An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives

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Ministerial families are in the unique situation of a two-person career, where although the husband is the only one employed by the church, the wife is also expected to perform church specific demands and responsibilities (Frame & Shehan, 1994; Lifeway, 2017). Unique variables and factors of stress among ministry wives have been identified along with how their role affects certain domains of life (Douglas, 1961; Frame & Shehan, 1994; Lee, 2007; Zoba, 1997; Luedtke & Sneed, 2018). Lifeway Research (2017) found that 78% of ministers’ spouses experienced some level of burnout with 22% at the highest levels. In the literature, burnout is connected to stress, as it occurs when resources are used up for coping with stressors (Freudenberger, 1974; Barnard & Curry, 2011; Maslach et al., 2001; Yu et al., 2015). Likewise, resilience has been explored as a phenomenon that can help mitigate the negative effects of stress (Haglund et al., 2007; Kermott et al., 2019). Whether an individual is resilient and able to cope with stress, or not and experiences burnout, has been found to impact levels of wellness (Eckstein, 2001). Research on these concepts reveals a framework where stressors exist, resilience or burnout occurs, and levels of wellness are respectively affected (Kermott et al., 2019; Mutkins et al., 2011; Pedrelli et al., 2008). It has been established that ministry wives experience unique stressors (Frame & Shehan, 1994; Hileman, 2008), however, the lived experiences of ministry wives, their resilience and burnout related to these stressors, and their effect on perceptions of wellness, have not been studied. With such a high rate of burnout reported, there is a need to explore the phenomenon of these women’s experiences.
The purpose of this study was to provide a rich description of the experiences of stressors impacting ministry wives’ perceptions of wellness through phenomenological qualitative inquiry to inform those working with this population. This study was conducted using an in-depth, semi-structured interview with participants who were currently in the role of ministry wife, and whose husband was serving as a minister at a Christian Church. Christian Churches are non-denominational congregations that emerged from the Second Great Awakening at the turn of the nineteenth century (Foster et al., 2004). These churches lack the structure and supports that are often found within denominations (McMinn et al., 2005; Trihub et al., 2010). The major findings of this study interposed onto the stress and wellness framework from the literature. Four themes of stress were identified by participants: Life Stress, Family Stress, Congregation Stress, and Personal Stress. Experiences of both burnout and resilience due to these stressors were shared. The three dimensions of burnout (emotional exhaustion, depersonalization, and reduced personal accomplishment; Maslach & Jackson, 1981; Maslach & Leiter, 2016) were present in their experiences, and they identified low level perceptions of wellness. When resilience was described, however, higher levels of wellness were perceived. Discussion of the findings, connection to the current literature, implications for counselors and congregations, limitations, and possible directions for future research are offered.
AN EXPLORATION OF STRESSORS AND PERCEPTIONS OF WELLNESS AMONG
CHRISTIAN CHURCH MINISTRY WIVES

by

Laura A. Kellicut

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Laura A. Kellicut
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CHAPTER I
INTRODUCTION

This paper is a phenomenological analysis that explores the lived experience and how stressors relate to perceptions of wellness for those in the role of ministry wife within the Christian Church. A notable amount of research has explored the stress and coping of clergy themselves (Barnard & Curry, 2011; Case, 2019; Gleason, 1977; McMinn et al., 2005), with significantly less looking at clergy wives. What researchers have examined regarding wives are the specific stressors they encounter, personality types, some coping resources, and how their role affects certain domains of life (Baker & Scott, 1992; Douglas, 1961; Luedtke & Sneed, 2018). There is a dearth of literature looking at the internal personal experience of the ministry wife with these stressors and how the presence of resilience or burnout affects their perceived wellness. Moreover, researchers have focused mostly on denominational participants, with little to no attention to the Christian Church, which functions as non-denominational and therefore is without a network of resources and supports. This is the first study to explore the personal experiences of how resilience or burnout relates to perceptions of wellness for ministry wives within this Christian tradition. This chapter outlines the context, purpose, and significance of this study.

Background of the Study

It has long been tradition that ministerial families are in a unique situation compared with non-ministerial families. Over the last several decades, research has come to affirm this assumption. Ministers and their spouses find themselves in what is known as a two-person career. This essentially means that although the husband is the only one employed by the church, the wife is also expected to perform church specific demands and responsibilities (Frame & Shehan, 1994; Lifeway, 2017). McMinn et al. (2005) echo this when noting that it is uncommon
for the members of a family to be so involved in “the system of parental employment” (p. 566). This rare set-up has been found to result in additional stressors from “the unique interface between the family and church systems” (Frame & Shehan, 1994, p. 197).

Many ministerial families who find themselves facing such strain can turn to their denomination for support. Denominational structure allows the sharing of resources and programs to be set in place to care for clergy and their families (McMinn et al., 2005). Both Morris and Blanton (1994a) and Trihub et al. (2010) found that many denominations offered counseling services, referral services for counseling, family retreats, marriage seminars, support groups, and time off. The Christian Church lacks such resources. To understand why this is the case, it is important to know a brief history of the Christian Church.

At the turn of the nineteenth century, the Second Great Awakening was happening, spurring on several revivalistic movements of Christianity (Foster et al., 2004). In particular, the Restoration Movement (also known as the Stone-Campbell Movement) emerged with two specific hallmarks that were unique at the time. One, was an emphasis on the personal reasonability and use of scripture. Each congregation member was believed to have the ability to read and understand scripture for themselves. The other was an assumed local church autonomy. Continuing today, each congregation is autonomous, independently making decisions for that local body of believers. Those involved in the Restoration Movement sought to restore the "apostolic principle of the rights of the local church to conduct its own affairs." (Foster et al., 2004, p. 485)

In time, the second generation of the Restoration Movement broke into three groups; Church of Christ, Disciples of Christ, and Independent Christian Churches/Churches of Christ. The first branch, Church of Christ, holds more sectarian principles than the others and has some elements in place that help them maintain connection between the autonomous local bodies. To begin with, these churches are non-instrumental (using no instruments in corporate worship)
which alone fosters a unique connection between congregations. They also participate in lectureships, with all congregations in a local region or area attending. These function in place of outside commentaries or resources for understanding scripture. In this way, Churches of Christ, maintain cohesion with one another.

Disciples of Christ, the second branch of the Restoration Movement, formalized into a denomination in 1960. Becoming a denomination naturally created a stronger connection between local bodies, setting up a network of resources from one church to another.

The third branch, the Independent Christian Churches/Churches of Christ, are the congregations this research is interested in. Congregational independence has left these churches loosely connected to one another, but with no formal structure or oversight. There have been some elements that have kept these churches networked in the past, but they are dwindling. Conventions, like the North American Christian Convention (NACC) and International Conference on Missions (ICOM) continue to happen, but few state level Christian conventions are still occurring. These were integral in helping Independent Christian Churches/Churches of Christ support and encourage one another. Another connecting factor has been Christian Colleges and Universities, but these too are falling on hard times, with 65% seeing a decrease in enrollment in recent years (Noble, 2020). Even these networks are only fleeting supports, however, as they are not long-term resources. These factors leave Independent Christian Church/Church of Christ ministers and their families disconnected from support they may require during their time in ministry.

Focus of Study

Statement of the Problem

The last few decades have seen a shift in the understanding of wellness. The old paradigm followed the medical model of treating illness and disease rather than prevention of
such (Myers et al., 2000). The new model places a significant emphasis on prevention and early intervention. Wellness is no longer viewed as simply the absence of illness or infirmity, but rather a balance of various elements of one's life (Eckstein, 2001). These elements are impacted by both external and internal factors, with stress being a common variable that causes imbalances in wellness (Eckstein, 2001). According to the American Institute of Stress in New York, 77% of people in the U.S. regularly experience physical symptoms related to stress. Seventy-three percent also reported regularly experiencing psychological symptoms due to stress (Statistic Brain Research Institute, 2020). The impact that stress has on wellness may be tied to whether an individual has the ability to cope with it. Resilience has been explored as a phenomenon that can help mitigate the negative effects of stress (Haglund et al., 2007; Kermott et al., 2019). It is conceived as the ability to positively adapt to adversity resulting in more positive outcomes (Cicchetti, 2010; Rutter, 2012). When resilience is lacking, stress has been linked to a concept known as burnout (Maslach et al., 2001; Mutkins et al., 2011; Yu et al., 2015). Burnout occurs when stressors use up a person’s resources and become too much to cope with (Freudenberger, 1974; Barnard & Curry, 2011; Maslach et al., 2001). Much of the research on burnout began by looking at the helping professions (Maslach et al., 2001). As this research progressed, burnout was identified in various environments and roles, particularly volunteerism (Alverson, 1997; Morgan, 2009). The specific role of ministry wife falls into both categories; helping and voluntary.

Ministry wives tend to be unpaid volunteers within the church and many of their expected and performed duties and responsibilities have a helping function, causing similar stressors as those in the helping professions. Therefore, burnout among ministry wives is likely to be prevalent (Baker, 1989; Morris & Blanton, 1994b). Lifeway Research (2017) found that 78% of ministers’ spouses responded that they experience some level of burnout with 22% at the highest
levels. As 22% also marked not feeling burned out at all, we cannot assume that all ministry spouses experience burnout and that perhaps there are aspects of resilience present for those spouses. However, with three-fourths of respondents identifying as having felt burned out in their role, it is imperative that this population is heard. Unique variables and factors of stress among ministry wives have been identified (Douglas, 1961; Frame & Shehan, 1994; Lee, 2007; Zoba, 1997). There is a gap in the literature, however, regarding how lived experiences of these stressors affect their perceptions of wellness.

Researchers have looked at these stressors broadly, engaging ministry wives from multiple denominations, but have failed to represent Christian Churches/Churches of Christ specifically. Many denominations have hierarchical structures set up beyond the local congregation. This structure often comes with denominational support and resources for ministers and their families who find themselves in a time of need (Trihub et al., 2010; Morris & Blanton, 1994a). As mentioned previously, due to fundamental differences in the formation of this distinct movement of churches, Christian Churches/Churches of Christ are organized and function differently than mainline denominations. They are autonomous congregations with no hierarchical structure outside of the local body. The ministers and their families do not have ready resources to reach out to in times of stress and need. The goal of this study is to understand the impact of stressors on perceived wellness of ministry wives within the Christian Church/Churches of Christ and what unknown factors of resilience or burnout influence outcomes for those without denominational supports. Through phenomenological study, it will attempt to inform counselors of the unique needs of this population, which in turn might lead to identification of strategies for working with them. It might also illuminate ways for congregation members to support ministry wives in their service to the local body.
Research Questions

This study is looking to explore the following research questions:

1. What are the lived experiences of ministry wives within the Christian Church/Churches of Christ?
2. What are the potential stressors present for those in the role of ministry wife?
3. How do these relate to perceptions of wellness?

Significance of This Study

It is important to note the difference between ministry wives and general volunteers, which have more substantial research about stress impact in that role. Ministerial families are under focused scrutiny due to the expectation that they are models of religious piety and moral exemplars (Frame & Shehan, 1994; Lee & Iverson-Gilbert, 2003, Lifeway Research, 2017). This adds stress to the role of ministry wife, as it often feels like living in a fishbowl (McMinn et al., 2005). Ministry wives are expected to be involved in multiple aspects of the congregation, while their parenting, marital interactions, and personal behaviors are also closely observed. This kind of constant attention can breed a sense of needed perfection, thus piling on more stress that can lead to burnout. Another distinction between ministry wives and general volunteers is that most of the latter are choosing to do so because they want to participate in what they are volunteering for. Ministry wives often find themselves filling in the gaps within a congregation as needed, whether they enjoy the task, possess the necessary skills, have time for it, etc (Luedtke & Sneed, 2018; Taylor & Hartley, 1975). Thus, it is important to look at the impact of stressors in ministry wives separate from general volunteers.

Limitations and Implications

Due to the nature of Qualitative Inquiry and the design of this study, there will be certain limitations relating to the sample, transferability, and researcher subjectivity. When looking at
the sample, it will focus on ministry wives specifically within the Christian Church/Churches of Christ who are married to paid ministers. It will not include the wives of other church leadership (e.g., elders), missionaries, or general women leaders within the church. It is also important to note that traditionally ministers in Christian Churches/Churches of Christ have been men. Views on women in leadership positions vary from congregation to congregation, with more liberal views beginning to take root, but most positions of paid ministers continue to be filled by men (Harwell & Hunnicutt, 2013). For this reason, women will be the target population of this study as the spouses of ministers within the Christian Church/Church of Christ. The participants will be drawn from Christian Churches/Churches of Christ in the Midwest of the United States. Due to these limitations, findings will not necessarily be generalizable across the country, internationally, or between denominations. It is likely, however, that ministry wives in other denominations will resonate with the experiences of the participants in this study. The findings may be informative for developing counseling resources beyond the Christian Church/Churches of Christ and across different regions. This could help in restructuring services and supports within churches. It is also possible that counselors who work with this population will gain valuable insight into the experiences of these women, better equipping them to offer counseling services that meet their needs.

Looking at the nature of Qualitative Inquiry, analysis is accomplished through the decisions made by the researcher, which limits the study to researcher subjectivity (Bloomberg & Volpe, 2016). Also, the concern of potential bias arises due to the researcher’s own experience as a ministry wife within the Christian Church/Church of Christ. The researcher will take measures to address these issues throughout the study, using reflexivity, bracketing, journaling, and peer debriefers.
Definition of Terms

**Christian Church/Church of Christ**

*Christian Church/Church of Christ* is defined as a fellowship of churches that are rooted in the Stone-Campbell Restoration Movement (Foster et al., 2004). They are one of three branches and are independent non-denominational congregations. From this point forward *Christian Church* will be used to reference this branch of the Restoration Movement.

**Ministry Wife**

*Ministry wife* will be defined for the purpose of this study as the wife of clergy employed by a Christian religious entity. This study will specifically include wives of paid clergy within Christian Church congregations.

**Stress**

*Stress* is defined for this study as a state of mental and emotional tension caused by external changes and problems in one’s life (Caplan, 1990; Merriam-Webster, n.d.; Weber, 2011).

**Resilience**

*Resilience* is defined as the ability to positively adapt to adversity and stress resulting in more positive outcomes than others in similar situations (Cicchetti, 2010; Rutter, 2012).

**Burnout**

*Burnout* is defined as feeling significantly worn out due to the excessive depletion of energy and resources by one’s role or job stressors (Maslach et al., 2001; Yu et al., 2015).

**Wellness**

*Wellness* is defined in this study as a perceived balance of spiritual, emotional, social, and physical health (Hattie et al., 2004; Myers & Sweeney, 2004).
Organization of Paper

Chapter I offered a brief background and focus of the current study. Through filling out the context of this study, the need for understanding how stressors affect perceptions of wellness of ministry wives has been established. The identification of this gap prompted the focus of this study which was then outlined through a statement of the problem, the significance of the study, research questions to be answered, and definitions of terms.

Chapter II offers an in-depth overview of the extant literature related to the topic of this study. Studies of stress theory, with a thorough look at the identified stressors of ministers and ministry wives are reviewed. Then, the concepts of resilience and burnout are explored as possible determinants of healthy functioning and wellness. Finally, models of wellness are examined to illuminate high-level functioning and health that may be affected by stress.

In chapter III, the proposed methodology of this study is laid out. Using qualitative phenomenology, the researcher will gather the lived experiences of ministry wives and analyze them for common themes. This chapter outlines how the proposed study will be conducted. Rationale is given for the selected research design along with who the participants will be, the process through which they will be recruited, data collection and analysis, and ethical considerations. The researcher also takes a moment to situate herself in the current study, explaining her connection to the experience of ministry wives.

Chapter IV lays out the findings from the interviews with the ministry wives. Following the research questions posed earlier, this chapter shares the general experiences of ministry wives, stressors that they identified, experiences of burnout and resilience, and their perceptions of wellness. Findings are presented using the participants own words to further understanding.

Finally, chapter V summarizes the findings. Discussion about how they connect to the literature follows. Implications of what this could mean within the counseling field and the
church are then considered, as well as possibilities for future research. This chapter concludes with the researcher’s reflection on the study.
CHAPTER II
LITERATURE REVIEW

The intent of this study is to explore how ministry wives experience role stressors and how that impacts their perceived wellness. Research has looked at the personalities/typologies of ministry wives (Douglas, 1961; Kinnon, 2001), identified unique stressors (Frame & Shehan, 1994; Lee, 2007; Luedtke & Sneed, 2018; Smith, 2006), and some coping strategies utilized (Baker & Scott, 1992; McMinn et al., 2008). Although these have been helpful insights, there has been little attention given to the impact of those stressors on wellness or the possible path to burnout. Two recent studies note the common existence of burnout for ministry wives, but this is not the focus (Lifeway Research, 2017; Luedtke & Sneed, 2018). There is a paucity of knowledge about how the unique stressors affect ministry wives’ perceived wellness.

The following review will provide a synopsis of the current literature that addresses stress theory, the unique challenges of ministry life, resilience and burnout, and the concept of wellness. Stress research sets the context for how individuals experience stressors. Looking at how stressors have impacted ministers will offer a background for understanding the stressors of ministry wives. Next the concepts of resilience and burnout will be explored as mediators of stress outcomes that directly affect perceptions of wellness.

This review will provide a context for why ministers and their wives may be at increased risk of stressors impacting perceptions of wellness. In pulling these concepts together, while applying them to the life of the ministry wife, the necessity to explore ministry wives’ personal experiences of stressors and their perceptions of wellness is illuminated.

**Stress Theory**

As previously mentioned in Chapter 1, in the U.S., over 70% of people report experiencing physical and psychological symptoms related to stress (Statistic Brain Research
Institute, 2020). Efforts to understand what stress is and how an individual is affected by and responds to it, have been underway for more than a century. The roots of stress theory came from psychobiology, sociology, psychiatry, and anthropology (Weber, 2011). With multiple disciplines looking at the same phenomenon, it has been difficult to nail down a definition, with possible meaning “as a physical stimulus, a bodily response, a psychological stimulus or response, or a physiological or psychological interactive process between a person and a changed situation in his physical or psychosocial environment” (Caplan, 1990, p. 30).

Early on it was believed to be a nonspecific response that the body had when a demand was placed upon it, regardless of whether the situation faced was pleasant or unpleasant (Selye, 1973). Both required readjustment and adaptation. Selye (1973) labeled this defense of the body as *General Adaptation Syndrome* (GAS). Through his research and that of others, connections were made between the experience of stress and the onset of illness (Rahe et al., 1964; Selye, 1973). When stressors showed up, they evoked changes in the functionality of “bodily tissues, organs, and systems” (Rahe et al., 1964, p. 42). In this way, stress was believed to decrease the body’s resistance to disease. It had a physical effect on the individual. Over time, some began to see limitations in this kind of thinking, suggesting that “stress is not a happening; instead, it is a complex, varied, and intellectually challenging process” (Pearlin et al., 1981, p. 352). It was no longer simply viewed as an automatic physiological response that triggered emotional reactions. There was believed to be a cognitive piece, known as appraisal, that might mediate the felt intensity of a stressor. Lazarus (1974) proposed that *cognitive appraisal* was utilized by an individual to evaluate the significance of an environmental stimulus, thus deciding the intensity of the experience, and influencing the impact and response. Therefore, the nonspecific responses toward stress found in GAS were seen to be more nuanced and complex. Other studies have
supported this finding that the perception of stressors affects the presence and severity of physical and psychological symptoms (Kokkinos, 2007; Pedrelli et al., 2008).

Considering this understanding of stress, the stress process has been conceived as having four parts: "(a) a causal external or internal agent; (b) an evaluation that distinguishes what is threatening or noxious from what is benign; (c) coping processes used by the mind (or body) to deal with stressful demands; and (d) a complex pattern of effects on mind and body, often referred to as the stress reaction" (Lazarus, 1993, p. 4). This process highlights the components this research is interested in for ministry wives: stressors they experience, their perception of those, possible coping employed, and the subsequent impact of successful coping (resilience) or ineffective coping (burnout) on their perceived wellness.

When discussing the experience of stress in ministerial roles, it is important to note the structure of social institutions and roles within them. Pearlin (1989) indicated that roles were carried out over time, which allowed for experiences of conditions and expectations to be repeated. Repetition of problematic experiences would have resulted in stress. Additionally, all roles were part of a larger role set with interpersonal relationships occurring. These role sets were significant to those involved, which created space for stress when the relationships were problematic or filled with conflict. Ministers and ministry wives are part of a large role set within the church that includes them, other leaders, and the congregation. To better understand the stress that might rise from this ongoing role and how it impacts ministry wives, literature looking at both will be reviewed.

 Ministers

To create context for the role of ministry wife, it is imperative that one understands the role and life of the one she is married to. More research has been conducted looking at ministers’ experiences of stressors than that of the spouse. This section of the paper will focus on how
ministry affects the minister directly, which will give the reader necessary context for the ministry wife’s role in the church and family.

