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Clergy Families: The Helpless Forgottens’ Cry for Help Answered Through Reality Therapy

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Abstract

Several studies have been completed on clergy families. Results of these studies suggest that clergy families experience many stressors, such as lack of a social support network, lack of self-worth, intrusiveness, time demands, and mobility. However, there is little evidence that anything has been done to help address this problem. This article proposes the use of an original Triangular Reality Therapy counseling model to meet the needs for counseling services in clergy families.

The unique issues that clergy spouses and families face are under-researched. In addition, there is a lack of assistance available to these families. The author found research in this area limited and typically focused on stressors faced by clergy and ministers’ work environments. Clergy spouses and children have little research devoted to them. Not only are clergy and their families under-researched, but while pastors work to meet the community’s needs, the needs of their families may go unaddressed (Hileman, 2008).

A chain of incidents describes what clergy spouses and families experience: high and unrealistic expectations and stressors, followed by effects of those stressors. As the research addresses, the families of pastors can be extremely strained, and this tension can have implications on their physical, emotional, mental, social, and spiritual health. Though there are extensive findings on such implications within the research, a survey of the literature reveals a need for counseling interventions to address these implications (Roberts, Getz, & Skaggs, 2007). Therefore, the purpose of this article is to introduce an innovative, novel counseling model—Triangular Reality Therapy—to meet the needs for counseling services in clergy families. The author will make recommendations for further
research and will develop an intervention program based on the needs determined from the research.

**History of the Problem**

Historically, studies done on the topic of lives of clergy spouses and families date back to 1965 when William Douglas wrote the book *Ministers’ Wives* which studied pastor’s wives, and the subject has only been studied minimally since then. But the studies that have been done have provided some crucial themes: stressors clergy families face and their effects, gender differences, the need for counseling, ways to cope, and the newer phenomenon of clergy husbands.

**Stressors and Their Effects**

In “What Pastors’ Wives Wish Their Churches Knew,” written by the wife of a pastor, Zoba (1997) discussed her roles which ranged from answering the telephone and dealing with the calls, being the listener and transmitter of deeply personal messages, to other things like being a supportive wife. She also mentioned many issues that she faced as a minister’s wife, including maintaining emotional wholeness and equilibrium when dealing with church, friends, husband, and self and having nowhere to go for help. One key issue she mentioned was being expected to be amiable and wise while she may be feeling hopeless, frustrated, and spiritually lost. The three needs Zoba felt were crucial included: friendship and community to deal with the intense loneliness, a sense of self-worth since she was only being noticed and appreciated as the pastor’s wife, and setting clear and healthy expectations as the congregation expected her to be a certain way without explicitly telling her. She took her needs further by addressing the three things needed for health and wholeness of the ministry wife; clear and healthy attitudes within the congregation, trusted friendships often outside of the church, and a great relationship with the husband (Zoba, 1997).

“Understanding Stress and Quality of Life for Clergy and Clergy Spouses” discussed a survey research design that was utilized involving a random sample of clergy to better understand the stress and quality of life of clergy and clergy spouses (Darling, Hill, & McWey, 2004). The authors used the Family Stress Theory and the ABC-X model in the investigation. It was found that increased spirituality was equal to increased quality of life; close and satisfying relationships increased the quality of life; spiritual resources directly affected quality of life; and spouses that had a lower level of family stress and physiological stress had a higher quality of life. The many expectations of clergy and their families displayed in the article produced a lengthy list of related effects, and these effects decreased their quality of life. Additional effects were demoralization, discouragement, and intrafamily strains, such as increased time away from home by a family member, increased disagreement about a member’s activities, increased number of problems or issues that did not get resolved or chores/tasks that did not get done, and a member appeared to have emotional problems (Darling et al., 2004). The article also addressed eight recommendations for supporting clergy and what is needed to help the spouses of clergy. Some of the suggestions were enhancing spiritual resources for clergy families, increased and ongoing support networks, ongoing educational and enrichment programs addressing the issues faced by clergy and their families, and encouragement by
denominational leaders and supervisors, as well as the congregation, to take time away from work to spend with family and to avoid burnout (Darling et al., 2004).

