse food through the quality and quantity of what they consume. Food can and should be more than fuel for the body. Chaplains appear to miss the fact that food is an important aspect in how the body connects to the mind. Food can even have a spiritual aspect.⁴⁸

Certainly, Chaplains have physical requirements that civilian clergy do not (e.g., weight standards and minimal physical fitness requirements). However, chaplains can pass these requirements and still not be healthy, failing to take care of the gift of the body that God has given. Healthy eating habits are important for all, especially for chaplains serving in high-stress operational settings. Quevillon et al. emphasize that in high stress environments, one should avoid both caffeine and foods high in sugar and fats. Instead, foods containing protein, fiber, complex carbohydrates, and other important nutrients ensure the body is physically able to perform at a high level.⁴⁹ Proper nutrition allows chaplains to effectively perform the tasks they are called to do.

Lipsky and Burk, in their work “Trauma Stewardship,” list several characteristics of stress-resistant people. These individuals often make healthy lifestyle choices a part of day-to-day activity, including avoiding dietary stimulants, exercising weekly, and taking time for

⁴⁷ Carrie Doehring, “New Directions for Clergy Experiencing Stress: Connecting Spirit and Body,” *Pastoral Psychology* 62, no. 5 (October 2013): 624.

⁴⁸ Hands and Fehr, *Spiritual Wholeness for Clergy*, 76.

⁴⁹ Quevillon et al., “Helping the Helpers,” 1356.

relaxation.⁵⁰ Healthy people, especially caregivers who work in challenging environments, make healthy nutrition choices and exercise routinely.

The importance of physical exercise cannot be underestimated. Physical exercise is increasingly prescribed as a treatment-regimen, since it can be just as effective in dealing with depression as medication.⁵¹ The benefits of physical activity have been well documented—not just for the body, but mental benefits as well. Physical activity is essential for chaplains in a high stress environment, which can be comparable to a Disaster Relief Operation (DRO):

Regular physical exercise also is an important strategy for preventing burnout, compassion fatigue and secondary traumatic stress ... exercise has anti-depressive and anxiolytic effects and reduces sensitivity to stress. Therefore, regular exercise while on a DRO may act to reduce anxiety about the operation and increase one's ability to deal with the cumulative stresses of the response. ... Therefore exercise may be crucial to maintaining physical and psychological health.⁵²

In an operational setting, even during the best of times when there are no major events or combat operations, chaplains deal with the effects of cumulative stress on the people they serve. The possibility of some type of major event (e.g., disaster response, combat operations, casualties) is always present. Physical exercise is one of the best ways to deal with the stress resultant from these situations.

Chaplains cannot most effectively serve in their vocations if they are not taking care of themselves physically. Wicks puts great emphasis on bodily needs and goes so far as to say, “[T]o not have a personal self-care protocol is ... courting disaster in terms of personal and professional lives.”⁵³ He goes on to describe that one of the greatest gifts to be shared with others

⁵⁰ Lipsky and Burk, *Trauma Stewardship*, 121.

⁵¹ Markus Gerber et al., “Exercise Is Medicine for Patients with Major Depressive Disorders : But Only If the ‘Pill’ Is Taken!” *Neuropsychiatric Disease and Treatment* 12 (August 2016): 1978.

⁵² Quevillon et al., “Helping the Helpers,” 1356.

⁵³ Wicks, *Resilient Clinician*, 55.

is “a sense of our own peace and self-respect.”⁵⁴ Care for God’s gifts, as identified in the First Article, through taking care of their bodies (e.g., exercise, proper nutrition, and continuing to challenge themselves mentally), allows chaplains to live out their various vocations more effectively. Performing these activities can serve as a model and provide encouragement to others.

Play

Play comprises another critical component of self-care. Brené Brown says that play is as essential to our health and well-being as rest.⁵⁵ Play, as described by Stuart Brown and Christopher Vaughn, is not just about having fun and enjoyment, but is an essential part of being human and necessary for the mind and body to continue to develop. It is also vital for good health. The opposite of play is not work, but depression.⁵⁶ Brown and Vaughn demonstrate that people are designed to play. Those who play experience increased creativity and productivity and make them more effective at their work. More importantly, individuals who play are healthier and happier, with sharper minds. Conversely, when people “stop playing, they start dying.”⁵⁷

Brown and Vaughn acknowledge that play is difficult to describe, with several definitions and descriptions. They define play as having seven properties: apparently purposeless (done for its own sake); voluntary; has its own inherent attraction to you; free from time; diminished consciousness of self (we do not think about how we look or appear to others); improvisational potential (in the midst of performing the activity, improvisation manifests); and it brings with it a

⁵⁴ Wicks, *Resilient Clinician*, 56.

⁵⁵ Brown, *Gifts of Imperfection*, 100.

⁵⁶ Stuart L. Brown and Christopher C. Vaughan, *Play: How It Shapes the Brain, Opens the Imagination, and Invigorates the Soul* (New York: Avery, 2010), 127.

⁵⁷ Brown and Vaughan, *Play*, 73.

desire to continue the activity.⁵⁸

Emotion ties all the properties together.⁵⁹ Though play may be difficult to define, we know it when we see it. Yet it is important to define play in order to measure its impact and importance for self-care.

Stuart Brown and Christopher Vaughn parallel the effect of sleep and play on the brain's development. They acknowledge that since play, especially within the context of work, is not proper according to many adults in today's culture, many will not engage in play. However, play is an important part of life, as failure to play for a protracted period of time darkens our moods. When this occurs, we lose the ability to feel sustained pleasure. Conversely, if play is a part of life, the brain is more creative, there is more optimism, and what is learned in play carries over into other contexts.⁶⁰

Play not only impacts the individual's health and interaction with others; play makes us better at work. Play can assist to make vocation enjoyable. As Brown and Vaughn write:

Respecting our biologically programmed need for play can transform work. It can bring back excitement and newness to the boy. Play helps us deal with difficulties, provides a sense of expansiveness, promotes mastery of our craft, and is an essential part of the creative process. Most important, true play that comes from our own inner needs and desires is the only path to finding lasting joy and satisfaction in our work. In the long run, work does not work without play.⁶¹

Brown and Vaughn's research demonstrates that play is an essential part of healthy living and makes us more effective at work. This sense of joy and satisfaction is important for any vocation, but especially that of a chaplain.

⁵⁸ Brown and Vaughan, *Play*, 17–18. Brown and Vaughn summarize play as “an absorbing, apparently purposeless activity that provides enjoyment and a suspension of self-consciousness and sense of time” (60).

⁵⁹ Brown and Vaughan, *Play*, 17–18.

⁶⁰ Brown and Vaughan, *Play*, 42–44.

⁶¹ Brown and Vaughan, *Play*, 127.

Brown and Vaughn state that play is a state of mind, an emotional enjoyment.⁶² As described above, a person needs to be physically active to maximize potential health benefits and to take care of the First Article gifts. Physical activity, such as running, could be done because it satisfies the requirements of the military and is necessary for the health benefits. For some, it may also feel like play. For another, running may feel like work. The same could be said for reading, spending time with others, spending time in worship, etc. Regardless of the experience, these activities are required for self-care. Additionally, one needs to find a way to make time for play.

⁶² Brown and Vaughan, *Play*, 60.

CHAPTER FOUR

PROJECT DESIGN

Qualitative research and interviews of active duty chaplains provided the necessary data to understand the challenges of self-care and the possible barriers that prevent chaplains from implementing self-care.

The uniqueness of each operational billet poses a challenge in conducting research regarding operational billets and working within them. Each community in the Navy is different, such as an operational Marine unit compared to surface ships in the Navy. Likewise, the foregoing is different than an air community or special warfare community. Variances exist within each community. Deployment on a cruiser will be different than that of an amphibious ship.

An additional challenge is that no two deployments are the same, even if one were to deploy on a similar platform of a ship or with similar Marine units. The mission requirements, the leadership, the command climate of the unit, and the expectations of the chaplain will vary between each deployment. However, despite the variances of experiences, the hope is that, the interviews will reveal common themes regarding: (1) the barriers exist that may inhibit self-care, (2) how to overcome those barriers, (3) how to effectively motivate, and (4) the elements of good self-care.