Ministry falls under the umbrella of the helping professions, which have been found to have high levels of stress and prevalence of burnout when coping resources are inadequate (Maslach et al., 2001). The ministerial role is distinct from other helping professions, however, as it comes with unique stressors and expectations. Daniel and Rogers (1981) noted that the responsibility for another’s wellbeing was a primary source of strain for those in the helping professions. Ministers felt a heavy burden of responsibility for the souls of an entire church, which increased the risk of burnout. Isolation was a common factor for many ministers who felt that they had no one to confide in about such stress, leaving them to cope with it alone (Gleason, 1977; Hatcher & Underwood, 1990; McMinn et al., 2005). Nearly half of the respondents to one study “agreed that pastoring had been difficult on their families, and this was one important reason reported by clergy for leaving the ministry” (Lee & Iverson-Gilbert, 2003, p. 249).

Research has identified many stressors effecting ministers, some of which included role conflicts, boundary ambiguity, unrealistic expectations, financial pressures, lack of tangible results, low self-esteem, and time demands (Barnard & Curry, 2011; Gleason, 1977; Grosch & Olsen, 2000; Hatcher & Underwood, 1990; Lee & Iverson-Gilbert, 2003; Morris & Blanton, 1994b). The combination of these stressors and a high involvement with people “makes ministry a high-stress vocation” (Hatcher & Underwood, 1990, p. 187).

An abundance of research has been conducted looking at the stressors of ministry and in turn how those impact the minister. Early in the study of stress and ministers, John Gleason (1977) endeavored to identify how stress was perceived by both ministers and their wives. He compiled 43 scaled items that could possibly be stressors. These were categorized as being either (a) church-related, (b) family/personal related, or (c) an unclear source. He administered the
questionnaire to 21 clergy and 11 spouses that represented several protestant denominations, which he does not specifically identify. This resulted in a rated list of what ministers and their wives considered least stressful to most stressful. There were 8 items in the top 14 that both held in common. These included proliferation of activities, perfectionism, role conflicts, unwelcome surprises, “goldfish bowl” existence, no visible/tangible results of work, pathology of parishioners, and inferiority feelings (Gleason, 1977, p. 250). Although this study gave a picture of what was most stressful for ministers, it used a small sample. As research continued, the confirmation of these stressors, identification of more, and an understanding of their impact grew the literature base.

Recognizing the effect of such stressors on ministers, Daniel and Rogers (1981) were the first to look at the concept of burnout in the pastorate through a review of burnout literature. Succinctly, burnout occurs when resources are used up for coping with stressors (Maslach et al., 2001). Daniel and Rogers (1981) noted the lack of studies done to date and the need for the formation of preventative treatments for this population. They found that the average stay at a church was only 2 years. Research at the time indicated that 1/3 of all pastors thought about leaving what they believed would be a lifelong calling and 3 out of 4 ministers reported the experience of depression, anguish, anger, fear, and alienation due to the stress. They highlighted that there were certain mitigating factors in the literature to prevent burnout that were absent in the ministry, including:

(a) on the individual level: being aware of one’s own limits, awareness of one’s motivation for entering a particular vocation, a separation between work and home; (b) on a training level: inservice training or training as part of a graduate program to help one deal with interpersonal stress and interpersonal relationships, providing students with realistic goals of what can be accomplished when they enter the field, and training to
understand one’s own process; (c) on an organizational level: group meetings of peers on a regular basis for support and advice, both on the job and off job support systems, team approaches to help diffuse responsibility and allow a person time off, limiting the number of hours a person can work, and providing adequate vacations and training experience. (p. 244)

The description of people-helpers under stress was found to parallel that of ministers. “The ministry is a vocation where a person must be all things to all people. There is never any time when ministers are free from their duties” (Daniel & Rogers, 1981, p. 244). This parallel has been consistently made through the years with other researchers noting that ministry would fit within the helping profession category (Holaday et al., 2001; Jackson-Jordan, 2013; Randall, 2013; Adams et al., 2017).

**Helping Profession**

Holaday et al. (2001) engaged the idea that ministers often function in a pastoral counseling role, thus situating them as a helping professional. A review of the literature showed that 4 out of 10 people who were experiencing mental health issues went to their minister before seeking help from a mental health professional. Therefore, ministers were vulnerable to the same issues many mental health workers experience of burnout, vicarious traumatization, and secondary stress. The difference was that most mental health educational programs addressed this common phenomenon, whereas seminaries and training for ministers did not. There were 35 participants in this study who provided counseling as part of their religious duty. Five were women and several denominations were represented including Methodist, Southern Baptist, Presbyterian, Episcopal, Assembly of God, Church of the Latter-Day Saints, Church of Christ, Campus Crusade for Christ, Lutheran, Pentecostal, Church of God in Christ, and non-denominational. Interestingly, 5 participants reported having no training in religion or
counseling, and 12 stated that they had no supervision when they first started seeing people. They were individually interviewed using a semi-structured format, as well as given 2 questionnaires: the MBI-HS and the Traumatic Stress Institute Belief Scale Form L (Belief Scale). Through these interviews, the researchers learned of the most common issues presented by church members (e.g., marital issues, physical health problems, parenting issues, etc.) as well as the issues that were most difficult for ministers to hear about (e.g., abuse, trauma, death, psychiatric issues, etc.). The MBI-HS found most ministers (57%) with moderate to high emotional exhaustion scores, some (35%) with moderate to high depersonalization scores, and most (97%) with moderate to high scores for personal accomplishment. The Belief Scale, which looked at disruptive cognitive schemas in five psychological areas, was found to correlate with certain dimensions of the MBI-HS. Emotional exhaustion was found to correlate with trusting self and others, as well as fearing judgment from others leading to difficulty with intimate relationships. They also found that a minister’s ability to depersonalize from parishioners seemed to improve their ability to feel positively about their personal accomplishments. Interestingly, the researchers noted that there was a contradiction between how the participants described their experience of the burden of stress from working with traumatized people and their reporting of how these symptoms affected them on the tests. They theorized that this was due to the less threatening feel of an interview over a normative assessment. Perhaps the ministers were reluctant to be fully honest on the tests, due to fear of comparison and social role expectations. In the end, most of the ministers in this study indicated that they desired more training and education for building the skills necessary to do basic counseling with their parishioners and for knowing when to refer to a mental health professional.

In 2017, Adams et al. directly compared clergy burnout with that of multiple other helping professions. They reviewed burnout studies conducted with both clergy and
professionals such as counselors, social workers, teachers, emergency personnel and police officers. They expected clergy to have above-average burnout scores due to the unique stressors of their job. Contrasting the MBI scores from these studies, however, they found that clergy burnout rates are comparable to that of other helping professions. Emotional Exhaustion appears to be most similar to social workers, counselors, and emergency personnel. Depersonalization was found to be higher for clergy than social workers or counselors, but lower than emergency personnel and police officers. The final subscale of burnout, Personal Accomplishment, seemed to reflect that clergy experience less than counselors, similar levels as social workers and teachers, and more than emergency personnel and police officers. The authors were concerned, however, that use of the MBI to accurately assess for clergy burnout might not have been the most helpful. As previously mentioned, there were unique stressors and variables for clergy compared to other helping professions.

Francis Burnout Inventory

Years before this comparison study, using a clergy specific instrument for assessing burnout was a focus for Francis et al. (2011). The Francis Burnout Inventory (FBI) challenged the three-prong concept of the MBI. Engaging the concept of balance of affect, the FBI is made of two constructs: The Scale of Emotional Exhaustion in Ministry (SEEM) which represents negative affect and the Satisfaction in Ministry Scale (SIMS) which represents positive affect. After administering these scales to 744 ministers in The Presbyterian Church, they found that 72% of ministers reported experiencing burnout, even as over 80% still reported feeling positive about their role, the work they are doing, and are glad that they entered the ministry. This finding was significant as it revealed the ability for positive affect of satisfaction in ministry to mask the negative affect of emotional exhaustion that may also be occurring. This created space for psychological and physical issues to arise, confirming the need for more attention on educating
ministers about burnout. Francis et al. (2011) noted limitations of the study and the need for further research using diverse populations and independent constructs of comparison to test reliability and validity.

In the years following, multiple studies were conducted to establish the reliability and validity of the FBI (Francis et al., 2017; Francis et al., 2019; Randall, 2013). Randall (2013) compared the FBI with the MBI that was adapted for use with ministers, administering it to Anglican clergy in England and Wales. Using Eysenck’s Personality Questionnaire, Randall found that both the FBI and MBI mapped onto it the same. Confirmation of the positive affect masking the negative, as previously reported, was also found. Taking it a step further, this study revealed that over time, however, even the positive affect does not keep the negative effects of burnout from occurring. Later studies used independent scales of psychological wellbeing alongside the FBI to establish validity. Francis, et al. (2017) administered the Purpose in Life Scale (PILS) and the FBI to Roman Catholic priests in Italy. Likewise, in 2019, Francis et al. administered the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) with the FBI to Anglican clergy in the Church of England. Both studies found that the positive affect of satisfaction in ministry mitigated the negative affect of emotional exhaustion and therefore increased well-being. All these studies reported construct validity for the FBI and identified it as a valid instrument to use when studying burnout in ministry.

**Unique Variables**

Recognizing the need for a specific burnout instrument like the FBI came from the understanding of the unique experience of ministers and their needs. Over the years there were some who felt the need to expand beyond looking simply at the stressors and manifestation of burnout. They were interested in how stressors in this unique role were impacted by the variables of personality, relationships, resources, and perceptions (Barnard & Curry, 2011; Grosch &
Influence of Personality

In 1990, Hatcher and Underwood, were interested in researching the interaction between personality traits, self-concept, and life changes for ministers. They believed that the “heavy involvement with people, combined with high, often unrealistic expectations of both clergy and laity, family demands, financial pressures, and ordinary demands of life, makes ministry a high-stress vocation” (Hatcher & Underwood, 1990, p. 187). There were three instruments used in this study: The State-Trait Anxiety Inventory (STAI), form Y; The Tennessee Self-Concept Scale (TSCS); and the Clergy Life Changes Rating Scale (CLCRS). These instruments along with a questionnaire for gathering demographic and coping strategies information were given to Southern Baptist Ministers at regional conferences, with a final total of 103 participants. Results found that ministers with lower self-esteem tended to have higher trait anxiety (proneness to anxiety) and in turn state anxiety with poor coping skills. From the TSCS, subscales of moral-ethical scores and self-criticism scores were focused on. Ministers who had lower moral-ethical scores were found to have higher trait anxiety as they struggled with whether they were following the will of God or had a good relationship with Him. Those with higher self-criticism scores also had higher trait anxiety scores. Hatcher and Underwood (1990) concluded that an emphasis on building healthy biblical self-concepts and coping skills during seminary training could begin to build resilience for the stress of ministry.

Grosch and Olsen (2000) also recognized the significant influence of personality and self-concept on ministerial burnout rates. After surveying the current literature on clergy and burnout, however, they found that most were categorized into one of two schools of thought. First, was the internal issue connected to a person’s personality and self-concept, but second was the
external issues stemming from outside systems and their lack of support. Considering this, these researchers strove to use the self-psychology of Kohut and the general systems theory of Bowen to reveal the interplay between both internal and external factors on clergy burnout. They listed examples of systemic problems being that the minister worked too much, had too little support, rigid work schedules, difficult parishioners, were “on-call” 24/7, excessive bureaucracy to deal with, and often unhelpful/irrelevant denominational structures. Internal problems were identified as ministers often being idealists, perfectionists, compulsive, suffering from narcissistic disturbance, low self-esteem, childhood difficulties in development, and type A’s. Using two case studies, they outlined what burnout in ministry might look like with many of these systemic and internal issues weaved throughout the ministers’ stories. Grosch and Olsen (2000) believed that burnout was best prevented by “helping clergy understand their needs for validation, as well as their levels of differentiation in the context of their environment” (p. 625). Digging into their family-of-origin, ministers could see how they played out past needs and experiences in their current roles. This process should lead to increased differentiation of self, an important aspect of Bowen’s systems theory, to become less reactive to anxiety and stress. Once this had occurred and healthier boundaries were in place, the difficult work of being vulnerable came next. One needed to reconcile the experience of working less, once over functioning had decreased, with still feeling the need for validation and proving oneself.

Broadening the understanding of personality influence on burnout for ministers, Barnard and Curry (2011) hypothesized that burnout variation could be predicted by the 4 personality dimensions of a desire to please others, proneness to guilt or shame, ability to practice self-compassion, and differentiation of self from ministerial role. Sixty-nine United Methodist Church ministers were administered the FBI, Desire to Please Others (DPO), Test of Self-Conscious Affect-3 (TOSCA-3), Self-Compassion Scale (SCS), and Differentiation of Self from
Role – clergy version (DSRC). Overall, they found that ministerial burnout was correlated with the personality dimensions, most significantly self-compassion. Ministers who scored “higher in self-compassion experienced higher levels of satisfaction in ministry and lower levels of emotional exhaustion in ministry” (Barnard & Curry, 2011, p. 159). Collectively Barnard and Curry (2011) and Hatcher and Underwood (1990) hoped to build the resilience they saw in some ministers by calling for better training and education at the seminary level to increase ministers’ understanding of how personality interacts with their ministerial role. They also recommended training to increase an understanding of a Biblical self-concept and self-compassion. Grosch and Olsen (2000) advocated for ministers to participate in counseling to explore their families of origin and process the interplay between internal and external issues.

**Relational Impact**

Another variable of interest was that of relationships. Morris and Blanton (1994b) attempted to broaden the view of stressors across multiple dimensions. They were interested in how the work-related stressors of the ministry affected marital, parental, and global life satisfaction. A random sample of ordained male ministers and their non-clergy spouses participated from 6 denominations: Southern Baptist, Lutheran, Church of God, Seventh-Day Adventist, American Baptist, and Episcopal. There were 136 couples (n = 272). Participants were given 5 instruments to complete. The Kansas Marital Satisfaction Scale (KMSS), the Clergy Family Life Inventory (CFLI), Edmonds Marital Conventionalization Scale (EMCS), The Parental Satisfaction Scale (PSS), and the Life Satisfaction Scale (LSS). This research offered insight into how intrusiveness of church members affected both marital and parental satisfaction negatively, as there was undue pressure added to these relationships to be exemplars of piety. Spouses were found to struggle with time demands in relation to parental and life satisfaction. Both partners revealed stress due to lack of social support which affected life satisfaction. In the
end, Morris and Blanton (1994b) suggested that more support services should be in place at the congregational and denominational level, such as prevention and educational programs and seminars for ministry couples that focus on marital, parental, stress, and life-span issues.

**Resources and Perceptions**

For years the emphasis in studies about ministers was on the stressors that they experienced, as previously discussed. In 2003, Lee and Iverson-Gilbert, published a study that attempted to look beyond just the causes of ministerial stress, but also at the effects of both resources and personal perception on the experience of burnout. Through an ecological view they recognized that the dynamics of ministry and clergy family life needed to be understood in the context of the local congregation. They also used the concept of Hills family stress theory, utilizing the ABC-X model to look at the interplay between stressors, resources, and perceptions. To accomplish this, they used 5 instruments to gather information from 282 ministers from 5 protestant denominations: The American Baptist Church of the USA, Assemblies of God, the Episcopal Church, the Evangelical Free Church, and the Presbyterian Church of the USA. These instruments included the Ministry Demands Inventory (MDI), the Social Support Questionnaire (SSQ), the Family Member Well-being Index (FMWI), the Satisfaction with Life Scale (SWLS), and the Kansas Marital Satisfaction Scale (KMSS). Lee and Iverson-Gilbert (2003) confirmed that the stress that accompanied a more demanding congregation lowered the minister’s well-being and life satisfaction and increased burnout. This was expected. However, they also found that the perception of such demands and resources that were available played a more significant role in burnout than the demands themselves. The meaning that ministers gave to criticism and congregational expectations impacted their well-being and sense of satisfaction. The authors suggested that instead of focusing on the removal of stressors, which would have been impossible to fully do, “a more helpful strategy might be to teach clergy how to anticipate
criticism, understand what it means personally and professionally, and respond constructively” (Lee & Iverson-Gilbert, 2003, p. 255). Likewise, the aspect of resources, which includes social support, was found to be significant. Having and feeling satisfied about more supportive relationships in the congregation correlated with a more positive attitude. Again, an emphasis on helping ministers to anticipate the kind of support they may have wanted or needed and amending their philosophy to include the intentional development of supportive congregational relationships could be more meaningful than dealing only with stressors.

In 2007, Lee again focused on stress and resources, but this time in the context of the ministerial family. He observed that “personal criticism within a congregation is particularly detrimental to pastors” (p. 762), as well as the demands that are placed on them. He noted the latter as a reason for leaving indicated by most participants in a study of ministers who had left the ministry. Once again, he employed the ABC-X model of family stress but wanted to include the spouses of ministers in his research. 147 couples (n=294) of ministers ordained in the Pacific Union Conference of the 7th Day Adventist Church participated in the study. Four instruments were used including the Ministry Demands Inventory (MDI), The Family Member Wellbeing Index (FMWI), The Satisfaction with Life Scale (SWLS), and the Dyadic Adjustment Scale (DAS-7). Lee (2007) also measured social support across the 4 domains of family, congregation, friends outside congregation, and denomination. He found that all the major study variables had significant positive correlations between spouses, indicating that wives were involved in the ministry, and both had similar perceptions and responses to it. One difference was that ministers rated the impact of expectations placed on them by the congregation as more severe than their wives. Overall, however, the impact of demands was found to affect well-being negatively for both spouses. This study was narrow using only a subset of married ministers from one regional conference of one denomination. It was suggested
that a qualitative study may get a richer picture of supportive relationships and the utilization of those.

**Coping**

To continue moving beyond stressors and burnout, McMinn et al. (2005) shifted the focus to positive psychology and ministry. The capacity for ministers and their spouses to be resilient and endure such challenges and still cope and function in a healthy way was the core of their review. They organized this information in three categories: intrapersonal, family, and community. A review of 5 studies was completed that looked at coping with sexual attraction, exemplar pastors, senior pastors, staying healthy, and interviews with ministers and their wives. What the authors found were healthy coping strategies that fit into the three categories.

Intrapersonal care encompassed the majority of how ministers coped with stress. They tended to do most coping on their own, whether it be exercising, taking time for themselves, spending time with God, or participating in a hobby. They suggested that many ministers may be reticent to seek out help through counseling due to this preference of managing things alone and in private. Family care was found significant in marriages. A strong marriage was mentioned as vital for most ministers to handle the stress of ministry. It was noted that with the experience of isolation that so many ministers had, their spouse may have been the only intimate support that they could be honest and real with. This could be troublesome if marital issues arose, or their spouse became burned out herself. It may be imperative that ministers find support outside of their marriage. With this said, when the authors looked at community care, they found a significant lack of relationships with anyone outside of the minister’s family. A few times ministers mentioned group connections with either other local pastors or denominational supervisors. Both were found to come with pressures, however, that could inhibit real support. Many ministers felt
subtle competition and comparison with other ministers and denominational supports also came with evaluation and authoritative hierarchy.

In more recent years, several researchers have continued to focus on the positive aspects of coping and healthy functioning (Abernathy et al., 2016; Case et al., 2019; Francis et al., 2015; Muse et al., 2016; Visker et al., 2017). Healthy strategies and positive coping skills have been found to enhance levels of satisfaction in ministry and decrease burnout levels. Intentionality about health and well-being, positive reframing of issues, establishing healthy boundaries between work and other life domains, taking a study leave for conferences and trainings, having a ministry mentor, and emphasizing process over outcome were some of the significant coping strategies identified (Case et al., 2019; Francis et al., 2015; Visker et al., 2017).

**Support Programming**

Structured programs have also been developed as supports to help prevent burnout among ministers. Abernathy et al. (2016) looked at a program created by a team from Fuller Theological Seminary called the Pastors Empowerment Project (PEP). Shortly after hurricane Katrina struck in 2005, PEP was created to promote “resilience for clergy and other ministry professionals” (p. 176) in the face of a disaster. The current study discussed the possibility of using it in other demanding ministry contexts or aftermath of trauma. PEP was a 3-year program that consisted of annual retreats, each 3 days long. The retreats came in 3 phases: self-care, resilience, and cultivating relationships. They were structured with didactic teaching, small group discussion, and spiritual practice. The case study participants expressed a deepened connection with each other and other pastors and their spouses due to attending the program, as well as a deeper understanding of the effects of “stress, trauma, burnout, and importance of making a commitment to self-care” (p. 184).
Another program created to help ministers with stress was known as “Clergy in Kairos”. Muse et al. (2016) set out to assess this intervention. It was a multi-therapist, personalized week of intense outpatient treatment. Using the Beck Depression Inventory and the MBI, participants were identified as having moderate to severe depression scores and elevated burnout scores. The control group did not receive the intervention, while the treatment group went through the weeklong intensive. Both groups were pre-tested for depression and burnout and then post-tested 6 months after. The treatment group’s depression scores had significantly decreased while the burnout scores significantly improved. The control group maintained the same levels of depression and burnout when tested 6 months later. The efficacy of such programs is highlighted here, however, this model would need to be repeated across regions and available to a multitude of ministers.

Summary of Ministers and Stress

The research is clear, ministers experience a myriad of stressful variables (Adams et al., 2017; Daniel & Rogers, 1981; Gleason, 1977; McMinn et al., 2005; Morris & Blanton, 1994a). Some positive coping strategies and programs (Abernathy et al., 2016; Case et al., 2019; Muse et al., 2016) as well as frequent burnout (Francis et al., 2015; Grosch & Olsen, 2000; Jackson-Jordan, 2003) were also discussed. As minister is a career position which entails all the unique stressors discussed previously, it tracks that they would be at risk for high rates of burnout if resources were depleted. Alongside of ministers, however, are often their spouses who frequently carry a large ministry burden themselves due to the unique expectations of ministry families and their role in the church.

