THE INFLUENCE OF CLINICAL PASTORAL EDUCATION ON CHRISTIAN
SEMINARIANS IN HONG KONG

By

MEI LAN CHOW

B.B.A., Open University of Hong Kong, 2001

M.Div., Hong Kong Baptist Theological Seminary, 2005

Submitted to the Faculty of Theology, Acadia Divinity College,
in partial fulfilment of the requirements for
the degree of Doctor of Ministry

Acadia Divinity College,
Acadia University
Spring Convocation 2015

This thesis by MEI LAN CHOW was defended successfully in any oral examination on DATE OF DEFENCE.

The examining committee for the thesis was:

_____

Dr. Glenn Wooden, Chair

_____

Dr. Christopher F. Coffin, External Reader

_____

Dr. Carol Anne Janzen, Thesis Supervisor

_____

Dr. Danny Zacharias, Faculty Reader

_____

Dr. John McNally, Program Director, Doctor of Ministry

I, Mei Lan Chow, hereby grant permission to the University Librarian at Acadia University to provide copies of the thesis, upon request, on a non-profit basis.

_____

Mei Lan Chow

_____

Dr. Carol Anne Janzen

_____

1 April 2015

CONTENTS

APPENDICES

ILLUSTRATIONS

Figure

TABLES

ABSTRACT

x

The present study was set out to examine the changes in students who participated in initial units of CPE in Hong Kong. Quantitative research, quasi-experiment was used in this study. The Rosenberg Self Esteem Scale (RSE) was used to measure the self-esteem of subjects in both experimental (CPE students) and control groups (non-CPE students). Also, the Counseling Self Estimate Inventory (CSE) was used to measure the counseling skills of subjects. They are both self-rated checklists. Pre- and post-test scores of both instruments were collected and analyzed. The end result indicated that there was a significant increase in the RSE score in the experimental group in the post-test whereas there were no significant changes in the control group. And there was a significant increase in all four scales of CSE in the experimental group in the post-test whereas there were no changes in the control group. The major finding of this research was that after participation in an initial unit of CPE, students showed improvement in self-esteem and counseling skills.

ACKNOWLEDGEMENTS

INTRODUCTION

Clinical Pastoral Education (CPE) has continued to make contributions in seminary students' professional education for ministry as part of their theological education. Since 1925 when CPE started its first program in the United States, it has spread and developed into an educational methodology for chaplains and for ministers in different settings throughout the world. It not only influenced theological education, but also the concept of healing in health settings as well. Throughout the years, the rationale of CPE has not changed much, although there are different emphases among different training centers. Encounters with people in need, "action-reflection-action", peer support and individual supervision are significant ingredients in providing opportunities for students to integrate their theology with action, and to connect their heads with their hearts. Through this reflective process, they can develop a healthy relationship with their self, others and God. Their skills and self will be enhanced in the process.

CPE is important training for seminary students and ministers. Ministers are called by God to serve Him in a committed way. This is an honorable and special role. They are professional leaders of the congregation, part of a social system shaped by theological, spiritual and religious perspectives. Meanwhile, ministry is a stressful and highly interpersonal vocation. The stresses include lack of social recognition,

emotional exhaustion, long and unstable working hours, unrealistic expectations,

work pressure, relatively low financial compensation, low social status, lack of

affirmation, and frequent criticism. Worse still, ministers are accustomed to restricting

their personal entertainment while denying their normal emotional needs and

expression.[1] All these have a negative influence on any minister's psychological

health and physical health. To serve in such a stressful and challenging environment,

two main resources can help. The first comes from outside the self, including close

and trusting relationships, appropriate training, refreshment and the like. The second

is from the self, such as having a healthy sense of self.[2]

High self-esteem has been reported to be one of the strongest predictors of

well-being. Positive self-esteem is recognized as a vital association with adaptive

stress coping, interpersonal effectiveness, and emotional health. Negative self-esteem

can prevent ministers from being fully effective in relating to people served by their

ministry. Enhancing a minister's self-esteem will then positively support them to

work under stressful environments, while helping them to relate and serve in healthier

---

[1] Wayne E. Oates, ed. *The Minister's Own Mental Health* (NY: Channel Pres, 1961), 18-24, 111; Tony Campolo, & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey- Bass, 2010), 34-35; Carl Wells, "The Effects of Work-Related and Boundary-Related Stress on the Emotional and Physically Health Status of Ordained Clergy," *Journal of Pastoral Psychology* 62 (2013): 101-114.

[2] Wayne E. Oates, 18-32; Carrie Doehring, "New Directions for Clergy Experiencing Stress: Connecting Spirit and Body," *Pastoral Psychology* (published online in Jan 2013); Ryan Staley, Mark McMinn, Kathleen Gathercoal, and Kurt Free, "Strategies Employed by Clergy to Prevent and Cope with Interpersonal Isolation," *Journal Pastoral Psychology 62* (2013): 843-857.

ways.[3]

It is obvious that because of the unique position occupied by ministers, they have

tremendous opportunities for counseling (formal or informal) with their church

members. These opportunities come about partly because ministers are widely known;

they constantly visit others, hospitals, elderly homes; and are key persons in many of

the crises experienced by their church members. Therefore, counseling skills should

be a part of the training of a minister.[4]

This thesis examines the changes in students after their first participation in

CPE in Hong Kong. Students' self-esteem level and counseling skills were assessed

before and after the course to compare the changes in their personal growth as well as

their professional growth.

Literature Review

Literature on CPE

Many studies have documented the changes in students as a result of their

participation in CPE. These studies reported changes in both personal growth and

professional growth. In Thomas Geary's 1977 study, he examined the personal

---

[3] Ulrich Orth, Richard W. Robins, and Keith F. Widaman, "Life-Span Development and Self-Esteem and Its Effect on Important Life Outcomes," *Journal of Personality and Social Psychology 102(6)* (2012): 1271-1288.

[4] Wayne E. Oates, *The Minister's Own Mental Health*, 132-134.

growth of students who participated in CPE. The researcher defined personal growth

in terms of self-actualization as defined by Abraham Maslow. The sample involved

31 students in their first unit of CPE at nine centers in the Pacific Region and 31

church members with no involvement in CPE. The sample also involved 21 students

taking 2nd, 3rd and 4th CPE units and 18 former CPE students. The Personal

Orientation Inventory and the Christie Self-Concept Inventory were given before and

after the program, and again, after one month. The findings revealed that CPE is an

effective program for enhancing personal growth.[5]

    In a 1982 study, John Thomas, Leonard Stein, and Marjorie Klein conducted

research to investigate the changes in initial CPE students in different types of clinical

settings including psychiatric hospitals, general hospitals, correctional institutions and

church social agencies. It used the Adjective Check List, the Minnesota Multiphasic

Personality Inventory, a critical incident report, and a demographic questionnaire to

examine 20 basic unit CPE students and 20 extended unit CPE students with a pre-test

and post-test research method. The finding indicated that students with experiences in

diverse settings tend to perceive themselves in a more positive and less defensive way

following the CPE participation. It further revealed that there were no significant

differences on the level of changes between the CPE students in psychiatric settings,

---

[5] Thomas Geary, "Personal Growth in CPE," J*ournal of Pastoral Care* 31(1) (1977): 12-17.

general hospitals and correctional settings.[6]

Paul Derrickson, in a 1990 study, reviewed 39 studies on changes in students as a result of CPE. The findings of the standardized instruments used in these studies were summarized and compared. The changes were broken down into three categories. In the first, no changes in basic character or personality were observed. In the second, significant changes in attitudes or values were observed; these changes included greater autonomy and sensitivity to self and others. In the third, positive changes in interpersonal dimensions were observed.[7]

In a 1990 study, Larry Vandereek and John Valentino measured the changes in CPE students. The study used a pre-test and post-test format with a sample size of 182 first-unit CPE students in 27 programs. The Personal Orientation Inventory was used to assess their increase in self-actualization. The Beck Depression Inventory was used to examine the impact on students' degree of depression throughout the course. The General Expectancy for Success Scale was used to measure students' personal and professional growth. The findings revealed an increase in self-actualization in students. It further revealed higher depression scores in the post-test than the pre-test. The researcher subsequently theorized that growing deeper in spirituality may be

---

[6] John Thomas, Leonard Stein, and Marjorie Klein, "A Comparative Evaluation of Changes in Basic Clinical Pastoral Education Students in Different Types of Clinical Settings as Measured by the Adjective Check List and The Experience Scale," *Journal of Pastoral Care* 36(3) (1982): 181-193.

[7] Paul Derrickson, "Instruments Used to Measure Change in Students Preparing for Ministry: A Summary of Research on Clinical Pastoral Education Students," *The Journal of Pastoral Care* 44(4) (1990): 343-356.

accompanied by a temporary increase in depressive moods. The findings also

demonstrated that CPE students become more personally and professionally confident

as a minister.[8]

In a 1996 study, Robert Anderson used both quantitative and qualitative methods

to examine the impact of CPE. Thirty participants were invited to complete his

questionnaire to evaluate their learning and the specific program in which they

participated. The purpose, format and assignment of CPE were reviewed. Debriefing

sessions were held for the students to share their learning experiences. The findings

demonstrated that CPE has a positive impact on the ministerial formation of

theological students.[9]

In a 2008 study, Katherine Jankowski, Lauren Vanderwerker, Kathryn Murphy

and Martin Montonye conducted research to compare the changes between CPE

students in an intensive versus an extended CPE course. The study used pre-test and

post-test with a sample of 144 CPE students. Fifty-five percent were intensive unit

CPE students and the remaining were extended unit students. The study found that the

students' pastoral skills improved the most in the first unit, with additional increases

in subsequent units. The scores in scales of Average Emotional Intelligence, Self

---

[8] Larry VandeCreek, "Affective and Cognitive Changes in First-Unit Clinical Pastoral Education Students," *The Journal of Pastoral Care* 45(4) *(*1991): 275-388.

[9] Robert Anderson, "The Integration of Clinical Pastoral Education with Seminary Learning: Fostering the Student's Ministry Formation," *The Journal of Pastoral Care* 50(1) (1996): 13-22.

Reflection and Social Desirability significantly improved amongst intensive unit students.[10]

In a 2011 study, Gordon Hilsman conducted a pilot study. He used self-assessments and spiritual change to measure the growth of spiritual skills in initial unit CPE students. The study used a survey instrument of 103 spiritual skills for pre and post self-assessment by 48 students of twelve different units of CPE programs. Firstly, the study found positive changes in interpersonal competence throughout the program, including eye contact, observing, confronting, conveying empathy, listening, waiting, partner dance, affirming others, etc. Further, personal spiritual skills were improved the most; these skills included disclosure of self, saying goodbye, tuning in to one's present emotions, and asserting self. Thirdly, the study also found that transcendental spirituality[11] has been enhanced throughout the program.[12]

In addition to investigating the changes of CPE students, researchers also studied different aspects of CPE which contributed to the development of CPE.

In a 2002 study, Marie-Line Morin discussed which kind of scientific research

---

[10] Katherine R.B. Jankowski, Lauren C. Vanderwerker, Kathryn M. Murphy and Martin Montonye, "Change in Pastoral Skills, Emotional Intelligence, Self-reflection, and Social Desirability Across a Unit of CPE," *Journal of Health Care Chaplaincy* 15 (2008): 132-148.

[11] Transcendental spirituality relates in fairly direct ways to the transcendence that is obvious in many crisis situations upon reflection. The self-assessment of transcendence skill included petition praying, simply seeing, grateful praying, pious practice, solemnizing, forgiveness praying, accepting, seeking, meditating, surrendering, proclaiming.

[12] Gordon J. Hilsman, "Beyond Virtue: The Growth of Spiritual Skills during Initial Clinical Pastoral Education" in *Reflective Practice: Formation and Supervision in Ministry* 32 (2012): 184-201.

model could be applied to professional chaplaincy and CPE. CPE and chaplaincy

address issues related to faith, spiritual and psychological concerns. Unlike other

health professionals, CPE and chaplaincy focus on these issues from two different

fields of expertise – the spiritual and the psychological. The study stated that CPE and

professional chaplaincy need to be scientific but not necessarily in the same way as

natural science. They should adopt models that respect their dual identity. To

conclude, the study suggested that the phenomenological research model was

particularly suited to the examination of patients' spiritual and psychological issues.[13]

In a 2008 study, Scott Sullender explored the dynamic of fear that the student

brings into the supervisory process. The study asserted that fear and faith coexist in

the supervisory relationship. Skillful supervisors may assess students' degree of fears

and explore the students' personal resources for managing such fears. Instead of

denial and avoidance, supervisors help students to become fully aware of, deal with,

and learn from their fear and ultimately help them to transform fear into faith.

Whenever signs of courage are exhibited in students, it is a sign of growth. It is the

sign of good supervisory work.[14]

In a 2010 study, Keith Little implemented a study to compare CPE against the

---

[13] Marie-Line Morin, "Respecting the Dual Sided Identity of Clinical Pastoral Education and Professional Chaplaincy: The Phenomenological Research Model," *Journal of Health Care Chaplaincy* 13(1) (2002): 171-183.

[14] Scott Sullender, "Fear as a Dynamic in Supervision," *Reflective Practice: Formation and Supervision in Ministry* 128 (2008): 122-133.

professional training model.[15] It attempted to identify some of the issues that arise

when assessing CPE from a professional education perspective. The study asserted

that to perform effective ministry, pastoral workers require a deep self-awareness and

the necessary professional knowledge, skills and boundaries. The study stated that the

professional education model draws attention to some weaknesses in CPE and

recommended ways to improve its process. It also suggested that establishing a strong

and clear link between the seminary programs and the CPE programs can mutually

support and benefit each other. It further suggested the development of clearer

standards with reliable and valid assessment procedures for competence and

capability.[16]

In a 2012 study, Logan Jones offered reflections on curricular planning of CPE.

The researcher stressed the CPE emphasis on the self during supervision. It further

stressed that good supervision arises from the identity, character, and disposition of

the supervisor. Good curriculum planning is grounded in the total personhood of the

supervisor. It is concluded that an intentional process of reflective practice and the use

of a circle of trust can provide a way for supervisors to make use of their self in a

---

[15] As mentioned in the article, "the outcome of a professional education is a person who has competently mastered the necessary propositional and practical knowledge, has formed a professional identity including the integration of the values of public service and autonomy and can be trusted to practice with integrity." Within this context, CPE with be examined.

[16] Keith Little, "Clinical Pastoral Education as Professional Training: Some Entrance, Curriculum and Assessment Implications," *Journal of Pastoral Care and Counseling* 64(3) (2010): 1-8.

healthy way.[17]

Studies which proposed scientific research, and give insight on supervisory process, curriculum design, and supervisor's self are important for the development of CPE. From the literature, one may conclude that CPE is effective in enhancing students' personal growth and professional as ministers.

Literature on the well-being of Ministers

Researchers have demonstrated that ministry is highly relational and at the same time a stressful and emotional exhausting vocation. They are representatives of the Holy God. Yet, at the same time, they are humans. When undertaking the many responsibilities of the ministry and feeding their congregations, they also need to be fed and cared for. As a result, they will serve in an effective and healthy condition.

In a 2012 study, Carl Wells used the Pulpit and Pew Clergy Leadership Survey of 2001 to explore the association between boundary-related stress and work-related stress in the clerical profession. It was conducted by telephone interviews with a nation-wide random sample of 883 sole or senior pastors who came from over 80 denominations in USA. The research indicates a strong association between work-related stress and boundary-related stress in the clerical profession. As work

---

[17] Logan Jones, "I Walked Through Life Oddly: Dispositions, Character, and Identity in Clinical Pastoral supervision," *Reflective Practice: Formation and Supervision in Ministry 132* (2012): 159-170.

stress increases, boundary stress increases.[18]

In a 2013 study, Carl Wells conducted further research to explore the association between the two sources of stress (boundary-related stress and work-related stress) with two different measures of health (emotional health and physical health) in the clerical profession. The research used the same dataset from the previous research of 2012, and revealed that both work stress and boundary stress have a positive and significant coefficient for both emotional and physical health in the clerical profession.[19]

In a 2013 study, Randy Garner conducted a qualitative study to examine the impact of interpersonal criticism on the ministry. Twenty-two clergy members were randomly selected from ministerial alliances and formed a focus group. The group members were asked to consider ten issues regarding vocational stress, burnout, and criticism. The result of the focus group demonstrated that criticism had an adverse impact both personally and professionally. The criticism from congregational members, the deacons and the public adversely affect interpersonal relationships and can lead to stress, burnout, and early departure from the ministry. The participants further reported that there was inadequate support for them to handle the issue of

---

[18] Carl Wells, Janice Probst, Robert McKeown, et al, "The Relationship Between Work-Related Stress and Boundary-Related Stress Within the Clerical Profession," *Journal of Religion and Health* 51(1) (2012): 215-230.

[19] Carl Wells, "The Effects of Work-Related and Boundary-Related Stress on the Emotional and Physically Health Status of Ordained Clergy," *Journal of Pastoral Psychology* 62 (2013): 101-114.

interpersonal criticism. It concluded that a program designed to assist pastors to better

handle criticism-prone situations was both necessary and valuable.[20]

In a 2011 study, Kinman, McFall and Rodriguez conducted research to examine

the relationships between emotional labor[21] and psychological distress and intrinsic

job satisfaction in clerical professions. The participants of the study included 188

ministers from church networks in the United Kingdom. The findings revealed

significant associations between emotional labor and psychological distress. It also

suggested that emotional labor is likely to diminish intrinsic job satisfaction among

ministers. It further recommended that counseling training and a wider social network

might protect ministers from the negative impact of emotional demands.[22]

In 2013, Staley, McMinn, Gathercoal and Free conducted a study to examine the

experience of interpersonal isolation among ministers. Eighty senior pastors from two

denominations were asked to complete a modified version of a social support

questionnaire online. A brief set of six open-ended interview questions was

subsequently sent through email to them. Half of them responded to the interview

questions. The study revealed six themes that hindered the respondents from fostering

---

[20] Randy Garner, "Interpersonal Criticism and the Clergy," *Journal of Pastoral Care and Counseling 67(1,2)* (2013): 1-14.

[21] The author of the article defined "emotional labor" as the requirement to regulate personal emotions and manage the emotions of others as part of the job role." Such burdens included expectations to show concern and empathy to congregations, and to cover up their own emotions.

[22] Gail Kinman, Obrene McFall, and Joanna Rodriguez, "The Cost of Caring? Emotional Labor, Wellbeing and the Clergy," *Journal of Pastoral Psychology 60* (2011): 671-680.

close, supportive relationships in their professional roles. The themes were time,

expectations, vulnerability, relational boundaries, relocation, and trust/confidentiality.

The study also demonstrated four themes in their strategy of establishing and

maintaining close relationships, the themes being intentionality, participation in

groups, vulnerability and common interests. Respondents also reported their strategies

for coping with loneliness – family and peer support, hobbies, solitude, spiritual

discipline, and entertainment. The study suggested that many ministers have found

effective ways to cope with these challenges.[23]

In a 2012 study, Samuel Park examined an empirical study that interviewed 20

pastoral counselors and chaplains to examine pastoral identity. The study findings

revealed that pastoral identity is a social and relational construction mutually created

by pastoral caregivers and clients through dynamic care-giving interactions within a

specific cultural context. The study further revealed four key themes of identity

construction in the course of pastoral care-giving. The first is the encounter with

clients as a divine representative. The second is being present with and listening to

clients as a compassionate human. The third is responding to clients' stories and needs

as a theologically and spiritually sensitive pastor. The fourth is discovering a divine

---

[23] Ryan Staley, Mark McMinn, Kathleen Gathercoal, and Kurt Free, "Strategies Employed by Clergy to Prevent and Cope with Interpersonal Isolation," *Journal Pastoral Psychology 62* (2013) : 843-857.

presence as a coworker of God's ministry.[24]

From the literature, it may be concluded that most stresses faced by ministers are work-related, boundary-related, and interpersonal. The impact of these stresses may harm the physical and emotional health of ministers, and affect their job satisfaction. Close and trusting relationships and appropriate training may help them to deal with challenges and difficulties.

Literature on Self -Esteem

Researchers have found that self-esteem is a fundamental determinant of emotional and psychosocial well-being. Reports linked positive self-esteem to adaptive stress coping, interpersonal effectiveness, and emotional health.

In a 2000 study, A. Furnham and H. Cheng investigated the extent to which a person's recollection of their parents' rearing styles (authoritarianism, authoritativeness, permissiveness), personality (extraversion, neuroticism, psychoticism, lying) and self-esteem predicted self-rated happiness in young people. A sample of 406 young people completed the Eysenck Personality Questionnaire, Rosenberg Self Esteem Scale, Parental Authority Questionnaire, and Oxford Happiness Inventory in a school setting. The findings suggested that self-esteem was

---

[24] Samuel Park, "Pastoral Identity constructed in Care-giving Relationships," *The Journal of Pastoral Care & Counseling 66(2)* (2012): 1-13.

both a direct and moderator variable for young people's self-reported happiness.

The findings suggested that an authoritarian style was a direct negative predictor of

self-esteem while only maternal authoritativeness was causally linked to self-esteem

and happiness.[25]

In 2004, Helen Cheng and Adrian Furnham conducted research to study the

extent to which the three rearing styles (care, discouragement of behavioral freedom,

denial of psychological autonomy), self-esteem and self-criticism predicted self-rated

happiness in young people. In total, 356 youth aged between 15-25 years old

participated in the study; they were non-clinically affected young people. The Parental

Bonding Instrument, the Rosenberg Self-esteem Scale, the Self-criticism

Questionnaire and the Oxford Happiness Inventory were used to assess the

participants. The results revealed that positive self-evaluation and self-criticism were

both the direct and indirect correlates of young people's self-reported happiness. It

further suggested that warmth showed by mothers towards their children was

particularly beneficial in enhancing their self-esteem. It also suggested that parental

behavior had an impact on their children's self-esteem, self-criticism, and happiness.[26]

In a 2004 study, Tom Pyszczynski, Jeff Greenberg, Sheldon Solomon, and Jamie

---

[25] A. Furnham and H. Cheng, "Perceived Parental Behaviour, Self-Esteem and Happiness," *Social Psychiatry and Psychiatric Epidemiology* 35 (2000): 463-470.

[26] Helen Cheng and Adrian Furnham, "Perceived Parental Rearing Style, Self-Esteem and Self-Criticism as predictors of Happiness," *Journal of Happiness Studies* 5 (2004): 1-21.

Arndt used Terror Management Theory to examine the reasons why people need

self-esteem. In the study, different lines of empirical evidence related to the theory are

reviewed. The study suggested that high levels of self-esteem reduced anxiety and

anxiety-related defensive behavior. It also suggested that high levels of self-esteem

counteracted the impact that reminders-of-mortality had on self-esteem seeking and

death-related thoughts. The seeking of self-esteem is part of the mechanism that

people use to both govern behavior and cope with the existential situation.[27]

In a 2011 study, Virgil Zeigler-Hill reviewed the connection between

self-esteem and psychopathology. In the study, self-esteem was intimately connected

with psychopathology. High self-esteem appeared to act as a resource that protects

people from negative experiences. Those with low self-esteem, in contrast, may be

more likely to experience various forms of psychopathology because they lack these

resources.[28]

In a 2013 study, Shu-Jiuan Chen, Chia-Hui Chiu and Chiung-Jung Huang

conducted a meta-analysis to investigate the relationship between self-esteem and

depression with a total of 32,005 participants sampled in Taiwan. The study

demonstrated that self-esteem negatively correlates with depression at all age levels

---

[27] Tom Pyszczynski, Jeff Greenberg, Sheldon Solomon, and Jamie Arndt, "Why Do People Need Self-Esteem? A Theoretical and Empirical Review," *Psychological Bulletin* (2004): 435-468.

[28] Virgil Zeigler-Hill, "The Connection between Self-Esteem and psychopathology," *Journal of Contemporary Psychotherapy* 41(2011): 157-164.

ranging from elementary school students to adults in both the general and specific

populations. The trend was clear: the higher the level of one's self-esteem, the less

likely one will suffer from depression.[29]

In a 2014 study, Andrea Steiger, Mathias Allemand and Richard Robins

investigated adolescent levels of self-esteem and their predictive effects on adult

depressive symptoms two decades later. A sample of 2,054 adolescents was assessed

five times at the age of 12, 13, 14, 15, and 16 years. A follow-up assessment was

conducted in adulthood when participants were 35 years old. Among the initial

sample, 74% (1,527 participants) were involved in the follow-up assessment. The

findings suggested that their level of self-esteem served as predictors for adult

depression. Adolescents with low self-esteem, and/or whose self-esteem decreased

further during the adolescent years, were more likely to show symptoms of depression

two decades later as adults.[30]

In 2011, Virgil Zeigler-Hill, Brendan Clark and Tamra Beckman conducted

research to examine the interpersonal content and cohesion of secure and fragile

forms of self-esteem. Contemporary theorists proposed that self-esteem consists of

both a secure form and a fragile form. Secure self-esteem reflects positive attitudes

---

[29] Shu-Jiuan Chen, Chia-Hui Chiu, and Chiung-Jung Huang, "Self-Esteem and Depression in a Taiwanese Population: A Meta Analysis," *Journal Social Behavior And Personality* 41(4) (2013): 577-586.

[30] Andrea Steiger, Mathias Allemand, and Richard Robins, "Low and Decreasing Self-Esteem Dring Adolescence Predict Adult Depression Two Decades Later," *Journal of Personality and Social Psychology 106(2)* (2014), 325-338.

towards the self that are realistic, well-anchored, and resistant to threat. Fragile high

self-esteem refers to feelings of self-worth that are vulnerable to challenge, require

constant validation, and rely upon some degree of self-deception. The research was

examined across three studies using undergraduate participants. Across the three

markers (unstable self-esteem, low implicit self-esteem and contingent self-esteem),

self-esteem fragility was found to be strongly associated with the interpersonal styles

of men but not women. Men with fragile high self-esteem were characterized by a

mix of dominance and hostility, whereas females with fragile high self-esteem were

characterized by a mix of dominance and nurturance. The interpersonal style

associated with true and uncertain forms of low self-esteem were diverse and ranged

from hostility to nurturance. These findings suggested that secure and fragile forms of

self-esteem possess significant interpersonal content and are different with regard to

their interpersonal styles.[31]

In a 2012 study, Ulrich Orth, Richard Robins and Keith Widaman examined the

life-span development of self-esteem and tested whether self-esteem influenced the

development of important life outcomes, including relationship satisfaction, job

satisfaction, occupational status, salary, emotional affect, depression, and physical

health. The data were taken from 5 assessments across a 12-year period of a sample of

---

[31] Virgil Zeigler-Hill, Brendan Clar, and Tamra Beckman, "Fragile Self-esteem and the Interpersonal Circumplex: Are Feelings of Self-worth Associated with Interpersonal Style?" *Journal of Self and Identity* 10 (2011): 509-536.

1,824 people aged between 16 to 97 years. The findings revealed that self-esteem had

significant effects on all of the life outcomes examined in the research – self-esteem is

a major factor affecting life outcomes. It further revealed that self-esteem had an

intermediate effect on a person's affect and depression. There were small to medium

sized effects on a person's relationship and job satisfaction. They also found a very

small effect on health, but no effect on occupational status. It was concluded that

self-esteem had a potentially high impact on real-world life experiences.[32]

In a 1973 study, Peter Benson investigated theorized relationships between

self-regarding attitudes and God-images. A sample of 128 high school Catholic

students participated in the test. Coopersmith's self–esteem scale was used to test

their level of self-esteem. Single items were used to obtain information regarding age,

grade, father's occupation, and religious behavior which were included to measure

possible external influences. A thirteen-item semantic differential scale was

developed to measure loving and controlling God-images. A 64-adjective Q-sort

developed by Spirlka *et al.* was used to measure other God-images. The findings

revealed that self-esteem is related positively to loving God-images and negatively to

rejecting-impersonal-controlling definitions of God.[33]

---

[32] Ulrich Orth, Richard W. Robins, and Keith F. Widaman, "Life-Span Development and Self-Esteem and Its Effect on Important Life Outcomes," *Journal of Personality and Social Psychology 102(6)* (2012): 1271-1288.

[33] Peter Benson, "God Image as a Function of Self-Esteem and Locus of Control," *Journal for the Scientific Study of Religion* 12(3) (1973): 297-310.

In a 1985 study, David Aycock and Susan Noaker investigated the self-esteem

levels of an evangelical Christian population and compared these to a general

population. A sample of 351 Christian participants was compared with a sample of

1115 participants from the general population. In this study, the 37-item Self-esteem

scale of coping Resources Inventory for Stress was employed to assess self-esteem

levels. The findings revealed no significant differences between the self-esteem levels

of evangelical populations and general populations. The researchers further

interpreted this finding to indicate that Christian faith did not seem to impact

self-esteem levels in the evangelical population studied. Christians apparently do not

fully understand their position of being accepted by God. Therefore a holistic change

of their life cannot be produced.[34]

In a 1989 study, Eric Johnson attempted to develop an outline for a Christian

understanding of healthy self-esteem, which is an affective response to

self-knowledge and self-evaluation based on an understanding of God. The study

suggested that the root of people's self-esteem should be based on seeking God and

His kingdom. As people seek God first, self-esteem will be affected; as knowledge of

Him and His infinite, transcendent value increases, people will find that their

---

[34] David Aycock and Susan Noaker, "A comparison of the Self-Esteem Level in Evangelical Christian and General Populations," *Journal of Psychology and Theology* 13(3) (1985): 199-208.

self-esteem as one of His beloved ones will grow as well.[35]

In 2003, Susan Jones and Leslie Francis conducted a test to compare the mean scores recorded by male and female Anglican ministers on the low self-esteem scale with that from the lay population. The study used the Eysenck Personality Profiler to measure the self-esteem of the participants. The participants included 1,148 Anglican male ministers and 523 female ministers with the population norms of men and women in general. The results showed that male and female ministers have lower self-esteem than males and females in the general population, and that female ministers have lower self-esteem than male ministers. The researchers further commented that low self-esteem was parallel with a lack of affirmation and public reward. For those Anglican ministers with low self-esteem, they may be especially in danger of exhibiting some of the dysfunctional or unhealthy compensatory behaviors with which low self-esteem is associated. These may include avoidance, workaholism, alcoholism, etc. However, they tend to be resistant to seek help with problems that arise from such behavior and, therefore, may stand in need of more pastoral care than a lay person.[36]

In 2009, Neal Krause conducted a nationwide longitudinal survey to explore the

---

[35] Eric Johnson, "Self-Esteem in the Presence of God," *Journal of Psychology and Theology 17(3)* (1989): 226-235.

[36] Susan Jones and Leslie Francis, "The Pastoral Care of the Anglican Clergy Today: A Matter of Low Self-Esteem?" *Journal of Empirical Theology* 16(1) (2003): 20-30.

correlation between church-based social relationships and changes in self-esteem. The

sample consisted of 969 participants of at least 66 years of age. The survey took place

in 2001, 2004 and 2007. The study found that having a close personal relationship

with God was associated with greater self-esteem at both the baseline and follow-up

surveys. In contrast, receiving support from fellow church members was not related to

self-esteem at either point in time. Emotional support from secular network members

was related to self-esteem at the baseline but not the follow-up interviews.[37]

Francis (2010) found significant associations between high self-esteem during

childhood and lower levels of professional burnout after controlling for the

personality variables among Anglican ministers in England.[38]

In a 2013 study, Anastasia Victoria, L.H. Ho and Tick Sim attempted to develop

and validate a God-centered self-esteem scale to assess people's self-evaluation in the

context of God's love, availability, and ability to help. The study focused on showing

the distinctiveness of God-centered self-esteem from its root concept of self-esteem

and explored its relationships with other variables. The findings showed the two

scales were moderately correlated, indicating distinctiveness while sharing conceptual

overlaps. The study showed God-centered self-esteem scale has good psychometric

[37] Neal Krause, "Church-based Social Relationships and Change in Self-Esteem Over Time," *Journal for the Scientific Study of Religion* 48(4) (2009): 756-773.

[38] Leslie Francis, Mandy Robbins, Jenny Rolph, Douglas Turton, and Paul Rolph, "The Relationship Between Recalled Self-esteem as a Child and Current Levels of Professional Burnout among Anglican Clergy in England," *Journal of Pastoral Psychology* 59 (2010): 551-561.

properties and practical utility which is worthy of further research.[39]

As the literature demonstrates, self-esteem is closely related to parental rearing style. It is comparatively stable in its effect on people's adult life up to several decades later. Research studies have revealed that self-esteem positively impacts psychological health, mental health, interpersonal relationships, and important life outcomes. Studies have revealed that self-esteem has a Biblical root.[40] As humans, ministers are also impacted by their own self-esteem in terms of psychological and mental health, thus, impacting their ministry. With no exception, ministers like all humans are also impacted by their own self-esteem in terms of psychological and mental health, thus, affecting their ministry.

The purpose of this study is to examine the changes in students who participated in initial units of CPE in Hong Kong. Students' self-esteem and counseling skills will be examined to investigate the change of personal growth and professional growth throughout the course. It is believed that with the growth of self-esteem and counseling skills, ministers become better equipped to serve in different settings and become more capable to face different sources of stress and challenges.

---

[39] Anastasia Victoria, L.H.Ho, and Tick Sim, "The Development and Validation of a God-Centered Self-esteem Scale," *Journal of Psychology and Theology* 41(4) (2013): 36-47.

[40] The Biblical root of self-esteem applies to all human beings, whether Christian or not.

