THE IMPACT OF CLINICAL PASTORAL EDUCATION ON LEVEL 1 GRADUATES OF SILLIMAN UNIVERSTIY DIVINITY SCHOOL

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Dedication

To my (late) Mama, Irma Sihombing;

Your bodily absence helps me to feel and to reflect on pains and tears, your glimpse living memory gives joy and courage to wait for God's time.

To my faithful Papa, Bistok Sinaga.

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"Because of the LORD's great love we are not consumed,
for his compassions never fail.
23 They are new every morning;
*great is your faithfulness." (**Lamentations 3:22**)*

The above biblical text wonderfully captures how I truly felt upon finishing this research.

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Salamat Kaayo. Horas!

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Abstract

The present study was set out to seek and to find out the significance of Clinical Pastoral Education Training Level 1 and its impact on attitude, knowledge and skills in relation to pastoral ministry on Level I graduates of Clinical Pastoral Education on of Silliman University Divinity School.

The major findings of this research were Clinical Pastoral Education Training Level I had addressed personal growth and professional competencies of its participants and had an important impact to develop pastors' attitude, skills and knowledge and its relevance to the pastoral ministry. It is revealed through this study that the participants were able to articulate: as God always listening; the act of caring and loving of Jesus Christ; as God's ambassador it is pastors' calling and responsibility; and as holistic ministry to people; as their biblical-pastoral (theological) basis in doing pastoral care ministry. In addition, the participants claimed that CPE Training Level I has enhanced self-awareness, self-acceptance, sensitivity and becoming more compassionate. In terms of knowledge, they claimed that impact in the knowledge of psychology and behavioural sciences, knowledge on communication techniques, knowledge on pastoral care ministry and healing ministry. Their skills in communication, pastoral care and counseling, leadership, and interpersonal relationship have been greatly enhanced.

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CHAPTER I

INTRODUCTION

Background of the Study

In the 1920s, theological education was introduced to a new method of learning called Clinical Pastoral Education[1] by *Anton Theophilus Boisen.*[2] He was commonly credited for having provided the initial impetus toward instituting methodological changes in theological education. Previously, theological education was almost entirely academic, theoretical, and forensic; with Boisen's *Study of the living human document*[3], it began to change into learning 'at the bedside', which meant getting in close contact with living persons and their problems. The discipline's laboratory shifted from the university campus - with students as the typical subjects - to the hospital; this time, with patients as the sources of data.

Boisen introduced *the living human document* as the focus of Clinical Pastoral Education (CPE) training advocating the idea that students should not lose sight of the importance of concrete information drawn from human experiences. Living persons who are struggling with their spiritual life can provide concrete data to any context in

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[1] Paul W Pruyser, *Anton T Boisen and the Psychology of Religion* (The Journal of Pastoral Care, 21 no 4 Dec 1967) 209-219. *See also* Hiltner, Seward, *Fifty years of CPE* (The Journal of Pastoral Care, 29 no 2 Jun 1975) 90-98, *and* Hiltner, Seward, *Debt of Clinical Pastoral Education to Anton T Boisen,* (The Journal of Pastoral Care, 20 no 3 Sep 1966), 129-135

[2] Carroll A Wise, *The Grandfather of CPE (*The Journal of Pastoral Care, 35 no 4 Dec 198)

[3] Fred Eastman , *Father of the Clinical Pastoral Movement* (The Journal of Pastoral Care, 5 no 1 Sept. 1951), 3-7

theology. Working with these people means caring for souls fundamentally raw with religious experiences.

It is worth noting, however, that the paradigm shift in CPE started with Richard C. Cabot, a noted physician and author who also taught at the Harvard Divinity School. Boisen was hugely influenced by Cabot's efforts in introducing clinical experiences to his students. Cabot argued that a necessary preparation for students aiming to become pastors is clinical training for their pastoral work, similar to the clinical training medical students receive during their internship. In 1925, Cabot published a lecture entitled *"A Plea for the Clinical year in the course of Theology Study";* the same year when Boisen conducted the first CPE Program for theological students.[4]

CPE as an educational training for theology students offers personal understanding of one's self as a person in ministry in relation to others in need. Moreover, it is pastoral formation training focused on one's pastoral identity by integrating one's heritage, theology and knowledge of human behaviour as well as the social sciences in dealing with people in need. In other words, one's understanding of himself/herself as a person is his/her most valuable tool. This is the nature of contemporary ministry and CPE is very concerned with developing one's inner resources for creative pastoral responsibility. CPE training intends to establish a pastor/spiritual care giver as a professional identity congruent with his/her own person. It is believed that

[4] David Steere A (Editor) *The Supervision of Pastoral Care* (Louisville, The Westminster Press, 1989), 17

CPE enhances students' self-understanding inasmuch as, according to Melvin Dowdy, it is education for identity.[5]

CPE training is dedicated to deepening and unfolding students' competence in pastoral function, ministry and professional skills. Listening, observing, affirming present ministry, building relationships, and active communication are some important skills that the CPE training intends to develop. For those who wish a more specialized ministry, continued training leads to competency and leadership in three major fields: institutional chaplaincy, pastoral counseling, and the teaching ministry as a supervisor. Clinical Pastoral Education, thus, obviously aims for professional pastoral competency. In a nutshell, CPE training has a dual purpose: to enhance students' personal growth; and to develop students' professional skills and competences.

CPE as training for theology students has been known in the Philippines since 1964 when the Department of National and World Mission of the Episcopal Church in the United States assigned Albert Dalton to St. Luke's Hospital located in Quezon City, Metro-Manila. As the first Chaplain in the Philippines, Dalton's primary mission was to develop an experimental program for CPE.[6] But 1969 is marked as the historical year for CPE training in the Philippines because this was when the CPE leadership was turned over by Fr. J. Albert Dalton, the founder and father of CPE, to a Filipino Chaplain,

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[5] Melvin Dowdy, *Clinical Pastoral Education: Education for Identity* (Article on Duke Divinity School Review, 37 no 1 Wint 1972), 23-31

[6] Narcisco Dumalagan C, Wener Becher (Editors), *Pastoral Care & Counseling in Asia: Its Needs and Concerns* (Manila, CPCAP Secretariat, 1983), 43-45

Narciso Dumalagan.[7] All the CPE Training Centers today are associated with The Philippine Association for Clinical Pastoral Care, the first national organization for Clinical Pastoral Education established outside the United Stated.[8]

The focus of this present study, the CPE Training Center of the Silliman University Divinity School was established relatively recently (in 2007) with Dr. Lucio Mutia as its innovative supervisor.[9] According to the Silliman University Divinity School curriculum, students in the fourth year or Middler year have to undergo CPE Training Level 1 before going for their internship.[10] Dr. Mutia is currently the director of the recently established Philippine Association for Clinical Pastoral Education Practice, Inc. (PACPEP) and is also an accredited CPE Supervisor by the Association for Clinical Pastoral Education, Incorporated, USA. (ACPE) [11]

It was only after forty years of CPE experience that the Association for Clinical Pastoral Education (ACPE) was formed in 1967. Today, the ACPE International has become not only the standard but also the accrediting and resource agency in the field of Clinical Pastoral Education training. Its offered CPE training has the following aims: to be part of theological education; to be a continuing education for the ministry; for

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[7] Ibid 51

[8] Ibid

[9] Ibid

[10] Silliman University Divinity School, *Bachelor of Theology Curriculum Revised 2009*. Available from http://su.edu.ph/ Accessed on April 17, 2016

[11] Silliman University Divinity School CPE Training Manual Handbook 2015, 5

institutional chaplaincy; for pastoral counseling; for *certification* as a supervisor of Clinical Pastoral Education; and for other specialized ministries.[12]

However, Clinical Pastoral Education training is not yet practiced in all theological institutes and churches in the world such as in the Protestant Batak Christian Church – Huria Kristen Batak Protestan (HKBP) Church – in Indonesia, wherein the researcher is affiliated as a minister. The four theological institutions of the HKBP Church do not include the CPE Program. Such a situation has dictated the choice and formulation of this research, spurred by the fact that the researcher is currently a student in the Silliman University Divinity School, wherein the CPE Program is institutionalized.

Statement of the Problem

CPE Training Level I curriculum and elements of the training program address the fundamentals of pastoral formation, pastoral competence and pastoral reflection. There are two current majors offered, which include awareness of self in understanding the pastoral identity and professional pastoral competency. How valuable is the CPE training for pastors in terms of its impact on the latter's knowledge, skills, and attitudes towards their pastoral ministry has yet to be examined and evaluated.

This study, thus, seeks to find out the significance of CPE training for pastoral ministry and to analyze its impact on the knowledge, skills and attitude of pastors in relation to pastoral ministry from their own perspective.

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[12] Silliman University Divinity School CPE Training Manual Handbook 2015

More specifically, this study seeks to answer the following questions:

1. What is the Biblical-pastoral (theological) basis of CPE?
2. What is the significance and purpose of CPE training Level I on pastors in relation to pastoral ministry?
3. How and in what ways do pastors describe the outcomes/impacts of the CPE training Level I in terms of attitude, knowledge and skills towards their pastoral ministry?

Significance of the Study

The Silliman University Divinity School curriculum considers Clinical Pastoral Education as a Spiritual Care Program.[13] It is a degree program which integrates wisdom from the faith traditions and the behavioral sciences in responding to community needs for healing the eco-spiritual brokenness of environment. The curriculum further states that this Spiritual Care (CPE) Program is designed to respond to the needs of the various ministries, such us: pastoral or spiritual care in parish settings; chaplaincy in different institutions like the hospitals and clinics, rehabilitation centers, universities and colleges; teachers of pastoral care and counseling in church-related institutions; and chaplains in the military and industrial complex.

Thus, this study is significant to Seminaries as theological educational institutions, which prepare church leaders, and to Churches as religious institutions where

[13] Silliman University Divinity School, *Bachelor of Theology Curriculum Revised 2009*. Available from http://su.edu.ph/ Accessed on April 17, 2016

the pastors dedicate their lives in ministry. More specifically, the study will contribute to the following:

Pastors. The UCCP pastors who acted as the study respondents can glean valuable insights from this study's findings for their ministry.

Silliman University Divinity School. The findings of this study can provide the Silliman University Divinity School (as well, as those in other universities and colleges) with useful data in reviewing and/or evaluating its Pastoral Care Program to address the students' readiness and competence in pastoral care as future church leaders.

CPE Training Center of Silliman University Divinity School. The findings of this study are in effect students' feedback on or evaluation of the Silliman University Divinity School's CPE Training Center inasmuch as the study participants are graduates of the said center who are currently doing pastoral work in their respective church/ institution assignment.

Philippine Association of Clinical Pastoral Education Practice, Inc. (PACPEP). Since the CPE Training Center of the Silliman University Divinity School is a member of the PACPE, the findings of this study can help in strengthening PACPE documentation regarding the impact of CPE training from the participants' perspectives.

The United Evangelical Mission (UEM). This study offers significant insights on providing Pastroral Care Program through Clinical Pastoral Education training to UEM member churches.

Theological Education Curriculum. This study's findings challenge *the researcher* as well as others in the pastoral ministry to think of ways of promoting CPE training so that it would be included in all theological education curriculum and the church's Pastoral Care Program, especially in Indonesian theological education and churches; most particularly, in The HKBP Church (Huria Kristen Batak Protestan - Protestant Batak Christian Church), which sent this researcher to study in the Silliman University Divinity School.

Scope and Limitation of the Study

This study focuses on the graduates of the CPE Training Level I of Silliman University Divinity School from 2011 to 2015. These graduates are the respondents of this study.

The CPE Training Center of the Silliman University Divinity School is one of the CPE Training Centers in the Philippines, which follow the curriculum of both PACPE (Philippines Association for Clinical Pastoral Education, Inc.) and ACPE (Association for Clinical Pastoral Education) International. The training includes conceptual/didactic sessions, ministry practice/clinical visit, clinical critique and seminars (written materials, case review, bibliography), group process, and individual supervision. It also includes clinical area/hospital setting.

According to the ACPE International *Standards and Manual* (2010), CPE Training Level 1 Program addresses the fundamentals of pastoral formation, pastoral competence and pastoral reflection.

Definition of Terms

Clinical Pastoral Education (CPE) - also called clinical education or clinical pastoral learning - as described by the Association of Clinical Pastoral Education (ACPE) International[14], is a method of learning ministry by means of pastoral functioning under supervision. It is a process model of education, predicated on students' individual needs that are compatible with program objectives. ACPE distinguishes two types of CPE programming: CPE (Level 1/Level II) and Supervisory CPE. For the purposes of this study, CPE refers to professional education for seminary students and pastors for Christian ministry purposes, with minimum CPE-type Program on Level 1.

Primary Supervisor refers to a person holding official responsibility for conducting the unit of CPE and signing the evaluations.

Consultation means a meeting of persons in which an individual or group seeks feedback and non-binding advice about one's functioning, progress and/or plans in CPE from the supervisor.

Pastoral effectiveness refers to how a minister maintains vitality in ministry in direct proportion to his/her own personal (personality characteristics) and pastoral skills. It is the integration of godliness and competence in a Pastor called by God to lead and maintain the healthy spiritual growth of the church.

[14] Available from http://www.acpe.edu ACPE Standards & Manuals – Definition of Terms 2016, Accessed on January 1, 2016

Personal enrichment refers to Pastors being Godly leaders, being well-formed in their identity in Christ. The keen self-awareness that recognizes the integral relationship between who they are and what they do.

Pastoral competencies refer to the ability of the Pastor in pastoral ministry; the discovery and use of skills necessary for the practice of ministry, especially in pastoral care or spiritual care ministry.

CHAPTER II

REVIEW OF RELATED LITERATURE AND BIBLICAL THEOLOGICAL FRAMEWORK

Related Literature

Biblical Theological Basis of CPE Training. Stephen D.W. King[15] in his book, *Trust the Process – A History of Clinical Pastoral Education as Theological Education*, wrote that since the beginning, CPE has been rooted in providing basic service to suffering human beings, seeking to better understand both suffering and human beings. This understanding would result in better ministry. The CPE movement began with a simple caring ministry value: attentiveness to people in their particularizing detail and complexity; participating in basic service in the process of seeking understanding; and some degree of concern for faith communities. It then moved toward a professional competence in ministry value: generally, in pastoral care; specifically, in clergy education.

Charles V. Gerkin in his book, *The Living Human Document*, explained his ideas in Clinical Pastoral Education as hermeneutical mode.[16] Gerkin insisted that Clinical Pastoral Education, with its focus on personhood with issues of spirituality, needs to be interpreted with similar importance as a Biblical text employing secular therapy

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[15] Stephen King D.W, *Trust the Process – A History of Clinical Pastoral Education as Theological Education* (Lanham, University Press of America, 2007)

[16] Charles V. Gerkin, *The Living Human Document* (Nashville – Abingdon Press, 1984)

disciplines. Living persons struggling with spiritual life provide concrete data to any social or ethical context in theology. Similarly, Mark Jensen in his article, *Life histories and Narrative Theology*, maintained that life stories of patients could be a tool in ministry.[17]

Understanding patients' history may facilitate a more complete understanding of their current dilemma. Through this understanding, pastoral care can offer individual pastoral assessment and care. For this reason the modern pastoral profession (Pastoral Care, Pastoral Counseling, and Pastoral Psychotherapy) requires 400 hours of clinically supervised ministry or a unit of Clinical Pastoral Education becomes a minimal requirement for competency in doing pastoral care.[18]

Church ministry plays a very important role in the healing of emotional illness as well as in caring and in guiding the spiritual growth of people. It was conceived as a continuation of Christ's own ministry. Jesus's earthly ministry is significant for all vision and practice of ministry. If ministry cannot be clearly established as the continuation of Jesus's own intention and practice, the Church loses its central theological premise.[19]

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[17] Mark Jensen, *Life Histories and Narrative Theology* on Steere A David (editor), Louisville, The Westminster Knox Press, 1989), 116

[18] Miller Perry N., *Discrete Varieties of Care in the Clinical pastoral Tradition,* (The Journal of Pastoral Care & Counseling, Vol. 57, No. 2, Summer 2003), 111-116

[19] Thomas Oden C, *Pastoral Theology – Essentials of Ministry* (San Francisco, Harper Collins Publisher, 1983), 59-60

Charles DeGroat[20] pointed out that the New Exodus provides an appropriate contemporary context to articulate biblical understanding of soul [pastoral] care practice. It contains a model with an extended biblical pattern for growth and change illustrated in five major signposts: wounded-ness, wickedness, purgation, illumination, and union. Each signpost in the process is explained as follows:

Wounded-ness - God finds Israel in an oppressed state in Egypt who has already been working on the life of Moses to write a grand story of redemption (Exod. 22:22-24; Deut. 10:18; Psalm 10:14; Psalm 68:5; Psalm 146:9; Isa. 1:17; Jer. 22;3).

Wickedness - during the process of going out of Egypt into the promised land, Israel many times forgets God's tender loving care becoming like a spoiled and ungrateful child. God's patience is remarkable during Israel's early days (Exod. 15:17).

Purgation - God provides a crucible of growth and maturation – the wilderness. People respond not with trust but with anger. But God's heart is to have compassion and forgiveness (Num. 14:17-19).

Illumination - every person experiences pain and struggle, and every person has the opportunity to emerge from the darkness with hope. Illumination is the fruit of trust; it is an opening of one's hands trusting in God's process.

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[20] Charles R DeGroat, *The New Exodus: A Narrative Paradigm for Understanding Soul Care* (Journal of Psychology and Theology, Vol. 37, No. 3, 2009), 186-193

Union - it is emphasized that the entire process reaches toward a goal of union and communion with God and others.

Jeff Haines[21] in his review entitled, *Biblical Foundation to Pastoral Care*, claimed that biblical understanding of pastoral care should consider the words, images and symbols revealed in the Hebrew Scriptures and made explicit in the New Testament - *Hessed,* the Christian community's care for one another, and the wounded healer. Thus, pastoral care should be based on God's act of care as demonstrated in the Hebrew word *Hessed* which does not mean merely an attitude or an emotion but an emotion that leads to an activity beneficial to the recipient. As an invariable constant, it always was, never ceases and will endure forever (Jonah 4:2, Psalm 85:7, Jer. 9:24). The theocentric of *Hessed's* character is God acts towards people and towards all of creation as loving kindness, where the meaning of care within the world of ancient Hebrew was not abstract but practical - food for the hungry, welcome for strangers, comfort for the bereaved, justice for the oppressed.[22] Therefore, pastoral care should be demonstrated in the Christian community through helping one another (Heb.10:24-25) care and strive for a harmonious community, extending its love and care into the wider community (Rom. 15:7) and through love (John 13:34-35). Further, Heines stated that as we have received

[21] Jeff Haines, *A Biblical Foundation to Pastoral Care,* Ecumenical Institute of Distance Theological Studies, 2011, Un-publish article Available from www.resurge.angefire.com Accessed on February 14, 2016

[22] Willington Institute of Theology, *'Theological Foundation for The Church's Ministries of Pastoral Care'* 2015, Available from www.wn.angliccan.org.nz Accessed on January 25, 2016

comfort from Christ, thereby, we can, in turn, comfort those who are afflicted, which then means we are the wounded healer (2 Cor. 1:3-4).