Prior to commencement of the research and interviews, both the study and the basic questions to be asked during the interviews were reviewed and approved by the Internal Review Board (IRB) for Concordia Seminary. Approval was also sought by the United States Navy and the project was approved by the Clinical Investigation Department of Naval Medical Center Portsmouth, Virginia, which is responsible for all studies conducted in the Navy on the East

Coast. The project was not deemed to require full IRB review and could proceed with the waiver letter provided to the researcher.

The study participants were from a homogeneous group of Navy chaplains. As a qualitative study, there was neither a treatment group nor a control group. Ideal candidates were those who had served in an operational billet, had at least one deployment, and had experience working with different types of communities. Chaplains with more experience in the Chaplain Corps (i.e. the perspective and experience of a lieutenant differs from that of a lieutenant commander or commander) provided helpful feedback, since each advancement requires an average of four to six years.

No public records were used to find participants or their contact information. Each of the potential candidates were personally invited, either face-to-face or via email. All those contacted were open to being a part of the project and willing to be interviewed. One potential participant was not interviewed because the chaplain did not meet the requirement of having completed an operational billet on active duty.

After the initial request to be a part of the project, the participant received more information, including the Consent Form for review. The participant's attention was directed to the additional requirement that the interview was to be recorded. Assurance of confidentiality of these recordings was provided. Navy Chaplains, as part of their role, have complete confidentiality. If certain actions were disclosed (e.g., suicide ideations) then the researcher would be required to report. The Consent Form also highlighted that both the transcript and original recording of the interview would be protected. The Consent Form also stipulated that the participant would not receive any compensation for their participation.

After reviewing the email and the Consent Form, the participants agreed to be interviewed.

A convenient meeting time and place that allowed a private conversation was agreed upon. Every effort was made to make the setting and the conversation comfortable for the participant. A potential area of discomfort was identified as a result of the IRB submission. The concern was that the participants may feel hesitant to share if they have neither good self-care nor any type of evaluative process. This was mitigated by stressing that the interview would be conversational, only seeking information. There would no critique of personal practices. The topic and conversation were identified as low-risk during the IRB process. However, if issues arose during the interview, either the participant or the researcher could stop the interview. Assistance would/could be provided by an outside resource if either needed or desired. No deception was used in this study. The goal was to gain insight from the real experience of Navy Chaplains.

All of the participants were given an opportunity to express any questions or concerns prior to signing the Consensus Form and prior to the interviews. Once the Waiver was reviewed and signed by the participant and the researcher, the interviews were conducted. To ensure anonymity and to maintain confidentiality, no names were used. Each participant was identified by an assigned number in both the interview and transcript (e.g., participant 1, participant 2).

A total of six interviews were conducted. Three of the participants were senior lieutenants (i.e., they had served at least two tours). Additionally, the study included one lieutenant commander, and two commander chaplains, all of whom were stationed within the Southeast Region. The participants were known to have had a variety of experiences in the Chaplain Corps and included one African-American, one female, and the remaining were white males. All of the chaplains interviewed were married and had children.

Two of the interviews were conducted over the phone due to either distance or scheduling challenges. The remainder of the interviews were conducted face-to-face, in the private setting of

either the researcher's or participant's office. The average time for each interview was sixty-five minutes.

The following questions were asked of each participant during the interview: (Follow up questions were asked, contingent upon responses given.)

1. Tell me about your Navy experience (billets served, any 'highlights' or challenges from each tour, etc.).

2. What, if any, training or mentoring have you had with self-care practices (previous to Navy or while in the Navy)?

3. For you, what are the most important elements of self-care?

4. What are some of the challenges you face in consistent self-care, especially in an operational setting?

5. For you, why is self-care important and what, if any role, does your theology or faith play in it?

6. What advice would you give a first-tour chaplain on self-care? If they were to attend a training on self-care, what would you want them to leave the training knowing about self-care?

The interviews were recorded by a handheld recorder. After recording the interviews, the researcher, utilizing the Sonix transcription service (<https://sonix.ai>), uploaded the interview files for transcription. The files were directly uploaded from the recorder to the Sonix website, streamlining the process and making the data more secure.

Sonix transcribed the interviews and secured the transcriptions in its database. The software and program allowed the researcher to listen to the recordings and edit the transcriptions in the database before exporting the completed transcription. (This was done for each interview to ensure complete accuracy in the transcription process.)

The transcripts were then analyzed to look for common themes on various elements of self-care, barriers to self-care, and how to develop training that will aid chaplains in implementing a self-care plan in an operational billet. This was done by first taking notes on each individual interview and noting points of emphasis or comments that would be helpful in designing a training workshop for chaplains.

The notes for the various interviews were then compared for common elements, as well as any different items of note that would challenge the researcher's assumptions.

The original interviews and the transcripts will be secured for up to seven years in a secure miniature lockbox (safe) in the researcher's possession. At that time, the data will be destroyed by fire. The researcher maintained custody of the data at all times and was the only person having access to the recordings and transcripts.

CHAPTER FIVE

EVALUATION

The qualitative research gathered from the interviews of six Navy Chaplains provided insight into the barriers a Navy Chaplain faces in self-care, especially in an operational billet. The research both supported and refuted the assumptions made regarding the potential barriers to self-care. The results obtained revealed new insights and revealed ways to assist chaplains in implementing a consistent self-care plan. Chapter Six will chronicle the conclusions regarding ways in which to help chaplains implement a consistent self-care plan and to overcome the barriers chaplains face in an operational billet.

Training in Self-care

One assumption going into the project was that the author's experience, of not receiving sufficient training on self-care either prior to joining the Navy or while serving, was common with other Navy chaplains. While a couple of the chaplains shared a similar experience, others did obtain at least rudimentary training. For those who did receive some type of training, the consistent theme was that it was viewed as peripheral and not something requiring direct and personal implementation.

The training received in the Navy or through the Chaplain Corps, was characterized by three consistent themes or responses. The first was that the senior leaders in the Chaplain Corps said that chaplains should take care of themselves. The second theme, however, was the absence of instruction, modeling, or direction to demonstrate what that means, looks like, or how to implement it. Third was the lack of either specific or intentional follow up to see if the chaplain was either doing self-care or to help the chaplain implement a self-care plan. These comments suggested that some type of intentional conversation or guidance from a senior chaplain

regarding self-care and its implementation would have been a positive experience.

Two of the chaplains shared positive experiences regarding training obtained from the Chaplain Corps. One shared that, although the topic of self-care was discussed during various leadership courses, this was not an in-depth training on helping chaplains implement a self-care plan. Rather, the conversation pertained to self-care and its importance at various levels of leadership in the Chaplain Corps.

One chaplain shared that he received helpful training on self-care, specifically designed and given to the chaplains serving with the Coast Guard. This training, directed by the Senior Chaplain in the Coast Guard, helpfully addressed self-care in general and how to implement a plan.

The results showed that there was limited in-depth training on self-care either before joining the Navy or while in the Navy. The participants reported that more in-depth training would have been beneficial, as it would enable senior and supervisory chaplains to be more intentional in holding chaplains accountable with respect to self-care. Furthermore, senior and supervisory chaplains would be able to model self-care and discuss self-care with the chaplains for whom they provide supervision.

Elements of Self-care

Responses to the question, “For you, what are the important elements of self-care?” helped answer the research question, “How does one help Navy chaplains implement a consistent self-care plan and overcome the potential barriers to self-care, especially in an operational billet?” The responses confirmed the basic ideas held by the author regarding the components of self-care. These responses also revealed factors that had not been previously considered.

This study assumed self-care to include physical, mental, spiritual, and emotional/social

elements. Two of the chaplains requested clarification when asked about what they viewed as important elements of self-care. One chaplain shared that, although important, the social aspect (having peers or others who are involved in friendships and/or fellowship) had not been considered before. Two chaplains discussed the importance of their families in their lives and how this support was both a source of strength and self-care for them.