Hypotheses

To carry out the purpose of this study, the following hypotheses were formulated:

1. The experimental group will attain a significantly higher mean score on the

    Rosenberg Self-esteem scale than the control group

2. The experimental group will attain a significantly higher mean score on the

    Counseling Self Estimate Inventory than the control group

CHAPTER ONE

AN OVERVIEW OF CLINICAL PASTORAL EDUCATION

Introduction

Clinical Pastoral Education (CPE) was part of a larger reform movement in

theological education during the early part of the twentieth century in the United

States of America. Gradually, the movement spread, influencing not only theological

education, but also the concept of healing in health settings around the world. It then

became a professional education for ministry, not only by providing professional

training to chaplains, but also to ministers working in different contexts. CPE is now

an international phenomenon.

Definition of Clinical Pastoral Education

As stated in the *Dictionary of Pastoral Care and Counseling*, Thornton E.E.

introduced CPE as: "… a professional education for ministry which brings theological

students …. into 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

counseling; and pastoral theology."[41] On the current ACPE website, it states, "CPE is

---

[41] Thornton, "Clinical Pastoral Education," in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J. (USA: Abingdon, 2005), 177-178.

an interfaith professional education for ministry. It brings theological students… into

supervised encounter with persons in crisis. Out of an intense involvement with

persons in need, and the feedback from peers and teachers, students develop a new

awareness of themselves as a person, and of the needs of those to whom they minister.

From such theological reflections on specific human situations, they gain a new

understanding of ministry. Within the interdisciplinary team process of helping people,

they develop skills in interpersonal and inter-professional relationships."[42]

Both definitions describe CPE as professional education for ministry where

students are brought into supervised encounter with people in need. The purposes of

CPE and the features of the learning process are listed. As we have seen, CPE has its

own specific features which shape it as professional education for ministry.

Background

CPE emerged in North America in the 1920s and developed rapidly overseas in

the subsequent decades. In the 1920s, America was experiencing a lot of changes.

Firstly, changes were taking place in psychological understanding and in the

psychology of religion under the influence of William James and Sigmund Freud,

who focused on the experiences of individuals. Secondly, a new philosophy of

---

[42] www.acpe.edu/StudentsFAQ.html

education proposed by John Dewey was developing in America which emphasized the experiential side of learning by focusing on the fact that 'how to think' was equally important as 'what to think'. Meanwhile, leading theological educators and some church leaders were becoming dissatisfied with the limitations of classical academic theological education. They complained that seminary curricula were lacking practical application in the real world. These shifts provided the context for the emergence and expansion of CPE.[43]

Apart from sociological and theological drivers for the adoption of CPE, the founders also played a role in its rapid expansion. Richard Cabot and Anton T. Boisen were considered the two most significant founders of CPE.

Richard Cabot (1868-1939) was a physician, a professor of medicine at Harvard, and a founder of medical social work. When teaching theological students, he would reference medical school training by urging them to get 'clinical experience' outside their lecture rooms and their chapels by visiting the sick, the mental patients, and the prisoners, etc., so as to learn and practice theology where it was most needed. His well-known article, "A Plea for a Clinical Year in the Course of Theological Study," published in 1925, laid the foundation for CPE. In 1922, Cabot taught a

---

[43] Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications, Inc, 1992), 2-5; Joan E. Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (US: Journal of Pastoral Care Publications, Inc. 1996), 1-7; Leroy Aden & Harold Ellens ED, *Turning Points in Pastoral Care: The legacy of Anton Boisen and Seward Hiltner*, (Michigan: Baker Book House, 1990), 11-12, 162-172.

course on the case study method at Harvard Medical School which was attended by

Anton T. Boisen, the other founder of CPE.[44]

Anton T. Boisen (1876-1965) has been called "the father of Clinical Pastoral

Education." He had five psychotic episodes in his lifetime – he considered his

psychotic episodes to be problem-solving spiritual experiences. He believed that some

forms of mental illness could be a meaningful and productive experience, equivalent

in some respects to a religious experience. With the help of Cabot, Bosien became the

chaplain at Worcester State Hospital in Massachusetts in July 1924. In the summer of

1925 Boisen brought a group of theological students to the Hospital to serve as ward

attendants with the purpose of learning from mental patients. This group was

considered to be the first CPE program in the history of the movement. This new

program had an increasing number of theological students enroll year after year. It

was from that base that the movement developed.[45]

The primary founders of the CPE Movement, Richard Cabot and Anton Boisen,

represent two somewhat different approaches. Cabot adopted a more therapeutic

---

[44] Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications, Inc, 1992), 6-8; Joan E. Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (US: Journal of Pastoral Care Publications, Inc. 1996), 8-9; Homer L. Jernigan, "Clinical Pastoral Education: Reflections on the Past and Future of a movement," *The Journal of Pastoral Care and Counseling* 56, (Winter 2002): 379-380.

[45] Hall, 8-13; Hemenway, 10-12; Homer L. Jernigan, "Clinical Pastoral Education: Reflections on the Past and Future of a movement," *The Journal of Pastoral Care and Counseling 56,* (Winter 2002): 379-380; Leroy Aden & Harold Ellens ed, *Turning Points in Pastoral Care: The legacy of Anton Boisen and Seward Hiltner,* (Michigan: Baker Book House, 1990), 11-12; Seward Hiltner, "Fifty Years of CPE," *Wege zum Menchen* (July 1975): 375-376.

stance, which focused on enhancing the emotional growth of students and facilitating

their personal change. The other approach (Boisen) adopted a professional training

stance which stressed developing professional skills in the pastoral ministry. These

two emphases have existed throughout the history of CPE.

With an increasing number of theological students interested in CPE training, an

increasing number of training centers were set up to provide for the demand. In 1930,

the Council for Clinical Training (CCT) was formed and it established standards for

CPE training. In the 1950s, four entities were established that took part in the

development of CPE and became the ruling bodies of CPE. They were the CCT, the

Institute of Pastoral Care (IPC), the Lutheran Advisory Council and the Southern

Baptist Association of Clinical Pastoral Education. In October of 1967, after several

years of joint discussions and planning, these four national ruling bodies merged into

the **Association for Clinical Pastoral Education (ACPE)** at a meeting in Kansas

City. Charles E. Hall became the first paid Executive Director of ACPE. The

organization was formed with three commissions: establishing standards,

accreditation of centers, and certification of supervisors of CPE. However, the

different views of all four groups continued to exist at the time of merging. Some

groups stressed the conceptual approach, while other groups stressed the experiential

approach. However, as time passed, most leaders gradually came to recognize the

significance of integrating these two approaches, stressing both the intellectual and experiential components of pastoral ministry.[46]

Prior to, and after the formation of ACPE, numerous students from Canada, Europe, Australia, Asia and Africa attended CPE programs in the United States. They had been certified as CPE supervisors by the IPC or CCT, and later the ACPE, and were conducting CPE and forming their own organizations in their own countries. These organizations might become National Affiliates of ACPE or provide their own certification and accreditation. The developments in other countries were expanding so rapidly that ACPE decided to stop providing certification and accreditation to persons and centers outside the United States in 1973. The decision was intended to encourage each country to modify and develop CPE rationales and methods according to the needs and culture of their own countries regarding certification and accreditation. CPE had then become an international phenomenon.[47]

Rationales of Clinical Pastoral Education

CPE is part of theological training. It is an integration of a clinical-theological,

---

[46] Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications, Inc, 1992), 32-44,114-117; Joan E. Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (US: Journal of Pastoral Care Publications, Inc. 1996), 20-22; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 7-12; Seward Hiltner, "Fifty Years of CPE", *Wege zum Menchen* (July 1975): 93.

[47] Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications Inc., 1992), 195-196.

educational method for equipping persons as ministers. The heart of CPE is

supervised encounters with persons in need.[48] Each center has its own theoretical

emphasis according to its resources and priority; however, CPE has developed its own

rationales to govern its development.

Dual purpose: Personal growth and professional competence

CPE is a professional education for ministry. Since its formation, two main

camps of thought regarding the purpose of CPE had caused tension between training

centers. One camp emphasized that the purpose of CPE is to produce personal growth

in the students. They emphasized a focus on the personal and professional identity of

the students in terms of their personal functioning. The encounters with persons in

need created opportunities for supervisors to help students deal with their responses in

these situations and to adjust some of the perceptions and behavior patterns that

hindered their efforts to be a minister to others. Some supervisors in this camp even

employed a more therapeutic approach toward their supervision. For them, obtaining

new skills and new knowledge is subordinate to the chief purpose of personal growth

of the students. They emphasized the importance of helping students become more

aware, affirming, and differentiated in their experiences of being a human person. It

---

[48] Thornton, "Clinical Pastoral Education", in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J. (USA: Abingdon, 2005), 178.

required an in-depth exploration of the students' intra-psychic and interpersonal functioning as they perform their ministry. The opposing camp of thought emphasizes that CPE must help students develop professional skills in the pastoral role. They stress that training in methodology and techniques in pastoral care, accompanied with a strong foundation in academic and theological knowledge is important for the practice of CPE. They insisted that the focus of CPE remain in the clinical study of the ministerial relationship itself. Personal change is subordinate to the chief goal of obtaining professional skills as ministers.[49]

In addition to these two camps of thought, there is a third view. Charles V. Gerkin carefully intertwined these two camps of thought and made the former subordinate to the latter. He stressed that the focus of CPE is the student as a person in a pastoral role and in a ministerial relationship. Therefore, supervisors must address issues of personal change, but only as these issues hinder the students' capacity to function effectively in a pastoral role.[50]

In this thesis, the third view is adopted. The purpose of CPE is dual, to enhance both the students' personal formation and professional development. To elaborate on

---

[49] David A. Steere, ed, *The Supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 1989), 23-24; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 24-25.

[50] David A. Steere, *The Supervision of Pastoral Care*, 25; K. Jankowski, L. Vanderverker, K Murphy, M. Montonye, M. Ross, "Change in Pastoral Skills, Emotional Intelligence, Self-reflection, and Social Desirability Across a Unit of CPE," in *Journal of Health Care Chaplaincy 15* (2008) : 132-148.

the objectives of CPE as stated by ACPE, "[it]… enables pastoral formation, pastoral competence, and pastoral reflection." The meaning of "enables pastoral formation" is taken to mean "to develop the students' awareness of themselves as ministers…, and to develop the students' awareness of how their attitudes, values, assumptions, strengths, and weaknesses affect their pastoral care….." The term, "pastoral competence" refers to the development of "… students' awareness and understanding of how persons, social conditions, systems, and structures affect their lives and the lives of others … and to develop students' skills in providing intensive and extensive pastoral care and counseling to persons…." Finally, the definition of "pastoral reflection" refers to developing "…students' abilities to use both individual and group supervision for personal and professional growth."[51] It is apparent then, that the objective of CPE consists of both enhancing students' personal as well as professional formation.

Further, contemporary educator, Arthur Combs, focuses professional education in learning to use one's "self as an instrument." For him, the primary educational task is not merely to teach a set of information or skills, but to help develop healthy and rational human beings. If ministers are to provide effective pastoral care, they have to use their own selves; that is, they are to use themselves as effective and trustworthy

---

[51] ACPE Standards & Manuals (US: ACPE, 2010), 12-13; Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications, Inc, 1992), 62.

instruments to serve others in difficult situations. Combs, therefore, highlights the

importance of the self as an instrument in this profession.[52] Professor Pamela

Cooper-White also states that effective pastoral care includes awareness of one's own

thoughts, feelings, values, and behaviors. This "use of the self" is a healthy utilization

of one's own counter-transference to improve the quality of pastoral care which can

enhance understanding, strengthen empathy, and even facilitate the creation of a

secure space with healthy boundaries.[53] Professor Dean Johnson also states that the

counselor's self is the most effective counseling tool he or she can possibly employ,

provided he can become aware and accept his own strengths, limitations, and

subjectivity."[54]

According to Darryl J. Tiller, the self has two main dimensions as an instrument:

the here-and-now interpersonal dimension, and the underlying intrapersonal

dimension.   Students participating in the interpersonal events of ministry are not

solely objectively participating. They are subjectively participating (their needs,

intentions, attitudes, values, judgment, experience – their selves). Therefore, students

have a responsibility to know themselves and how they involve their selves in pastoral

relationships. They have to pay close attention to their own values, assumptions,

---

[52] David A. Steere, ed, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 146-150.

[53] Pamela Cooper-White, *Shared Wisdom: Use of the Self in Pastoral Care and Counseling* (Minneapolis: Fortress Press, 2004), 128.

[54] Wayne E. Oates, *The Minister's Own Mental Health* (NY: Channel Press, 1961), 132.

thoughts, feelings, behaviors, strength, struggles and limitations. Only in this way can

their care be really pastoral.[55]

In sum, as a professional education for ministry, CPE focuses on the "being" as

well as the "doing" of the student. The purpose of CPE is dual, involving both the

personal growth and professional formation of the students.[56]

Action-reflection-action

As a professional education for ministry, CPE is an experiential model of

learning. It requires that students participating in ministry attend supervision and

practice self reflection. Thus, the students return to their ministry with new insights

and tools that enhance their awareness, competency and effectiveness as ministers.

The process flows between actions and reflections. It begins with the students'

encounters with persons in need. Then students present their practice to their

supervisor and peer group. Through this process, the skills, the feelings, motivations,

values and personal struggles of the students are reflected and evaluated. This method

---

[55] David A. Steer, ed., *The Supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 146-150; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 16; Pamela Cooper-White, *Shared Wisdom: Use of The Self in Pastoral Care and Counseling* (Minneapolis: Fortress Press, 2004), 128-130; Kathleen Hope Brown, "Formation and the Education of Ministers," in *Theological Education* 48(1) (2013): 15-23.

[56] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 44; Thornton ,"Clinical Pastoral Education", in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J (USA: Abingdon, 2005), 179; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 92-93.

of learning is dynamic and personal. When students encounter another person, they

actually encounter their own self, too. When the students then share about their

patient encounters, they are also simultaneously sharing their own formation as

persons. This unique experience enables self-learning and growth. CPE is therefore

training students for ministry while also allowing students to learn from ministry.[57]

The outcome of this process depends largely upon the student's ability and

willingness to identify problems and needs in the practice of ministry, and to be brave

enough to bring them up for supervision. The student's openness is largely dependent

on their own readiness and willingness, as well as on the supervisor's effort in

establishing a safe environment with trust and respect. The self-awareness and

reflection of the student plays a crucial role. The students' ability to be aware of their

personal dynamics during the practice of their ministry is important. The student's

reflection on her or his feelings, thoughts and behaviors is critically important to the

effectiveness of the ministry. Self reflection and awareness will stimulate students'

further personal growth and improve the effectiveness of their ministry. Reflective

practice allows for the possibility of learning through experience. Such self-awareness

and reflection often enhances personal growth and professional development. The

students are also held accountable for their own work and growth. They have to

---

[57] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 78-79; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 90-93.

design their own learning contract which states clearly their own learning objectives.

They have to establish their learning agendas for every presentation, interpersonal

relation sessions and supervisory sessions. That is, the students have to determine the

time-table and discussion topics for their supervision sessions. They must also be able

to clearly define what they have learnt and experienced. The agenda is the sole

responsibility of the students and so they must "own" it. The autonomy and

individuality of students is thus encouraged and enhanced. The outcome is then

largely dependent on the initiative of the student.[58] On the other hand, when the

process does not work well, students may be at a stalemate in their personal growth

and ministry.

Through experience, reflection, and evaluation, each student's own pastoral style

and competence can be thus developed and enhanced. Of course, some students might

find no improvement either in personal growth or professional skills after

participating in CPE. There are a number of reasons accounting for its inefficacy.

Some are personal reasons, such as lack of motivation, previous traumatic experience

or personal unresolved issues blocking their learning process and their readiness. Also,

they may not be able to adjust to a more experiential learning style. Other factors may

---

[58] David A. Steere, *The Supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 130; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 8; Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 56-57; Logan Jones, "I Walk Through Life Oddly: Dispositions, Character, and Identity in Clinical Pastoral Supervision," *Reflective Practice: Formation and Supervision in Ministry* 132 (2012): 159-170.

include a mismatch of the supervisor and students, lack of commitment of supervisors

and peers of the group.

Elements of Clinical Pastoral Education

CPE is conducted in base units. A "unit" of CPE designates four hundred hours

of supervised clinical experience in an approved training center. The four hundred

hours may be done full-time over a ten-week period, or twenty-five hours a week for

fifteen weeks (one semester), or sixteen hours a week for thirty weeks (two

semesters).[59] While each training center is flexible to develop its own program

format, the usual pattern consists of: participating in pastoral ministry; the writing of

verbatim records of pastoral encounters for presentation and evaluation; interpersonal

relations group sessions; didactics; and individual one-to-one supervisions. Other

elements such as worship, role-play, case study and inter-professional conference are

integral to the program.[60]

Pastoral ministry to persons in crisis

The first element of CPE is pastoral ministry to persons in crisis in which

---

[59] David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 20-21.

[60] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 43; Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications Inc., 1992), 162.

pastoral skills and theological reflection are learned. CPE is a clinical method of

learning by which learning arises out of a student's experience. The word "clinical"

literally means "at the bedside". The primary element that defines a clinical setting is

that people are in need or in crisis. Students are required to spend two-thirds of the

unit time on ministering to persons in need. This offers students the opportunity to

apply theology in pastoral care to develop pastoral skills, learn from the persons to

whom they minister, and learn from becoming aware of the way in which they

provide pastoral relationships. This pastoral relationship requires developing a

number of ministerial skills such as joining, positive regard, active listening,

summarizing and empathy.[61]

CPE views human persons as living human "documents". This concept views the

human person as a document that is comprised of elements of sin and grace in need of

redemption. Humans are historic beings and are embedded in an historical process

that gives shape to lives. It is held that the living human document is the focus of

pastoral care.[62]

Students are required to study "documents" carefully and systematically in

addition to the theological books. It is assumed that each person's spiritual and

---

[61] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 53; David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 40; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 90-91.

[62] Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 7-9.

psychological struggles are unique, which calls for active listening, genuine understanding and interpretation, without presupposition, categorization and stereotyping. Human beings are holistic and, as such, have physical, psychological, social and spiritual needs. Hence, students must also serve the whole person. This process includes counseling and caring skills such as active listening, empathy, rapport, compassionate presence and acceptance. Therefore, when one attempts to understand another in a conversation, one also brings one's presuppositions, motives, experiences and values. In the sense of incarnation, it means entering that person's world and to have the other enter our world to some degree. Both parties must be open and vulnerable in order for fresh approaches towards relating to other people to be ministered. The intense daily encounter with people in need raises questions about that experience: How does the student perceive God's work in humankind? What family traits and old wounds is the student bringing into his or her pastoral relationship? How will the student's past experiences repeat in the present setting with a new set of characters? How difficult is it for the student to face criticism? How difficult is it for the student to deal with rejection? How difficult is it for the student to face tears and blaming? How difficult is it for the student to face pain and death? How does the student feel about being touched or hugged? What will trigger the student's anxiety? Such interactions may stimulate new questions and reflections for the student.

Common questions center on self-encounter, self-value, pastoral identity, personal

limitations, and understandings of God. Professional and personal self-understanding

are interwoven, and such understanding is used to minister effectively to others.[63]

Case material for supervision

The second element of CPE is case material for supervision. Since students do

their ministry largely out of sight of supervisors, case materials are used as a way of

supervising and helping students achieve a higher level of professional competence

and skills. There are a variety of ways that case material can be presented for

supervision. Verbatim reporting is considered the most useful and is of immediate

value in the clinical training of ministers. The structure of verbatim has remained

essentially the same and is used universally in CPE today.

A verbatim is a written record of the pastoral conversation originally developed

by Russell Dick for hospital ministry in the early 1930s. It provides opportunities for

supervision of pastoral work, as well as for students to become aware of how their

own emotions, behavioral patterns shaped within their family of origin, assumptions,

---

[63] David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 20, 130-131; Charles E. Hall, *Head and Heart: The Story of the Clinical Pastoral Education Movement* (US: Journal of Pastoral Care Publications Inc., 1992), 212-213; Charles V. Gerkin, *The Living Human Document: Re-visioning Pastoral Counseling in a Hermeneutical Mode* (Nashville: Abindon Press, 1984), 37-43; Bonnie Miller-McLemore, Revisiting the Living Human Web: Theological Education and the Role of Clinical Pastoral Education," *The Journal of Pastoral Care & Counseling* 62(1-2) (2008): 3-18.

values and their experiences affect their ministry. It enhances the exploration of

parallel processes where fears and anxieties are projected onto others, making the

student ineffective in ministry. In a verbatim report, the exact content of what is

communicated between student and patient is written down as accurately as memory

will permit. It includes all questions, statements, actions, movements, responses,

feelings, facial expressions, feelings and attitudes of student and patient. Any and all

of these interactions may become significant during the evaluations. Through the

recorded material, a student's pastoral skills, communication style, issues of

differentiation, defense mechanisms, withdrawal behavior, anxiety, fear, strength,

weakness, openness, behavior patterns, old wounds and family traits will all become

apparent. Moreover, not only selective memory offers hints to personal meanings and

reveals a student's self-experience; in fact, hints for the supervision are provided both

in what is recorded and in what is omitted.[64] Sometimes, what is omitted can indicate

a difficult issue for the student; e.g. students with low self-esteem may omit their

patient's positive appraisal and thankfulness. Conflict avoidant students may omit

their patient's disagreement and strong wordings which make them feel threatened.

---

[64] David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 19, 22-23, 136-137, 172; Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993),55; Thornton ,"Clinical Pastoral Education", in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J (USA: Abingdon, 2005), 180; Joan E. Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (US: Journal of Pastoral Care Publications Inc., 1996), 10, 162.

Peer Group experience

The third element of CPE is a peer group experience. CPE is conducted in small groups which usually consist of five to nine students. The peer group led by a supervisor enables students to support and confront each other as persons and as ministers.

Irvin D. Yalom used to talk about group universality, which stated that "when people perceive their similarity to others and share their deepest concerns, they benefit further from the accompanying catharsis and from ultimate acceptance by other members."[65] It is the similarity, trust, genuine sharing, empathic listening, companionship, love and acceptance that bring growth to self-esteem during the group process. The purpose of professional and personal formation is then achieved in the group process.

Furthermore, in each CPE program, there are unstructured group sessions in which students learn by participation in an interpersonal small-group process which is usually called interpersonal relations (IPR). The task of IPR is to provide a setting in which students can have a platform to deal with a wide range of personal issues. Students determine the topics to share and what responses to give. Usually two forces can be found at group. Students' emotional responses to their pastoral work will be

---

[65] Irvin D. Yalom, *The theory and Practice of Group Psychotherapy* (NY: BasicBook, 1985), 9. My emphasis.

discussed, but the interpersonal issues within the group itself will also play a part in the learning.[66] The peer group provides a safe environment for the students to take risk and to interact openly and to learn to express authenticity and vulnerability. It is also a place for students to let go of emotional defenses and to try to get in touch with their own inner feelings. In this way, an authentic human community can be formed. Being transparent and vulnerable, a much healthier connection with selves and others may then be established. In addition, a mutual trust relation also provides a strong basis for students to deal with their fear and anxiety aroused in CPE. Self-understanding and interpersonal competence will then be facilitated.[67]

In sum, in the group process, students may gain insight on at least four different dimensions. First, they may gain a more objective perspective on their interpersonal presentation and their ministry. Second, they may gain awareness of their patterns of behavior with other people. Third, they may explore and discover the reasons for shaping their behavior patterns in their interactions with other people. Finally, they

---

[66] David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 23, 173; Joan Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (USA: Journal of Pastoral Care Publications Inc., 1996), 69-71.

[67] Joan Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (USA: Journal of Pastoral Care Publications Inc., 1996), 40-50; Gerard Egan, *Face to Face: The Small-Group Experience and Interpersonal Growth* (CA: Brooks / Cole Publishing Co., 1973), 86-98; Logan Jones, "I Walk Through Life Oddly: Dispositions, Character, and Identity in Clinical Pastoral Supervision," *Reflective Practice: Formation and Supervision in Ministry* 132 (2012): 159-170; Rodney J. Hunter, "The Changing Faces of Theological Education: Implications for Clinical Pastoral Education," *Reflective Practice: Formation and Supervision in Ministry* 29 (2009): 189-204.

may try to change their patterns of behavior in the group and in their ministry.[68]

Acceptance, love, encouragement, affirmation, appreciation from peers will give

courage to the students to change.

Thus, self-understanding, interpersonal competence, and personal growth in the

psychosocial and spiritual dimension of the student's life are developed.

Relationship with the supervisor

The fourth element in a CPE program is the relationship between a student and

her or his certified supervisor. The supervisor is a teacher, counselor, model, partner

and pastor to the student. The supervisor collaborates with students in helping

students grow. The supervisory relationship usually develops in three stages. In the

first stage, the student is dependent on the supervisor. His or her anxiety and

obedience will be comparatively high and autonomy low; the focus of the student is

on learning what to do. In the second stage, the student disobeys and deviates from

the authority of the supervisor, while exercising comparatively high autonomy; the

focus of the student is more on "being" than on "doing". In the third stage, the student

acts independently, but still consults the supervisor when there is need; the focus of

---

[68] Irvin D. Yalom, *The theory and Practice of Group Psychotherapy* (NY: BasicBook, 1985), 46-47.

the student is a balance between being and doing.[69]

The interaction between supervisor and students has two levels. The first level is the group level; this includes the group discussion of the verbatim presentation and the sharing in the IPR sessions. In the group, the supervisor works as a facilitator – helping students to benefit from the group process and group dynamic. The second level is the individual level. The supervisor meets regularly with individual students for systematic reflection upon the practice of ministry, and helps the students deal with the issues in their pastoral relationships. Both group level and individual level interactions enable students to review themselves and the ways they perform. Both levels try to address the professional and personal self of the student and seek to integrate pastoral skills with student's self-concept. In this way, students may become more aware of their professional and personal identity with the awareness of the impact of self on others. Then students' competence in pastoral ministry is thus enhanced. It is "working with a student who is working with patients, not working with patients through a student".[70] Furthermore, supervision enables students to

---

[69] Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 92.

[70] David A. Steere, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 66-68; Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993), 44; Joan E. Hemenway, *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education* (US: Journal of Pastoral Care Publications Inc., 1996), 162; Mary Gail Frawley-O'Dea & Joan E. Sarnat, *The Supervisory Relationship: A contemporary Psychodynamic Approach* (NY: The Guilford Press, 2001), 69; Thomas St. James O'Connor, *Clinical Pastoral Supervision and the Theology of Charles Gerkin* (Ontario: Wilfrid Laurier University Press, 1998), 9; Scott, Sullender, "Fear as a Dynamic in Supervision, " *Reflective Practice: Formation and Supervision in Ministry 128* (2008): 122-133.

transform their theological knowledge into effective pastoral actions. The doctrine of love, hope and faith can be transformed into actions when they perform ministry.

It is then obvious that supervision has two points of focus: the students and the ministry in which they participate. Both are equally important and simultaneous concerns for supervisors. The material to be supervised consists of practice or situations of ministry upon which supervisors and students reflect critically as a way of reviewing what happened, why they developed as they did, and what can be learned from them. Therefore, when students come for supervision they bring two elements: themselves as persons, and their ministry – what I do as a minister and who I am as minister. These two are equal and interconnected elements.[71]

In sum, there are at least four concerns in supervision: The first is to enhance students' self-understanding and self-awareness. The second is to enhance students' pastoral competencies. The third is to facilitate students to integrate their theological understanding with pastoral practice. The fourth is to strengthen their Christian commitment and faith. The growth in personal and professional identity and competency will thus be promoted.

To foster the growth of students participating in CPE, the role of supervisors is

---

[71] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Ohio: Whaleprints, 1993),76-78; David A. Steere, ed, *The supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 2002), 66-70; Thornton ,"Clinical Pastoral Education", in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J (USA: Abingdon, 2005), 180.

as important as the student. The competency, the commitment and the self of the supervisor all mean a great deal. The competency and the self of the supervisor is enhanced and governed by the admission selection, training process and certification process. Each accrediting agency[72] has their own policy, certification standard and manual to govern the process and standard. Upon certification, they demonstrate their academic and clinical competency, and they show their ability to use themselves as a resource in supervision. For the continuation of CPE supervisor status, each accrediting agency has established their standards to ensure the ongoing professional development and ethical behavior of their members in order to maintain supervisory credentials.[73]

Clinical Pastoral Education in Hong Kong

Hong Kong is a Special Administrative Region of the People's Republic of China. Under the principle of "one country, two systems", Hong Kong has a different political system from mainland China. Hong Kong may have a "high degree of autonomy" in all matters except foreign diplomacy and military defense.[74] With a

---

[72] Examples of Accrediting agency are: Association for Clinical Pastoral Education, The College of Pastoral Supervision and Psychotherapy.

[73] Association for Clinical Pastoral Education, *ACPE Standards and Manuals: 2010 Certification* (GA: ACPE, 210), 1-31; The College of Pastoral Supervision and Psychotherapy, *The Standard of the College of Pastoral Supervision and Psychotherapy-2014* (NY: CPSP, 2014), 1-34.

[74] http://en.wikipedia.org/wiki/Hong_Kong; http://www.scmp.com/news/hong-kong/article/1529167/full-text-practice-one-country-two-systems-pol icy-hong-kong-special "Full text: Chinese State Council white paper on 'One Country, Two Systems'

land mass of 1,104 km^2 (426 sq. mi), there are 13 private hospitals and more than 40

public hospitals serving a population of seven million people in Hong Kong.

Development History

The development of CPE was parallel with that of Chaplaincy service in Hong

Kong. Both were begun in the 1980s.

Between 1950 and 1977, there were four Christian public hospitals founded by

overseas missionary organizations in Hong Kong. They provided medical services as

well as providing evangelical ministry to patients. As such, the Christian staff at these

hospitals dedicated themselves to take care of patients' spiritual needs by means of

evangelism. They, therefore, served as the forerunners of Chaplaincy service and laid

the foundation for the development of Chaplaincy services and CPE in Hong Kong.

In 1984, the first Christian Chaplain started to provide spiritual care in a non-Christian

public hospital as voluntary staff. It marked the beginning of Chaplaincy services

across hospitals in Hong Kong.[75] In the past three decades, chaplaincy has expanded

and grown rapidly in every hospital in Hong Kong. Currently, all public hospitals and

almost every private hospital in Hong Kong have set up Christian Chaplaincy

policy in Hong Kong"

[75] Kit Choi Law, Ed, *Chaplaincy Service & Holistic Healing: An Anthology* (HK: Association of
H.K. Christian Chaplaincy Ministry Ltd., 2005), 336;
http://www.hospitalchap.org.hk/2k12/index.php/about-ministry/history

Departments and have appointed Chaplains as their Honorary Staff to provide

spiritual care for patients and their families.[76] Most of the Chaplains in Hong Kong

are employed and sent by committees which are set up by local churches and

Christian fellowships of the hospitals. Therefore, the number of Chaplains serving in

hospital is subject to the financial status of the committee.

The Association of H. K. Hospital Christian Chaplaincy Ministry (AHKHCCM)

was founded in 1989, to facilitate the growth and development of hospital chaplaincy

services in Hong Kong, to support the ministry in all hospitals with action, to achieve

a higher standard of "holistic care". AHKHCCM became an Affiliated International

Member of ACPE in 1999.[77] In recent years, they then started to offer certification

for hospital chaplains. In 2014, among 152 qualified chaplains, there were ninety-two

who received their certification through AHKHCCM.[78]

CPE training centers

With the rapid growth of chaplaincy services in Hong Kong, the numbers of the

Chaplains also increased accordingly, leading to a greater demand for CPE. Between

---

[76] Association of HK Hospital Christian Chaplaincy Ministry, *Professional Chaplaincy-Its Role and Significance in Healthcare Service* (HK: Association of HK Hospital Christian Chaplaincy Ministry, 2009), 3, 9.

[77] http://www.hospitalchap.org.hk/2k12/index.php/about-miistry/development

[78] Association of Hong Kong Hospital Christian Chaplaincy Ministry Limited, unpublished information.

1985 and 1987, four CPE training centers were formed in response to this demand.

These were the Hong Kong Baptist Hospital, Alice Ho Miu Ling Nethersole Hospital,

the Catholic Diocese of Hong Kong, and Bethel Bible Seminary (which provided

training accredited by The Association for Clinical Pastoral Education and Pastoral

Counseling Education Hong Kong – ACPE-PCE HK). At the same time, there was an

increasing number of ministers and theological students who became aware of the gap

between theological training and ministry practice. Some enrolled for CPE on a

voluntary basis, to enhance their pastoral skills and personal growth. As the demand

for CPE-trained ministers grew, the numbers of CPE training centers also increased.

There are now seven CPE training centers in Hong Kong. The new additions include

Queen Elisabeth Hospital Chaplaincy Training Institute, AHKHCCM and the Hong

Kong Sheng Kung Hui Ming Hua Theological College. These new training centers

provided a different level of CPE training which broke down the CPE learning

curriculum into basic level, advanced level and supervisory level.[79]

Meanwhile, three certification bodies were formed in Hong Kong. These are The

ACPE-PCE HK, The College of Pastoral Supervision and Psychotherapy of Hong

Kong (CPSPHK) and AHKHCCM. They provide certification for professional

chaplains and supervisors in Hong Kong. Most of the standards and certification

---

[79] http://www.hospitalchap.org.hk/2k12/index.php/about-miistry/development

requirements are aligned with that of their American counterparts. Currently there are around twelve CPE supervisors actively participating in training. Half of these CPE supervisors are trained and certified by local training centers. The remaining half received their training and certification in the US, Canada and other countries around the world before Hong Kong's training centers were established.

The CPE programs mentioned in this thesis are conducted by Bethel Bible Seminary. These programs are extended programs requiring 30 weeks for completion (two semesters). Bethel Bible Seminary started CPE training in 1987. It is a compulsory course within the degree program of Master of Divinity. It is also an elective course for Bachelor and Master Degree programs. The BBS training center is an accredited training center of CPSPHK. It has three supervisors who provide supervision for students. Typically, each year, five courses of CPE are conducted simultaneously. There are around 40 students who take CPE each year.