Ministry Wives

To understand the direct connection that ministry wives have to their husbands’ ministries, it is important to look at the concept of the two-person career. Taylor and Hartley
(1975) engaged in this idea that Papanek had begun in 1973. They looked at the ministry and how it mapped onto her model as a prime example. “Only the husband is employed, but the wife’s contributions are informally required” (Taylor & Hartley, 1975, p. 354). A questionnaire was given to 448 ministry wives from 6 denominations including the American Baptist Church, Disciples of Christ, the Lutheran Church of America, the Protestant Episcopal Church, the United Methodist Church, and the United Presbyterian Church. They found that 42% of respondents participated in 10-33 hours of church-related activities a week, with 35% actively engaging in 4-9 hours. When asked how many of these activities they would likely participate in if they were not in the role of ministry wife, only 18% marked that they would do all of them. This indicated that for “over four-fifths of the sample at least some of their activities could be attributed to the role expectations of the two-person career” (Taylor & Hartley, 1975, p. 366). McMinn et al (2005) noted that it is not common for members of a family to be so intimately engaged in parental employment, yet this is expected of ministry families.

Many others over the years have highlighted the unique situation that ministry families find themselves in. Ministry wives experience both common life stressors as well as vulnerability to stress created by the “unique interface between the family and church systems” (Frame & Shehan, 1994, p. 197). They are expected to be involved in every facet of church life (Hileman, 2008). In a comparison of ministry wives and non-ministry wives, Morris and Blanton (1994b) found that the life satisfaction of ministry wives was affected most directly by their husband’s ministerial demands and if they were supported by the congregation to develop their own identity. Differentiating oneself from the ministry of your spouse can be difficult. One ministry wife spoke to this when she said, “Always being treated as ‘a minister’s wife’ rather than as Mary Jones…can be downright disturbing. For one wants to be a person, and not just a personage” (Douglas, 1961, p. 10).
Therefore, the role of ministry wife comes with a full set of unique stressors, expectations, and experiences. It is a place of both privilege and emotional challenge (McMinn et al., 2005). Seventy-eight percent of ministry spouses reported some level of burnout with two-thirds marking that they had become more callous toward people (Lifeway Research, 2017). This review of the literature will explore common stressors experienced by ministry wives, unrealistic/unhealthy expectations, and difficult relational dynamics. It will also become evident that minimal research has been done that dives into how that experience of stress impacts perceptions of wellness for this population. This will lay the foundation for the desire to further understand the experience of ministry wives and how to support them.

**Stressors**

Research has identified many stressors that ministry wives experience as part of the ministerial family. Common ones included poorly defined boundaries/intrusiveness by the congregation, financial strain, frequent moves, pressure of expectations/ “fishbowl” experience, isolation/loneliness, loss of identity, and sharing spouse with the church (Baker, 1989; Frame & Shehan, 1994; Lifeway Research, 2017; McMinn et al., 2005; Roberts et al., 2006). This list could go on and on, but there are certain stressors that have come up repeatedly in the literature and will be emphasized in this review.

**Church Prioritized**

Fulfilling the role of ministry wife involves taking on an extra burden of expectations beyond that of a nonclergy wife. Baker and Scott (1992) highlighted the role conflict experienced by many women who were both working outside of the home in their own careers as well as continuing to be the primary caretaker for the home and children. They noted that the ministry wife also had to add in the expectations that are related to her husband’s career. However, these expectations were often ill-defined and inconsistent between churches resulting
in role ambiguity. Nonetheless, the expectation that the church would be a priority was keenly felt.

Although over time the number of women in the workforce has increased, there has been little change in the role of the ministry wife. Both Frame and Shehan (1994) and Hileman (2008) listed similar expectations 14 years apart. They stated that ministry wives were expected to attend all church events, actively participate in women’s ministry, teach Sunday School or Bible Study, join choir, visit church members, have exemplary behavior and children, and much more. While these activities and roles were optional, they often felt great pressure to fulfill them. Hileman (2008) noted that with decreasing volunteers, the ministry wife often filled the gaps and would “generally act as an unpaid assistant to the pastor” (p. 122).

Ministry wives are often expected to sacrifice their own needs for that of the congregation. This includes sharing their husbands’ time and attention, making it difficult to create family plans which are often interrupted (Baker, 1989; Frame & Shehan, 1994). Morris and Blanton (1994b) found that one of the top stressors affecting ministry wives’ life satisfaction was time demands from the congregation on their family.

**Loss of Identity**

Amid the many expectations that are placed on the ministry wife, “standards of personal comportment” is a heavy burden to bear (Frame & Shehan, 1994, p. 197). Multiple articles noted that there are inappropriate demands placed on ministry wives (Baker & Scott, 1992; Lee, 2007; Smith, 2006; Staton, 2003). The high expectations have urged ministry wives to act as exemplary wives, mothers, and leaders in the faith. One counselor of ministry families reported that about 85% of ministry wives had shared that they felt the pressure of needing to have perfect marriages (Smith, 2006). It often felt as though the church community was constantly watching and evaluating their lives creating a sense of living in a fishbowl. This experience brought with it
“feelings of loss of control over their living space, time management, and personal identities” (Baker & Scott, 1992, p. 34).

Staton (2003) wrote about her own experience as a ministry wife, stating “I feared being pressed into a mold that didn’t fit. I wanted life and liveliness in the Lord. How could I have that if these rigid requirements were forced upon me?” (Staton, 2003, p.85). Stereotypes persisted even though many contemporary ministry wives were likely to have their own professional careers. They adapted over time to fit the conventional role that the church expected (Lee, 2007). Giving of themselves so fully to the church was perceived as emotionally draining and resulting in a loss of idealism (Baker, 1989).

**Loneliness**

Considering such experiences, a counselor in Texas reported an increasing number of calls coming in from ministry wives who felt “trapped and alone” (Hileman, 2008, p. 124). In 1997, Zoba, stated that the “number-one felt need” of the ministry wife was for interpersonal connection resulting from an “acute sense of loneliness” (p. 22). Years later, a magazine designed for ministry wives, *Just Between Us*, conducted a poll of its readers. Loneliness continued to be identified as the top problem that ministry wives struggled with. “Three-fourths want a close friend other than their husband, and 53 percent feel isolated” (*Just Between Us*, 2005, p. 9). This experience was a common one.

This phenomenon of isolation was directly related to the unique role of being the minister’s wife. Having friends outside of the family was not common for a couple of reasons. Congregation members may have avoided friendships with ministry wives because they were married to a minister (McMinn et al., 2005). Also, members of ministry families were often treated differently, making it difficult to be vulnerable with those inside the church body. Self-disclosure of feelings, marital issues, or struggles with the church could be seen as possibly
dangerous for their husband’s job (Hileman, 2008; McMinn et al., 2005; McMinn et al., 2008). Fifty to seventy percent of ministry wives reported several relationship issues. They had few people to confide in, didn’t feel free to be themselves, had confidence betrayed by others in the church, still felt hurt by previous conflicts, experienced personal attacks, and felt their problems would become gossip if shared (Lifeway Research, 2017). It is notable that age made a difference here. The younger participants were found to have more challenges, conflicts, and feelings of not being able to be themselves. As these are the women who are the future of the ministry wife role, it is crucial that their experience is well researched and explored.

Relational

Considering the isolation and loneliness felt by ministry wives, it was suggested that marital problems may be more problematic for ministry couples due to their lack of supportive outside intimate relationships (McMinn et al., 2005). McMinn (2005) also cited a study that showed that “pastoral couples experienced significantly poorer marital adjustment than non-pastoral couples, and a significantly higher level of loneliness” (p. 564). Marital strain was commonly felt in ministry as time demands on the husband were frequently unrealistic, while the wife experiences pressure to maintain the image of a happy spouse and home even though often feeling neglected (Morris & Blanton, 1998).

Coping

With the myriad of stressors identified as well as those not focused on in this review, it is no wonder that about 60% of ministry wives reported feeling physically exhausted, with some describing feelings of depression, anger, and emotional burnout (Just Between Us, 2005). Yet, even in the face of these stressors and difficulties, a few studies have shown the resilience of some ministry wives who had higher levels of well-being and felt positively about their role in the church (Baker & Scott, 1992; Hileman, 2008; McMinn et al., 2008). Baker and Scott (1992)
compared the well-being scores of ministry wives versus non-ministry wives. They found that ministry wives reported higher levels of well-being overall. Possible reasons were cited as feeling called to ministry by God and reporting higher levels of education with more prestigious jobs outside of the home.

Coping strategies have been of interest periodically, considering this paradox of heavy burden while still feeling positively about the role of ministry wife. McMinn et al. (2008) found that limit-setting coping skills were beneficial in protecting ministry families with over three-fourths of their participants talking about the need to set “clear limits with their time, personal choices, and family commitments” (p. 452). Though there are many studies on the coping of ministers themselves, few look at ministry wives. Two studies looked at programs created specifically to support the ministry wife.

The first study was in 1989, when Baker invited ministry wives to participate in 4 weekly group sessions of peer support. These sessions were focused on social networks and emotional well-being. A comparison group of women who were unable to participate in the sessions also completed the measures of the study. Both groups took pre- and post-tests, as well as a 3-month follow-up. Results showed that those in the treatment group had improved scores of well-being after the program. One of the biggest findings was that the women decided to meet monthly on their own after the pilot program was done. Baker (1989) concluded that “peer social support across denominations seems to make a significant contribution to the well-being of ministers’ wives” (p. 24).

The second program was the Clergy Wife Wings (CWW) psychoeducation group created by Polly S. Roberts. Roberts et al. (2006) evaluated this program that was focused on alleviating stress related to the role of ministry wife. CWW consisted of 5 weekly group meetings lasting 2 hours that imparted knowledge and practical application of stress relief and management
strategies and techniques. The goal was to decrease stress related to role expectations/time demands, boundary intrusiveness, and lack of social support. Using both formal stress assessment tools and informal self-reporting stress scales, Roberts et al. found that the participants reported it was effective. There were some revisions suggested for the format and structure of the group moving forward, but overall results suggested that connecting with other ministry wives in a group and sharing experiences was significantly beneficial.

**Summary of Ministry Wives Research**

Historically, ministry wives have wrestled with managing the unique experience of expectations placed on them by their husband’s place of employment. In 1961, Douglas noted the frustration felt by ministry wives due to the “demands and denials placed on them by church and community” (p. 14). This has only continued through the years as studies have consistently outlined a unique set of expectations and stressors on ministry wives (Baker, 1989; Frame & Shehan, 1994; Hileman, 2008). A recent study by Luedtke and Sneed (2018) confirmed the findings on both stressors and coping thus far presented in the literature. The idea that the role of ministry wife is both complicated and rewarding was highlighted. They found that their participants experienced the common stressors of high expectations, loss of identity, loneliness, financial stress, and sacrifice of time. They also found that faith in God, commitment to their calling, and social support were factors that helped to decrease stress levels and increase resilience. These coping strategies are helpful when ministry wives can use them, but the load of stress is immense. Eighty-five percent of ministry spouses reported moderate to extreme stress as their “typical day” (Lifeway Research, 2017).

All these studies paint a picture of an ongoing problem. Ministry wives are at a greater risk of struggling with loneliness, burnout, and marital dissatisfaction which effects their mental health and wellness (Baker, 1989; Baker & Scott, 1992). Some coping mechanisms have been
identified to mitigate the effects, but the fact that the research continues to show the same results of ministry wives struggling under these high expectations, reveals the need for further research. Perhaps by better understanding the experiences of how these stressors functionally impact ministry wives, new opportunities for supporting and working with this population will emerge.

**Coping Outcomes**

To understand the impact of stressors on ministry wives, we need to look for a moment at the literature that discusses how people experience and respond to stress. Holmes and Rahe (1967) noted a common theme of need to adapt and attempt to cope with life events, regardless of whether they were seen as positive or negative. Coping is the actions people employ in an attempt to decrease the effects of life problems that they encounter (Pearlin, 1989). Chronic stress can lead to severe health problems or developing maladaptive symptoms and behaviors, yet some people seem capable of managing and coping with higher levels of stress than others (Haglund et al., 2007; Steensma et al., 2007). These two outcomes can be conceptualized as burnout/psychopathology or resilience. For the purposes of this study, the concepts of resilience and burnout will be discussed.

**Resilience**

As with many concepts, the understanding of resilience has broadened over time. Historically, research looked at identifying the supportive factors and variables that were present for those who exhibited resilience. What protective forces characterized “healthy adaptation profiles from those who were comparatively less well adjusted” (Luthar et al., 2000, p. 544)? Within the last couple of decades, researchers have begun trying to understand how these factors contribute to possible positive outcomes. As understanding of resilience grew, it was also recognized as a dynamic, rather than fixed, process with multidimensional aspects of personality, environmental, and experiential influences (Luthar et al., 2000; Robertson & Cooper, 2013).
Research has also shifted in recognizing that resilience does not only occur when recovering from a stressful or traumatic event, but also as an ongoing maintenance of mental health and well-being when adversity comes (Robertson & Cooper, 2013). It is something that can be developed through the process of repeatedly managing adversity well (Caplan, 1990). Although there is no standard definition of resilience, many have similar things in common. Resilience is often defined as the ability to positively adapt to adversity which results in better outcomes compared to others in similar situations (Cicchetti, 2010; Kermott et al., 2019; Rutter, 2012).

There have been several factors, both internal and external, identified that seem to help people adapt in adverse situations. Internal factors stemming from personality include constructive thinking, hardiness, learned resourcefulness, hopefulness and optimism, high self-esteem and self-efficacy, and an internal locus of control (Lazarus, 1993; Steensma et al., 2007). Externally, social support has been found to be a significant buffer between an individual and stress (Haglund et al., 2007). Through a review of the research, Haglund and colleagues (2007) also identified and explored multiple attitudinal and behavioral factors that mitigated the effects of stress. Cognitive flexibility and reappraisal allowed individuals to reevaluate experiences and recognize the temporality of problems. Acceptance, which involved the ability to separate uncontrollable aspects of stressors from the controllable ones, allowed individuals to change their expectations about outcomes. Actively coping by facing fears, which decreases the likelihood of fear conditioning, improved functioning after an adverse event. Physical exercise was found to positively affect neurobiological factors that affect resilience. A final finding of Haglund et al. (2007) was that resilient individuals had a strong moral compass with religion and spirituality possibly effecting their physical and psychological wellness.

Research has found that those who exhibited higher levels of resilience also reported significant differences in experiences of stress and wellness with decreased mental health
problems and a perceived higher quality of life (Haglund et al., 2007; Kermott et al., 2019). The Connor-Davidson Resilience Scale (CD-RISC), the Linear Analogue Self-Assessment Scale (LASA), and the Perceived Stress Scale (PSS) were used to assess the impact of resilience on stress, wellbeing, and mental health in a sample of 1,954 executive or business professionals (Kermott et al., 2019). They found the rate of depression to be 4 times higher in those with lower resilience scores compared to those with higher resilience, and anxiety 3 times higher. Overall, the ability to develop resilience has been shown to depend on the intensity of experiences, support available, and inherent individual differences (Robertson & Cooper, 2013). The development and ability to be resilient has been found to directly affect the perceived wellness of an individual. When resilience is lacking, however, stress can have detrimental effects on an individual through the experience of burnout.

**Burnout**

The concept of burnout is not as abstract and unknown as it once was, with extensive research being done on the construct since the 1970s. For the purpose of this study, this review will offer a brief exploration of a working conceptualization of burnout. Freudenberger (1974) began asking questions about this phenomenon that he both personally experienced and observed in others at St. Mark’s Free Clinic in New York. He offered the first discussion of the definition of burnout, its symptoms, related behaviors, and preventative measures and treatment. The definition of burnout has evolved some over the years but continues to include certain pieces original to Freudenberger's work. He used the dictionary to define burnout as "to fail, wear out, or become exhausted by making excessive demands on energy, strength, or resources" (Freudenberger, 1974, p. 159). Burnout continued to be defined as an experience of decreased energy, motivation, and resources due to the overwhelming stress of a job or role, especially in
the case of little perceivable payout (Barnard & Curry, 2011; Maslach et al., 2001; Mutkins et al., 2011; Yu et al., 2015).

Maslach (1976) was also looking at the concept of burnout, independently but simultaneously, from Freudenberger. She interviewed people about emotional stress and coping strategies related to their jobs. Both authors' research was nestled within those who work or volunteer in the helping professions (e.g., free clinics, crisis intervention centers, human services, etc.). The notion of burnout has been increasingly studied since then and expanded beyond the helping professions into a variety of career and life roles. The bulk of research, however, continues to flow from the human services and helping profession fields. Freudenberger (1974) and Maslach (1976) both reported similar results. Burnout was found to affect physical well-being by manifesting as exhaustion, sleeplessness/insomnia, shortness of breath, lingering illnesses, the experience of migraines, and gastrointestinal issues. Freudenberger (1974) also noted difficulty with regulating emotions, paranoia, excessive rigidness, and negative expressions about work. Those exhibiting burnout tended to work too much, for too long, and too intensely, feeling the pressure of their own expectations along with the ever-demanding system in which they worked. Unique to Maslach’s (1976) findings were the concepts of depersonalization and dehumanization between the workers and their clients/patients. “They lose all concern, all emotional feeling, for the persons they work with and come to treat them in detached or even dehumanized ways” (Maslach, 1976, p. 16). She identified several ways this was accomplished including the use of derogatory and generalized collective language about clients (e.g. “the poor”, “my caseload”), using scientific or professional language to describe clients (e.g. “he is a coronary”), reframing situations as not personal, keeping a stark separation between work and personal life, restricting time spent with emotionally distressing patients/clients, following rules or protocols exactly as a scapegoat for appearing cold and
calculated, and making light of the situation with coworkers even when it is serious. Both Freudenberger (1974) and Maslach (1976) came to similar conclusions after all their research. They postulated that supports need to be intentionally put in place to mitigate the effects of burnout. Helpful strategies were identified like lowering client to personnel ratios, the ability to take a sanctioned “time-out” from repetitive responsibilities, fewer direct client hours, and the development of programs and support teams to discuss problems.

Through the rest of the late 1970s, burnout research was conducted in specific settings, narrowing down the experiences of certain professionals (i.e., childcare workers, lawyers, police officers). Both Freudenberger (1977) and Maslach and Pines (1977) drew attention to childcare workers and burnout. Freudenberger (1977) explored burnout in a setting of intake residences and group homes that took in youth from ages 12-18. Maslach and Pines (1977) gathered the experiences of staff from several daycare centers where the ratios of workers to children ranged from 1:4-1:12. Consistent with previous findings the workers in both types of settings were found to have higher levels of burnout when they had longer, more frequent direct contact with the children, along with negligible pay and little staff supports. They exhibited more negative feelings and attitudes toward the children and felt less connected to co-workers. The same conclusions from their previous research about how to mitigate burnout was cited again. Over the next couple of years, similar results were found when looking at Legal Services Lawyers and Police Officers (Maslach & Jackson, 1978; Maslach & Jackson, 1979).

By this point, the many characteristics of burnout were being identified, but there was not an efficient way to assess them (Maslach & Leiter, 2016). As research continued into the 1980s, a shift occurred leading to more empirically based research with a focus on this needed assessment. Questionnaires and surveys began to be used and assessment measures were developed. The most prominent scale created at the time and consistently most used from then
until now is the Maslach Burnout Inventory (MBI) (Barnard & Curry, 2011; Evans & Fischer, 1993; Maslach et al., 2001). The MBI is an instrument that looks at both the frequency and intensity of items. After they administered the 47-item preliminary assessment to 605 health and human service participants, Maslach & Jackson (1981) used factor analysis to narrow the 47 items down to 25. The modified version was administered to a new sample of 420 health and human service participants. Having similar results, the data from both were combined (n=1025) and used for their final analysis. This was the first scale developed and shaped a three-dimensional understanding of burnout (Maslach & Jackson, 1981). Maslach and Leiter (2016) summarized the three subscale factors that emerged from their research as (a) emotional exhaustion, also known as “wearing out, loss of energy, depletion, debilitation, and fatigue” (p. 103), (b) depersonalization, also known as “cynicism…negative or inappropriate attitudes towards clients, irritability, loss of idealism, and withdrawal” (p. 103), and (c) reduced personal accomplishment, also known as “inefficacy…reduced productivity or capability, low morale, and an inability to cope” (p. 103).