Two of the chaplains shared why they felt the idea of the whole body being care is important for self-care. They shared personal examples of what the various elements looked like in their own lives, as well as when they did not maintain those elements on a consistent basis throughout their time as a Navy Chaplain. One of the chaplains noted that physical self-care involves more than exercise. Rather, it is caring for the body through nutrition, proper diet and obtaining much-needed rest. The chaplain shared from a personal experience how easy it is to develop unhealthy eating habits and function on less sleep than is healthy and how important it is to maintain both as daily habits. The chaplains also discussed the importance of their spouses and families in supporting their ongoing health and proper perspective.

One chaplain illustrated self-care as a three-legged stool, with the three legs being body, mind, and spirit. All three legs are important and keep the stool strong. However, if one leg is not strong, the stool may function, just not as effectively. The chaplain described the body leg as physical exercise and taking proper care of the body. The soul leg of the stool was described as spirituality, which depended on the individual and could not be prescribed. Rather, it was contingent upon what worked for that particular individual. The final leg, the mind, requires continuous learning and growth through education and training.

One chaplain defined a vision of self-care in terms of three Fs: Faith, Family, and Fellowship. This chaplain also included the component of education. Included in the faith

component were daily readings of Scripture and prayer. The chaplain was also involved in local church and worship. Family refers to intentionally spending time with family and caring for them. Fellowship involves good relationships with others, including fellow chaplains. The chaplain talked about the importance of continuing to work to keep the mind sharp through reading, learning, taking classes, etc.

The role of personality type was an aspect of self-care revealed during the interviews. Extraversion and introversion constitute the first dichotomy in the Meyer-Briggs Trait Inventory (MBTI), referring to the manner in which one draws energy. Typically, extraverts gain energy from others and socialization. Introverts typically draw energy from within and tend to prefer either small, intimate groups or being alone to gain energy.

Several of the chaplains referred to themselves as either extravert or introvert and commented on the activities they require or perform in order to be “recharged.” The introverts talked in terms of solitary activity such as running, going for walks, finding time alone on the deck of a ship, etc. to be prepared to go back to work and ministry. The extraverts talked about the importance of the social aspect in their lives, admitting the difficulty caused when external stimuli were lacking. The extraverts talked more in depth about the social aspect as an important element for them in performing their own self-care. This portion of the conversation highlighted the importance of a chaplain being aware of various personality types and what “need” must be met for each individual.

Another new insight revealed via the interviews was that accountability was an important element for self-care. A majority of the chaplains interviewed talked about the importance of having someone who would hold them accountable. This could be in the form of either a mentor or a peer, perhaps should be a person outside of the Chaplain Corps. This relationship must differ

from the purely social need discussed previously.

Challenges Faced in Consistent Self-care

The data from the chaplains interviewed confirmed some of the anticipated barriers arising in an operational billet, but also produced new insights. Prior to the interviews, the assumption had been made that self-care for chaplains was primarily a challenge in an operational billet. However, the interviews suggested that was an erroneous assumption. A majority of the chaplains shared that their time in a shore billet held as many, if not more, challenges to their personal self-care.

The challenges involved were due either to the demands of their schedules and what the job required, or they worked for challenging leadership. Additionally, several of the chaplains mentioned that one of the challenges of a shore billet is that there is more time and less focused effort on a particular mission. Therefore, a secondary effect is that self-care can actually become more haphazard. Since there are more things in which one may be involved, either in the community or with the family, individuals fail to take time for their own personal needs and/or desires. This new information must be taken into consideration when developing training on self-care.

The barriers faced during an operational billet revealed consistent themes shared by the chaplains interviewed. First, there was always something that could be done—visits that could be made, people looking for counseling, individuals seeking support, etc. While this is not unique to the chaplaincy, the difference is that in an operational setting, a chaplain is with the people to whom he/she is ministering 24/7. Additionally, the type of situations a chaplain encounters while deployed may be significantly more intense than in other ministry settings. The unit in which a chaplain is involved may be engaged in anything from routine patrols at sea to combat

operations. Unfortunately, it is not unusual for individuals participating in these operations to be dealing with either personal struggles or things happening back home. The chaplain may encounter such things as death notifications of loved ones back home, relationship issues, sexual assault/abuse, etc. More frequently, the chaplain is involved in “routine” items, such as helping people deal with the strain of deployment.

Many of the chaplains interviewed expressed that there was always more that could have been done. Several chaplains conveyed a felt need to prove themselves due to being competitive, the desire for promotion, or to be the first chaplain at a unit. Additionally, some of the chaplains shared that either they or other chaplains they know derive pleasure from receiving praise when assistance is provided. These individuals continue to work to receive positive reinforcement, pushing past healthy physical and mental limits.

Another potential barrier for self-care, which surfaced often in the interviews, is that of schedule. Depending on the operational tour, the day-to-day schedule can change quickly and often. Several of the chaplains spoke about shifting schedules while serving aboard ships. They also shared that it was possible to have the time for self-care, just at a different time of day. Other types of units, depending on the mission, may not have the opportunity to set a specific time for self-care. The inability to set a regular schedule that harmonizes with the unit’s schedule could be a barrier to self-care in an operational setting.

The environment also could be a potential barrier to self-care for a chaplain in an operational setting. For example, even simple things like watching a movie or going on long walks may not be possible in an operational setting. Even if such activities are possible, they may be either less enjoyable or difficult in a particular setting. One chaplain shared that one of the self-care items preferred is to run. This is somewhat limited on a ship, even though possible on a

treadmill or around the flight deck. However, the pace, distance, and availability will need to be modified.

Both the environment and schedule could impact physical elements of self-care, such as rest and nutrition. Depending on the environment and type of unit, food may consist only of Meals Ready to Eat (MRE). Even meals provided when not in combat settings may only consist of basic nutrition. Additionally, the operational tempo of the unit may inhibit proper rest. The unit may be involved in high-stress missions and, when there is down time, the chaplain ministers to those in need. Furthermore, sleeping either in the field or on a ship may not be conducive to adequate and restful sleep.

The difficulty or impossibility of regular contact with family members played a significant role in the chaplains' self-care. Often, the operational environment may prohibit regular contact with either a mentor or family members, including electronic communications (e.g., email). These are just a few of the barriers to self-care a chaplain may face in an operational setting.

Role of Theology or Faith in Self-care

All of the chaplains interviewed shared how their faith and theology played a role in their approach to self-care. Each chaplain shared their personal relationship with God and how much the chaplain relied on God to get them through challenging situations. The chaplains expressed how they often felt closer to God in operational settings and marveled at God's grace in allowing them serve. Three of the chaplains specifically shared situations where they did not practice self-care, and were humbled by God's grace, since He got them through the deployment and beyond without suffering long term burnout or depression. Although faith did not specifically motivate the chaplains to practice self-care, they acknowledged that their faith sustained them.

All of the chaplains acknowledged biblical examples of self-care, including the example of

Jesus and how He would withdraw to pray, take time to eat, to sleep, and/or go away with just His disciples. Other examples of support for self-care mentioned included the prophet Elijah being taken care of by God after the battle with the prophets of Baal (1 Kings 19), the idea that the body is the temple of the Lord and should be taken care of (1 Cor 6), and that the devil prowls around like a lion (1 Peter 5) looking to exploit a weakness, so one should do self-care in order to not fall prey.

Three of the chaplains also spoke to the idea that God had called them to this ministry for the “long haul.” In other words, God wants them to have longevity, not just as His creation, but in the ministry God has called them to perform. Therefore, it is necessary to be a good steward and take care of God’s gift. One chaplain offered up an especially powerful insight, stating that, as chaplains, we have a tremendous responsibility to serve God and His people. If we are not at our best and practicing good self-care, then we may either miss an opportunity to share the Gospel or to be as effective as we could have been in that moment.

Advice Given to a New Chaplain

Since all of the chaplains interviewed were experienced chaplains with multiple tours, they were asked what advice would they give to a first-tour chaplain. If they were to provide training to a chaplain, what would be the key elements they would want the new chaplain to absorb regarding self-care?

All of the chaplains noted the importance of being intentional about self-care and, more specifically, about having a plan to instruct chaplains in self-care. The chaplains spoke about the importance of thinking through plan for self-care before entering into an operational environment. This would increase the likelihood of the self-care program being implemented successfully. The chaplains emphasized that there are various challenging factors to self-care in

an operational setting. However, if a plan is established prior to deployment, it can be adjusted to its unique setting. If a plan does not exist, it is much more challenging to come up with an executable plan in the midst of the responsibilities of deployment.