CHAPTER TWO

BIBLICAL FOUNDATION OF CLINICAL PASTORAL EDUCATION

Introduction

Clinical Pastoral Education (CPE) is a professional education for ministry. It

provides professional training to Chaplains, and also to ministers working in different

contexts. The purpose of CPE is to enhance both the students' personal formation and

professional development. For training and equipping ministers, Jesus would be one

of our greatest models. In the four Gospels, it states that the Twelve were chosen and

trained by Jesus to take up His ministry on earth after He ascended to heaven. The

Twelve were lay persons who did not have any education and experience in ministry

before they were chosen. Jesus called them to be His coworkers and gave them

appropriate training during His three-year ministry. The training given by Jesus to the

Twelve was different from the training to disciples, as it was a professional training

for ministry. They were designated as "apostles" (Lk. 6:13) and were intentionally

trained to take up their future leading roles in the church.[80] After Jesus died, being

raised by the Father and ascended to Heaven, the Twelve were able to become leaders

of churches succeeding Jesus to take up His ministry on earth. In this chapter, the

---

[80] M.J. Wilkins, "Disciples", in *Dictionary of Jesus and the Gospels*; Ed. Joel B. Green, Scot McKnight, Howard Marshall (Illinois: InterVarsity Press, 1992), 176-178; Robert C. Tannehill, *Luke,* Abingdon New Testament Commentaries (Nashville: Abingdon Press, 1996), 113.

features and elements of the training Jesus provided to the Twelve will be examined

in the light of CPE. As such, the main focus of this biblical research will be on the

teaching practices of Jesus for the Twelve.

Background

There is much literature devoted to studying the models of teaching and

discipleship that Jesus used to teach and induct His followers into His way of life.

Scholars have discussed His use of parables, allegory, prophecy, rhetoric, and some

other teaching methods of which He made use.[81] These will not be the focus of this

paper, although these were prominent features in the teaching methods Jesus

frequently used. The focus of this paper will be on those training methods which were

related to the Twelve. Since the Twelve were trained for future leading roles, training

for them was therefore different and unique compared with that of disciples (Mt.

10:1-42, 17:1-13, 20:17-28, 26:20-46; Mk. 4:10-34, 9:35-50, 10: 32-45, 11:11-26,

14:17-42; Jn.13:1-17:26).[82]

In the four Gospels, one of the titles most frequently used to describe Jesus is

"teacher". This title is used of Jesus forty-five times. Jesus also used it as a

---

[81] David Csinos, "'Come, Follow Me': Apprenticeship in Jesus' Approach to Education," *Religious Education 105(2)* (2010): 45-62.

[82] Robert C. Tannehill, *Luke*, Abingdon New Testament Commentaries (Nashville: Abingdon Press, 1996), 113; Scot Mcknight, "Jesus and the Twelve" *Bulletin for Biblical Research* 11(2) (2001): 212.

self-designation (Mt. 23:8; Jn. 13:13-14). From this we can infer that one of the major focuses of Jesus during His public ministry was teaching.[83] There were three groups of people He taught most frequently: the crowds, the disciples and the Twelve (Lk. 6:12-19). The crowds were a broader group of followers and supporters (Mt. 4:25, 19:2; Mk. 2:15, 3:7, 5:24, 10:32; Lk. 14:25). They were amazed at Jesus' teaching (Mt. 7:38, 21:9-10), but they did not devote themselves to following Jesus. They were not true believers but only followed Jesus in a physical sense. Even, among the crowds there were some religious leaders and opponents who targeted Jesus and His disciples and wanted to kill Him (Lk. 11:14-16. 11:53, 20:1-8, 22:1-2; Jn. 5:10-18, 11:47-53, 12:10-11). Disciples were followers and believers of Jesus, who had responded to His call and voluntarily committed themselves to follow and learn from Jesus. Disciples are employed as a synonym for "Christian". The Twelve is regarded as a special group of twelve men who were not only disciples of Jesus but also His inner circle. They were called by Jesus into a special relationship with Him and were designated as "apostles" (Lk. 6:13). They were in training as commissioned leaders (Mt. 10:1-2) and Jesus' successors to carry on the ministry after He left. The list of the Twelve is recorded in Mark 3:16-19; Matt.10:2-4; Luke 6:12-13 and Acts 1:13. Apart

---

[83] Robert Stein, *The Method and Message of Jesus' Teaching* (Philadelphia: The Westminster Press, 1978), 1.

from one irregularity and some minor differences in order, the names are consistent.[84]

This group of the Twelve accompanied Jesus during His public ministry and they

were the first group sent out on mission to extend the ministry of Jesus,[85] who were

given the power to cast out demons and heal diseases (Mt. 10:1; Mk. 3:14-15, 6:7; Lk.

10:1,17).

At times, it appears in the Gospels that "the Twelve" and "the disciples" were

interchangeable in their roles and in functions. The confusion arises even in scholarly

literature concerning two distinct but partially overlapping terms. In this thesis, "the

Twelve" and "the disciples" will be treated independently. As scholars have noted, the

Gospels' authors distinguished the Twelve from others and gave them a special

position. The special position of the Twelve can be seen in the process of Jesus

choosing them, the nature of calling from Jesus, and in their roles.

Firstly, the process of choosing the Twelve was special. At first, in the early part

of Jesus' public ministry, He chose disciples from the crowd. Then later, when Jesus

---

[84] M.J. Wilkins, "Disciples", "Discipleship", in *Dictionary of Jesus and the Gospels*, Ed. Joel B. Green, Scot McKnight, Howard Marshall (Illinois: InterVarsity Press, 1992), 176-182, 183-189; Scot Mcknight, "Jesus and the Twelve," *Bulletin for Biblical Research 11(2)* (2001) : 203-231; John Meier, "The Circle of The Twelve: Did It Exist During Jesus' Public Ministry?" *Journal of Biblical Literature 116(4)* (1997): 635-672; Clifton Black, *The Disciples According to Mark* (Sheffield: JSOT, 1989), 165; Ernest Best, *Following Jesus: Discipleship in the Gospel of Mark* (Sheffield: JSOT, 1981), 183; Ernest Best, *Disciples and Discipleship: Studies in the Gospel According to Mark* (Edinburg: T & T Clark, 1986), 103; Richard Bauckham, *Jesus and the Eyewitnesses: The Gospels as eyewitness testimony* (Michigan: Wm. B. Eerdmans Publishing Co., 2006), 94-96; Elizabeth S. Malbon, I*n the Company of Jesus: Characters in Mark's Gospel* (Kentucky: Westminster John Knox Press, 2000), 72-81; Sylvia W. Collinson, *Making Disciples: The Significance of Jesus' Educational Methods for Today's Church* (CA: Paternoster Press, 2004), 30-32; William Yount, *The Teaching Ministry of The Church* (Tennessee: B & H Publishing Group, 2008), 66.

[85] Later on Jesus appointed and sent seventy-two people ahead of Him to preach (Lk. 10:1-16). This group was not given power to cast out demons and heal diseases.

had gone up the mountain with disciples, He appointed the Twelve from their number

(Mk. 3:13-19; Lk. 6:12-13). Along with a wider circle of the "disciples," Jesus

appointed a group named "the Twelve" (Mk. 3:14-16) who formed an inner circle

around Him (Mk. 4:10; 6:7; 9:35; 10:32; 11:11; 14:17).[86]

Secondly, the nature of the calling of the Twelve was special. There were

different levels of calling from Jesus. The first level of calling from Jesus was for the

crowds, who were invited to "come and see" (Jn. 1:39, 46, 3:2, 7:50). This was the

beginning of "following" Jesus. This "coming" to Jesus may simply have amounted to

a curious visit to see Jesus in action. The second level of calling was for the disciples,

which was "follow me" (Mt. 4:19, 9:9; Mk. 1:16-20, 2:13; Jn. 1:43). The third level of

calling was for the Twelve, which was "come and be with me" (Mk. 3:13-19).

Among the three groups of followers of Jesus, only the Twelve were called to be with

Him on a day-to-day basis. They were asked to leave behind their family or political

associations. This was an intimate and special position.[87]

Finally, the role of the Twelve was special. The scholar Ernest Best interprets the

Twelve as specially consecrated for full-time missionary service. Alexander Bruce

---

[86] Ernest Best, *Following Jesus: Discipleship in the Gospel of Mark* (Sheffield: JSOT, 1981), 182-183; Daniel J. Harrington, ed, *The Gospel of Mark*, Sacra Pagina Series, vol. 2, (Minnesota: The Liturgical Press, 2002), 30.

[87] Elizabeth S. Malbon, *In the Company of Jesus: Characters in Mark's Gospel* (Kentucky: Westminster John Knox Press, 2000), 72-81; Greg Ogden, *Transforming Discipleship: Making Disciples a Few at a Time* (Illinois: IVP, 2003), 61-63; Sylvia W. Collinson, *Making Disciples: The Significance of Jesus' Educational Methods for Today's Church* (CA: Paternoster Press, 2004), 32.

interprets the Twelve as students of Christian doctrine, and occasional fellow-laborers in the work of the kingdom, and eventually Jesus' chosen trained agents for preaching the faith after He himself had left the earth. From the time of their being chosen, indeed, the Twelve entered professional training for the ministry. This training took place in the privacy of an intimate daily fellowship with their master. As such, they learned what they should be, do, believe, and teach, as His witnesses and ambassadors to the world.[88]

The manner in which they were chosen, the intimacy of their calling, along with their role as the Twelve, makes it apparent that they had a special designation for extending Jesus' ministry. They were expected to be trained as ministers. From the time of their calling, the Twelve entered a professional training for ministry.

Features of Training

To prepare the Twelve to be ministers and to take up His ministry, Jesus' training method had the same features as professional education for ministry. From the four Gospels, two main features can be seen which are aligned with that of CPE. These features are dual purpose and action-reflection-action.

---

[88] Richard Bauckham, *Jesus and the Eyewitnesses: The Gospels as Eyewitness Testimony* (Michigan: Wm. B. Eerdmans Publishing Co., 2006), 94-96; Alexander Bruce, *The Training of the Twelve* (MI: Kregel Publications, 1988), 30; Ernest Best, *Following Jesus: Discipleship in the Gospel of Mark* (Sheffield: JSOT, 1981), 183-185; David Csinos, "'Come, Follow Me': Apprenticeship in Jesus' Approach to Education," *Religious Education* 105(1) (2010): 45.

Dual Purpose

The first feature of Jesus' teaching of the Twelve is **dual purpose**. To train the

Twelve to be ministers, Jesus' training focused on their "being" as well as their

"doing". The purpose involved both the personal and professional growth of the

Twelve. Arthur Combs emphasizes "the importance of the self as an instrument in a

helping profession. He states healthy and rational human beings are effective and

trustworthy instruments to serve others in difficult situations."[89] Therefore,

professional training for ministers should focus on a minister's "being" and "doing".

Jesus enhanced the **personal growth** of the Twelve firstly by helping them to

build up a healthy sense of self – by providing them with unconditional love and

acceptance. When they were chosen, the Twelve were uneducated and unprofessional.

None of them possessed any exceptional talent, educational or cultural qualifications

worthy of mention (Mt. 4:18-22, 8:9; Jn. 1:35-44), yet Jesus chose them after

carefully and prayerfully deliberating (Luke 6:12-16). He disregarded their

qualification and status. Jesus chose them and called them just because of who they

were. This helped them to see themselves not by what they had, but who they were in

the eyes of Jesus. Further, the nature of Jesus' calling was "come" and "be with me".

---

[89] David A. Steere, ed., *The Supervision of Pastoral Care* (Eugene: Wipf & Stock Publishers, 1989), 146.

Jesus called and invited the Twelve into an intimate relationship with Him. This

demonstrated Jesus' unconditional acceptance and love towards the Twelve. He

connected with them in "I-Thou" relationship which related with them as sacred

human beings. Further, they had lived with Jesus, followed Him and witnessed many

miracles for three years. The scriptures illustrate that they were slow to learn

(Mk.6:45-52, 8:14-21, 9: 30-50), self-centered (Mk. 10:35-41), rough in character

(Lk.47-51; Jn. 18:10-11) and even failed repeatedly to know the real identity of Jesus

(Mk. 9:30-32; Lk. 18:31-34, 22:35-38; Jn. 14:4-9). Yet Jesus did not give up on them.

Instead, He had great faith in the potentials of the Twelve. He believed in them and

saw in them the possibilities of future development and service (Lk. 22:31-34; Jn.

14:12-13, 16:12-22).[90]

Theologians such as Craig Ellison stress that God loves us as we are, that His

love is unconditional, that it provides a stable source for positive regard and thus frees

the people from relying on others who are inadequate humans too.[91] Since God has

accepted the Twelve, they can then also accept and value themselves.

---

[90] Ernest Best, *Following Jesus: Discipleship in the Gospel of Mark* (Sheffield: JSOT, 1981),108-109; Larry W. Hurtado, *Mark,* Understanding the Bible Commentary Series (Michigan: BakerBooks, 2011), 151-154, 241-244; Tony Campolo, Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 11-12; Alexander Bruce, *The Training of the Twelve* (MI: Kregel Publications, 1988), 5-10; Rick Yount, *Teaching Ministry of the Church* (Tennessee: B&H Publishing Group, 2008), 47-50; Charles Francis McKoy, *The Art of Jesus as a Teacher* (Philadelphia: The Judson Press, 1930), 142; Greg Ogden, *Transforming Discipleship: Making Disciples a Few at a Time* (Illinois: IVP, 2003), 76-78.

[91] David Carlson, *Counseling and Self-Esteem* (Waco: Word, 1988), 21; Mark Biddle, "Sin, Shame and Self-Esteem," *Review and Expositor 103* (2006): 364-366; Krause Neal, "Church-Based Social Relationships and change in Self-Esteem Over time," *Journal for the Scientific Study of Religion 48(4)* (2009): 768-769.

As L. E. Conver states, "who we are in Christ can be of service and ministry to others as we willingly give of ourselves on behalf of the kingdom of God."[92] Tony Campolo and Mary Darling state: "Noticing how and why you think, feel, believe, talk, act, and react the way you do opens the door to discovering your true self – an image bearer of God – so that you can treat others in soul-healing ways."[93]

Jesus enhanced the personal growth of the Twelve by facilitating the development of their life as adults: a mature human life built on free and responsible human decisions and actions. He was concerned with the kind of person they should be, rather than with the things they should possess, seeking to awaken them to their situation and to their responsibility to act. Jesus allowed the Twelve freedom to choose to follow Him and respond to Him. Jesus suggested to the people that it was by choosing to do and follow God's will that they could see the truth about Himself and about His teaching (Jn. 8:31-32, 14:21-23, 15:14-15). Matthew's Gospel shows Jesus describing religion in the great and positive statement: "In everything do to others as you would have them do to you; for this is the law and the prophets." (Mt. 7:12). The Sermon on the Mount ends with a call to decision and a challenge to loving one's neighbor to fulfill the law and prophets.[94]

---

[92] David Gushee and Walter Jackson, ed, *Preparing for Christian Ministry: An Evangelical Approach: Formation for Ministry in the 21st Century* (MA: Baker Books, 1996), 109.

[93] Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 37.

[94] David L. Turner, *Matthew,* Baker Exegetical commentary on the New Testament (Michigan:

Jesus allowed them to have different paces of learning and improvement. Jesus even allowed the Twelve freedom to fail and to receive further teaching. Mark often describes the Twelve as ignorant and slow to understand the teaching of Jesus, but the very process of the recognition of their weaknesses facilitated their learning,[95] and their failures were never considered as irremediable and irreversible. Sometimes Jesus allowed the Twelve to begin to practice their learning even though He knew they would not immediately succeed (Mk. 9:19). The Twelve were also slow to dispose of their old values. They valued popularity (Mk. 1:36-37), power, position (Mk. 10:35-41), competitiveness (Mk. 9:33, 34) and wealth (Mk. 10:24-26). Jesus enabled them to identify their attitudes and provided corrective teaching. On a number of occasions Jesus rebuked or questioned the Twelve concerning their lack of faith and understanding in order to point out their weaknesses, bring new teaching into the situation and to provide direction for the future (Mk. 8:32-33, 10:14-15). He sought to develop their faith and trust in Him after their fear in the storm (Mk. 4:40). He allowed the Twelve freedom to implement His teaching and fail. Thus, they were able to learn from their own imperfect attempts, identify their weaknesses and limitations, and receive His further teaching. The Twelve were provided the opportunity in this

---

Baker Academic, 2008), 211-212; Rick Yount, *Teaching Ministry of the Church* (Tennessee: B&H Publishing Group, 2008), 65-66.

[95] At times, Jesus pointed out their mistakes and weaknesses, and further made use of these opportunities to teach them (Mk. 814-21; 33-37; 10:13-16; 10:35-45).

instance to learn and grow in character and skills.[96]

Ministers should cultivate the quality of humility which is the ability to be aware

of and willing to admit that we can't do everything, and that we will sometimes fail.

Conversely, we are called to be humble and faithful, to accept our weakness, to learn

from our failures and mistakes, to be open to criticism and change while yet staying

true to who we are, and to be patient with oneself and others. Humility also means

acknowledging that we can't do it alone and that we are vulnerable. Humility also

means acknowledging that we depend on God and surrender to God's mercy and love.

It is freedom for God.[97]

Jesus enhanced the Twelve's **professional growth** by allowing them to observe

His practices and gradually participate in them. First the Twelve heard and observed

Jesus in His public ministry, and then with regularity Jesus turned to them to offer

further explanation or pose questions (Mk 7:17, 10:23-26). Jesus' earthly ministry can

be characterized by three general actions, as outlined in Matthew 4:23: "Jesus went

throughout Galilee, teaching in their synagogues, preaching the good news of the

kingdom, and healing every disease among the people." The Twelve accompanied

---

[96] Ernest Best, *Following Jesus: Discipleship in the Gospel of Mark* (Sheffield: JSOT, 1981), 108-109; Elizabeth Malbon, *In the Company of Jesus: Characters in Mark's Gospel* (Kentucky: Westminster John Knox Press, 2000), 41-99; Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 99-100; Sylvia Collinson, *Making Disciples: The significance of Jesus-Educational Methods for Today's Church* (Eugene: Wlpf & Stock, 2006), 39-40.

[97] Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 39-42; Kathleen Hope Brown, "Formation and the Education of Ministers," *Theological Education 48(1)*, (2013): 10-20.

Jesus on His journeys, travelling up and down the country with Him.[98] They

witnessed and observed Him teaching, preaching, and healing, experiencing the same

acceptance and rejection that He encountered. He presented Himself as the living

example for the Twelve to observe and study. It appears that early in Jesus' ministry,

the role of the Twelve was to be quiet observers. The Twelve were present at the

various encounters or teachings of Jesus, but they receded into the background.

They were standing off to the side, observing Jesus in action. In the first five chapters

of the Gospel of Mark, the Twelve are mentioned only occasionally – just enough to

let us know that they are present. The first level of learning is to observe and listen.

It was not about the giving of information and knowledge, but about life-to-life

imitation. They gradually came to understand and know Jesus and learned about

teaching, preaching and healing: professional skills in various degrees.[99]

As the ministry of Jesus continued, the Twelve were given opportunities not only

to observe the ministry of Jesus, but to participate in it on His behalf. In Matthew 10:1,

Jesus called and commissioned them to serve and act in His name and as an extension

of His own ministry as Matthew Ch. 8-9 described. "He called His Twelve disciples

to Him and gave them authority to drive out evil spirits and to heal every disease and

---

[98] John P. Meier, "The Circle of The Twelve: Did It Exist During Jesus' Public Ministry?" *Journal of Biblical Literature* 115(4) (1997): 635-672; Scot Mcknight, "Jesus and The Twelve," *Bulletin for Biblical Research* 11(2) (2001: 203-231.

[99] Greg Ogden, *Transforming Discipleship: Making Disciples a Few at a Time* (Illinois: IVP, 2003), 83-89.

sickness." Mark states that they went out in twos preaching the message of repentance

(Mk. 6:7). He gave them authority over unclean spirits (Mk. 6:7-11). In doing so, they

were learning to perform ministry by participation. In performing and participating in

ministry, new skills and understandings were developed. Mark subsequently records

their return and reports their obedience to His directions (Mk. 6:13); no matter success

or failure, it was process for learning and opportunities for further growth and

learning.[100]

In professional training, ministry circumstance becomes the setting for the

practical work of putting God's Word into real life. As Csinos states, "Participation is

necessary to learning. Through participation in practice, one's learning becomes

holistic" – "it involves the whole person, including the bodies, minds, emotions, and

social relations."[101]

There were two points of focus: the Twelve as persons and the ministry they

enacted. Enhancing their personal and professional growth were interconnected

processes. Ministries were integral to their selfhood. Through supervision and

instruction, the Twelve's performing ministry, their pastoral skills and capacity, and

their healthy sense of self and character had the opportunity to grow simultaneously.

---

[100] R.T. France, *The Gospel of Matthew,* The New International commentary on the New Testament (Michigan: W.B. Eerdmans Publishing Co., 374-377; David Csinos, "'Come, Follow Me': Apprenticeship in Jesus' Approach to Education," *Religious Education 105(1)* (2010): 48; Charles Francis McKoy, *The Art of Jesus as a Teacher* (Philadelphia: The Judson Press, 1930), 85.

[101] David Csinos, "'Come, Follow Me': Apprenticeship in Jesus' Approach to Education," *Religious Education 105(1)* (2010): 48.

Among similarities, there is a difference between Jesus' teaching model for the Twelve and that of CPE. For CPE, it is not a usual practice for the students to observe their supervisors before they participate independently in the ministry. Observing the supervisor doing ministry is not a core learning format in CPE. Instead, students do their ministry largely out of sight of supervisors; case materials are used as a way of supervising and helping students achieve a higher level of professional.

Action and reflection

The second feature of Jesus' training of the Twelve is **action and reflection**. Jesus proposed reflection based on action, which flows into commitment to further action and growth. Unlike students of the teachers and rabbis of their time (whose learning centered on formal studies of the Torah), the Twelve were not passive learners. They were encouraged to take action and to reflect on the action accordingly. There were three main moments for reflection. The first moment for reflection was **after their involvement in ministry.** The clearest illustration of active ministry which the Twelve were required to perform was their mission to the villages of Galilee (Mk. 6:7-13): they were to preach the message of repentance and heal the sick. When they returned from the mission, they reported to Jesus "all that they had done and taught" (Mk. 6:30). Then Jesus asked them to go to a quiet place to have some

rest" (Mk. 6:31), which no doubt provided further opportunity for reflection. In the midst of busy, public ministry Jesus provided opportunities for the Twelve to withdraw from the crowds in order to have time to reflect and learn from their experience before moving on to further ministry. This enabled consolidation of learning before they moved to new situations with further demands and further opportunities to make new discoveries.[102]

The second moment for reflection was **along the journey**. The journey of Jesus and the Twelve extended out of Israel's territory into Iturea. It seems they intended to visit the villages of Caesarea Philippi to generate a break midway through the stressful public ministry of Jesus (Mk. 8:27-33). The time taken in travel and the peaceful journey provided a golden opportunity for a reflective period on all that had happened previously. By questioning the Twelve concerning His identity, Jesus was coaching them to make their own reflections regarding all that they had seen, heard and experienced with Him. After Peter's confession of Him as the Messiah, Jesus began to prepare them for His suffering and death. A new and challenging dimension was then added to His ministry. Thus the journey provided an opportunity for the consolidation of what had been previously learned and tried to prepare them what was

---

[102] Sylvia Collinson, *Making Disciples: The significance of Jesus-Educational Methods for Today's Church* (Eugene: Wlpf & Stock, 2006), 37-41, 53; Charles Francis McKoy, *The Art of Jesus as a Teacher* (Philadelphia: The Judson Press, 1930), 85.

about to take place on the final journey to Jerusalem.[103] The Twelve failed to

comprehend the real identity and ultimate mission of Jesus on earth until they saw the

resurrected Christ (Mt. 28:16-20, Mk.16:14-20; Lk. 24:36-53; Jn. 20:19-29). But

surely the teaching of Jesus provided the raw material for the transformation of the

Twelve that took place at the day of Jesus' appearance.

Jesus appeared to time the activities involving the Twelve in such a way that,

between periods of stressful ministry, He created opportunities for the Twelve to have

reflection and discussion with Him.

The third moment for reflection was after the Twelve encountered

life-threatening situations. Matthew shows a growth in their faith as the Twelve

encountered life-threatening situations and later reflected on them. For example, they

were caught in a sudden, life-threatening storm (Mt. 8:23-27). After Jesus calmed the

storm, the miracle which saved their lives stimulated them to reconsider Jesus'

identity. Jesus had shown himself to be the Lord of nature. It seems like a forerunner

of modern adventure education. Through the incident they experienced the

uncertainty of life, and experienced their limitations as humans. At the same time,

their faith and understanding of Jesus' power and authority grew accordingly, in

addition to what He had previously given them to enable them to heal, cleanse, and

---

[103] Sylvia Collinson, *Making Disciples,* 38.

perform other mighty works.[104]

Students' reflection on their reactions, feelings, thoughts and behavior is critically important to the effectiveness of the ministry. Action-reflection-action is an essential learning method for professional training of ministry. It enables students' intelligent capacity and provides opportunity for them to integrate their experience with their theory. The action-reflection-action approach narrows the gap between thinking and feeling, in order to influence further action.

Elements of the training

As professional training for ministers, CPE has basic elements which are commonly observed throughout the world. These elements include clients with personal crises, case material for supervision, peer group experience, and a relationship between students and their certified supervisor. Some of these elements can be found in the training provided by Jesus to the Twelve. They are discussed below.

Pastoral ministry to persons in need

The first element of Jesus' training to the Twelve is **pastoral ministry to**

---

[104] David L. Turner, *Matthew,* Baker Exegetical Commentary on the New Testament (Michigan: Baker Academic, 2008), 242-245; Sylvia Collinson, *Making Disciples: The significance of Jesus-Educational Methods for Today's Church* (Eugene: Wlpf & Stock, 2006), 53.

persons in need. Encountering people in need is an essential component of the professional training process and CPE. Each of the Synoptic Gospels records how Jesus called the Twelve and sent them out on a Galilean mission (Mt.10:1-4, Mk. 3:12-19, Lk. 6:12-16). During the mission, the Twelve went out in twos preaching the message of repentance; they were given authority to drive out evil spirits and to heal disease and sickness (Mt. 10:1, Mk. 6:7). Along with this commission, Jesus provided clear instructions and expectations for the Twelve, such as where to go, what to take, and how to deal with rejection. Jesus also warned the Twelve about what lay ahead (Mt. 10: 5-42, Mk.6: 8-11). In addition, Jesus also waited there to debrief them upon their return. After listening to their reports and sharing, He celebrated their successes and improvements, and addressed their difficulties and failures (MK. 6:52; 8:14-21).[105] In this way, Jesus acted as a supervisor for His students.

In performing their ministries and encountering people in need, the Twelve had the opportunities to take risk to work independently and to apply what they had observed and learned. In the ministry, they would come across different types of people, different needs, different expectations, and different responses. They performed different types of ministries, such as healing, exorcizing demons, preaching and teaching. Meanwhile, they experienced successes, challenges,

---

[105] David L. Turner, *Matthew,* Baker Exegetical Commentary on the New Testament (Michigan: Baker Academic, 2008), 264-282; Greg Ogden, *Transforming Discipleship: Making Disciples a Few at a Time* (Illinois: IVP, 2003), 92-93.

acceptance, rejection, and failures. The Gospels impart a sense of excitement and

query when the Twelve returned and reported back to Jesus (Mk. 6:30). Yet there

were cases that appeared to be beyond their resources that demanded further

instructions from Jesus. As a result, they benefited from this mission and the

debriefing. First, they gained more confidence in the authority and identity of Jesus.

They experienced how Jesus' authority could be exercised even through them (Mk.

4:35-41; 6:37-44, 45-52; 8:29; 9:2-8). Second, they grew in pastoral competence.

New skills and understandings were developed and enhanced (Mk. 6:12-13). Third,

the Twelve were invited by Jesus to become more aware of their own values, thoughts,

behaviors, faith, strengths and limitations (Mt. 7:3-5; Mk.11:20-26, 14:3-9; Jn.

15:1-27). The awareness of their professional and personal identity meant the

awareness of their influence on others. It is when people get in over their heads,

beyond their confidence and competence, that people are truly open and ready to

learning.[106]

Group experience

The second element is the use of a **small group.** From the larger group, Jesus

---

[106] Robert C. Tannehill, *Luke,* Abingdon New Testament Commentaries (Nashville: Abingdon Press, 1996), 113; Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teachig & Preaching* (San Francisco: Jossey-Bass, 2010), 37-42; Greg Ogden, *Transforming Discipleship: Making Disciples a Few at a Time* (Illinois: IVP, 2003), 94-95.

called the Twelve to be the inner circle (Lk. 6:13). Jesus trained the Twelve by

forming them into a small communal group committed to Him as master and teacher

for the whole period of His public ministry. In the group, the Twelve may have had a

new discovery of themselves in the interpersonal relationship and gained benefit from

the group dynamic process. In a freely and lively interactive group, with few

structural restrictions, the Twelve developed into a social microcosm. In such a group

each one of them had the opportunity to begin to be himself. They would likely have

begun to display their maladaptive interpersonal behaviors in the group.[107] The group

process naturally produces its own challenges and opportunities for learning and

growth. In this case, it appears that the Twelve experienced arguments, conflicts,

competition, triangulation, power struggles, angry interactions, and finally –

reconciliation. Hence, the group process not only served as a mirror for the Twelve to

look at their own real reality; it also provided opportunities for Jesus to bring further

teaching, caring and help in resolving their interpersonal issues and maladaptive

interpersonal behaviors (Mk. 9:33-37, 11:13-15, 35-45). They would then have been

able to apply these learning experiences in their future ministry. The group into which

Jesus called them not only allowed them to learn from Jesus, it also provided

opportunities to learn from one another and the group process as they developed close

---

[107] Irvin D. Yalom, *The theory and Practice of Group Psychotherapy* (NY: BasicBook, 1985), 30.

personal relationships with Him and fellow members.[108]

A group environment also provided opportunities for the development of mutual trust and support among the Twelve. The Twelve had different characters and background. They had different strengths and weaknesses. Their learning process and pace were different. During the three years of living together, working together, learning together, under the supervision and guidance of Jesus, they may have learned to know each other very well and developed strong bonding relationships. There was ample opportunity for the development of mutual love and mutual support.

Eventually, mutual trust and intimacy have a positive influence in building a healthy self. As scholars stress, stable and satisfying relationships with mutual trust, unconditional acceptance and respect can nurture a healthy sense of self. Acceptance and encouragement also facilitate a climate for interpersonal psychosocial growth, and strengthen people's confidence and self-image.[109]

Jesus trained the Twelve in a group, gave them peers to learn from and learn with. The group also provided mutual support and love to nurture their healthy selves. The bonding also developed a strong base and support for them to face the challenge

---

[108] Sylvia Collinson, *Making Disciples: The significance of Jesus-Educational Methods for Today's Church* (Eugene: Wlpf & Stock, 2006),34-49; Rick Yount, *Teaching Ministry of the Church* (Tennessee: B&H Publishing Group, 2008), 66.

[109] Gerard Egan, *Face to Face: The Small-Group Experience and Interpersonal Growth* (CA: Brooks/Cole Publishing Co., 1973), 92; William R, Clough, "To be Loved and to Love", *Journal of Psychology and Theology 34(1)* (2006): 23-31; David K. Pooler, "Pastors and Congregations at Risk: Insights from Role Identity Theory," *Journal of Pastoral Psychology* 60 (2011): 705-712.

ahead.

Didactics

The third element is the use of didactics. In Mark's Gospel, approximately

one-sixth of all the verses contain Jesus' general teachings to the crowds. The Twelve

were present for these, but they also received more specialized explanations,

teachings and revelations when they were alone with Jesus (Mk. 4:10, 4:34-35,

7:17-23, 9:11-13, 9:28-29, 9:35-37, 10:10). Teachings to the Twelve constitute

another one-sixth of Mark's Gospel, which means that one third of Mark's Gospel

contains the verbal teachings which the Twelve heard. Much of Jesus' verbal teaching

was delivered as a result of the criticisms or questions of others (Mk. 2:6-10, 2:18-22,

2:24-28, 3:22-29, 7:6-23; 9:11-13, 9:38-50, 10:2-12, 10:17-31, 11:27-33, 12:13-40) or

unusual happenings among the crowds or the disciples. Thus, apart from those

teachings in the synagogues, the vast majority of Jesus' teaching occurred within

informal situations, in everyday conversations or in response to the questions and

challenges. The topics of the teachings were around their characters, spirituality,

religious practices, interpersonal relationship and pastoral skills – they focused both

on "doing" and "being". Jesus' teaching, formal and informal, was very important for

the Twelve' pastoral formation, preparing them to fulfill His mission and face the

challenges of ministry.[110]

Supervisor

The fourth element is the **supervisor – Jesus.** Ron Sunderland describes Jesus as

supervisor. He elaborates that Jesus called a small group of learners (the Twelve) with

whom He shared the tasks of ministry and created a platform for mutual support and

learning. He met regularly with the Twelve to reflect on their common experience and

understandings (Mt. 20:17-28, 26:20-46; Mk. 4:10-34, 9:35-50, 10: 32-45, 11:11-26,

14:17-42; Jn.13:1-17:26). He spoke and acted with authority based on personhood

rather than position (Mt. 17:24-27, 22:37-38). He kept both intimacy and distance

with the Twelve, participating with them in the intense ministry and evaluations but

from time to time He withdraw for times alone. Scholar Allison A. Trites noted eleven

withdrawals of Jesus amongst His stressful and demanding ministry were recorded in

Mark's Gospel (Mk. 1:35, 3:7, 6:31a, 6:45-46, 7:24, 7:31; 8:29, 10:1, 14:26-35,

14:39).[111] He instructed, corrected, demonstrated, blamed, loved, supported, praised,

and challenged the Twelve. He entrusted to His students the ministry with confidence

---

[110] Ernest Best, *Disciples and Discipleship: Studies in the Gospel According to Mark* (Edinburg: T & T Clark, 1986), 108-109; David L. Turner, *Matthew,* Baker Exegetical Commentary On the New Testament (Michigan: Baker Academic, 2008), 264-282; Sylvia Wilkey Collinson, *Making Disciples: The Significance of Jesus' Educational Methods for Today's Church* (CA: Paternoster Press, 2004), 35.