In delivering the Biblical perspective of pastoral care and counseling, Oglesby described three different ways of psychotherapeutic and behaviour modification, in theory and practice, in approaching clients: by enabling them to *know, do and be.*[23] Oglesby claimed that the Bible affirms the importance of all three approaches, which manifest in the whole story of God's revelation and human's responses. In the Old Testament, the *knowing* refers to the knowledge of God (Exodus 33:13, Jer. 31:34, Job 19:25). The same meaning is carried through the New Testament (John 17:3, Phil. 3:10, 11 Tim.1:12). In regard to *doing*, the Bible reveals the same reference to God as in the case of knowing. The history of Israel affirms blessing for right doing and punishment for wrong doing (Deuteronomy 6). In the New Testament, the importance of *doing* is stressed specifically in Jesus' sermons on the Mount (Matt. 7:21-23), the parable of the faithful servant (Mat. 25:21-23), and the great judgement (Matt.25: 31-46). The notion of *being* is used for the term 'heart' to denote human's essence or being (Prov. 4:23): God looks into the heart (1 Sam. 16:7); with the heart, people believe (Rom. 10:10). Ezekiel sets priority for the heart as *being* over *doing* (The promise of God in Ezekiel – Ezekiel 11:19). In the New Testament, the Beatitude deals with *being* (Matt. 5:8). However, Oglesby stressed that from the Biblical point of view, the therapist genuinely caring –

[23] William B Oglesby, *Pastoral Care and Counseling in Biblical Perspective,* Available from www.int.sagepub.com at The University of Lowa Libraries, Accessed on March 18, 2015

being - for the patient must be the primary concern. The love of pastors towards people should thus motivate them to give genuine effective care.

Donald Capps identified three biblical models of pastoral counseling,[24] which entail the understanding of objectives of pastoral counseling and the pastor's approach to the counseling task: the *psalmic*, the *proverbic*, and the *parabolic.* The *psalmic* model is based on the perspective of the Psalms. Its emphasis is on being responsive - to be with, to understand the deep emotions and feelings of the counselee. The *proverbic* model is based on the perspective of the Proverbs. Proverbs' emphasis is on behavioral change through the counselor's task of admonishment and advice-giving. The *Parabolic* model is based on the perspective of the parable, with emphasis on healing and transforming. The parable on the Biblical account of Peter's and John's encounter with the beggar at the Beautiful Gate is an example of addressing the transformative effects of 'seeing through' the customary expectations. Like Jesus' use of stories to draw attention to the kingdom of God. From the three models, Capps suggested using the *parabolic model* considering that Jesus's parables are concerned with various forms and expressions of caring. This model is not primarily due to skill and technique but to an attitude of care.

Lischer posited that the Sermon on the Mount is the biblical foundation of pastoral care.[25] It illustrates the rules to follow, the essential humanity concerns, and the moral inquiry as well as applies to concrete situations. The sermon wants to show that the

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[24] Donald Capps, *Biblical Model in Pastoral Counseling* (Journal of Pastoral Psychology, Vol. 28(4), Summer 1980), 252-264

[25] Richard Lischer, *The Sermon on the Mount as Radical Pastoral Care*, Available from www.int.sagepub.com at Harvard Libraries, Accessed on July 7, 2015

demands of the Kingdom of God can work even in difficult situations. It makes provisions for degrees of anger (Matt. 5:21-26), it permits an exception to the absolute prohibition of divorce (Matt. 5:22), it talks about broken relationships among people (Matt. 5:21-24), it offers the Lord's Prayer as an alternative to the complicated demands of conventional piety. The context of the Sermon is not discussed only with the professional minister or pastor but with the people themselves; as the whole organism that functions in obedience to the Kingdom of God that should attempt to live it. Further, Lisher insisted that the Sermon on the Mount should become a model of pastoral care based on Christians' radical responsibility for one another because it was derived from Jesus' meditation of God's holiness towards humanity.

Robert W. Gauger, [26] on the other hand, maintained that the life of Jesus should be made the example in doing pastoral care since it was full of his healing and caring towards people in need. Jesus spoke directly about caring for those in need (Matthew 25:34-46). He practically spent his whole ministry with marginalized people and He spoke openly of why He came and with whom He came to associate with (Mark 2:16-17). Jesus was a person of touch. He touched the untouchable to show concern and value to the individual; Jesus clearly had compassion for people (Mark 6:34, Matt. 20:34 Mark 1:40-41, Luke 7:12-13). The practical aspect of Jesus's compassion is demonstrated in the parable of the Good Samaritan (Luke 10: 25-37). Jesus sought to understand people asking questions so that he could find out what was happening and the reason/s for such

[26] Robert W Gauger, *Toward an Example Pastoral Care: Considering the life of Jesus (*Journal of Pastoral Care and Counseling Vol. 68:4, 2014), 1-6

happening in the inner recesses of the soul (Matt. 20”32, John. 1:38, Matt. 8:26, Luke 24:38, John. 5:6).

Sharly B. Peterson[27] in her review on “*What Makes Care ‘pastoral’’* used the Bible verse from Genesis 12:1-2 as the foundation in doing pastoral care. “*Now God Said to Abram, ‘Go from your country and your kindred and your father’s house to the land that I will show you. I will make of you a great nation, and I will bless you, and make your name great, so that you be a blessing.*”[28] Having been blessed and gifted, we are then called by God to share those gifts with others. Furthermore, Peterson stated that there are three elements of pastoral care: being present to others in a loving way; a foundation in caring relationship; and certain things that can be done while with the person.

Carroll A. Wise[29] in her book, *The Meaning of Pastoral Care,* described the living model of pastoral ministry as the person and work of Jesus Christ. Christ as the Word of God implies a self-giving love toward human beings. It is communication from God to humankind on a level far deeper than verbal; it is the level of *being* in Jesus Christ. It is therefore in the very life of pastors, as Christ’s ministers, mediating something of the quality of being a revelation of Christ, coming into living contact with others persons. For David Switzer describes the quality of being a pastor as ‘*symbol of God’s presence’*.

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[27] Sharyl B Peterson, *The Indispensible Guide to Pastoral Care* (Ohio, The Pilgrim Press, 2008), 1-10

[28] Genesis 12:1-2 NRSV (New Revised Standard Version)

[29] Carroll A Wise, *The Meaning of Pastoral Care* (with revision and edition by Hinkle John E), (USA, Meyer-Stone Books, 2014), 1-7

[30]Moreover, Wise stated that the direction of the pastoral ministry of Jesus is as its source. It is directed to the needs of people, to reveal the redemptive love of God to human beings, for redemptive ministry to persons. Jesus as a Servant of God, a suffering Servant who was to live out His mission concretely in the service of others, reaching into the depths of human need and suffering becomes the meaning of pastoral care and pastors' calling. Caring for the needs of people is the real pastoral concern.[31]

In her earlier book, *Pastoral Counseling Its Theory and Practice,* Wise pointed out that pastoral counseling [pastoral care] is concerned primarily with the person.[32] As minister of Jesus Christ, the pastor clarifies his/her role in terms of genuine feelings and attitudes that are compatible with her/his position and function into the total relationship with the person. The essence of a religious ministry is to place human values above institutional values. This is the basic task of a Pastor. With a healthy relationship between Pastor and person, the former may give a great deal that is vital to the growth, welfare and salvation of the latter. In this sense, Pastors not only ministers in the name of God; they bring God to humans in a real way. Moreover, they make the Spirit of Christ a living source for others, to create conditions through which the grace of God operates to produce healing and growth.

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[30] David Switzer, *Pastor, Preacher, Person (*Nashville, Abingdon Press, 1979)

[31] John Killinger, *The Tender Shepherd (*Nashville, Abingdon Press, 1985)

[32] Carroll A Wise, *Pastoral Counseling Its Theory and Practice* (New York, Harper and Brothers Publisher, 1951)

Jesus as the model of Christian minister is an example of how to treat people individually whom He met during His earthly ministry. Jesus' ministry was marked by a clear focus on human need and God's care for those who are suffering. He put persons first. The gospels point out that Jesus spent his time and prioritized his time with such persons.

Leonard Griffith in his book, *We have this Ministry*, explained the meaning of Mark 2:27 *"The Sabbath was made for humankind, and not humankind for the Sabbath"*[33] in relation to prioritizing and valuing the person in church ministry.[34] He added that the calling of the minister was made for persons, not persons for ministers' career. Ministers need to soak their souls in the priorities of Jesus and be reminded constantly that person comes first. To the layman, it could be said that Christian principles are made for persons, not persons for principles. The local congregation need to be reminded that programs are made for persons, not persons for programs. To the whole church throughout the world, it ought to be said that the gospel itself was made for persons, not persons for gospel.

Henri J. Nouwen in his book, *The Wounded Healer – Ministry in Contemporary Society,*[35] stated that the Christian ministry is accomplished only through service, which required the willingness to enter into situations with all the human vulnerabilities. Only

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[33] Mark 2:27 NRSV (New Revised Standard Version)

[34] Leonard Griffith, *We have this Ministry* (Texas, Word books publisher, 1978), 36-39

[35] Henri J Nouwen, *The Wounded Healer – Ministry in Contemporary Society* (New York, Doubleday & Company, 1972)

entering into communion with human suffering can relief be found. Ministers can only offer themselves as a guide to people who are fearful; through guidance the sign of hope becomes visible. The role of the Christian minister is to create encounters between two people. One to one relationship; involved in leading one another from point to point, from view to view, from one conviction to another, to lead people out of the land of confusion into the land of hope. Therefore, Nouwen suggested that ministers must first have the courage to be explorers of the new territory in themselves and to articulate their discoveries as a service to the inward generation.

Sarah A. Butler[36] in *Caring Ministry* similarly claimed that the heart and core of pastoral care is to love as Christ has loved us. Pastoral care is about what we know and who we are, we are simply encountering the other person's pain with an attitude of faith and reliance on the relationship shared with Christ. We only share the fruit of our intimate relationship with Christ by presenting ourselves to others and God is ultimately responsible for healing and wholeness. Caring ministry is a gift from God where all Christians are called to be co-creators, ambassadors, and participants in the Lord's activity of caring for others.

James W. Fowler[37] in his book, *Faith Development and Pastoral Care*, explained that pastoral care is forming lives within the church for purposes of Christian vocation in the world where the care and cure of souls and the formation and transformation of persons are central practices of theology. Fowler considered Church as community of

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[36] Sarah A Butler, *Caring Ministry* (London, Continuum, 1999)

[37] James W Fowler, *Faith Development and Pastoral Care* (Philadelphia, Fortress Press, 1987)

faith, as an '*ecology of vocation'* to respond to God's call and as an '*ecology of care'* to do care. It is the purpose of the Church and Christian vocation to nurture and form men and women to respond in effective faithfulness to the call of God to partner with God's work in the world. To be partner with God's work means entering into solidarity with Christ and his suffering. It therefore means solidarity with those among Jesus said He would be found, the *little ones,* (Matthew 25:34) and being among with whom Jesus placed himself – the alienated sinners (with Zealots, tax collectors, and public women). As we intentionally embrace God's call to partnership with him, it means we grow in the capacity to be part of the reflective image of God.

Alastair V. Campbell in his book, *Rediscovering Pastoral Care,* explained that pastoral care is the true nature of Christian caring. Pastoral care has always emphasized the role of the Pastor in communication with the individual. The person who helps others in pastoral sense does so because such human experiences have developed into a certain personal integrity and maturity. It is not the offering of advice at an intellectual level or skill or counseling skill but as meditation of steadfastness and wholeness, presence of one person with another. Pastoral care is embodied care and care incarnate in Christ.

Tomas C. Oden in his book,[38] P*astoral Theology*, *Essentials of Ministry* posited that visitation [pastoral care] is the best opportunity to do pastoral ministry to relate Christ to the concrete, evolving world of social and personal changes, and to the evangelical. It is a rich context in which to make personal witness to Christ.

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[38] Thomas C Oden, *Pastoral Theology – Essentials of Ministry* (San Francisco, Harper Collins Publisher, 1983)

As earlier mentioned, God is the first initiator of care and love for humankind who revealed Himself in the being of Jesus Christ and living within the suffering of humankind. The Pastor as manifestation of God's images to continue Christ's ministry has to follow Christ's exemplar. The CPE training, as clinical education for spiritual [pastoral] care, through its method of learning could help theological students prepare to become competent and skilful in giving pastoral care ministry.

Significance and Purpose of Clinical Pastoral Education Training Level I in Relation to Pastoral Ministry. The simple definition and purpose of Clinical Pastoral Education are manifested within the name itself, which involves three dimensions of learning.[39] The *Clinical dimension* is learning based on the practice of pastoral care in clinical context. The *pastoral dimension* includes the development of pastoral identity and competence and identifies this learning as a spiritual endeavour. *Education* means that students commit to learning when they enter the program.

Thornton in the *Dictionary of Pastoral Care and Counseling* defined Clinical Pastoral Education as *"...* a professional education for ministry which brings theological students supervised encounters with living human clients in order to develop their pastoral identity, interpersonal competence, and spirituality; the skills of pastoral assessment, inter-professional collaboration, group leadership, pastoral care and

[39] Lotze-Kola Dorothea, *Learning through Play, Dialogue, and Conflict: An Educational Theory for the Supervision of Clinical Pastoral Education* (Journal of Supervision and Training in Ministry, Vol. 22, 2002), 177-190

counseling; and pastoral theology."[40] In defining the term, Joan E. Hemenway[41] emphasized the combination of three important elements in CPE educational methodology: 1) knowledge of psychology (who we are); with 2) knowledge of theology (what we believe); and with 3) process education (how we learn) in order to prepare the students to provide an effective interfaith spiritual care amidst the religious and social complexities of the modern world.

On the other hand, the Association of Clinical Pastoral Education (ACPE) International[42] regards Clinical Pastoral Education (CPE), also known as clinical education or clinical pastoral learning, as a method of learning ministry by means of pastoral functioning under supervision. It is a process model of education, predicated on students' individual needs that are compatible with the program's objectives.

The ACPE emphasis on CPE training is manifested on the association's mission as "advancing exceptional experience-based theological education and professional practice *to heal hurting world*" and vision "We will be an organization where people of diverse faith traditions, backgrounds, and cultures collaborate to provide innovative experiential education. We will lead in the theory and practice of clinical *education for*

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[40] Thornton, *Dictionary of Pastoral Care and Counseling,* Ed. Hunter Rodney J (USA, Abingdon Press, 2005), 177-178

[41] Joan E Hemenway, *Opening Up the Circle: Next Steps in Process Group Work in Clinical Pastoral Education (*The Journal of pastoral Care & Counseling, 59 No.4 Winter 2005), 323-334

[42] Available from http://www.acpe.edu ACPE Standards & Manuals – Definition of Terms 2016, Accessed on January 10, 2016

spiritual care. We will promote and broaden the provision of quality professional theological education in a variety setting (italics mine)."[43]

To demonstrate the significance of CPE training Level I in relation to pastoral ministry, this subsection focuses on what practitioners of CPE do in light of ACPE's vision (to heal the hurting word) and mission (education for spiritual care).

CPE practitioners are concerned with encountering people in crisis. As Anton Boisen exhorted, give attention and listen to the *living human document*; focus as much careful attention on the concrete plight of people in crisis. Boisen stressed the advantages of real clinical learning that could be achieved *only through service* to others.

In addition to investigating the significance of CPE training Level I on students, scholars have also expressed their impressions on CPE training as shown below.

Bonnie J. Miller in her article, *Revisiting the Living Human Web: Theological Education and the Role of Clinical Pastoral Education,* maintained that since the focus of CPE is *living document,* the pastoral care movement bequeathed to theological education at least three elements: 1) increased awareness of sociocultural factors impacting theology and ministry; 2) increased sensitivity to human needs and concerns; and 3) increased appreciation of the role of the humanistic sciences in theological education.[44]

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[43] Silliman University Divinity School CPE Training Manual Handbook 2016, 2 *See also* http://www.acpe.edu ACPE Standards & Manuals – Definition of Terms 2016

[44] J Miller-Mclemore Bonnie, *Revisiting the Living Human Web: Theological Education and the Role of Clinical Pastoral Education* (The Journal of pastoral Care & Conseling, Spring-Summer, Vol. 62, No. 1-2), 3-18

John Maurice Gessell, on the other hand, claimed in his article that CPE deepened and enhanced students in two areas - personal existence and theological reason.[45] The students' relation to the supervisor offers an opportunity for the opening up of their existence. In this matter, the supervisor has a primary role in bringing about the personal growth and understanding of the students. Through the process, students' problems and ego strength, which are, of course, mutually related and affect all interpersonal relationships, will be addressed.

Carroll A. Wise argued that CPE is an essential approach in the making of a Pastor [46] while John Patton emphasizes the importance of ministry practice for being a pastor.[47] The major advantage of CPE training is it allows students to experience personal and pastoral relationships although under supervision. In classrooms, relationships are mainly *talked about* while in CPE training, students *experience* relationship in a context in which they are helped to understand what is actually going on between themselves and others.

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[45] John Maurice Gessell, *What the Theological Schools might Expect from Clinical Pastoral Education* (The Journal of pastoral Care, 17 No. 3 Fall 1963), 148-153

[46] Carroll A Wise, *The Meaning of Pastoral Care,* USA, Meyer Stone Books, 1989), 133

[47] John Patton, *Pastoral Counseling A Ministry of the Church, (*Nashaville, Abingdon Press, 1983)

Timothy Suzuki,[48] a Professor in Central Theological College Tokyo, in his critique of the Theological Education in Japan, explained that Japanese education in general is not praxis-oriented, but tends strongly towards formal and theoretical approaches to learning. It was only changed in 1975 when pastoral clinical training was integrated in the Central Theological College curriculum. The program gave students a chance to have practical learning in hospital or social welfare setting. Through the program, students would also be given opportunities to face the basic issues of their own personal existence and thus deepen their self-insight (spiritual self-understanding) on intense personal relationship so as to integrate theory and practice of ministry. Suzuki emphasized that the main purpose of field work experiences was for the students to understand their individual selves and their own inner qualities as a ministering person more fully through meeting people at the point of their basic anxieties, fears and despair. Moreover, the students were encouraged to re-integrate and re-think the meaning of theological concepts in and through their personal encounters in the field practice.