The chaplains also discussed being intentional in executing the plan. Due to the challenge of shifting times and schedules, being intentional in self-care is the only way that such plans will be implemented. Suggestions included such things as blocking off time on the calendar and setting a routine, as much as is reasonably possible, to ensure that self-care was undertaken.

The next theme senior chaplains would share with a first-tour chaplain is that of being honest regarding challenges that will be encountered. New chaplains must realize that the struggle is part of the unique nature of chaplaincy. Honesty regarding such issues will amplify the importance of self-care.

The last theme was the importance of others in implementing a self-care plan. This could be a supervising chaplain, a mentor, a peer, or someone off the ship serving as an accountability partner. The individual selected must help work out a specific plan prior to the execution. Once executed, it will be necessary to check in with the person to whom the chaplain is being held accountable to maintaining the prescribed self-care plan. Additionally, two of the chaplains mentioned the need to reach out for help if needed (to include other professional care-givers).

Commonalities and Overall Impression

In addition to the specific interview questions, themes emerged from the interviews with the chaplains. The first is the overall humility of the chaplains. They were gracious enough to be interviewed and to answer honestly. In addition, all expressed some description of how humbling it was to be a chaplain—both the calling itself and the opportunities. They also learned, sometimes through personal hardship and experience, how much they needed God; which in and

of itself was humbling.

Every one of the chaplains interviewed had some type of experience during their chaplaincies that could be described as near burnout. Each circumstance was different, but in each case the chaplain did not practice good self-care in a challenging moment and therefore came close to experiencing burnout. Each of the chaplains described their own self-care as a journey, which was shaped throughout their experience in ministry, especially while serving as a chaplain in operational settings. These experiences made them more intentional with their self-care.

Finally, all of the chaplains acknowledged the importance of consistent self-care in the Chaplain Corps. This observation begs the challenging question: Why is self-care not practiced consistently? The chaplains spoke both of its importance, but also shared that they did not have a definitive answer as to why it is not done. One chaplain specifically shared that he did not feel like self-care could be a directive (i.e., forced). Rather, individuals had to decide for themselves when it was needed and what it looked like for that individual. He shared the specific example of how, for some chaplains serving with Marine units coming back from combat operations, they were directed to attend a retreat in hopes of providing some type of support and the opportunity for self-care. He observed that this was not effective, since the chaplains were not ready.

Some of the comments indicated that more intentional training on self-care would be helpful. It would also be beneficial for senior chaplains to demonstrate greater intentionality (e.g., specifically checking in with their chaplains). Additionally, a few of the chaplains expressed concerns that the culture of the Chaplain Corps may be a factor, including the need to prove oneself to the command of the Chaplain Corps.

Some leaders consider time away unnecessary. One chaplain described the constant battle

to get one day off a week in a shore billet. Finally, several chaplains commented on how challenging it is to be vulnerable in the Chaplain Corps community. The perception is that one must always be prepared to perform the mission as required.

As discussed above, there are a variety of challenges and barriers that can interfere with the implementation of an effective self-care plan. However, each chaplain acknowledged that even in the midst of a busy operational tour, including combat, self-care is possible. Sadly, it is not commonly done.

CHAPTER SIX

SUMMARY AND CONCLUSION

Qualitative research confirmed that self-care is a necessary but often lacking component in chaplaincy. This research included interviews with six Navy Chaplains who had a variety of both experiences and time in the Navy, including the types of billets in which they served. This confirmed something the author has needed in his own life, and has seen as a need in the lives of chaplains with whom he has served.

Self-care has been and continues to be a challenge for Navy Chaplains. Their personal stories bear testimony to this fact. It is hoped that the results of this project will be utilized to put together a training program that will aid individual chaplains and influence the culture of the Chaplain Corps with respect to the issue of self-care. As discussed in the research summary, a majority of the chaplains interviewed commented that they had received little-to-no training in self-care. Studies show that training can make a difference in achieving success in implementing self-care programs.

A study on deployed health care providers found no correlation between deployment and compassion-fatigue. The authors concluded that this may be caused by increased resiliency training, since those studied were specifically trained to handle stressors in trauma centers or emergency care units.¹ In another study concentrating specifically on self-care, Orellana-Rios et al. reveal that training “improved self-care efficacy and empowered caregivers to implement self-care behaviors.”² Training in self-care is an essential element to help chaplains overcome

¹ Joshua N. Cragun, Michael D. April, and Robert E. Thaxton, “The Impact of Combat Deployment on Health Care Provider Burnout in a Military Emergency Department: A Cross-Sectional Professional Quality of Life Scale V Survey Study,” *Military Medicine* 181, no. 8 (August 2016): 733.

² Orellana-Rios et al., “Mindfulness and Compassion-Oriented Practices,” 11.

barriers to self-care.

This project has examined self-care from the viewpoint of the “what” and the “why.” The “what” of self-care is comprised of four components: (1) physical, (2) mental, (3) spiritual, and (4) social. I would add the fifth component of “play.” The “why” is more difficult, since each chaplain has to answer for him or herself, “Will I take time to care for myself?” In other words, will the chaplain maintain self-care as a way of life? Both of these questions will be answered in the paragraphs to follow, as well as the necessity of personalized development and ownership of the self-care plan.

The “What” of Self-care

The first component of the “what” of self-care is the physical. Theologically, this falls into the area of First Article gifts—taking care of the physical body and temple that God has given each one of us. The well-documented benefits of physical activity are an essential element of self-care. In the interviews conducted the physical aspect of self-care was not usually an issue. Even in the challenging setting of operational billets, the chaplains were able participate in consistent physical activity. One chaplain specifically commented that the physical activity was easier to be performed consistently during a deployment or an operational tour than in a shore billet since there were more distractions in the latter scenario. The consistency of physical activity in an operational billet may be due to the culture of the military. It may also be due to the small sample of chaplains interviewed. In any training on self-care, physical activity must be stressed as a critical element.

Rest is another important physical element of self-care. God designed us to have moments of rest, which is an essential piece of the rest/Sabbath of the Third Commandment. Rest is required physically, mentally, and spiritually. Rest also addresses the “why” of self-care—God

wants us to take moments of rest. Chandler notes, “[F]eeling rested and renewed minimizes emotion[al] exhaustion and contributes to vitality.”³ Rest can certainly be more challenging for chaplains in an operational setting, especially since it is not a part of military culture. Diddams notes:

To be most effective however, principles of rhythm and rest need to be infused throughout an organization and not simply found in one or more employees assistance programs. They must be embedded within the organizational culture and reflected in the employee’s hour by hour activities.⁴

Nutrition, mentioned by a chaplain during an interview, is an important element of physical health and wellbeing. Further research could help understand whether chaplains found this to be an important part of self-care. If so, did they find it challenging to maintain?

The mental aspect of self-care includes both professional and personal growth achieved through such things as reading, attending classes, advanced training, education, etc. All of the chaplains spoke of, in addition to the required Chaplain Corps training (e.g., yearly Professional Development Training Course), working on additional courses of study, attending conferences and other training. While some of this may not be possible in an operational setting, the chaplains interviewed spoke about reading and other ways to support the mental aspect of self-care. Just like the physical component, mental self-care is an important aspect of self-care, including serving God in thanksgiving for His First Article gifts.

The next two core elements of the “what” of self-care include the social and the spiritual. The literature demonstrates both the value of having social connections and the impact that spirituality can have on an individual. God’s Word is clear that our daily life should include time in God’s Word. We should be a part of a worshiping community. One could easily assume that

³ Chandler, “Pastoral Burnout,” 283.

⁴ Diddams et al., “Implications of Biblical Principles,” 330.

chaplains would emphasize these areas the most. However, the results of the interviews revealed that these were two areas that were least commonly practiced consistently.