[111] Allison A. Trites, "The Resilient Christ: A Study in Mark's Gospel," *An Academic Legacy* (Fredericton: University of New Brunswick, 1997), 43-53.

in their ability and potential to go on with the ministry (Mk. 6:7-13; Jn. 1:42).

Finally, He gave to those whom He had supervised His full authority and blessing to

do even greater things than He had been able to do (Lk.22:29-30; Jn. 14: 9-15).[112]

As a supervisor, Jesus was compassionate toward His students. Jesus

defended the Twelve from harm and attack (Mt. 9:14-17, 12:1-8, 15:1-42; Mk. 7:1-23;

Jn. 17:12). He gave the Twelve instructions before He sent them out (Mt. 10:1-42; Mk.

11:1-6)). Whether He used a warning (Mt. 16:23; Lk. 24:25) or a gentle explanation

(Mt. 16:21; Lk. 24:27), His focus was on the Twelve's welfare (Mt. 20:28). Jesus

cared more for students than ministry (Mt. 9:14-17, 19). He also established rapport

with the Twelve. Rapport building is a social skill that requires some degree of

sensitivity to those He supervised. Rapport with students is also important in helping

students to have trust with their supervisor and have the confidence to open up their

hearts and have the courage to take risks in the learning process.[113] Further, Jesus

related with the Twelve in "I-Thou" way in which He related with them not as an

object (I-it) but as a sacred being made in the image of God. He then facilitated the

---

[112] Kenneth Pohly, *Transforming the Rough Places: The Ministry of Supervision* (Tennessee: Providence House Publishers, 2001), 98-99; Charles Francis Mckoy, *The Art of Jesus as a Teacher* (Philadelphia: The Judson Press, 1930), 141-145.

[113] Ernest Best, *Disciples and Discipleship: Studies in the Gospel According to Mark* (Edinburg: T & T Clarke, 1986), 122-123; Robert Guelich *Mark 1-8*, Word Biblical Commentary, vol 34A (Dallas: Word Books, 1989), 158; Sylvia Collinson, *Making Disciples: The significance of Jesus-Educational Methods for Today's Church* (Eugene: Wlpf & Stock, 2006),30; Rick Yount, *Teaching Ministry of the Church* (Tennessee: B&H Publishing Group, 2008), 52-62.

Twelve to gain more self-awareness (Lk. 18:9-14, 15:16-17).[114] Jesus set an example

for the Twelve to imitate (Mk. 1:40-45; Lk. 19:1-10; Jn. 5:1-9, 8:1-9,13:1-17) and He

also promoted a safe learning atmosphere for the Twelve to express and to learn

according to their own needs and pace (Mk. 9:33-37).

As a supervisor, Jesus had a strong self-concept. Not only did He serve as a

model for the Twelve to imitate, but He also provided a model for CPE supervisors to

learn from. Jesus provided the proper perspective of self-concept, as well as the

appropriate self-esteem that results from it. He demonstrated a healthy self-concept in

five ways. First, Jesus' self-concept was based on a "Father first". Jesus earnestly

fulfilled what the Father had assigned Him to do (Lk. 13:31-33; Jn. 5:19-36, 8:28-29,

19:1-30). Regardless of circumstances, Jesus never put behind His mission and His

identity on earth (Jn. 14:6-7, 18:8-11). Second, Jesus was a human of dynamic

humility and determined submission (Lk. 22: 39-44). The Gospels state that Jesus was

the humble "suffering servant" (Mt. 16:21; Isa. 53). It is obvious that His humility

was not passive. He never played the victim, and never followed God's will

reluctantly or regretfully. Rather His humility was a dynamic one with energetic

submission. He used His own free will to choose to follow God's will, and to sacrifice

---

[114] Tony Campolo, Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching and Preaching* (San Francisco: Jossey-Bass, 2010), 10-11.

His own life. Even when He stood before Pilate for trial, the one man who could

rescue Him from the cross, He was still obedient, brave and powerful (Lk. 23:1-3;

Jn.18:33-37). Despite the rejection of people, and the slow progress and failures of

His disciples, He still trusted God and had faith in the tasks entrusted to Him. Jesus

did not humiliate Himself. He never depreciated His ministry (Jn. 19:11). Third,

Jesus' self-concept is shown by calmness when facing attacks and challenges (Mk.

3:20-27; Jn. 20:1-8). He did not deny and did not escape. He possessed an inner sense

of authority and identity. He did not reply to people's praise and affirmation to ensure

His own achievement and value. He affirmed that only the Father can judge (Lk. 8:37;

Mt. 8:34, 9:1). Fourth, Jesus demonstrated love and patience with the Twelve. The

Twelve had many weaknesses and failures, yet Jesus never gave up on them (Jn.

17:12). He demonstrated patience when the Twelve lacked faith during the storm (Mk.

4:40) and when they failed to heal the demon-possessed boy (Mt. 17:20). Insecure

teachers easily lose patience with students because they do not have confidence in

their own teaching ability when students fail. Even worse, they perceive the failures

of students as their own failures. They put their self-value on the achievement of

students. Jesus was a secure teacher – He patiently tried and waited, until His students

grew up and improved. He had confidence in both Himself and His students (Lk.

22:31-32; Jn.16: 12-22). Fifth, Jesus' self-concept was identified with the Father

through prayer. The Gospels state Jesus withdrew alone and prayed in private many times (Mt. 14:13; Mk. 1:35, 6:46; Lk. 6:12). Connection with the Father and identification with the Father was the base of Jesus' healthy self. His personal value was based securely on God.[115]

A healthy self-concept and a Godly sense of self-esteem are important for ministers and supervisors of any era.

In sum, in order to prepare the Twelve to take up His ministry, Jesus employed a professional training method which had the similar features with that of CPE. Jesus' training had dual purposes which aimed at enhancing the personal and professional growth of the Twelve. At the same time, Jesus encouraged the Twelve to gain insights and make improvement through action and reflection in midst of intense ministry. Moreover, supervised ministry, group process and didactics were the elements of the training provided to the Twelve. Finally, as a supervisor, Jesus had a strong and healthy self-concept which was the great model for CPE supervisors to learn from.

---

[115] Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 52-57; Rick Yount, *Teaching Ministry of the Church* (Tennessee: B&H Publishing Group, 2008), 54-57; Sylvia W. Collinson, Making Disciples: The Significance of Jesus' Educational Methods for today's Church (CA: Paternoster Press, 2004), 39-40; Daniel Jacobs, Paul David, and Donald Jay Meyer, *The Supervisory Encounter: A Guide for Teachers of Psychodynamic Psychotherapy and Psychoanalysis* (London: Yale University Press, 1995), 227-231.

CHAPTER THREE

THEOLOGICAL RESEARCH STUDIES ON SELF-ESTEEM

Introduction

The main goals of Clinical Pastoral Education (CPE) are to enhance students'

pastoral identity and pastoral competency. According to Edward E. Thornton,

"Pastoral identity refers to the relatively enduring pattern of attachments, behaviors,

and values characteristic of persons providing religious ministries. Pastoral identity

forms around one's self-awareness, self-esteem, self-transcendence, and process of

self-actualization".[116] Based on Thornton's definition, pastoral identity is formed

partly from one's self-esteem. According to Daniele Flannery, identity and

self-esteem can change.[117] Researchers Marianne Ryeng, Jane Kroger and Monica

Martinussen in a 2013 study find out that high self-esteem is positively related to the

committed identity statuses, and lower self-esteem scores are linked with

uncommitted statuses. The findings confirmed that the constructs of self-esteem and

identity hold important theoretical linkages.[118] Therefore, this paper uses self-esteem

as a simple indicator for pastoral identity as a measurement of the changes of CPE

---

[116] Edward E. Thornton, "Pastoral Identity", in *Dictionary of Pastoral Care & Counseling*, Ed. Hunter Rodney J (Nashville: Abingdon, 2005), 567-568.

[117] Daniele Flannery & Elisabeth Hayes, *Women as learners: the significance of gender in adult learning* (San Francisco: Jossey-Bass, 2000), 54.

[118] Marianne S. Ryeng, Jane Kroger & Monica Martinussen, "Identity Status and Self-Esteem: A Meta-Analysis," *Identity: An International Journal of Theory and Research* 13 (2013): 201-210.

students.

The term self-esteem firstly emerged among psychologists in the twentieth century, and became a popular and far-reaching topic. At first, it was widespread in the secular world and then gradually within the Christian world as well. A great number of research studies and books emphasize the importance of self-esteem in parenting, child development, education, family, marriage, personal growth, psychological health, interpersonal relationships, job performance, academic achievement, life satisfaction and church growth.[119] Although the qualities of these materials are varied, the widespread influence of this topic can be seen among different groups of people to varying degrees. In the Christian world, writers and theologians have long studied self-esteem. However, their views are often regarded as controversial.

This thesis seeks to clarify and discuss the views of theologians on self-esteem. Scientific studies on self-esteem will be integrated as supports. The discussion will draw from different perspectives to illustrate the meaning and importance of self-esteem. A theological view of self-esteem will then be synthesized. The factors

---

[119] Ulrich Orth, Richard Robins, Brent Robert, "Low Self-Esteem Prospectively Predicts Depression in Adolescence and Young Adulthood", *Journal of Personality and Social Psychology*, 2008, Vol. 95(3), 695-708; Virgil Zeigler-Hill, Brendan Clark, Tamra Beckman, "Fragile Self-esteem and the Interpersonal Circumplex: Are Feelings of Self-worth Associated with Interpersonal Style?," *Journal of Self and Identity*, 2011, Vol. 10, 509-536; Andrea Steiger, Mathias Allemand, Richard Robins, "Low and Decreasing Self-Esteem During Adolescence Predict Adult Depression Two Decades Later," *Journal of Personality and Social Psychology*, 2014, Vol. 106(2), 325-338.

contributing towards one's self-esteem will be examined. Ways to enhance

self-esteem will also be explored.

The meaning of Self-esteem

Scholars and theologians have, so far, not reached a consensus on the definition

of self-esteem. However, there are some common features that are supported by

scientific research. Within the secular world, different scholars have contributed

significantly to research and understanding of the concept of self-esteem. They define

self-esteem in different ways but have some common points. In 1890, William James

firstly defined self-esteem as "capturing the sense of positive self-regard that develops

when individuals consistently meet or exceed the important goals in their lives."[120]

In the 1960s, sociologist Morris Rosenberg defined self-esteem as "the evaluation

which the individual makes and customarily maintains with regard to himself…it

expresses an attitude of approval / disapproval."[121] Psychologist Nathaniel Branden in

1969 defined self-esteem as "the disposition to experience oneself as competent to

cope with the basic challenges of life and as worthy of happiness."[122] Psychologist

Stanley Coopersmith in1967 defined self-esteem as "the evaluation which the

---

[120] Virgil Zeigler-Hill, ed., *Self-Esteem* (NY: Psychology Press, 2013), 2.

[121] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 13.

[122] Nathaniel Branden, *Six Pillars of Self-Esteem (*NY: Bantam Books, 1994), 27.

individual makes and customarily maintains with regard to himself: it expresses an

attitude of approval or disapproval, and indicates the extent to which the individual

believes himself to be capable, significant, successful, and worthy."[123] Marianne S.

Ryeng, Jane Kroger and Monica Martinussen in 2013 defined self-esteem as "an

evaluation of one's own value that, in turn, is frequently related to how one is

perceived by others."[124] D. R. Kille and J. V. Wood in 2012 defined self-esteem as

"one's overall evaluation of oneself – the extent to which one values and prizes the

self. … Self-esteem is one's subject evaluation of the self."[125] Viktor Gecas, Monica

Longmore defined self-esteem as "the evaluative and affective aspects of the self, to

how "good" or "bad" we feel about ourselves. It is …the ability to look at oneself and

to evaluate what one sees. ……. These self-feelings make self-esteem important both

experientially (i.e., they constitute some of our strongest emotions) and motivationally

(i.e., people are motivated to seek positive self-feelings and to avoid negative

self-feelings.)[126] When Howard B. Kaplan defined self-esteem, he stated that

definitions of self-esteem usually involve one or more of four classes of self-referent

---

[123] Stanley Coopersmith, *The Antecedents of Self-esteem* (San Francisco: W.H. Freeman & Company, 1967), 4-5.

[124] M.S. Ryeng, J. Kroger & . Martinussen, "Identity Status & Self-Esteem: A Meta-Analysis," in *An International Journal of Theory and Research* 13 (2013), 201-213.

[125] D R Kille & J V Wood, "Self-Esteem" in *Encyclopedia of Human Behavior*, 2nd ed., ed. V.S. Ramachandran (Ca: Academic Press, 2012), 321.

[126] Viktor Gecas & Monica Longmore, "Self-Esteem" in *International Encyclopedia of Marriage and Family*, 2nd ed., Vol. 3, ed. James J. Ponzetti (NT: Macmillian Reference, 2002), 1419.

responses: self-cognition, self-evaluation, self-feeling, and self-enhancing or

self-protective mechanisms.[127] Virgil Zeigler-Hill in 2011 defined self-esteem as

"Self-esteem is an evaluative aspect of self-knowledge that concerns the extent to

which people like themselves. Self-esteem is considered to be a relatively enduring

characteristic that possesses both motivational and cognitive components."[128]

In the Christian world, theologians have defined self-esteem with some special

emphases. David Carlson in 1988 defined self-esteem as "the positive value we put on

ourselves. It is the willingness to give up being the center of my world and accept

myself as God's creation: lovable, valuable, capable, forgivable, and redeemable."[129]

Craig Ellison in 1983 defined self-esteem as "The feeling or evaluation component of

self-attitude is what is meant by self-esteem."[130] Carroll Saussy defined self-esteem as

"a concept used to measure persons' thoughts and feelings about their selves….They

form opinions about their bodies, intellects, talents, behaviors, performances, and their

capacity to develop and sustain intimate relationships."[131] Robert Schuller defined

---

[127] Howard B. Kaplan, "Self-Esteem" in *Encyclopedia of the Life Course and Human Development*, Vol. 1, ed. Deborah Carr (Ca: Macmillan Reference, 2009), 424-425.

[128] Virgil Zeigler-Hill, "The Connections Between Self-Esteem and Psychopathology," in *Journal of Contemporary Psychotherapy*, 2011, Vol. 41, 157-164.

[129] David Carlson, ed., *Counseling and Self-Esteem* (Waco, Texas: Word Books Publisher, 1988), 20-21.

[130] Craig Ellison, ed., *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row, Publishers, 1983), 3.

[131] Carroll Saussy, *God images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 77.

self-esteem as "the ultimate will of man – that what you really want more than anything else in the world is the awareness that you are a worthy person. It is the deepest of all the currents which drive man onward, forward and upward."[132] What people want most is the awareness that they are a worthy person. Anthony Hoekema defined self-esteem as "a person regards himself, his conception of his own worth."[133]

As such, integrating the varied definitions is not an easy task. This thesis will use a simple definition with highlighted features to articulate the meaning of self-esteem. When referring to self-esteem, this paper defines the term as 'an ongoing self-evaluation and judgment of one's own personal efficacy and personal worth.' The following features and elements will augment this basic definition.

First, self-esteem is comprised of personal efficacy and personal worth. Personal efficacy refers to the level of competence at meeting the challenges of life and meeting the demands for achievement. Personal worth refers to an attitude that recognizes the intrinsic value, accepts and has affection for oneself.[134]

Second, self-esteem conveys both cognitive and affective aspects. The cognitive

---

[132] Robert H. Schulleer, *Self-Love: The Dynamic Force of Success* (NY: A Jove Book, 1984), 18; David Carlson, ed., *Counseling and Self-Esteem* (Waco,Texas: Word Books Publisher, 1988), 246.

[133] Anthony Hoekema, *The Christian Looks at Himself* (Mich: Grand Rapids, 1975), 13.

[134] R. Ridley, "Self-Esteem," in *Dictionary of Pastoral Care & Counseling,* Hunter Rodney J. Ed. (Nashville: Abingdon, 2005), 1131; Nathaniel Branden, *The Psychology of Self-esteem (*San Francisco: Jossey-Bass, 2001), 110; Jerry, Aldridge, *Self-esteem: loving yourself at every age*, (Birmingham: Doxa Books, 1993), 20; Richard Erickson, "The Psychology of Self-Esteem: Promise or Peril?" in *Journal of Pastoral Psychology*, 1987, Vol. 35(3), 164; Joanne Chung, Richard Robins, Erik Noftle, "Continuity and Change in Self-Esteem During Emerging Adulthood," in *Journal of Personality and Social Psychology*, 2014, Vol. 106(3), 469.

aspect includes judgment and self-awareness. The affective aspect generates

emotional reactions and motivation. Apart from these two aspects, much of the

self-evaluation process is automatic and unconscious.[135] That is, it operates with or

without the conscious knowledge of the person.

Third, self-esteem is dynamic. It is both relatively durable and open to change,

which plays a role in shaping the perception, experience, and behavior of a person.[136]

In sum, self-esteem is related to the judgment of one's own competence and

intrinsic value. It generates emotions and motivation which, in turn, influence one's

behavior in daily life. In view of this, self-esteem may have great influence on

people.

The importance of self-esteem

Humanistic psychologists have suggested that self-esteem is a basic human need

---

[135] Carroll Saussy, *God images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 77; Leslie Francis, Mandy Robbins, Jenny Rolph, "The Relationship Between Recalled Self-esteem as a Child and Current Levels of Professional Burnout among Anglican Clergy in England," in *Journal of Pastoral Psychology*, 2010, Vol. 59, pp 553; Viktor Gecas & Monica Longmore, "Self-Esteem" in *International Encyclopedia of Marriage and Family*, 2nd ed., ed James, J. Ponzetti (NY: Macmillian Reference, 2003), 1419; Christopher P. Ditzfeld & Carolin J. Showers, "Self-Structure: The Social and Emotional Contexts of Self-Esteem" in *Self-Esteem*, ed. Virgil Zeigler-Hill (US: Psychology Press, 2013), 34-35.

[136] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 18-20; R. Ridley, "Self-Esteem," in *Dictionary of Pastoral Care & Counseling*, Hunter Rodney J. Ed. (Nashville: Abingdon, 2005), 1131; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem.* (San Francisco: Harper& Row Publishers, 1983), 35; Joanne Chung, Richard Robins, Erik Noftle, "Continuity and Change in Self-Esteem During Emerging Adulthood," in *Journal of Personality and Social Psychology*, 2014, Vol. 106(3), 469; D K Kille & J V Wood, "Self-Esteem" in *Encyclopedia of Human Behavior*, 2nd ed., ed. V.S. Ramachandran (Ca: Academic, 2012), 321.

that related to human survival and the interdependent social relationships. Although

mental health professionals assert that healthy self-esteem is important for well-being,

it is difficult to measure the impact of self-esteem on people. From time to time

research has demonstrated that self-esteem is correlated to some personality

characteristics and psychological health. This, in turn, may have different degrees of

influence in one's life. For example, high self-esteem predicts closeness in intimate

relationships, better job performance, and academic achievement. On the other hand,

low self-esteem predicts a number of maladaptive outcomes such as poor physical and

psychological health.[137]

First, some research has shown that self-esteem is correlated to several

personality characteristics. People with high self-esteem appear to be more adaptive,

more effective, more independent, more agreeable, warm, more autonomous, more

creative, more balanced, more assertive, having greater openness to alternatives,

higher self-confidence, more able to tolerate differences and criticism, and more able

to speak up for their rights. These personality characteristics build up a stable

foundation which enables people to cope with stress, problems, challenges, and

---

[137] Nathaniel Branden, *Six Pillars of Self-Esteem* (NY: Bantam Books,1994), 273-6; Nathaniel Branden, *The Psychology of Self-esteem (*San Francisco: Jossey-Bass, 2001), 109; Virgil Zeigler-Hill, ed. *Self-Esteem* (NY: Psychology Press, 2013), 9, 88, 145-146; Helmut A. Fend, "Low and Decreasing Self-Esteem During Adolescence Predict Adult Depression Two Decades Later" in *Journal of Personality & Social Psychology,* (2014) Vol.106(2), 325-338; J.M.Joung. R.W.robins, K.H. Trzesniewski, E.E. Noftle et al, "Continuity and Change in Self-Esteem During Emerging Adulthood" in Journal of Personality & Social Psychology, (2014), Vol. 106 (3), 469-483; Howard B. Kaplan, "Self-Esteem" in *Encyclopedia of the Life Course and Human Development*, ed. Deborah Carr (NY: Macmillian Reference, 2009), 425.

opportunities in a positive way. They may also feel easier to interact with others. On

the other hand, people with low self-esteem appear to be more vulnerable, more

cautious, more dependent, more conservative, self-protective, more defensiveness,

more submissive, and even aggressive. They are usually hypersensitive to negative

feedback or criticism, more concerned about what others think of them, more likely to

have feelings of being hurt. They tend to have feelings of insecurity, discouragement,

inferiority, unworthiness, submissiveness, loneliness, being unlovable, being isolated,

emotionally unstable and habitually feeling badly about themselves. They are more

likely to employ self-protective mechanisms characterized by a reluctance to care for

themselves, and attempt to cover up their dark side from being noticed. There is

evidence that people with low self-esteem assume the greatest amount of social

distance, are less people-oriented, and are members of socially rejected groups.[138]

Second, there are findings that indicate a correlation between self-esteem and

psychological health.[139] Such studies demonstrate that with increasing anxiety,

self-esteem decreases. This suggests that people with feelings of inadequacy,

unworthiness, and inferiority are more likely to find it difficult to cope with stress in

---

[138] Chris Mruk, *Self-Esteem: Research, Theory, and Practice,* (NY: Springer Publishing Company, 1995), 70-71; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row, Publishers, 1983), 4; William Britt, "God's Holiness and Humanity's Self-Esteem", *Journal of Psychology and Theology*, 1988, Vol. 16(3), 217; Helen Cheng, Adrian Furnham, "Perceived Parental Rearing Style, Self-Esteem and Self-Criticism as Predictors of Happiness," *Journal of Happiness Studies*, 2004, Vol. 5, 1.

[139] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 77-78.

general. It is also suggested that low self-esteem is positively associated with

depression. With the enhancement of self-esteem, the condition of depressed mood

can show improvement. However, a decrease in self-esteem has been shown to induce

depression. It is also suggested that low self-esteem emerges during major depressive

episodes. Therefore, it appears that a reciprocal link between depression and

self-esteem exists.[140] Anxiety and depression are two of the most common mood

disorders affecting psychological well-being. Both have been shown to be closely and

positively correlated with self-esteem.

Personality characteristics and psychological health play an important role in our

daily life. The level of self-esteem significantly influences every aspect of a person's

existence, such as work performance, marriage, interpersonal relationships, intimate

relationships, parenting, achievement and happiness. It is also relevant for a number

of important personal and social life outcomes.[141]

---

[140] Peter H Silverstone & Mahnaz Salsali, "Low self-esteem and psychiatric patients: Part I—The relationship between low self-esteem and psychiatric diagnosis", *BioMed Central* (CA: Annals of General Hospital Psychiatry, 2003), 2, 7; Ulrich Orth, Richard Robins, Brent Roberts, "Low Self-Esteem Prospectively Predicts Depression in Adolescence and Young Adulthood", in *Journal of Personality and Social Psychology*, 2008, Vol. 95(3), 704; Andrea Steiger, Mathias Allemand, Richard Robins, "Low and Decreasing Self-Esteem During Adolescence Predict Adult Depression Two Decades Latter", *Journal of Personality and Social Psychology*, 2014, Vol. 106(2), 333; T Psyxzczynski, J Greenberg, S Solomon, J Amdt, J Schimel, "Why do People Need Self-Esteem? A Theoretical and Empirical Review", in *Psychological Bulletin*, 2004, Vol.130(3), 435-468; Virgil Zeigler-Hill, "The Connections Between Self-Esteem and Psychopathology," in *Journal of Contemporary Psychotherapy*, 2011, Vol. 41, 157-164.

[141] Nathaniel Branden, *Six Pillars of Self-Esteem (*NY: Bantam Books, 1994), 5; Andrea Steiger, Mathias Allemand, Richard Robins, "Low and Decreasing Self-Esteem During Adolescence Predict Adult Depression Two Decades Latter", in *Journal of Personality and Social Psychology*, 2014, Vol. 106(2), 325; Urich Orth, Richard Robins, Keith Widaman, "Life-Span Development of Self-Esteem and Its Effects on Important Life Outcomes," in *Journal of Personality and Social Psychology*, 2012, Vol.102(6), pp1271-1288; A. Furnham, H. Cheng, "Perceived Parental Behaviour, Self-esteem and

Theological basis of self-esteem

The term "self-esteem" first emerged in the psychological world and gradually

entered the Christian world. The concept about self and self-esteem has Biblical roots.

In fact, self-conception and self-evaluation appear to be a unique gift imparted only to

human beings by the Creator. Among the creatures, only human beings are capable of

viewing themselves as an object, evaluating themselves and holding esteem of

themselves.[142] That is, self-esteem is an intrinsic characteristic created by God in

humans. When self esteem, originally a psychological concept, is interpreted and

discussed among theologians, controversy is inescapable. In the following section,

different views of theologians on self-esteem will be discussed, and the theological

basis of self-esteem will further be explored and explained.

Regarding the different views of self-esteem among theologians, it appears there

are two main camps of thought. On one side, theologians and writers consider

self-esteem to be incompatible with Christian faith. This view is supported by authors

such as Jay Adams[143] and Paul Brownback.[144] Jay Adams views self-esteem as a

---

Happiness" in *Social Psychiatry & Psychiatric Epidemiology*, 2000, Vol. 35, 463-479.

[142] Craig Ellison, ed.. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983), 1.

[143] Jay Adams is the former director of Advanced Studies at Westminster Theological Seminary in California and the Dean of the Institute of Pastoral Studies at the Christian Counseling and

pagan system. Furthermore, he views attempts to reconcile self-esteem with biblical

concepts to be blasphemous. To reject the notion of self-worth embedded within the

concept of self-esteem, Adams states that the Bible only commands us to love God

and love neighbor, and there is no command in the Bible to love one self. To reject

the notion of self-affirmation, Adams said Jesus exemplified self-denial as the way to

enter into a proper relationship with God. To counter the notion of self-worth, Adams

stated that intrinsically human being is worth little. Therefore, he concludes that

Christians must abandon the concept of self-esteem and its notions.[145]

Paul Brownback points out that the Bible contains no explicit, positive teachings

on the subject of self-esteem and self-love. Further, for almost two thousand years

theologians studied Scripture without discovering the doctrine of self-love as we now

have it. The silence of scriptural teaching on this point casts doubt on the claim that

the concept of self-esteem is a biblical one. He cites self-psychologist William James'

definition of self-esteem as positive self-feelings. Brownback states that human

beings created in the image of God are not capable of being the source of anything of

value. Therefore, humans should not "feel good" about self; and one should not boast

in self but only in the Lord. He suggests self-love is pride. He views both self-image

Educational Center. He has published over 100 books. He received his doctorate in preaching.

[144] Paul Brownback served as dean of Word of Life Bible Institute, as President of Citadel Bible College, as pastor of Tulsa Bible Church, and in full-time counseling. He received his Ph.D. from New York University in Religious Education.

[145] Jay Adams, *The Biblical View of Self-Esteem, Self-Love & Self-Image* (Eugene, Oregon: Harvest House Publishers, 1986), 63, 67, 81-82, 104, 132.

and self-hate as self-centered attitudes. It is sin that creates guilt, resulting in

self-consciousness, which leads to a self-centeredness. Rather, he advocates an

other-oriented way of living and leaves the judgment of our reward in God's hands.[146]

On the other side of the argument, some theologians and writers see self-esteem

as an important concept and consider it to be a basis for church ministry. Robert

Schuller is one of the more prominent proponents of this school of thought. Schuller

submits that self-love is the ultimate will of human beings. Human beings want most

to be aware that they are a worthy person. It is the deepest of all the currents which

drive humans onward, forward and upward. He further elaborates that the biblical

foundation for self-esteem is that people were created in the image of God. He,

therefore, urges Christians to appeal to a non-believer's self-esteem as a strategy for

evangelism. Schuller justifies this evangelistic approach by stating that Jesus' salvific

action is the ultimate solution for the need for self-esteem. He states that the theology

of self-esteem not only produces a theology of evangelism, but also produces a

guideline for communication, social ethics, economics – and that this builds up to a

roadmap of government.[147]

Although the two schools of thought appear to be at odds with each other, neither

---

[146] Paul Brownback, *The Danger of self love: Re-examining a popular myth* (Chicago: Moody Press, 1982), 43-48, 50, 96-97, 123, 134.

[147] Robert Schuller, *Self-Love: The Dynamic Force of Success* (NJ: Fleming, 1969),11-12,18-23; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983), 195-198.

adequately grasps the complete picture of the Bible and self-esteem. Beyond these two schools, there are theologians who offer sound biblical principles and a theological basis for self-esteem, such as David Carlson, Craig Ellison, Carroll Saussy and Anthony Hoekema. Their perspectives on this issue are synthesized here to form a theological basis for self-esteem, which integrates the biblical principles of creation, redemption, God's love and new creature in Christ.

The first theological basis for self-esteem is the **creation** account recorded in Genesis (Gen 1:27-31 and 2:4-25). According to this account, human beings are special because every human being is deemed a unique person of great worth and dignity. Among the creatures, only human beings were created in God's own image. Hans Schwarz stated that being created in God's image means to act in God's place, as His administrator and representative, to rule, exercise dominion over all living beings; human beings were not created to be slaves of God, but are God's partners and even God's administrators on earth. They are representing God in caring for God's creation, sensitizing ourselves and others, and forming communities of care.[148] Joel Green also stated that being created in God's image means the human being is in relation, as God's partner, and with emphasis on the communal character of personhood, the quality of care the human family is to exercise with regard to creation

---

[148] Hans Schwarz, *The Human Being: A Theological Anthropology* (Michigan: Grand Rapids, 2013), 20-29, 211-213, 343.

as God's representation. With this divine vocation, human beings entailed

individuality within community and the human capacity for self-transcendence and

morality – that is, the capacity to make decisions on the basis of self-deliberation,

planning and action on the basis of that decision, and responsibility for those decision

and actions.[149] The image of God is not external to human nature – upon creation,

God's image is intrinsically bestowed on humanity. The human's value has been

conferred by the highest source, the Creator. God has placed the highest value upon

the human being. In God's eyes, the human being is special, valuable, and worthy

from the very beginning, which is independent of one's status, ability, achievement,

gender, or race, etc.[150]

Yet through the Fall (Gen 3), the human being has abandoned its God's

relationship and become mortal. However, human beings still retained the image of

God – the image of God has not been lost as a result of sin. As John Calvin asserted,

"some remaining traces of the image of God which distinguish the entire human race

from the other creatures." Karl Barth emphasized that "humanity was created in the

---

[149] Joel B. Green, *Body, Soul, and Human Life: The Nature of Humanity in the Bible* (Michigan: Baker Academic, 2008), 61-65.

[150] Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983), 5; Anthony Hoekema, *The Christian Looks at Himself* (Mich: Grand Rapids, 1975), 21; David Carlson, ed. *Counseling and Self-Esteem* (Waco, Texas: Word Books Publisher, 1988), 20; Eric Johnson, "Self-Esteem in the Presence of God," in *Journal of Psychology and Theology*, 1989, Vol. 17(3), 229; William Britt, "God's Holiness and Humanity's Self-Esteem," in *Journal of Psychology and Theology*, 1988, Vol. 16(3), 217-218; Anastasia Victoria, L. H. Ho & Tick N. Sim, "The Development and Validatin of a God-Centered Self-Esteem Scale," in *Journal of Psychology and Theology*, 2013, Vol. 41(1), 36-47.

image of God which did not get lost through sin. Even as a sinner a human being is still God's creature and related to God."[151] Hence, God's image is universal to humankind so that regardless of one's faith in Jesus Christ, humans are still of intrinsic worth.

In view of the great value that God placed on humans through creation, people should love, be loved and show self-love. It also follows that people should respect, be respected and show self-respect. People may thus affect their self-worth positively.

The second theological basis for self-esteem is **redemption**. Despite human sin, God initiated a salvation plan to provide a way out for them. The only way to pay the debt of sin was God's sacrifice of His one and only Son, which God willingly did. God laid the iniquity of all humans on His only son to make His life a guilt offering. (Is 53:4-10) God did this by sending His only Son to die on the cross while we were still sinful. This amazing act of salvation shows that, in God's eyes, the value of humans is as immense and profound as at the time of Creation. People are counted as important and valuable in the light of the cross of Christ. The cross of Christ is a secure base to which people can anchor a true valuation and esteem of self and others. In receiving salvation through Jesus Christ, people gain complete acceptance in God's

---

[151] Hans Schwarz, *The Human Being: A Theological Anthropology* (Michigan: Grand Rapids, 2013), 211-215.

sight. Sinful humans are helpless and hopeless, but not worthless.[152]

The third theological basis for self-esteem is **God's love**. God's unconditional, steadfast and everlasting love is demonstrated in creation, in salvation, and in universal grace. Even though humans sinned against Him, rejected and ignored Him, His love never failed, and He never turned his back on humanity. His love embraces forgiveness and acceptance. In spite of humanity's shortcomings and failures, God provided a foundation for positive self-esteem. Since God loves us as we are, and His love is unconditional, then we may also love ourselves as we are. God's love provides a stable source for positive regard and thus frees people from relying on others who are inadequate humans too. Since God has accepted us, we can now also accept ourselves.[153]

The fourth theological basis for self-esteem is the notion of a **new creature** in Christ. Some early scholars' view on humanity tended to discourage self-respect and

---

[152] Joanna McGrath & Alister McGrath, *Self-Esteem: The Cross and Christian Confidence* (Wheaton, Illinois: Crossway Books, 2002), 132; Anthony Hoekema, *The Christian Looks at Himself* (Mich: Grand Rapids, 1975), 21-22; Glenn Wilder, "The Search for Self-Esteem", in *Journal of Psychology and Theology*, 1979, Vol. 6(3), 184; William Britt, "God's Holiness and Humanity's Self-Esteem," in *Journal of Psychology and Theology*, 1988, Vol. 16(3), 218.