Since then, there have been other assessments developed both maintaining these three theoretical dimensions of burnout, as well as approaching burnout with different factors. The Bergen Burnout Inventory (BBI) continues using the three-dimensional approach (Salmela-Aro et al., 2011). The Oldenburg Burnout Inventory (OLBI) looks at only the two dimensions of exhaustion and disengagement from work (Halbesleben & Demerouti, 2005). Two more assessments are exhaustion specific, with the Shirom-Melamed Burnout Measure (SMBM) looking at physical, emotional, and cognitive exhaustion (Shirom & Melamed, 2006) and the Copenhagen Burnout Inventory (CBI) focusing on physical and psychological exhaustion (Kristensen et al., 2005).
The late 1980s into the 1990s saw the expansion of burnout research into other occupations beyond the helping professions, which led to a need for re-evaluating the dimensions that were more socially oriented. Although many adopted Maslach’s three dimensions of burnout as definitional for the phenomenon, there were some researchers that questioned its validity to accurately assess those not in human service occupations (Evans & Fischer, 1993; Garden, 1987). Garden (1987) and Evans and Fischer (1993) were both interested in whether the three original dimensions of burnout were appropriate for assessing non-human service workers. Garden (1987) gave a 210-item questionnaire on “stress” to 95 mid-career MBA students while Evans and Fischer (1993) administered the MBI to 228 participants who were private sector employees of a computer firm. Both studies found that the factor of depersonalization was not significantly indicated for non-human service workers. Thus, it was their conclusion that the 3-factor model of burnout, specifically the construct of depersonalization, does not generalize to non-human service professionals, but burnout does still occur.

Continuing to broaden the scope of understanding about the context of burnout, Alverson (1997) focused in on volunteers instead of paid workers. Over a decade later, volunteer burnout continued to be of interest, as Morgan (2009) suggested prevention strategies within a religious context. Alverson (1997) began by interviewing two women from differing sides of the volunteer process, a 65-year-old woman volunteer and Melanie Berte, the project coordinator for the Retired and Senior Volunteer Program (RSVP) in 3 Missouri counties. Louise spoke of the difficulty balancing life with volunteering, while Berte stated that many volunteers were over-committed which led a dip in time commitments and energy. Morgan (2009) concurred that the outcome of burnout was a decrease in volunteering. He suggested strategies that involved creating more efficient systems, reducing conflict among volunteers, and showing appreciation in real tangible ways.
At the turn of the century, the idea of positive psychology was gaining steam in the late 90s, when focus began to be put on what was believed to be the antithesis of burnout: engagement (Maslach et al., 2001). The definition of burnout was even rephrased to include that it is “an erosion of engagement with the job” (Myers & Leiter, 1997, as cited in Maslach et al., 2001, p. 416). It is comprised of the opposites of the three dimensions of burnout: (a) energy instead of exhaustion, (b) involvement instead of cynicism/depersonalization, and (c) efficacy instead of ineffectiveness. To achieve this engagement, six areas of job-person fit needed to be in place which included “a sustainable workload, feelings of choice and control, appropriate recognition and reward, a supportive work community, fairness and justice, and meaningful and valued work” (Maslach et al., 2001, p. 417). Schaufeli approached engagement from the theory that it is not simply the opposite of the MBI scores and dimensions, but rather a construct all its own needing to be defined and studied. He and his colleagues defined it as “a persistent, positive affective-motivational state of fulfillment in employees that is characterized by vigor, dedication, and absorption” (Maslach et al., 2001, p. 417).

Tracking the history of burnout from its first published conception by Freudenberger (1974) through the current research that is still being done, helps elucidate the phenomenon. The definition has morphed over the years from a simple statement about becoming exhausted due to excessive demands (Freudenberger, 1974) to including the erosion of engagement in one’s job (Maslach et al., 1997). The most common consensus is that people are wearing down from excessive demands on their time and energy and it affects them physically, psychologically, and emotionally (Maslach & Leiter, 2016; Mutkins et al., 2011; Yu et al., 2015). Mutkins and colleagues (2011) found frequent concurrence of burnout and symptoms of depression. When an individual does not have the resilience to successfully cope with stressors, the result is burnout (Yu et al., 2015).
Both resilience and burnout literature highlight the impact of each on perceptions of wellness. The presence of resilience has been found to positively correlate with improved perceptions of physical, psychological, and spiritual wellness (Haglund et al., 2007; Kermott et al., 2019), while symptoms of burnout have been found to negatively affect the perceptions of areas of wellness (Maslach & Leiter, 2016; Yu et al., 2015). The final piece needed to set the context for the impact of stressors on ministry wives, is a discussion on the concept of wellness itself. Understanding the interaction of resilience and burnout factors on perceived wellness may bring clarity to the experience of ministry wives.

Wellness

The concept and working definition of wellness has morphed over the years. In much of the literature, it is noted that wellness was historically viewed from the singular vantage point of physiological well-being, or the absence of illness and infirmity (Dunn, 1959; Keyes, 1998; Witmer & Sweeney, 1992). The system this created was one that used the majority of health care dollars to treat people who are already sick and very little funds to prevent diseases (Myers et al., 2000). However, researchers have pushed for a fuller, more holistic view of wellness. They have attempted to include emotional, social, spiritual, and psychological components (Dunn, 1959; Hattie et al., 2004; Hermon & Hazler, 1999; Myers et al., 2000). Currently, the World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 2006). Wellness is also historically rooted in the profession of Counseling (Myers, 1992). As such, it is understood to be a psychological construct of the “subjective evaluation of life satisfaction” (Hattie et al., 2004). To understand high-level wellness, researchers endeavored to break it into areas of an individual’s life that could be quantified. It has been recognized that the interaction of these areas
can either improve or impair the individual’s functioning (Witmer & Sweeney, 1992). To fully understand this concept, we must look to empirically indicated models of wellness.

As early as 1959, Halbert L. Dunn questioned how the field of medicine and health were focusing on physical needs, but not effectively on “maintaining and improving the mind” (p. 456). For him wellness was dynamic – a direction of progressing toward an ever-higher potential of functioning. This would include the whole individual; mind, body, and spirit. Listing humans’ 12 basic needs, he posited that meeting those needs would be the means to preventing mental health issues.

Although wellness continued to be discussed over the next few decades, the first model based in counseling wasn’t developed until 1992 by Witmer and Sweeney. Earlier models of wellness were primarily focused on physical health and did not include development over the lifespan (Myers & Sweeney, 2008). Witmer and Sweeney (1992) took on the task of identifying specific components of wellness and how they interact with internal and external forces, which impacts an individual’s balance of wellness over one’s life. They created the Wheel of Wellness. This model was based off research in “psychology, anthropology, sociology, religion, and education” (Witmer & Sweeney, 1992, p. 140). Through further research using this model and an assessment (Wellness Evaluation of Lifestyle, or WEL) derived from it, the model was refined. Five life tasks identified as the characteristics of wellness were spirituality, self-direction, work and leisure, love, and friendship (Myers et al., 2000; Witmer & Sweeney, 1992). These life tasks were understood to be impacted by external life forces and global events. Depicted as a wheel, spirituality (e.g., purpose, meaning, values, faith) was placed at the center. The next life task of self-direction had 12 healthy traits that enable an individual to “regulate the self successfully” (Witmer & Sweeney, 1992, p. 141) in response to the other three life tasks of work and leisure,
love, and friendship. All the components were believed to interact so that change in one area affected the others, as well (Myers & Sweeney, 2008).

Hattie, Myers, and Sweeney (2004) were interested in evaluating the WEL which had been developed from the Wheel of Wellness. Using studies from over several years, they analyzed the use of the WEL with 3,043 participants. Using structural equation modeling, they were able to identify a 3-factor structure. Wellness was a single higher order factor. There were 5 second order factors of the self which included creative, coping, social, essential, and physical. The 17 components of the original Wheel of Wellness were found to be third-order factors that grouped into the 5 factors of self. There were also 4 contexts (local, instructional, global, and chronometrical) identified as integral to wellness, however, more research needs to be done to support these (Myers & Sweeney, 2008). After further study of these factors, a comprehensive model was presented known as The Indivisible Self (Myers & Sweeney, 2004). It was also depicted using the imagery of a wheel, with the Indivisible Self at the center and the 5 factors of the self around it. This continues to be the working model for wellness in the counseling field.

Through the literature on wellness models and the definition of the WHO, there is evidence that to have high-level wellness an individual needs to perceive a balance of health in all areas including physical, psychological/emotional, social, and spiritual (Hermon & Hazler, 1999; Myers & Sweeney, 2004; WHO, 2006). Two phenomena that have been found to impact perceptions of wellness are resilience and burnout.

**Study Framework**

This review of the literature has illustrated the way that stress can affect the wellness of an individual, the many stressors that ministerial couples experience, how resilience and burnout can influence wellness outcomes, and what high functioning wellness looks like. Figure 1 illustrates this process as laid out in a Stress and Wellness framework. Perhaps by better
understanding the experiences of how stressors functionally influence ministry wives’ perceptions of wellness, considering the presence of resilience or burnout, new opportunities for supporting and working with this population will emerge. To continue broadening our understanding of this phenomenon, it is important to hear the voices of those who are living in the role of ministry wife. This paper hopes to add to that broader understanding.

**Figure 1**

*Stress and Wellness Framework*
CHAPTER III

METHODOLOGY

The purpose of this study was to provide a rich description of the experiences of stressors impacting ministry wives’ perceptions of wellness. This chapter outlines the methodology that was used to accomplish that goal, laying out the research design and rationale for using a phenomenological framework of inquiry. Methods for sampling, data collection, and data analysis are presented.

Research Design and Rationale

To best explore the experiences of ministry wives, a qualitative naturalistic inquiry was employed for this research. The researcher was interested in the situated subjectivity of the ministry wife experience. Collecting qualitative data was ideal because it provided thick and complex descriptions of what real life is like (Miles et al., 2014). The researcher was not only interested in what stressors ministry wives encounter, but their experience of them and how factors of resilience or burnout may relate to overall wellness. The researcher believed that moving beyond quantitative variables like stressors and role responsibilities into the rich descriptions of experience was necessary for exploring the research questions. Phenomenological study offered the opportunity to collect data with such depth. Finlay (2013) stated that “the aim of a phenomenological study is to investigate experience as we live it over time, as opposed to how we conceptualize it in a fixed way” (p.180). Using this approach allowed for a deeper comprehension of the experience of the participants.

Phenomenology allowed the study of the experiences of ministry wives as they were offered, simply looking to explore and describe the experiences. It is assumed that there is “an essence” to the experiences that people share (Marshall & Rossman, 2011). Phenomenological philosophy stems from Edmund Husserl’s understanding of the human sciences (Creswell, 2013;
Moustakas, 1994). He believed that consciousness and awareness of self-experiences were what gave truth to the natural world. It is how material things are perceived that gives them meaning (Moustakas, 1994). The individuals’ experiences provided insight into their perceptions of the phenomenon while allowing the researcher to reveal the essence. This increased the possibility of contributing further knowledge regarding this phenomenon (Creswell, 2013; Marshall & Rossman, 2011; Moustakas, 1994). Other qualitative studies of ministry wives have identified stressors and experiences of their role, but none have focused on how the interaction of resilience or burnout may influence perceptions of wellness. This study gave the participants space to describe this experience.

**Research Questions**

The focus of this study was to explore the questions:

1. What are the lived experiences of ministry wives within the Christian Church?
2. What are the potential stressors present for those in the role of ministry wife?
3. How do these relate to their perceptions of wellness?

To explore this phenomenon, interview questions were employed that expanded knowledge about their roles and stressors, possible factors of resilience and burnout, and their perceptions of wellness.

**Sample and Participants**

This study used multiple resources to recruit participants. The first was a registry of Midwest Christian Churches obtained from a local college in the movement, Great Lakes Christian College (GLCC). GLCC was founded in 1949 as Great Lakes Bible College. It has grown over the years and continues to educate people for ministry within the Christian Church, though in recent years enrollment has been steadily decreasing by almost half (GLCC, 2017). Schools like GLCC are one of the few last vestiges of networking within the Christian Church.
movement. As such, conventions, conferences, and other events have been hosted at GLCC including the Michigan Christian Convention, Women of the Word, and a ministry wives’ retreat known as “Refresh”. Though these are only minimal supports to ministry families as they exist for only a single weekend at a time; they are useful for the purpose of recruitment. Involvement in these events made GLCC a prime resource for connecting with ministry wives. An additional resource was the Women of the Word conference that were previously mentioned. The researcher gained permission from the planning committee to post an invitation for the study through their internet presence. The researcher wanted to do the same with the “Refresh” ministry wives retreat but unfortunately learned that it was no longer active. One other way that participants heard of the study was through word of mouth, with ministry wives reaching out to others.

To yield the best insight and exploration of the research questions the sampling process was purposive, seeking out participants who had the experience of being a ministry wife in a Christian Church. Purposive sampling focuses on the unique context of participants allowing recruitment of the specific population the researcher is interested in studying (Bloomberg & Volpe, 2016; Miles et al., 2014). To achieve this, certain criteria had to be met for eligibility to participate in this study. Participants were currently fulfilling the role of ministry wife in a Christian Church. This study was focused on women who were married to a paid minister. This excluded those married to other leaders in the church (e.g., elders), missionaries, or general women leaders. As mentioned in Chapter 1, traditionally only men are hired into minister positions within Christian Churches (Harwell & Hunnicutt, 2013). Therefore, women were the target participants of this study. In qualitative research, there is not a definitive calculation for determining sample sizes. The goal is to have enough participants that most, if not all, of the important perceptions have been revealed while not having so many that the findings become
over saturated and thus repetitive and unproductive (Mason, 2010). The concept of saturation of data is most commonly cited as the guiding principle of determining sample size (Boddy, 2016; Guest et al., 2006; Mason, 2010). Guest and colleagues (2006) set out to research the point at which a qualitative study would reach saturation. They found that for a homogenous sample it was evident by the 12th participant. After reviewing the relevant literature on sample sizes for a phenomenological study, 12-15 participants seemed adequate to reach data saturation. After recruitment, 12 ministry wives participated in the study.

Recruiting using the registry of churches was meant to have three iterations. First, a phone call would be made to the churches that described the study and requested that those interested in participating contacted the researcher by phone or email. Next, a follow-up email was to be sent to the churches who had not responded. A third and final round of contact would happen using postal mail if more participants were still needed. The practicality of this process became cumbersome as calling churches most often ended with leaving a voicemail and proved to be incredibly time consuming. Thus, the researcher decided to switch the first two processes, with email becoming the first form of contact. Recruiting through the Women of the Word conference consisted of posting the invitation on their social media page. These methods proved successful as 12 participants reached out and follow-up procedures were unnecessary. When a potential participant showed interest through any of these methods, the researcher sent them the informed consent and answered any questions they had about the study, while also determining their eligibility to participate.

**Data Collection**

After the researcher received approval from the Western Michigan University’s Human Subjects Institutional Review Board (HSIRB), participants were recruited as laid out in the previous section. Once eligible participants were identified, meeting times were determined to
conduct an in-depth interview with each individual. Considering COVID-19 precautions, virtual interviews were offered, as well as socially distanced ones for those who wanted to meet in person. All 12 participants chose to meet virtually. The interviews were video recorded.

A semi-structured approach was utilized for the interviews to ensure that information was gathered regarding each of the research questions as well as allowing for expanded depth of understanding from participant led discussion. Semi-structured interviewing is an “informal, interactive process” (Moustakas, 1994, p. 114) that is able to focus on the phenomenon as experienced by the participants (Marshall & Rossman, 2011). There is opportunity for a rich, in-depth description as the researcher can “clarify statements and probe for additional information” (Bloomberg & Volpe, 2016, p. 154). The interview questions were informed by the relevant literature. They addressed the personal experience of stressors and expectations, the elements of resilience and burnout, and the perceived balance of wellness components in their lives. For the full interview script see Appendix F.

All data has been kept in a secure location. Any physical documentation was stored in a locked file cabinet in the researcher’s office. Electronic data was stored on an encrypted, password protected hard drive. Each participant chose a pseudonym for themselves to protect their anonymity.

**Data Analysis**

Following analysis procedures for descriptive phenomenological study, the researcher organized and made sense of the data collected using multifaceted coding. The recordings were transcribed and kept as separate documents on the secure hard drive noted previously. The researcher utilized the data analysis software NVivo to transcribe, organize, and sort through the data. Though this program assisted the researcher in organizing and managing the data, the coding and creation of themes was done solely by the researcher. Data from the transcriptions
were summarized into data segments and then grouped into themes. The goal was to “pull together material into more meaningful and parsimonious units of analysis” (Miles et al., 1994, p. 86). This was accomplished through a process of cyclical coding procedures. Saldana (2013) notes that each qualitative study is unique and will therefore have a unique approach to analysis. This means having both a preliminary idea of coding methods identified while also being “open during initial data collection and review” (Saldana, 2013, p. 60) for final determination of what coding methods are most appropriate. Preliminary coding methods for the First Cycle coding of this study were eclectic. Structural Coding was an appropriate method to begin engaging with the data. This allowed the researcher to apply codes to data segments that represented concepts based off the research and interview questions. Values Coding was also utilized here, as their values and beliefs offered insight into their experiences. As phenomenological inquiry looks to reflect deeply on the themes and meaning of the human experience, the researcher will recode as necessary and utilize Second Cycle coding to organize these first codes to gain a sense of themes, categories, and concepts (Saldana, 2013). Pattern Coding was employed at this time to categorize initial codes into fewer themes, which were then laid out along the framework identified in Chapter 2.

**Ethical Considerations**

As with all qualitative research that involves human subjects, it was imperative that precautions were taken to safeguard participants. In order to gain approval from the HSIRB there were certain ethical considerations that were addressed. These included informed consent, risk of harm, and confidentiality (Miles et al., 1994).

**Informed Consent**

Participants were fully informed about the nature and purpose of this study. A detailed discussion of informed consent occurred through email and conversation with those who were
interested in participating before the interviews were conducted. The informed consent outlined the purpose of the study, the process for data collection, and how the information would be used. It was clearly articulated that participation in the study was voluntary. Those who wanted to move forward signed the informed consent form.

**Risk of Harm**

There were certain risks perceived by the nature of this study. As participants recounted their experiences, some appeared emotionally distressed when talking about difficult aspects of their role in the church, feelings of burnout, or the impact it has had on their overall wellness and life. This could have resulted in exacerbated symptomology. Participants were made fully aware of this possibility during the informed consent discussion, as well as an offer to refer them to a professional counselor if they would like to receive services whether due to the study or not.

**Confidentiality**

Due to the sensitive nature of a ministry wife’s role of exemplar and as a public figure within the church, it was imperative that steps were taken to safeguard participants’ confidentiality. This was accomplished using pseudonyms, which each participant chose for themselves. Real names were only on the demographic questionnaire and informed consent forms which were stored either on the secure hard drive or in a locked file cabinet in the researcher’s office. Any other identifying information was not included in the write up of this study.

**Trustworthiness**

An important aspect of research is determining the quality of what is being done and reported. Historically, quantitative research has looked at validity, reliability, objectivity, and generalizability. Within the qualitative circles, however, there has been some discussion about how to conceptualize rigorous research. The aspects that this researcher is interested in
addressing are credibility, dependability, and transferability (Bloomberg & Volpe, 2016; Marshall & Rossman, 2011).

**Credibility**

The first part of trustworthiness is credibility, or whether the researcher is accurately representing what the participants said. Miles and his colleagues (2014) reference this as the “That’s right!” concept. Credibility can be established in many ways. First, the researcher kept a journal to engage in self-reflection of any biases or subjective perspectives. This journal began during the process of writing this proposal and continued through the writing of the final chapter. Additionally, the researcher’s connection to the topic of study is described in this chapter through the section titled “The Researcher’s Connection”.

Second, peer debriefing allowed fresh engagement with the data and analysis to offer alternative perspectives and check the researcher’s assumptions. Two peers were chosen for this process. The first was the counseling professor at a Christian College. He has counseled ministers and their families, as well as studied isolation, burnout, and connection for ministers and their wives with the local church body. He was also from the Christian Church background, allowing further understanding of this study and the participants. The second was a peer with years of counseling, qualitative research, and counselor educator experience. As such, she was well suited to understand the concepts of burnout, resilience, and wellness. Both gave affirming feedback for the study, with provocative questions that helped the researcher to consider aspects of trustworthiness more deeply and therefore strengthen the study.

A final strategy to ensure credibility were member checks. The participants themselves had an opportunity to review the researcher’s conclusions (Bloomberg & Volpe, 2016; Guba, 1981). Overall, there was a positive reception to the findings. Many confirmed that their
experiences were parallel to the results. Although the degree to which some experienced certain aspects was reportedly different, the overall essence seemed to have been captured in this study.

**Dependability**

Checking for dependability is the next part of trustworthiness, asking if the research process is consistent and could be recreated for future study. The researcher kept an audit trail (Bloomberg & Volpe, 2016; Guba, 1981; Marshall & Rossman, 2011). This recounted the detailed process of data collection, analysis, and interpretive decisions made by the researcher. In this way there was transparency and a detailed description of how the study was completed.

**Transferability**

In quantitative research, generalizability is often a sought-after standard of a study. Varying qualitative philosophies view this idea differently, however. Some maintain that all “social/behavioral phenomena are context-bound” (Guba, 1981). In this study, that is very much the case. Purposive sampling was used to dig deeply into the experiences of ministry wives within a specific religious movement. As such, the researcher will not be able to make claims of transferability outside of Christian Churches. With further research, however, one could employ the same study with ministry spouses from other denominations and movements to find if there are generalizations across those lines. It is also possible that ministry wives from other denominations will resonate with the experiences of these women. Likewise, the development of resources and supports in other denominations and regions could be informed by the findings of this study. There is also the possibility that readers will be able to assess for themselves if the findings are transferrable to their own contextual settings (Miles et al., 2014). The researcher will strive to include thick descriptions with enough depth for readers to do just that.
The Researcher’s Connection

In keeping with the trustworthiness of the study, it was necessary for me to bracket myself. This is the way that qualitative researchers attempt to keep as much of their own biases out of a study as possible. Though passionate about this topic, I needed to remain “open to new understanding – to be open to the phenomenon – in order to go beyond what [I] already know from experience” (Finlay, 2012). To that end, I planned to continually engage in reflexivity in hopes that I would be able to keep the impact of any potential biases at a minimum. As part of that process, I will share with the reader how I am connected to the topic of study.