Narciso C. Dumalagan, the first Filipino CPE leader, wrote that CPE helps heighten one's awareness of own humanity and divinity. CPE brings the person to face one's self, fellow human beings and God. Moreover CPE helps students to discover their strengths and weaknesses. It promotes self-respect, self-actualization, and life generating

[48] Timothy Suzuki, *pastoral Care Formation in the Context of Field Education at The Central Theological College,* on Dumalagan Narciso C, Becher Werner and Taizo Taniguchi (editors), *pastoral Care & Counseling in Asia: Its Needs & Concern* (Philippines, Clinical pastoral Care Association of Philippines, 1983), 115

acts of love.[49] It so for Willimon stresses that awareness of being a pastor who own humanity and divinity becomes the central point for ordained minister.[50]

Howard Clinebell, an author and professor of Pastoral Psychology and Counseling, posited that the best method to train Seminary students in learning interpersonal skills is through a three-step process: 1) achieve a 'cognitive map' in understanding theory; 2) observe a teacher or supervisor in using and demonstrating the skill (from skill emmer into competence); and 3) then practice and use the skill repeatedly in real practice sessions with an opportunity for evaluative feedback from peers and with supervision by someone skilled in clinical teaching methods. Such methods of learning are provided by CPE training.[51] Such training provides an in-depth encounter with oneself. It forces the students to ask searching questions concerning the dynamic meaning of religion in troubled people's lives. It also raises questions of relevance such as 'How is my understanding of religion relevant to the real needs of the patient? Moreover, it helps reveal strengths and weaknesses of one's pattern of relating in all aspects of one's ministry. It provides opportunities to learn to work with others in the helping professions, and to define one's unique professional function and pastoral identity'.[52] Further,

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[49] Narciso C Dumalagan, Espino Jose Ma (editors), *Caring is Healing* (Philippines, A Publication of The Association Pastoral Care Foundation, 1992), 60-64

[50] William Willimon H, *Pastor – A Theology and Practice of Ordained Ministry (Nashville, Abingdon Press, 2002)*

[51] Howard Clinebell, *Basic Type of Pastoral Care & Counseling, (*Nashville, Abingdon Press, 1990), 23-24

[52] Ibid, 421-423

Clinebell suggested that teachers, Pastors and theological students undertake CPE training in order for them to keep their caring and counseling skills growing.

William Hug,[53] a Pastor and psychologist, stated that the importance of CPE training was *the process of becomingness* as a person, a pastoral counselor and a therapist. Hug explained that in CPE training, appropriate combinations of clinical training and personal therapy are offered: the opportunity to grow professionally and personally; and the chance to integrate aspects of one's life in service to other lives. These two major, professional and personal have to be integrated in the being of pastor.[54]

Loren Townsend in her book, *Introduction to Pastoral Counseling*,[55] described the five benefits gained from CPE training: 1) solidified a frame of reference for ministry specialist to focus on mental health needs; 2) provided clinically-trained leaders who would stimulate pastoral counseling specialization; 3) consolidated interdisciplinary knowledge and skills in which practical ministry could test and integrate counseling method; 4) defined ministry to troubled souls in a way that bridged congregational life and another context of health care; and 5) advocated for basic clinical education as part of Protestant seminary education, in helping pastors and students understand intervention.

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[53] William F Hug, *Beyond Theory and Technique; Reflections on the Process of Becoming*, on Estadt Berry K, Blanchette Melvin C (Editors), (*Pastoral Conseling Second Edition*, New Jersey, Prentice Hall Englewood Cliffs, 1991), 66-69

[54] Samuel Calian Carnegie, *Today's Pastor in Tomorrow's World (Philadelphia, The Westminster Press, 1982)*

[55] Loren Townsend, *Introduction to Pastoral Counseling* (Nashville, Abingdon Press, 2009),19-20

Seward Hiltner in his article, *Debt of Clinical Pastoral Education to Anton T Boisen,*[56] explained that the CPE movement has raised the level of psychological consciousness among persons in ministry. CPE's theological reflection has contributed to the making of psychological concepts, theory, and technique available to the reflective minister. It offers appropriate categories and approaches to brighten students' pastoral understanding and to guide their pastoral practice. Increasingly, CPE helps the minister to be critically sufficient; to know the difference between psychology and religion, the relation of faith and healing process and how to bring those elements into creative tension.

In another article, *Fifty years of CPE* 1925 -1975,[57] Hiltner contended that the emphasis of CPE during the first training were the pastoral care, the social service and the social action dimensions of ministry. He further explained that an intense involvement with persons in need and the feedback from peers and teachers made students develop new awareness of themselves as persons and of the needs of those to whom they minister. Thus, from a theological reflection on specific human situations, students gain a new understanding of ministry.

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[56] Seward Hiltner, *Debt of Clinical Pastoral Education to Anton T Boisen*, (The Journal of Pastoral Care, 20 No. 3 Sep 1966), 129-135

[57] Seward Hiltner, *Fifty years of CPE* 1925 -1975 (The Journal of Pastoral Care, 29 No. 2 Jun 1975), 90-98

On his part, Melvin Dowdy pointed out that Clinical Pastoral Education is education for identity.[58] It does so since students expect a more meaningful integration of their theology with their pastoral responses to the human predicament. They understand more their functions during a crisis and the typical ways in which they present themselves in everyday life.

The Impacts of Clinical Pastoral Education Level I. Many studies have documented the changes in the students as a result of their participation in CPE Training Level 1. These studies as presented below reported changes in both the students' personal and professional growth.

Larry Vande Creek and John Valentino conducted a study on what CPE students learn and what changes result from their CPE experience using the psychological instrument (Personal Orientation Inventory), the depression instrument (Beck Depression Inventory), and the personal/professional confidence general expectancy for success scale (GESS) as means of measurement.[59] The study was conducted among 150 students who were in their first unit of CPE at the beginning and then again, at the end of the CPE unit. The result of the study showed that students gained an increased self-awareness as a minister including attention to attitudes, values and assumptions, and the integration of personal attributes and professional function; an increased capacity to evaluate one's

[58] Melvin Dowdy, *Clinical Pastoral Education: Education for Identity* (Article on Duke Divinity School Review, 37 No. 1 Winter 1972), 23-31

[59] Larry VandeCreek & Valentino John, *Affective and Cognitive Changes in First-Unit CPE Students* (The Journal of pastoral Care, 45 No. 4 Winter 1991), 375-386

ministry; an understanding of theological issues arising from experiences; and an increased awareness of the personal role in interdisciplinary relationship.

Donald McQuade who supervised CPE training for seminarians in the Philippines described the changes in the participants in terms of maturity in personality and confidence in manner at the end of the training.[60] It showed that group dynamics between the supervisor and the participants play a role in achieving the training's purposes. Further, McQuade stated that CPE training can lead participants to a deeper integration of their spirituality and their ministry. Sharing and reflection within the group are excellent moments for helping them establish their identity as the priest or minister they hope to be, and for encouraging their desire to develop their own personal sense of ministry more fully in the future.

Mei Lan Chow conducted a research among students who participated in the initial unit of CPE concerning the influence of CPE on Christian Seminarians in the Bethel Bible Seminary of Hong Kong.[61] The goal was to investigate the change in self-esteem and counseling of students after participation in the initial unit of CPE. Chow used the Rosenberg Self Esteem Scale (RSE) to measure their self-esteem and the Counseling Self Estimate (CSE) Inventory to measure the counseling skills of the CPE students (as the experimental group) and non-CPE students (as the control group). Tests were conducted—pre-test and post-test of CPE training—and the scores from both

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[60] Narciso C Dumalagan, Espino Jose Ma (editors), *Caring is Healing*, 130-136

[61] Mei Lan Chow, *The Influence of Clinical Pastoral Education on Christian Seminarians in Hong Kong* (Ph.D. diss., Acadia Divinity College – Acadia University, 2015)

instruments were collected and analysed. The major result of this study was that after their participation in an initial CPE training, students showed improvement in self-esteem and counseling skills; non-CPE students did not exhibit such changes.

Brenda Perry Wallace used qualitative research methodology to explore the lived experiences of students who participated in one unit of CPE training to find out what benefit or impact the training has on the clergy-participants.[62] Selected students who participated in 1 unit of CPE training at the West Indies Theological College were interviewed to find out what they thought, felt, and believed about their CPE experiences. The study revealed a sense of personal empowerment, increased pastoral care competencies, increased sensitivity to suffering, and connectivity to self-care and ministry among the participants. Further, the study concluded that positive social change may occur when pastoral/spiritual care training is provided to clergy and laity to improve their basic/spiritual care skills; and theological education that promotes spiritual care for person in crisis would be beneficial when an avenue is presented for special change to occur in the communities where clergy serve.

Derrickson, Larry VendeCreek, and John Valentino studied the symptoms of depression among CPE students and their impact on their learning.[63] The study used a pre-test and post-test design with a sample of 182 students in 27 CPE Training Centers.

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[62] Brenda Perry Wallace, *Perception of Live Experience of Clinical Pastoral Education Students* (Ph.D. diss., Walden University, 2015)

[63] Paul Derrickson, Larry VandeCreek and John Valention, *Symptom of Depression among Clinical Pastoral Education Students and their Impact on Learning* (Journal of Supervision and Training Ministry, Vol. 13, 1999), 13-19

The findings revealed that there was an increase in self-actualization in students by the end of the CPE Program. By the end of the unit, most students' scores suggested less depression; however, some experienced a greater sense of depression based on their scores.

In a quantitative study on the effect of CPE in professional pastoral competence, Paul Derrickson adapted the Presbyterian Personal Information Form and used a post-test design.[64] Students who have undergone three different levels of CPE training were selected as follows: 1) students who had completed basic unit; 2) students who had completed a residency year in CPE; and 3) students who were supervisors in training. The student-participants were emailed the adapted form and asked to rate their professional growth at the beginning of training and, again, at the end of the training using a rating scale of one to six. The study established that CPE helped students develop competence in visitation and communication skills and personal awareness. Their theological reflection and spiritual development were also enhanced.

Using both quantitative and qualitative methods, Robert G. Anderson reported that the impact of CPE on the ministerial formation of seminarians is positive and multidimensional.[65] In a survey of 25 seminarians who had completed one unit of CPE training, Anderson found out that students rated their learning in the chaplaincy

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[64] Paul Derrikson, *What Does CPE Contribute to Pastoral Competency?* (Journal of Supervision and Training in Ministry, Vol. 16, 1999), 137-143

[65] Robert G Anderson, *The Integration of Clinical Pastoral Education with Seminary Learning: Fostering the Student's Ministry Formation* (The Journal of Pastoral Care, Vol. 50, No. 1, 1996), 13-22

assignment, including the overall context of learning in the particular institution, as the highest. Also, the study revealed the following: the CPE's methodology of learning as the most important way for the student's process learning; contact with supervisor and patients contributed to student's learning in the areas of personal growth and professional growth including self-awareness; and theological reflection helps in providing pastoral care in crisis and self-evaluation, in developing better understanding of theology based on human experience, and in dealing with concrete situations of sufferings and person's questionings. Moreover, the study showed that the students were able to discover mercy, hope, and grace in these situations.

In 1986, David C. Duncombe described a non-institutional CPE Program focusing on street people ministry and the ways CPE students discovered ministering to the former. [66] A group of ten students in the CPE Level I Program during one summer were placed in the San Francisco Bay as a locus for CPE clinical area. The students' experiences were evaluated and the conclusion arrived at was that CPE as an educational method is able to sensitize students to the social, ethical, and political milieu wherein ministry is practiced. When students are put on the street, reality gets much closer, thus, students challenge themselves to integrate their pastoral and prophetic callings. It means that CPE training allows the students to find their pastoral identity as minister by realizing their function. Further, Duncombe stated that at the end, the CPE Program provided the participants a unique context for ministry, greater growth in pastoral identity

[66] David C Duncombe, *Street Ministry CPE: An Experiment in The Height-Ashbury* (The Journal of Pastoral Care, Vol. XLII No. 4, Winter 1988), 339-348

through less identification with institutional authority and more identification with those ministered to as well as a different perspective for ethical and theological reflection.

Alexa Smith[67] interviewed students who have completed one unit of CPE at the Louisville Presbyterian Theological Seminary regarding their training experiences. Participants were selected at random and reported a range of experiences, from very good to very difficult. Their intense daily interactions with others during CPE training – in prison, hospital, and mental health institutions – brought new questions and reflections to the students. When the process works well, students open up their lives, when it does not, it may be gruelling and requires certain disciplines (communication skill and interdisciplinary knowledge) and supervisors. Smith further concluded that the CPE training has the professional self-understanding and personal self-understanding interwoven, and such understanding is used to minister effectively to others.

Margaret O'Donnell's article, *Clinical Pastoral Education of Nurses,* used the learning methodology of CPE training on nurses and the general trend among these nurses who took the CPE Program was 'to have a better self-understanding' through the 'awareness of one's self needs'. "Their heightened sensitivity to their physical, psychological, and spiritual needs also heightens their understanding of the patients under their care." [68]

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[67] Alexa Smith, *Student Responses to Clinical Pastoral Education* on Steere David A (Editor), *The Supervision of Pastoral Care* (Louisville, Westminster Knox Press, 1989), 129-145

[68] Narciso C Dumalagan, Espino Jose Ma (editors), *Caring is Healing* (Philippines, A Publication of Association The Pastoral Care Foundation, 1992), 63-65

Simonne Coene[69] in her article, *Clinical Pastoral Education in the slums of Manila* described the CPE Program she used among the poor in the squatter areas of Makati. Through the CPE Program, Coene aimed to introduce self-awareness and self-expression among the participants. She found out that the participants gained awareness of their emotions discovering ways of expressing these emotions and becoming more alert of their feelings. CPE's impact was a deeper knowledge in one's self. At the end of the program, Coene observed that among the participants' families, quarrels lessened with the participants becoming less judgemental; either they became more accepting, gradually became aware of their own growth or had more good relationship with others.

Biblical Theological Framework

From the review of literature and related study discussed above, pastoral care is ministry to persons, reaching into the depths of human need and sufferings of people to love as Christ has loved us. This type of care is embodied and incarnate in the life, ministry and *being* of Jesus Christ as narrated in the Bible.

Pastoral care's intention is in the very nature and act of God's love towards humanity, which is manifested through the person of Jesus Christ. During his earthly ministry, Jesus Christ gives the following examples of pastoral care through his caring ministry and concern towards humankind: obedience to God and willingness to enter into human suffering; reconcile relationship with God and among fellow human beings; put

[69] Ibid, 67-84

and value person first; and a person of touch and a compassionate one. It is genuine caring for the *being* of Christ that motivates *love;* this is the foundation of pastoral care.

God is the first initiator of care and love for humankind who revealed Himself in the *being* of Jesus Christ and living in presence within the suffering of humankind. Pastors as manifestations of God's image to continue Christ's ministry have to follow Christ's exemplar. It is therefore in the very life of pastors, as Christ's ministers, to mediate something of the quality of being a revelation of Christ. Pastors are not only ministers in the name of God but also bring God to humans in a real way and have to come into living contact with others persons. Thus, the person and the work of Jesus Christ have become an absolute model for pastors in doing pastoral care ministry.

Clinical Pastoral Education Training Level I uses clinical method of learning for theological students based on the practice of pastoral care in clinical context in order to develop students' pastoral identity and competence. As a professional education for ministry, CPE training Level I addresses the fundamentals of pastoral formation, pastoral competence, and pastoral reflection.

CPE practitioners are concerned with encountering people in crisis. They are called to give attention and listen to the *living human document*, to the concrete plight of suffering human beings, achieved *only through service* to others. With their understanding of the sufferers' history and situation, their pastoral care and assessment can offer solace to tortured souls.

According to the ACPE Standards, there are three major purposes of the CPE Training in Level I as follows:[70]

- Pastoral formation is the exploration and development of one's pastoral identity and practice through integrating one's heritage, theology, and knowledge of behavioral and social sciences.
- Pastoral competence is the discovery and use of skills necessary for intense and extensive practice of ministry.
- Pastoral reflection refers to the process of increasing awareness and understanding of, and ability to articulate the meaning and purpose of one's experience in ministry.

As gleaned from the above discussion, Pastors, to become effective in the ministry, need to undergo training to enhance their knowledge, improve their skills and develop their attitude in order to care for people who are suffering and/or in crises. In this context, pastors while still in the Seminary should undergo pastoral training that emphasizes CPE training Level I to prepare them for pastoral ministry. Figure 1 below illustrates how the biblical theological basis of pastoral care provides the rationale for the inclusion of Clinical Pastoral Education in the training of pastors, which serves as the framework for this study.

[70] Available from http://www.acpe.edu ACPE Standards & Manuals – Definition of Terms 2016, Accessed on January 10, 2016

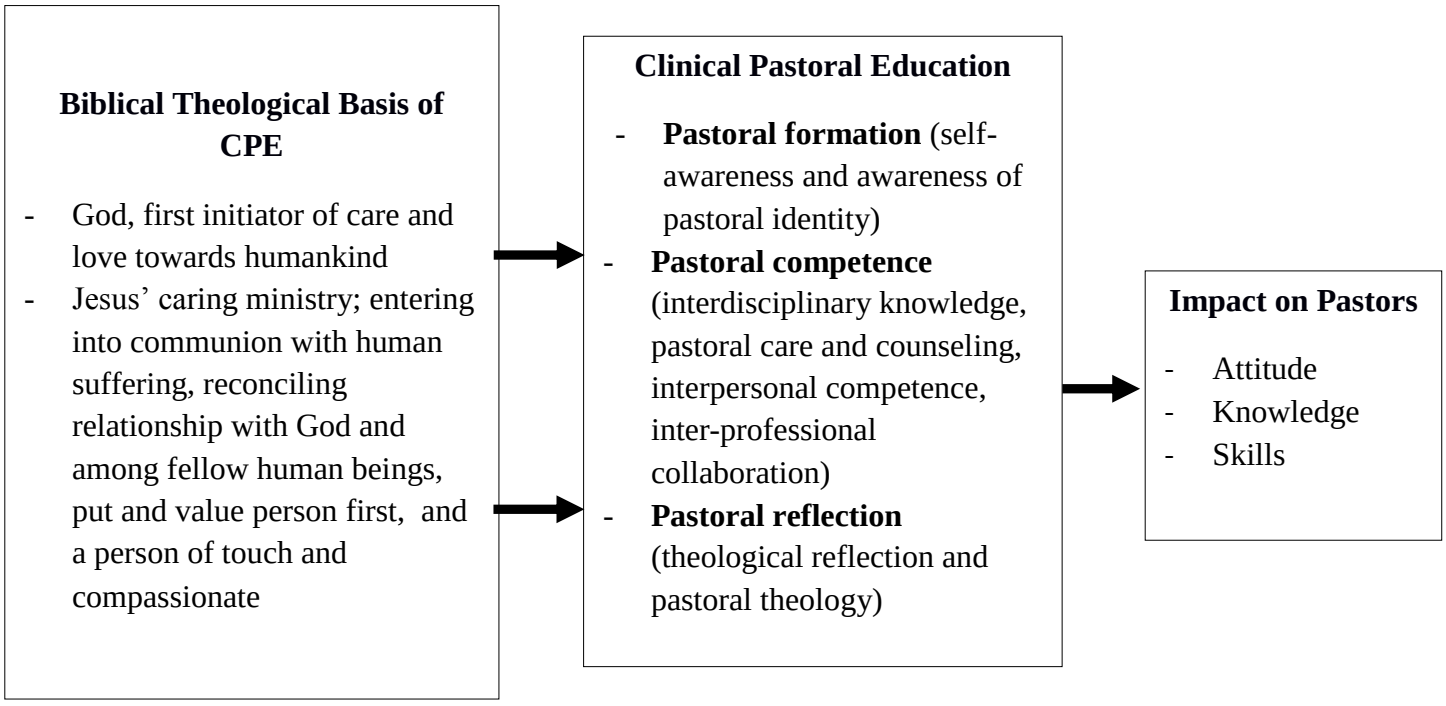

Figure 1. Conceptual Model of the Study

CHAPTER III

METHODOLOGY

Research Design

This research was exploratory in nature considering that there had been no previous studies conducted regarding the impact of Clinical Pastoral Education (CPE) Training Level I of Silliman University Divinity School on its graduates. Moreover, this study was descriptive focused mainly on "help[ing] the researcher define the existence and delineate characteristics of a particular phenomenon at the time of the study"[71] and "describ[ing] present conditions, events, or system based on the impressions or reactions of the respondents."[72] Since this study sought to establish whether or not the CPE training has had an impact on its graduates, it employed qualitative descriptive research methods.