[153] David Carlson, ed., *Counseling and Self-Esteem* (Waco,Texas: Word Books Publisher, 1988), 77; Joanna McGrath & Alister McGrath, *Self-Esteem: The Cross and Christian Confidence* (Wheaton, Illinois: Crossway Books, 2002), 137; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983), 23; William Clough, "To Be Loved and to Love", *Journal of Psychology and Theology*, 2006, Vol.34(1), 29-30; Neal Krause, "Church-Based Social Relationships and Change in Self-Esteem Over Time", *Journal for the Scientific Study of Religion*, 2009, Vol. 48(4), 768-769; Anastasia Victoria, L. H. Ho & Tick N. Sim, "The Development and Validation of a God-Centered Self-Esteem Scale," *Journal of Psychology and Theology*, 2013, Vol. 41(1), 36-47.

advocate self-denial.[154] John Calvin emphasized that sin is substantial, real, and radically pervasive. Human nature is not just formally weak; it is materially depraved. He explained: "the natural depravity which we bring from our mother's womb though it bring not forth immediately its own fruits, is yet sin before God, and deserves his vengeance; and this is that sin which they call original. For as Adam at his creation had received..., so by falling away from the Lord, he in himself corrupted, vitiated, depraved, and ruined our nature; for having been divested of God's likeness, he could not have generated seed but what was like himself."[155] As a result, they facilitated a negative and worthless self-image for humans. Further, they also imposed a strong feeling of guilt in believers which depreciated the self-valuation of believers. The over-emphasis of sin overshadowed the believers' new identity – a new creation. People, who are in Christ, are to be seen as members of God's new creation once for all (II Cor. 5:17). Upon confession, believers may stand before God as perfectly righteous because they are now united with Christ through faith. The righteousness of God has been revealed through Jesus Christ (Rom. 3:21-22). Believers should be delivered from the bondage of guilt as all the consequences of sin have been removed. Believers become a new creation, although not yet perfect, in progressive renewal

---

[154] Jay Adams, *The Biblical View of Self-Esteem, Self-Love & Self-Image* (Eugene: Harvest House Publishers, 1986), 104-105, 112.

[155] F. LeRon Shults, *Reforming Theological Anthropology: After the Philosophical Turn to Relationality* (Michigan: William B. Eerdmans Publishing Co., 2003), 197-198.

with the help and indwelling of the Holy Spirit. The new identity in Christ allows

believers to believe something about themselves and appraise themselves realistically

and honestly. Human beings are becoming good as we are drawn into fellowship with

the Trinitarian God who is love – as we are formed into the image of Jesus Christ.

Although humanity's sinful nature tends to be self-centered and fails God's standards,

the human's value and worthiness in God's eyes does not diminish. The human

person is still loved by God.[156]

Factors affecting the development of self-esteem

From creation, salvation and God's love, we find that humanity possesses

intrinsic value and deserves love in spite of personal background. However, there are

some people, even Christians and ministers, who have low self-esteem.[157] They find

it as difficult to recognize their strengths as to admit their weaknesses. They see

themselves as unworthy or unlovable. In severe cases, they may even hate and dislike

themselves to the point that they do not believe they deserve genuine happiness in life.

Imbalanced theology and repeated sermons on human depravity and sin may have

---

[156] F. LeRon Shults, *Reforming Theological Anthropology: After the Philosophical Turn to Relationality* (Michigan: William B. Eerdmans Publishing Co., 2003), 197-198; David Carlson, ed., *Counseling and Self-Esteem* (Waco, Texas: Word Books Publisher, 1988), 27; Anthony Hoekema, *The Christian Looks at Himself* (Mich: Grand Rapids, 1975), 22-23, 41-48; Mark Biddle, "Genesis 3: Sin, Shame and Self-Esteem," in *Review and Expositor*, 2006, Vol. 103, 360-367.

[157] Carroll Saussy, *God Images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 12; Anthony Hoekema, *The Christian Looks at Himself* (Mich: Grand Rapids, 1975), 16.

contributed to it, [158] but there are other factors that also affect the development of

self-esteem.

Self-esteem is shaped by both internal and external factors. "Internal" refers to

the factors dwelling within or generated by the beliefs and practices of the person.

"External" refers to the factors in the environment, such as messages, verbally or

nonverbally transmitted, by parents, teachers, "significant others," organizations, and

culture. [159]

First, the most crucial factor affecting the development of self-esteem is one's

experience of parental attitudes. Research demonstrates that certain **parental attitudes**

contribute to the development of positive self-esteem. [160] As Coopersmith states,

"acceptance of children by their parents, with clearly defined and enforced limits, and

the respect and freedom for individual action that exist within the defined limits, are

the antecedents of self-esteem." [161] Saussy states "People who did not receive

adequate positive parenting have a hard time being convinced of their intrinsic

---

[158] Ka-lun Leung, "From Welsh Revival to Mysticism: the spiritual and theological thinking of Mrs. Jessie Penn-Lewis," Pastoral Journal, 1999, Vol. 7, 117-164. (This article was written in Chinese. The title is: 從奮興運動到神秘主義—賓路易師母的屬靈神學思想). Mrs. Jessie Penn-Lewis had great influence on the development of theology of the church leader Watchman Nee (or Tuoseng Ni) and that of the Chinese Christian community. Her work had been continually translated and promoted among Hong Kong and Taiwan until the 1990s.

[159] Nathaniel Branden, *Six Pillars of Self-Esteem (*NY: Bantam Books,1994), XI.

[160] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 66; Carroll Saussy, *God images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 18; Helen Cheng, Adrian Furnham, "Perceived Parental Rearing Style, Self-Esteem and self-Criticism as Predictors of Happiness," in *Journal of Happiness Studies*, Vol. 5, 2004, 1-21.

[161] Stanley Coopersmith, *The Antecedents of Self-esteem* (San Francisco: W.H. Freeman & Company, 1967), 236.

worth."[162] Ellison states "Parents have an extremely powerful early influence on their

self-concept because they are both conditioners and also providers and controllers of

information reaching the child". [163] Saussy states "The infant must experience

through her own intuitive mode of knowing, that she is valuable and irreplaceable in

the eyes of her parents and that they are reliable caretakers."[164]

People have their own unique upbringing, which can have a critical influence on

them. Among the parental attitudes, the most influential is unconditional acceptance

by the parent. This refers to a parent's consistent acknowledgment and acceptance of a

child's strengths, weaknesses, potential, limitations, and personality. If the child

experiences reasonable and consistent acceptance of thoughts, feelings, and the value

of his or her being, the child can develop his or her true self.[165]

Second, parental expectations and limits play an important role too. Parents must

set reasonable expectations by clearly defining and maintaining firm limits for the

---

[162] Carroll Saussy, "Pastoral Care and Counseling and Issues of Self-Esteem," in *Clinical Handbook of Pastoral Counseling*, Vol. 2, (NY: Paulist Press, 1993), 369.

[163] Craig Ellison, ed.. *Your Better Self: Christianity Psychology & Self-Esteem.* (San Francisco: Harper & Row Publishers, 1983), 23.

[164] Carroll Saussy, *God Images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 78-79.

[165] Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983),14; Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 60; Ronald Richardson, *Becoming a Healthier Pastor: Family Systems Theory and the Pastor's Own Family* (Minneapolis: Fortress Press, 2005), 56-77; Helen Cheng, Adrian Furnham, "Perceived Parental rearing Style, Self-Esteem and Self-Criticism as Predictors of Happiness," in *Journal of Happiness Studies*, 2004, Vol. 5, 14-16; Carroll Saussy, "Faith and Self-Esteem," in *Journal of Pastoral Care*, 1988, Vol. 17(2), 133-136; William Britt, "God's Holiness and Humanity's Self-Esteem", in *Journal of Psychology and Theology*, 1988, Vol. 16(3), 220; Leslie Francis, Mandy Robbins, Jenny Rolph, "The Relationship Between Recalled Self-Esteem as a Child and Current Levels of Professional Burnout among Anglican Clergy in England," in *Journal of Pastoral Psychology*, 2010, Vol.59, 553-554.

child. This provides the child with a sense of security that forms a base from which to

develop a healthy evaluation of self. Clear and firm limits can encourage the child to

become aware of boundaries and live with reasonable expectations.[166]

Third, a respectful attitude from the parents also plays an important role. When

parents take the child's needs and wishes seriously, the child experiences respect for

his or her dignity as a human being. When parents employ a democratic approach

which allows discussion, choice, agreement and negotiation, the need for punitive

discipline diminishes and parents can engage a system that rewards and reinforces

positive behavior. Research showed that an authoritative parental rearing style was a

direct positive predictor of happiness, while an authoritarian style of parental rearing

style is a direct negative predictor of self-esteem.[167]

Last but not least, it is important to clarify that the interaction between parental

factors on the development of self-esteem are dynamic processes rather than

deterministic forces. This means that the absence or lack of positive parental factors do

not necessarily translate into a lifetime of low self-esteem.[168]

Self-esteem involves worthiness, and an **ideology** is needed to support its value.

---

[166] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 60-61; Carroll Saussy, *God Images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 33-35.

[167] A. Furnham, H. Cheng, "Perceived Parental Behaviour, Self-Esteem and Happiness", in *Social Psychiatry and Psychiatric Epidemiology*, 2000, Vol. 35, 469.

[168] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 59-65.

Ideology is the belief system out of which a person comes to understand and evaluate her or himself. Family is a particularly powerful source of beliefs that can have a great impact on self-esteem as well. Through mother-child interactions, the mother gives the child a sense of being seen, recognized, and understood. Through this process, an ideology is taking form. This involves a worldview that informs the child as to what is expected of him or her. The parents thus give the child a sense of the world and the child's place in it. However, the worldview from the family has to be tested, developed, integrated and owned or replaced as the child matures. Siblings and other relatives, friends, teachers, pastors – many people continue to contribute to one's self-esteem.   Social institutions of every kind also contribute to ideology. Christian principles taught in schools and churches may act as an important factor. If children repeatedly receive the message that they are loved by their Heavenly Father, then a positive contribution to their ideology is made. Media, advertising, theater, school, church and the business world are constantly impinging upon how one evaluates oneself, and thus have the potential to bring messages of possibilities and of limitations.[169]

The development of self-esteem as an aspect of the **image of God** is another factor. Christians may believe in a faithful and loving God, but may fail to love and

---

[169] Carroll Saussy, *God Images and Self Esteem: Empowering Women in a Patriarchal Society* (Kentucky: Westminster/John Knox Press, 1991), 19; Carroll Saussy, "Faith and Self-Esteem," in *Journal of Pastoral Care*, 1988, Vol. 17(2), 132.

value themselves. The imagery of God can make a contribution on three levels: as an internalized image, as rational ideas about God (theology) and as convictions of God. The internalized image is an unconscious representation of God, formed through the child's interaction with parents or significant others. The idea of God, or "theology", consists of ideas learned through socialization. Convictions of God are obtained as the result of religious experiences. Self-esteem is related to all three levels of God imagery although the internalized image may have the strongest impact on adequate self-esteem. When early conceptions of parent and self are distorted, a negative internalized image of God is shaped. This unconsciously-formed image, in turn, may reduce the person's ability to believe in himself. When they come to know God, God's love might seem unbelievable. Researchers Carroll Saussy, Joanna McGrath & Alister McGrath found that self-esteem is related positively to loving God-images and negatively to a God concept that is rejecting, impersonal, and controlling. People with low self-esteem may find it difficult to accept God's love and acceptance.[170]

Another factor affecting the development of self-esteem is the **misunderstanding of terminology**. Some theologians tend to disapprove of and misinterpret certain terminology such as self-love, self-worth, etc., easily condemning these attitudes as sin

---

[170] Ibid., 46-62; "Pastoral Care and Counseling and Issues of Self-Esteem," in *Clinical Handbook of Pastoral Counselling*, Vol. 2, (NY: Paulist Press, 1993), 377; Joanna McGrath & Alister McGrath, *Self-Esteem: The Cross and Christian Confidence* (Wheaton, Illinois: Crossway Books, 2002), 118-121; Peter Benson, "God Image as a Function of Self-Esteem and Locus of Control," in *Journal for the Scientific Study of Religion*, 1973, Vol. 12(3).

against God and as violations of the teaching of the Bible; they may believe that

feelings of self-worth usurp God's rightful place as Lord. However, self-love is not the

same as self-centeredness or selfishness. Self-love is an attitude and behavior that

respects one's own needs and feelings as equally important to others. Love others as

thyself is the way to follow God's model of love. Self-worth is not the same as

self-worship. Self-worth is the affirmation of one's values and significance as a person

in God's image, a child of God, and a servant of God. As such creations, one must

appreciate God's given abilities, potential, strengths, contributions, achievements and

good qualities. Self-love and self-worth are attitudes with which to view and evaluate

oneself in a reasonable and appropriate way in compliance with the teachings of the

Bible. Therefore, self-esteem is the judgment and perception of oneself as God's

creation: lovable, valuable, capable, forgivable, and redeemable.[171]

A stable and **satisfying relationship** is another factor affecting the development

of self-esteem. Significant relationships influence our views of ourselves. Critical and

rejecting siblings, peers, teachers and other important adults frequently contribute to

our feelings of self-doubt. Through attaching oneself to another to establish mutual

trust, respect and acceptance, one can feel secure to discover, accept, and express

---

[171] David Carlson, ed., *Counseling and Self-Esteem* (Waco, Texas: Word Books Publisher, 1988), 27-30; Craig Ellison, ed., *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper& Row Publishers, 1983), 10-11; Mark Biddle, "Genesis 3: Sin, Shame and Self-Esteem," in *Review and Expositor*, 2006, Vol. 103, 364; Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices For Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 35-38.

oneself freely. This nurtures a sense of significance in a person.[172]

The **role of ministers** is another factor affecting the development of self-esteem.

Ministers are also planned by God, created by God, loved by God, saved by God,

indwelt by God, and destined for a joyful reunion with God. As ministers, they are

considered to be chosen and called to set apart, to serve in the ministry, a sacred

profession. Given this knowledge and respect, ministers should understandably view

themselves as possessing a value that is literally incalculable. They ought to be

blessed with a healthy self-esteem. On the other hand, ministers are professional

Christians, salaried disciples of Jesus, and highly visible. The church community may

therefore have high and unrealistic expectations on them, with respect to their moral

conduct, character, abilities, even appearance and relatively low financial

compensation. In view of such expectations, together with biblical ideals, ministers

may feel frustration and guilt. Furthermore, ministry is emotionally exhausting with

low satisfaction, that can easily lead to loss of enthusiasm or even burn-out. If

ministers cannot resolve such struggles, gradually they may develop an unhealthy

self-esteem that is either too high or too low.[173]

---

[172] David Carlson, ed., *Counseling and Self-Esteem* (Waco,Texas: Word Books Publisher, 1988), 369; Will Clough, "To Be Loved and To Love," in *Journal of Psychology and Theology*, 2006, Vol. 34(1), 23-30; Carroll Saussy, "Faith and Self-Esteem," in *Journal of Pastoral care*, 1988, Vol. 17(2), 129.

[173] Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem.* (San Francisco: Harper& Row Publishers, 1983), 180-181; Carrie Doebring, "New Directions for Clergy Experiencing Stress: Connecting Spirit and Body," in *Journal of Pastoral Psychology*, 2013 published online; Laura Barnard, John Curry, "The Relationship of Clergy Burnout to Self-Compassion and other Personality

Effective ways to enhance the self-esteem of ministers

As mentioned, self-esteem is dynamic in nature – consistent, yet open to change. But people may encounter resistance when trying to change their self-evaluation since a sense of security can develop with habituated thinking patterns. Since people seldom change by themselves, such change is usually the product of relationships with others, even though the issue is inside the person.[174] Certain criteria and circumstance are needed to motivate people to change their self-esteem.

The first is a sense of being accepted and cared for. As mentioned, parental attitudes are crucial in affecting the development of self-esteem. Although one may not go back in time to eliminate childhood experiences, there is a capacity for lessening negative emotions and feelings from such experiences. Subsequently, one can readjust one's self-evaluation through the genuine acceptance and care from significant others, such as spouse, pastors, teachers, and friends. Such processes act like re-parenting, and may increase one's experience of approval and help one to

---

Dimensions", in *Journal Pastoral Psychology*, 2012, Vol. 61, 150-151; Ryan Staley, Mark McMinn, Katheen Gathercoal, Kurt Free, "Strategies Employed by Clergy to Prevent and Cope with Interpersonal Isolation," 2013, in *Pastoral Psychology*, Vol. 62, 843-867.

[174] David Carlson, ed., *Counseling and Self-Esteem* (Waco,Texas: Word Books Publisher, 1988), 70; Neal Krause, "Church-Based Social Relationships and Change in Self-Esteem Over Time," in *Journal for the Scientific Study of Religion*, 2009, Vol. 48(4), 756-773; Neal Krause, "Church-Based Social Relationships and Change in Self-Esteem Over Time," in *Journal for the Scientific Study of Religion*, 2009, Vol.48(4), 756-779.

move towards a realistic self-image.[175]

Second, there is consensus that therapy, whether individual or group, facilitates the enhancement of self-esteem. Individual therapy or supervision is a series of intense and focused encounters. It assumes that the individual's family's unresolved issues, special needs and problems can be identified and acknowledged. Through respect, trust, caring, and empathy in the therapeutic process, people find new experiences and gain more confidence to open up their hearts. In the sessions, healing may occur and the problem of low self-esteem may be remedied. In group therapy, the facilitator builds mutual trust within a non-threatening environment. Within this environment, therapeutic changes may occur. In the group setting, there are usually a greater variety of possible opportunities for people to try out new behaviors. In such groups, the presence of social factors affecting self-esteem, such as positive feedback and effective modeling, can contribute to enhance one's self-esteem.[176]

Third, self-esteem can be enhanced through learning new ways of thinking,

---

[175] Craig Ellison, ed.. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper & Row Publishers, 1983), 16; Carroll Saussy, "Pastoral Care and Counseling and Issues of Self-Esteem," in *Clinical Handbook of Pastoral Counselling*, Vol. 2, (NY: Paulist Press, 1993), 377; Barbara Livingston, "Pastoral Formation Process for Seminarians: A New Model for Developing Psychologically Healthy Pastors", in *Journal of Pastoral Care and Counseling*, 2009, Vol. 63(3-4), 1-7; Susan Jones, Leslie Francis, "The Pastoral Care of the Anglican today: A Matter of Low Self-Esteem," in *Journal of Empirical Theology*, 2003, Vol.17(1), 20-30.

[176] Chris Mruk, *Self-Esteem: Research, Theory, and Practice* (NY: Springer Publishing Company, 1995), 92-93; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem.* (San Francisco: Harper& Row Publishers, 1983), 16-17; Richard Erickson, "The Psychology of Self-Esteem: Promise or Peril?" *Pastoral Psychology* 35(3) (Spring 1987): 171; Patrick McDevitt, "Ministerial Burnout: Motivation and Renewal for Mission," in *Journal of Pastoral Care*, 2010, Vol. 64(4), 7; David Pooler, "Pastors and Congregations at Risk: Insights from Role Identity Theory," in *Journal Pastoral Psychology*, 2011, Vol. 50, 708-710.

perceiving, expressing, and behaving. Change is also the result of time spent learning,

practicing, and consolidating new thinking habits that are a part of one's personality.

Change begins with people's awareness of discomfort or dissatisfaction with their

lives. They may be frustrated with the way they are coping with themselves and/or

their relationships. Change continues as a person develops understanding and

acceptance of dissatisfaction and discomfort. This is characterized by a willingness to

learn new ways of looking at oneself, relationships, circumstances, problems, and

possibilities. The recognition of new choices, the affirming of new potentials, and the

change to new lifestyles, help the person to try different approaches to solve their

difficulties. A simple willingness to say, "I will try differently," can help one to face

one's difficulties rather than escape from them. Such an attitude facilitates the person

to explore the origin and nature of difficulties rather than merely acknowledging them,

or suppressing feelings towards them. Furthermore, experimenting with new views,

ideas, ways thinking, ways of relating, ways of expressing and behaving also involves

developing the skills, strengths, and resources needed to bring change.[177]

Fourth, a close personal relationship and connection with God is important in

enhancing people's self-esteem. Prayer, church and scripture may lead to stronger

---

[177] David Carlson, ed., *Counseling and Self-Esteem* (Waco, Texas: Word Books Publisher, 1988), 66-68; Craig Ellison, ed. *Your Better Self: Christianity Psychology & Self-Esteem* (San Francisco: Harper & Row Publishers, 1983), 17; Carroll Saussy, Faith & Self-Esteem, in The *Journal of Pastoral Care*, 1988, Vol.42 (4), 125-137.

feelings of self-worth and a healthier self-esteem based on the Bible and God. In God, people may experience unconditional and everlasting love, have an intimate relationship, gain recognition, have clear principles to follow, and have power to face challenge and anxiety. Love is a powerful force in people and may motivate healthy change. In these ways, in God, people may establish a secure base from which family wounds may be healed and self-worth may be strengthened. On the other hand, people who view God in a more positive and loving manner have greater feelings of self-worth. The focus of teaching and preaching of Bible on love, either God's love or loving others, may nurture people's spirituality and self-esteem.[178]

In relationships, through love, acceptance and affirmation, people may develop the confidence and readiness to change their self-esteem. Therapy and counseling further aid the enhancement of self-esteem. Healthy connection with God also serves as a secure and strong base for the development of healthy self-esteem.

In summary, self-esteem has a great influence on people's personality characteristics and psychological health. It is mostly established in the childhood. However, it is dynamic and open to positive change within relationships that respect

---

[178] Carroll Saussy, "Faith and Self-Esteem," in *Journal of Pastoral care*, 1988, Vol. 17(2), 129; Tony Campolo & Mary Darling, *Connecting Like Jesus: Practices for Healing, Teaching & Preaching* (San Francisco: Jossey-Bass, 2010), 19-27.34-47; Neal Krause, "Church-Based Social Relationships and Change in Self-Esteem Over Time," in *Journal for the Scientific Study of Religion*, 2009, Vol.48(4), 756-779; William Brit, "God's Holiness and Humanity's Self-Esteem," in *Journal of Psychology and Theology*, 1988, Vol. 16, 213-221; William Clough, "To Be Loved and To Love," in *Journal of Psychology and Theology*, 2006, Vol.34(10), 23-31.

and trust, even during adulthood. CPE is a professional education for ministry. Its

purpose is to enhance students' personal growth and pastoral competency. It possesses

elements which may have positive influence on people's self-esteem.

CHAPTER FOUR

RESEARCH METHODOLOGY

This research compares the personal growth in self-esteem and pastoral growth in counseling skills of students who participated in CPE with those of students who have not participated in CPE, using the Rosenberg Self-esteem Scale Inventory (RSE) (Appendix 1 & 2) and Counseling Self Estimate Inventory (CSE) (Appendix 3 & 4) respectively. It was hypothesized that the experimental group of CPE students would attain a significantly higher mean total score on the Rosenberg Self Esteem Scale than the control group of non-CPE students. Furthermore, it was hypothesized that the experimental group would attain a significantly higher mean total score on the Counseling Self Estimate Inventory than the control group.

Procedure

The study was conducted in the ongoing theological program in the Bethel Bible Seminary of Hong Kong. Seminary students were invited to participate by Registration staff. Pre-test questionnaires with covering letters (Appendix 5 & 6) were distributed to all first unit CPE students and non-CPE students within the first two weeks of the academic year beginning in September of 2012. Post-test questionnaires were identical to pre-test questionnaires and were distributed to the same students at

the end of the academic year concluding in May of 2013. The questionnaires

contained items of students' basic information as well as instruments that assess

self-esteem and counseling skills of students. For the academic year of 2012, a total

number of 30 students enrolled in CPE; among these 30 CPE students, 24 were taking

their first unit of CPE, 4 were taking their second unit of CPE, 2 were taking their

third unit of CPE. Among 24 first unit CPE students, 22 students participated in the

test. The response rate was 91.6%. Sixteen non-CPE students participated in the test.

For the year of this research conducted in 2012, Bethel Bible Seminary was the only

Seminary in Hong Kong that included CPE in the curriculum.[179] Therefore, these 24

first unit CPE students represented the entire population in HK studying CPE within a

seminary setting during the academic year of 2012. The data collected were entered

into Microsoft Excel spreadsheets for the manipulation and transferred into t-test on

April 2014.

Participants

A total number of 38 students of Bethel Bible Seminary completed the pre-test

questionnaires in September of 2012. Among these 38 students, 22 were first unit

CPE students and 16 were non-CPE students. Thirty-seven out of the 38 pre-test

---

[179] The Hong Kong Sheng Kung Hui Ming Hua Theological College started their CPE program in 2013.

participants completed the post-test questionnaires in May 2013. One pre-test

participant did not participate in the post-test as he dropped out of school due to

personal reasons; this person was a non-CPE student. Twenty-two first unit CPE

students became the experimental group and 15 non-CPE students became the control

group.[180] All participants were Christians and were studying theological programs in

the Bethel Bible Seminary; 25 were Master level students and 13 were Bachelor level

students; 25 were female and 12 were male. (Table 1)

Table 1 Information of participants

	Experiment Group CPE students	Control Group Non-CPE students
Total number of participants	22	15
Level of program studying		
Master program	12	12
Bachelor program	10	3
Gender		
Male	5	7
Female	17	8

Measures

Rosenberg Self-Esteem Scale (RSE):   In this thesis, "Rosenberg Self-Esteem Scale"

(RSE) was used to measure the self-esteem of the students. The RSE was developed

by sociologist Dr. Morris Rosenberg and is a tool for assessing global self-esteem.

---

[180] For the control group, there was no information about the training or exposure to counseling they might have had, which in turn might have influenced their scores.

The original sample for which the scale was developed in the 1960s consisted of

5,024 junior and senior high school students from 10 randomly selected schools in

New York. The RSE is considered a reliable and valid quantitative tool for

self-esteem assessment. The scale generally has high reliability: test-retest

correlations are typically in the range of 0.82 to 0.88; internal consistency was 0.77;

minimum Coefficient of Reproducibility was at least 0.90. Test-retest reliability for

the 2-week interval was calculated at 0.85; the 7-month interval was calculated at 0.63

and Cronbach's alpha for various samples are in the range of 0.77 to 0.88. It had both

a unidimensional and a two-factor (self-confidence and self-deprecation) structure to

the scale. The RSE has been translated and adapted to various languages, such as

Persian, French, Chinese, Italian, Portuguese, and Spanish. The scale is extensively

used in cross-cultural studies in up to 53 different nations.[181] For this research project,

the test was conducted in Chinese. The Chinese version of RSE was translated by Dr.

Federick K.C. Yeung in 1988.[182] It is widely used in many Chinese communities.

The RSE is a ten-item "Likert-type Scale" with items answered on a four-point

scale: strongly agree, agree, disagree, strongly disagree. Five of the items (items

---

[181] http://en.wikipedia.org/wiki/Rosenberg_self_esteem_scale,
http://www.statisticssolutions.com/academic-solutions/resources/directory-of-survey-instruments/rosenberg-self-esteem-scales-ses/

[182] Dr. Federick K.C. Yeung is the Principal Lecturer in the Department of Social Work and Social Administration at the University of Hong Kong. He is an expert and experienced trainer in solution-focused therapy and narrative approach. He is also an expert in parenting and marital counseling.

2,5,6,8 and 9) have positively worded statements and five (items 1,3,4,7 and 10) have

negatively worded ones.[183] (Table 2) To score the items, a value is assigned to each

of the 10 items as follows: for the items with positively worded statements (2,5,6,8

and 9), strongly agree = 3, agree = 2, disagree = 1 and strongly disagree = 0; for the

items with negatively worded statements (1,3,4,7 and 10), strongly agree = 0, agree =

1, disagree = 2 and strongly disagree = 3. The total possible score for this scale ranges

between 0 to 30, with 30 indicating the highest score possible. Scores between 15 and

25 are within normal range; scores below 15 suggest low self-esteem. The scale

measures state self-esteem by asking the respondents to reflect on their current

feelings.

Table 2   "Rosenberg Self-Esteem Scale" (RSE) Positively worded & negatively
worded statements

positively worded statement	negatively worded statement
2,5,6,8 and 9	1,3,4,7 and 10

Counseling Self Estimate Inventory (CSE)   For this research project, "Counseling

Self Estimate Inventory" (CSE) was used to measure the counseling skills of the

students. The CSE was designed by Dr. Chen Lee Chun as the measurement tool for

---

[183] For the English version of RSE, items with positively words statement are 1,2,4,6 and 7; items with negatively words statement are 3,5,8,9 and 10.

the research project for her doctoral dissertation.[184] Its validity was tested by a pilot

study which was run before the implementation of the research. In the pilot test, 235

volunteer counselors were invited to complete the questionnaire; of these 121

volunteered to participate; the response rate was 51.9%. The result showed that the

coefficient of item No. 42 is .36 so the final version of CSE deleted item No. 42.[185] In

this paper, item no. 42 will not be measured in the result.

The CSE is a fifty-item "Likert-type Scale" with items answered on a six-point

scale: 1. no confidence at all (0%), 2. not much confidence (20%), 3.mild confidence

(40%), 4. some confidence (60%), 5. good confidence (80%), 6.complete confidence

(100%). The scores are 1, 2, 3, 4, 5 and 6 respectively. All are positively worded

statements. This 50-item scale contains four subscales: processing skills, challenge

and difficulties, value, self-confidence. Under the processing skills subscale, there are

total 13 items, No. 1-13, of which the Cronbach's α is 0.922. Under the challenges

and difficulties subscale, there are total 22 items, No. 14, 15, 16, 17, 18, 19, 20, 21, 22,

24, 26, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37 and 38, of which the Cronbach's α is

0.946. Under the value subscale, there are total 4 items, No.23, 25, 27 and 39, of

which the Cronbach's α is 0.807. Under the self-confidence subscale, there are total

---

[184] Dr. Chen, Li Jane is the Associate Professor of Tungnan University. She received her Doctor of
Philosophy in Psychology from National Chengchi University.

[185] Chen, Li Jane, "Effectiveness of Parental Consultation Training Program-Using the Volunteer
Taipei Family Education Center as Sample " (Ph. D. diss., National Chengchi University, 1996), 36.

10 items, No. 40, 41, 43, 44, 45, 46, 47, 48, 49 and 50, of which the Cronbach's α is

0.953.[186] (Table 3)

Table 3　Subscale of "Counseling Self Estimate Inventory" (CSE)

Subscale	No. of items	Correlation Coefficient	Cronbach's α
processing skills	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13	0.86"	0.922
challenges and difficulties	14, 15, 16, 17, 18, 19, 20, 21, 22, 24, 26, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38	0.98"	0.946
value	23, 25, 27, 39	0.91"	0.807
self-confidence	40, 41, 43, 44, 45, 46, 47, 48, 49, 50	0.92"	0.953

N=121: "P<.01

---

[186] Chen, Li Jane, "Effectiveness of Parental Consultation Training Program-Using the Volunteer Taipei Family Education Center as Sample " (Ph. D. diss., National Chengchi University, 1996), 91-93.

CHAPTER FIVE

DESCRIPTION OF THE RESEARCH

Results

Thirty-eight students completed a pre-test, but only thirty-seven completed a post-test. Only those thirty-seven students who completed pre and post-test were included in this paper. To measure changes in self-esteem and counseling skills, scores were created. The data collected were entered into Microsoft Excel spreadsheets for the analysis. Total scores, mean and standard deviation (SD) were calculated for each inventory of each student. Analyses were conducted using the t-test. All changes in the score were used in the analysis. The relationship between the changes of self-esteem with the changes of counseling skills will be investigated with Correlation Coefficient.

1. Preliminary Analyses of Experimental Group on RSE

According to RSE's measurement, the total possible score for this scale ranges between 0 to 30, with 30 indicating the highest score possible. Scores between 15 and 25 are within normal range; scores below 15 suggest low self-esteem. Table 4 shows the total score, mean score and standard deviation of the Pre-test and Post-test of the Experimental Group on RSE. As Table 4 shows, in the pre-test, 21 participants'

self-esteem levels are within the normal range and 1 participant's self-esteem level is above the normal range. In the post-test, 18 participants' self-esteem levels are within the normal range and 4 participants' self-esteem level are above the normal range.

Figure 1 shows the proportion of the total RSE score of the experimental group in pre-test. 95% of experimental group participants were within the normal range and 5% of participants were above the normal range in pre-test. Figure 2 shows the proportion of the total RSE score of the experimental group in post-test. 82% of experimental group participants were within the normal range and 18% of participants were above the normal range. When comparing the pre and post-test, a total of 13% of the participants moved from normal range to above normal range. At the group level, the total mean of the experimental group is 1.6 in the pre-test and 1.9 in the post-test. There is an increase of 0.3.