I am passionate about this topic because I was a ministry wife for over 17 years. My husband and I ministered in Christian Churches within the Restoration Movement, which this study was focused on. I also grew up attending a Christian Church with my family. As a child, I remember the minister’s families being revered and honored by the congregation members as authorities in the church. I also recall the minister’s and youth minister’s wives being involved in many different aspects of church life. They both always seemed so put together and capable. As I grew up, I admired them greatly and knew that I wanted to be like them.

I attended the college in Michigan that is affiliated with the Christian Church, Great Lakes Christian College (GLCC). It is there that I received my bachelor’s degree in Counseling/Psychology and Biblical Theology. It is also there that the picture of ministry was highlighted, encouraging students to go out and serve the church. I believed that serving the Kingdom of God as a minister’s wife would be an honor. While still a student, I married my husband who was training to be a minister at GLCC. Together we had grand dreams of the fulfillment we would get from doing the work of ministry.

We have now served in 3 congregations in a ministerial role over the last 17 years. My husband was the youth minister at the first two, transitioned into the senior minister at the
second, and then filled the senior minister role at the third. I can definitively say that we were not prepared for what real ministry looked like. Through the years became clearer just exactly how we were affected by being a ministry family. My own experience has been one of slowly settling into a theoretical box of expectations. I didn’t realize it while it was happening, but I lost much of who I was by trying to live up to the expectations of congregations. I consistently felt the pressure to look like I had life all figured out. I was the exemplary wife and mother on the outside, while feeling completely overwhelmed and alone on the inside. I felt that I couldn’t let others see my true self with my real struggles or it would reflect poorly on my husband. Not to mention the judgments that would sometimes come about my choice of clothing, words, behavior, etc. I am now almost 2 years on the other side of ministry, as my husband resigned in 2020 and does not plan to re-enter ministry elsewhere. I can see both the beautiful parts of those years as well as the damaging ones. Looking back, I can remember periods of both resilience and burnout while in my role as a ministry wife.

I know that my experience is not a unique one. Being in the ministry for so long, attending conferences, and having stayed connected with peers from GLCC, I have heard the stories of countless others. There are so many other women that I know who have experienced loneliness, pressure, and role burnout as a ministry wife. Over the years I have been invited to speak at Christian women’s conferences, a Christian state convention, and a ministry wife retreat. At the conferences a couple of workshops I did were on self-care and identity. As the main speaker of a ministry wife retreat, I was asked to talk about self-care again. These speaking engagements gave me the opportunity to converse with many ministry wives about the impact their role has on their perceptions of wellness. I consistently heard of the symptoms of burnout in their lives and a need for increased development of resilience. Many appeared rather emotional as they talked about it.
This research was born out of a desire to better understand the needs and experiences of these women. There are so many who have entered the world of ministry, just as I did, without truly being prepared for the difficulties that come with it. Now I meet those women and they feel lost, alone, and ashamed for struggling. Worst of all, they suffer in silence, with most in their congregations not understanding the weight of their position. I want to get a rich description of their experiences so that their voices might be heard and hope that one day resources might be created to support ministry wives within the Christian Church.

I recognize that my own experience as a ministry wife could have affected the analysis of this study. Here I have bracketed myself in sharing that experience and continued to do so in order to try and see the phenomenon with fresh eyes (Finlay, 2013). After being involved in the Christian Church for so long, it was also possible that I had a prior connection to some of the participants. This was the case, as I was acquainted with 4 of them and was familiar with who another one was. It was important that I journaled about my prior knowledge of the participants to assess any issues of dual relationships that could hinder the study. I determined that my acquaintance with these women was not of such a depth that it interfered with my ability to be objective as possible. In fact, familiarity with me, may possibly have accelerated rapport building and participants’ comfort and willingness to open up about their experiences. As a Licensed Professional Counselor, I have also been trained to approach an individual’s story with openness and to dig deeper in search of layers of meaning and experience. Both my personal experience and skills as a counselor positioned me to be empathetic and understanding, which might have elicited richer descriptions of the participants’ experiences.

Summary

This chapter outlined the methodology the researcher employed to study the lived experience of stressors and resulting influence on ministry wives’ perceptions of wellness. The
study was a qualitative phenomenological inquiry. Description of the sample, data collection, and analysis were covered. This chapter also discussed ethical considerations and trustworthiness. It ended by connecting the researcher to the phenomenon.
CHAPTER IV
FINDINGS

The purpose of this phenomenological inquiry into the experiences of stressors and perceptions of wellness among ministry wives in the Christian Church was to understand how role stressors impact perceptions of wellness and how burnout and resiliency influence that outcome. The researcher hoped to provide space for the voices of these women to be heard, to illuminate common experiences while identifying variations between ministry wives, and to articulate the needs of this population. The researcher completed interviews with twelve participants, each of whom chose a pseudonym to maintain confidentiality. Qualitative analysis of the transcribed interviews generated insight into the lived experiences of ministry wives. Findings from this study are explored in this chapter.

First, data gathered from the demographic forms will be reviewed. Next the chapter will be organized according to the research questions as they fit within the conceptual framework laid out in Chapter 2 with themes that emerged. It will begin by looking at the generalized experiences of participants and then move into their specific experiences of stress, burnout, resilience, and perceptions of wellness. Finally, the chapter will conclude by revisiting the stress and wellness framework discussed in Chapter 2.

Demographics

Regarding demographics, the study included 12 women who were married to paid ministers in the Christian Church in the Midwest. They all identified as White. The average age was 49 years old, ranging from 34 to 65, with half under 50 and half over. The number of years as a ministry wife ranged from 5 to 44, with an average of 26 years. Fifty percent of the participants reported working for the church themselves in a paid role (i.e., children’s director,
worship leader, secretary, etc.). Table 1 provides a succinct look at the participants’
demographics, which is then followed by a brief description of each.

**Table 1**

*Demographic Characteristics of Participants*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Race</th>
<th>Congregation Size</th>
<th>Years In Ministry</th>
<th>Work for Church</th>
<th>Hours: Church-activities</th>
<th>Work Outside Home</th>
<th>Kids at Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lena</td>
<td>54</td>
<td>White</td>
<td>300</td>
<td>30</td>
<td>Y</td>
<td>6-8</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Megin</td>
<td>47</td>
<td>White</td>
<td>700</td>
<td>25</td>
<td>N</td>
<td>4-5</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Anne</td>
<td>42</td>
<td>White</td>
<td>90</td>
<td>15</td>
<td>Y</td>
<td>25-30</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Jan</td>
<td>45</td>
<td>White</td>
<td>150</td>
<td>24</td>
<td>N</td>
<td>5</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Elizabeth</td>
<td>53</td>
<td>White</td>
<td>250</td>
<td>32</td>
<td>N</td>
<td>6</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Katy</td>
<td>34</td>
<td>White</td>
<td>180</td>
<td>11</td>
<td>Y</td>
<td>35</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Rose</td>
<td>57</td>
<td>White</td>
<td>230</td>
<td>34</td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Maggie</td>
<td>57</td>
<td>White</td>
<td>120</td>
<td>38</td>
<td>N</td>
<td>6-10</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Marie</td>
<td>65</td>
<td>White</td>
<td>150</td>
<td>43</td>
<td>Y</td>
<td>45</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Hope</td>
<td>64</td>
<td>White</td>
<td>70</td>
<td>44</td>
<td>N</td>
<td>20</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Andrea</td>
<td>35</td>
<td>White</td>
<td>150</td>
<td>5</td>
<td>N</td>
<td>5</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>Amanda</td>
<td>37</td>
<td>White</td>
<td>300</td>
<td>13</td>
<td>N</td>
<td>10-12</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

Lena is a 54-year-old ministry wife. She and her husband have been in ministry for 30
years and he is currently serving as the senior minister of a congregation with about 300
members. She works as the Children’s Minister, devoting about 6-8 hours a week to church-
related activities. Their children are grown and out of the home.
Megin is a 47-year-old ministry wife. She and her husband have been in ministry for 25 years with him currently serving as an Associate Minister at a congregation of about 700 members. Megin works outside of the home, but not for the church. She engages in church-related activities about 4-5 hours a week and still has a teenage daughter living at home with them.

Anne is a 42-year-old ministry wife. She and her husband have been in ministry for 15 years with him currently serving as the Senior Minister at a congregation of about 90 members. Anne both works for the church as the Worship Leader and outside of the home as a substitute teacher. She generally spends about 25-30 hours a week on church-related activities. They have three children under the age of 13 still in the home.

Jan is a 45-year-old ministry wife. She and her husband have been in ministry for 24 years with him currently serving as the Senior Minister of a congregation with about 150 members. Jan does not work for the church herself and participates in about 5 hours of church-related activities a week. She also works outside of the home. They have 3 children in the home, though two are teenagers and one is a young adult.

Elizabeth is a 53-year-old ministry wife. She and her husband have been in ministry for 32 years with him currently serving as the Senior Minister of a congregation with about 250 members. Elizabeth engages in about 6 hours of church-related activities a week but does not work for the church. She does work outside of the home, though. They have 1 adult child living at home with them.

Katy is the youngest participant at 34-years-old. She and her husband have been in ministry for 11 years with him currently serving as the Associate Minister of a congregation with about 180 members. Katy works as an administrative assistant for the church, therefore reporting
about 35 hours of church-related activities a week. They have 5 children under the age of 14 living at home.

Rose is a 57-year-old ministry wife. She and her husband have been in ministry for 34 years with him currently serving as the Senior Minister of a congregation with about 230 members. Rose is an administrative assistant at the church. Their children are grown and out of the home.

Maggie is a 57-year-old ministry wife. She and her husband have been in ministry for 38 years with him currently serving as the Senior Minister of a congregation with about 120 members. Maggie works outside of the home and participates in about 6-10 hours of church-related activities a week. Their children are grown and out of the home.

Marie is the oldest participant at 65-years-old. She and her husband have been in ministry for 43 years with him currently serving as the Senior Minister of a congregation with about 150 members. Marie works as the Daycare Director for the Daycare run by the church and participates in about 45 hours of church-related activities a week. Their children are grown and out of the home.

Hope is a 64-year-old ministry wife. She and her husband have been in ministry for 44 years, which is the longest ministry reported. Her husband is currently serving as the Senior Minister of a congregation with about 70 members. Hope works outside of the home and participates in about 20 hours of church-related activities a week. They have 1 adult child still living in the home.

Andrea is a 35-year-old ministry wife. She and her husband have been in ministry for 5 years, which is the shortest ministry time reported. Her husband currently serves as the Youth and Young Adult Minister of a congregation with about 150 members. Andrea does not work outside of the home as she is a stay-at-home Mom for their 3 children ages 6 and under with
another one due in a few months. She participates in about 5 hours of church-related activities a week.

Amanda is a 37-year-old ministry wife. She and her husband have been in ministry for 13 years with him currently serving as the Associate Minister of Small Groups and Preaching for a congregation with about 300 members. Amanda works outside of the home and participates in about 10-12 hours of church-related activities a week. They have 3 children in the home under the age of 10.

**Lived Experiences**

This study set out to explore the experience of stress among ministry wives in the Christian Church and how that impacts their perceptions of wellness. The following section of this chapter will highlight the results of this inquiry. To have a tentative understanding of the experience of ministry wives as context for the exploration of stress and wellness, the first research question was “What are the lived experiences of ministry wives within the Christian Church?” This first part will speak to the general experience of becoming a ministry wife and continuing that role over time, thus setting the stage for moving into the other two research questions. A review of the literature revealed that there are different mitigating factors that influence the degree to which wellness is affected by stress. The experiences of resiliency or burnout have both been found to affect perceptions of wellness differently. Continued results of this study are laid out along this framework. First, the experience of stress in the role of ministry wife will be explored to address the question, “What are the potential stressors present for those in the role of ministry wife?” Next, the experience of factors of burnout will be reviewed, followed by evidence of resiliency which will inform the relation piece of the final research question: “How do these relate to their perceptions of wellness?” Lastly, their perceptions of wellness will be explored in connection to their experiences of burnout and/or resiliency.
**General Experience of Ministry Wives**

The first research question proposed in this study was “What are the lived experiences of ministry wives within the Christian Church?” Though many interview questions were focused on the constructs of stress, burnout, resiliency, and wellness, the goal was to have a rich description of the overall experience of ministry wives. General questions about beginning ministry with their husbands, rewarding aspects, and their feelings about being a ministry wife were included in the interview. When first stepping into the role of ministry wife, 75% of the participants reported feeling positively about it, with the most frequent description being “excited”. An interesting commonality that emerged out of this question for some of the women was the desire to marry a minister. Three participants indicated that as adolescents they wanted to marry some kind of minister someday. Each of them identified role models of ministry wives from their upbringing, like when Lena said,

> I would say that I was very excited. I had a youth minister and his wife who basically brought me along in my faith. So, in middle school and high school they were my mentors and I respected them so much and loved how they did ministry together. So, I think I always hoped I would be a minister’s wife or a youth minister’s wife and then when it worked out, I was like awesome this is what I really want!

One participant, Elizabeth, reported feeling very differently, however. She noted that her parents were very involved leaders in her childhood church and friends with the minister’s family, offering her a behind the scenes look at being in ministry. For her, that experience dissuaded her from wanting to marry a minister as she said, “Oh, I'll never marry a minister. Then I went to a Christian college, so what did I expect?” When the time came, though, even she indicated feeling good about entering ministry by stating, “But once we decided to go into ministry, I was, I mean, I was all in.” It is important to note that not every participant felt positive as they began ministry
with their husband. Three women talked about struggling to find their place and knowing how to fit into the role in the beginning. As was reported previously, years as a ministry wife ranged from 5-44. After settling into the role over the years, the researcher asked what the participants found to be the most rewarding and the most challenging parts. The most common theme in each category was “the people”. Rose aptly put it, saying, “Really, like the best part of ministry is people. The worst part of ministry is people.” There were several things identified, however, as both rewarding and challenging.

*Rewarding*

When asked what the most rewarding part of being a ministry wife has been, responses fell into three categories: People (58%), Husband (33%), and Kids (25%). Over half of the respondents talked about the joy of watching people grow in their faith and seeing how they have affected many lives over the years. Anne commented about how longevity at their church has allowed them to see this. After 15 years at their current church, she said, “The most rewarding is being here in the first year and getting involved with the youth. And now seeing that youth have their families and want to be involved with the church.” For Katy, having moved to a few different ministries over the years, she shared that,

God has shown me some fruits of our labors from previous ministries that I didn’t anticipate getting to see. Some growth and some youth students that we worked with years ago. Just seeing them live out their faith in some really big ways. And so that's been rewarding.

A third of the participants indicated that the most rewarding part was connected to their husbands, watching him grow and being able to do ministry together. Hope illustrated this when she said, “It has been a lot of fun just to be able to do ministry together and that he wants me to be there with him for things.” This connects back to the concept of ministry being a two-person
career (Taylor & Hartley, 1975), which is unique as most families are not so intimately involved in parental or spousal employment (McMinn et al., 2005). Participants used language that reflected this sense of being part of their husbands’ job, as shown in Amanda’s statement about the rewarding part: “I think doing meaningful work together.”

The final rewarding part identified by ministry wives was linked to their children growing in their faith and the support of their kids by other Christian adults. Megin said it this way: “Like when my kids were little, like there were people that stepped up and would help care for them or love them, you know, like grandparents would.” Katy stated, “So that's been super rewarding, seeing our kids fall in love with the church, in the body of Christ and taking ownership in it now. Not waiting till they’re an adult to do something.” Along with these rewarding aspects, though, challenges were also shared.

**Challenging**

Although these rewarding aspects existed for participants, there were also many challenges identified. When asked what the most challenging part of being a ministry wife has been, responses were more diversified than the rewards. Most challenges were only identified by one or two participants, except for the category of People. Half of the respondents indicated that managing investment in and loss of relationships, judgment, and navigating working with different people has been the most challenging part. Rose articulated feeling loss of relationship acutely stating, “Dealing with the in and out of people and the abandonment feelings that you feel when people leave for whatever reason.” Lena echoed this when she said, “It’s probably been the biggest, most painful when people leave and you love them, they’re your family, you’ve done life with them.” Outside of the challenge of people, other things identified were struggling finances, schedule, boundaries, living in a fishbowl, and conflict with other staff/ministers. These will not be explored here as they are all identified later by participants as stressors with much
more discussion and frequency, which was expected based on the literature already available. One unexpected challenge, though, was identified by two women: Feeling stuck with a desire to go to a different church. Andrea shared her feelings of being worn out by ongoing difficulties and her want for the option to leave it at times by stating, “One thing that is hard about ministry is I just want to leave. I just want to go to a different church sometimes.” As other church members have the opportunity to change churches any time that they feel the need or desire, this is not the case for those in ministry. After years of being in the same place, Megin confirmed this by saying, “Just feeling like I’m stuck, you know, like, this is the congregation that I’m with, and I can’t just up and leave and go do something new and different.” After conversing briefly about their overall feelings of being ministry wives, the interviews moved into identifying more specific ongoing stressors of the role.

**Identified Stressors**

The second research question was, “What are the potential stressors present for those in the role of ministry wife?” There were many identified. It is important to have a picture of how being a ministry wife may be stressful, to more fully explore how having or lacking resilience could affect perceptions of wellness. This section explores the four themes of stress that emerged from the interviews: Life Stress, Family Stress, Congregation Stress, and Personal Stress. There is also a discussion about how the occurrence of the COVID-19 pandemic added an extra layer of unique stress over the last 2 years that is not generally present.

**Life Stress**

Among the many stressors identified by participants, four were related to managing daily life. Participants mentioned stress in the areas of Finances, Time, Living in a Parsonage, and Moving. The next few paragraphs explore these themes.
Finances. Referenced by 75% of the participants, finances were the second most noted stressor. This is not surprising, considering that research on ministers and their wives has repeatedly indicated financial strain as a stressor (Adams et al., 2017; Case et al., 2019; Hileman, 2008; Luedtke & Sneed, 2018; Morris & Blanton, 1994b). Many commented on how ministers are often not compensated well for their level of education and the work that they do, as well as not receiving many benefits, like health insurance or retirement. Lena described the experience:

We were expected to do a lot for a teeny-weeny amount of money. And we were supposed to be ok because it was “ministry”, you know? They’re like, you are doing this for God, you shouldn’t care about that. But it’s like, well, we still have to provide for our family.

The ability to provide for simple or needed services has been a struggle for multiple participants. Two stated that finances were the reason that they have not continued to get counseling services, with Maggie stating,

She wants me to see a counselor because of all the anxiety or stress I'm going through right now with Jim and my health and all that stuff. You know, I was like, well, number one, I can't afford to pay for it… and I need to go to the dentist, too, but I can’t afford it.

Anne talked about not feeling like they had the money for her to spend on a haircut. She would wait until a friend came back to town to visit who did hair and felt like she was always juggling how she could find someone to do it for free. She expressed, “I hated that. I did not like that feeling.” Finances were described as an ongoing issue.

Time. In the world of ministry, time is a complicated aspect. Although there is often some flexibility in a minister’s schedule, there is also an intense demand on his time. Research shows consistent feelings and expectations that ministers are on call 24/7 (Adams et al., 2017;
Frame & Shehan 1994; Morris & Blanton, 1994b). Half of the participants of this study confirmed this experience and identified it as a significant stressor.

Two participants used the language of “24/7” time commitment. Lena pointed out that this kind of expectation can be difficult for families when she said:

A big stressor is the time commitment. You know, it’s 24/7. My husband can be called away at any time. And the kids, when they were young and at home, knew that. You might be having a family day or company or whatever and Dad might get called away. I think that is something really difficult for a lot of women as well and as we’ve hired a lot of different staff and had other minister’s wives on staff, I would say that’s the thing that has caused the most women not want to be in this role.

Megin echoed this as she recounted times that her husband had to be ready to go at any moment when someone had a need. The time demands put on ministers can make it difficult for families to feel connected. Maggie spoke to this when she said, “He was working so hard at ministry that he forgot about us at home.” Katy talked about not being able to pursue full-time employment when her husband has been in full-time ministry. While raising a family at the same time, she said the “time requirements for a ministry role” have impeded her ability to pursue her own career.

**Living in a Parsonage and Moving.** The final two Life stressors are connected to housing. Frame and Shehan (1994) looked closely at relocation stress for ministry wives. They found that the stress was more significantly felt by ministry wives than their husbands. This included living in parsonages and having to readjust to new communities, support systems, and jobs. Two participants, Amanda and Jan, talked about the stress of moving their families. Jan recounted feeling as though she didn’t have a choice as they had to move to where the ministry
opportunity was and expressed that “Trusting God through that is difficult, to be honest. I’ve got
to move my kids yet again. I’ve got to find a house yet again.”

