

The Psychology of a Wounded Healer: Exploring Key Considerations to Foster the Growth and Effectiveness of Black Pastoral Caregivers

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Introduction

It was nearing 9:00 p.m., and I found myself contacting my pastor for encouragement. It was in the middle of my first 24-hour on-call shift of Clinical Pastoral Education (CPE) in a local hospital. The pager had gone off before my CPE group could pray over me and my shift. From 7:35 a.m. that morning to 7:30 a.m. the next, the pager rarely stopped alerting me of families in need of my support. I contacted my pastor as throughout the day I had the experience of being “baptized in death,” with page after page being a person actively dying or having just died. Did my CPE and other clinical education equip me to be an active listener, validate emotions, and be a supportive presence for families in need? Absolutely. However, those skills did not help me address being “baptized in death” nor prepare me for the remainder of my shift. Instead, my awareness of who I am as a Black woman and of my emotions, triggers, theological wrestling at work, and self-care were the essential tools for that moment. I reached out to my pastor, which I knew would be an act of self-care as he was someone who would understand my triggers and how to encourage me while not dousing me in scripture or a sermonette.

The preparation of clergy to engage in effective pastoral counseling, includes educators teaching counseling skills, ways of connecting, and how to access resources for those seeking support. Yet, to provide effective pastoral counseling, one must also understand one’s own identity, struggles, and beliefs concerning God, healing, pain, and wellness. According to Lifeway Research’s 2022 *Greatest Needs of Pastors* study, 63 percent of pastors ranked stress as their top mental challenge.¹ Therefore, incorporating self-care, which includes stress management, within a pastoral caregiver’s education is also critical to position the caregiver to implement effective caregiving. This article explores specific areas that address the psychology of Black pastoral caregivers, or what some call wounded healers.

It is important to first set the foundation. According to Howard Clinebell in *Basic Types of Pastoral Care & Counseling*, pastoral care and counseling is one of the most effective ways that the church supports its congregation.² He specifically notes that caregiving can help save the broken, allowing them to have the space to receive the gospel as good news, leading to healing and wholeness.³ Clinebell posits that through

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effective pastoral caregiving, a caregiver who is functioning as a healthy person can cultivate healing and growth.⁴

Pastoral caregiving is one way in which a clergyperson may provide help for people going through times of physical, mental, spiritual, and relational stress.⁵ Pastoral counseling is a form of pastoral caregiving provided by a clergy member who has been trained to provide pastoral counseling for individuals or families.⁶ In this article, I will use the terms 'pastoral counseling' and 'pastoral caregiving' interchangeably to indicate the actions of a clergyperson who has completed specific training to provide effective counseling and clinical support to others in need.

SELF-IDENTITY

In dealing with the psychology of Black pastoral caregivers, it is necessary to present areas of Black identity that the caregiver should explore. How can the caregiver help anyone else if they do not know who they are? In his book *Biblical Counseling with African-Americans*, Clarence Walker helps readers to understand the many areas to explore within the identity of Black pastoral caregivers.⁷ Walker lists several identity-related issues that caregivers must explore as they seek to provide counseling to Black counselees, including ethnicity, gender, sexual, power, and religious issues.⁸ Of these issues, I will elevate one key consideration within the ethnicity context: self-concept. Walker incorporates self-esteem and self-identity within the topic of self-concept. He shares that the primary areas that create self-concept issues for Black people in America are residuals from Africa; adjustments and responses to long-term systematic victimization as a result of racism, poverty, and oppression; and attempts to identify with mainstream Americans. He offers that Black people cope in one of three ways: creating an isolated subculture; solely identifying with American culture; or attempting to integrate the two worlds. He connects Black people's low self-esteem and lack of self-love to the systemic isms that they experience daily, including the dangerous skill of compartmentalizing, or shutting down parts of oneself, to fit role expectations.

Feminist bell hooks suggests ways Black people can repair and heal their self-esteem in her book *Rock My Soul*.⁹ hooks articulates the necessity of healing self-esteem, including by living consciously with awareness of self, others, and the world, and accepting responsibility for oneself.¹⁰ Clinical psychologist Na'im Akbar argues that a Black person's self-acceptance must include acknowledging one's slave mentality, which means also owning the necessity of freedom and healing.¹¹ He cautions that the healing journey will take a significant amount of faith and require one to accurately relearn about the Black experience and Black history, celebrate one's self, celebrate being Black, and engage in healing within the community.¹²

As Walker postulates, when counseling a Black person, it is important to help them explore and understand their history accurately, help them see their value, and raise their self-love and self-esteem.¹³ Therefore, who the Black pastoral caregiver is,

their history, and the traumatic events they have experienced need exploration so they can understand themselves better as well as those they serve. This identity and self-work are critical for Black caregivers. As licensed clinical psychologist and assistant professor Jessica Young Brown argues, “As black Americans, and particularly as black church folks, we hold secrets about our mental and emotional troubles.”¹⁴ When a caregiver ignores these historical implications, internal wounds, and identity confusion and attempts to educate people solely about Jesus, the pastoral caregiver can unintentionally inflict pain and create a barrier between them and the person receiving the care. Before providing pastoral care to others, pastoral caregivers should embark on their own personal healing journey, including receiving counseling from a licensed mental health provider.