The social aspect of self-care has several important dimensions. The social relationship of having friends and companions with whom you want to spend time could be challenging, especially in an operational billet, because a chaplain may be the only chaplain assigned. The nature of the calling and duties of a chaplain may serve as barriers to achieving the desired social interaction. A chaplain, as an officer, is restricted socially to spending time primarily with other officers of similar rank. Several of the chaplains interviewed spoke directly about this social aspect and about specifically praying for God to bring a friend to their unit for them to have someone with whom they may spend time. It is beneficial for the chaplain to have someone in their life who calls them by their first name and interacts with them as a friend.

Another social aspect that a majority of the chaplains mentioned was the importance of having an accountability partner. If the chaplain either did not currently have or in the recent past did not have an accountability partner, the chaplain spoke of how much that was missed. This void added to the challenge of their duties as chaplains. Some common traits that the chaplains identified in their interviews regarding accountability partners were: (1) this individual was someone whom the chaplain trusted, (2) it was someone with whom the chaplain had a relationship, and (3) it was someone who could speak into the chaplain's life regarding various aspects (e.g., self-care, how they were doing as an individual, how they were doing professionally, their relationship with their family, etc.).

An interesting common element noted through the interviews was that this accountability partner was not a fellow chaplain or even in the military. Part of this was due to the fact that chaplains are always transient, and it can be challenging to stay in communication and

continuous relationship with others. Several chaplains discussed how challenging it can be in the Chaplain Corps to build complete trust and to be vulnerable with one another. This would be an important aspect for further study. Perhaps training should be established to increase the trust level among chaplains within the Navy Chaplain Corps.

The final important piece of the social component is maintaining the other relationships in one's life. This is primarily family, but also includes other relationships, such as fellowship with a local church, neighborhood, or other friendships. In other words, the concept of vocation and the various roles one plays were placed in this category by those chaplains who were interviewed. All of the chaplains interviewed spoke about how critical the support of their spouse and family was in their lives and the ability to perform their duties as chaplains.

All of the chaplains commented regarding how challenging the requirements can be to serve as a Navy Chaplain, particularly in an operational setting. At times it may seem that the family is a lower priority, due to the demands of the job. However, they are essential to the chaplains' support and self-care. There are obvious challenges to spending time with family and others in an operational setting. Chaplains related, however, that they were more intentional in an operational setting, which enabled them to value the time at home. They also discussed being intentional in remaining connected while deployed or in an operational setting. Training on self-care could highlight the importance of this and provide options. This could be particularly beneficial for first tour chaplains.

The spiritual element is another critical element of the "what" of self-care. The literature demonstrates the "health" benefit derived from a "secular" perspective. Even outside training for the Chaplain Corps, spirituality is an element that can and should be included. The Third Commandment teaches that God's Word should be a part of every Christian's life. Vocationally,

it is important for a chaplain, as one who is constantly providing theological care and support, to be receiving nourishment as well.

As stated above, this is something about which participants in this study shared that this was an area where there was inconsistency in maintaining their own spiritual disciplines. This will be addressed more fully in the “why” of self-care.

With respect to the “what” of spiritual self-care, two important elements are evident. First, there needs to be a daily commitment to the spiritual discipline, whether this is reading God’s Word, prayer, meditation, etc. Secondly, individuals require spiritual nourishment by attending a worship service, listening to a worship service via podcast, etc. In an operational setting, the first element can be manageable if the chaplain is intentional. As one chaplain shared in his interview, even in a combat situation, there are moments available for a chaplain to make time for devotions.

The aspect of being fed by another individual may have more potential barriers in an operational setting. There may be only one chaplain in an operational area, with no chance to attend a worship service. However, with technology and prior planning, a chaplain may be able to download podcasts, sermons, or other meditations that can be listened to on a weekly, if not daily, basis.

The fifth element of the “what” of self-care is play. As Stuart Brown lays out for us, play and fun are important elements of what it means to be human and truly take care of ourselves and to be at our best for our vocations. God has created us to enjoy His creation and gifts, which include the various activities we enjoy.

The other elements of self-care need to be a part of a chaplain’s daily life, but they may not be fun. The type of play a person does and how the individual enjoys having fun will most likely

fall under one of the four types of “what” of self-care. As the research shows, there are incredible benefits to fun and play. A person is healthier and happier and therefore better at what they do when they take time for fun or play. Yet, this is an aspect of self-care that may not be present with chaplains.

Further research could investigate what, if anything, a chaplain would do for fun or play. My assumption is that it would not be much, since such activities are less common among adults and professional organizations, especially in the military. This will be explored more fully in the “why” of self-care.

The “what” of self-care is primarily information. Yet, to be truly effective, self-care has to be personalized. Wicks says, “The differences among us are many. That is why each self-care protocol, if it is to be both realistic and effective, is unique in its composition.”⁵ All of the issues need to be specifically tailored for the individual’s needs. Training on self-care may help a person think through what type of person they are, as well as what needs and interests they have.

For example, an interesting and important insight in this study was that almost all of the chaplains spoke in terms of personality-type (introvert vs extravert) and what they either needed or wanted to do to take care of themselves. The introverts spoke in terms of finding time by themselves to get recharged, often combined with another aspect of self-care, such as the physical activities (e.g., running). The extraverts spoke about the need for the social aspect of relationships to recharge them. Although they would set aside quiet time for reflection as part of their spiritual disciplines, they would also seek to spend time with others. This was sometimes combined with other self-care activities, such as doing a physical work out with others. Using an inventory, such as the Meyers Briggs Inventory, could be a useful tool. Such results may assist

⁵ Wicks, *Resilient Clinician*, 55.

individuals to increase awareness and understanding of their individual temperaments and preferences.

Regardless of the means, part of the process needs to include thinking through what each individual needs in the various areas of self-care. As Hotchkiss and Lesher conclude, “Attending to one’s body, reactions, and feelings is central to the task of developing an individualized self-care plan.”⁶ Training should highlight the various categories and elements of the “what” and “why” of self-care. Training should also include intentionality and be personalized to the specific needs of the individual.

Leadership

Supervising chaplains play an important role in the “what” of self-care. The chaplains interviewed did not experience a supervising chaplain playing a specific role in their own self-care, but thought that it would be something that would be helpful or provide an additional benefit. Whether the supervising chaplain was simply a person to talk to about their self-care plan, or someone to talk to in general, it is something that would likely be beneficial. In training about self-care, supervising chaplains should be encouraged to be intentional in developing a relationship with the chaplains they supervise, and to model healthy self-care.

All of the participants commented on how it was not very common for a senior or supervising chaplain to play an active role in their lives in regard to self-care. Whether it was providing training, having conversations about self-care, or simply holding them accountable, there was no consistent positive experience by the chaplains interviewed with respect to the role played by their supervising chaplains. The chaplains interviewed consistently shared that

⁶ Hotchkiss and Lesher, “Factors Predicting Burnout Among Chaplains,” 94.

supervision and leadership from senior chaplains would be welcomed and helpful. Research shows that supervisors can help mitigate issues and that even small gestures such as praise, can make a difference.⁷

While the goal of this project was to design a workshop for individual self-care, further study is necessary to assess how supervising chaplains can help those they lead with self-care. This may include both their modeling of self-care and helping individual chaplains develop and maintain consistent self-care plans. This would be in keeping with the Navy's Chief of Chaplains strategic goals, particularly with respect to the desire to champion the spiritual readiness of Sailors and Marines and Develop Chaplain Corps leaders with intentionality.

Supervising chaplains could play an important role in helping junior chaplains develop self-care plans and work through the various potential barriers that exist in both operational and shore billets. This would be most effective if a relationship of trust could be built so that there would be transparency for both, allowing the supervising chaplain to assist with both the "what" and the "why" of self-care.

The "Why" of Self-care

The process in which an individual analyzes each element contained in the "what" of self-care can serve as the bridge to the most difficult and yet important part of self-care, the "why."

During the interviews the chaplains quite frequently spoke of self-care in terms of "for me." This occurred whether the issue involved physical, mental, or spiritual needs. In order to be most effective, a person's self-care has to be done specifically for what meets their needs and for their own personal reasons or motivation (the "why"). The goal is a self-care plan that becomes a

⁷ Quevillon et al., "Helping the Helpers," 1354.

part of the individual's daily life and continues throughout their lifetime.