The study utilized Focus Group Discussion (FGD), a qualitative research method, in gathering qualitative information from the participants such as how they made sense and gave meaning to their specific experiences.[73]

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[71] Paul P. Happener, Dennis M. Kivlighan, Jr., and Bruce E. Wampold, *Research Design in Counseling* (California, Cole Publishing, 1992), 194

[72] J.W. Cresswell, *Research Design: Qualitative and Quantitative Approach* (California, Sage, 1994), 14

[73] University of Surrey - Department of Sociology, *Research Update,* England, 1997, Available from www.sru.soc.surrey.ac.uk Accessed on April 24, 2016

In addition, an examination of selected documents such as the annual reports of the Association of Clinical Pastoral Education and pertinent papers from the Silliman University Divinity School CPE Training Center were also undertaken.

Since the researcher was once a participant in a CPE Program and also acted as an assistant supervisor of the CPE Program during the summer of 2016 at the CPE Training Center of the Silliman University Divinity School, her personal experiences and observations had been included as part of the data presented in this study.

Generally, this research involved the identification, classification, analysis, interpretation, and utilization of data gathered. Specifically, it attempted to establish the relationship between their CPE training and the pastoral ministry effectiveness of the Pastor-participants who were all graduates of the Clinical Pastoral Education (CPE) Training Level I offered by the Silliman University Divinity School.

Setting of the Study

The research focused on graduates of the Clinical Pastoral Education Level I of the Silliman University Divinity School.

Geographically, Silliman University is located in the charming city of Dumaguete, dubbed the ‘City of Gentle People,’ which is an hour away by plane from Manila and four hours away by boat from Cebu. Dumaguete City is the capital city of the Negros Oriental Province within Negros Region, a part of the Visayan group of Islands in Central Philippines. Dumaguete City is also referred to as a 'university town' because of the presence of seven universities and colleges within the area. Thus, it is a popular

educational destination for those coming from surrounding places in the Visayas and Mindanao.[74] The premiere educational institution in the city is Silliman University, the first Philippine university established outside Metro Manila and the country's first Protestant school.

Among the academic centers within Silliman University is the Divinity School, which specializes in theological education. It is one of the theological formation centers of the United Church of Christ in the Philippines (UCCP)[75] and is recognized by the Association for Theological Education in South East Asia (ATESEA) as one of the Centers for Theological Excellence of (ATESEA) Theological Union (ATU) [76]

The CPE Training Center of the Silliman University Divinity School is the specific setting of this study. The curriculum of the CPE training Level 1 is in accordance with ACPE standards and guidelines.[77] The Center was established in 2007 and is currently a member of the Philippine Association for Clinical Pastoral Education Practice, Inc. (PACPEP).[78]

The researcher's choice of the setting of the study to conduct a research is also motivated by the fact that the researcher herself is a student of Silliman University Divinity School. In addition, the consideration of time to get access and to communicate

[74] Available from www.dumaguete.com Accessed on August 10, 2016

[75] Available from www.su.edu.ph Accessed on August 12, 2016

[76] Available from www.atesea.net/atesea-theological-union Accessed on August 12, 2016

[77] Silliman University Divinity School CPE Training Manual Handbook 2015

[78] Ibid

to the CPE Training Center of Silliman University Divinity School and to connect with the respondents through the Divinity School was definitely an advantage.

Study Participants

The participants in this study were graduates of CPE Training Level I of the Silliman University Divinity School from 2011 to 2015. An important consideration in the selection of participants was their willingness to share their pastoral ministry experiences before and after taking any CPE training highlighting how the CPE training has impacted on their pastoral ministry.

From 2011 to 2015, there was a total of 35 graduates of the CPE Training Level I offered by the Silliman University Divinity School. Out of the 35, two went on to take advanced level of CPE Training while another one is currently continuing her studies abroad. Four others failed to respond to the researcher's invitation for them to join this study. One other graduate committed to joining the focus group discussion but was not able to come during the scheduled time due to family concerns. Therefore, there were only 27 out of the 35 CPE Level 1 graduates from 2011-2015 who took part in the FGDs.

The researcher grouped her participants into three and, thus, conducted a total of three FGDs. The first session had as participants the CPE Level 1 graduates who were still students of the Silliman University Divinity School, they are now in the Senior year. There were 10 such students who participated in this FGD, which was held on August 25, 2016 at the Silliman University Divinity School. The second and third FGD sessions were devoted to participants who were no longer students; already full-time in the

pastoral ministry assigned in various churches all over the Philippines but there were two students joined the second FGD since they were not able to join the first FGD. There were ten participants during the second FGD, which was conducted on August 29, 2016 at the Silliman University Church Conference Room while seven participated in the third and final FGD session on August 31, 2016 held at the Silliman University Chaplain's Office.

During all the three FGD sessions, the researcher acted as moderator, with help from one research assistant.

Data Gathering Procedure

The researcher used Focus Group Discussion (FGD) as data-gathering method because the study is purely qualitative, primarily focused on investigating the impact of Clinical Pastoral Education Training Level I in terms of attitude, knowledge, and skills from participants' perspectives.

Using the FGD method is primarily a way of gaining information in a short period of time about the breadth or variation of opinions, and of establishing a mechanism of opinion formation from specially selected persons owing to their particular interests, expertise or positions. A series of questions and prompts are used during the FGD session.

To obtain a demographic profile of the participants, the researcher asked each of the participants to fill out an information sheet designed to yield pertinent personal data. To collect qualitative data from the participants particularly their experiences about CPE and

the impact of their CPE training, the researcher prepared guide questions, which were asked during the FGDs (*See Appendix B-4).* The participants' responses were organized by outcome and key themes.

Observation notes and audio-taped discussions were transcribed, and both were analyzed as part of this study's qualitative data.

Before the actual data gathering, the researcher first wrote a letter to the dean of the Silliman University Divinity School seeking permission to conduct a study on "The Impact on Graduates of Clinical Pastoral Education Level I of Silliman University Divinity School" (*See Appendix A-1).* After getting the Dean's approval, the researcher then procured from the Divinity School a list of its 2011-2015 CPE Level 1 graduates.

After getting permission from the Divinity School Dean to conduct her study, the researcher wrote to the Supervisor of the CPE Training Center in the Divinity School asking for authorization to go over/use official documents of the CPE Training Center *(See Appendix A-2).* Consultation/cross-checking with the SU Divinity School CPE Training Center Supervisor was also done to finalize the list of potential study participants. Only students who completed CPE Training Level I in the Divinity School of Silliman University between 2011 and 2015 were qualified to participate in the study.

Another letter was subsequently written, this time, to the qualified participants inviting them to join an FGD and whether they are available for any of the scheduled FGDs (*See Appendix A-3).* An informed letter of consent form was also presented the potential participants stating the nature and significance of the study as well as the assurance of upholding their rights as study participants (*See Appendix B-1).*

The researcher personally conducted the three FGD sessions, with the help of one research assistant. The participants first had to fill out the information sheet (*See Appendix B-2)* before the focused discussion commenced. Following FGD guidelines, the focus group discussions were done after clustering the respondents into three groups. There were 27 FGD participants all-in-all and they were grouped based on their common time availability. The researcher subsequently conducted three focus group sessions with each session lasting for sixty to ninety minutes following the prepared FGD guidelines (*See Appendix B-3).*

It was happenstance that there was a scheduled Silliman University Church Workers Convocation on August 29-31, 2016, thus, the researcher was able to conduct two separate FGDs (one on August 29, the other on August 31) purposely for participants already doing full time pastoral ministry since they came to Silliman to attend the convocation. Otherwise, it would have been impossible for her to gather said participants considering that they were busy with ministerial functions in different parts of the Philippines. The first FGD session (participants still studying in Silliman) was conducted before the said Church Workers Convocation.

Data Analysis Procedure

The analysis of data from the focus groups discussions was done after the responses have been collected and transcribed. The demographic profile of the study participants was based on frequency of responses presented in numerical figures. The

participants responses to the research questions were categorized and analysed thematically.

The data gathered were then organized by grouping participants' answers according to the following sections:

The respondents' responses on the biblical-theological basis in doing pastoral care ministry.

The respondents' answers to questions related to their experience of CPE Training and its significance to pastoral ministry.

The respondents' perspectives on the impact of CPE Training in terms of their own a) attitude, b) knowledge, and c) skills.

The respondents' suggestions on how to improve pastors' skills and knowledge in proving pastoral care ministry.

Ethical Considerations

As required by Silliman University, the researcher first secured ethical clearance from the University Research Ethic Committee (UREC) before proceeding with data gathering (*See Appendix E).* Since some of the potential participants were currently students in the Silliman University Divinity School, the researcher made sure to secure a formal letter of permission from the Silliman University Divinity School's Dean to allow said students to participate in the research. In addition, permission to look at records of the CPE Program of the Silliman University Divinity School was also requested from pertinent authorities through formal letters. She then presented a Research Consent Form

to the identified potential participants stating the purpose of the study and their rights as participants in the course of the research. They were requested to sign the Research Consent Form afterwards to signify their agreement to participate in this research.

The researcher assured the confidentiality of the participants' data, stating that these would only be utilized in accordance with the terms and agreements stated in the Research Consent Form. In this case, all audio-video recordings, transcriptions and documents would only be kept for two years after which these would be destroyed to ensure confidentiality.

CHAPTER IV

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

This chapter presents an analysis of the impact of Clinical Pastoral Education (CPE) Training Level I of Silliman University Divinity School on its graduates' knowledge, skills and attitude in relation to their pastoral ministry. The data collected are presented and interpreted based on the research questions raised in the Statement of the Problem found in Chapter I. Data were gathered primarily through interviews and focus group discussions.

Clinical Pastoral Education Training Center

The Silliman University Medical Center (SUMC) CPE Training Center was established in the summer of 1971 and accredited the following year by the Philippine Association for Clinical Pastoral Care under Rev. Narciso C. Dumalagan, who was then the director of the association.[79] The CPE Training Center was supported by the Silliman University Divinity School, with Yoshio Maruyama as the managing supervisor and Dr. Lucio Mutia as the assistant supervisor.[80]

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[79] Narcisco C Dumalagan, Wener Becher (Editors), 50-54; *See also* Maruyama Yushio, *History, Clinical Context and Educational*, Unpublished paper, Corsicana, Texas, March, 2007; *See also* Silliman University Divinity School CPE Training Manual Handbook 2015, 5

[80] Yushio Maruyama, *History, Clinical Context and Educational*, Unpublished paper, Corsicana, Texas, March, 2007

It was in 2007 when the CPE Training Center was established in the Silliman University Divinity School under the supervisorship of Dr. Lucio Mutia.[81] The current CPE Director of the recently established Philippine Association for Clinical Pastoral Education and Practice, INC. (PACPEP), Dr. Lucio Mutia is also an accredited CPE Supervisor by the Association for Clinical Pastoral Education, Incorporated, USA (ACPE).[82] The Silliman University Divinity School CPE Training Center is a member of the PACPEP INC. and is connected with the Mid-Atlantic Region of ACPE, and ACPE Inc. USA through the presence of Dr. Lucio Mutia.[83] It has four clinical areas of placement of its students, namely: Silliman University Medical Center; Holly Child Hospital; and Negros Oriental Provincial Hospital, together with its Psychiatric Unit in the Talay Rehabilitation Center located in Valencia, Negros Oriental.

Ever since its establishment, the SU Divinity CPE Training Center has aligned its curriculum and components of the CPE training in accordance with ACPE standard and guidelines.[84] Clinical duty, verbatim report, Interpersonal Relations Group (IPR), didactic, Individual supervision are offered as minimum components of the CPE training, together with active participation and attendance during group process, clinical duty and written requirements.[85] The training uses the clinical method of learning. According to

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[81] Ibid

[82] Silliman University Divinity School CPE Training Manual Handbook 2015, 5

[83] Ibid

[84] Ibid

[85] Ibid

the Silliman University Divinity School curriculum, students in the fourth year or Middler year have to undergo basic CPE Training (considered as Level 1) before going for their internship.[86] One of the objectives of the CPE program is to help strengthen the students' personal commitment in the service of God. It further aims to enhance both their theological and psychological meaningful pastoral care skills. With these objectives in mind, the CPE supervisor encourages each student to increase his/her pastoral care knowledge and skills by ministering to persons in crisis in the hospital setting.[87]

Curriculum and Methodology

CPE is an educational training with a unique element of learning. One unit of CPE is equivalent to 400 hours of clinical duty. Students have to spend 300 hundred hours visiting with patients, plus 100 hours of classroom attendance, individual education by student's reading materials and didactic lectures from the supervisor.[88] Through the elements of the training, CPE helps students improve their attitude, develop their knowledge and skills in preparation for their individual pastoral ministry.

The total educational program of CPE Training based on ACPE standard and manual includes the following as its methodology or program components: conceptual/didactic sessions, ministry practice, clinical critique, seminar types, written

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[86] Silliman University Divinity School, *Bachelor of Theology Curriculum Revised 2009*. Available from http://su.edu.ph/ Accessed on April 17, 2016

[87] Yushio Maruyama, *History, Clinical Context and Educational*, Unpublished paper, Corsicana, Texas, March, 2007

[88] Silliman University Divinity School CPE Training Manual Handbook 2015

materials, bibliography, and other creative experiences.[89] Accordingly, the CPE Training Center of the Silliman University Divinity School likewise uses conceptual/didactic sessions and ministry practice. In addition, it also employs case study review or verbatim record, interpersonal relationships with peer group and supervisor, and individual supervision. These approaches, both the Center's methodology and program components, are individually described as follows:[90]

a. ***Conceptual/didactic sessions*** are various inter-disciplinary presentations provided for the group's learning. CPE supervisors and other professionals present information on pastoral, psychological, ethical, and health care issues.

b. ***Ministry practice*** refers to doing clinical training where the students meet the patients on their bedside. It is the place where the student goes to engage in dialogue with the patients, patients' families and hospital staff.

c. ***Case study review or verbatim report*** is the primary tool used in CPE. Verbatim record is a written concrete interaction between student and patients. Vital facts about the patients are assembled, together with an impressionistic description by and the student's reason for making the visit. What transpired during visitation is then reported in detail, including the patient's movement, feelings, and any in the relationship between student and patient. It also includes the prayer that the student offered for the patient. A verbatim record becomes the principal

[89] ACPE Standards & Manuals – Definition of Terms 2016, 6

[90] Silliman University Divinity School CPE Training Manual Handbook 2015, 14-16

instrument for conducting research among the peer group. As clinical material it is reviewed during a s**eminar**: the peer group and the supervisor will help presenters engage their learning issues through the use of support, clarification, and challenge/confrontation. The purpose for the verbatim being brought to the seminar is to provide a forum where the peer group can learn from real ministry encounters and continue to increase the competency of their pastoral care practice.

d. ***Interpersonal relationships with peer group and supervisor*** becomes productive occasions for clinical reflection; everyone can deal with the range of personal issues that clinical pastoral education evokes. It is an opportunity to develop interpersonal relationship skills, a context in which to share personal information and feelings; a place to create an emotionally supportive community and review our pastoral work; an opportunity to learn about group dynamics and group leadership; and a context in which to deal with family dynamics and authority issues.

e. ***Individual supervision*** serves a variety of purposes. It offers a confidential forum where student and supervisor can discuss issues that student may not be ready to deal with in their peer group; to continue processing unresolved issues that arise in the peer group or in clinical material. It is opportunity to review pastoral work, reflect on personal as well as professional growth, and evaluate progress toward individual learning goals which are established at the beginning of training.

Profile of the Participants

As already mentioned, this study focuses on graduates of Silliman University Divinity School, who have completed CPE training Level I at the CPE Training Center of said Divinity School between the years 2011 and 2015. These graduates are the participants of this study.

The demographic profile of the participants includes gender, age, highest educational attainment, present assignment, number of years in the ministry, status as a church worker, and specific year participated in CPE Training. The charts below indicate the statistical figures pertaining to each aspect of the participants' demographic profile at the time of this study.

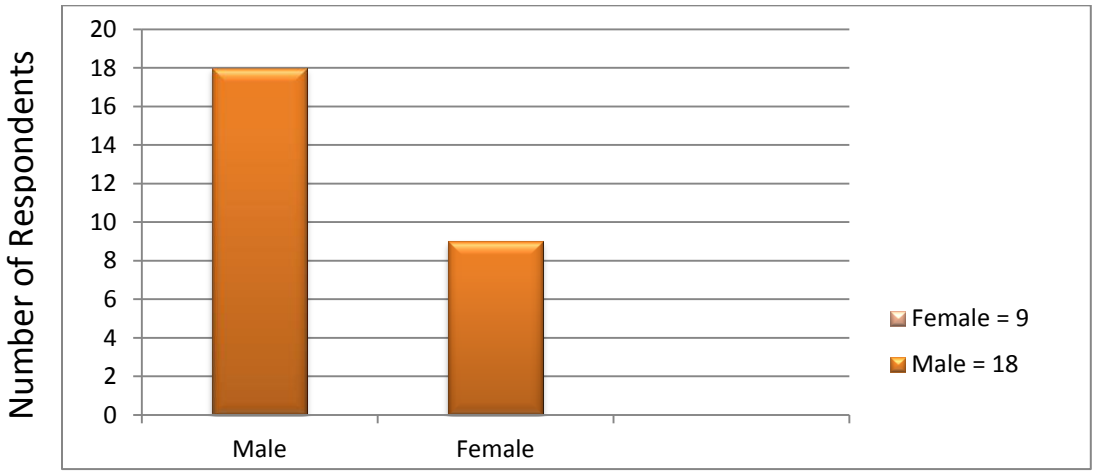

Figure 2. Distribution of Participants according to Gender

Figure 2 shows the distribution of participants according to gender. In total, there were 18 males and nine females who participated in this study.

