CREATING PASTORAL CARE STRATEGIES FOR CHURCHES IN THE 21ST CENTURY: 
THE ORGANIC PROCESS OF DEVELOPING THE PASTORAL CARE PLAN FOR ST 
PAUL’S SYMONDS STREET, AUCKLAND, NEW ZEALAND 

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St Paul’s Symonds Street, Auckland was faced with a unique challenge in 2008. A number of church parishioners were complaining about the lack of pastoral care that they were receiving and as a result they were grumbling about the church leaders and/or leaving the church. While this criticism and its consequences may not be uncommon in many churches today, the reasons behind it in St Paul’s case were. 

The church had mushroomed from a congregation of around 30 persons in 2004 to approximately 1200 parishioners in 2008. In the light of this exponential growth, the existing church staff—gifted as they were—had understandably struggled to keep up with the care expectations and requirements of the church parishioners. 

One initiative that the church leadership implemented in response to this situation was the employment of a designated pastoral care worker. I was the fortunate person to secure this role. Part of my brief was to develop a pastoral care strategy and put it into practice. At the time of this commission, I thought that there would be numerous pastoral care models available for me to glean helpful ideas from, but I was wrong. I was unable to locate a single church pastoral care plan. 

Accordingly, I was faced with the challenge of having to create a unique, pertinent, and robust pastoral care strategy that remained true to the Christian origins of pastoral care and yet simultaneously accommodated the needs of the current St Paul’s parishioners. This was the genesis of this study out of which the following research question emerged: ‘What constitutes an effective church-based pastoral care plan for St Paul’s inner-city context?’ 

In order to craft a helpful response to this question I employed James D. Whitehead and Evelyn Eaton Whitehead’s model and method for theological reflection.1 This model draws relevant information from three important, overlapping sources that inform pastoral decisions—specifically, those of Christian tradition, the community of faith’s experience, and the resources of the culture. The method describes how to gather and then apply relevant information to the given pastoral situation. This entails attending to the available data drawn from the sources identified above; generating assertions from this information to clarify 

1 James D. Whitehead and Evelyn Eaton Whitehead, Method in Ministry: Theological Reflection and Christian Ministry (New York: The Seabury Press). Other helpful pastoral methodologies such as Larrey’s five-phase Pastoral Cycle were considered for this study; however, the Whiteheads’ schema provided the most propitious framework for this project. See Emmanuel Y. Larrey, “Practical Theology as a Theological Form,” in The Blackwell Reader in Pastoral and Practical Theology, eds. James Woodward and Stephen Pattison (Oxford: Blackwell Publishers, 2000), 128-34.
and expand one’s insight; and then deciding upon and implementing the appropriate, practical pastoral strategy.2

The Whiteheads’ paradigm for theological reflection offers many benefits and encourages researchers to consider relevant insights from a variety of academic disciplines. It helps persons to connect theory with practice. It also enables the good news of the Gospel to be proclaimed effectively in the here and now.3 And more specifically, it can facilitate positive systemic changes in church cultures such as helping them to become more welcoming and caring communities.

ATTENDING TO THE AVAILABLE DATA

It is no easy task to attend judiciously to the data that can be mined from Christian tradition, the community of faith’s experience, and the resources of one’s own culture. One reason for this is that researchers need to recognize the importance and depth of each unique source, yet at the same time comprehend how the sources overlap and inform each other. Complicating matters further is the fact that Christian tradition needs to be the paramount source in authentic pastoral care. (For this reason, Christian tradition is afforded the most space below.) Peterson puts it this way: Pastoral caregivers must distinguish between the biblical foundations of pastoral work, which are non-negotiable, and pastoral superstructure, which is ever-changing.4 Pastoral superstructure equates to the programs and/or actions that caregivers implement in their own contexts.

Christian Tradition and Pastoral Care

Pastoral care can be defined in many ways. Mills argues that every genuine definition of pastoral care has at its core “a way of understanding our relatedness to God and the ingredients or acts which may serve to enhance or detract from that relatedness.”5 At the centre of this claim is the belief that Christian life is grounded in an inner transformation that arises out of faith “in Christ as God and as the inaugurator of a new age.”6 Consequently, pastoral care links directly with pivotal Christian doctrines such as Christology, Soteriology, and Eschatology. It also involves helping persons to lead fruitful lives and to prepare them for their meetings with God post-death.7

Viewed in this light, pastoral care is rightly seen as an extension of God’s love. Caregivers ought to keep this truth in mind as they think about and offer care. For Peterson, this entails paying “more attention

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2 Whitehead and Whitehead, _Method in Ministry_, 22.
3 Whitehead and Whitehead, _Method in Ministry_, 11.
6 Mills, _Pastoral Care_, 837.
to what God does than what I do, and then to find, and guide others to find, the daily, weekly, yearly rhythms that would get this awareness in our bones.”