When the project began, the focus was more on the “what” of self-care. The assumption was that a workshop could be designed to assist chaplains in understanding the “what” of self-care to enable them to perform their requisite duties. I anticipated that part of the challenge in self-care in an operational setting would be that some of the “what” of self-care may not be available. Yet, during the interviews, it became clear that it was not just in operational settings that self-care was a challenge. Even in a shore billet, where there are fewer barriers to doing activities, the “what” of self-care could be a challenge. No matter the setting, the most important component is whether the chaplain is going to be intentional in self-care.

Every chaplain interviewed knew and agreed with the basic components of self-care. While there were slight variations in the overall categories, essentially all agreed that self-care included the following aspects: physical, mental, spiritual, and social. Every chaplain realized that self-care was necessary. The challenge was in being intentional and committing to do self-care on a consistent basis. At the heart of that is the “why” of self-care.

Ultimately the biggest barrier for a chaplain in doing self-care is oneself. Only the individual chaplain can answer the “why” question. The chaplain must then commit to performing this task each day.

The interviews demonstrated consistent themes regarding potential barriers of the “why” of self-care. The military, including the Chaplain Corps, is a culture of mission first and accomplishing requisite tasks. There is the perceived need to prove oneself. Greer specifically quotes two chaplains he interviewed who were experiencing compassion fatigue and feeling alone because of the competitive nature in the Navy Chaplain Corps and not sure who they could

trust.⁸

Another barrier to self-care is the constant demand on a chaplain, especially in an operational setting. All of the chaplains commented on the fact that there is always more to do. This can lead to the chaplain not taking time for self-care. Chaplains may rationalize reasons for not doing self-care as good and noble. Training will need to get at the heart of the “why” to help people realize that it is not only acceptable, but preferable to take care of oneself in order to better serve others. Teater states:

A possible barrier to prioritizing good self-care may be a dichotomy of our own making. We may feel that we must choose *either* meeting the needs of those we serve *or* taking care of ourselves. Rather than accepting this false dichotomy of either/or, maybe we should choose a both/and approach. We can do good work with others *and* keep ourselves well and healthy. It may even help to reframe that false dichotomy into a logical order which we approach our work. We can take care of ourselves first so we can then take care of others.⁹

The “why” to do self-care is the biggest challenge in designing training. Each chaplain must work through the “why” and eliminate personal barriers. It is necessary that the chaplain be committed to a program of self-care in order to execute it on a consistent basis.

As one chaplain noted, “I don’t know why I choose the Navy and work over my family at times, because I certainly love [my family] more.” If a chaplain consistently chooses to work for others rather than performing self-care, “why” are they making that choice? Is it a sincere belief that most people do not need self-care? Is there some deeper, albeit unhealthy, need being met by the choice? Is it a sincere belief that this is way in which God wants us to truly serve Him? Training on self-care can help us begin to think through these questions. Ultimately, like a person dealing with an addiction, no amount of facts or persuasiveness will have the necessary

⁸ Paul Greer, “An Educational Methodology and Program for the Mitigation of Compassion Fatigue for Combat Deploying Chaplains” (DMin diss., Liberty Baptist Theological Seminary, 2009), 56.

⁹ Teater and Ludgate, *Overcoming Compassion Fatigue*, 118, Kindle.

impact until the individual realizes that change is needed and that self-care must become a part of their life. As Killian states, “There is a gap between what people profess they believe and what they actually do [believe] and we should not be too surprised that that there is no association between [a] helping professional’s belief that leisure time and self-care are useful and time they allot to these activities.”¹⁰

One cannot be forced or persuaded to change. However, it may be helpful to motivate individuals on the need for self-care (e.g., a theological conversation on why self-care is important). The “why” of self-care can be answered theologically, through the First Commandment, Third Commandment, and First Article of the Creed. God should come first in our lives and we should depend only on Him. God wants us to take care of ourselves, as demonstrated by the First Article, as well as the scriptural teaching that we are God’s temple. We have an obligation to be good stewards of the bodies and minds that God has given us. This specifically means rest, as commanded in the Third Commandment. Another aspect of the Third Commandment is for us to be in a relationship with God. One of the ways in which this happens is in spending time daily with spiritual disciplines, e.g., reading His Word, prayer, meditation, etc., as well as being a part of a worshipping community.

God has called us to this ministry. This is a source of comfort and strength in the midst of challenging ministry settings, including an operational billet and/or a deployment. God has placed the individual chaplain at that time and place to serve Him and the people in that unit. This can be a tremendous encouragement and should serve as a foundation for the chaplain to perform self-care. Since God has called the chaplain to the ministry and to the specific time and

¹⁰ Kyle D. Killian, “Helping till It Hurts? A Multimethod Study of Compassion Fatigue, Burnout, and Self-Care in Clinicians Working with Trauma Survivors,” *Traumatology* 14, no. 2 (2008): 41.

place, the individual needs to be at his best, which requires self-care.

The majority of participants agreed that self-care is essential for long-term successful service. A helpful practice may be to develop either a personal mission statement or a vocation statement. This may assist in answering the “why” of particular activities. Perhaps, this will simply be the words spoken at an ordination or in a vocational statement. A chaplain should daily remember the blessing of Baptism, as well as the reason he is in ministry.

The “what” of self-care is clear. We need to physically, mentally, spiritually, and socially take care of ourselves so that we can perform and serve at our best for an extended period of time. One part of the “why” of self-care is to enable us to serve as professional and pastoral Navy chaplains. Not taking care of ourselves may result in burnout, preventing us from being able to function in the Chaplain Corps and may prevent us from properly caring for the flock that God has placed in our care. God has called us to other vocations as well, and we should not forsake those responsibilities due to our callings as chaplains.

Elements of Training on Self-care

This project began aiming to put together a training program that would persuade chaplains of the need for self-care, and then encourage the implantation of self-care. While it is still important to inform and share the “what” of self-care, the results of the interviews demonstrate that chaplains know what self-care is and the need to engage in the activity. In spite of this awareness, these activities are frequently omitted from their daily routines. Miller and Rollnick describe this as the “ambivalence stage,” defined as simultaneously either wanting and not wanting something or wanting both of two incompatible things.¹¹ Although the need to rest may

¹¹ William R. Miller and Stephen Rollnick, *Motivational Interviewing: Helping People Change*, 3rd ed., Applications of Motivational Interviewing (New York: Guilford, 2013), 6.

be patent, there is often a competing reticence to telling someone that, as a chaplain, you are unable to provide the assistance requested at that time.

Ultimately, the only way to help chaplains overcome barriers to self-care is for them to work towards that change. The training proposed follows the model of “motivational interviewing,” in which four processes are utilized: (1) engaging, (2) focusing, (3) evoking, and (4) planning.¹² Engaging is building a relationship and partnership as we move forward together to the desired goal. Focusing is deciding on a change-goal and being specific with what one wants to accomplish or change in one’s life. Evoking is the individual’s personal motivation for change and essentially talking themselves (i.e., not directed from outside influences) into change. Planning is moving towards change and a specific plan to do so and may need to be revisited as the journey towards change progresses.¹³

The first step of engaging is the establishment of a connection and relationship. This may be challenging in a training environment, but there are some aspects of this step that are important and applicable. This step may also be difficult to facilitate in a group setting, as it lends itself to more individualized application.

If chaplains are going to attend training or workshops on self-care, some resistance may be anticipated. Many chaplains may purport to have sufficient knowledge regarding the areas for which the training is being provided or may be skeptical about the qualifications of the presenters. Therefore, it would be important during commencement of the workshop to provide an emphasis on the aspect of partnership (i.e., “I am not telling you either what to do or what you need to do”)¹⁴ The workshop facilitator should emphasize the partnership aspect of the

¹² Miller and Rollnick, *Motivational Interviewing*, 26–30.

¹³ Miller and Rollnick, *Motivational Interviewing*, 26–29.

¹⁴ Miller and Rollnick, *Motivational Interviewing*, 16–19.

workshop, and as an example for further work or partnership with another chaplain or mentor.