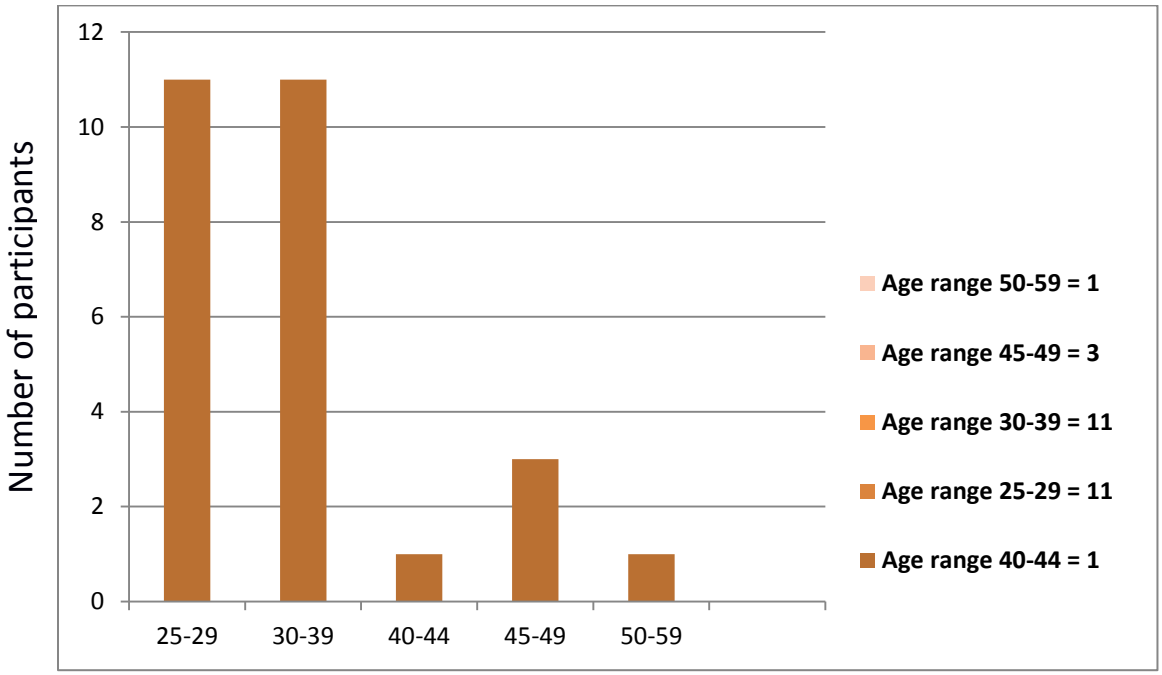

Figure 3. Distribution of Participants according to Age

Figure 3 displays the distribution of the participants according to age. Of the 27 participants, 11 belonged to the 25-29 age range and the same number of participants (11) was within the age level 30-39. Moreover, one participant each belonged to the 40-44 and the 50-59 age ranges while three of them were within the 45-49 age level.

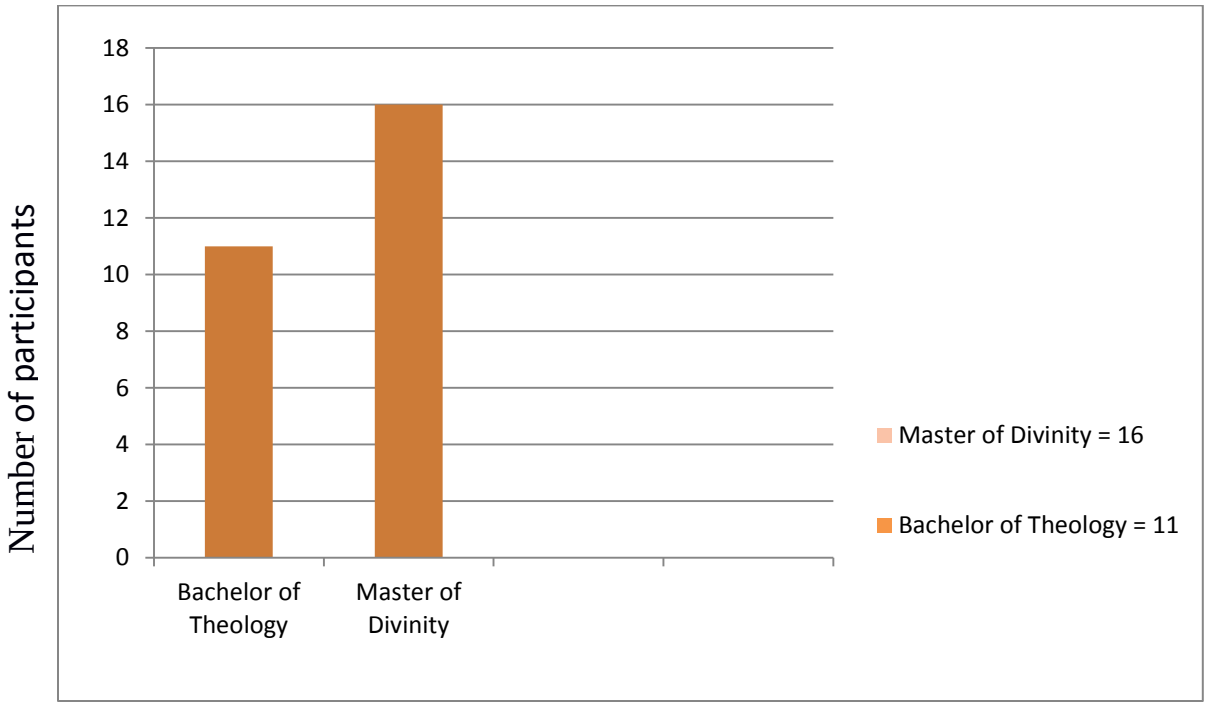

Figure 4. Distribution of Participants according to Highest Education Attainment

Figure 4 presents the distribution of the participants based on their highest educational attainment. Data show that 11 of the participants were completing their Bachelor of Theology while the other 16 participants were enrolled in the Master of Divinity Program.

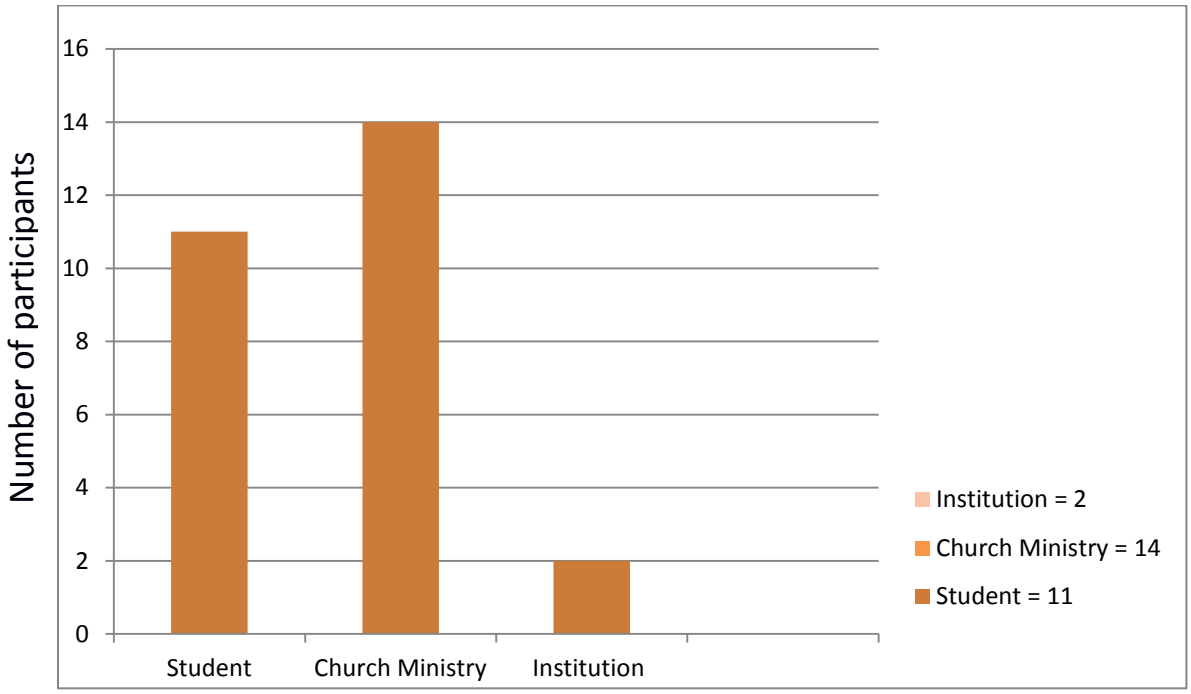

Figure 5. Distribution of Participants according to Present Assignment

Figure 5 shows the distribution of the participants according to their respective present work assignment or involvement. Of the 27 participants, there were 11 students, all studying in the Silliman University Divinity School. All 11 of them were in their senior year of their undergraduate program. Fourteen other participants were already doing their church or parish ministry while the two remaining participants were doing their ministry in institutional (college and hospital) settings. As presented in Figure 4, the 16 who were already into their pastoral ministry were also all enrolled in the Master of Divinity Program.

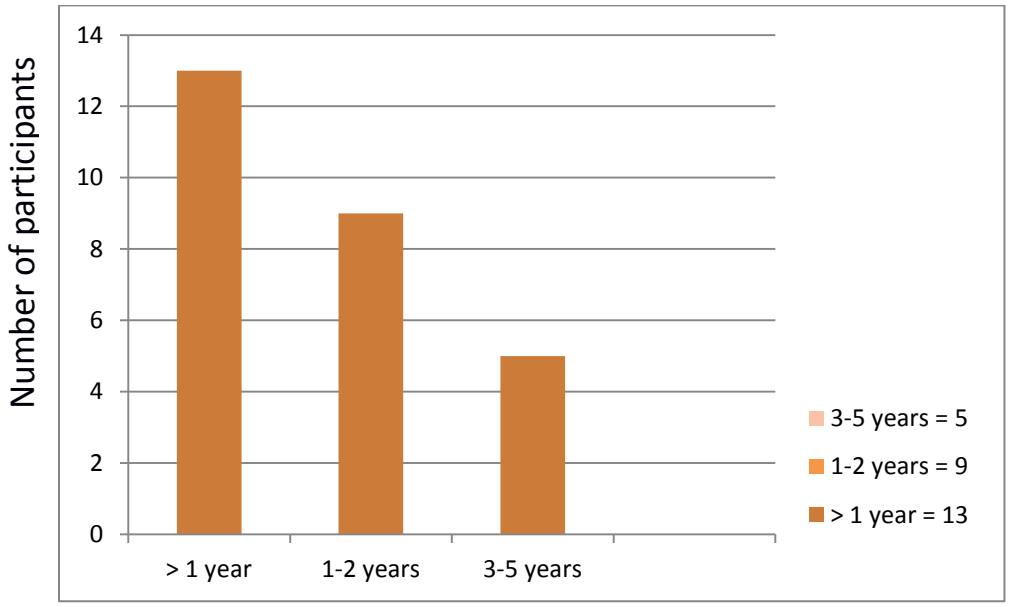

Figure 6. Distribution of Participants according to Number of Years in the Ministry

Figure 6 indicates the distribution of the participants according to the number of years they have been in the ministry. Since a group of study participants were/are students, this study considered their ministry internship, which lasted approximately 10 months, as equivalent to less than a year of ministry. Thus, there were 13 participants who have had less than one year experience in the ministry; nine others who have had 1-2 years involvement in the ministry; and the remaining five participants who have done ministry for 3-5 years.

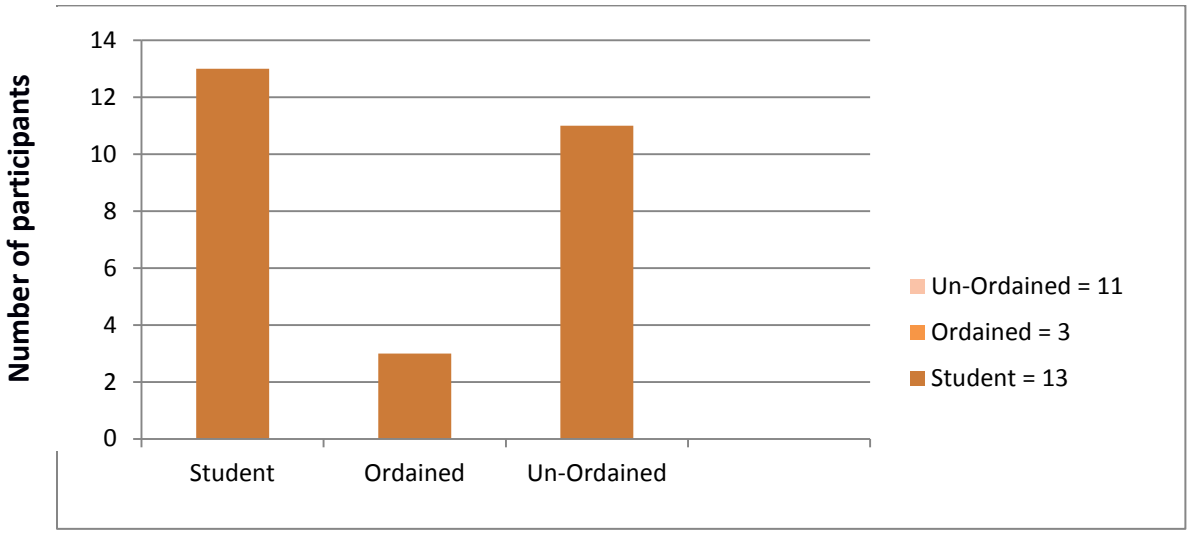

Figure 7. Distribution of Participants based on their Status while doing their Ministry

Figure 7 reveals the distribution of participants according to their current status in terms of their ministry involvement. Thirteen participants were classified as students, three participants were ordained ministers while 11 others were un-ordained ministers.

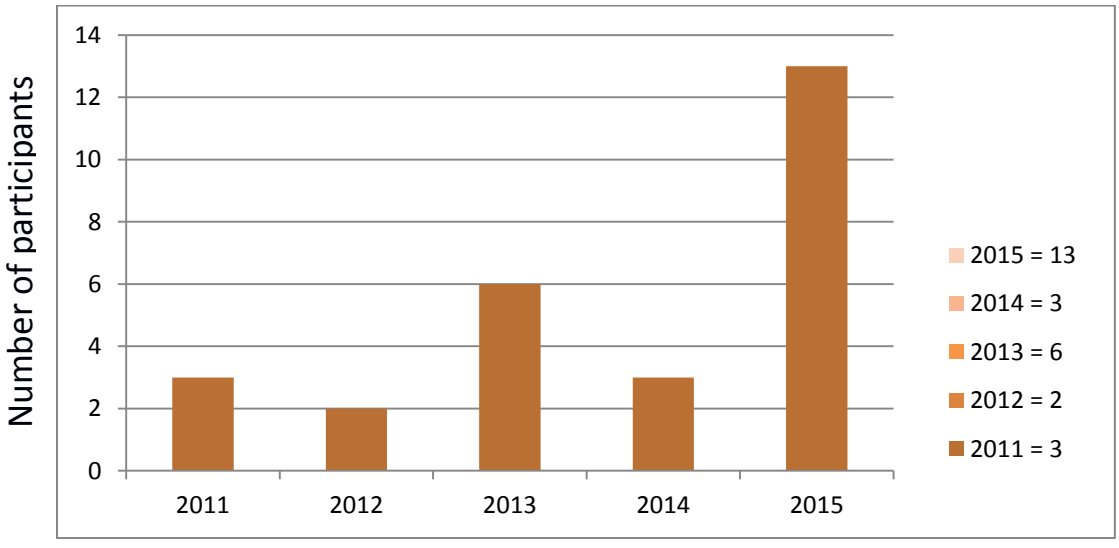

Figure 8. Distribution of Participants according to Year of CPE Training

Figure 8 presents the distribution of participants according to their respective year of participation in CPE Training. Data reveal the year of participation as follows: 13 participants completed their CPE training only in 2015; three had theirs in 2014; six, in 2013; two in 2012; and three participants completed their own training back in 2011.

Biblical-Theological Basis of Pastoral Care Ministry

Several insights on the biblical-theological basis of pastoral care ministry were shared by the participants during their respective FGD sessions. Since there were varied responses from the participants, the researcher categorized their responses into the following themes for purposes of organization and clarity: 1) God always listening to people; 2) Jesus Christ's act of caring and loving; 3) pastors' calling and responsibility being God's ambassadors; and 4) a holistic ministry to people.

***God always Listening to People*.** During one focus group discussion, there were three participants who stated that "God always listening to His people since the beginning, now and always" was their basis and motivation in doing their own pastoral care ministry. These participants quoted a verse from Exodus 3 in the Old Testament, which speaks of how God has seen the misery of people, has heard people's cries, and is concerned about people's sufferings. They explained that the listening ears of God are not only tuned in during our good times but in every situation we are facing. Sometimes people come to God with their anger, failures and blaming Him for these situations. Despite people blaming and only bringing their petitions and needs before God, yet God is always listening to them. His presence remains faithfully everlasting to his people. For

these participants, this steadfastness of God in always listening to people serves as both inspiration and motivation in their attitude towards their pastoral ministry.

These participants' reasoning is parallel with that of Charles DeGroat who stated in his article '*A Narrative Paradigm for Understanding Soul Care'* that God is seen as One who always listens to people in their misery, cries, pain and suffering.[91] Further, DeGroat pointed out that the Exodus story provides an appropriate contemporary context to articulate biblical understanding of pastoral care practice.

Much of the pastoral ministry is in listening. Only God knows what people think and feel (Psalm. 139:1-4) yet God wants us to listen to each other in dialogue and relationship in order to understand thoughts and feelings. To listen to another is to encounter the mystery of suffering in another human being. It is in listening that understanding others thoughts and feelings takes place, affirms pastors' commitment to care, and invites people out of their isolation and into community. To listen to others means willingness to cooperate with the movement of the Holy Spirit and to trust God's healing presence. Listening is the greatest gift that pastors can give. By listening, pastors generously offering the gifts of time, patience, confidentiality, respect, energy, and full attention.[92]

The image of God as a Good Shepherd towards his people as described in Psalm 23 and John 10:11-18 was also mentioned by two study participants during an fgd

[91] Charles R DeGroat, 186-193

[92] Sarah A Butler, 30 -31

session. They emphasised the image of the good shepherd towards the sheep in terms of the ability of the shepherd to listen to the sheep and vice versa. They claimed that the Good Shepherd's image of having a caring attitude towards folks has inspired and motivated them to do the same in ministering to their church members. Moreover, they added that in shepherding context, a good shepherd is able to listen to the voice of his sheep and knows well the condition of each sheep in the same way that the sheep is able to recognize the call of its shepherd or to whom it belongs.