Melburg reveals that the traditional term for pastoral care is the Latin phrase *cura animarum*, which means the care of souls, or Christian soul care. Moon and Benner explain that while “cura is most commonly translated “care,” it actually contains the idea of both care and cure.” Thus, care points to actions designed to support the well-being of something or someone, and cura relates to actions designed to restore well-being that has been lost.” Anima is “the most common Latin translation of the Hebrew nephesh ("breath") and the Greek psyche ("soul").” Traditionally, the Christian church has embraced both meanings of cura, but this is not always the case today.

In their seminal study of the history of pastoral care, Clebsch and Jaekle argue that pastoral care “consists of helping acts, done by representative Christian persons, directed toward the healing, sustaining, guiding, and reconciling of troubled persons, whose troubles arise in the context of ultimate meanings and concerns.”

There are several notable components in this definition. First, pastoral care involves helping acts and accordingly has a pragmatic focus. It grounds religion in present-day realities and specializes in the ordinary. Pastoral care is ministry-in-mufti, which involves a sleeves-rolled-up, hands-on mentality.

Second, pastoral care is carried out by representative Christian persons. These people are recognized as trusted caregivers by their churches; they may or may not be ordained clergy. What matters is that caregivers bring the thinking and wisdom of Christian tradition to the situations they encounter. Interestingly, Stone expands the group of representative Christian persons to the “total Christian community.” Given the breadth of people’s needs, one can readily understand Stone’s stance.

Third, pastoral care is “directed toward the healing, sustaining, guiding, and reconciling of troubled persons.” Accordingly, care is focused on troubled persons and their perennial problems such as grief, loneliness, and depression. Care for these people might involve (a) healing that restores them to greater wholeness; (b) sustaining whereby struggling persons are equipped to endure or transcend their circumstances; (c) guiding where the hurting are assisted to make prudent choices; and (d) reconciling wherein fractured interpersonal and transcendent relationships are re-established. Implicitly, these tasks

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12 Melburg, *Care of Souls*, 122.
13 Moon and Benner, *Spiritual Direction and the Care of Souls*, 11.
15 Peterson, *Five Smooth Stones for Pastoral Work*, 1.
16 Clebsch and Jaekle, *Pastoral Care in Historical Perspective*, 4.
18 Clebsch and Jaekle, *Pastoral Care in Historical Perspective*, 1.
19 Ibid., 8-9.
accentuate the importance of problem-solving in pastoral care. While few would disagree with this emphasis, it is noteworthy that it can prove to be problematic for caregivers and the recipients of care, because many situations cannot ostensibly be solved.

A fourth point that can be drawn from Clebsch and Jaekle’s definition of pastoral care is that people’s troubles need to be meaningful. For Clebsch and Jaekle, this means that authentic pastoral care only takes place when individuals’ existential concerns are being addressed and when the recipients of care acknowledge that the care is being given by representative Christian persons. The extension of this logic means, for example, that a Christian lawyer who offers helpful legal guidance is not offering genuine pastoral care. This distinction, of course, does not render the lawyer’s assistance as being unhelpful or uncaring. Similarly, secular organizations that claim they offer pastoral care cannot by definition be doing so, because their care does not have overt Christian connections. What these organizations offer is care. It also needs to be acknowledged that caregivers oriented towards practical works may feel constrained by the specificity of Clebsch and Jaekle’s condition.

Clinebell provides a more expansive definition of pastoral care. He defines it as “the broad, inclusive ministry of healing and growth within a congregation and its community, through the life cycle.” Inherent in this definition and the liberation-growth model that it represents are a number of important themes. For instance, Clinebell argues that the “overarching goal of all pastoral care and counseling (and of all ministry) is to liberate, empower, and nurture wholeness centered in Spirit.” Thus, while spiritual and ethical guidance lies at the core of pastoral care, caregivers ought to keep in focus a holistic view of pastoral care that facilitates growth in every area of life.

This comprehensive view of pastoral care provides space for everyone to receive care, not just the alleged needy. And surely everyone needs to be cared for. Clinebell’s definition also compels researchers who wish to effect lasting, holistic change in people’s lives to take into account the contexts, families, discourses, and/or systems that persons are immersed in. Reasons that explain this dynamic are compelling. For example, Culbertson argues that systems typically exert immense pressure on individuals to act in accordance with the system’s prescribed patterns; systems usually resist change; and individuals in unhealthy systems will normally replicate the system’s destructive actions unless the systems change and/or the individuals leave the systems. Since this latter option can be harmful and hurtful for those who leave the systems, as well as those who remain in them, pastoral caregivers need to be both thoughtful and prayerful as they consider how best to provide care.