WOUNDED HEALERS

The insight provided by Walker, which includes possible self-identity and self-esteem challenges of Black pastoral caregivers as they exist in the United States context full of systemic ism's, demonstrates that caregivers do indeed bear their issues and pains. As Henri Nouwen states, “Nothing can be written about ministry without a deeper understanding of the ways in which ministers can make their wounds available as a source of healing.”¹⁵ This stance of using one's wounds and pains to help others is what Nouwen calls being a “wounded healer.”¹⁶

Nouwen shares that serving through pastoral caregiving requires the willingness “to enter into a situation complete with all the vulnerabilities one human being has to share with another.”¹⁷ He also contends that when a minister is unable to be in touch with and share their own emotions of affection, sympathy, or even anger and be vulnerable, they cannot help another.¹⁸ As Brown notes regarding the lack of emotional and mental wellness in the Black church, “Healing requires that they [Black people] acknowledge their woundedness.”¹⁹ These insights help us to understand why Black pastoral caregivers must get to know themselves and pursue their healing to provide caregiving. Nouwen also cautions that this is not a call for the caregiver to share their secrets, nor to ignore their pain, but rather to keep their experiences in mind as a source of compassion, empathy, and healthy ways to help. Nouwen sums it up this way: “For a deep understanding of our own pain makes it possible for us to convert our weaknesses into strength and to offer our own experiences as a source of healing to those who are often lost in the darkness of their own misunderstood sufferings.”²⁰ Thus, it is vital for pastoral caregivers to be responsible and to unmask and allow the healing of their pain.

BELIEFS TO WRESTLE WITH

To follow Nouwen's prescription that the pastoral caregiver should offering their past sufferings as a way to help others heal, the caregiver must deal with their pain, engage in counseling with a licensed mental health professional, and heal in Jesus.

Then, they can walk out their testimonies. Testimonies are gifts from God that allow pastoral caregivers to teach others about Jesus while glorifying God by sharing how the Lord brought them through or supported them within life's challenges. Testimonies and the sufferings that birthed them are a major element that develop one's beliefs, including one's beliefs about God, healing, suffering or pain, and wellness.

Oftentimes, clergy serve without considering what they believe regarding healing, suffering, pain, and wellness. They may shout, "Jesus heals!" yet have not explored what they think that means, who it applies to, whether it can occur now or only in heaven, and other theological wonderings. Counselees will surely come to pastoral counseling with deep questions as they struggle to make meaning of their situation. Thus, pastoral caregivers must do this belief wrestling as well.

Clinebell highlights the importance of doing theology in pastoral caregiving. He argues that in this theological wrestle, one breaks from tradition as one challenges and reinterprets the biblical text. As a person engages in reinterpretation of the biblical text, new understandings of healing and pain will shape them and the ways they assist others in pastoral caregiving.²¹ The pastoral caregiver views life differently as a result of their experiences, which supports the need for them to revisit their current thoughts on God, life, suffering, pain, healing, and wellness and to be open to receiving new revelations. Not engaging in this theological wrestling can lead a pastoral caregiver to share ill-fitting scripture or biblical narratives that can be harmful when they have not thought through the layers of meanings and implications in the context of the suffering person seeking help.

WOUNDED HEALERS WHO DO NOT NEGLECT SELF-CARE

Engaging in theological wrestling, self-identity exploration, and healing is strenuous work. So is providing pastoral caregiving, particularly when a pastoral caregiver serves without sufficient self-care. God is all-powerful and can seem superhero-like, yet no human is God or a superhero. Thus, it is vital to engage in ongoing self-care.