The image of God which manifests as a Good Shepherd refers to the ability of a good shepherd or pastor in knowing how to guide/assist the flock to the right path and the right place to feed them as well as in knowing the flock better by being available when the members need her/him. A shepherding task is not meant for just a single meeting with the flock, but should be instead a continuous oversight and feeding. It suggests a deeply involved relationship. As seen in the images of the Good Shepherd described in Psalm 23 and John 10, the shepherd knows the sheep and the sheep recognizes the shepherd's voice; a caring relationship emerging from the images of the good shepherd, which conveys a faithful and everlasting care; and the initiative of the shepherd to search out the strayed, the lost and the fallen, which is a solicitous concern for the welfare of the sheep. From these images, one of the most vivid aspects of the biblical image of shepherding – from which the term 'pastoral' derives – is courage; courage to the point of risking one's

own life [93] These are ways to describe a pastor, referred to as a *shepherd* who cares for the sheep [94]

Also, good shepherding is pastoral care which manifests in caring relationship; people experience their pastor as one who cares, and cares deeply, one who is willing to enter that risky place where human pain resides. A close caring relationship between shepherd (pastor) and sheep (members) will only develop if pastors are able to know, to understand and to accept their members' feelings in specific situations that they may face. It is in pastoral care where the Gospel and human need meet.[95]

***Jesus Christ's Act of Caring and Loving*.** The statement of Jesus to encourage his followers 'to love our neighbour' as written in in the New Testament (Matthew 22:37-39) was mentioned by two participants as their model or example in doing their pastoral ministry. One other participant cited the Good Samaritan and the act of listening by Jesus to the Samaritan Woman at the well (Luke 10:25-37; John 4). Another participant pointed to the healing act of Jesus towards Jairus' daughter and a woman who had been bleeding for twelve years (Mark 5:21-43) while still another cited the story of Jesus giving comfort to the sister of Lazarus (John 11:17-37) as their own examples of committed pastoral ministry.

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[93] Willam H Willimon, 176

[94] Ibid

[95] Ibid, 178

There was one participant who also maintained that the beginning of the life story of Jesus or Jesus' birth story (Matthew 2:9-12) presents the biblical basis for doing pastoral care ministry. He explained the willingness of the wise men from the East to come to Jerusalem and look for or visit the king of the Jews who has been born. When they found what they were looking for, they shared their joy and offered gifts to Mary [and Joseph], who at that time had nothing and in need.

Jesus' earthly ministry was discharging his full ministry in an immediate confrontation with individuals; it was full of his healing and caring towards people in need. It is directed to the needs of people; to heal the sick, to forgive the sinner, to comfort the bereaved, to feed the hungry, to accept the outcast, and to liberate the oppressed. Jesus was a man who could truly love the unlovable and His task was to reveal the redemptive love of God to human beings, as a ministry of reconciliation. As a Servant of God, a suffering Servant, Jesus was to live out his mission concretely in the service of others, reaching into the depths of human need. Therefore, the act of caring and loving by Jesus Christ gives an immediate pattern on how to do pastoral care ministry: spoke directly with people in need and marginalized, a person of touch, and a compassionate person.[96] And it is to this ministry that the pastors are called.

Pastors' Calling and Responsibility being God's Ambassadors. Some participants mentioned that to do pastoral care ministry is really a Pastor's calling and responsibility. Two participants explained that Pastors are God's ambassadors tasked to

[96] Robert W Gauger, 1-6

make known His love to others according to God's will (Ephesians 2:10). One other participant stated a Pastor should do good to all people (Galatians 6:10) while another two pointed out that Pastors are chosen people and holy priesthood is for offering spiritual sacrifices in pleasing God (Romans 12:1-8; 1 Pet 2: 2-5). Three participants further claimed that Pastors are obligated to keep watch over all the flock and be shepherds of the church of God, to feed and to take care of God's lambs (Act 20:27-28; Jon 21:15-19). There was one other participant who shared that Micah 6:8 from the Old Testament was his basis in doing pastoral care ministry, with the Bible verse emphasizing that God reminds and requires us to act justly and to love mercy as God has shown us.

It is important to note that the participants' responses emphasized pastors (themselves) being God's ambassador, thus, it is their calling and responsibility to do pastoral care ministry. Not surprisingly, this reason has the highest number of participants' responses - nine.

Based on the participants' answers, the researcher observed that the former had a good awareness of their calling to do pastoral care ministry. It is the calling and task of caring for the people on the periphery that test real pastoral concern.[97] Awareness of what kind of a person we are, on the nature and depth of our motivation and understanding effects how we communicate our calling. The pastor's conception of himself/herself and his/her role absolutely contribute to being a good minister.[98] It is of importance then that pastors must be able to examine and to describe themselves whatever their basic beliefs

[97] John Killinger, 14

[98] Carroll A Wise, *Pastoral Counseling Its Theory and Practice,* 8-11

about being a minister as well as their role and functions as ministers because these will be transcribed and communicated to their individual pastoral ministry.

If pastors thought of themselves as God's ambassadors, with pastoral care ministry as their calling and responsibility, then they should act as manifestations of God's images to continue Christ's ministry and to follow Christ's exemplar. Pastors' awareness of their identity is most important for them to think and be effective as pastors. Their awareness of their pastoral identity means awareness of themselves as persons who are serving God in helping others, and others respond towards pastors' function and professionalism. For Switzer, a pastor not only has the power of personal presence but also has an impact as meaningful 'symbol' of God's presence that others may understand and perceive as source of strength and inspiration. [99]

The participants' answers in this section are aptly supported by 1 john 4:7-12, which state: *"7 Dear friends, let us love one another, for love comes from God. Everyone who loves has been born of God and knows God. 8 Whoever does not love does not know God, because God is love. 9 This is how God showed his love among us: He sent his one and only Son into the world that we might live through him. 10 This is love: not that we loved God, but that he loved us and sent his Son as an atoning sacrifice for our sins.11 Dear friends, since God so loved us, we also ought to love one another. 12 No one*

[99] David K Switzer, 19

has ever seen God; but if we love one another, God lives in us and his love is made complete in us." [100]

God has sent His only Son, Jesus Christ, as the assurance of His love of and presence among humankind. In continuation of God's love towards this world, Christ's followers have to love one another. This idea is related to some participants' responses when they described their function *"as God's ambassadors to make known His love to others according to God's will"*. To make known God's love to others is to share the fruit of our intimate relationship with Christ to others by loving one another. Pastoral care is to love, to encounter the other persons' pain with an attitude of faith and reliance on the relationship we share with Christ. It is by presenting our self to their story and brokenness that we can help heal souls of people. Our presence works as a "*sacred word"* which symbolizes God's presence. [101] We need only consent to the presence and action of God within us and God does the rest, responding with the divine surprise, using our limited offerings to effect great works. God uses our willingness just as we manifest His presence as our humble part of God and human collaboration.[102]

Moreover, Jesus gave his disciplines before sending them in his name, with his authority, to carry on his mission and ministry (Matt. 9:35-10:16). They were to preach the Kingdom of God, to heal the sick, cast out demons. In others words, they were to deal

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[100] 1 John 4:7-12 NRSV (New Revised Standard Version)

[101] Sarah A Butler, 11

[102] Ibid 26

with the profound needs of a human being as they had seen Jesus dealing with those needs. Pastors carry out their role and function in an attitude of understanding and acceptance that within themselves speaks the love and acceptance of God. According to Carroll Wise, Christian pastors in their very persons and in their living relationship with people mediate something of the quality of being as found in a larger measure in the revelation of Christ.[103] Pastors bring God to people in a real way, make the Spirit of Christ a living resource for others,[104] therefore, they should go and make themselves available through a caring relationship where the healing power of God will be made available to the people.

Holistic Ministry to People. Matthew 25:34-26 and Luke 4:18-19 were mentioned by seven participants and were pointed out in every Focus Group Discussion session in connection with the role and function of a minister. Since all the participants are pastors of the United Church of Christ in the Philippines (UCCP) Church, Luke 4:18-19 was also stated as their apt confession of faith in their church: "to proclaim good news to the poor, freedom to the prisoners, to recover the blind sight, and to proclaim the year of the Lord's favor."[105] As well, participants maintained that these biblical texts (Matthew 25:34-26

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[103] Carroll Wise A *The Meaning of Pastoral Care,* 1-3

[104] Carroll Wise A, *Pastoral Counseling Its Theory and Practice*, 221

[105] Luke 4: 18-19 NRSV (New Revised Standard Version)

and Luke 4:18-19) aptly describe the real action and practice of ministry towards marginalized people whom Pastors should not miss and forget.

The church plays a very important role in the healing of emotional illness. Medicine may cure a patients' illness but not heal the patient himself. Here the main role of the church is to give spiritual healing, and pastoral care for those who are longing and sick. The ministry of the church has both an *in-reaching* and an *out-reaching* mission to persons, wherever they may be in need.[106] People need to be understood and accepted by a community of caring Christians wherein the Pastor acts as a spiritual leader of the community.

Leonard Griffith[107] explained that a church's ministry when it is consciously patterned on the ministry of Jesus right away its priorities are shown clearly - first and foremost, it must be a holistic ministry to the person. Wherever the church has been faithful to its Lord, it has continued his ministry of making humans' well. Christ's concern is for the humans' total welfare; the church in obedience to Christ must share that concern and be committed to His ministry of making humans whole. It is the simultaneous levels of human caring showing concern for the physical (temporal), moral (Volitional), and spiritual (eternal caring) aspects of humans, which are best seen in creative tension with other dimensions in pastoral care.[108]

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[106] Clinebell Howard, 46

[107] Leonard Griffith, 40

[108] Thomas Oden C., 198 – 199

It means that holistic ministry requires real and practical action – food for the hungry, welcome for strangers, comfort for the bereaved, justice for the oppressed. However, in pastoral care holistic ministry manifests through the act of caring where an attitude or emotion leads to an activity to the recipient.[109] It is seen by helping one another in a caring community and extending love into the wider community. To be partner with God's work into entering in solidarity of human suffering (Luke 4:18) and solidarity with those among Jesus said He would be found, the *little ones* (Matthew 25:34). Therefore, the pastoral care practitioner or pastor has a prophetic responsibility to stand and speak to the public audience on behalf of the suffering people, whom he/she serves privately, who are helpless and oppressed, flayed and cast down.

It is worth mentioning that all the participants' responses on the biblical-theological basis for doing pastoral care ministry are indeed rooted in the biblical text: since the beginning, now and always God listens to his people; inspired by the life and ministry of Christ; as living their ministry calling and responsibility as a Pastor; and as a holistic ministry to people.

CPE Training Experience and Its Significance to Pastoral Ministry

There were two questions designed to get the participants' responses regarding their experience in CPE Training. First question raised was "Explain in what ways was

[109] Jeff Haines, 7

CPE Training different from other theological classes"? In organizing the participants' responses, the researcher came up with three main categories: program curriculum; the learning process; and the training output.

***Program Curriculum*.** There were 12 responses from participants that fit into the program curriculum category. Five of these stated that the CPE Program was more on practical [aspects as compared to other theological classes] and more on ministry in action; two participants pointed out that what they learned in the program was more clearly supported by their clinical experience; and the remaining five participants stated that they learned more from the program the real life story of one's self and those of others. These 12 participants then described the uniqueness of the CPE program curriculum by mentioning the following: it allows confronting and journeying with the real, actual situation of human beings; and it is dealing with pain and human suffering or practical engagement with such through experience. In addition the participants stated that the CPE training learning source is to learn from the life story of oneself and others. It deals with our personal being eversince our early childhood and based on what we have experienced. In others words CPE training is more on practical than theoretical or affective learning as compared to other theological classes.

Not surprisingly, participants described the CPE Training curriculum as neither too academic nor too theoretical; rather, it is more on the practical or it is ministry in action and practice. These responses were, in fact, the most common among the participants' responses in this category. This is understandable since out of the 400 hours

required for CPE Training Level I, students have to spend 300 hours of clinical duty and journeying with the real situation of the patients in their bedside. [110]

Learning Process. There were ten participants' responses that could be categorized under the uniqueness of CPE as a learning process. Three participants stated that CPE Training involves emotions and how to understand the meaning of nonverbal communication. Four other participants claimed that the CPE Training involves learning about healing, compassion, and reconciliation. Moreover, two participants pointed out that self-reflection is crucial throughout the learning process of CPE Training while another opined that such training reminds and maintains your identity as a Pastor.

It is the purpose of CPE Training to lead participants into a deeper integration of their spirituality and their experience of clinical duty. The focus of CPE Training is *living human document* where students *experience live* relationships in a context in which they are helped to understand what is actually going on between themselves and others.[111] This is an excellent moment for helping them establish their identity as the Pastor they hope to be, and giving them a desire to develop their own personal sense of ministry more fully in the future as a Pastor.[112] As one participant aptly said, *"CPE Training reminds and maintains your identity as a Pastor".* How students are seen themselves and what they do in the ministry contribute significantly to their sense of *being* a Pastor.[113]

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[110] ACPE Standards & Manuals – Definition of Terms 2016, 6

[111] Carroll A Wise, *The Meaning of Pastoral Care,* 133

[112] Narciso C Dumalagan, Espino Jose Ma (editors), 130-136

[113] John Patton, 49

The change of the participant in terms of personal maturity and self-confidence at the end of the training is one expected result based on the CPE Training methodology. For example, such maturity and confidence could be manifested in dealing with and meeting new people since the students had ample exposure to new people and environments during their clinical duty. When entering a new role and a new environment in the hospital setting, students may feel as if they are strangers, and, thus, feel displaced. Nonetheless, most of the students discover parts of themselves that they did not know before. Both patients and students start as strangers to each other and yet, as time goes on, students' self-confidence in dealing with and confronting new and stranger patients will grow. This means professional self-understanding and personal self-understanding interwoven.[114]

Students' ability to engage in personal reflection to understand themselves much better helps them to be more aware of their own weaknesses and strength, and to accept and reconcile themselves with who they are. It involves students presenting themselves in supervision by using variety of methods as follows: reflection papers such as verbatim accounts; theological reflection papers; group meetings; sermons; peers and supervisors.[115] The process of training requires the students to have to go back and study their early childhood life in order to understand their present attitude. For instance, one of

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[114] Alexa Smith, *Student Responses to Clinical Pastoral Education* on Steere David A (Editor), 143

[115] Robert G Anderson, 19

the written requirements in CPE Training is to provide a "Spiritual Journey Paper".[116] This paper is about the story of an individual student's spiritual journey which provides an opportunity to examine the impact of own personal religious life on his/her story. The paper will be shared with the peer group and the supervisor helps the student to gain understanding of self through a different perspective. According to Ben Campbell Johnson, the effective minister needs to have understanding of his/her own life story and the way it affects his/her care of souls [117] and one cannot be a good pastor without looking at her/himself in relation to what they do [118] and this becomes a stack pole in supervision with the students.[119]

Training Output. Five participant responses fit within this category of output of training. This category on training output refers to participants' achievement/s at the end of the training. All the five participants mentioned that CPE Training is not only simply a theological training but it also helps the participant to be skilful and develop self-awareness. Two participants stated that they became good listeners after their training while the other three participants maintained that through self-awareness, they each were able to discover their own strength and weaknesses.

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[116] Silliman University Divinity School CPE Training Manual Handbook 2015, 18

[117] Johnson Ben Campbell, 39-49

[118] John Patton, 12-14

[119] David A. Steere (Editor), 148

One participant said that *"CPE not only simply as a theological training but also helps the participant to be skilful in listening and compassionate".* This is a crucial output of the CPE Training. It is connected with what have been described earlier in the introduction of this study and pointed out in the review of related literature, specifically, that CPE has a dual purpose - "to enhance students' personal growth, and to develop students' professional skills and competences*"*. This idea is similar to that expounded by Loren Townsend that despite clinical training in seminary education, it is CPE Training that consolidate interdisciplinary knowledge and skills for pastoral care.[120]

A follow-up question was asked the participants regarding their CPE Training experience. They were specifically asked, "What is the significance of CPE Training in relation to your pastoral ministry?"

Based on the participants descriptions, CPE Training definitely has had an important part in and contributed a lot to their pastoral ministry. In organizing the participants' responses, the researcher divided these into two categories, although both are within the pastoral effectiveness definition: personal character or personalityistics, and pastoral skills.[121]

Personal Character or Personalityistics. There were 13 participants' responses that were related to personal character or personalityistics. Four participants claimed that their CPE training made them become aware and accept their own weaknesses as well as

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[120] Loren Townsend, *Introduction to Pastoral Counseling,* 19

[121] See page 10, *Definition of Terms*

discovered their own strength in the course of doing pastoral ministry. On the other hand, five participants stated that they were more confident, courageous, sensitive and empathic in dealing with other people while another said she learned more how to appreciate life in pain and joy. One other participant responded to the question by revealing that he was able to conquer his own fear of the dead and dying issues. Moreover, another participant has learned to be alone and live independently in the rural area and still another, learned to appreciate others by not prejudging them.

The participants clarified that awareness and acceptance of their own self was the result of being confronted with the real situation of patients during their clinical duty. Moreover, they shared that standing and being present among a sea of sick people who were in pain, with bad odor, dying, experiencing sleepless nights, and knowing firsthand fear of the patients' family have contributed in making them become more sensitive, empathic and appreciative of life either in pain or of joy. Inasmuch as during their CPE training, the participants routinely had to render 24 hours of clinical duty, this situation helped them to be more brave and confident in doing their duty alone. Such training strengthened some participants' capability to live independently in the rural area while on their pastoral assignment. These experiences they had during their CPE training helped participants be more effective in their pastoral ministry, especially in ministering to the sick and dying members.

It is important to note that the participants acknowledged the importance of group process in developing their personal character or personalityistics. The stories of their patients whom they encountered while on clinical duty somehow helped them to see and

to reflect on what was going on within themselves after they wrote their paper and shared it with the group. Through clarifications and identifications from their peers and additional points from the supervisor, the participants became more aware of and, even, discovered personal strengths and weaknesses.

Pastoral Skills. Fourteen of the participants' responses were related to pastoral skills. There were five participants who claimed that their ability to understand and to confront different personalities and problem complexities were developed from their CPE Training. Meanwhile, five other participants mentioned that the ability to establish a caring dialogue, sharing for the healing process to take place as well as listening should be the main concerns of pastoral ministry and not solving problems. On the other hand, the ability to confront and to minister on the dead and dying issues was highlighted by two participants. Finally, two other participants revealed that as a result of their CPE training, they were able to overcome the issues of rejection and not to be burdened with the complex problems of their members.

The participants also noted that during their clinical duty, they needed to visit or deal with patients who were totally strangers to them. Some of these patients welcomed their presence while some rejected them. Throughout the process, these situations helped the participants to accept the different attitudes of their patients, an exposure which later on helped them to be able to confront different personalities of church members, with their various and complex problems.

It was surprising that some participants opined that pastors should not be solving their members' problems rather, they should be concerned with their ability to establish caring relationships with members who need their pastors. To get more participants' insights as to the meaning of "*not to solve the members' problems"*, the researcher asked the participants of that particular fgd session what the pastor should be doing then during visitations. Said participants claimed that the healing process will take place through the caring relationship when the pastor is able to listen to the members' problems. They added that pastors should listen to members with their problems and not run or hide from their sheepherding responsibility.

As shown in the preceding discussion, the dual purpose of CPE Training - personal growth and professional competence – had parallel manifestations among participants' responses: personality [character] and pastoral skill.