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21 Clebsch and Jaekle, *Pastoral Care in Historical Perspective*, 6.
23 For a summary of the themes see Clinebell, *Basic Types of Pastoral Care and Counseling*, 26–28.
24 Ibid., 26.
25 Ibid.
Maslow makes a related argument. He contends that people cannot achieve satisfactory levels of self-actualization and wholeness if their physiological (e.g., food and shelter), safety (e.g., security and stability), and relational (e.g., love and friendship) needs are not met. Following Maslow’s logic, the reach of effective pastoral care must first address people’s basic physiological, safety, and relational needs.

An alternative way of describing the scope of pastoral care is to assert that it involves both fence-like and ambulance-like roles. Fence-like actions and/or empowering ministries can be viewed as strategies that prevent people from getting hurt. They range from educating persons against the perils of substance abuse through to participating in liturgical practices. Ambulance-like and/or reparative actions can be understood as ministries that offer care to people who have fallen off a cliff and in the process become hurt. These actions vary from helping people in crises through to visiting individuals in hospital.

Clinebell’s definition of pastoral care is also noteworthy for accentuating the life cycle. Clearly, there are many significant events in people’s lives that can be prepared for, talked about, celebrated, and/or mourned. These include landmarks such as facing predictable psychological life crises, preparing for parenthood, and making the most of one’s so-called retirement. While there will always be cultural and contextual components to milestones of this nature that need to be considered, it is certain that an awareness of them will enhance the quality of care offered.

The Community of Faith’s Perspective on Pastoral Care

The Whiteheads argue that the second source that researchers should consult to find suitable data to enhance their theological reflections is that of the researchers’ own faith communities. Culbertson concurs and advises that before the church can respond to people’s needs effectively, it must first hear and understand their stories.

This motivated me to spend considerable time listening to two groups of people from within the St Paul’s community in my first months on staff. The first group comprised the individuals and couples who came to me for pastoral counseling. These people’s comments helped me to comprehend the community’s most pressing needs. One of these was the common desire to be heard, known, and connected. Another was the prevalence of interpersonal struggles. And a third highlighted the despondency many people experience concerning (their perceptions of) the Bible’s promises not being realized in their own lives.

The second group consisted of around 15 persons who were identified by the priests as people who contributed actively to the church and whose insights were significant. The feedback of these individuals was extremely helpful. For instance, one couple suggested that the church should start regular pre-marriage

courses. Several persons expressed their concern about the pressures placed on the priests and their families. And others emphasized the importance of creating opportunities for every parishioner to receive prayer.

I also chose to consult two groups of people outside of the direct St Paul’s community. The first comprised a few pastoral caregivers from other church communities. Their chief piece of advice was that I must not attempt to do all the pastoral care-giving myself, because (a) it is impossible for one person to provide all the care; (b) the model is unsustainable; and (c) it prevents other people from using their gifts. They also encouraged me to organize specific care for the church staff, because they deemed that church employees face unique spiritual, relational, and financial pressures. The second group consisted of a number of people who had recently left St Paul’s. Sophie, for example, informed me that “no one visited me when I was in hospital for two weeks and someone should have!” And Richard seemed to sum up the feelings of the people from this group when he stated, “I attended the church for years and no one ever talked to me!” Comments like these helped to identify areas that needed to be attended to in the pastoral care plan.

The Resources of Culture and Pastoral Care

The third source that the Whiteheads encourage researchers to mine for data is that of their own cultures. This is no small task given that culture encompasses “every aspect of life, including the delicate fabric of habits, artistic representations, tools, rules of behaviour, moral values, and institutions through which the human community orders its relationships to nature, to other communities and to reality as a whole.” In the light of this breadth, the Whiteheads identify “three postures from which the conversation between the religious Tradition and cultural information might begin.”

The first posture requires that Christian tradition challenges culture. For the Whiteheads, this entails adopting a prophetic stance whereby sin is identified, repentance and conversion is called for, and oppressive societal voices and structures are challenged. Thus, researchers might pray for prophetic insights, so that they may fathom more accurately what God is saying and doing, and in order to bring God’s love and care more effectively to those in need. Stated differently, the creativity, wisdom, and imaginations of theological investigators are often birthed in God’s heart and/or people’s grief. By keeping such factors in focus, caregivers will be better able to implement the pastoral superstructures and social practices that are required to influence the church and society positively—hence, pastoral counseling comprises part of the pastoral care plan described below.