A piece of the stress of moving comes from having to find housing at the next ministry,
which is sometimes provided by the church as a parsonage. A third of participants touched on the
difficulty of living in a parsonage and how it impacts their ability for future planning, as they
have no equity built. Anne stated, “It’s not our own home. So, when you think about your future,
you think about: Is this the best place for us? We’re kind of stuck in a way.” Feelings of not
being able to move on were shared by Elizabeth who noted, “That’s been a factor, too, in
allowing my husband to make the decision to retire because we now have a house, whereas we’d
always lived in a parsonage.” Living arrangements and frequent moves can bring a lot of stress
to the ministry wife.

**Family Stress**

The next theme of interest included identified stressors related to the family. The
presence of added pressure and stress on the ministerial family due to the nature of the minister’s
job has been established (Frame & Shehan, 1994; Hileman, 2008; Lee & Iverson-Gilbert, 2003;
Morris & Blanton, 1998). Two-thirds of the participants verbalized how their role created stress
regarding parenting and their marriage.

**Parenting.** The difficulties of raising children in the ministry were shared by 7 out of 12
participants. Five of them explored the stigma and judgment that comes from the congregation’s
expectations that the minister’s kids are held to a higher standard of comportment. These ranged
from Hope and Lena trying to protect their kids from this experience to Jan, Maggie, and
Elizabeth lamenting the impact that judgment from the church had on their children as they have
grown up. Recognizing this struggle, Lena stated, “Every kid struggles, makes mistakes. No kid
is perfect, no person is perfect. We really worked hard so that that wasn’t something that was
going to carry with them their whole life.” Unfortunately, for Jan, she expressed feeling that it had already negatively affected her daughter: “I know that one of my girls, the issues that she has come from those ministries. Which just breaks my heart, but I know that that's where it's coming from and all of that. But that was the abuse and the judgment that she's taking on.” Likewise, 

Looking back on their experience at one particular church, Maggie, shared, “I still have that regret that we should have never taken our boys, if I would have known” as she recalled the judgment they received there.

Another part of parenting that was mentioned by 2 participants was their kids having access to more information about what is happening in the church than most. Rose aptly put it, saying, “I am acutely aware of the risk that we put them in because people are human and they are full of flaws and dysfunctional, and they view that and they get a front row seat to people's humanness. And it's a lot for a child to deal with and to really comprehend.” Family stress goes beyond just experiences in parenting, though.

**Marriage.** Part of being a ministry wife is navigating their relationship with their husband who is the minister. With the stress and higher rates of burnout identified in the literature for ministers (Adams et al., 2017; Daniel & Rogers, 1981; Hatcher & Underwood, 1990; Holaday et al., 2001) it is understandable that marriages may be impacted. Five out of twelve participants mentioned their husbands struggling with depression, anxiety, and burnout over the years. Many of the women described the stress of working to be his support and feeling protective of him. Elizabeth even singled it out, saying, “Buoying him and trying to keep him going has probably been the biggest stressor in my life for 34 years.” Even as it was identified as a stressor, though, there was often fondness in the way the participants talked about being there for their husbands. For Marie, she stated that she is “kind of the backlight to make him shine,” equating it to being the velvet behind the diamond jewelry at the store.
**Congregation Stress**

The next theme of stressors identified by participants connects back to people being one of the most challenging aspects of ministry, as noted earlier. Participants shared the difficulty of having external expectations placed on them and their family. There was a general sense among participants that they experienced expectations originating from congregation members. These external expectations pertained to their abilities (e.g., plays the piano), how involved they were, type of ministry they would participate in (e.g., women’s or kids), level of Biblical knowledge, and their personal comportment (e.g., placed on a pedestal). The manifestation of external expectations looked different but frequently were experienced as personal hurt, diffuse boundaries, and criticism.

**Personal Hurt.** The stressor of experiencing personal hurt from congregation members is the most reported stressor in this study, with 10 out of the 12 participants identifying it. This is not surprising as a survey by Lifeway Research (2017) found that over half of ministry wives had few people to confide in, didn’t feel free to be themselves, had confidence betrayed by others in the church, still felt hurt by previous conflicts, experienced personal attacks, and felt their problems would become gossip if shared.

Participants in this study shared experiences of judgment, being dealt with in a callous way by the church leaders and members, and the protective distance they placed between themselves and those in the church. Three women talked about the hurt of people they believed were friends, judging and opposing them. Anne recounted a situation where blame was laid on them for an undesired outcome: “And so that really hurt because they’re the ones that you thought were friends. They were ones that you, you know, we were doing ministry together…Why would you think that we would do this intentionally?” There were multiple
stories of feeling betrayed or hurt by the church shared in the interviews, with 3 participants noting that people do not realize the damage that they do in such situations.

**Diffuse Boundaries and Criticism.** Connected to this experience of personal hurt are criticism and the problem of poor boundaries. These were discussed by 5 participants each. Although they are separate concepts, the freedom seemingly felt by congregation members to openly criticize or have an opinion about how the minister’s family does things, appears to be directly related to the diffusion of boundaries within the church. Elizabeth pointed out how church members cross boundaries that are not crossed in other people’s lives when she said, “People don’t understand the limitations they want to put on ministers and their families as far as what they should and shouldn’t do when nobody puts any kind of limitations on what you do in your life.” This sentiment was shared by Lena who stated:

> In the world, when you have a job, you may have a boss, or a couple bosses, who say things to you, but not everybody who works there feels the freedom to come and say, hey I don’t like how you just did that. You know, if there’s 300 employees. But here there’s 300 “employees” who think they pay their money they can say whatever they want.

Participants recounted examples of criticism about decisions they or their husbands made, their marital dynamics, choosing not to participate in a church event, and how they are raising their children. The effect criticism can have was touched on with Katy saying, “When people have a problem with something that’s happened…how they approach that can kind of cause waves in your ministry, in your heart, in your home, in your church, whatever.”

**Personal Stress**

The final theme of stressors identified by participants involved internal feelings and struggles. Many ministry wives discussed trying to meet internal expectations, feeling isolated, and loss of a sense of identity.
**Internal Expectations.** Not only have we already discussed how external expectations can be stressful for ministry wives, but they frequently have personal internal expectations that can cause stress as well. Two-thirds of participants discussed the difficulty of expecting a lot from themselves in the role. Andrea expressed that her own expectations were way higher than other’s expectations and she felt, “…like I can’t have any problems with my kids. I can’t have any marital problems. If I do, I can’t talk about them because who am I going to tell them to?” Megin echoed that sentiment: “I always feel like we need to have like the perfect family, like our kids need to be, you know, serving.” Expectations of their families weren’t the only pressures they placed on themselves, though.

Half of the women discussed putting pressure on themselves to be involved with everything that they possibly can and the guilt that comes with not being able to. Marie commented that, “time is a commodity that I run out of.” Elizabeth described the challenge of trying to set healthier boundaries with her time and involvement saying, “I try really hard not to wrestle with those guilt demons that tend to creep in a lot.” Guilt was expressed by a few participants when they would say “no” to things.

**Isolation.** Half of the participants expressed feeling alone/isolated. This tracked with research that found loneliness to be the most common issue that ministry wives reported struggling with (*Just Between Us*, 2005). The reasons identified in the current study for this experience varied but included an inability of others to understand what it is like in the role, others’ expectations of how they conduct their friendships, the stigma of being a ministry wife, and feeling like they can’t share their struggles with those in the church. When talking about a current struggle with a family member, Megin noted that there was “an extra layer of stress on top of the already stressful thing” due to the fact that “it’s one of those things that I can’t talk about with other people.” She touched upon the fear that her husband’s job could be affected if
there is judgment from people about the situation. This kind of fear leaves ministry wives feeling alone and like, as Anne said, “Nobody understands what I’m going through.” The belief that ministry wives are somehow more pure, moral, and pious than the average Christian, can also lead to a stigma that may cause people to avoid being their friend. Jan expressed ministry can be a very lonely place because “when people hear, oh you’re a minister’s wife, there’s all these things that run across their face. This is not something that I tell someone immediately because there’s judgment and everything else.” These experiences can lead to having few friends within the church.

**Identity.** The role of ministry wife can be a double-edged sword. Where sometimes it causes people to avoid them, at other times it can feel like the very thing that draws people in. Hope reinforced this idea stating, “I don’t know that anybody would notice me if I wasn’t the preacher’s wife.” She supported this statement by recounting the difficulty of making friends when they were not in ministry as opposed to when they were. Douglas (1961) affirmed this sentiment of not wanting to simply be seen as the minister’s wife so many years ago by stating, “For, one wants to be a person, and not just a personage” (p. 10). Half of the participants discussed a loss of identity in the role. Maintaining their own identity seemed to be a difficult endeavor, as four participants verbalized the challenge of being themselves and not putting on a “persona”, as Maggie phrased it. Elizabeth noted the problem of “figuring out who you can be your true self with.” Several participants also shared how the role can become all-encompassing, not knowing how they would find their place without it and having to sacrifice for it. Katy shared feeling “like I’m in the backseat for what I want to pursue” when discussing that she has not been able to pursue her own career at the same time as her husband was in full-time ministry, as mentioned earlier.
COVID-19 Pandemic

With the long list of stressors already identified, it was important to inquire about an extra layer of stress that was recently experienced. Over the last two years the world has experienced a global phenomenon. On March 11, 2020, the WHO declared COVID-19 as a global pandemic (Centers for Disease Control and Prevention [CDC], 2022). In light of this declaration, many states began to issue stay-at-home orders and businesses were shut down. This included churches, which were now forced to find ways to connect with members remotely. Added to that new challenge was a division of ideological opinions about how to respond to the pandemic, whether to meet, social distance, or wear a mask. These quickly polarized across religious and political lines (Martinelli et al., 2021). Church leadership was thrust into decision-making that they had no prior experience or context for. Considering this upheaval of normal practices, the researcher asked participants to share their experiences of being a ministry wife during the COVID-19 pandemic.

Overall, there was a collective sense of stress among the participants, with only 2 reporting a more positive experience. Hope talked about how her and her husband continued serving the church through virtual spaces and dropping baskets off at houses, while enjoying space from people, when she said, “Two years ago, we didn't have to see people much. So, some of that stress was off.” Megin highlighted how good it was for her and her family during that time:

I really thrived emotionally and physically when everything was shut down and we weren't doing services in person. So, my husband was home, and he was working from home and kids were home doing school, and I loved it. I made dinners all the time because I struggle with cooking every day, and that's just a hard thing for me to do. But I was making meals every day and we were together every day. I loved it. It was so easy
because I didn't have to go to church, which was so nice. And we did like a couple things over Zoom, like, I had a group that I led over Zoom and just a couple of things like that.

Yeah, it was just wonderful. I loved it.

This was not a universal sentiment among the participants, though. A few others (n = 3) noted some positive aspects but also spoke of the difficulties of the time.

There were several challenges discussed by participants, but most of them were only mentioned by one or two. These included the difficulty of transitioning to remote/virtual spaces, added work for their husband, feeling disconnected, and having low attendance numbers as things began to open back up. The most common experience, though, was noted by half of the participants. Part of navigating the pandemic experience was church leaders having to make decisions about when to meet in person, social distance practices, mask policies, etc. 6 participants highlighted the struggle of not being able to please everyone, as half of the people were on one side and half were on the other. Lena shared how “half of our congregation was upset that we were meeting in person, and half of them were like, no if you don’t meet in person we’re leaving. So, it was like, well which half do we want to go with?” Rose described the experience well saying:

It doesn’t matter what decisions that you make. They’re not right. If you lean one way, then this side doesn’t like it. If you lean another way, this side doesn’t like it. I’m really fed up with the polarized views of the pandemic…I would say even people want you to give them grace towards different things, but there was little to no grace when it came to them. And I think that was why it was so frustrating and even hurtful at times. There were accusations being made on both sides saying, “Well, you’re living in fear if you do this, or you don’t love people if you do that.” Yeah, it was hard.
There was one more pandemic-related stress that hit hard for two of the participants. As things were beginning to open back up a bit, they each experienced a COVID-19 outbreak at their church and one death resulting from it. Anne expressed the heartache of the situation:

It hit us pretty hard and one passed away from it…so it was really heavy that you made a decision, and that decision could have possibly hurt people. And within that, there was a couple of other families that said, you know, that wasn’t right, and you shouldn’t have done that, and they kind of laid a lot of blame on us. And so that really hurt because they’re ones that you thought were friends…Why would you think that we would do this intentionally?

These stories revealed how the COVID-19 pandemic added an extra layer of stress onto the already long list of stressors that were identified.

**Burnout, Resilience, and Wellness**

The third research question was “How do these (stressors) relate to their perceptions of wellness?” To understand the impact that stress may have on areas of wellness, one needs to explore whether an individual exhibits resilience or is experiencing burnout. It has been found that those who exhibited resilience reported decreased mental health issues and a higher quality of life (Haglund et al., 2007; Kermott et al., 2019). Those who were experiencing burnout, however, were found to have physical, psychological, and emotional symptoms (Maslach & Leiter, 2016; Mutkins et al., 2011; Yu et al., 2015). With wellness being defined as a perceived balance of physical, psychological/emotional, social, and spiritual life dimensions (Hermon & Hazler, 1999; Myers & Sweeney, 2004; WHO, 2006), burnout has been shown to affect an individual’s wellness. The following will be an account of how the participants in this study talked about experiences of burnout during their time as a ministry wife, their ability to utilize coping skills and exhibit resilience, and their perceptions of areas of wellness in their life.
**Burnout Experiences**

With so many stressors identified, it is understandable that 78% of ministry spouses have reported experiencing some level of burnout (Lifeway Research, 2017). Burnout has been functionally defined as feeling emotionally exhausted, disconnected from those being served, and lacking a sense of personal accomplishment (Maslach & Leiter, 2016). Utilizing these three dimensions of burnout, the researcher asked participants to rate themselves on a scale of 0-10 for each construct. These questions were designed to assess the possible level of burnout the participants were currently experiencing, if any. After the scaling questions, the researcher asked participants to share if they had ever experienced burnout during their time as a ministry wife.

**Scaling questions.** Participants were asked to rate themselves on the construct of emotional exhaustion, where 0 is feeling completely emotionally exhausted and 10 is feeling completely emotionally fulfilled. The mean for this scale was 6.87, with the lowest reported number as 4.5 and the highest at a 10. Though there was acknowledgement from participants that all the scales fluctuate over time and in different periods of ministry, the fluctuation of the emotional state scale was mentioned the most. Two participants noted that although their numbers are currently higher, not too long ago they were much lower, with one stating it would have been a 2 a few years ago, and the other that it would have been a -1 in December of last year. Amanda reported her number of 7 as the “long-term” or average number overall for ministry but commented that right now it is “not great”, and she is “stressed out” from some things going on within the church. Others also confirmed that this number goes up and down over time, with Anne stating, “it has gone up and down, for sure” and Hope noting that “it would have changed” in different situations.

Next the participants were asked to rate themselves on the construct of connection, where 0 was feeling completely disconnected from and/or negative about congregation members and 10
was feeling completely connected to and/or positive about congregation members. The mean for this scale was 7.16, with the lowest reported number as a 3.5 and the highest at a 9. Three participants did not report a specific number, so they were not included in the average. Of these three, two simply stated that it was currently “really high” and the third stated feeling “not so connected”. Like with emotional exhaustion, participants described fluctuations in the number they would score for connection. Hope said, “It’s not always been that way,” while Rose highlighted the experience of people joining and leaving the church having an impact: “We’ve had an influx of people that I’ve really connected with. We’ve also had an outflow of people that I thought were very close friends.” This kind of turnover seems to inhibit stable connections.

The final construct participants were asked to rate themselves on was their sense of personal accomplishment in the role of ministry wife, where 0 is feeling that you have failed to accomplish your personal goals and 10 is feeling that you completely accomplish your personal goals. The mean for this scale was 6.89, with the lowest reported number as a 4 and the highest at an 8.5. Again, three participants did not report a specific number and were not included in the average. All three indicated that they were low on the scale, feeling that they should and would like to be doing more. It is likely that the mean for this scale would be lower if these participants gave a specific number. Those who reported higher numbers described ways in which they felt accomplished. Lena commented that even through difficult times, her gauge of how she is doing has been “I’m still here and I’m still loving people.” Megin expressed surprising herself and “accomplishing a lot more than I thought I would.” Those who reported lower numbers expressed a desire to be doing more or better at things. Both Andrea and Amanda pointed out the difficulty when you have young children. Andrea said, “The more kids, the more I can’t just let them sit in the sanctuary for two hours.” Amanda noted the change when she shared “I think before children, I felt like I was fulfilling that really well.” Jan offered some interesting insight.
into why some might struggle with accomplishing their personal goals as a ministry wife when she shared, “I didn’t even know what to set as a goal. Do you know what I mean? I was kind of running a race without guidance because it’s not like minister’s wives talk about what’s going on.” With little guidance at the beginning of entering ministry, it can be difficult to navigate what the ministry wife role even looks like.

Looking across these three scales, none of the participants had low scores in all three areas, though a few had two scales at a 5 or lower. Through this self-rating and subsequent discussion, most of the participants reported not currently experiencing burnout. Amanda expressed that she was feeling burned out right now and just realized it a few nights ago. The researcher inquired if there were any past experiences of burnout for the others, as well as Amanda, and for descriptions of that experience.

**Burnout.** All twelve participants reported experiencing burnout at some point in their role of ministry wife. Lena felt like there was a burnout cycle about every 7 years for her and her husband. Other participants also expressed experiencing burnout more than once. Many of them gave specific examples of when they felt burned out and how it affected them. The three dimensions of burnout, represented in the scaling questions, were identified multiple times in their stories.

Eight participants reported feeling emotionally exhausted. Anne recalled feeling “so exhausted, like, I wasn’t thinking straight…I was emotionally exhausted.” After describing her current experience of burnout, Amanda stated, “I’m pretty emotionally spent from all of that.” Other participants expressed being “very, very tired” and not feeling “refreshed”. Exhaustion seemed to be prevalent when feeling burned out.

Feeling disconnected or negative about the people they were serving was reported a few times, as well. Amanda shared feeling “…bitter toward the students. I wasn’t treating them as
kindly.” Likewise, Elizabeth stated, “I pretty much hated every member of our congregation.” This sense of dehumanization is a piece of burnout.

Five out of twelve participants discussed the sense of a lack of personal accomplishment when they felt unappreciated, used, and saw no concrete payout for their hard work. Andrea reported being “tired of feeling used” while Hope expressed, “I have felt not appreciated. And I think that is what makes you feel like I don’t want to do this anymore.” Marie’s statement felt powerful when she said, “Here I give my life, this is what I get.” Experiencing these dimensions of burnout translated into identifiable symptoms for many of the participants.

**Symptoms.** Jan and Katy both highlighted that experiencing burnout affected other areas of life and their overall health. Participants reported difficulty in praying, engaging in church activities, wanting to go to church at all, and wondering if they should continue in ministry. In fact, Jan shared this thought when she repeated what she had bluntly stated to her husband: “I said, if something happens at this church, I’m done. I can’t do it anymore. I’m not moving again. I’m not going to another church. I’m not.” The participants also noted crying a lot and feeling depressed, angry, guilty, and bitter. Elizabeth reflected on how “I was crying myself to sleep every night.” Some more symptoms reported were experiences of hiding from everyone at church, negative effects on their marriage, and putting up walls for future friendships. Lena described how she would hide out in the office after her responsibilities with the children’s ministry were done, saying, “Nobody saw me for like 3 months because I was like, I don’t want to see any of you, and you don’t want to see me either because you won’t like what you see.” Some struggles also centered around difficulty sleeping, feeling exhausted, and weight management. Megin shared, “Unfortunately, I eat, and I’ve noticed...that I’ve really turned to eating a lot.” The experience of burnout seems to bring a hefty list of symptoms with it, and yet this is not described as a continuous experience by the participants.
Resilience

Another piece of understanding the experience of ministry wives, is looking at why they all reported experiencing burnout in their role at some point and yet most reported not actively being in burnout at the time of the interviews. The researcher inquired about coping skills that they presently used and those from the past that have helped them in times of stress and/or burnout. The ability some people have to cope with stress and adapt to adversity is known as resilience (Cicchetti, 2010; Kermott et al., 2019; Rutter, 2012). There were 5 themes of coping that emerged from the participants’ responses: Support, Boundaries, Nature, Connecting with God, and Exercise. In addition to these themes, there were the behavioral act of taking a sabbatical and an inner belief of God’s provision and calling that also added to the resilience of the participants.

Support. Two-thirds of the participants identified having support from others as a major way of coping with role stressors. These support systems were made up of family, friends, mentors, and counselors. Amanda discussed her support system: “I have a mentor. I have my sisters who are my prayer team now. So, I go to those people, and I pray.” Anne and Jan both identified their moms as sources of support, while Lena talked about seeing a counselor for a while every few years.

Boundaries. Setting boundaries reportedly helped 5 out of the 12 participants when coping with the stressors of being a ministry wife. These included setting boundaries in relationships, around their time and involvement, and developing the ability to say “no”. Lena stated that her and her husband “hold a certain night, Friday night, sacred, to say that’s our day and our night.” Andrea explored how she is growing in her ability to say “no” to more things. When asked to do a devotional at a baby shower, she recalled, “I thought at first when she asked
me, like, I had to say yes. And, then I was like, no, I don’t have to say yes. And yeah, so it’s just saying no to things helps with my stress level.” Setting boundaries helped lower stress.