The encounters with person in need, through clinical duty, created opportunities for supervisor to help students deal with their responses in these situations.[122] Supervisor uses therapeutic approach in supervising the students in order to obtain new skills and new knowledge in subordinates for the students' personal growth, which participants referred to as personal character or personalityistic. Personal change and growth is, however, subordinate to the chief goal of obtaining professional skill as minister.[123] The focus of CPE Training is the student as a person in a pastoral role and in a ministerial

[122] J Miller-Mclemore Bonnie, 15

[123] David A Steere., 24-25

relationship, thus when the supervisor addresses the issue of students' personal change, the latter will be able to obtain the capacity to function effectively in a pastoral role.[124]

This is what Howard Clinebell stressed when he said that through in depth encounter with oneself in searching the meaning of religion in troubled people's lives and people in crisis, the helping minister [pastor] not only experiences personal healing and growth and spiritual maturity but also finds strengths and weakness in one's pattern of relating in all aspects of one's ministry. As well, s/he is able to define one's unique professional function and pastoral identity.[125] This is the reason for John Maurice Gessell saying that the Clinical Pastoral Education helps students in two areas: personal existence and theological reason that is significant to students' pastoral ministry. Further, Gessell opined that when grappling with the fundamental question of one's life meaning, the issues of faith and confidence are of central concern, for it is upon these that the other concerns must rest and on which an effective pastoral ministry will be built.[126]

More analyses and interpretation on pastoral skills are presented in the section on the impact of CPE Training on participants' skills.

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[124] Ibid, 132-148

[125] Clinebell Howard, 421-422

[126] John Maurice Gessell 153

Impact of CPE Training on Participants' Attitude, Knowledge and Skills

***Attitude*.** All 27 of the participants agreed that their CPE Training has helped them in improving their attitude in general. Seven of the participants further shared that the CPE Training made them more self-aware and more accepting of who they are, with their own strengths and weaknesses. Five other participants stated that they had become more empathic, sensitive, and compassionate to others especially to people in pain and suffering. On their part, because of their CPE training, three participants found a new maturity in dealing with and confronting new and different characters; another three mentioned their improved self-control and easier acceptance of uniqueness in others; and three more participants cited their readiness to be critiqued and to critique as well as to accept rejections. The result of same training was having self-confidence to work with different professionals, according to two participants; being more open to trust others by sharing own thoughts and ideas, claimed another two; and being more patient in listening to own feeling and those of others, shared by two other participants.

Based on the participants' own sharings and perspectives, CPE Training has indeed had a positive impact on their attitude, knowledge, and skills specially in connection with their pastoral ministry. This specific finding from the participants' responses is reflected in the satisfactory achievement of the CPE Level I outcomes, which address the fundamentals of pastoral formation, pastoral competence, and pastoral reflection.[127] *(See Appendix C-2- Satisfactory Achievement of CPE Level I Outcomes)*

[127] ACPE Standards & Manuals – Definition of Terms 2010, 14-15

Based on the frequency of participants' responses, self-awareness was the most commonly cited effect of CPE Training on participants. This finding tallies with what the researcher already discussed above in terms of the significance of CPE Training to pastoral ministry, which helps the participants improve their character or personality (personal growth).

CPE Training sees self-awareness as really important for pastors and has become a stack pole in supervising students.[128] Students in CPE training who offer care have to have - are the most in need of – self-awareness and self-examination. Students learn how to open their own personality before God, to know their fears and wounds. If it is hard to know ourselves, it is obviously even harder to learn and to know others.[129] To be an effective spiritual care giver in a community of faith, pastors must continually examine their own life, its character and structure as well as to examine the quality and character of their own work. This begins with the personal interior life of the pastors; their own identity and self-understanding that influence all other leadership behaviours and relationships. In effect, the inner quality of pastors' own life becomes religious resources in pastoral care.[130] When pastors lack or have little self-awareness or an inadequate theological self-understanding of their work, they are then vulnerable to unwitting participation in the phenomenon of countertransference in pastoral ministry.[131]

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[128] David A Steere. (Editor), 148

[129] Alastair V Campbell, 103-107

[130] CarrolWise A l, 145

[131] William H Willimon, 182

For at least one participant, he learned how to dress up formally/properly as chaplain during his CPE Training, of which he has carried up to now that he is already a full-fledged pastor in the church ministry. This is quite positive considering that one of the guidelines in doing practical ministry (clinical visit) is that all students should follow a proper dress code.[132]

Another aspect that participants mentioned in terms of the impact of their CPE training on their ministry was they became more empathic, sensitive and compassionate to others especially to people in pain and suffering. This is also a positive finding in that students/pastors are expected to mostly spend their time exposing, listening, and journeying with patients on their bedside whether the latter are in pain and suffering or joyful and happy. Since the focus of CPE is *living document*, it makes the theological student aware of sociocultural factors and have an increased sensitivity to human needs and concerns.[133] From this realization we could say that there is positive change and good improvement in personality and attitude of the students during the process and after having undertaken the CPE Training.

As clinical training for theological students, the CPE Training recognizes the crucial meaning or imperative of improving students' - and would be pastors' – attitude. Pastors manifest the image of Christian leadership; as God's priests whose task is to equip the saints for the work of ministry. As leaders of the community of faith, Pastors are not only teachers or shepherds, preachers or spiritual directors, but also as therapists

[132] Silliman University Divinity School CPE Training Manual Handbook 2015, 37-38

[133] J Miller-Mclemore Bonnie, 16

who help evoke spiritually-inclined sentiments in individuals - soothing anxiety, caring for the distressed and healing the maladjusted.[134] People in need may look for psychotherapists or psychologists; but Pastors are different from these mentioned professionals in terms of their self-identity as God's representatives; NOT just emphasizing their acquired knowledge or skills only. This is the uniqueness of pastors, a crucial attribute in helping to improve their attitude.

***Knowledge*.** Everyone of the 27 participants also stated that their CPE Training had impacted their knowledge. In sum, the participants' responses on the impact of CPE Training on their knowledge show their training to have impacted four major areas of interdisciplinary knowledge: knowledge of psychology and behavioural sciences, as cited by 15 participants; knowledge on communication techniques, as mentioned by seven participants; knowledge on pastoral care ministry and healing ministry, as pointed out by four participants; and knowing the context of hospital, hospital ministry and chaplain's service, according to one participant.

During the discussion, the participants who claimed that CPE training impacted their understanding of psychology and behavioural sciences explained that understanding of psychology is needed "in order to have new eyes in seeing others and approaching people in crisis." Moreover, knowledge of psychology and the behavioural sciences is important in them understanding emotional needs; the human as body, mind, and spirit;

[134] William H, Willimon 59-61

the brokenness of people during grieving; and the need for spiritual approaches for the healing process.

As mentioned earlier, students during the CPE Training are expected to engaged in conceptual/didactic sessions. These are various inter-disciplinary presentations provided for the group's learning. CPE supervisors and other professionals present information on pastoral, psychology, communication, ethical, health care issues, and other information. After gaining information from said conceptual/didactic sessions, students then apply these into practice. Later on, what students have experienced from clinical duty would be shared in seminars and individual presentations in the presence of a supervisor who shares comments and insights on the given presentation.

Psychology and behavioral sciences, communication techniques, pastoral care ministry and healing ministry, and knowing hospital ministry were the fields of knowledge that participants enhanced through CPE Training. These findings affirm Joan E. Hemenway's description of CPE Training as the combination of three important elements: knowledge of psychology, knowledge of theology, and process education.[135]

The emphasis of the study on the living human document in CPE Training by listening and observing, in writing cases, and in reading and writing about related theories and books encourages a similar consciousness invoked by psychology and other behavioral sciences among the students. However, though students with CPE Training most likely would be spending time on ministry practice with the living human

[135] Joan E Hemenway, 323

document, Anton Boisen cautioned against the movement of CPE Training that veers towards a too pragmatic and anti-intellectual pattern.[136]

Based on the participants' responses, their CPE Training most commonly impacted their knowledge in psychology and other behavioural sciences. This does not mean that students were mainly studying psychiatry and psychology while undergoing CPE Training. It simply acknowledges the fact that the CPE Training Program is quite steeped in psychiatry and psychology, fields that have put across major theories on human attitudes, which is a central concept in theology in general and pastoral ministry in particular. Students who study theology bring theological questions to bear on the deep crises and other experiences in life, and should return with deeper understanding of theological answers. These are the twin pillars of Boisen's approach, theological and psychological.[137]

According to Loren Townsend, in CPE Training, two traditions of clinical training emerge - psychological and theological.[138] Further, Townsend explained that the model of counseling assumed that the healing power of God was present in each person's life. The counselor's task was to listen and help individuals find the growing edge in their life presented by their current problem. As counselee discovered God's immanent presence, counselor could help sick and troubled people face and assimilate God's plan for their lives. Howard Clinebell stressed that pastors should study in-depth psychology

[136] Seward, Hiltn er *The Debt of Clinical Education to Anton T. Boisen,* 133

[137] Seward Hiltner, *Fifty Years of CPE,* 92

[138] Loren Townsend, 18

and psychotherapy so that they can increase their understanding of the amazing depths and heights within themselves and the persons with whom they have the privilege of being in ministry.[139]

Pastoral care and counseling process requires an active communication. Pastoral care and counseling is fundamentally a process of communication between two persons for the purposes of helping one of them solve life problems. This communication takes place in a number of ways - facial expressions, posture, gestures, and verbalization. Through clinical training, students learn to consider the patients as persons, to seek to understand and accept their feelings, needs, and aspirations by acknowledging and understanding the process of communication between them.

***Skills*.** The CPE Training impact on participants' skills is seen in four major areas: communication, pastoral care and counseling, leadership, and interpersonal relationship. There were 13 participants who considered their CPE Training as having impacted their communication skills; nine participants believed such training impacted their pastoral care and counseling skills; two participants, their leadership skills; and three others, their interpersonal relationship skills.

During the FGD sessions, pertinent participants explained their communication skills to mean how they were trained to use active communication during clinical duty.

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[139] Clinebell, Howard 376

Moreover, communication skills do not only involve listening and responding to verbal communication but also include understanding non-verbal communication such as body language, digging up emotions, and learning techniques in asking questions. For pastoral care and counseling skills, according to participants, these refer to ministering on spiritual aspects such as how to give comfort, give healing touches, offer contextual praying and ministry of presence - to be silent and being with patient have important meanings. Leadership skills are enhanced as a result of the group process. Participants who pointed out leadership ability connected it with the ability to critique and accept being critiqued in their [students'] performance during clinical duty and verbatim reports. These situations developed their leadership skills. This finding is related to the participants who looked at their interpersonal relationship skills as having been impacted by their CPE Training. They claimed that the role of peer group during the training, learning how to welcome and accept every member within the group with their different characters and backgrounds, helped to hone their interpersonal relation skills.

As what has been described above, the nature of the CPE Training is dealing with the living human document, which is basically what pastoral care ministry is all about as well as requiring an active communication. Thus, it is the expressed purpose of the training to develop the ability and skills of students in the areas communication and pastoral care and counseling.

In developing these [students'] skills, the role of the supervisor is very important,[140] according to Dorothea Lotze-Kola as earlier pointed out. The supervisor

[140] Narciso C Dumalagan, Jose Ma Espino (editors), 133

needs to learn how to assess students' particular difficulties and potentials, and test how they respond to his/her intervention.[141] As students reflect on their own knowing in action, they also listen to and make sense of the supervisor's comments. Afterwards, the students return to their clinical areas to practice and design means of being pastoral care providers. They increasingly become professional practitioners as they go out and encounter certain types of situations again and again, and then come back to dialogue, describe, and reflect with their supervisor and with their peer group.[142]

In the CPE Training, interpersonal relationship skills enhance through building process and group meetings facilitating close peer relationships to aid in mutual learning.[143] It signifies a high degree of mutual support, trust, openness, and understanding. In order to achieve such intimacy, students are encouraged to share their own experiences and faith journeys with each other under supervision of a supervisor. More self-disclosure takes place during weekly check-ins, and interpersonal relationship (IPR) groups. In midterm and final evaluations and verbatim presentations, students are asked to extensively examine and share about their own personal experiences that may have impacted their clinical pastoral care. Information revealed can help the group to evaluate and give feedback about the individual's clinical experience. Nonetheless, such matters are ultimately extremely personal and in order to fulfil the demands of mutual sharing, students must very likely disclose, on the spot, information that they would

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[141] Dorothea Lotze-Kola, 181-182

[142] Ibid

[143] Robert G Anderson, 22

otherwise reveal to few people. Through this level of group intimacy and learning and intentional self-disclosure, real interpersonal relationship skills can develop.[144]

These abovementioned capabilities and skills are really required of pastors. Samuel Calian Carnegie[145] in his book *Today's Pastor in Tomorrow's World* posited that people want a pastor who can be described as a perceptive counselor, as one who reaches out to persons under stress with a perception, sensitivity, and warmth that is freeing and supportive. Pastoral care is concerned primarily with the person. People long for one who has integrated a good mind, counseling skills and preaching ability to be incarnate in a person who seeks to minister to them as Pastor. Many people in need see the Pastor as a competent, trusted religious leader they ask to walk with them through their shadow valleys. If the pastor lacks the required skills, such persons receive a stone when they ask for bread. It is presupposed that the pastor has an ability to evaluate persons and their situations as well as communicating skills and the ability to interact well in a given situation.[146]

Suggestions to Improve Pastors' Skills and Knowledge in Pastoral Care Ministry

There were two questions raised during the FGD sessions to get the participants' suggestions on how to improve [Pastors'] skills and knowledge in providing pastoral care

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[144] Howard Clinebell, 24

[145] Samuel Calian Carnegie, 16-18

[146] David K Switzer, 26

ministry. First, the participants were asked to describe their difficulty in doing pastoral care ministry through the question, "What is the most difficult matter/part in doing pastoral care in your ministry?" Organizing the participants' responses on the difficulties in providing pastoral care ministry, the researcher categorized the answer into four sections: limitations on skills and knowledge; church program and structure; cultural hindrance; and pastoral identity.

***Limitations on Skills and Knowledge*.** There were eight participants who commented that having limited skills and knowledge would indeed be a difficulty in doing pastoral care ministry. They explained that if a pastor is not skilled enough in doing pastoral care ministry, s/he tends only to offer prayers especially in dealing with special needs, e.g. demon possession. On the other hand, plain listening tends not to be a feasible compromise, both offering and solving problems, misconstrued as gossiping, and seeing pastoral care as passive ministry.

***Church Program and Structure*.** There were nine participants whose responses were categorized under church program and structure. The absence of pastoral care programs can make pastors hesitant to do visitations and pastoral care ministry. Yet members are not ready to accept new ideas and programs. Such a situation can affect pastor's and members' availability to meet and visit. On the other hand, if there are too many church programs, pastors would not have enough time for visitation, which would also affect the availability of the members to be visited by the pastor. There participants mentioned that structure in the church also became their obstacle in doing pastoral

ministry. This may have something to do with dealing with older or senior pastors, especially if the senior pastors did not have any CPE training background and acted superior over the junior pastors. It is generally true that junior pastors tend to feel inferior to the senior pastors.

Cultural Hindrance. There were three participants who cited cultural hindrance as obstacle to do visitation among members. Because of cultural beliefs and practices, members may hide, pretend or deny their problems and issues since to share or to open up problems especially to authorities like Pastors would be considered shameful or embarrassing.

***Pastoral Identity*.** Seven participants' responses were categorized under pastoral identity issues. Church members tend to think and to limit a pastor's ministry as something that cannot go beyond spiritual concerns (preaching and giving sacrament). On the other hand, pastors tend to absorb every members' problems and yet do not have someone (supervisor) to share these with as a way of unburdening what they have absorbed. In this case, pastors may become overwhelmed and, thus, hesitate to do visitation.

Based on the difficulties that the participants mentioned above, visitation to the members refers to pastoral care ministry. Visitation is often commended as one of the assumed ways that Christian ministers offer pastoral and soul care.[147] Yet to many sincere

[147] Thomas C Oden, 178

pastors, visitation is among the most difficult and distasteful aspects of their work, some feel that they have no time for it, some have great difficulty in this ministry, seeing it as a passive ministry. According to Samuel Carnegie, the loss of confidence in the clergy doing pastoral care in today's churches is rooted in the problem of communication.[148] He explained further that Pastors are theologian witnesses in their various specialties: counseling and education, in which communication is important. How effective pastors are in communicating their task depends upon doing their theological homework; reading, reflection, contemplation and listening.[149]

For the minister, the doors of the parishioners are always open, no special invitation is required, and most are honoured when the pastor visits as s/he is the only one that by moral conviction and tradition does not take fees and service. The pastor should willingly visit from house to house, call upon those in need, give spiritual counsel in due season. If visitation is absent in church programs, it would affect the availability of members to be visited by the pastor. On the other hand, pastors may not have enough time to do visitation because of too many other church programs. These scenarios could pose difficulties and obstacles to do pastoral care ministry,[150] according to some of the study participants.

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[148] Samuel Calian Carnegie, 41

[149] Ibid, 139

[150] Thomas C Oden, 170

Thomas C. Oden stated that visitation is difficult but also character building.[151] He explained that visitation exposes the pastor to risks that could be otherwise avoided, puts the pastor in direct touch at times with mean tempers, explosive conflicts, and compulsive fears. Thus it is important and required for pastors to be skilled and knowledgeable about pastoral care ministries such as communication, pastoral counseling, listening, and interpersonal relations.

In this section, participants were asked a second and follow-up question: "What are your suggestions to improve Pastors' knowledge and skills in doing pastoral care ministry"?

Based on their own CPE Training experience, 17 participants suggested that all theological students and pastors should undergo CPE Training, minimum Level I and that CPE Training should be part of the theological education curriculum. In addition, five participants suggested the following in response to the question asked: developing continuing theological education on pastoral care at the church conference level by conducting seminars and workshops so that those who cannot afford to attend CPE training can be still be equipped with its methods. Four other participants suggested the establishment and strengthening of pastoral care committee in the national church office and at the conference level. One participant also suggested integrating Diaconia subject into the Silliman University Divinity School to enlarge students' vision on pastoral care ministry.

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[151] Ibid, 180-181

As gleaned above, participants gave suggestions based on their own experiences. It is evident from their suggestions that they invested much of their attention on attitude, knowledge, and skills of pastors, skills that they have enhanced in themselves with CPE Training. Most note worthy of these suggestions is that all theological students and pastors should undergo CPE Training for continuation of their pastoral care and counseling education.

To conclude this chapter, it is revealed from data presentation that participants have seen that pastoral care ministry is indeed rooted in the biblical text: as God since the beginning, now and always listens to his people; as inspired by the life and ministry of Christ Jesus; and as living, calling and responsibilities of pastors. Based on the participants' descriptions, CPE Training definitely has important meaning and has impacted as well as contributed to their pastoral ministry. It is crucial to develop pastors' personal character or personality and pastoral skills to be effective in their ministry. As the outcome of the CPE Training Level I that they had completed, the graduate-participants discovered self-awareness and pastoral identity, and developed the ability to implement interdisciplinary knowledge and skills.

CHAPTER V

SUMMARY, CONCLUSION AND RECOMMENDATIONS

This chapter presents the summary of findings, conclusion, and recommendations of the study.

Summary

This study aimed to find out the significance of CPE Training on pastoral ministry. It intended to analyze the impact of CPE Training Level I in terms of attitude, knowledge and skills in relation to ministry from the pastor-participants' perspective.