The second stance spotlights the need for religious communities to examine themselves in the light of the developments within culture. For example, if the international students who study at Auckland’s largest two Universities that literally neighbor St Paul’s feel regularly excluded from relationships and

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31 Pseudonyms are used for the four people cited in this article. Their consent was obtained to use their stories in this context. Quotation marks are utilized to delineate their direct quotes.
33 Whitehead and Whitehead, Method in Ministry, 70.
35 Whitehead and Whitehead, Method in Ministry, 70.
opportunities due to their ethnicity, St Paul's parishioners need to examine their own hearts to see if they harbor any prejudicial and/or exclusionary attitudes. Similarly, when the media deifies individualism St Paul’s attendees need to examine if they kowtow to the mantra of independence instead of following the biblical model of interdependency.

The third posture accentuates that the church should use the “resources of the culture in pursuit of its own religious mission.” For instance, if the church were to ignore the salient insights that the social sciences offer to deepen people’s understanding of others, it would be tantamount in some instances to caregivers deliberately choosing to harm and not help the persons entrusted to their care.

It is not difficult to fathom how a working knowledge of the factors discussed above can assist persons to construct pertinent pastoral care plans.

GENERATING ASSERTIONS FROM THE DATA TO CLARIFY AND EXPAND ONE’S INSIGHT

Having listened to the voices of Christian tradition, the community of faith’s experience, and the resources of the culture in accordance with the Whiteheads’ paradigm, the next stage of the development of the St Paul’s pastoral care plan was to conflate the themes and insights into a draft pastoral care plan. What emerged was the 21 point plan described below, which was presented to the church’s priests and a few other individuals for feedback and critique. The Whiteheads name this kind of sharing assertion. It involves sharing one’s “insights and beliefs forcefully, without forcing them on others.” The pastoral care plan’s points submitted for feedback were:

1. Caring for the priests and their families: While the 21 points are not supposed to portray a level of importance or priority, this first point does acknowledge that church leaders experience unique pressures and that the health of a church depends significantly on the health of its leaders. Caring for the priests and their families is therefore vital to the wellbeing of church attendees. Invariably, such care will need to be shaped in an idiosyncratic fashion for each leader. Still, common features at St Paul’s include contacting the priests and their spouses on a regular basis in order to see if they have any specific practical needs or prayer requests in the given season. Care for leaders should also involve encouraging them to attend regular supervision sessions. The importance of supervision cannot be overemphasized. Supervision helps to instill accountability, protect the leaders and their flocks, and prevent burnout. It also provides a forum where ministers can be encouraged, receive input, further their development, and be reminded of the requirements and practices of their governing bodies. The priests’ spouses are encouraged to attend regular spiritual direction and/or counseling sessions, as they too are highly valued members of the community, and their welfare affects their partner’s ministry.

35 Whitehead and Whitehead, Method in Ministry, 71.
34 Whitehead and Whitehead, Method in Ministry, 90.
2. Caring for the church staff: The wellbeing of the church staff is also essential and clearly has a bearing on the church and its culture. As with the priests, church staff can be the unwitting recipients of transference from church parishioners. Transference involves the involuntary and usually unconscious displacement of people’s objects, reactions, and needs that relate to significant individuals from their pasts onto persons (or God) in the present.\(^{40}\) In other words, transference involves persons redirecting their past feelings for one individual onto another person in the present; thus, in effect, transference is “an error in time”.\(^{41}\) A classic example of transference is where a new church attendee, who has had a poor experience with a children’s worker in an earlier church, starts to criticize publically the children’s worker of the new church before she or he has had any opportunity to get to know the children’s worker and/or observe what the person actually does. For reasons such as this, church staff members need to be supported and cared for. Methods for accomplishing this are similar to the strategies described above for the priests.

3. Pastoral care training for all the staff: Gill-Austern contends that people learn best in community. She is not saying with this that there is no place for solitude, but she is arguing against isolation.\(^{42}\) Collaborative learning in the inner-city context of St Paul’s has ranged from inviting experts from the Auckland City Mission to teach staff members how to relate with some of the homeless people who attend church events through to prioritizing the importance of saying thank you to people. This latter point is critical, for not to express gratitude when it is warranted is to offend.\(^{43}\) Topics covered via pastoral care training build a mutually agreed on foundation and assist in the shaping of a church community.

4. Staff building key teams and caring for the team members: Given the size of St Paul’s and the giftedness of so many of its members, numerous teams have been developed across the church. One example is the church Pastoral Care Team, which is made up of nearly 50 trusted individuals who delight to care for others. The team is regularly sent group e-mails from the church’s paid pastoral care staff\(^{44}\) in which specific opportunities of service are outlined briefly (e.g., “Mr. Smith has been admitted to hospital. Would one of you be able to visit him within the next 24 hours?”). Consistently, one of the team will respond. This person is then given additional information as required and then she or he will respond to the need. Successful as this strategy is in the St Paul’s context, it is noteworthy that it would not work in cultures where people expect and want only their ministers to visit them.