**Nature.** Another common coping strategy mentioned by 5 out of the 12 participants was being in nature and going for walks. Amanda shared, “I try to get outside and spend time in creation. That always fuels me.” This sentiment was supported by Jan when she noted, “We’ll go for walks. We have a lot of trails around here, so we’ll go for walks and try to decompress that way.”

**Connecting With God.** Again, 5 out of the 12 participants shared the coping strategy of connecting with God when stressed. This involved praying, reading the Bible, and listening to worship music. Maggie explained, “When I have anxiety or stress, first of all, I trained myself to recognize it. And I usually turn on worship music.” Jan pointed out that “having a consistent prayer time and consistent time to read the Bible” is how she copes with stress.

**Exercise.** The last coping theme that developed was that of exercise. A quarter of the participants reported how it helps with stress, as Katy said, “Exercise is a big one for me.” Marie echoed this when she said, “I get a real physical, emotional boost from exercise. I really do and I just think it’s so important.”

**Sabbatical.** A sabbatical is a “break or change from a normal routine (as of employment)” (Merriam-Webster, n.d.). This concept of taking an extended break from ministry was mentioned by 40% of participants. They all identified it as a beneficial and needed experience for ministers and their wives. Lena described taking a sabbatical every 7 years during their time in ministry. Anne shared about the feeling of pressure being lifted when she took a sabbatical from ministry related things.

**God’s Provision and Calling.** While discussing how they coped with stressors and difficult times in ministry, 1/3 of the participants noted that remembering their calling and how
God has sustained them has strengthened them. Amanda expressed that even though it can be emotionally draining, they are “doing what matters”. Three ministry wives touched on how it is still worth it even through the hurt. Maggie recalled being hurt and yet “we knew we were called. We were just waiting to see what God wanted to do with us.” Katy recounted how God has shown them glimpses that what they are doing is “good and profitable for the Kingdom” which has led them to say, “we’re all in and we’re still okay even in those tough times.” This sense of purpose seems to be an important piece of resilience for these women.

Wellness

The final piece of the framework is Wellness. How have the stressors of being a ministry wife, identified in this study, affected participants’ perceptions of wellness? This proved to be a complex question to sort out, as a few of the ministry wives noted the difficulty of separating the impact of that role from the impacts of other roles in their lives (e.g., mother, employee, etc.). The researcher endeavored to ask specifically how the ministry wife role impacted their wellness. As research has found that high-level wellness is a perceived balance of spiritual, emotional, social, and physical health (Hermon & Hazler, 1999; Myers & Sweeney, 2004; WHO, 2006), interview questions were developed that asked about those four areas. In the following discussion, the possible impact of previously identified stressors will be illuminated.

Spiritual Wellness. When asked to describe their spiritual health, almost half reported feeling good about it. They were able to point out practices that helped them maintain high spiritual wellness, including Bible apps, praying, listening to Worship music, and attending Bible studies. Four participants reported being in progress toward better spiritual health, while 2 expressed not doing well at the time of the interview. Andrea described it as being “hard for me to do things on my own time because we have to go to the church and it’s an extra tax on me. And so, I’m just not doing anything at all.” Anne echoed this sentiment that putting energy into
planning for church things, makes it difficult to want to engage in scripture more on her own. She has found herself avoiding opportunities to dig in deeper. There were also a mix of responses when asked if they felt that their role of ministry wife affected this area positively or negatively. Some found that certain previously identified stressors like time demands and external expectations of how spiritually disciplined they should be, made it more difficult. Others acknowledged the positive aspect that being in the role pushed them into being more involved than they would otherwise be. As a self-prescribed introvert, Megin admitted,

I wouldn’t go to church every week if I didn’t have those times where I felt like I had to.

I would stay home a lot. I think just having those small groups or little Bible studies coming up, those have definitely been helpful for sure.

**Emotional Wellness.** Overall, participants’ responses given about perceptions of emotional health were either positive or described as being ok and in progress, except for one. Amanda shared how her husband’s transition into a new position at church has brought with it difficult time demands, stating, “I’m not great ministry-wise. I’d say I’m stressed out, because he’s been working basically a job and a half for the last three months.” Although Marie reported her current emotional health as good, she also highlighted how time demands on her husband can change that: “The only real impact that I kind of see or feel is when he is really busy, and he is off and everything like that. He’s kind of my balancer.” Katy perceived herself as emotionally healthy while also commenting that she is guarded due to “some turmoil in the church.” Some of those who reported higher levels of emotional wellness, noted how remembering that God is in control is helpful to feeling at peace, like Jan telling God, “God, you’ve got it. There are things that I just can’t control, so you’ve got to take it.” Such a mindset has proved helpful in improving emotional health.
Social Wellness. Of all the wellness areas, social wellness generated the most discussion. Five participants reported high levels of social health currently. Another 5 reported mid-level social health, leaving 2 to report low levels. A fair amount of conversation occurred surrounding the difficulty of navigating relationships within the church. Even those who reported high levels of social wellness now, recounted times that it wasn’t easy. Two of them (Andrea and Jan) joined two others with lower reports of health in this area (Hope and Katy), sharing that they are still careful due to past experiences. Andrea stated, “I definitely feel like I’m being shallow. I don’t want to give too much information because I don’t know how long they’re going to be around for. I don’t know if they’re the gossipy kind.” Jan bluntly reinforced this caution, saying, “It takes me a long time to get to the point where I’ll trust somebody in the church because I’ve been stabbed in the back so many times.” Hope and Katy also reiterated this fear of trusting people in the church with personal information. Others explored the difficulty of making friends due to their role. Lena identified struggling to find friends outside of the church because all her time is wrapped up in church life. Amanda highlighted the struggle of being in a small congregation where she didn’t feel like she connected with anyone, while Anne was worried about people wanting to be her friend just because she is the wife of the minister. Two participants also noted how frequent moves due to being in ministry had affected their social wellness. Katy spoke to this: “I don’t have a whole lot of friends. We finally got really close with someone and we moved so that part of it’s a little bit trickier. So, re-establishing friendships when you have to, you know, move.” This experience was supported by Maggie who said, “I finally had a friend, which is hard for me to have a friend. I finally had a friend, and now, as I’m packing, I’m crying.” Perceptions of social wellness are reportedly impacted significantly by the role of ministry wife.
Physical Wellness. The final area of wellness explored with participants was that of their physical health. Overall, participants reported struggling the most in this area, with 5 out of 12 indicating low levels of physical wellness. Four described not doing as well as they want to be, and only 3 placed themselves at high-level physical wellness. Although there were variables not related to ministry that impacted this area, there were also several ministry obstacles discussed. One was related to finances, with both Anne and Maggie discussing the difficulties of doing physical self-care like getting a haircut or going to the dentist. A few also talked about how time constraints interfered with finding space to exercise. When examining all the responsibilities between work and then church activities like Bible study and small group, Marie stated, “Sometimes time is a commodity that I run out of and find myself not doing the things I need to do to be healthy, like my exercise.”

Stress and Wellness Framework

Underlying this research is a framework of stress theory and its outcomes that have been established in the literature. An individual experiences stress, or the mental and emotional tension caused by external changes and problems (Caplan, 1990; Merriam-Webster, n.d.; Weber, 2011). Next, that individual either has the ability to positively adapt or becomes worn out. Both resilience and burnout have been found to directly impact levels of wellness (Haglund et al., 2007; Kermott et al., 2019; Maslach & Leiter, 2016; Yu et al., 2015). By inserting specifics from the experiences of these ministry wives into this framework, a fuller description of the phenomenon can be understood.

Ministry Wives

There were many stressors identified by the participants. Four themes emerged from the data which included Life Stress, Family Stress, Congregation Stress, and Personal Stress. How the participants responded to this stress was then explored. They shared experiences of both
burnout and resilience. The three dimensions of burnout were present in their stories, as well as examples of how the four areas of wellness were impacted by these experiences. However, as none of the participants reported currently experiencing burnout, resilience was also considered. Five themes of coping emerged from their responses: Support, Boundaries, Nature, Connecting with God, and Exercise. In addition, taking sabbaticals and trusting in God’s provision and calling were found to add to resilience. Participants shared how practices of resilience positively impacted their wellness. Figure 2 shows how the participants’ experiences fit within the framework of stress and wellness outcomes.
**Figure 2**

*Stress and Wellness Framework for Ministry Wives*

### Stressors

#### Life Stress
- Finances
- Time
- Living in Parsonage
- Moving

#### Family Stress
- Parenting
- Marriage

#### Congregation Stress
- Personal Hurt
- Diffuse Boundaries
- Criticism

#### Personal Stress
- Internal Expectations
- Isolation
- Loss of Identity

### Resilience

- **Support**
- **Boundaries**
- **Nature**
- **Connecting with God**
- **Exercise**
- **Sabbatical**
- **Sense of Calling**

### Burnout

- Emotional Exhaustion
- Disconnected/Depersonalization
- Lack of Personal Accomplishment

### Wellness Perceptions

#### Spiritual
- Difficulty praying, disengagement, avoiding church, questioning staying
- Tearful, depressed, angry, guilty, bitter
- Avoiding people, marital difficulties, defenses in relationships
- Difficulty sleeping, exhausted, struggling weight management

#### Emotional
- Feeling at peace, trusting God

#### Social
- Connected to support system (friends, family, mentor, etc.)

#### Physical
- Exercising/walking regularly, able to do self-care habits
Participant Recommendations

At the end of the interviews, participants were asked a few wrap-up questions involving congregations, supports, and counseling. It was important to hear needs and ideas for improvement directly from the women living these experiences.

Congregation Knowledge

After hearing the experiences of the participants, one of the final inquiries was what they wished that their congregations knew about being a ministry wife. A smattering of responses were related to congregations understanding the time, effort, thought, and energy that their husbands and themselves put into ministry. Two themes emerged, though, as the most desired knowledge for congregations. The first was that people recognized that ministry wives and their husbands are just human like the rest of them. A third of participants expressed this, like Marie when she said, “I’m not some fictitious character up here. I feel. I’m the same as you. We’re all just trying to be God’s woman.” The second theme mentioned by 3 participants was wishing that people understood how little ministers are compensated for everything that they do. Megin put it this way: “I think what always drives me crazy is they don’t realize how much less money you make than the average person. You know, like, there’s no insurance over here.” Overall, the women desired more understanding from their congregations.

Supports

Next, the participants were asked what supports would be helpful for ministry wives. Several things were mentioned but a few were repeated the most. The top two recommendations were closely related, as well. Over half of the participants identified connecting with other ministry wives as an important support. The second, which was mentioned by half, was having a mentor. Generally, the mentor was described to be a ministry wife who has more experience. In
both circumstances it was expressed that having someone to talk to who understands what it is like in the role of ministry wife would be an ideal support. Two other supports noted were counseling and retreats/conferences focused on ministry wives. It is important to mention that when describing counseling as a support, affordable access was a concern.

Counseling

Although there seems to be a financial barrier for ministry wives to access counseling services, the participants were asked what they might use counseling for, if they were able to go. There were no topics that were mentioned by a majority of the participants. The most frequent one was around knowing how to navigate boundaries with people, time, and role demands. Other things mentioned were communication, knowing themself better and working on personal issues, processing abuse by the church, and how to support their husband who is the minister and their children who are minister’s kids.

Conclusion

This chapter explored findings from an analysis of the lived experiences of Christian Church ministry wives. Three research questions laid the foundation for exploration of how role stressors impact perceptions of wellness. The first question addressed the overall experience of ministry wives. Most participants described feeling positively about entering ministry with their husbands. They were able to share both rewarding and challenging aspects of ministry life, with “people” being both the most common rewarding and challenging part.

The second question looked to identify potential stressors of ministry wives. Several were discussed with 4 themes emerging of Life Stress, Family Stress, Congregation Stress, and Personal Stress. The third question sought to explore the impact that role stress has on ministry wives’ perceptions of wellness. The participants articulated times of burnout and resilience and
connections were made between these stress responses and their descriptions of wellness. By engaging with these findings, professional counselors and church leadership can better understand the needs of this population and work to develop unique supports.
CHAPTER V
DISCUSSION

This study explored the lived experiences of stressors and perceptions of wellness among ministry wives in the Christian Church. The study also endeavored to provide data that may guide counselors and church leadership in supporting and caring for ministry wives. The participants in this study expressed seeing a need for better support of ministry wives and appreciation for the opportunity to tell their stories. This chapter explores the most common themes that emerged along the structure of the stress and wellness framework previously discussed, as well as offering implications of these findings and directions for future research.

Review of Emergent Themes

Listening to the stories and experiences of the ministry wives who participated in this study, there was an overarching narrative. That narrative was that the role of ministry wife has many impactful stressors which frequently lead to the experience of burnout and perceptions of low-level wellness. When resilience is present, however, perceptions of wellness improve.

Existence of Stressors

Participants reported the experience of a myriad of stressors in the role of ministry wife. Previous studies identified common stressors as being poorly defined boundaries/intrusiveness by the congregation, financial strain, frequent moves, pressure of expectations/“fishbowl” experience, isolation/loneliness, loss of identity, and sharing their spouse with the church (Baker, 1989; Frame & Shehan, 1994; Lifeway Research, 2017; McMinn et al., 2005; Roberts et al., 2006). Each of these, as well as some others, were mentioned by participants in this study. Out of the 12 stressors identified, 4 were reported by more than half of the participants: Personal Hurt (n = 10), Finances (n = 9), Internal Expectations (n = 8), and Parenting (n = 7).
Personal hurt came in at the top of the list. When listening to the ways that ministry wives were personally hurt in interactions with congregation members and church leadership, it was understandable when many reported putting “up a wall” or being cautious in relationships moving forward. These cautions also added to the identified stressor of isolation. This has been a continuous problem identified for decades, with Zoba (1997) reporting the experience of “an acute sense of loneliness” (p.22) for ministry wives. Then, in 2005, *Just Between Us*, found that loneliness was the number 1 most common problem for ministry wives. More recently this phenomenon was expressed due to ministry spouses having their confidence betrayed by others at church, hurt leftover from previous conflicts, and experiencing personal attacks (Lifeway Research, 2017).

**Burnout and Resilience**

These many stressors were found to lead to burnout for the participants, as all 12 ministry wives reported experiencing burnout at some point in their role. Some even spoke to the cyclical nature of it, as they had experienced it more than once. Burnout is feeling significantly worn out due to the excessive depletion of energy and resources by one’s role or job stressors (Maslach et al., 2001; Yu et al., 2015). The experience of wearing out has been found to manifest in 3 dimensions of burnout: Emotional exhaustion, depersonalization, and reduced sense of personal accomplishment (Maslach & Leiter, 2016). All three of these dimensions were present in the participants’ stories of burnout experiences.

On the other side of this discussion, though, is resilience. As the participants did not report current or continual burnout throughout their time as a ministry wife, it was important to explore what resilience looked like among these women. Although they reported many practices and resources that helped them be resilient during difficult times, two-thirds identified a support
system. This tracks with the literature, as Haglund and colleagues (2007) found that social support was a significant buffer between an individual and stress.

**Wellness Outcomes**

As a result of discussing burnout and resilience, possible impacts these have on perceptions of wellness emerged. The symptoms that participants recalled experiencing during burnout connected to all four areas of wellness. Likewise, when participants reviewed the coping strategies and activities they engaged in, connections to wellness were again present. This section will look at how each area of wellness was reportedly affected by both burnout and resilience.

**Spiritual Wellness**

This area of wellness was of particular interest, as the participants were married to ministers. When describing their experience of burnout, some participants indicated having difficulty praying during that time. They also found it difficult to engage in church activities or even attend church at all. These were also the moments when they recalled questioning whether they wanted to continue in ministry. Spiritual wellness encompasses “one's existential sense of meaning, purpose, and hopefulness toward life” (Myers & Sweeney, 2004, p. 237). Over 80% of the participants used language referencing their role as a calling, purpose, or God’s will. Struggling with these spiritual practices and questioning their purpose in life, could negatively impact their perception of spiritual wellness.

Having that sense of purpose also appeared to sustain some of them through the difficult times. Other resilience factors that were present when they were able to avoid burnout were praying, reading the Bible, and listening to Worship music. These spiritual practices improved
their sense of wellness and reportedly lowered their stress levels, thus they avoided burnout at those times.

**Emotional Wellness**

Some symptoms of burnout that participants described, impacted perceptions of emotional wellness. They expressed feeling depressed, angry, guilty, and bitter. Due to this, they also reported crying often. With one of the dimensions for assessing burnout being emotional exhaustion (Maslach & Jackson, 1981), it makes sense that finding oneself in burnout would impact that individual’s perceptions of emotional wellness.

There were also resilience factors that seemed to improve the participants’ emotional states. It has been found that cognitions affect emotions (Myers & Sweeney, 2004). Feeling at peace with situations and trusting God were mentioned by participants. It seemed that believing God was in control no matter what was going on, helped to calm emotional distress.

**Social Wellness**

Social wellness was the area that sparked the most conversation during the interviews. When experiencing burnout, participants reported avoiding people, even those that weren’t the issue. They also discussed how their feelings and behaviors when burned out affected their marriages at times. This is also the point at which some participants indicated putting walls up that have continued into current relationships. Keeping people at a distance felt safer for some. A few participants also described depersonalization, which is another dimension of burnout (Maslach & Jackson, 1981).

Even with the many stories that were shared of personal hurt and difficulties making and keeping friends, the factor of resilience most discussed was having and using a support system. These support systems consisted of friends, husbands, other family members, mentors, and
counselors. As earlier noted, having a support system has been found to mitigate levels of stress and its effects (Haglund et al., 2007).

**Physical Wellness**

Participants identified symptoms of burnout that appeared to affect the area of physical wellness. They described having difficulty sleeping and feeling exhausted. Weight management was also mentioned as some indicated what could be called “stress eating”. As this area was acknowledged as the one participants struggled with the most, it is understandable that burnout may lower perceptions of physical wellness.

Research has shown that nutrition and exercise are important for physical wellness (Myers & Sweeney, 2004). Exercise and taking walks were highlighted as resilience factors for several participants. They indicated that it helps them feel better emotionally and physically. The issue comes in when they do not feel they have the time to fit it in. Other important pieces mentioned for positive perceptions of physical wellness involved the ability to practice self-care, which included getting a haircut when needed and going to the dentist or doctor.

As this study is phenomenological, direct correlations or conclusions cannot be drawn. Further study is necessary to comprehend the complex relationship that exists between burnout, resilience, and wellness. The scope of this study has only scratched the surface of how perceptions of wellness are impacted by all these factors. It seems there may be more of a cyclical process that happens, where burnout not only has the possibility of affecting wellness but also the possibility of being affected by improved perceptions of wellness through resilience.

**Implications**

The purpose of this study was to explore the experiences of Christian Church ministry wives in the hope of better understanding the needs of this population. It sought to discover
themes of stress and how those impact perceptions of wellness to identify needs that may inform the development of improved supports. Participants reported improved perceptions of wellness through resilience. It is possible that better supports and access to resources could increase resilience, thus improving perceptions of wellness. Considering the results explored previously and the review of literature, the following discusses possible implications for counselors, counselor educators, church leadership/congregations, and theory.

**Counselors**

The pursuit of wellness for clients is rooted in the counseling profession (Myers, 1992). “Professional counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (American Counseling Association [ACA], 2022). With wellness at the core of what they do, counselors are perfectly situated to address this phenomenon.

First, counselors can reach out to this population to offer access to services. With the combination of time demands and general hesitancy to be vulnerable with people, ministry wives may be reluctant to seek out services. Counselors can reach out to local Christian Churches and give them information about how services may be beneficial for ministerial families, specifically ministry wives. To do this, counselors will need to understand the unique experiences of stress and relational dynamics ministry wives face.

With finances being one of the barriers to accessing services that was noted by participants, it will be important that counselors find ways to make this manageable. One way may be working together with churches to partner with them in getting the expense of services covered for their leadership. Creating and sustaining good working relationships with local churches may be crucial to provide the services needed.
In light of ministry wives’ experiences being connected with their religious faith, it is imperative that counselors are aware of their own beliefs and values about religion and spirituality. They will be more facilitative if they understand the connection of faith, church, and a sense of calling for this population.

**Counselor Educators**

Counseling programs already have a heavy load of knowledge and skills that need to be imparted to counselors-in-training according to The Council for Accreditation of Counseling and Related Educational Programs (CACREP). In the 2016 standards, spirituality is included in the curriculum under social and cultural diversity (CACREP, 2016). When discussing religion and spirituality in counseling programs, counselor educators can address the unique situations and stressors of religious/spiritual leaders. This would bring awareness to the needs of this population.

As mentioned earlier, wellness is at the core of counseling, and should already be a focus of counseling programs. Broadly, ensuring that curriculum includes education about stress theory, burnout, resilience, and wellness is imperative. As a helping profession, counselors are at risk for high levels of burnout, making this an important discussion already. Integrating an understanding of these concepts and how they impact clients would help equip counselors to work with ministry wives, as well.

**Churches**

Perhaps one of the most practical takeaways from this study is the need for churches to understand and support their ministry wives better. Churches can have a network of referrals for local counseling services. As finances were a concern mentioned earlier for ministry wives to access such counseling services, though, churches can create a fund for covering mental health
services for ministry wives, as well as their families. This would remove the financial burden and allow ministry wives to get the support they need.