Clinebell has helped clergy over the years deal with a loss of excitement, motivation, and zeal as they deal with burnout, which at times results in depression and distress. He shares that this is usually related to too-busy schedules and neglect of self-care.²² Clinebell elaborates on and shares the strain on clergy who are called on to care for dependent congregation members.²³ Yet, pastoral caregivers are not without sources of help. Clinebell offers clear options, such as setting healthy and clear boundaries, engaging in additional training to be equipped for their role, and getting enough sleep.²⁴

Referring a person to receive care from a licensed mental health professional is also a form of self-care; this is essential if the person is suicidal or homicidal; expresses unusual sensory experiences or beliefs; engages in serious substance abuse, domestic

violence, or any other form of abuse; or has symptoms that prevent them from performing daily tasks.²⁵ It is a form of self-care to refer a person, even when their care would be within the caregiver's scope of practice, if the caregiver is overloaded, overwhelmed, and/or not available to address the person's needs. As pointed out by Brown, "A referral to someone outside the church is not an indication that we don't believe in the power of God to heal and deliver. It is our affirmation that God works through people, systems, and even medications to provide healing."²⁶

There are hundreds of other types of self-care to consider, ranging from dancing, singing, painting, and walking to seeking counseling for oneself. Rest is one noteworthy form of self-care. As emphasized by theologian and founder of the Nap Ministry, Patricia Hersey, "Grind culture . . . is killing us physically and spiritually. Sleep deprivation is a public health issue and racial justice issue."²⁷ She helps us understand the necessity of resting daily and argues that rest can take many forms, including taking a long shower in silence, praying, regular breaks from social media, intentional listening to music, laughing heartily, going on a prayerful or meditative walk, and drinking warm tea before bed.²⁸ The understanding that lack of self-care can lead to burnout, which can lead to depression, should raise enough alarm for all pastoral caregivers to commit to better self-care. Therefore, it is essential for Black pastoral caregivers to include a commitment to consistent self-care as an essential part of their ministry.

This article has described the importance of self-identity and self-esteem work, the intentional pursuit of healing from wounds and past traumatic events, theological wrestling, and incorporating self-care in the ongoing ministry of Black pastoral caregivers. It has noted that if the Black pastoral caregiver does not engage in self-work, healing, and theological reflection, they may harm those they desire to help. Through the suggestions provided in this article, Black pastoral caregivers can grow to become even healthier healers.

NOTES

¹ Lifeway Research, *The Greatest Needs of Pastors Study*, 2022, <https://research.lifeway.com/greatestneeds/>.

² Howard Clinebell, *Basic Types of Pastoral Care & Counseling* (Nashville, TN: Abingdon Press, 2011), 2.

³ Clinebell, *Basic Types of Pastoral Care*, 2.

⁴ Clinebell, *Basic Types of Pastoral Care*, 7.

⁵ Clinebell, *Basic Types of Pastoral Care*, 8.

⁶ Clinebell, *Basic Types of Pastoral Care*, 9.

⁷ Clarence Walker, *Biblical Counseling with African Americans* (Grand Rapids, MI: Zondervan, 1992), 5–6.

⁸ Walker, *Biblical Counseling*, 5–6.

⁹ bell hooks, *Rock My Soul: Black People and Self-Esteem* (New York: Washington Square Press, 2004), 76–81.

¹⁰ hooks, *Rock My Soul*, 76–81.

¹¹ Na'im Akbar, *Breaking the Psychological Chains of Slavery* (Tallahassee, FL: Mind Productions, 1996), 46.

¹² Akbar, *Breaking the Psychological Chains of Slavery* 34–46.

¹³ Walker, *Biblical Counseling*, 18–19.

¹⁴ Jessica Young Brown, *Making SPACE at the Well: Mental Health and the Church* (Valley Forge, PA: Judson Press, 2020), ix.

¹⁵ Henri Nouwen, *The Wounded Healer* (New York: Crown Publishing Group, 2010), 4.

¹⁶ Nouwen, *The Wounded Healer*, 4.

¹⁷ Nouwen, *The Wounded Healer*, 83.

¹⁸ Nouwen, *The Wounded Healer*, 77.

¹⁹ Brown, *Making SPACE at the Well*, ix.

²⁰ Nouwen, *The Wounded Healer*, 93.

²¹ Clinebell, *Basic Types of Pastoral Care*, 45.

²² Clinebell, *Basic Types of Pastoral Care*, 461.

²³ Clinebell, *Basic Types of Pastoral Care*, 461.

²⁴ Clinebell, *Basic Types of Pastoral Care*, 461–64.

²⁵ Brown, *Making SPACE at the Well*, 41.

²⁶ Brown, *Making SPACE at the Well*, 43.

²⁷ Tricia Hersey, *Rest Is Resistance: A Manifesto* (New York: Little, Brown Spark, 2022), 54.

²⁸ Hersey, *Rest Is Resistance*, 85–86.