Table 4　Experimental Group's total score, mean score & SD on RSE

	Pre-Test on RSE	Post-test on RSE
A1	22	24
A2	16	18
A3	18	19
A4	24	28
A5	20	18
A6	20	24
A7	24	26
A8	16	24
A9	18	15
A10	23	23
A11	23	22
A12	16	25
A13	21	21
A14	16	25
A15	23	25
A16	21	27
A17	26	30
A18	19	19
A19	18	23
A20	22	22
A21	16	19
A22	17	20
Number(N)	22	22
Mean	19.9	22.5
Standard Deviation	3.14	3.70
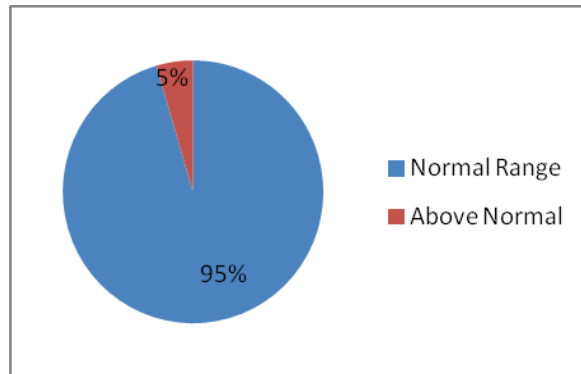
Figure 1   The Ratio of Experimental Group's total score on RSE in pre-test
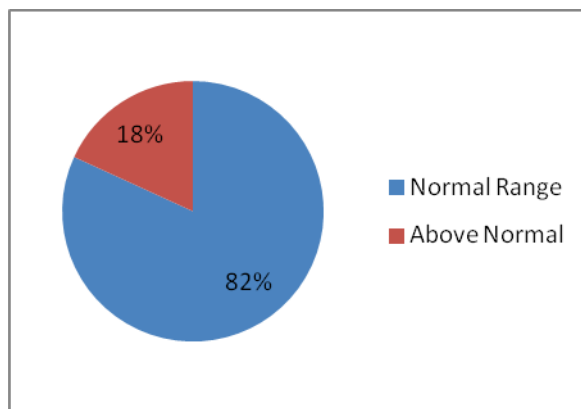
Figure 2   The Ratio of Experimental Group's total score on RSE in post-test

When comparing individual participant's total RSE score of the Experimental Group in pre-test and post-test, 16 participants' total RSE score increased in the post-test, 3 participants' total RSE score decreased in the post-test and 3 participants' total RSE score did not change in the post-test. Figure 3 shows the individual participants' difference on the total RSE score between the pre and post-test.
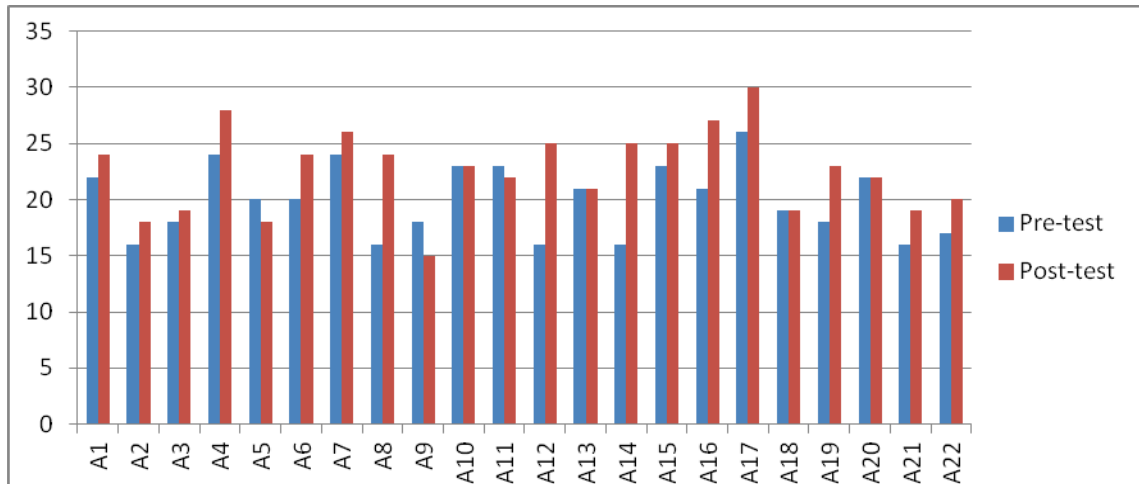
Figure 3   Comparison of Experimental Group's total RSE score in pre-test &
post-test

In order to see how far the data of pre-test and post-test varied, SD is calculated to

determine the consistency of the score. As shown in Table 4, the Standard Deviation

of the pre-test on RSE is 3.14 and the Standard Deviation of the post-test on RSE is

3.70. It is shown that the post-test had a much higher SD which means the scores are

more spread out than the pre-test and so the post-test scores have a larger variation

than the pre-test. (Figure 4) The pre-test scores exhibited less variability.
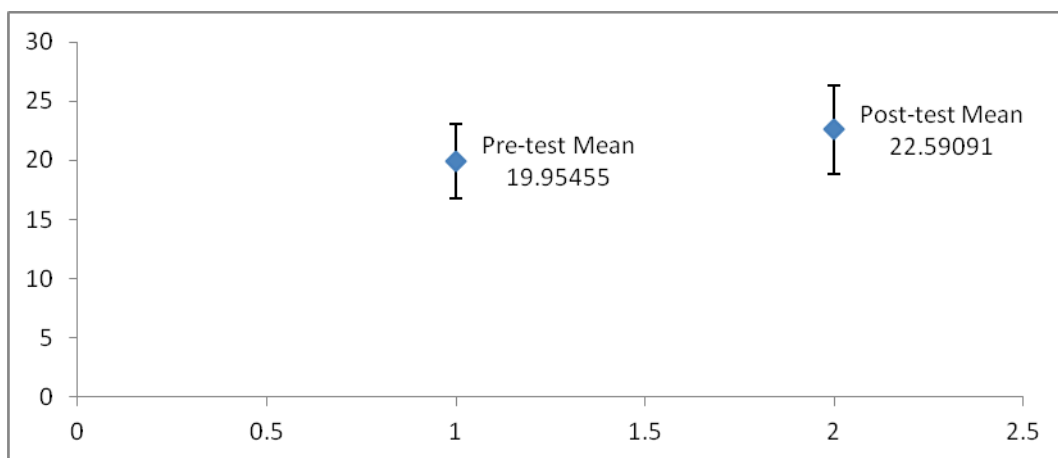
Figure 4   Comparison of Mean & SD (+/- 1) of Experimental Group's Pre & Post
Test on RSE

2. Preliminary Analyses of Control Group on RSE

Table 5 shows the total score, mean score and standard deviation of the Pre-test and Post-test of the Control Group on RSE. In the pre-test, 12 participants' self-esteem total score levels are within the normal range while 3 participants' total score levels are above the normal range. In the post-test, 10 participants' self-esteem total score levels are within the normal range while 4 participants' total score levels are above the normal range, and 1 participant's total score level is below the normal range in the post-test. Figure 5 shows the proportion of the total RSE score of the control group in pre-test. 80% of experimental group participants were within the normal range and 20% of participants were above the normal range in pre-test. Figure 6 shows the proportion of the total RSE score of control group in post-test. 67% of control group participants were within the normal range, 27% of participants were above the normal range and 6% below the normal range. When comparing the pre and post-test, a total of 7% of the participants moved from the normal range to above normal range and 7% moved from normal range to below normal range.

Table 5　Control Group's total score, mean score & SD on RSE

	Pre-test on RSE	Post-test on RSE
B1	21	22
B2	24	23
B3	26	25
B4	22	26
B5	24	26
B6	26	28
B7	19	23
B8	24	28
B9	28	22
B10	19	14
B11	23	19
B12	17	17
B13	19	20
B14	19	17
B15	23	23
Number(N)	15	15
Mean	22.27	22.2
Standard Deviation	3.20	4.16
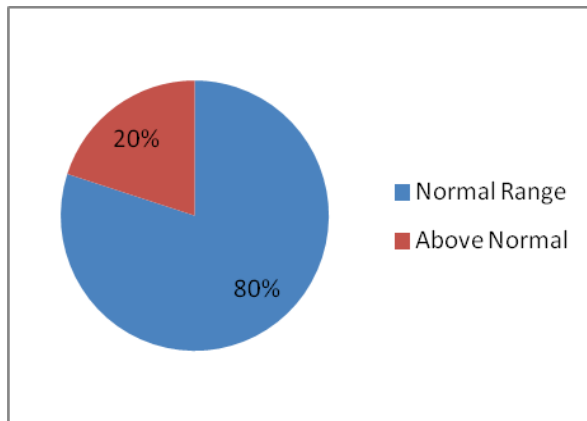
Figure 5 Control Group's Total score of RSE in the pre-test
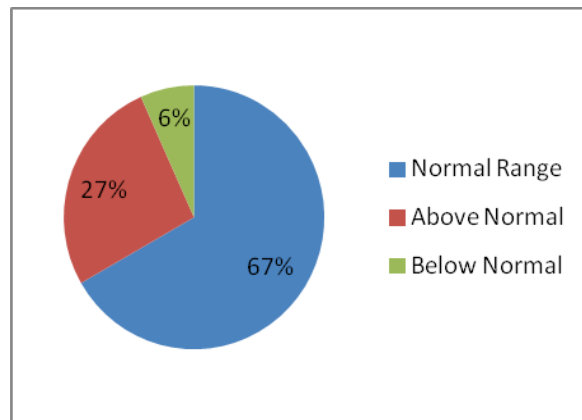
Figure 6   Control group's total score of RSE in the post-test

When comparing the total RSE score of individual participants from the control group in pre-test and post-test, 7 participants' total RSE score increased in the post-test, 6 participants' total RSE score decreased and 2 participants' total RSE score did not change. Figure 7 shows the differences between the pre and post-test scores of the control group on RSE.

Figure 7   Comparison of control group's total RSE score in pre-test and post-test

In order to see how far the data of pre-test and post-test of the control group on RSE varied, SD was calculated to determine the variability of the score. As shown in Table 5, the Standard Deviation of the pre-test of the control group on RSE is 3.20 and the Standard Deviation of the post-test on RSE is 4.16. The post-test scores therefore exhibited more variation than the pre-test scores. (Figure 8)
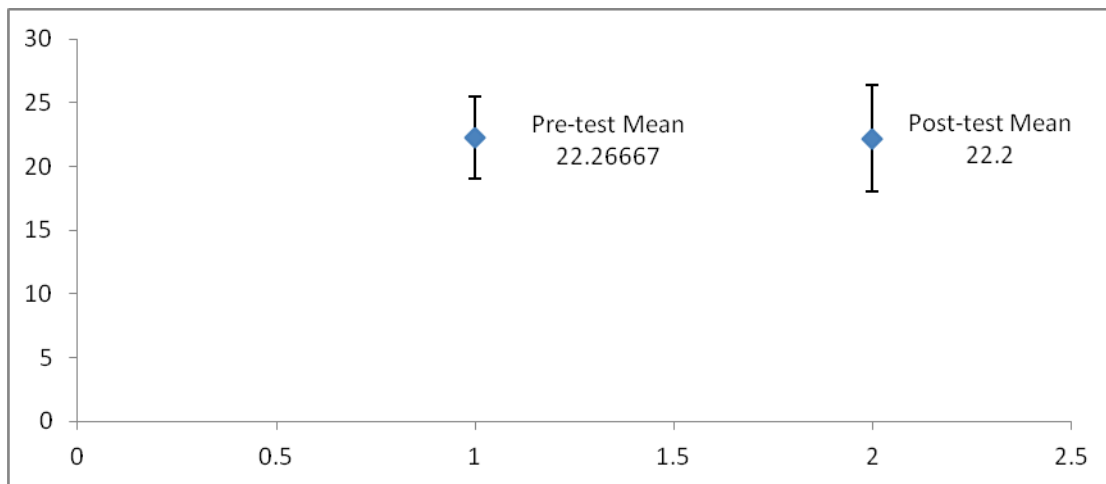
Figure 8   Comparison of Mean & SD (+/- 1) of Control Group's Pre & Post Test on RSE

126

3. Preliminary Analyses of Experimental Group on CSE

Table 6 shows the total score, mean score and standard deviation of the Pre-test and Post-test of the Experimental group on CSE. The total possible scores for this scale range between 0 to 300, with 300 indicating the highest score possible. As Table 4 shows, in the pre-test, 11 participants' CSE total score were in the range of 200-300 while 11 participants' total CSE score were in the range of 150 – 200. In the post-test, 16 participants' CSE total score were within the range of 200-300 while 6 participants' total CSE score were within the range of 100-200. At the group level, the total mean score is 3.96 in the pre-test and 4.44 in the post-test. An increase of 0.48 in the total mean score is recorded.

Table 6 Experimental Group's total score, mean score & SD on CSE

	Pre-test on CSE	Post Test on CSE
A1	212	236
A2	223	236
A3	211	239
A4	241	256
A5	171	193
A6	228	245
A7	229	243
A8	182	212
A9	209	216
A10	194	197
A11	214	235
A12	181	217
A13	169	189
A14	152	223
A15	188	197
A16	223	249
A17	186	235
A18	163	191
A19	194	195
A20	212	213
A21	207	259
A22	162	211
Number	22	22
Mean	197.77	222.14
SD	24.89	22.34

When comparing individual participant's total CSE score of the Experimental

Group in pre-test and post-test, 22 participants' total CSE score has increased in the

post-test. Figure 9 shows the difference between the pre-test and post-test of the
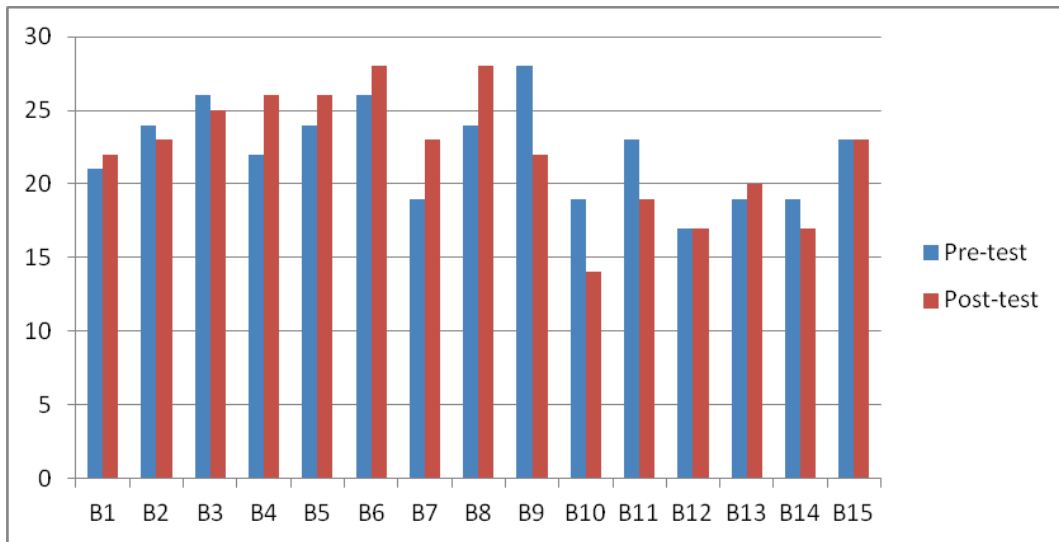
Experimental Group on CSE.

Figure 9 Comparison of Experimental group's total CSE score in pre-test and post-test

In order to see to what degree the data of pre-test and post-test on CSE varied,

SD is calculated to determine the variation of the score. As shown in Table 6, the

Standard Deviation of the pre-test on CSE is 24.89 and the Standard Deviation of

the post-test on CSE is 22.34. (Figure 10) It is shown that the pre-test have much

higher SD which means the scores are much more spread out than the post-test

and so the pre-test scores show less variation. The post-test exhibited a larger

amount of variation in the scores.
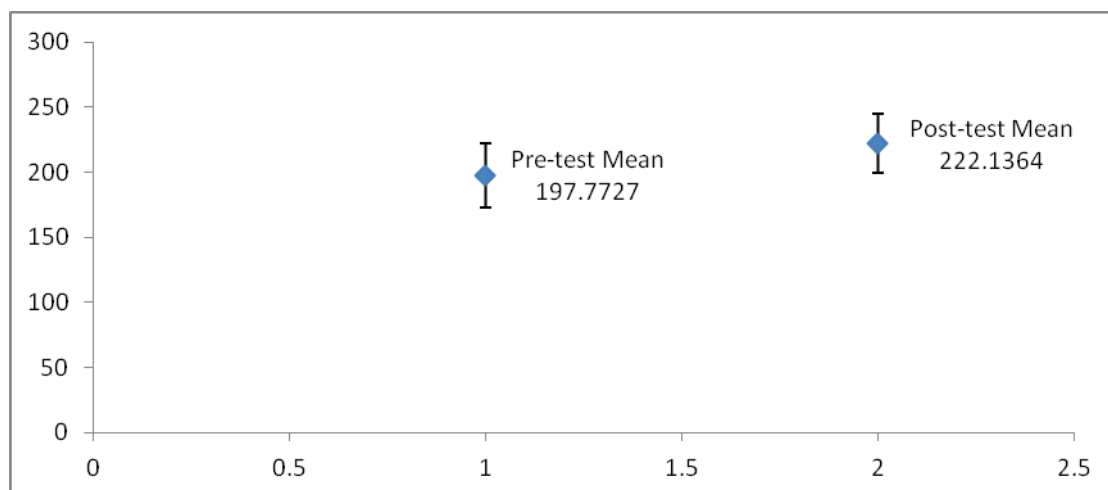
Figure 10　Comparison of Mean & SD (+/- 1) of Experimental Group's Pre & Post test on CSE

4. Primary Data Analyses of Control Group on CSE

Table 7 shows the total score, mean score and standard deviation of the Pre-test and Post-test of the Control Group on CSE. The total possible score for this scale ranges between 0 to 300, with 300 indicating the highest score possible. As Table 5 shows, in the pre-test, 10 participants' CSE total score are in the range of 200-300 and 5 participants' total CSE score are in the range of 100-200. In the post-test, 10 participants' CSE total score are within the range of 200 - 300 and 5 participants' total CSE score were within the range of 100-200. At the group level, the total mean score is 4.13 in the pre-test and 4.3 in the post-test. An increase of 0.17 in the total mean score is shown.

Table 7　Control Group's total score, mean score & SD on CSE

	Pre-test on CSE	Post-test on CSE
B1	232	261
B2	238	227
B3	224	230
B4	124	117
B5	193	215
B6	249	234
B7	144	192
B8	231	241
B9	269	251
B10	165	164
B11	173	189
B12	215	177
B13	201	244
B14	217	241
B15	219	206
Number (N)	15	15
Mean	206.27	212.6
SD	39.97	38.90

When comparing individual participant's total CSE score of the Control Group in pre-test and post-test, 8 participants' total CSE score has increased in the post-test and 7 participants' total CSE score has decreased in the post-test. Figure 11 shows the difference of individual participant's total CSE score in the pre-test and post-test.
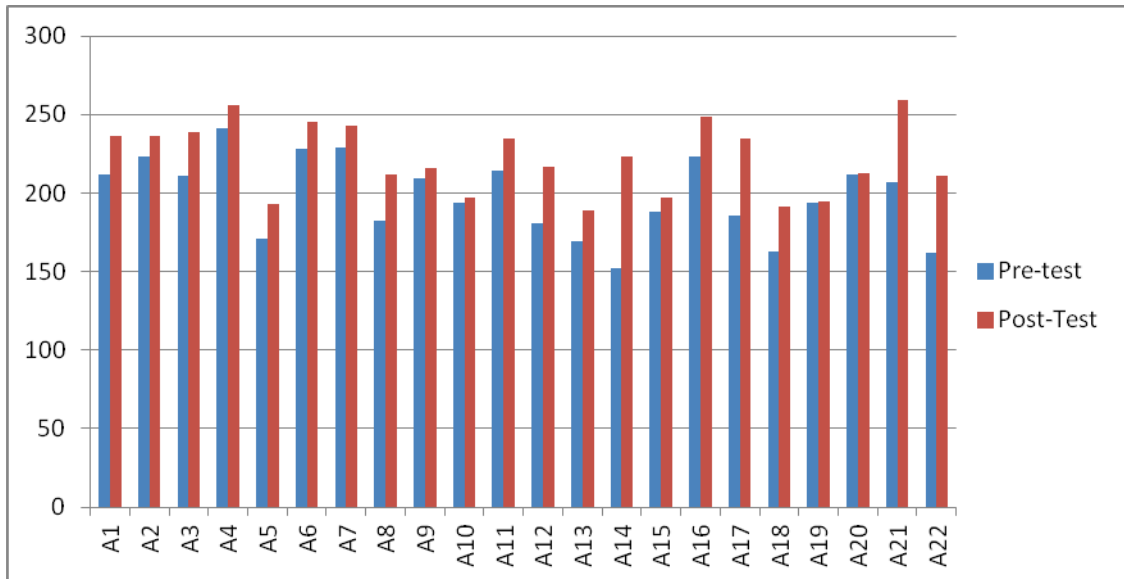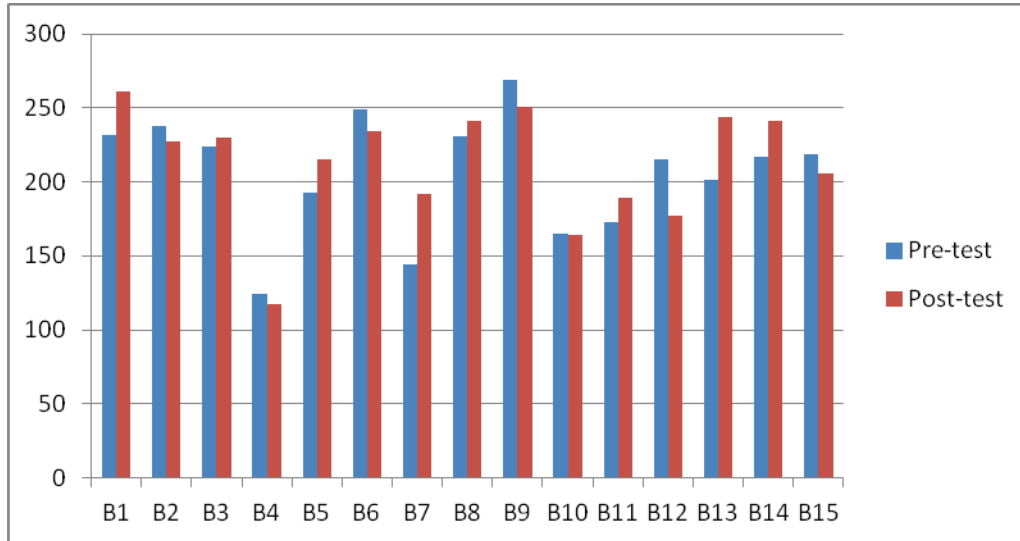
Figure 11   Comparison of control group's total CSE score in pre-test and post-test

In order to see to what degree the data of pre-test and post-test of the control

group on CSE varied, SD is calculated to determine the variation of the score. As

shown in Table 7, the Standard Deviation of the pre-test of control group on CSE is

39.97 and the Standard Deviation of the post-test on CSE is 38.90. It is shown that the

Pre-test had a higher SD which means the pre-test scores had more variation. (Figure

12)
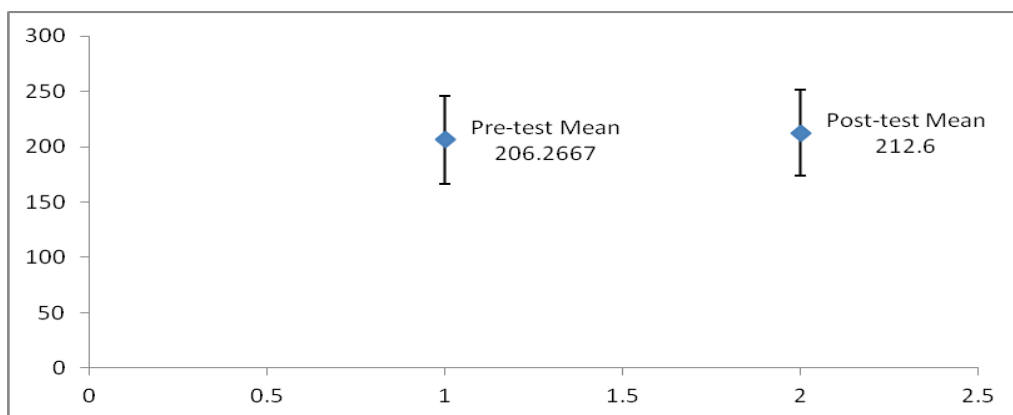
Figure 12 Comparison of Mean & SD (+/1 1) of Control Group's Pre & Post test on
CSE

5. Testing the hypotheses

In this thesis, t-test is used to analyze the data collected and test the hypotheses. It tests all paired sample tests with an alpha level of 0.05. P-value is the probability the results are significant given that the null hypothesis is true (There is a 5 percent chance that the null is true). The null hypothesis will be rejected if the P-value is under the 0.05 level as this indicates a slim enough likelihood our obtained significant result is not due to the trueness of the null. A null hypothesis is a general statement stating that there is no statistical difference between the two treatments.

For this test, there are two assumptions. The first assumption is that the two groups of data are dependent. The second assumption is that the differences in scores follow a normal distribution.

First Hypothesis

The first hypothesis of this research is: The experimental group will attain a significantly higher mean total score on the Rosenberg Self-Esteem scale than will the control group.

(1) Paired sample Test between experimental group with RSE

Null Hypothesis: There is no change in participant's RSE mean difference score from

before to after taking CPE over the course of an academic school

year.

Research Hypothesis: There was an increase in the mean difference score –

participants scored higher in the RSE after taking CPE over the

course of an academic school year.

Table 8   T-test on RSE of Experimental Group

	Variable 1	Variable 2
Mean	1.995454545	2.259090909
Variance	0.098549784	0.136818182
Observations	22	22
Pearson Correlation	0.539643372	
Hypothesized Mean Difference	0	
df	21	
t Stat	-3.727647782	
P(T<=t) one-tail	0.000621829	
t Critical one-tail	1.720742903	
P(T<=t) two-tail	0.001243658	
t Critical two-tail	2.079613845	

Results: p=›0.01

Because of the initial hypothesis indicating an increase in mean scores from the

RSE after CPE, this requires a one-tailed paired sample test instead of a two-tailed

paired sample test. The program used a two-tailed sample test; therefore, in order to

change this we have to divide our obtained p-value in half (the two-tailed p-value is

twice the one-tailed p-value).

The end result indicated in a P-value of 0.0012 which is less than the cutoff of

0.05 which means the null hypothesis can be rejected and it can be concluded that

there is a significant increase in the mean RSE score in the post test.

(2) Paired Samples Test between control group with RSE

Research Hypothesis: There is an increase in the control group's mean difference

score from the RSE Scale in the post-test.

Null Hypothesis: There is no increase in the control group's mean different score

from the RSE Scale in the post-test.

Table 9   T-Test on RSE of Control Group

	Variable 1	Variable 2
Mean	2.226666667	2.22
Variance	0.102095238	0.173142857
Observations	15	15
Pearson Correlation	0.65650515	
Hypothesized Mean Difference	0	
Df	14	
t Stat	0.081378846	
P(T<=t) one-tail	0.46814632	
t Critical one-tail	1.761310136	
P(T<=t) two-tail	0.93629264	
t Critical two-tail	2.144786688	

Results: p=<0.01

The end result indicated in a P-value of 0.936 which is greater than the cutoff of

0.05. This indicates that the null hypothesis can be accepted. It is therefore concluded

that there are no significant changes in the mean RSE score in the post-test.

Second Hypothesis

The second hypothesis of this research is that the experimental group will attain

a significantly higher mean total score on the Counseling Self Estimate Inventory than

will the control group.

(3)   Paired Samples Test between experimental group with CSE

Null Hypothesis: There is no change in participant's CSE mean difference score from

before to after taking CPE over the course of an academic school

year.

Research Hypothesis: There was an increase in the mean difference score –

participants scored higher in the CSE after taking CPE over the

course of an academic school year.

Table 10   T-Test on CSE of Experimental Group

	Variable 1	Variable 2
Mean	3.981363636	4.454545455
Variance	0.246050433	0.196083117
Observations	22	22
Pearson Correlation	0.722677044	
Hypothesized Mean Difference	0	

df	21
t Stat	-6.286000266
P(T<=t) one-tail	1.55403E-06
t Critical one-tail	1.720742903
P(T<=t) two-tail	3.10807E-06
t Critical two-tail	2.079613845

Results: p= <0.01

Because of the initial hypothesis indicating an increase in mean scores from the

CSE after CPE, this requires a one-tailed paired sample test instead of a two-tailed

paired sample test. The program used a two-tailed sample test; therefore, in order to

change this we have to divide our obtained p-value in half (the two-tailed p-value is

twice the one-tailed p-value).

The ending result indicated a P-value of 0.00000031 which is less than the cutoff

of 0.05 which means the null hypothesis can be rejected and it can be concluded that

there is an increase in the CSE scores after treatment.

(4)   Paired Samples Test between control group with CSE

Null Hypothesis: There is no difference in the control's mean difference score from

the CSE in the post-test.

Research Hypothesis: There is an increase in the control's mean different score from

the CSE in the post-test.

Table 11   T-test on CSE of Control Group

	Variable 1	Variable 2
Mean	4.144	4.27
Variance	0.648968571	0.605942857
Observations	15	15
Pearson Correlation	0.809320617	
Hypothesized Mean Difference	0	
Df	14	
t Stat	-0.996360652	
P(T<=t) one-tail	0.167992601	
t Critical one-tail	1.761310136	
P(T<=t) two-tail	0.335985201	
t Critical two-tail	2.144786688	

The ending result indicated a p-value of 0.335 which is greater than the cutoff of

0.05. This indicates the null hypothesis cannot be rejected. It is concluded that there is

no significant change in the mean CSE score after treatment.

In order to further demonstrate the changes in the CSE between the pre-test and

post-test of the Experimental Group and Control Group, t-test is used to analyze the

four subscales of CSE of Experimental Group and Control Group respectively. The

subscales are processing skills, challenge and difficulties, value and self-confidence.

Table 12 shows the P-value of the four subscales of CSE of the Experimental Group

and Control Group.

Table 12 P-value of the four subscales of CSE of the Experimental Group and Control Group

	Experimental Group P-value	Control Group P-value
processing skills	3.33149E-05	0.319542372
challenge and difficulties	8.91579E-06	0.522803863
value	0.000330571	0.451857861
self-confidence	2.57374E-05	0.372031977

For the subscale processing Skills of the Experimental Group, the end result indicated in a P-value of 0.0000033 which is less than the cutoff of 0.05 which means the null hypothesis can be rejected and it can be concluded that there is a significant increase in the means of the Processing Skill subscale of CSE score after participation in CPE. For the subscale processing Skills of the Control Group, the end result indicated a P-value of 0.319542372 which is greater than the cutoff of 0.05 which means the null hypothesis cannot be rejected and it can be concluded that there is no increase in the means of the Processing Skill subscale of CSE score in the post-test.

For the subscale challenge and difficulties of the Experimental Group, the end result indicated a P-value of 0.00000089 which is less than the cutoff of 0.05 which means the null hypothesis can be rejected and it can be concluded that there is a significant increase in the means of the subscale challenge and difficulties of CSE score after participation in CPE. For the subscale challenge and difficulties of the

Control Group, the ending result indicated a P-value of 0.522803863which is greater than the cutoff of 0.05 which means the null hypothesis cannot be rejected and it can be concluded that there is no increase in the means of the subscale challenge and difficulties of CSE score in the post-test.

For the subscale value of the Experimental Group, the end result indicated in a P-value of 0.000330571 which is less than the cutoff of 0.05 which means the null hypothesis can be rejected and it can be concluded that there is a significant increase in the means of the subscale value of CSE score after participated in CPE. For the subscale value of the Control Group, the ending result indicated in a P-value of 0.451857861 which is greater than the cutoff of 0.05 which means the null hypothesis cannot be rejected and it can be concluded that there is no increase in the means of the subscale value of CSE score in the post-test.

For the subscale self-confidence of the Experimental Group, the ending result indicated in a P-value of 0.0000025 which is less than the cutoff of 0.05 which means the null hypothesis can be rejected and it can be concluded that there is a significant increase in the means of the subscale self-confidence of CSE score after participation in CPE. For the subscale self-confidence of the Control Group, the ending result indicated in a P-value of 0.372031977 which is greater than the cutoff of 0.05 which

means the null hypothesis cannot be rejected and it can be concluded that there is no

increase in the means of the subscale self-confidence of CSE score in the post-test.

6. Correlation Coefficient (r)

To examine the association between RSE & CSE, Correlation Coefficient is used

to measure the strength and direction of the relationship between RSE and CSE. The

Correlation Coefficient is always a number between -1.0 and 1.0. If positive, then the

coefficient means if RSE increases, so does CSE.   If negative, it means if RSE

increases, CSE deceases.