This research was exploratory in nature employing qualitative descriptive research methods. It focused mainly on whether or not the CPE Training Level I has had an impact on the participating current and would-be pastors.

The participants of the study were twenty 27 graduates of Clinical Pastoral Education (CPE) Level I of the Silliman University Divinity School between 2011 and 2015 who took part in the facilitated Focus Group Discussions (FGDs). There were three FGD sessions held so as to accommodate all the participants. To collect qualitative data from the participants particularly their experiences about CPE and the impact of their CPE Training on their pastoral ministry, guided general questions were used.

In the conduct of the research, the researcher was guided by three major guide question-components of the study: (1) the participants' response on the biblical-theological basis for doing pastoral care ministry; (2) the participants' answers to

questions related to their experience of CPE Training and its significance to pastoral ministry; and (3) the participants' perspectives on the impact of CPE Training in terms of a) attitude, b) knowledge, and c) skills.

The emphasis of CPE training is experience-based theological education and professional practice. It provides innovative experiential education by integrating theory and practice of clinical education for spiritual care ministry to heal hurting world. It promotes and broadens the provision of quality professional theological education in a variety of settings.

The Silliman University Divinity School curriculum considers Clinical Pastoral Education as Spiritual Care Program. It is designed to respond to the needs of the various ministries. Students in the fourth year or Middler year [undergraduate level] have to undergo basic CPE Training, considered as Level 1, before going for their internship.

Through the elements of the training (program components) such as: conceptual/didactic sessions, ministry practice, case study review or verbatim record, interpersonal relationships with peer group and supervisor, and individual supervision, CPE is designed to help students improve their attitude and develop their knowledge and skills in pertinent fields of study. Through its learning methods, students experience personal and pastoral relationships under supervision.

The study revealed that in doing pastoral care ministry, pastors experienced difficulties due to limited skills and knowledge, church program and structure, cultural hindrance, and pastoral identity.

The study found out that CPE Training Level 1, a training offered by seminaries, positively impacted on pastors' attitude, skills and knowledge especially in connection with their pastoral ministry. It is revealed through this study that CPE Training Level I had addressed personal growth and professional competencies of its participants.

Conclusion

CPE Training Level I based on the curriculum and elements of the training program addresses the fundamentals of pastoral formation, pastoral competence and pastoral reflection. There are two current majors offered under the CPE Training Level I Program: (1) awareness of self in understanding of the pastoral identity; and (2) professional pastoral competencies.

Some scholars on pastoral care field, as discussed earlier in the review of related literature, described God as the first initiator of care and love for humankind who revealed Himself in the *being* of Jesus Christ and living in presence within the suffering of humankind. Pastors as manifestations of God's image to continue Christ's ministry have to follow Christ's exemplar. It is therefore in the very life of pastors, as Christ's ministers, to mediate something of the quality of being a revelation of Christ. These are all consistent with the participants' responses on the biblical-theological basis for doing pastoral care ministry, which are rooted in both the Old and the New Testaments. In sum, participants' biblical-pastoral (theological) bases in doing pastoral care ministry are as follows: God always listening to His people since the beginning, now and always; the act of caring and loving of Jesus Christ; as God's ambassador, it is pastors' calling and responsibility; and as holistic ministry to people.

The CPE Training Level I had impacted on the participants' personality and pastoral skills related to their pastoral ministry. In terms of personal characteristics, their CPE training has impacted on the participants' self-awareness; self-confidence; sensitivity; empathy; and ability to appreciate. In terms of their pastoral skills, said training has impacted on the participants' ability to understand and confront different personalities, together with the complexity of their problems; ability to establish caring dialogue; ability to confront and minister on death and dying issues; ability to handle and overcome issues of rejection; and ability to be "un-burdened with complex problems from members."

The CPE Training Level I had impacted participants' attitude, knowledge, and skills positively.

In terms of attitude: self-awareness of their being, acceptance of who they are, of their own strengths and weaknesses; more empathic, sensitive, and compassionate towards others especially to people in pain and suffering; more maturity in dealing and confronting new people with different characters; improved self-control and acceptance of others' uniqueness; acceptance of criticisms, of responsibility to critique, and of rejections; self-confidence to work with different professionals; more open to trust others by sharing own thoughts and ideas; and more patient in listening to own and others' feelings.

In terms of knowledge: expanded knowledge on psychology and other behavioural sciences; on communication techniques; on pastoral care ministry and healing ministry; and on the context of hospitals, hospital ministry and chaplain's service.

Regarding skills: better communication skills; pastoral care and counseling skills; leadership skills; and interpersonal relationship skills.

In view of all the foregoing, the researcher concludes that Clinical Pastoral Education Training Level I has a strong positive impact on pastors' attitude, skills and knowledge related to their pastoral ministry.

Recommendations

Based on the foregoing findings, the researcher proposes the following recommendations:

Every Pastor should be encouraged – if not required, for church ministers' ordination by the national church office – to undergo CPE Training Level I.

The Philippine Association of Clinical Pastoral Education, Inc. (PACPEP), and the Silliman University Divinity School CPE Training Center should encourage more researches on the CPE Training, especially collaborations by social scientists and health professionals. Findings of these researches to be published in professional journals.

The United Evangelical Mission (UEM) as an international communion of churches organization with members in Asia, Africa and Germany, to initiate and support establishment of regional link and cooperation among CPE Training Centers belonging to its member churches. This international link and cooperation will give a chance for every CPE Training Center to develop and strengthen, which, in turn, will provide wider opportunities for CPE graduates to work as pastor, chaplain or spiritual care giver in different countries.

Theological Education institutions, which have yet to adopt a CPE Training Program into their curriculum, specifically those belonging to the Huria Kristen Batak Protestant Church Indonesia, must include CPE Training in their theological education curriculum. The CPE Training Program to be integrated into the theological education curriculum should make CPE Training Level I as a compulsory course and advance CPE Training as an optional course.

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Appendix A-1: Letter to the Dean of Silliman University Divinity School

Rev. Jeaneth Harrish-Faller, Th. D.

Dean, Divinity School

Silliman University

Dumaguete City, August, 2016

Object: Application for authorization

Dear Rev. Harrish-Faller:

Greetings!

I am Lamria Sinaga, a student in the Master of Theology Program, major in Spiritual Care, of the Silliman University Divinity School. I am currently completing my thesis entitled *"The Impact on Graduates of Clinical Pastoral Education (CPE) Level I of Silliman University Divinity School*".

My aim is to find out the impact of the CPE Program on the participants in terms of their pastoral ministry. The target of the study are graduated of Silliman University Divinity School who have undertaken the CPE Training Level I in the Silliman University Divinity School, between 2011 and 2015. This will require me to go through some official records of the Divinity School related with the above matter. In this light, I would like to ask for your authorization so that I will be able to use these records as source of information. In addition, since some of the potential research participants are currently students in their senior year in the Divinity School, I would then request that you allow said students to participate in my research.

Your kind support and favorable action on the above requests will be highly appreciated. Thank you.

Yours faithfully,

Lamria Sinaga

Appendix A-2: Letter to the ACPE Supervisor

Rev. Lucio Mutia, Th. D
ACPE Supervisor
PACPEP President
Silliman University Divinity School CPE Training Center Supervisor

Dumaguete City, August , 2016

Object: Application for authorization

Dear Rev. Mutia:

Greetings!

I am Lamria Sinaga, a student in Master of Theology in Spiritual Care of the Graduate School Program of the Silliman University Divinity School. I am currently completing my thesis entitled *"The Impact on Graduates of Clinical Pastoral Education (CPE) Level I of Silliman University Divinity School*".

My aim is to find out the impact of the CPE Program on the participants in terms of their pastoral ministry. The target of the study are graduated of Silliman University Divinity School who have undertaken the CPE Training Level I in the Silliman University Divinity School, between 2011 and 2015. In this regard, it will be necessary for me to go through some official documents of the CPE Training Center of the Divinity School, Silliman University under your care.

In the above connection, I would like to ask for your authorization so that I will be able to use these documents in the writing of my thesis.

Your kind support and favorable action on the above request will be highly appreciated. Thank you.

Yours faithfully,

Lamria Sinaga

Appendix A-3: Letter to the Pastors

Dear Pastor_____

Dumaguete, Augustus 2016

Object: Invitation to participate in a research project

Greetings!

I am Lamria Sinaga, a student in the Master of Theology Program, specializing in Spiritual Care at the Silliman University Divinity School. I am currently completing my thesis entitled *"The Impact on Graduates of Clinical Pastoral Education (CPE) Level I of Silliman University Divinity School*".

My aim is to find out the impact of the CPE Program on the participants in terms of their pastoral ministry. The target of the study are graduated of Silliman University Divinity School who have undertaken the CPE Training Level I in the Silliman University Divinity School, between 2011 and 2015.

I would like to request about an hour of your time so that I can organize a collaborative a focus group discussion (FGD) to get some concerns related with the research topic mentioned above. I would like to request that you be one of the participants in this FGD considering your experience on the above matter.

You will not be put on harm and information gathered will be held in full confidentiality. If you are willing to participate in the said FGD, please read and sign the research consent form. Your clarifying responses will surely be of great contribution to the completion of my work.

Thanks very much for your cooperation!

Lamria Sinaga

Appendix B-1: Research Consent Form

RESEARCH CONSENT FORM

Title

You are invited to participate in a research study of Master Theology thesis-project. The title of the research study is *"The Impact on Graduates of Clinical Pastoral Education (CPE) Level I of Silliman University Divinity School*".

Researcher

This research study is conducted by Lamria Sinaga – student Master of Theology major in Spiritual Care at The Divinity School Silliman University. The result of this research will be contributed to thesis project done by Lamria Sinaga. The Advisor of this research study is Dr. Victor Aguilan who is a Professor in the Silliman University Divinity School and under Dr. Lucio Mutia a Clinical Pastoral Education Supervisor of the Silliman University Divinity School. Lamria Sinaga can be contacted at + 63 9333 780 148 and email address sinagalamria2@gmail.com

Purposes of the Research

The purpose of this research is to seek and to find out the impact of Clinical Pastoral Education Training Level 1on pastor, in three major areas:

a. Significance CPE training in pastoral ministry
b. Enhancing the participant's skills and knowledge
c. Improving the participant's attitude.

Description of the Research

This research study is expected to take approximately four months. The respondents (participants) of this research are those students who have undergone CPE Training Level I at the Silliman University Divinity School of the years 2011 to 2015. The research is to

study the impact of CPE Training Level I on Pastor; in enhancing skills and knowledge and improving the participant's attitude in relation to pastoral ministry. Result from this study will be use purely for the research project. For participants who are students in Divinity School, the result from this research will not have any impact on all courses you take.

Potential Harms

There are no known harms associated with your participation in this research. However, there may be harms that we don't yet know about. If you chose to participate, you have not waived any rights to legal resources in the event of research-related harm.

Potential Benefits

There are no known benefits to you associated with your participant in this research.

Confidentiality

Confidentiality will be held. No information that discloses your identity will be released or published without your specific consent to the disclosure.

The only people allowed to handle the information and results of this research study are those on the study team of this research project.

Storage and Disposal of Data

All audio-video recording, transcription and documents will be kept for two years after which it will be destroyed to ensure confidentiality.

Publication

The result of this study may be published in book or journal or used for teaching purposes. However, your name or other identifies will not be used in any publication or teaching materials without your specific permission.

Participation

Participation in research must be voluntary. It is anticipated that completing for one session of Focus Group Discussion will take approximately 60 to 90 minutes of your time.

Consent

I confirm that the potential harms, benefits, and alternatives have been explained to me. I have read and understood this consent form. I understand that I may ask question in the future. My signature indicates my willingness to participate in this study.

Subject (name) and signature	**Date**

Appendix B-2: Information Sheet of Respondent

INFORMATION SHEET OF RESPONDENT

1. Name. _____
2. Age _____
3. Gender: Female: _____ Male: _____
4. Highest educational attainment

   Bachelor _____ Master of Divinity _____ Master _____
5. Church/Institution present assignment _____

   _____.
6. Church denomination _____

   _____
7. Number of years in the ministry _____
8. Status as a church worker (minister):

   Ordained _____ Un-ordained _____
9. Year participated in the CPE Training Program _____

Appendix B-3: Focus Group Discussion Guidelines

FOCUS GROUP DISCUSSION GUIDELINE

Purpose of the Study

The purpose of this research is to seek and to find out the impact on Graduates of Clinical Pastoral Education Training Level I of Silliman University Divinity School, in two major areas:

a. Significance of CPE Training to the pastoral ministry
b. Impact on the participant's attitude, skills and knowledge

Some Elements of the FGD

- Format: group session
- Size: 8-12 members per groups
- Length: 60 – 90 minutes
- Data collection: audio – video recording
- Forms of data: conversation, including tone of voice and body language

Key Steps in Conducting the Session

- After brief introduction, the purpose and scope of the discussion are explained
- The discussion is structured around the key themes using probe questions prepared in advance
- During the discussion, all participant are given the opportunity to participate

Approach

There will be a moderator and an assistant moderator in the conduct of the FGD. The moderator leads the discussion, keeps the conversation flowing and takes a few notes to remember comments that he/she may want to use later. The assistant moderator takes

comprehensive notes on the other hand he/she is tasked to respond to unexpected interruption and keeps track of time during the FGD.

The Physical Environment

It is important to choose or to set up a physical space for the focus group that is going to feel welcoming and comfortable to the participants. Refreshment should be provided but should be placed away from the circle to avoid distraction.

Closing Statements

Participants are requested to keep the information stated as anonymous as possible. Questions asked by any of the participants are answered at the time.

The moderator thanks the participants for their contribution to the discussion.

Appendix B-4: Focus Group Discussion Guide Questions

FOCUS GROUP DISCUSSION GUIDE QUESTIONS

A. Biblical-Theological Basis

1. What is the biblical-theological principle/s became your basis in doing pastoral care ministry?

B. Experience Relating to the CPE Training

1. Explain in what ways was CPE Training is different from other theological classes?
2. What is the significance of CPE training in relation to your pastoral ministry?

C. The Impact of CPE's Training

1. Do you believe that your CPE training helped you improve your attitude?
   If yes, how and in what ways?
2. What knowledge from your perspective that have been enhanced by the CPE Training?
3. What skills do you acknowledge that have been enhanced through the CPE Training?

D. Suggestions to Improve Pastors' Skills and Competencies in doing Pastoral Care Ministry

1. What is the most difficult matter/part in doing pastoral care in your ministry?
2. What are your suggestions to improve Pastors' knowledge and skills in offering pastoral care ministry?

I want to thank you again for participating in my research. I will be transcribing the recorded data and interpreting the information we discussed today. In which case, I may have some follow up questions. I would like to contact you again in case I have further questions and clarifications regarding your responses, would this be acceptable? I really appreciate your assisting me in this research.

Thank you very much.

Lamria Sinaga

Appendix C-1: The Objectives of CPE Training Level I (Based on ACPE Standards & Manuals 2016)

STANDARD 309 THE OBJECTIVES OF CPE LEVEL I

CPE Level I enables pastoral formation, pastoral competence, and pastoral reflection. CPE Level I objectives defines the scope of the CPE Level I program curricula. Standard 309 The center designs its CPE Level I curriculum to facilitate the students' achievement of the following objectives:

Pastoral Formation

309.1 to develop students' awareness of themselves as minister and of the ways their ministry affects persons.

309.2 to develop students' awareness of how their attitudes, values, assumptions, strengths, and weaknesses affect their pastoral care.

309.3 to develop students' ability to engage and apply the support, confrontation and clarification of the peer group for the integration of personal attributes and pastoral functioning.

Pastoral Competence

309.4 to develop students' awareness and understanding of how persons, social, conditions, systems, and structures affect their lives and the lives of others and how to address these issues through their ministry.

309.5 to develop students' skill in providing intensive and extensive pastoral care and counseling to person

309.6 to develop students' ability to make effective use of their religious/spiritual heritage, theological understanding, and knowledge of the behavioural sciences in their pastoral care of persons and groups.

309.7 to teach students the pastoral role in professional relationships and how to work effectively as a pastoral member of a multidisciplinary team,

309.8 to develop students' capacity to use one's pastoral and prophetic perspective in preaching, teaching, leadership, management, pastoral care, and pastoral counseling.

Pastoral Reflection

309.9 to develop student's understanding and ability to apply the clinical method of learning.

309.10 to develop students' abilities to use both individual and group supervision for personal and professional growth, including the capacity to evaluate one's ministry.

Appendix C-2: The Satisfactory Achievement of CPE Training Level I Outcomes (Based on ACPE Standards & Manuals 2016)

STANDARD 311 OUTCOMES OF CPE LEVEL I

The curriculum for CPE Level I addresses the fundamentals of pastoral formation, pastoral competence and pastoral reflection through one or more program units. Satisfactory achievement of Level I outcomes must be documented in the supervisor's evaluation (s).

At the conclusion of CPE Level I students are able to:

Pastoral Formation:

- Articulate the central themes of their religious heritage and the theological understanding that informs their ministry.
- Identify and discuss major life events, relationships and cultural context s that influence personal identity as expressed in pastoral functioning.
- Initiate peer group and supervisory consultation and receive critique about one's ministry practice.

Pastoral Competence:

- Risks offering appropriate and timely critique.
- Recognize relational dynamics within group contexts.
- Demonstrate integration of conceptual understandings presented in the curriculum into pastoral practice.
- Initiate helping relationships within and across diverse populations.

Pastoral Reflection:

- Use the clinical methods of learning to achieve their educational goals.
- Formulate clear and specific goals for continuing pastoral formation with reference to personal strengths and weaknesses.

Appendix E: Curriculum Vitae of the Researcher

CURRICULUM VITAE OF THE RESEARCHER

Name	: Lamria Sinaga
Birth of place	: Padangsidimpuan, North Sumatera, Indonesia
Data of birth	: October 23, 1985
Addresses in Indonesia	: Jln. Gereja Kapernaum No. 17, Balige – Tobasa, North Sumatera, Indonesia
Addresses in Philippines	: Mission House Compound No. 1, Piapi, Dumaguete City, 6200, Negros Oriental
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Education Background

2014 – Present	: Master of Theology in Spiritual Care, Silliman University, Dumaguete City, Philippines
2004 – 2007	: Deaconess School of HKBP, Indonesia
2001 – 2004	: Senior High School No. 1, Padangsidimpuan, North Sumatera, Indonesia
1998 – 2001	: Junior High School No. 1, Padangsidimpuan, North Sumatera, Indonesia
1992 – 1998	: Elementary School No. 25, Padangsidimpuan, North Sumatera, Indonesia

Career and Work Experiences

2007 – 2010	: Candidate Deaconess of Huria Kristen Batak Protestant Church (HKBP) at the Deaconess School of HKBP

2010 – 2011	: Ordained Deaconess of the HKBP Church at the Deaconess School of HKBP
2011 – 2012	: Deaconess at HKBP Simpang Padang Duri, District XX Riau
2012 – 2014	: Deaconess at Oecumenical Bureau of Headquarter Office of HKBP
2014 – Present	: Deaconess of HKBP