The engagement section of the workshop shares the information about the “what” of self-care. This could be discussion based, having participants flesh-out the various elements of self-care. It could also be didactic, explaining the five key areas of self-care. Under the physical element, the conversation should include not only the physical exercise aspect, but also nutrition and the importance of rest. The mental aspect of self-care includes the various ways to develop as a professional Navy chaplain, such as leadership courses (e.g., Joint Professional Military Education). As a chaplain, it may be prudent to pursue additional certifications, advanced education, or other interests. The spiritual component of the discussion should highlight the importance of daily spiritual practices, as well as the value of community of worship and being fed by others. This would also be the area to either remind or discuss the idea of calling and what it means to be a chaplain.

The social component stresses the importance of family, friends, accountability partner, and mentor. Finally, a description “play”—its importance and how it may incorporate activities that fit into the other categories. If a questionnaire or worksheet is provided, each of these items could either be filled in by the participants or given as a handout.

The next stage in the “motivational interviewing” model, focusing, provides time for self-work. Each participant uses the list of elements of self-care under the five main headings and each subheading, to evaluate where they see themselves at this point. One helpful tool would be the “importance ruler,” which allows participants to rate each item’s importance on a scale of zero to ten.¹⁵ This feedback may precipitate further conversations exploring why a participant rated the various sections as they did. Depending on the group, this could be a chance to form

¹⁵ Miller and Rollnick, *Motivational Interviewing*, 174.

small groups or dyads to increase the engagement component and perhaps set the stage for long-term partnerships.

The next step of the model is the evoking stage, in which individuals, through either process or conversation, decide what will motivate them for the change. This provides an excellent opportunity to discuss the “why” of self-care. This could be facilitated via either discussion or in a didactic setting. The discussion should include the following theological points: (1) God’s expectations to be good stewards of His creation (First Article); (2) His command to spend time in rest and worship (Third Commandment); (3) the concept of calling and vocation; and (4) fulfilling the needs of various vocations for a protracted period of time. It can also include the dangers of compassion fatigue, burnout, and other issues that research has revealed, as well as the deleterious impact of omitting self-care.

Subsequent to these discussions, the individual may want to reexamine previous responses pertaining to the various elements of self-care. Assuming re-examination will lead to at least one or two changes regarding self-care's importance, it will then be necessary to explore the “why” behind those changes. As previously stated, this process could be done either in dyads or in a small group setting.

Once the modifications are made, the individual begins to develop a specific plan on how to effectuate these altered views through goal setting. Miller and Rollnick provide the following guidelines to set and achieve goals: (1) confirm the goal and any sub goals, (2) itemize the options that are available, (3) elicit the preferred way forward, (4) summarize the plan and strengthen commitment, and (5) troubleshoot.¹⁶

At this stage the dynamic of a dyad or small group is extremely valuable. Such a setting

¹⁶ Miller and Rollnick, *Motivational Interviewing*, 276.

allows the individual both to talk through potential challenges and receive support. Miller and Rollnick point out that “People tend to become more committed to what they hear themselves saying ... there is something important about speaking one’s motivations aloud in the presence of another person ... when one’s own motivation occurs within an accepting, affirming, listening, and nonjudgmental relationship it can have particular impact.”¹⁷ The first step towards change is often saying it out loud to someone else. Whether it is with another person or working privately, the individual should work through the planning phase, come up with a specific plan moving forward, and write it down. The next step is putting it into action.

As the workshop concludes, it would be important to note that this should be an on-going journey and conversation. Each individual’s specific plan should be periodically revisited to make certain that it is still ongoing and on track. It may prove beneficial to have the individual write a letter to either himself or herself that the facilitator mails six weeks later. The facilitator's reminder will, hopefully, encourage the individual to move forward.

As a whole, the participants should be encouraged to review and reevaluate their list every few months. If they have made progress with respect to the issues previously identified, it may now be appropriate to determine whether there are other issues they would like to address. If that is the case, the pattern may simply be repeated.

Partnerships or small groups of peers would greatly enhance the implementation of the self-care plan. Preferably, these groups would meet together and monitor one another. This could also be an opportunity for supervising chaplains to support chaplains in their journey, and may provide an excellent opportunity for supervising chaplains to demonstrate their vulnerability and transparency with respect to their own self-care.

¹⁷ Miller and Rollnick, *Motivational Interviewing*, 167–68.

Conclusion

Navy chaplains are called to serve people who do incredibly important and yet challenging jobs in sometimes the most difficult of environments. Navy chaplains will sometimes see and deal with some of the more tragic circumstances of life. The military life and the nature of the ministry can take its toll on the chaplain. Therefore, self-care is required. There needs to be more training and conversation regarding self-care.

As a chaplain, it is my hope that this project will be one step in that direction. Many potential barriers to self-care in an operational setting may be mitigated via implementation of the training procedures identified herein. Ultimately, the only real barrier is the chaplain. If he is intentional and makes self-care a priority, he can optimally serve both God and those people whom he is called to serve. To function at our best, we must be good stewards of the gifts God has given us: body, mind, and spirit.

Realistically, there will be other and more exhaustive resources upon which future training programs are likely to be predicated. It is, however, the author's hope that this project will serve in some way to improve the culture and the current pattern of addressing the issue of self-care in the Navy. On a personal note, this project has been a blessing to the author. It is the author's prayer that the research and findings may assist others in their self-care journey.

When we analyze self-care through the lens of theology, and reflect on what God has done, the need for and the benefits derived from self-care appear indisputable. It is our hope that others see this, as well.

Self-care is a continuous battle and a life-long journey. It is easy to go the extreme of selfishness and indulgence. This often manifested as not caring for others when performing the chaplain's ministerial duties. Unfortunately, this is frequently observed in the Chaplain Corps. However, it is much more common to encounter chaplains who relate the humbling experiences

of talking with Marines, Sailors, and Coastguardsmen, for whom they care deeply and sincerely love. Many chaplains put themselves last and give all that they have to those to whom they are called to minister. Prayer is needed for those chaplains. Having gleaned greater insight into the need for self-care, let us hope and pray that the advice is taken to heart and that these chaplains will be able to serve in the Chaplain Corps and other places for a long time.

APPENDIX ONE

Training on Self-care

SELF-CARE

BY
Carl Muehler

Why a conversation on Self-care?

- Own story
- Observations of others
- Research
- No judgement-offering thoughts and perspective
- Common barriers to self-care?

“When the well’s dry, we know the worth of water.”
– Benjamin Franklin

NOTES

Share own experiences of different moments needed reminder of self-care or close to burnout

Shared experience with others in Chaplain Corps, especially in Leadership Course

Dmin project on self-care, including interviews of other chaplains to help inform the training

Not telling way needs to be, but rather a conversation to learn from each other.

Discussion: What are common barriers and challenges to self-care?

-Personal expectations, serving others, Serving God, desire to help; time, availability, expectations of others; other responsibilities, etc.

Self-care “What” and “Why”

What-Head-Content

- Physical
- Mental
- Spiritual
- Social
- Play

UNIQUE TO YOU

Why-Heart-Motivation

- Theological
- Vocation
- Health
- What is your motivation?

UNIQUE TO YOU

NOTES

Discussion: Ask the group to list out components of the “what” and “why” self-care; could do in small groups or pairs depending on size and time for the training
Emphasize both the what and why are unique to the individual: there is no one size fits all

SELF-ASSESSMENT

- #1 Make 3 columns: Category/Importance/Time
- #2 List each category with space for additional rows under each heading: Physical, Mental, Spiritual, Emotional, Play
- #3 In 2nd Column rate each how important it is to you (1-5, least-very)
- #4 in 3rd Column list how much time average each week spend in that area

NOTES

Have each participant walk through the steps on the slide.
Stress that this is their own assessment and there is no right or wrong answer.

Example Self- Assessment

Category	Importance	Time
Physical	4	5 hrs wk
Mental	3	3 hrs week
Social	5	15 hrs week
Spiritual	4	4 hrs week

Self-Care: Unique to You

- Personality Type
- Situation
- Motivation

“And now that you don’t have to be perfect, you can be good.”
– John Steinbeck

NOTES

Highlight again that it is unique to the individual. Discuss various personality inventories that can give insight if not familiar. Individuals can reflect on their experience of what ‘recharges’ them.

Discuss how situations may impact self-care, including environmental factors if deployed.