5. Empowering a coordinator of pastoral care: It is important to keep key church tasks in focus. As the coordinator of pastoral care at St Paul’s, I am expected to ensure that the pastoral care life of the church runs as effectively as possible. This involves responsibilities such as building relationships with professionals that we can refer people onto when our resources and/or skill-sets are exhausted; responding to e-mails and

\(^{40}\) Jan Grant and Jim Crawley, Transference and Projection: Mirrors to the Self (Maidenhead: Open University Press, 2002), 3-4.


\(^{44}\) The St Paul’s paid pastoral care team presently consists of three part-time employees.
phone calls; and seeking legal advice if and as needed. It also entails regularly reviewing the church’s pastoral care strategies and offerings. This is important, because different needs regularly arise.

6. Developing a Geographical Care Network: St Paul’s parishioners are scattered across the city. The role of the Geographical Care leaders, who are known and trusted caregivers in the congregation, is to touch base with and offer care to the church attendees who live in their geographical areas and who want to be part of the system. By this means, people experience palpable care regardless of their so-called neediness, relationships are forged and strengthened, and goodwill is built. The Geographical Care leaders are encouraged to contact the church’s pastoral care staff team for assistance whenever they wish to do so. In turn, the pastoral care staff attempt to respond to the needs and at all times extend care to the Geographical Care leaders.

7. Caring for the 99: The man who sought after the lost sheep in Matthew 18: 12-14 was also clearly interested and invested in the other 99 sheep. Too often, the silent majority in churches are overlooked and inadequately cared for. Effectual pastoral care strategies therefore need to involve mechanisms that ensure that care is extended to everyone who attends the church. To do this, it was mooted that the church’s pastoral care staff ought to contact everyone on the church database at least a few times per year to enquire after their welfare and their particular needs. A benefit of this scheme is that prayer needs are unearthed and responded to. Contacting church members also gives people a sense of importance, communicates to persons that they are valued by the church, combats isolation, and creates new connections.

8. Developing a welcoming and caring church ethos: First impressions count. St Paul’s staff members have frequently been told that the church has failed to welcome and connect meaningfully with visitors (and regular attendees). As a result, welcoming teams have been created and an espresso machine has been installed in the church to provide persons with opportunities to relate with others over a coffee. Similarly, information tables that highlight church activities and existing groups have been established; the importance of welcoming people and caring for them is regularly stated; and the priority of learning people’s names is emphasized. While steps of this nature do not ensure success, they demonstrate care. One time-proven means of staying connected with parishioners that St Paul’s does not practice, perhaps to our detriment, is to have literal physical pigeonholes for each church member in the church building and to put regular paper notices into them. The idea was brought to my attention by a pastoral care leader of a similar sized church. She informed me that when she sees the cubicles filling up with paper, she takes note, and contacts the individuals to enquire after their welfare.

9. Developing a safe church environment: Caring churches and preachers need to be cognizant of people’s emotional, psychological, relational, and physical requirements for safety. While few would disagree with this sentiment, fewer it seems can appropriately create safe spaces for church visitors and regular attendees. This dearth is not surprising. On the one side, Jesus welcomed all and as followers of Jesus we are called to do likewise. Yet on the other side Jesus “was no prophet of “inclusion”, for whom the chief virtue was acceptance and the cardinal vice intolerance”. Rather, “he was the bringer of “grace”, who not only scandalously included “anyone” in the fellowship of “open commensality”, but made the “intolerable”
demand of repentance and the “condescending” offer of forgiveness.”45 Thus, it is also a gesture of love to share biblical truth with people.46 Keeping a healthy balance between these important points is no easy task, but by talking about these concepts safer environments that facilitate personal growth can be built.

10. Prioritizing prayer: We believe that a key component of the renaissance that St Paul’s has experienced in recent years can be attributed to the church’s burgeoning prayer life.47 At my last count, there were more than 20 distinct prayer ministries in the church. For instance, parishioners can contact the church pastoral care department to place their own prayer requests on the church prayer-line that is sent out by e-mail each week to over 100 church members who have committed to pray for the persons on the prayer-line. The recipients of prayer are also followed up personally by someone within the church’s pastoral care department. Many testify to being comforted by these expressions of care. On occasions, people are also cured. Individuals also testify to experiencing physical healing at The Well, which is a monthly mid-week prayer meeting at St Paul’s designed to create space for people to receive prayer for physical healings.

11. Overt offers of care: To build the ethos of pastoral care across the church it was determined to offer care overtly to church attendees on a regular basis. One means of doing this is that the preachers frequently encourage people to make contact with the pastoral care department to arrange one-to-one pastoral counseling sessions and/or to take part in the church’s pastoral care courses (see below).