Another thing that churches need to be cognizant about, are the time demands of ministry wives, their husbands, and their families. Many participants spoke to the difficulty of saying “no” to things and the feelings of guilt when they did. Implementing a schedule of regular respite from church duties would help to alleviate some of that pressure and sense of obligation. If such a program was built into the system of the church, ministry wives may feel freer to take a break when needed.

Along with this, is sending ministry wives to retreats. Many participants noted the benefits of attending such things in the past but the barriers of finances and time. If churches paid registration fees and made sure that any duties were covered by others during that time, it is possible that ministry wives would be more likely to use this beneficial support.

Another practice mentioned by some participants was that of taking sabbaticals. Sabbaticals are becoming more common within the religious community but continue to be less utilized than would be helpful. Many churches are unsure about the function, need, and logistics of giving their leaders sabbaticals (Wolyniak, 2009). Often, such things are given to the minister, but it is important for churches to include ministry wives when they are. To ensure that sabbaticals occur, the church needs to be educated on their importance and purpose. Policies that include the implementation of sabbaticals are ideal. Participants shared that it can be difficult to be open and vulnerable with those in the congregation which can lead to a lack of communication about their needs. A sabbatical is “most effective when it is included in a compensation agreement, when it is required by a caring congregation” (Wolyniak, 2009, p. 7).
**Bridging the Gap**

One implication could be inter-disciplinary, including counselors, ministry wives, and ministers, as these three roles are uniquely positioned to speak to the phenomenon at hand. Educating the local church about the role of ministry wives, along with ministers, could set the stage for improved experiences, lower stress, and higher levels of wellness. Workshops and lectures could be utilized to inform congregations about the experiences and needs of this population. Such presentations could be offered at churches, virtually, and at conferences. These educational sessions could include ministry role induction, stress theory, a functional understanding of burnout and resilience, congregational behaviors that negatively impact ministry leaders, and practical ways to support them. The overall purpose would be to help the church better understand and support their ministry leaders.

**Theory**

One final implication that emerged from this study is new insight about stress, burnout, resilience, and wellness theories. Much of the current stress literature discusses the process, symptoms, and effects of stress on an individual (Lazarus, 1993; Kokkinos, 2007; Pedrelli et al., 2008). Burnout literature highlights the detrimental affects that stress induces when the resources to cope are lacking or used up (Maslach & Leiter, 2016; Mutkins et al., 2011; Yu et al., 2015). Resilience literature has shown that resilience is dependent on the intensity of experiences, support that is available, and inherent differences within individuals (Haglund et al., 2007; Robertson & Cooper, 2013). Lastly, wellness literature has identified areas of one’s life that need to be balanced for high-level functioning and that stress can affect these areas (Hattie et al., 2004; Myers & Sweeney, 2008). Discussion of the stress, burnout, and resilience constructs tends to explore how they affect an individual, often in the areas that are described as
components of wellness. Each construct is explored separately and comes out looking like the original Stress and Wellness framework identified earlier. Through this study, however, certain interactions between burnout, resilience, and wellness came to light. These interactions are not reflected well in the literature to date. Participants described experiences of burnout and resilience as fluctuating between the two. There seemed to be a continuum from burnout to resilience and phases in between. Additionally, both burnout and resilience literature focus on how they affect someone’s wellness, but not on the aspect of how balancing areas of wellness decreases burnout and increases resilience. This study speaks to the need for further research of not only how burnout and resilience influence wellness, but also on how wellness levels may influence the experience of burnout and resilience. Thus, a more cyclical interaction like Figure 3 may be plausible.

Figure 3

Cyclical Stress and Wellness Framework
Limitations

Phenomenology was the chosen methodology to explore ministry wives’ experiences by listening to their personal stories. This study was bounded by certain limitations which are discussed here to allow the reader to examine how these findings might apply beyond the participants. The focus, demographics, and recruitment methods for this study will be discussed.

The focus of the study was on the wives of paid ministers within the Christian Church. For this reason, the experiences of spouses of elders, deacons, missionaries, and other leaders in the church were not included. Nor were women ministers, as that is uncommon within the Christian Church. Likewise, ministry wives or spouses from churches that do not identify as Christian Churches within the Restoration Movement, were not included in the study. Lastly, women who have been ministry wives but are no longer, were not included.

The demographics of participants also posed a limitation. Due to the scope of this study, only ministry wives in the Midwest were recruited to participate, with only 4 states being represented. All the participants were White, also. To understand the experiences of ministry wives more fully, the stories of women from other regions of the United States and women of color will need to be shared.

Another limitation of the study is connected to recruitment methods. As the researcher did not have contact information for ministry wives themselves, churches were emailed and/or called to disseminate the invitation to the study. It was not given directly to ministry wives. It is possible that many ministry wives at these churches did not receive the information about the study. Social media was also utilized but would only have reached the group of women who were active with the conference it was connected to.
One possible final limitation to consider is that of social desirability. Ministry wives are public figures within their congregations and communities. This was addressed through considerations of confidentiality, but there were still a couple participants that during the interview, asked again if this would be confidential before sharing certain information. It is possible that there were concerns about sharing information that put their church in a bad light, or not wanting to speak negatively about their experiences. The participants were also made aware that the researcher had experience as a ministry wife. This may have decreased the probability of socially desirable responses. The participants seemed to appreciate that the researcher understood their experiences personally, as evidenced through comments about this. The experience of feeling understood may have encouraged them to be more vulnerable and go deeper into their experiences.

**Future Research**

As a phenomenological study, this research offered a look at the essence of being a ministry wife within the Christian Church. The scope of this study has begun the work, but further research is necessary to illuminate additional experiences. As the participants were only interviewed once, they were only able to give an account of their experiences up to this point as best they could remember them. Talking with ministry wives at 6-month intervals for a few years might garner a more accurate look at the fluctuations of stress and resilience that were described. This could also allow for the exploration of the possible cyclical nature of burnout and resilience affecting wellness, while wellness levels impact burnout and resilience.

Due to the limitations previously laid out, there is also a need to expand the research to diverse populations of race/ethnicity, geographic location, and gender. Seeing if racial diversity or geographic location changes themes of experience would broaden the research base.
Likewise, inviting ministry spouses from other church backgrounds to participate could reveal denominational differences in experiences. Lastly, it would be particularly interesting to see if there are gender-based differences of experiences for ministry husbands.

Though this study was focused on ministry wives, the topic of ministry kids’ experiences came up frequently in the interviews. Having a minister as a parent has been found to affect the whole family, including the kids (Lee & Iverson-Gilbert, 2003). This was repeatedly affirmed by participants in this study, even to the point of identifying emotional baggage that their children have carried into adulthood from their experiences in the church. The voices of those who grew up with their parents in ministry could continue to elucidate the experiences of ministerial family members and the need for support of this population.

Finally, one last path for future research could be hearing the experiences of ministry wives who are no longer in that role. This could especially be enlightening if their husbands resigned from ministry due to negative experiences, as opposed to retiring. Such stories might offer more insight into times when resilience was lacking and the answer to “Should we keep doing this?” was “No.” Understanding their experience could inform further supports and resources that are needed.

**Conclusion**

This study set out to explore the experiences that ministry wives in the Christian Church have had with stress and how that impacted their perceptions of wellness. The insight gained into the lives of these women has moved the literature forward. Through their stories, the connection between burnout, resilience, and perceptions of wellness was revealed. As the researcher, I would like to reflect on my experience of completing this study.
After being in ministry with my husband for over 17 years, I had a lot of personal thoughts, feelings, and beliefs about the experience. Though there were times of joy and beauty over the years, there were also many hardships, abuses, and trauma that we endured. My goal coming into this study was to try my best to set aside my expectations of what participants would say, allowing their story to be heard for what it was. I went into the interviews expecting to find them stressed and burned out. Certainly, that was part of their stories, and a few indicated some current stress but something else emerged. Time and again, the women spoke of their resilience, their determination, and their commitment to the calling of ministry. They expressed passion for the role that they fill, even in the midst of so many struggles and obstacles. They also seemed to value the opportunity to share their stories, as half of the interviews exceeded the 1-hour expectation by 30 minutes or more, with 2 interviews reaching 2 hours. It is my hope that the findings of this study will operationalize into the development of strong supports and resources for this population.
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Appendix A
Phone Recruitment Script
Phone Recruitment Script

Hello, my name is Laura Kellicut, and I am a doctoral candidate at Western Michigan University currently working to complete my dissertation research. I am calling to invite the minister’s wife to participate in a research study titled, “An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives.” This study has been approved by the Human Subjects Institution Review Board (HSIRB) and is being conducted under the principal researcher, Dr. Stephen Craig.

The study explores the experiences of ministry wives in the Christian Church with stressors and how those relate to their perceptions of wellness.

Those invited to participate meet the following criteria:

- Currently married to a paid minister (part- or full-time) in a Restoration Movement Christian Church.

Please pass this message along to any ministry wives currently at your church.

If they are interested in learning more about the study, they can contact me via email at laura.a.kellicut@wmich.edu or by phone at (269) 779-9518.

Thank you for your time.
Appendix B

Email and Mail Recruitment Script
Email and Mail Recruitment Script

Dear [Name]:

My name is Laura Kellicut, and I am a doctoral candidate at Western Michigan University. You are invited to participate in a research study titled, “An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives.” This study has been approved by the Human Subjects Institution Review Board (HSIRB). I hope you will consider helping us with our important research.

This study explores the experiences of ministry wives in the Christian Church with stressors and how those relate to their perceptions of wellness. I am interested in the phenomenon of how stressors interact with their perception of wellness. This study may provide insight into the lived experiences of these women and support for resource development to assist this population.

Those invited to participate meet the following criteria:

- Currently married to a paid minister (part- or full-time) in a Restoration Movement Christian Church.

Your total time for participating in this study will be approximately 60-90 minutes. Participation consists of an interview either in-person or virtually and a follow-up call. All information gathered during this study will have identifying information removed and be confidential. One risk associated with this study is that you will be asked for personal information about your experience. There is no direct benefit for participating in this study, though it is possible that some may find sharing their story therapeutic.

You may choose to stop participating at any time. You will not suffer any prejudice or penalty by your decision to stop your participation. You will experience NO consequences if you choose to withdraw from this study.

If you are interested in learning more about the study, please feel free to contact me via email at laura.a.kellicut@wmich.edu or by phone at (269) 779-9518.

Thank you for your consideration.

Stephen Craig (Principal Researcher)
Laura Kellicut (Student Researcher)

Department of Counselor Education and Counseling Psychology
Western Michigan University
Appendix C

Social Media Recruitment Script
Social Media Recruitment Script

Exciting opportunity to participate in a research study!

My name is Laura Kellicut, and I am a doctoral candidate at Western Michigan University. You are invited to participate in a research study titled, “An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives.” The study has been approved by the Human Subjects Review Board (HSIRB) and is being conducted under the principal researcher, Dr. Stephen Craig.

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This study explores the experiences of ministry wives in the Christian Church with stressors and how those relate to their perceptions of wellness. I am interested in the phenomenon of how stressors interact with their perceptions of wellness. This study may provide insight into the lived experiences of these women and support for resource development to assist this population.

If you are interested in learning more about the study, please feel free to contact me via email at laura.a.kellicut@wmich.edu.
Appendix D

Informed Consent
Informed Consent

Western Michigan University
Department of Counselor Education and Counseling Psychology

Principal Investigator: Stephen Craig
Student Investigator: Laura Kellicut
Title of Study: An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives

This consent form is part of an informed consent process for a research study, and it will provide information that will help you decide whether you want to take part in this study. Participation in this study is completely voluntary. The purpose of the research is to explore ministry wives’ experiences of stressors and their perceptions of wellness and will serve as Laura Kellicut’s dissertation for the requirements of the Ph.D. in Counselor Education and Supervision.

If you take part in the research, you will be asked to participate in an interview about your experiences in the role of ministry wife. Your time in the study will take about 1 hour and 40 minutes. Possible risk to you for taking part in the study may be discomfort from answering sensitive questions and potential benefits of taking part is that it may be therapeutic to share experiences. Your alternative to taking part in the research study is not to take part in it.

You are invited to participate in this research study titled "An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives." This consent document will explain the purpose of this research project and will go over all the time commitments, the procedures used in the study, and the risks and benefits of participating in this research project. You are not giving up any of your legal rights by agreeing to take part in this research or by signing this consent form. After all of your questions have been answered and the consent document reviewed, if you decide to participate in this study, you will be asked to sign this consent form.

What are we trying to find out in this study?
The intent of this study is to explore how ministry wives experience stressors and the affect they have on their perceptions of wellness. The researchers are interested in the phenomenon and experience of the unique role of ministry wives and how that role impacts them. This study may provide insight into the lived experiences of these women.

Who can participate in this study?
Current ministry wives within the Christian Church are invited to participate in this study. A ministry wife is defined as the wife of clergy employed by a Christian Church. All those who meet these criteria and sign and return this consent form are eligible.

Where will this study take place?
The interview for this research study will be conducted in-person (at a pre-determined private setting) or virtually, whichever works best for the participant.
What is the time commitment for participating in this study?
The interview will last approximately 45-60 minutes, with a 5-10 minute demographic questionnaire. Later, a 20-30 minute follow-up phone or virtual call will occur to review the accuracy of the research findings. Your total time commitment is expected to be 100 minutes or less.

What will you be asked to do if you choose to participate in this study?
You will be asked to share basic demographic information. You will also be asked to share your experience in the role of ministry wife. Lastly, you will be asked to review the findings of the research to check for accuracy. The interviews will be recorded for the purposes of transcription.

What information is being measured during the study?
The researcher will ask you questions regarding your experience of being a ministry wife, your experience of stressors, and your perception of multiple areas of wellness.

What are the risks of participating in this study and how will these risks be minimized?
Due to the discussion of stressors, there is some risk that you will experience emotional distress. The researcher may stop the interview if you appear to be emotionally overwhelmed. You may also stop the interview if you feel too distressed. If you feel the need to talk further with someone after the interview, a referral can be made to a mental health professional.

Also, due to the nature of ministry wives being a public figure in their community, measures will be taken to ensure the confidentiality of all participants. You will choose your own pseudonym which will be used on transcripts and the final write-up of the research findings. Likewise, the name of your church will not be included in published or released materials. The demographic questionnaire and informed consent will be the only documents with your identifying information on them. Paper copies will be stored in a locked file cabinet in the researcher’s office. Digital copies will be stored on a password encrypted hard drive.

What are the benefits of participating in this study?
There are no direct benefits to you in participating in this study. You may find sharing your experiences therapeutic, however. Current and future ministry wives may benefit from improved resources and supports provided by churches and counselors.

Are there any costs associated with participating in this study?
Time is the only cost associated with participating in this study.

Is there any compensation for participating in this study?
There is no compensation for participating in this study.
Who will have access to the information collected during this study?
Interview recordings and transcripts will only be accessible to the researchers. The pseudonym you choose will be used in all published and released materials. Some direct quotes from the interviews may be used.

What will happen to my information collected for this research after the study is over?
After information that could identify you has been removed, de-identified information collected for this research may be used or distributed through publications in peer-reviewed journals or presentations at conferences.

What if you want to stop participating in this study?
You can choose to stop participating in the study at any time for any reason. You will not suffer any prejudice or penalty by your decision to stop your participation. You will experience NO personal consequences if you choose to withdraw from this study. Please notify the researchers if you wish to stop participating in the study. The researchers can also decide to stop your participation in the study without your consent.

Should you have any questions prior to or during the study, you can contact the primary investigator, Stephen Craig, at 269-387-5114 or stephen.craig@wmich.edu, or the student investigator, Laura Kellicut, at 269-779-9518 or laura.a.kellicut@wmich.edu. You may also contact the Chair, Institutional Review Board at 269-387-8293 or the Vice President for Research at 269-387-8298 if questions arise during the course of the study.

This consent document has been approved for use for one year by the Western Michigan University Institutional Review Board (WMU IRB) as indicated by the stamped date and signature of the board chair in the upper right corner. Do not participate in this study if the stamped date is older than one year.

I have read this informed consent document. The risks and benefits have been explained to me. I agree to take part in this study.

Please Print Your Name

___________________________________   ______________________________
Participant’s signature      Date

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Appendix E
Demographics Questionnaire
Demographics Questionnaire

Name: ___________________________________

Pseudonym: ________________________________

Age: _________

Racial or Ethnic Identity: ____________________

Number of years in Ministry wife role: ________

Congregation size: __________

Paid by the church: Y or N

On average, how many hours a week do you participate in church-related activities?

___0-5      ___6-10      ___11-20      ___20+

Do you work outside of the home? Y or N

If yes, what is your occupation? ________________________________

Do you have dependents in the home? (e.g., children, adult dependents, etc.) Y or N

If yes, please indicate type of dependents: ________________________________
Appendix F

Interview Script
Interview Script

My goal is to explore your experience as a ministry wife and the impact of stressors in that role. I am going to ask you about your general experience, common stressors, how you are doing in different areas of your life, what has helped you cope with role stress, and what your needs are. I have some prepared questions to help guide our conversation, but please feel free to offer important information as it relates to your experience. This interview is being recorded so that I will be able to analyze an accurate account of our conversation. Do you have any questions before we get started?

Interview Questions

1. Tell me about your role as a ministry wife.
   a. How did you feel when you first entered ministry with your husband?
   b. What are your role expectations?
      i. Follow up: Where do you believe these expectations come from?
   c. What is the most rewarding part of being a ministry wife? The most challenging?
   d. How do you currently feel about your role?

2. Please talk about your experience with role stressors.
   a. What are your biggest stressors when fulfilling your role?
   b. Please share your experience of your emotional state.
      i. On a scale of 0 to 10, where 0 is complete emotional exhaustion and 10 is completely emotionally fulfilled, where would you place yourself? What does #__ mean to you?
         1. Follow up: When you consider your current emotional state, how long have you felt that way? Has it changed over time? Please share examples of that change.
   c. Please share your experience of congregation members.
      i. On a scale of 0 to 10, where 0 is feeling completely disconnected from and/or negative about congregation members and 10 is feeling completely connected to and/or positive about congregation members, where would you place yourself? What does #__ mean to you?
         1. Follow up: When you consider your current experience of congregation members, how long have you felt that way? Has it changed over time? Please describe that change.
   d. Please share your experience of personal accomplishment.
      i. On a scale of 0 to 10, where 0 is feeling that you have failed to accomplish your personal goals as a ministry wife and 10 is feeling that you completely accomplish your personal goals as a ministry wife, where would you place yourself? What does #__ mean to you?
         1. Follow up: Do you feel capable in your role? Has there been a change in productivity over time?
e. Have you experienced role burnout at any point during your time as a ministry wife? When did you realize it? What did you do?

3. Tell me about your resilience related to the stressors.
   a. What are some current things that you do to help lower your stress level?
   b. Are there things that worked in the past? If yes, what are they?
      i. Follow up: Are those still helpful? If no, why not? How long were those coping strategies helpful?

4. I would like you to share a bit about your perception of the areas of wellness in your life.
   a. Spiritual – Please describe your spiritual health.
      i. Follow up: Do you feel connected to God? Do you read your Bible, pray, or do other spiritual practices?
   b. Emotional – Please describe your emotional health.
      i. Follow up: Has it changed over time as a ministry wife?
   c. Social – Please describe your social health.
      i. Follow up: Has your social life been impacted by your role? Is it different than before you were a ministry wife? If yes, how has it changed?
   d. Physical – Please describe your physical health.
   e. How has stress and/or burnout affected your overall wellness? What does that look and feel like for you?

5. The COVID-19 pandemic has been an added layer to navigate in the last couple of years. What has your experience been as a ministry wife during the pandemic?

6. What do you need?
   a. What would be helpful supports for you?
   b. What do you wish your congregation members knew about your experience?
      i. Follow up: How could they help?
   c. If you could change one thing about your role as a ministry wife, what would it be?
      i. Follow up: How would that help?
   d. If you were to see a counselor, what do you envision they could help you with?
Appendix G

HSIRB Approval Letter
Date: March 2, 2022

To: Stephen Craig, Principal Investigator
   [Co-PI], Co-Principal Investigator

An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives

This letter will serve as confirmation that your research project titled "An Exploration of Stressors and Perceptions of Wellness Among Christian Church Ministry Wives" has been reviewed by the Western Michigan University Institutional Review Board (WMU IRB) and approved under the Expedited

The conditions and duration of this approval are specified in the policies of Western Michigan University. You may now begin to implement the research as described in the application.

Please note: This research may only be conducted exactly in the form it was approved. You must seek specific board approval for any changes to this project (e.g., add an investigator, increase number of subjects beyond the number stated in your application, etc.). Failure to obtain approval for changes will result in a protocol deviation.

In addition, if there are any unanticipated adverse reactions or unanticipated events associated with the conduct of this research, you should immediately suspend the project and contact the Chair of the IRB or the Associate Director Research for consultation.

The Board wishes you success in the pursuit of your research goals.

Sincerely,

Amy Naugle, Ph.D., Chair
WMU IRB

For a study to remain open after one year, a Post Approval Monitoring report (please use the continuing review submission form) is required on or prior to (no more than 30 days) February 28, 2023 and each year thereafter until closing of the study.