Discuss various motivations for self-care. Depending on group may break into dyads or small groups to discuss/share motivations.

What of Self-care: Physical

- Exercise: weekly needs
- Nutrition: Eating healthy, portions, frequency, “Comfort food”
- Rest
- Unique to you: What do you enjoy?

NOTES

Ask the group to list various components of physical care and discuss.

Highlight physical activity as important for health benefits and mental benefits. The activity is unique to each person.

Discuss eating healthy, but also question of how they eat their meals—in fellowship with others and sit-down meals? Drive through quick meals? In front of the TV?

With all categories fill in more specifics of other elements that make up that category.

Example Self- Assessment

Category	Importance	Time
Physical	4	Total: 56
Exercise	4	5 hrs wk
Rest	4	42 hours wk
Nutrition (time=meals)	3	7 hours wk
Mental	3	3 hrs week
Social	5	15 hrs week
Spiritual	4	4 hrs week

NOTES

Continue to add sub categories and rankings and time, so add nutrition, rest, exercise, etc. Total numbers for each category based on subsections

What of Self-care: Mental

- Professional
- Theological
- Personal Interests
- Rest
- Unique to you: What do you enjoy?

NOTES

Discuss various ways people can continue to develop their minds. This may include additional classes, advance degrees, leadership courses, and other interests. Highlight the importance of mental rest (i.e. mindless activities such as a fun fiction book or movie).

Highlight for this and all sections that the specifics are unique to the individual.

Example Self- Assessment

Category	Importance	Time
Physical	4	Total: 56
Exercise	4	5 hrs wk
Rest	4	42 hours wk
Nutrition (time=meals)	3	7 hours wk
Mental	3	3 hrs week
School	3	7 hrs week
Reading for fun	2	1 hr week
Social	5	15 hrs week
Spiritual	4	4 hrs week

NOTES

Continue to add sub-categories and rankings and time, so add nutrition, rest, exercise, etc. Total numbers for each category based on subsections.

Continue for last two sections.

What of Self-care: Spiritual

- Daily
- Weekly
- Personal
- Community
- Sabbath
- Unique to you: What feeds your soul?

NOTES

Discuss various ways people in the group are fed spiritually. Highlight the importance of daily elements as well as weekly activities such as a worship service and **bible study**, community as well as individual.

Discuss rest for a day and importance of it, to include God has given Sabbath as way of self-care. Rest is a part of physical and mental need, but also about connection and intentionality that comes with taking a day or part of a day as “Sabbath.”

What of Self-care: Social

- Mentor
- Accountability Partner
- Friends
- Community: Family, neighbors, etc...
- Sabbath
- Unique to you: What feeds your soul?

NOTES

Highlight the importance of various social elements. For some personality types more critical than others, but all of us need others.

Research, through literature and interviews, highlights the value of both mentor and an accountability partner. One should also have in his life someone to call by first name. Community is important, including family but also other communities to be intentional in being a part of for social support.

What of Self-care: Play

- Research: Every creature does it and needs it
- Components:
- Can be a part of other categories but also should be separate
- Unique to you: What gives you joy? What is fun for you?

NOTES

Discuss what the group thinks elements of play are and whether or not they agree that it is needed. Play is purposeless, voluntary, attractive to you, lose sense of time, can be silly, improv, has emotion with it “fun.”

Highlight research: Stuart L. Brown and Christopher C. Vaughan, *Play: How It Shapes the Brain, Opens the Imagination, and Invigorates the Soul* (New York: Avery, 2010). (127)

Play is unique and other activities can be play (i.e. running) but also may require intentionality. When was the last time you just played? What is holding you back?

Why of Self-Care: Theological

- God Command: Elements in Commands (Depend on Him, Sabbath)
- Creation: Gift to be good steward and to servants
- Biblical Examples

NOTES

Transition to Why of self-care.

Theology has much to offer to the “why” of self-care. Ask group if they agree it is part of God’s plan/design. Discuss First Commandment of relying on God completely and not being ‘messiah’ to save others. Third commandment declares rest and time in God’s Word

Highlight Martin Luther’s *oratio, meditatio, tentatio*. Prayer is essential, meditate individually, but also in community: in Bible study, worship, with others is key. We are not perfect people; we need reminders of God’s gifts also. Explain concept of *tentatio*. The struggle is real and share data from interviews conducted that each chaplain experienced “*Anfechtung*”, a real struggle. Can be an opportunity for growth, but need to turn to God and practice self-care.

Discuss aspect of First Article that we are uniquely made with responsibility to take care of creation, including ourselves (body is temple 1 Cor 6)

Biblical examples include Moses, Elijah, and Paul. Connection with God and connection with others. Experienced struggle.

Why of Self-Care: Vocation

- Vocation: Callings-Roles God has called you to be
 - Parent, child, sibling, mentor, leader, community member
 - Each role valuable and needs attention and to be at your best
- Calling as chaplain: Remember calling (mission statement) and needed for lifetime of service.

NOTES

Work as a chaplain is not only a responsibility. Discuss vocation and other roles. An individual is called to ministry and needs self-care to run the race of life (time of service). Having a personal mission statement can be great reminder.

Example Self- Assessment

Category	Importance	Time
Physical	4	Total: 54
Exercise	4	5 hrs wk
Rest	4	42 hours wk
Nutrition (time=meals)	3	7 hours wk
Mental	3	9 hrs week
School	3	7 hrs week
Reading for fun	2	1 hr week
Leadership Class	4	1 hr week
PLAY		

NOTES

The next two slides of self-assessment are a review and reminder to look at their own self-assessment. Does the time match importance? If not, lead into the “Why” slide.

Example Self- Assessment

Category	Importance	Time
Social	5	Total: 17 hours
Family	5	15 hrs wk
Friend	4	1 hr
Peers	3	1 hr wk
Spiritual	5	Total: 3 hours
Daily Devotional	5	1 hour wk
Weekly Worship	5	2 hours wk
Sabbath	4	0

168 Hours

People need you...so spend some time taking care of you.

NOTES

168 hours in a week: How much of that time is spent on themselves? How much time spent on other vocations? Need to be healthy to do all vocations well.

Why of Self-Care: Your motivation?

- Write down 3 Reasons why you do or should do self-care
- Biggest (only barrier) is YOU! If not doing it, reflect on the why.

NOTES

Allow time for self-work for participants to think of their “why” of self-care. Highlight that barriers are mostly self-imposed and can be worked around, but requires intentionality and effort.

Reminder of *tentatio*. The struggle will be real; it will happen-are you ready? Will you come out stronger?

Self-Assessment revisited: Why

- Write down 3 Reasons why self-care is a part of your life
- Place as a daily reminder.
- Write your own mission (calling) statement.

NOTES

Encourage to place reminder someplace can see daily. Begin working on a mission statement after training.

Self-Assessment revisited: What

- Look at different Areas and how rated importance
- Does Time match?
- Anything would like to change?
- Write specific plan: Begin journey with one step
- Intentionality: Place the “why” with the “what”
- Revisit
- Accountability

NOTES

Time for self-work to revisit self-evaluation. Encourage participants to find one area they would like to move up and to be specific. For example, nutrition in physical or increased prayer time in spiritual.

Stress that self-care is life-long journey and encourage them to revisit this periodically and encourage to share with accountability partner. All areas are important. Continue to strive for moving up each area. Self-care, like an addiction, is something individual has to realize. We can always rationalize, so have to decide important and move forward.

Emphasize the community aspect. Accountability for self as well as to help others.

**Take care of you
...so you can continue to take care of
others**

“I praise you, for I am fearfully and wonderfully made”

-Psalm 139

“Rest and self-care are so important. When you take time to replenish your spirit it allows you to serve others from the overflow. You cannot serve from an empty vessel.”

– Eleanor Brown

NOTES

Closing comments and ask if any of the quotes draw attention.

**Take care of you
...so you can continue to take care of
others**

“Self-discipline is self-caring.”

– M. Scott Peck

“Self care is not a waste of time. Self care makes your use of time more sustainable.”

– Jackie Viramontez

“When you recover or discover something that nourishes your soul and brings joy, care enough about yourself to make room for it in your life.”

– Jean Shinoda Bolen

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