12. Pastoral counseling: St Paul’s offers free pastoral counseling to its parishioners. Many individuals, couples, and families take hold of this opportunity. Pastoral counseling can be viewed as a sub-set of pastoral care. It focuses on issues such as emotional distress and seeks to alleviate these crises while simultaneously maintaining an overt spiritual orientation.48

13. Needs assessments: At a basic level, needs assessments are used to find out what people know and are able to do, and what they need to know and do. The knowledge derived from such appraisals assist researchers and pastoral caregivers to respond in ways that help people to bridge these gaps.49 Parishioners’ needs are typically identified via pastoral counseling, conversations, observation, responses to sermons, requests, and intuition. Given that persons’ circumstances regularly change, needs assessments are continually required. The information gleaned from them may cause caregivers to respond in a variety of ways such as by referring parishioners onto specialists, up-skilling, offering pastoral counseling, praying, and/or hosting an event or course in response to the identified need.

14. Teaching pastoral care: Teaching pastoral care related topics is important. At present, St Paul’s has two main modes of doing this. One is via the St Paul’s Theological Centre, which runs in five week terms, four times per year. One of the courses we run annually in this forum is the Contemporary Care course. Here, we address five pertinent topics that have emerged from the most recent needs assessments. Latest examples

46 Moon and Benner, Spiritual Direction and the Care of Souls, 22.
include workshops on grief, depression, emotional literacy, sexuality, and cancer. The presentations take many shapes. For instance, the cancer session involved a medical expert speaking on cancer; a mother sharing her firsthand experience of having just completed chemotherapy; a third woman talking about her experience of losing a much-loved spouse to cancer; and me sharing a few words on how to respond pastorally to persons affected by cancer. The reason for coordinating the evening was clear: Eighteen people in our wider church community had been diagnosed with cancer in an eight month period. But these numbers don’t reflect the mathematics of cancer. Hundreds of people—family members, friends, colleagues—were directly impacted by these diagnoses. The second mode of teaching pastoral care is running smaller process groups. By both means, we strive to offer meaningful care, educate people, and assist persons beyond the direct church community.

15. Developing emergency care strategies: Emergencies and crises are common in every group of people. Cancer is diagnosed, accidents occur, and other circumstances result in people’s worlds changing. At such times, people need to experience care. If they do not, resentment towards the church and God can easily build. Accordingly, the church established a pastoral care emergency phone line that people can ring at any time and an emergency food bank. Similarly, the contact details of emergency providers such as Community Mental Health have been made readily available. Steps like these denote progress. Having said this, it needs to be acknowledged that individuals’ perceptions of what constitutes an authentic emergency vary widely and persons under pressure frequently react in regretful ways. This is to say, emergency care is oftentimes difficult and needs to be handled with diplomacy and wisdom.

16. Developing a discipleship track: It is important that churchgoers take part in discipleship programs. While there is no one particular mode of discipleship, they all characteristically involve service, love, and becoming more like Jesus – the Good Shepherd. To mature in Christ means to care for others and ourselves consistently. A discipleship track for new Christians might entail them taking part in a series of courses. Examples include (a) gift identification courses, because people tend to blossom when they can serve others from their gifts and passions; (b) bible study programs, for new insights from the bible contribute to growth; (c) training in different modes of prayer and spiritual disciplines, as spiritual growth is inseparable from Christian discipleship; (d) a course in evangelism, to equip parishioners in sharing the Gospel; and (e) a pastoral care training program, for everyone needs to extend and receive care. Similarly, parents need to be equipped to disciple their children. Extensive benefits would stem from such paths.

17. Visitation: Peterson argues that pastors (and caregivers) have a particularly difficult task today. As they contend with “religious entrepreneurs with business plans”, they consistently discover that they have lost continuity with historical pastoral care roles. Thus, pastoral workers nowadays “are a generation that feels as if it is having to start out from scratch to figure out a way to present and nurture this richly nuanced and all-involving life of Christ.”50 Visiting people in their homes, work places, and in hospital is a primary means of restoring this lost continuity and extending care. It shows interest in parishioners’ lives and helps caregivers to get to know people in their own environments. Jackson adds that home visitation is

50 Peterson, The Pastor, 4.
an ideal forum to educate, evangelize, and discipline people.51 For reasons such as these, pastoral care
strategies need to prioritize visiting church attendees.

18. Connecting parishioners to existing circles of care: We deem that a primary place for pastoral care to be
practiced is within church small groups. It is amidst the regular encounters that take place in these settings
that people are most likely to share their stories and experience healing, sustaining, guiding, and
reconciling.52 Friendships are also forged in these groups. Baab views friendships “as a spiritual practice, a
place where we live out the things we believe in. Friendship is a space where our values and commitments
take flesh.”53 Consequently, effort should always be made to connect willing people to meaningful groups.