To measure the strength of the relationship, the calculation is shown below:

Strength	Negative	Positive
Weak	-0.3 to -0.1	0.1 to 0.3
Medium	-0.5 to -0.3	0.3 to 0.5
Strong	-0.1 to -0.5	0.5 to 1.0

The Correlation Coefficient between RSE & CSE of Experimental Group in

Pre-test is 0.332848. (Figure 13) They are medium and positively correlated. The

Correlation Coefficient between RSE & CSE of Experimental Group in Post-test is

0.304459. (Figure 14) They are medium and positively correlated. The Correlation

Coefficient between RSE & CSE of Control Group in Pre-test is 0.513151. (Figure 15)

They are strong and positively correlated. The Correlation Coefficient between RSE

& CSE of Control Group in Post-test is 0.175726. (Figure 16) They are weak and

positively correlated.
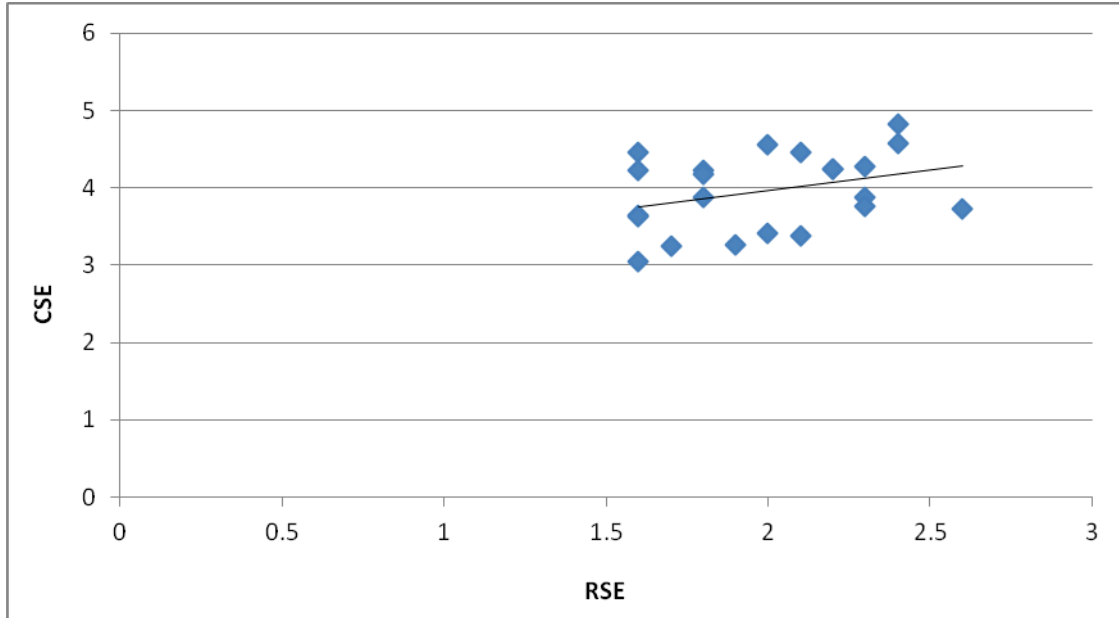
Figure 13   Correlation Coefficient between RSE & CSE for Experimental Group on
Pre-test
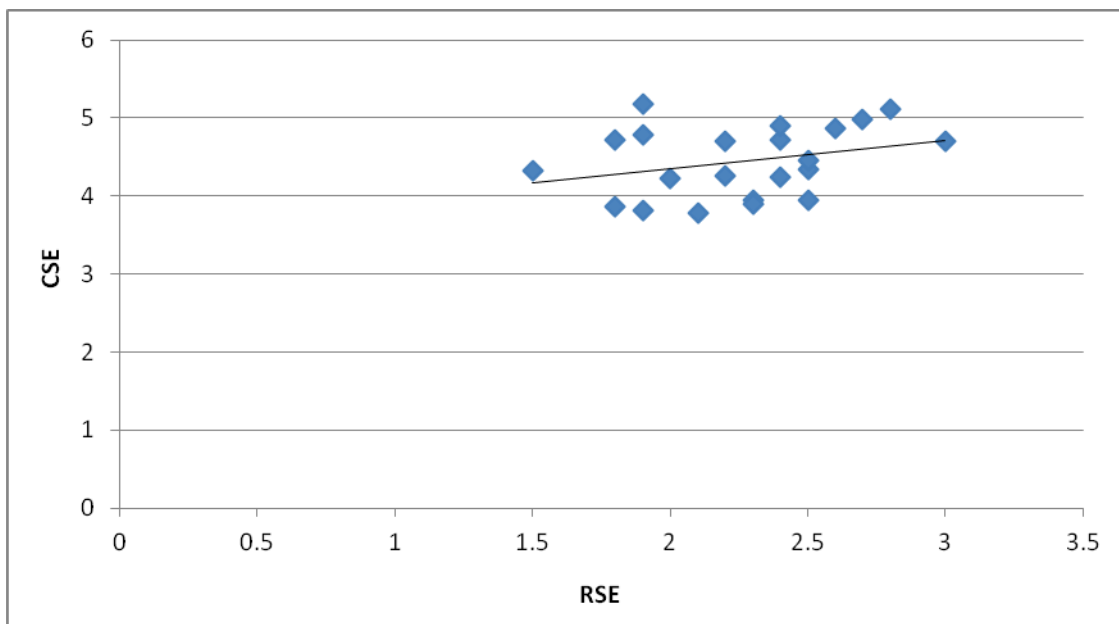
Figure 14   Correlation Coefficient between RSE & CSE for Experimental Group on
Post-test
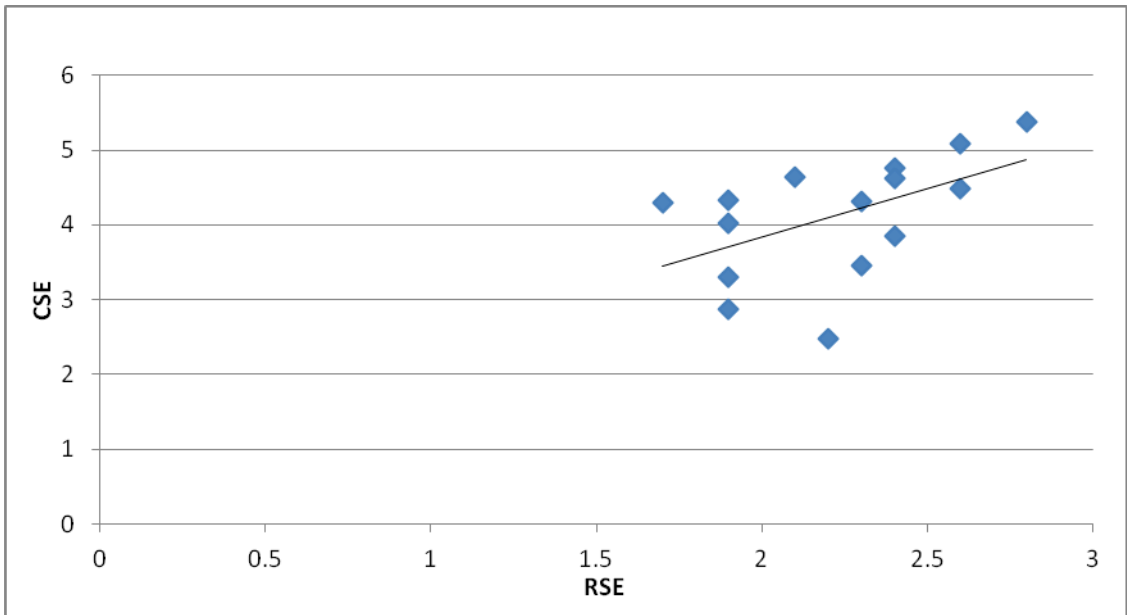
Figure 15 Correlation Coefficient between RSE & CSE for Control Group on Pre-test
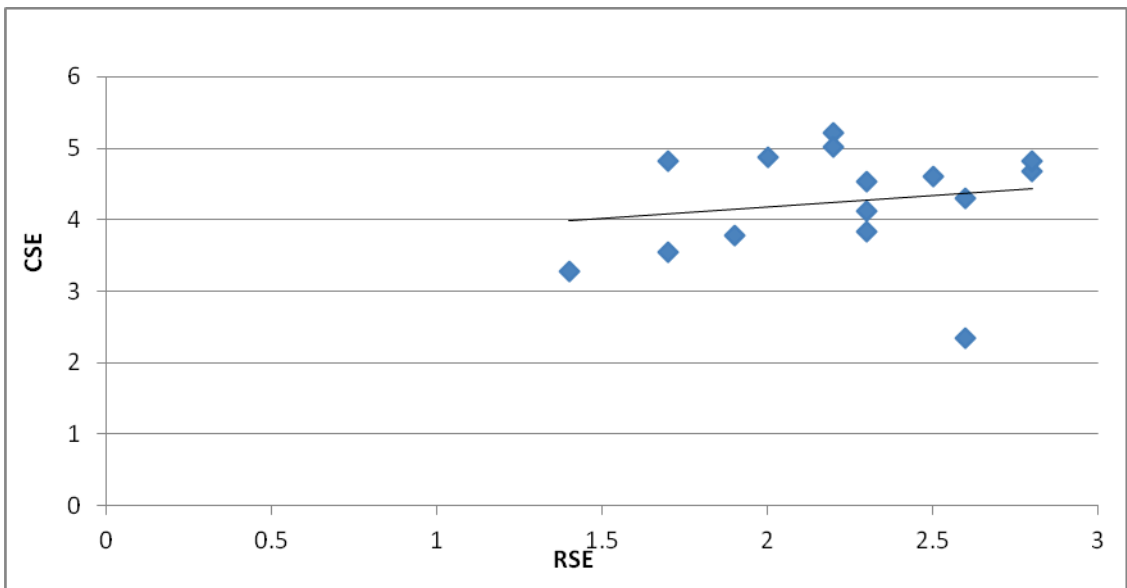
Figure 16   Correlation Coefficient between RSE & CSE for Control Group on Post-test

Discussion

The goal of this research is to investigate the change in self-esteem and counseling skills of students after participation in an initial unit of CPE. The results supported the two hypothesis of this paper that the total score of RSE of CPE students is significantly higher than that of non-CPE students, and the total score of CSE of CPE students is significantly higher than that of non-CPE students.

The major finding of this research is that after participation in an initial unit of CPE, students will have growth in self-esteem and counseling skills. CPE is a professional education for ministers that is experiential and clinical. The encounters with people in crisis may arouse students' existential anxiety which impacts their awareness of their own unresolved personal issues from their family of origin. It therefore provides a good opportunity for them to face and deal with those unresolved personal issues which can hinder their ministry. Through verbatim discussions, IPR sessions, and individual supervision, students' inner self-judgment and unhealthy behavior patterns caused by parental rearing styles will be identified, re-examined and readjusted. Trust and close relationship established between peers and with their supervisor may provide a secure and safe base to fulfill their attachment need. In such a learning environment, students' self-awareness increases and self-evaluation will become more positive and realistic. Their self-esteem will then be enhanced.

Furthermore, each student spent around 300 hours on visiting and caring for people who were facing critical life and death issues. Students were also involved in around 36 verbatim report discussions. (Each group has six students with each student completing six verbatim reports). In these intense practice and clinical supervision sessions, students' caring and counseling may have improved.

The finding showed the relationship between the change of self-esteem and the change of counseling skills is medium and positively correlated. As students' self-esteem enhanced, it indicated that their unresolved personal issues had been settled somewhat; therefore, the counter-transference in visiting patients could have been accordingly reduced. As such, it is hoped that their competence in providing counseling and caring to those people in need was enhanced. When students themselves become more efficient and capable in providing counseling and caring to people in need, their self-esteem will be enhanced as a result.

Regarding the total score of RSE in the pre-test, both of the experimental group and control group were within the normal range and high level range. The scores indicated that the self-esteem of seminary students is healthy. Scholars have documented that Christian faith and God's unconditional, unchangeable love and acceptance provide a basis for positive self-esteem. The results showed that seminary students are able to translate their Christian faith into their life and thus impact their

sense of self positively.

However, the results also showed that 2 students from the experimental group had their total scores decreased after participation in CPE. One of the reasons may be that some of the students may have participated in CPE because CPE is their compulsory course but that they may not have been ready to open up their hearts. They may need to take some more time to build up trust. The second reason may be the presence of counter-transference with their supervisor so they may have projected their negative feelings with their own parents upon supervisors. This counter-transference can be used as an opportunity to resolve their negative relationship between their parents. However, it may need more time for them to build a trusting relationship with their supervisor, at the same time as receiving feedback from them; they may interpret such comments as criticism and feel hurt and thus become even more resistant to change. When these students saw peers grow, they may have considered and evaluated themselves as failures. Their self-judgment may have become negative. Healing and growth is a process which includes ups and downs.   When the wound opens up, people will become sensitive and fragile. CPE is a risky journey; it needs collaboration between students and supervisors. The third reason may be there were some other factors from the Seminary as there were 6 students from the control group whose total RSE score were decreased in the post-test.

It seems to suggest that quite a number of seminary students face the same problems which impact their own self-evaluation. This paragraph contains conjecture and speculation as to why a few scores decreased. It might be wise to state up-front that there was no exploration of the decrease but that the above discussion offers some possible reasons for such decreases.

Limitations

This study has several limitations. The first limitation is that our sample comes from a single, highly selective Seminary, which may limit the generalizability of the results. That is, there may be something about the experience at the Bethel Bible Seminary that leads to the change of self-esteem and counseling generated in this study. The changes may be caused by a third variable that was not assessed.

The second limitation is the fact that the sample size was small, thus limiting statistical power and increasing the possibility of error. A sample size of 100 or more may have yielded different results.

The third limitation is that there was no information about the training or exposure to counseling the control group might have had, which in turn might have influenced the scores of their pre and post measurement. In the future, this should be carefully controlled.

The third limitation is that the number of variables is limited to two, which are RSE and CSE. There are some other variables which may be valuable and important to investigate for studying the changes of CPE students.

The fourth limitation is that the demographic and background of the students were not considered in this paper. All these factors may have played a part in the changes of the students which may have had an influence on the changes observed.

Future Directions

It is suggested that quantitative research on the changes of CPE is needed for Hong Kong. Up to now, there has been little academic and scientific study on CPE in Hong Kong. Quantitative research may provide empirical support for ministers and seminaries to realize the contribution of CPE from an objective perspective.

Furthermore, for the church of Hong Kong, study and research on self-esteem has been rare. Research on CPE, comparing the students' self-esteem and counseling in all Hong Kong seminary students, is suggested. Such research can hopefully motivate potential students to participate in CPE and help to promote CPE to church and ministers.

It is suggested that research on ministers' well-being is needed in Hong Kong. Hong Kong Baptist University conducted research on ministers' physical,

psychological and spiritual conditions in 2010. This was considered the only

academic research on studying psychological and spiritual well-being of ministers in

Hong Kong.[187] It caused some impact in church circles and created some discussions.

However the influence was not significant. A more profound, professional and

academic research on ministers' well-being will have a much greater impact and

contribute more to church and Seminary educator attitudes towards the importance of

CPE.

---

[187] Wing-shu Lam, "Crisis and Development in Pastoral Spiritual Well-being" (Hong Kong: Divinity School of Chung Chi College, 2013), 7, 56.

CHAPTER SIX

PROJECT

Clinical Pastoral Education Research and Development Center

Introduction

Hong Kong Bethel Bible Seminary has conducted a CPE program since the

1990s. The finding of this paper indicates that students' self-esteem and counseling

skills may be enhanced after participation in CPE. As self-esteem and counseling

skills improve, it is believed that ministers may serve and relate with church members

in a more healthy way. Therefore, this paper proposes the establishment of a Clinical

Pastoral Education Research and Development Center to co-ordinate the development

of CPE, so that CPE may be taught in a more systematic way to a wider audience.

CPE can thus be better promoted in churches and to ministers of all settings in Hong

Kong.

CPE focuses on issues related to spiritual as well as psychological concerns, and

it has developed steadily in Hong Kong over the last 20 years. Most CPE educators

and hospital Chaplains in Hong Kong are unfamiliar and uncomfortable with

scientific research and do not have any active quantitative collection of data on

effectiveness at this point. All references and findings are from western scholars who

may not take Chinese cultural concerns into consideration. It is expected that

systematic research and scientific study may be a new way forward to enhance the development of CPE.

Rationale for the Establishment of the Center

The rationale for the establishment of the center has two foci. The first is psychological and spiritual health of ministers and the second focus is academic research studies. Healthy ministers are those having healthy connections with their own selves, others and God. They can make use of their own selves as the resource in ministry. Research findings show that ministry is a relational and stressful vocation. Ministry requires ministers to transform theology into action. Instead of mere knowledge or skills, ministry recognizes all aspects of the person and will be a challenge to ministers' emotions, self-worth, psychological and spiritual health. Hence, ministers must be comfortable with who they are, accepting their own strengths, limitations, weaknesses and struggles. They have to be aware of their own behavior patterns and defense mechanisms. They deal with their own psychological baggage and resolve unfinished issues from their family origins. They also have to establish their positive self-worth and secure attachment to the Creator God. It is also important that they integrate and appreciate oneself as a divine representative and

human.[188]

The second focus of the rationale is academic research. Both the importance and

effectiveness of CPE are noticed and recognized by people in Hong Kong. However,

the efficacy tended to be more subjective and indefinable. CPE-related articles have

been written by chaplains, CPE students and supervisors and published in different

periodicals. But most of these articles are reflective, personal and experiential.

Studies with quantitative measurement and strong academic analysis are rare.

However, they are crucial for the development and promotion of CPE. The

importance can be noted in three layers. First, academic and evidence-based research

studies have been undergone for decades in the West. That has helped the movement

of CPE and the establishment of its professionalism. Furthermore, there are

significant differences between the West and Chinese cultures. It is time for Hong

Kong to begin conducting more localized research studies within the context of our

culture. Second, CPE is part of the theological education. Most subjects taught in

---

[188] Pamela Cooper-White, *Shared Wisdom: Use of the Self in Pastoral Care & Counseling* (Minneapolis: Fortress Press, 2004), 3-8,128-130; Kathleen Hope Brown, "Formation and the Education of Ministers," in *Theological Education* Vol. 48(1), 2013: 15-23; Carl Wells, Janice Probst, Robert McKeown, et al, "The Relationship Between Work-Related Stress and Boundary-Related Stress Within the Clerical Profession," *Journal of Religion and Health* 51(1) (2012): 215-230; Carl Wells, "The Effects of Work-Related and Boundary-Related Stress on the Emotional and Physically Health Status of Ordained Clergy," *Journal of Pastoral Psychology* 62 (2013): 101-114; Randy Garner, "Interpersonal Criticism and the Clergy," *Journal of Pastoral Care and Counseling 67(1,2)* (2013): 1-14; Gail Kinman, Obrene McFall, and Joanna Rodriguez, "The Cost of Caring? Emotional Labor, Wellbeing and the Clergy," *Journal of Pastoral Psychology 60* (2011): 671-680; Ryan Staley, Mark McMinn, Kathleen Gathercoal, and Kurt Free, "Strategies Employed by Clergy to Prevent and Cope with Interpersonal Isolation," *Journal Pastoral Psychology 62* (2013): 843-857; Samuel Park, "Pastoral Identity constructed in Care-giving Relationships," *The Journal of Pastoral Care & Counseling 66(2)* (2012): 1-13; Barbara E. Livingston, etc, "Pastoral Formation Process for Seminarians: A New Model for Developing Psychologically Healthy Pastor," in *The Journal of Pastoral Care & Counselling 66(3-4)* (2009): 1-7.

seminary are academically and scientifically based. CPE is intended to be a course that helps students integrate their theology, so research studies of CPE will facilitate the integration, collaboration and consistency among different subjects and courses. Third, CPE is usually conducted in health care settings. CPE educators and students are part of the health care team. Most health care professions have been doing many academic and scientific research studies for making improvement in their services as well as proving the effectiveness of different services. The impact of CPE and chaplains to the health of patients is recognized in health care settings. Findings from academic and evidence-based research studies will further strengthen the practice and role of chaplains in the healthcare team. It also helps promote the interdisciplinary relationships.[189]

The Mission of the Center

The mission of the Center is threefold. The first is an individual level which is to cultivate and promote the message and importance of healthy ministers. The second is an internal level which is to improve and maintain the quality of CPE programs. The third is a nationwide level which is to promote CPE in Hong Kong.

---

[189] Andrew J. Weaver, "Chaplaincy Research: Its Value, Its Quality, and Its Future," in *Journal of Health Care Chaplaincy*, 14(1), 2008, 3-19.

The Target Group of the Center

The chief target group of the Center is ministers of all settings. It is expected the

Center may help ministers to become more fully aware of the importance of being a

healthy minister. They could then develop a more healthy self as human beings and

ministers by participating in CPE and other courses. The second target group consists

of theological educators. It is expected that the findings and the activities of the

Center may provide positive impacts and stimulate new strategies – for instance,

helping them to understand the importance of CPE programs and integrating CPE into

their Seminary programs. The third target group consists of Church Deacons and

administrators. It is expected that the findings of the Center may influence them to

support their ministers to take CPE as training and continuing education. Hopefully,

CPE may be integrated into the culture of Christian churches and theological

education, and thus become main stream.

The Task of the Center

The task of the Center will have three interrelated domains. The first is to

provide training of CPE. The second is to conduct research on CPE. The third is to

promote CPE.   (Figure 17)

The first task of the Center is to provide CPE training. Conducting CPE of all

levels will be the core task of the Center. It is hoped that CPE will become a part of the theological program of Bethel Bible Seminary. At this moment, CPE is a compulsory course of the Master of Divinity program in BBS; it is expected that within five years of the establishment of the Center, CPE will become a compulsory course of the Bachelor of Theology program. Due to this, all ministers who receive their training at Bethel Bible Seminary will have taken CPE. Basic units in CPE (First and Second units) will be provided to all seminary students, while advanced units (third and fourth units) of CPE will be provided for those students who intend to select Chaplaincy roles as their vocation. Supervisory units will be provided to those students who intend to work as CPE supervisors, including teaching on helping students to deal with anxiety caused by their family of origin.

The quality of CPE is important as well. The effectiveness of CPE is highly dependent on the students' readiness and openness. However, the role of the supervisor also has a great impact on the effectiveness of the CPE. The learning and the growth of students rely on both the attitude of the supervisor and the student. In view of this, it is important for supervisors to be mutually responsible to one another for their professional work and direction. A collegial professional community will facilitate the personal and professional growth of supervisors. In turn, the quality and effectiveness of CPE programs may be maintained and improved.

The second task of the Center is to conduct research on CPE. The first scope of study will be on the effect of CPE, specifically on the value and role of CPE in the formation and education of ministers and the change of CPE students (such as self-esteem, interpersonal relationship, spirituality, pastoral skills, etc.) The research studies will be larger in terms of scale and duration. Measurement and evaluation will be conducted in every course. In order to take up this task, a research team will be established, comprised of experts from CPE, theological education, and statisticians. The findings from the research will be used for promotional strategies. The second scope of the research will be on ministers' needs, particularly on their physical, spiritual and psychological well-being and their needs. The findings will be published, and will be used by educators to re-adjust their curricula to suit the needs of the ministers. The research project may be implemented incrementally. The third scope will be churches. This is to investigate churches' expectations and needs for their ministers. Findings again will be published and will be used by theological educators to readjust their curricula and equip themselves.

The third task of the Center is to promote CPE. The first strategy is to publish a journal on spiritual care. It will act as a platform for spiritual care workers, CPE educators, and researchers to share their findings and studies, and for the research team of the Center to publish their findings regularly. CPE students may be invited to

share their reflections and learning experiences. It will also serve as a resource for

ministers to enhance their pastoral skills and to attract their attention and interest in

CPE.

The second strategy is to set up a pastoral care resource center and a webpage.

Reference books, related journals, and videos will be collected for CPE educators,

students and ministers to borrow.

The third strategy is co-ordinate workshops on the topics of attachment, spiritual

journey, emotional need of ministers, interpersonal relationship of ministers, grieving,

psychosomatic illness, crisis intervention, etc. It is hoped that such workshops will

arouse the awareness and interest of ministers to pay more attention to their own

selves and needs.

The fourth strategy is to liaise with the alumni of CPE to facilitate their mutual

support and to encourage continuing learning.

Figure 17   The task of the CPE Research and Development Center

Schedule

The Center will be set up officially when BBS campus reconstruction is

completed. Office space has been allocated for the establishment of the Center.

Upon the approval from the President and the Board of Director of BBS, preparation

work can be implemented.

2015   Executive team set up. The team oversees the progress of establishment,

by discussing the details of the proposal and inviting experts to join the working

teams. Meanwhile, vision will be shared among experts.

2016   Working teams set up. The first team is the Training Team. The second

team is the Research Team. The third team is the Promotion Team. Meanwhile, the

vision will be shared among theological educators.

2017   Fund raising. A designated fund will be established. A walkathon will be

held to call for donations. Working teams begin to work out their working schedule

and their blueprints. Meanwhile, the vision will be shared among churches and

ministers.

2018   Establishment of the Center. The Journal will be published. Workshops

will be held. Staff will be hired.

In sum, the establishment of the Center will signal a new era of the CPE

movement in Hong Kong. Apart from training, the CPE movement will be enlarged to

provide research and academic support to ministers and theological educators. As a

result, ministers' lives will become healthier and their competence will be enhanced.

In the long run, the findings of research studies and the journal will not only benefit

the ministers and churches of Hong Kong, but also those of Mainland China. They

may serve as an important reference for their ministry with extra backing of a

professional and academic nature.

CONCLUSION

This thesis aimed to investigate the changes of students who participated in unit one of CPE. Students' self-esteem and counseling skills were measured. There were two assumptions in this paper. Firstly, it was assumed that CPE students would attain a higher mean score in self-esteem than non-CPE students. Secondly, it was assumed that CPE students would attain a higher mean score in counseling skills than non-CPE students.

CPE is a professional education for ministry. Its purpose is to enhance students' personal growth and professional competence. Through the action-reflection-action learning method, students' awareness may be strengthened and their behaviors may be readjusted and reformed. Through pastoral ministry to persons in crisis, verbatim discussion, peer group experience and individual supervision from a certified supervisor, student's personal and professional issues are addressed in such courses.

The Gospels stated that Jesus chose the Twelve during the early part of His ministry. The Twelve had a special position and so they were different from the other disciples and followers. They were going to take up Jesus' ministry on earth after Jesus ascended to heaven. It was believed that Jesus had given them a professional education for ministry in order to train them up to be ministers. To some extent, their

training was similar to CPE. The Twelve were sent to provide ministry to people in need. Jesus allowed the Twelve to have an action-reflection-action learning format. Most of the time, the Twelve had their learning conducted in a group setting and Jesus was their supervisor. Jesus, as a supervisor, had a healthy sense of self and He strengthen the Twelve's selves by giving them unconditional love and acceptance, through trust relationships and through affirmation. It transpired that the Twelve became church leaders after Jesus left this earth. The training program provided by Jesus to the Twelve successfully enhanced the Twelve's personal growth and professional growth.

Self-esteem is an ongoing self-evaluation and judgment of one's own personal efficacy and personal worth. Self-esteem is important because it is correlated to some personality characteristics and psychological health. In turn, it has great influence on people's lives. There is a biblical basis for self-esteem. The first is the creation, as people are created in God's image and so every person is of great worth and dignity. The second is redemption – in light of Jesus' redemption, all people are of great worth. The third is God's unconditional love which provides a secure base for positive regard. The fourth is the notion of a new creature in Christ – in Christ, people are claimed to be perfectly righteous which provides a new identity. In Christ, people are valuable and lovable. Self-esteem is largely affected by parental rearing style, ideology formed

by interactions with parents, siblings, friends, teachers and pastors. There are effective ways to enhance ministers' self-esteem, by establishing trust relationships, by therapy, and by learning new ways of thinking and behaving. It is believed that CPE has those elements which may positively influence ministers' self-esteem.

This thesis also aimed to investigate the change in CPE students. A pre-test and post-test was completed by CPE students (experimental group) and non-CPE students (control group). Participants were all students from Bethel Bible Seminary. For the experimental Group, there were 22 participants. For the control group, there were 15 participants. To measure students' self-esteem, the Rosenberg Self-Esteem Inventory (RSE) was employed. To measure student's counseling skills, Counseling Self-Estimate Inventory (CSE) was employed. When the data was collected, the total score of the pre-test and post-test were compared and analyzed. The total score of the experimental group and control group were compared as well.

The first findings indicated that students, after participation in CPE, had significant growth in self-esteem while non-CPE students did not. The first assumption of this paper is supported by the findings. The second finding indicated that students, after participation in CPE, had growth in counseling skills while non-CPE students did not. The second assumption was also supported by the findings. The relationship between self-esteem and counseling skills was medium-positively

related with the CPE group.

The findings indicated that CPE had a positive influence on students' self-esteem and counseling skills. It is believed that CPE may help ministers serve and relate with church members more effectively and efficiently. Therefore, we propose to establish a Clinical Pastoral Education Research and Development Center to promote CPE in Hong Kong. The Center will have three directions. These are: to provide training, to conduct research, and to promote CPE. Hopefully, CPE may become integrated into theological education, church management and individual ministries to the point where their views of CPE improve and joining CPE becomes an attractive option.

Rosenberg's Self-Esteem Scale

Below is a list of statements dealing with your general feelings about yourself. If you strongly agree with the statement, circle "Strongly Agree". If you agree with the statement, circle "Agree". If you disagree with the statement, circle "Disagree". If you strongly disagree with the statement, circle "Strongly Disagree".

STATEMENT		Strongly Agree	Agree	Disagree	Strongly Disagree
1	I feel that I am a person of worth, at least on an equal plane with others.				
2	I feel that I have a number of good qualities..				
3	All in all, I am inclined to feel that I am a failure				
4	I am able to do things as well as most other people.				
5	I feel I do not have much to be proud of.				
6	I take a positive attitude toward myself.				
7	On the whole, I am satisfied with myself.				
8	I wish I could have more respect for myself.				
9	I certainly feel useless at times.				
10	At times I think I am no good at all.				