19. Supporting church small group leaders: Given the priority of small groups and the breadth of people’s
needs that often only emerge when persons have become secure in safe and loving environments,54 it is
essential that small group leaders are adequately trained and supported by church pastoral care programs.
In the St Paul’s context, this involves building relationships with the leaders, as well as shaping the support
in accordance with each leader’s context and desires. For example, some individuals ask for resources, others
appreciate regular two-way communication, and still others solicit prayer support. Extending gratitude
towards the leaders is always appreciated, as is the invitation to contact the church small group coordinator
for any reason should the need arise.

20. Building pastoral care resources: The effectiveness of pastoral care is heightened when helpful
resources are readily available. These may range from stockpiling beneficial resources such as Westberg’s
masterful booklet on grief entitled Good Grief;55 so that copies can be given to grieving people, through to
establishing financial reserves to assist persons in their times of need. In my experience, many churchgoers
are keen to contribute to these resources.

21. Developing a church debrief policy: People leave churches for a variety of reasons. A helpful pastoral
response to this situation can be to touch base with the individuals, enquire if there is anything that the
church needs to seek forgiveness for, and offer to bless them as they transition into the next season of their
lives. This approach helps persons to attend to unfinished business and bring closure. It also demonstrates
care.

51 Edgar N. Jackson, “Calling and Visitation, Pastoral,” in Dictionary of Pastoral Care and Counseling, ed. Rodney J. Hunter
(Nashville: Abingdon Press, 2005), 115-16.
52 Clebsch and Jackle, Pastoral Care in Historical Perspective, 4.
54 Henri J. M. Nouwen, The Inner Voice of Love: A Journey through Anguish to Freedom (New York: Doubleday, 1996), xiii-
DECIDING UPON AND IMPLEMENTING APPROPRIATE AND PRACTICAL PASTORAL STRATEGIES

The final stage of the Whiteheads’ method of theological reflection in ministry is the decision making phase. “It is in this crucial stage that” researchers “make a move … from insight into action.”56 Upon presenting the 21 points to St Paul’s priests, they thanked and encouraged me. They then raised concerns about the plan’s first point (i.e., caring for the priests and their families). It seemed that in their humility they saw themselves as being no different from any other church attendees and therefore as unworthy recipients of special care. However, after I reiterated that the point was significantly about caring for them, so that they could serve the parishioners more effectively, they acquiesced and asked me to implement the entire plan!

With the wonderful assistance of my colleagues and numerous caregivers from within the church community, I have spent the ensuing years instigating the 21 points to varying degrees. To achieve this, we attempted to follow Kotter’s eight sequential steps for producing effective transformational changes in organizations.57 In the St Paul’s context, the steps involved:

1. Establishing a sense of urgency: Kotter contends that half of all change efforts fail, because people do not see the need to change. To counter this we have repeatedly spoken to various church groups about the definitions, need for, and positive ramifications of authentic pastoral care.

2. Forming a powerful guiding coalition: This necessitated that the importance of pastoral care was shared by everyone in leadership, so that we were all committed to promoting a caring culture across the church.

3. Creating a vision: The pastoral care vision equated to defining what effective pastoral care looks like (e.g., every person who asks for help is responded to in a caring manner) and implementing the pastoral care plan.

4. Communicating the vision: Kotter maintains that persons should be able to communicate their visions in less than five minutes and that such communiqués ought to obtain reactions from the listeners that indicate comprehension and interest. As stated above, this entailed repeatedly talking about and emphasizing pastoral care.

5. Empowering others to act on the vision: To grow the ethos of care across the church increased numbers of St Paul’s attendees needed to be chosen and authorized to activate different parts of the plan.

6. Planning for and creating short-term wins: Kotter explains that short-term wins need to be gained and articulated in order to silence doubters and motivate people to continue with the instigation of changes. At St Paul’s, short-term pastoral care wins are regularly shared via the church’s e-news.

7. Consolidating improvements and producing more changes: This point accentuates the importance of reflecting continually on people’s needs and the ways they are met. Eliciting feedback from the receivers of pastoral care leads to changes and further improvement.

56 Whitehead and Whitehead, Method in Ministry, 99.
8. Institutionalizing new approaches: To embed the positive changes that have occurred in the pastoral care life of the church we strive to deliver effective pastoral care and continue to talk about pastoral care whenever opportunities arise.  

EVIDENCE OF SUCCESS AND IMPLICATIONS

I set out to create an effective pastoral care plan for St Paul’s Symonds Street by using the Whiteheads’ model and method for theological reflection. This involved attending to the available data, generating assertions from the data, and deciding upon and implementing the appropriate pastoral care strategy. The results of this study suggest that the 21 point pastoral care has been effective. Via the people implementing the points numerous church attendees have received pastoral care. As a result, many of the recipients of care have experienced greater levels of connection with God, themselves, and others. In response to this, some of these people have gone on to extend care to others.

Consider the following two accounts that have been drawn from the encouraging e-mails we regularly receive. Joseph and Leanne arrived in Auckland in 2012. They “randomly entered St Paul’s one Sunday, because it was the closest church” to where they were staying. They reported that “the people on the door [who were part of the church Welcoming team] were very warm and friendly. They gave us a booklet outlining the church’s various small groups. That evening we contacted a group that looked interesting and within a week we were enjoying a meal with a dozen or so people in someone’s home. We are now firmly entrenched in the group and enjoying life-giving friendships, serving the community together, and caring for one another.” Joseph and Leanne’s experience appears to echo Baab’s view of friendship where friendships serve as a space for values and commitments to take flesh (see Point 18 above).

Betty is one of the many parishioners who have taken hold of the St Paul’s free pastoral counseling services. She reported: “I was so scared of telling another person what I harbored deep in my heart, but [the counselor] somehow managed to give me the confidence to share and as a result I told her everything.” After many sessions and much work, she stated, “I am a totally different person now. I feel more whole. I take care of myself and my friends. I have also started to train to become a counselor myself!” Pastoral counselors intentionally seek to empower persons to experience wholeness. Clinebell reasons that wholeness extends to six interdependent components of people’s lives: specifically, enlivening their minds; revitalizing persons’ bodies; enriching intimate relationships; deepening people’s connections with nature; helping individuals to connect with the key institutions in their lives; and deepening people’s relationships with God. Clearly, the pastoral counselor helped Betty to experience many of these aspects of wholeness.

The data we have recorded also point to the success of the pastoral strategy. For example, 16 geographical care pods presently exist across the city. Over 700 free pastoral counseling hours are provided  

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58 Adapted from Kotter, “Leading Change”, 57-68.
59 Clinebell, Basic Types of Pastoral Care and Counseling, 31.
annually. And in recent years, more than 200 individuals have attended the pastoral care courses offered at St Paul’s annually.

Despite such success, it needs to be acknowledged that a number of problems have been encountered as we have tried to implement the plan. One highlights my grave underestimation of the time required to manage such an endeavor. Another is that many parishioners have chosen not to opt into the various opportunities that have been offered to them. For instance, when every person on the church database was invited by e-mail to join the Geographical Care scheme only 15 percent initially chose to opt in. I had not anticipated such a low response. Upon investigation, it was discovered that many people had little desire to receive care from unknown others and that our communication about the opportunity was ambiguous. Such learning has taught us to introduce caregivers to potential care-recipients, especially since relationships appear to trump virtually everything, and to employ more user-friendly language in our communication.

The implications of this study are far-reaching. Despite the fact that every context is different, this study demonstrates that caregivers can follow the Whiteheads’ paradigm described above to craft effective pastoral care plans for their own contexts. Caregivers could also adapt the St Paul’s Pastoral Care Strategy to their own contexts and/or conduct their own needs assessments and shape their offerings of care accordingly. It is hoped that many caregivers will take up this challenge.

A further implication spotlights the importance of education. Church leaders and caregivers need to educate people and renew everyone’s passion for pastoral care and its diverse approaches. As they do, individuals, families, churches, and communities will flourish.

A third inference that can be drawn from this study highlights that caregivers need to give careful consideration concerning how they will implement change in their own contexts in order to ensure that the changes are successful and long-lasting. If they do not, if they fail to heed the advice of scholars like Kotter, their well-meaning efforts may well be frustrated.

SUMMARY

Olthuis claims that people “cannot flourish long without the nourishment that comes from an affirming and loving connection with another person.”60 Pastoral caregivers agree and add that authentic human flourishing is also dependant on people being connected with God and having their basic needs met. The example of St Paul’s Pastoral Care Strategy depicts many ways of helping persons to experience these bedrock principles firsthand.

Paul likens the church to the body of Christ and accentuates that each part of the body is essential to the life and vitality of the whole body (1 Cor. 7: 12-31). This emphasizes that we need to accept, care for, embrace, and love every individual in our churches. We also need to carry each other’s burdens, work

together, and create safe relational spaces. As we do this, we build caring church communities that persons long to be part of and we revolutionize people's views of pastoral care. We also assist people to encounter Jesus, the head of the body. This is vitally important, because like no other, Jesus can “reach to the depths of our being, gather together our dissipated and frayed faculties, energies, and desires, and draw us towards a life of adoration”, service, wholeness, and holiness, as we grow in the knowledge of “who we were created to be”.61 And the better we know whose we are and who we are, the better we will be able to provide quality pastoral care to others.

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