自尊感自我衝量表

　　以下是一些句子形容你對自己的感受。如果句子很表達你的感受請在
１（很同意）❑的格內作一個「✓」號；如果你只是同意句子的形容便✓２（同意）的容格，否同意便✓３（不同意）的空格，很不同意的話請你✓４（很不同意）的空格。

	1 很同意	2 同意	3 不同意	4 很不同意
１．整體來說，我滿意自己。				
２．有時我會覺得自己一點好處都沒有。				
３．我覺得自己有不少優點				
４．我能夠做到與大部份人的表現一樣好。				
５．我認為自己沒有什麼可以值得自豪。				
６．有時我十分覺得自己毫無用處。				
７．我覺得自己是個有價值的人，最低限度我與其他人有一樣的價值。				
８．我希望我能夠多一些尊重自己。				
９．從各方面看來，我是較傾向覺得自己是一個失敗者。				
10．我用正面的態度看自己。				

Rosenberg Self-esteem Scale (RSE)

作者: Morris Rosenberg　　　譯者: 楊家正博士

Counseling Self Estimate Inventory

Fill out the questionnaire according to your feelings and experiences from
interviews with clients <u>in the past month</u>. Please circle the suitable number:
1. No confidence at all (0%); 2. Not much confidence (20%); 3. mild confidence
(40%);
4. Some confidence (60%); 5. Good confidence (80%); 6. Complete confidence.
(100%)

1. I am able to interact sincerely with clients	1	2	3	4	5	6
2. I am able to listen to clients' talking	1	2	3	4	5	6
3. I am able to use clients' language to communicate with them.	1	2	3	4	5	6
4. I am able to respond to my clients in an appropriate timing without interrupting or waiting too long to respond.	1	2	3	4	5	6
5. I am able to keep the conversation on focus.	1	2	3	4	5	6
6. I am able to respond to clients appropriately.	1	2	3	4	5	6
7. I am able to assess clients' condition correctly.	1	2	3	4	5	6
8. I am able to put myself into their shoes and understand their situations.	1	2	3	4	5	6
9. I am able to respond to client's hidden feelings and thoughts.	1	2	3	4	5	6
10. I am able to conceptualize clients' problems.	1	2	3	4	5	6
11. I am able to distinguish client's various feelings	1	2	3	4	5	6
12. I am able to help clients explore their thoughts, feelings, and behaviors.	1	2	3	4	5	6
13. I am able to use simple language to respond to clients.	1	2	3	4	5	6
14. I am able to form assumptions for clients' messages	1	2	3	4	5	6
15. I am able to encourage clients to have active participation.	1	2	3	4	5	6
16. I am able to close a conversation not abruptly and hastily.	1	2	3	4	5	6
17. I am able to lead the client to deepen their conversation.	1	2	3	4	5	6
18. I am able to handle clients' suicidal, alcoholic, and abuse cases.	1	2	3	4	5	6
19. I am able to correctly point out the core of clients' problem.	1	2	3	4	5	6
20. I am able to lead client's motivation for change.	1	2	3	4	5	6
21. I am able to adopt appropriate counseling strategies and skills.	1	2	3	4	5	6
22. I am able to make relevant referral.	1	2	3	4	5	6
23. I will not impose my value on clients.	1	2	3	4	5	6

24.	I am able to handle clients' strong emotions.	1	2	3	4	5	6
25.	I am able to deal with clients from different walks of life.	1	2	3	4	5	6
26.	I am able to maintain good self awareness.	1	2	3	4	5	6
27.	I am able to empathize with clients from different backgrounds.	1	2	3	4	5	6
28.	I am able to help clients effectively solve their problems.	1	2	3	4	5	6
29.	I am able to handle client's indecisiveness.	1	2	3	4	5	6
30.	I am able to catalyze clients to take actions.	1	2	3	4	5	6
31.	I am able to handle clients' depressed mood.	1	2	3	4	5	6
32.	I am able to summarize what the clients have shared.	1	2	3	4	5	6
33.	I am able to involve clients to explore solutions to their difficulties.	1	2	3	4	5	6
34.	I am able to assist clients to solve their problems.	1	2	3	4	5	6
35.	I am able to distinguish responsible and irresponsible clients.	1	2	3	4	5	6
36.	I am able to handle clients with no motivation for change.	1	2	3	4	5	6
37.	I am able to handle clients' anxiety problems.	1	2	3	4	5	6
38.	I am able to handle clients with depression.	1	2	3	4	5	6
39.	I am able to handle the conflicts if my values are different from that of my clients'.	1	2	3	4	5	6
40.	I am able to end the conversation appropriately.	1	2	3	4	5	6
41.	I posses counseling knowledge and skills.	1	2	3	4	5	6
42.	I am able to handle if clients raise questions beyond my knowledge.	1	2	3	4	5	6
43.	I am able to participate actively when seeing clients.	1	2	3	4	5	6
44.	I am able to keep the conversation with clients in a natural manner.	1	2	3	4	5	6
45.	I am able to have empathy with my clients.	1	2	3	4	5	6
46.	My responses to clients are well understood by them	1	2	3	4	5	6
47.	I am able to understand clients' situations and difficulties.	1	2	3	4	5	6
48.	I am able to understand the core of clients' problems.	1	2	3	4	5	6
49.	I am able to handle the discrepancies between clients' thoughts and behaviors.	1	2	3	4	5	6
50.	When I see clients, I feel competent and adequate to help them.	1	2	3	4	5	6

代碼：

輔導工作自我效能量表（預試量表）

填寫說明：請根據最近半個月您回應服務案主（簡稱案主）的情形作答，請依本身真實情形與感受，圈選適當數字。１・完全沒信心(0%)；２・沒信心(20%)；３・部份沒信心(40%)；４・部分有信心(60%)；５・有信心(80%)；６・完全有信心(100%)。

1.	我以真誠態度跟案主互動。	1 2 3 4 5 6
2.	我可以聽案主把話說完。	1 2 3 4 5 6
3.	我以案主熟悉的語言配合談話。	1 2 3 4 5 6
4.	我能夠在適當的時機給予回應，不會打斷對方或拖延太久。	1 2 3 4 5 6
5.	我能夠聚焦談話的主題。	1 2 3 4 5 6
6.	我能夠對案主所說的話給予適切的回應。	1 2 3 4 5 6
7.	我可以對案主問題的狀態進行評估。	1 2 3 4 5 6
8.	我可以站在案主的立場理解他的處境。	1 2 3 4 5 6
9.	我能回應案主所隱含的情緒與感受。	1 2 3 4 5 6
10	我可以對案主的問題有清楚的概念架構。	1 2 3 4 5 6
11.	我可以辨識並處理案主的情緒與感受。	1 2 3 4 5 6
12.	我可以協助案主探索其思想、感受與行為。	1 2 3 4 5 6
13.	我可以將案主談話的內容用簡單的話再回應給案主。	1 2 3 4 5 6
14.	我可以對案主的問題形成可能的假設。	1 2 3 4 5 6
15.	我可以鼓勵案主扮演主動積極的角色。	1 2 3 4 5 6
16.	我能夠適時結束一次談話，不顯得唐突或草率。	1 2 3 4 5 6
17.	我可以引導案主說得更深入。	1 2 3 4 5 6
18.	我可以處理案主有自殺、酗酒、虐待等緊急情況。	1 2 3 4 5 6
19.	我可以正確指出案主的問題核心。	1 2 3 4 5 6
20.	我可以引發案主改變的動機。	1 2 3 4 5 6
21.	我可以選擇適合案主的輔導策略與技術。	1 2 3 4 5 6
22.	我可以進行適當的轉介。	1 2 3 4 5 6
23.	我可以維持價值中立，不影響輔導服務。	1 2 3 4 5 6
24.	我可以處理案主的強烈情緒。	1 2 3 4 5 6
25.	我可以處理來自不同社會階層的案主。	1 2 3 4 5 6
26.	我可以持續進行自我覺察的工作。	1 2 3 4 5 6
27.	我可以感同身受不同生活背景的案主。	1 2 3 4 5 6

28.	我可以有效的幫助案主解決問題。 ------------------------------------	1 2 3 4 5 6
29.	我可以處理案主的猶豫不決。---	1 2 3 4 5 6
30.	我可以催化案主採取行動。---	1 2 3 4 5 6
31.	我可以處理案主低落的情緒。---	1 2 3 4 5 6
32.	我可以對案主的敘述予以具體清楚的摘要。 -----------------------	1 2 3 4 5 6
33.	我可以邀請案主共同討論解決問題的策略。 -----------------------	1 2 3 4 5 6
34.	我可以協助案主解決問題。---	1 2 3 4 5 6
35.	我可以辨識案主不願承擔責任的狀況。-----------------------------	1 2 3 4 5 6
36.	我可以處理沒有改變動機的案主。-----------------------------------	1 2 3 4 5 6
37.	我可以處理案主的焦慮情緒。---	1 2 3 4 5 6
38.	我可以處理案主的憂鬱傾向。---	1 2 3 4 5 6
39.	當案主的價值跟我有衝突時，我可以處理。-----------------------	1 2 3 4 5 6
40.	我可以在適當時間結束談話。---	1 2 3 4 5 6
41.	我已經具備輔導服務所需的技巧與知能。 --------------------------	1 2 3 4 5 6
42.	我可以處理我能力範圍之外的案主之問題。 -----------------------	1 2 3 4 5 6
43.	我可以一直積極的投入輔導服務。-----------------------------------	1 2 3 4 5 6
44.	我可以自然從容的與案主談話。 --	1 2 3 4 5 6
45.	我可以對案主保持接納同理的態度。--------------------------------	1 2 3 4 5 6
46.	我的回應容易被案主瞭解。---	1 2 3 4 5 6
47.	我可以體會案主的處境。 --	1 2 3 4 5 6
48.	我可以瞭解案主的問題核心。---	1 2 3 4 5 6
49.	當案主的想法與行為不一致時，我可以處理。--------------------	1 2 3 4 5 6
50	我值班接獲案主的詢問，我覺得自己是有能力協助案主的。	1 2 3 4 5 6

<參考「國立政治大學心理學研究所」博士班研究生陳莉榛之【輔導志工自我效能量表】>

Research Consent Form

REB approval Date: October 2012

Title

You are invited to participate in a research study of a Doctor of Ministry thesis-project. The title of the research study is the effectiveness of Clinical Pastoral Education for Christian minister of Hong Kong.

Researcher

This research study is conducted by Mei-lan CHOW - Doctor of Ministry student at Acadia Divinity College and Clinical Pastoral Education Supervisor of Bethel Bible Seminary of Hong Kong. The results of this research study will be contributed to thesis project done by ML CHOW. The supervisor of this research study is Dr. Andrew MacRae who is the Senior Consultant in the Doctor of Ministry program. Dr. MacRae can be contacted at (902)542-7354 and ML CHOW can be contacted at 9667 6861 and 3577 7443. Regarding any ethical issue in this research, please contact the Chair of the Acadia University Research Ethics Board, Dr. Stephen Maitzen by email *smailtzen@acadiau.ca*, or by telephone at 902.585.1407.

Purpose of the Research

The purpose of this research is to evaluate the effectiveness of Clinical Pastoral Education in:

    a.   improving the counseling skills of Christian ministers;

    b.   enhancing the self-esteem of Christian ministers.

Description of the Research

This research study is expected to take approximately nine months. Two groups of Bethel Bible Seminary students will be recruited voluntarily as subjects. The students of Group A are those who are going to take Clinical Pastoral Education course in the Fall Semester of 2012. The students of Group B are those who will not take Clinical Pastoral Education course. If you agree to participate, you will be asked to fill out two test instruments at the beginning of the Fall Semester 2012 (early Sept of 2012) and at the end of Spring Semester 2013 (late May of 2013) respectively. The scores of both Group A and Group B will then be compared and evaluated.

The two instruments Rosenberg Self Esteem Scale (RSE) and Counseling Self Estimate Inventory (CSE). RSE is for measuring self-esteem and CSE is for measuring counseling skills. The pretest scores of both test instruments will be compared with that of post test scores. That is to study the effectiveness of CPE program in enhancing ministers' self-esteem and counseling skills. Results from these tests will be used purely for this research project. They will not be placed in your student record and will not have any impact on all courses you take.   And you have the right to request the withdrawal of data within one year upon completion of the research.

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 choose to participate, you have not waived any rights to legal recourse in the event of research-related harm.

Potential Benefits

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

Confidentiality

Confidentiality will be respected. No information that discloses your identity will be released or published without your specific consent to the disclosure.   But if we find information we are required by law to disclose (e.g., child or elder abuse, inability to hold a valid driver's license, etc.), we cannot guarantee confidentiality.

The only people allowed to handle the information and results of this research study are those on the study team of this research project. All records and information will be kept in a locked file cabinet. All names will be kept on a password protected database and will be linked only with a study identification number for this research. All computer entry and networking programs will be done using study identification only. All data will be entered into a computer that is password protected. Data and information will be maintained for a minimum of one year after the completion of the research project.

Publication

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

Reimbursement

There is no payment, reimbursement for expenses for being participated in this study.

Participation

Participation in research must be voluntary. If you choose not to participate, you will continue to have access to course credits. If you choose to participate and later decide to change your mind, you can say no and stop the research at any time. Again you will continue to have access to course credits. It is anticipated that completing the RSE and CSE will take approximately 15 minutes of your time.

Commercialization and Conflict of Interest

There is no conflict of interest on the part of the researcher, and no possibility of commercialization of the research findings.

If you choose to participate, there is no potential profit from your participation or from commercialization of the results and of any other conflict of interest that might influence the judgment of the researcher.

Your participation in this project will not have any impact on your course grade even if the researcher is your CPE Supervisor. Your name will not be identified; instead study identification will be used as data for comparison.

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 questions in the future. My signature below indicates my willingness to participate in this study.

_____   _____
Subject   Date

參與問卷調查同意書

研究道德評委員會批核日期： 2012 年 10 月

題目
我們現誠意邀請閣下參與是次研究調查，讓我們了解臨床牧關教育對基督教牧職人員的效用。

研究人員
此項研究乃由阿基狄亞神學院(Acadia Divinity College)聖工博士學生周美蘭負責，作為其畢業論文企畫的部份內容，是項研究由麥安祖博士（Dr. Andrew MacRae）督導。麥安祖博士的聯絡電話是*(902)542-7354，而周美蘭的聯電話是9667 6861／3577 7443。周美蘭現職為香港伯特利神學院臨床牧關教育督導。對是項研究如有任何道德事宜的查詢，請與阿基狄亞大學「學術研究道德管委會」主席麥史提芬博士(Dr. Stephen Maitzen) 聯絡，電話 902.585.1407，電郵 smaitzen@acadiau.ca.*

研究目的
這研究的目的是從提昇基督教教牧人貝的輔導技巧及自尊感來評估臨床牧關教育的效用。

研究方法
此項研究估計為期九個月。是次參與問卷調查的將會有兩組同學，一組是於 2012 年秋季首次修讀臨床牧關教育的同學（A組），另一組為從沒有修讀臨床牧關的同學（B組）。若閣下同意參與，我們會請你在 2012 年神學院秋季課程開始前填寫兩份問卷，分別是『自尊量度表』及『自我效能量表』，另外，於 2013 年春季課程結束時再次填寫上述兩份問卷。『自尊量度表』將用作量度個人的自尊感，而『自我效能量表』則用作量度個人的輔導能力。我們會將前後兩次進行的問卷調查結果作比較，然後再將 A 組及 B 組同學的結果進行研究及比較。

所有問卷調查的資料只會用作是項研究項目，而且不會記錄於學生成績表內，亦不會對學生修讀的任何科目有任何影響。而閣下有權在完成調查後的一年內要求取回有關資料。

預期傷害
是項研究並不會對參與者構成任何傷害。即或閣下因參與是項調查而帶來任何傷害，你不會失去獲得法律支援的權利。

預期利益

參與者並不會因是項研究而得到任何利益。

機密性

我們尊重閣下的私隱，在未得閣下同意前，不會在發放或刊載的資料時披露閣下的身份。我們會以一個研究代碼取代閣下的姓名。所有研究資料當輸入電腦資料庫時均以研究代碼進行，而該資料庫將以密碼保護。而所有資料及文件將會存放於有鎖的文件櫃內，只有是項研究項目的工作人員接觸。除非，法律要求披露閣下的資料，如涉及虐待兒童及長者、無牌駕駛等，否則我們會確保閣下的私隱。當研究企畫完成後一年，所有調查的資料將會銷毀。

出版

是項研究的結有可能刊登於書籍、期刊，或用於教學用途。然而，閣下的姓名或其他身份的象徵在未得閣下同意前將不會刊登或作為教學材料。

報銷

所有因參與是項研究的支出，將不獲任何形式的補償。

參與

閣下的參與純屬自願性質，如閣下選擇不參與，你仍可繼續選修學科；如閣下選擇參與，亦可隨時中途停止，在這情況下，閣下所修讀的學科同樣不會受影響。按估計，填寫『自尊量度表』及『自我效能量表』兩份問卷約需時 15 分鐘。

商業及利益衝突

研究員於是項研究中並沒有任何利益衝突，研究成果亦沒有商品化的可能性。如果你選擇參與，並不會因你參與或因為研究成果商品化後而得到任何利期，亦不存在任何影響研究判斷的利益衝突。

若果研究員為你的臨床牧關教育的督導，而無論你選擇參與與否均不會影響學科的評分。

同意

我確認有關於預期的傷害、預期的利益及選擇自由的資料已向我說明。我已經細閱及明白以上的內容。我明白如將來遇到問題仍可以發問。以下簽署表示我願意參與是項問卷調查。

參與者   日期

Bibliography

Books:

Adams, Jay E. *The Biblical View of Self-Esteem, Self-Love & Self-Image.* Eugene,
    Oregon: Harvest House Publishers, 1986.

Aden, Leroy and Harold Ellens. ed. *Turning Points in Pastoral Care - The Legacy of
    Anton Boisen and Seward Hilter.*   Michigan: Baker Book House, 1990.

Aldridge, Jerry. *Self-esteem: Loving Yourself at Every Age*.   Birmingham: Doxa
    Books, 1993.

Association of Hong Kong Hospital Christian Chaplaincy Ministry.   *Professional
    Chaplaincy-Its Role and Significance in Healthcare Service.*   HK:
    Association of HK Hospital Christian Chaplaincy Ministry, 2009.

Bauckham, Richard. *Jesus and The Eyewitnesses: The Gospels as Eyewitness
    Testimony*. Michigan: Wm. B. Eerdmans Publishing Co., 2006.

Best, Ernest. *Following Jesus: Discipleship in the Gospel of Mark.*   Sheffield: JSOT,
    1981.

----------- *Disciples and Discipleship: Studies in the Gospel According to Mark.*
    Edinbury: T & T Clark, 1986.

Black, Clifton. *The Disciples According to Mark.* Sheffield: JSOT, 1989.

Branden, Nathaniel. *The Psychology of Self-esteem: A Revolutionary approach to Self
    Understanding that launched a New Era in Modern Psychology*.   San
    Francisco: Jossey-Bass, 1969.

--------.   *Six Pillars of Self-Esteem.*   NY: Bantam Books, 1994.

Brownback, Paul. *The Danger of Self Love: Re-examining a popular myth.* Chicago:
    Moody Press, 1982.

Bruce, Alexander. *The Training of the Twelve.* MI: Kregel Publications, 1988.

Campolo, Tony, Darling, Albert. *Connecting like Jesus: Practices for Healing, Teaching, and Preaching.* San Francisco: Jossey-Bass, 2010.

Carlson, David. ed.   *Counseling and Self-Esteem.* Waco,Texas: Word Books Publisher, 1988.

Collinson, Sylvia.   *Making Disciples: The significance of Jesus-Educational Methods for Today's Church.*   Eugene: Wlpf & Stock, 2006

Cooper-White, Pamela. *Shared Wisdom: Use of the Self in Pastoral Care and Counseling.* Minneapolis: Fortress Press, 2004.

Coopersmith, Stanley.   *The Antecedents of Self-esteem.*   San Francisco: W.H. Freeman & Company, 1967.

Dykstra, Robert C. ed.   *Images of Pastoral Care – Classic Readings.* Missouri: Chalice, 2005.

Egan, Gerard. *Face to Face: The Small-Group Experience and Interpersonal Growth.* CA: Brooks/Cole Publishing Co., 1973.

Ellison, Craig W. ed. *Your Better Self: Christianity Psychology & Self-Esteem.* San Francisco: Harper & Row Publishers, 1983.

France, R.T. *The Gospel of Matthew*. The New International Commentary On the New Testament.   Michigan: W. B. Eerdmans Publishing Company, 2007.

Frawley-O'Dea, Mary Gail, and Sarnat, Joan E. *The supervisory Relationship: A Contemporary Psychodynamic Approach*. NY: The Guilford Press, 2001.

Gerkin, Charles V. *The Living Human Document – Re-visioning Pastoral Counseling in a Hermeneutical Mode.*   Nashville: Abindon Press, 1984.

Green B. Joel. *Body, Soul and Human Life: The Nature of Humanity in the Bible*. Michigan: Baker Academic, 2008.

Guelich, Robert Guelich. *Mark 1-8*, Word Biblical Commentary vol. 34A. Dallas: Word Books, 1989.

Gushee, David and Walter Jackson, ed, *Preparing for Christian Ministry: An Evangelical Approach. Formation for Ministry in the 21 Century*. MA: Baker Books, 1996.

Hall, E. Charles. *Head ad Heart: The Story of the Clinical Pastoral Education Movement.* USA: Journal of Pastoral Care Publications, Inc, 1992.

Harrington, Daniel J. ed, *The Gospel of Mark*, Sacra Pagina Series, vol. 2. Minnesota: The Liturgical Press, 2002.

Hayes, Elisabeth & Daniele Flannery. *Women as learners: the significance of gender in adult learning.* San Francisco: Jossey-Bass, 2000.

Hemenway, E. Joan. *Inside the Circle: A Historical and Practical Inquiry Concerning Process Groups in Clinical Pastoral Education*. USA: Journal of Pastoral Care Publications, Inc, 1996.

Hoekema, Anthony. *The Christian Looks at Himself.*   Mich: Grand Rapids, 1975.

Hurtabdo, W. Larry. *Mark*. Understanding The Bible Commentary Series.   Michigan: Baker Books, 2011.

Jacobs, Daniel, Paul David, and Donald Jay Meyer. *The supervisory Encounter: A Guide for Teachers of Psychodynamic Psychotherapy and Psychoanalysis*. London: Yale University Press, 1995.

Law, Kit Choi. ed. *Chaplaincy Service & Holistic Healing: An Anthology*. HK: Association of H.K. Hospital Christian Chaplaincy Ministry Ltd, 2005.

Malbon, Elizabeth Struthers. *In the Company of Jesus: Characters in Mark's Gospel.* Kentucky: Westminster John Knox Press, 2000.

McGrath, Joanna and Alister McGrath. *Self-Esteem: The Cross and Christian Confidence.*   Wheaton, Illinois: Crossway Books, 2002.

McKay, Matthew and Patrick Fanning.   *Self-Esteem: A Proven Program of Cognitive Techniques for Assessing, Improving, and Maintaining Your Self-Esteem*.   CA: New Harbinger Publication, 2000.

177

McKoy, Charles Francis. *The Art of Jesus as a Teacher.* Philadelphia: The Judson Press, 1930.

Mruk, Chris. *Self-Esteem: Research, Theory, and Practice.* NY: Springer Publishing Company, 1995.

Oates, Wayne E. ed. *The Minister's Own Mental Health*. NY: Channel Press, 1961.

O'Connor, Thomas St. James. *Clinical Pastoral Supervision and the Theology of Charles Gerkin.* Canada: Wilfrid Laurier University Press, 1998.

Ogden, Greg. *Transforming Discipleship: Making Disciples a Few at a Time.* Illinois: IVP, 2003.

Pohly, Kenneth. *Transforming the Rough Places: The Ministry of Supervision.* Tennessee: Providence House Publishers, 2001.

Richardson, W. Ronald. *Becoming a Healthier Pastor: Family Systems Theory and the Pastor's Own Family*. Minneapolis: Augsburg Fortress, 2005.

Saussy, Carroll. *God images and Self Esteem: Empowering Women in a Patriarchal Society.* Kentucky: Westminster/John Knox Press, 1991.

Schwarz, Hans. *The Human Being: A Theological Anthropology.* Michigan: Grand Rapids, 2013.

Shults, F. LeRon. *Reforming Theological Anthropology: After the Philosophical Turn to Relationality.* Michigan: William B. Eerdmans Publishing Company, 2003.

Steere, David A. ed. *The Supervision of Pastoral Care*. Eugene: Wipf & Stock Publishers, 2002.

Stein, Robert. *The Method and Message of Jesus' Teaching.* Philadelphia: The Westminster Press, 1978.

-----------. *Mark*. Baker Exegetical Commentary On the New Testament. Michigan: Baker Academic, 2008.

Turner, David. *Matthew*. Baker Exegetical commentary on the New Testament. Michigan: Baker Academic, 2008.

Tannehill, Robert. *Luke*. Abingdon New Testament Commentaries. Nashville: Abingdon Press, 1996.

Yalom, D. Irvin. *The Theory and Practice of Group Psychotherapy*. NY: BasicBook, 1985.

Yount, Rick. *Teaching Ministry of the Church.* Tennessee: B&H Publishing Group, 2008.

Zeigler-Hill, Virgil. Ed. *Self-Esteem*. NY: Psychology Press, 2013

Articles

Anderson, Robert. "The Integration of Clinical Pastoral Education with Seminary Learning: Fostering the Student's Ministry Formation." *Journal of Pastoral Care* 50(1) (1996): 13-22.

Aycock, David and Susan Noaker. "A comparison of the Self-Esteem Level in Evangelical Christian and General Populations." *Journal of Psychology and Theology 13(3)* (1985): 199-208.

Barnard, Laura and John Curry. "The Relationship of Clergy Burnout to Self-Compassion and other Personality Dimensions." *Journal Pastoral Psychology 61* (2012): 149-163.

Benson, Peter. "God Image as a Function of Self-Esteem and Locus of Control." *Journal for the Scientific Study of Religion 12(3)* (1973): 297-310.

Biddle, Mark. "Genesis 3: Sin, Shame and Self-Esteem." *Review and Expositor103(* 2006): 359-370.

Britt. William. "God's Holiness and Humanity's Self-Esteem." *Journal of Psychology and Theology 16-3* (1988): 213-221.

Brown, Kathleen Hope. "Formation and the Education of Ministers." *Theological Education 48(1)* (2013): 10-20.

Chen, Shu-Jiuan, Chia-Hui Chiu, and Chiung-Jung Huang. "Self-Esteem and Depression in a Taiwanese Population: A Meta Analysis." *Journal Social Behavior And Personality 41(4)* (2013): 577-586.

Clough, William. "To Be Loved and To Love." *Journal of Psychology and Theology 34-1* (2006): 23-32.

Csinos, David. "'Come, Follow Me': Apprenticeship in Jesus' Approach to Education." *Religious Education 105(2)* (2010): 45-62.

Derrickson, Paul. "Instruments Used to Measure Change in Students Preparing for Ministry: A Summary of Research on Clinical Pastoral Education Students." *The Journal of Pastoral Care 44(4)* (1990): 343-356.

Doebring, Carrie. "New Directions for Clergy Experiencing Stress: Connecting Spirit and Body." *Journal of Pastoral Psychology* (2013 published online)

Erickson, Richard C. "The Psychology of Self-Esteem: Promise or Peril?" *Pastoral Psychology* 35(3) (1987): 163-171.

Francis, Leslie, Robbins Mandy, Rolph Jenny, Turton Douglas, and Rolph Paul. "The Relationship Between Recalled Self-Esteem as a Child and Current Levels of Professional Burnout among Anglican Clergy in England." *Journal of Pastoral Psychology 59* (2010): 551-561.

Furnham, Adrian and Helen Cheng. "Perceived Parental Behavior, Self-Esteem and Happiness." *Social Psychiatry and Psychiatric Epidemiology 35,* (2000): 463-470.

--------"Perceived Parental Rearing Style, Self-Esteem and Self-Criticism as Predictors of Happiness." *Journal of Happiness Studies* 5 (2004): 1-21.

Garner, Randy. "Interpersonal Criticism and the Clergy." *Journal of Pastoral Care and Counseling 67(1-2)* (2013): 1-14.

Geary, Thomas. "Personal Growth in CPE." *Journal of Pastoral Care 31(1)* (1977): 12-17.

Hilsman, Gordon J. "Beyond Virtue: The Growth of Spiritual Skills during Initial Clinical Pastoral Education." *Reflective Practice: Formation and Supervision in Ministry 32* (2012): 184-201.

Hiltner, Seward. "Fifty Years of CPE." *Wege zum Menchen* (July 1975): 90-98.

Hunter, Rodney J. "The Changing Faces of Theological Education: Implications for Clinical Pastoral Education." *Reflective Practice: Formation and Supervision in Ministry 29* (2009): 188-204.

Jankowski, Katherine, Lauren C. Vanderwerker, Kathryn M. Murphy, and Martin Montonye. "Change in Pastoral Skills, Emotional Intelligence, Self-reflection, and Social Desirability Across a Unit of CPE." *Journal of Health Care Chaplaincy 15* (2008): 132-148.

Johnson, Eric. "Self-Esteem in the Presence of God.' *Journal of Psychology and Theology 17(3)* (1989): 226-235.

Jones, Logan. "I Walked Through Life Oddly: Dispositions, Character, and Identity in Clinical Pastoral supervision." *Reflective Practice: Formation and Supervision in Ministry 132* (2012): 159-170.

Jones, Susan and Leslie Francis. "The Pastoral Care of the Anglican Clergy Today: A Matter of Low self-Esteem?" *Journal of Empirical Theology16(1)* (2003): 20-30.

Kinman,Gail, Obrene McFall, and Joanna Rodriguez. "The Cost of Caring? Emotional Labor, Wellbeing and the Clergy." *Journal of Pastoral Psychology 60* (2011): 671-680.

Leung, Ka-lun. "從奮興運動到神秘主義—賓路易師母的屬靈神學思想 (From Welsh Revival to Mysticism: the Spiritual and Theological Thinking of Mrs. Jessie Penn-Lewis)." 教牧期刊(Pastoral Journal) 7 (1999): 117-164.

Little, Keith. "Clinical Pastoral Education as Professional Training: Some Entrance, Curriculum and Assessment Implications." *Journal of Pastoral Care and Counseling 64(3)* (2010): 1-8.

Livingston, Barbara, K.M. Myers, M. Jordan, B. S. Jelinek, and A. Plumley. "Pastoral Formation Process for Seminarians: A New Model for Developing Psychologically Healthy Pastors." *Journal of Pastoral Care and Counseling 63(3-4)* (2009): 1-7.

McDevitt, Patrick. "Ministerial Burnout: Motivation and Renewal for Mission." *Journal of Pastoral Care 64(4)* (2010): 1-8.

Mcknight, Scot. "Jesus and the Twelve." *Bulletin for Biblical Research 11(2)* (2001): 203-231.

Meier, John. "The Circle of The Twelve: Did It Exist During Jesus' Public Ministry?" *Journal of Biblical Literature 116(4)* (1997): 635-672.

Miller-McLemore, Bonnie. "Revisiting the Living Human Web: Theological Education and the Role of Clinical Pastoral Education." *Journal of Pastoral Care & Counseling 62-1* (2008): 3-18.

Morin, Marie-Line. "Respecting the Dual Sided Identity of Clinical Pastoral Education and Professional Chaplaincy: The Phenomenological Research Model." *Journal of Health Care Chaplaincy 13(1)* (2002): 171-183.

Neal, Krause. "Church-Based Social Relationships and Change in Self-Esteem Over Time." *Journal for the Scientific Study of Religion 48(4)* (2009): 756-773.

Orth, Ulrich, Robins Richard, and Roberts Brent. "Low Self-Esteem Prospectively Predicts Depression in Adolescence and Young Adulthood." *Journal of Personality and Social Psychology 95(3)* (2008): 695-708.

Orth, Ulrich, Richard W. Robins, and Keith F. Widaman. "Life-Span Development and Self-Esteem and Its Effect on Important Life Outcomes." *Journal of Personality and Social Psychology 102(6)* (2012): 1271-1288.

Park, Samuel. "Pastoral Identity Constructed in Care-Giving Relationships." *The Journal of Pastoral Care & Counseling* 66(2) (2012): 1-13.

Pooler, David. "Pastors and Congregations at Risk: Insights from Role Identity Theory." *Journal Pastoral Psychology 50* (2011): 705-712.

Pyszczynski, Tom , Jeff Greenberg, Sheldon Solomon, and Jamie Arndt. "Why Do
People Need Self-Esteem?   A Theoretical and Empirical Review."
Psychological Bulletin (2004): 435-468.

Ryeng, S Marianne, Kroger, Jane and Martinussen, Monica. "Identity Status and
Self-Esteem: A Meta-Analysis." *An International Journal of Theory and
Research* 13 (2013): 201-213.

Saussy, Carroll. "Faith and Self-Esteem." *Journal of Pastoral care* 17(2) (1988):
125-137.

Silverstone, Peter and Salsali Mahnaz.   "Low self-esteem and Psychiatric Patients:
Part I – The relationship between low self-esteem and psychiatric diagnosis."
BioMed Central (2003): 1-9.

Staley, Ryan, Mark McMinn, Kathleen Gathercoal, and Kurt Free. "Strategies
Employed by Clergy to Prevent and Cope with Interpersonal Isolation."
Journal Pastoral Psychology 62 (2013): 843-857.

Steiger, Andrea, Allemand Mathias, and Robins Richard. "Low and Decreasing
Self-Esteem During Adolescence Predict Adult Depression Two Decades
Latter." *Journal of Personality and Social Psychology 106(2)* (2014): 325-338.

Sullender, Scott. "Fear as a Dynamic in Supervision." *Reflective Practice: Formation
and Supervision in Ministry 128* (2008): 122-133.

Thomas, John, Leonard Stein, and Marjorie Klein. "A Comparative Evaluation of
Changes in Basic Clinical Pastoral Education Students in Different Types of
Clinical Settings as Measured by the Adjective Check List and The
Experience Scale." *Journal of Pastoral Care 36(3)* (1982): 181-193.

Trites, Allison. "The Resilient Christ: A Study in Mark's Gospel." *An Academic
Legacy*. Fredericton: University of New Brunswick, 1997.

VandeCreek, Larry. "Affective and Cognitive Changes in First-Unit Clinical Pastoral
Education Students." *The Journal of Pastoral Care*, 45(4) (1991): 275-388.

Victoria, Anastasia, L.H.Ho, and Tick Sim. "The Development and Validation of a
god-Centered Self-esteem Scale." *Journal of Psychology and Theology* 41(1)
(2013): 36-47.

Weaver, Andrew J. "Chaplaincy Research: Its Value, Its Quality, and Its Future." *Journal of Health Care Chaplaincy* 14(10) (2008): 3-19.

Wells, Carl. "The Relationship Between Work-Related Stress and Boundary-Related Stress Within the Clerical Profession." *Journal of Religion and Health 51(1)* (2012): 215-230.

----------"The Effects of Work-Related and Boundary-Related Stress on the Emotional and Physically Health Status of Ordained Clergy." *Journal of Pastoral Psychology 62* (2013): 101-114.

Wilder, Glenn. "The Search for Self-Esteem." *Journal of Psychology and Theology 63(3)* (1979): 183-188.

Zeigler-Hill, Virgil, Brendan Clark, and Tamra Beckman. "Fragile Self-esteem and the Interpersonal Circumplex: Are Feelings of Self-worth Associated with Interpersonal Style." *Journal of Self and Identity 10* (2011): 509-536.

Zeigler-Hill, Virgil. "The Connection between Self-Esteem and Psychopathology." *Journal of Contemporary Psychotherapy 41* (2011):157-164.

Dictionaries and Encyclopedia

Gecas Viktor & Longmore Monica. "Self-Esteem." in International Encyclopedia of Marriage and Family, 2nd ed. Ed Ponzetti James. NY: Macmillian Reference, 2003, 1419-1424.

Kille D.R. & Wood J.V. "Self-Esteem." in *Encyclopedia of Human Behavior*, 2nd ed, ed. Ramachandran V.S. Ca: Academic Press, 2012, 321-327.

Kaplan Howard. "Self-Esteem." in *Encyclopedia of the Life Course and Human Development*, ed Deborah Carr. NY: Macmillian Reference, 2009, 424-429.

Ridley C.R. "Self-Esteem." in *Dictionary of Pastoral Care & Counseling*. ed. Hunter Rodney J.   Nashville: Abingdon, 2005, 1131-1132.

Thornton E.E. "Clinical Pastoral Education," in *Dictionary of Pastoral Care & Counseling*. ed. Hunter Rodney J.   Nashville: Abingdon, 2005, 177-182.

Thornton E. Edward. "Pastoral Identity" in *Dictionary of Pastoral Care & Counseling*. ed. Hunter Rodney J.   Nashville: Abingdon, 2005, 567-568.

Saussy Carroll. "Pastoral Care and Counseling and Issues of Self-Esteem." in *Clinical Handbook of Pastoral Counselling*, Vol. 2. NY: Paulist Press, 1993, 363-389.

Wilkins, M.J. "Disciples," in *Dictionary of Jesus and the Gospel*, ed. Joel B. Green, Scot McKnight, Howard Marshall. Illinois: InterVarsity Press, 1992.

Wilkins, M.J. "Discipleship," in *Dictionary of Jesus and the Gospel*, ed. Joel B. Green, Scot McKnight, Howard Marshall. Illinois: InterVarsity Press, 1992.

Websites

ACPE   http://acpe.edu/

AHKHCCM   http://www.hospitalchap.org.hk/2k12

Wikipedia, the free encyclopedia   http://en.wikipedia.org/wiki/Hong_Kong

South China Morning Post
http://www.scmp.com/news/hong-kong/article/1529167/full-text-practice-one-country
-two-systems-policy-hong-kong-special   "Full text: Chinese State Council white
paper on 'One Country, Two Systems' policy in Hong Kong"

AHKHCCM
http://www.hospitalchap.org.hk/2k12/index.php/about-miistry/development