Relocation is a major issue faced by clergy and their families. Frame (1998) compared the well-being of relocated, male, Florida Annual Conference United Methodist clergy and clergy spouses to non-relocated, male, United Methodist clergy and clergy spouses. The study also sought to determine the relationships between perceptions of relocation, stress level, coping resources, and well-being in clergy and their spouses. According to the United Methodist Church, “In any given year, approximately 25% of the nearly 39,000 United Methodist clergy and their families relocate,” and they are expected “to relocate on the average of every four years” (Frame, 1998, p. 416). The findings of the study revealed that the spouses had a lower well-being than the clergy because the clergy had a built-in support system and spouses did not. The effects on the spouses include depression, sadness, loneliness, and alienation from the community (Frame, 1998). Lastly, the article addressed what pastoral counselors should be sensitive to when working with relocating clergy. These seven issues were assistance in dealing with grief and loss, which was the most pressing need; loss of power and control when clergy families must live in prescribed communities and homes; pain of severed relationships, especially for spouses and children; loss of spouses’ employment; the tendency to blame the clergy person or God for the move; the profound loneliness in a new church and community; and “the need to be perfect,” stigmatizing clergy families’ willingness to seek counseling (Frame, 1998).

Another study is summarized in “Work-Related Predictors of Physical Symptomatology and Emotional Well-Being Among Clergy Spouses” (Blanton & Morris, 1999). The study showed that some clergy and their families are not effectively dealing with the demands of the clergy’s job. “The purpose of the study was to examine the influence of work-related stressors and selected economic/demographic predictor variables on physical symptomatology and emotional well-being of clergy and their spouses” (Blanton & Morris, 1999, p. 331). The study revealed several stressors on the family: “greedy” role demands; managing conflicting self and congregational expectations of the role; economic stress; community and emotional boundary difficulties with congregation; lack of social support from friends and sponsoring denominations; difficulty in maintaining marital, parental, and life satisfaction within the parsonage context; and stress resulting from managing work and family demands (Blanton & Morris, 1999). From these stressors, a few effects arose, which included unhappy clergy marriages due to poor communication, sexual difficulties, and difficulty in handling negative emotions, depression, anger, and burnout (Blanton & Morris, 1999). Overall, clergy and their families go through a great deal of stress due to the high expectations put forth on them by the congregation, community, and denominational leaders.

**Gender Differences**

In “Patterns of Stress and Support Among Adventist Clergy: Do Pastors and Their Spouses Differ?” Lee (2007) examined “patterns of stress in clergy families, using both pastors and their spouses as respondents, with effects differentiated both within couples and across genders” (p. 761). This study also used the Family Stress Theory and ABC-X model “to examine differences between spouses in how demand, support, and perception relate to personal and ministry outcomes” (Lee, 2007, p. 761). The results of the study
were then sorted by pastors and their wives. The pastors’ statistics showed higher levels of demand; higher levels of support; that higher levels of support increased their well-being; and that they had more presumptive expectations leading to a lower well-being because of the higher workload stress level. The spouses’ results demonstrated that they had a lower demand; had lower support from people outside of family; that higher levels of support increased their well-being; and that they had lower presumptive expectations due to the lack of stress related to workload (Lee, 2007).

“Predictors of Family Functioning Among Clergy and Spouses: Influences of Social Context and Perceptions of Work-Related Stressors” explained a study in which the authors “examined the relative influence of contextual variables and perceptions of occupationally-related stresses on clergy and their wives” (Morris & Blanton, 1998, pp. 30-31). The sample included 136 randomly selected couples from six denominations in which husbands were clergy, although the authors contended that future research should extend to the sampling of female clergy. The findings showed that “both husbands and wives reported that intrusiveness, lack of social support, mobility, and time demands/expectations stressors impacted their competence in family functioning, with wives being more affected by these stressors across several family functioning dimensions” (Morris & Blanton, 1998, pp. 37-38). Husbands were more strained by limited financial compensation. The findings showed that because of several stressors, clergy families felt taken advantage of, had greater difficulty in forming relationships, felt the need to work multiple jobs, and so on.

Need for Counseling

A focus on counseling becomes more evident as the research becomes more recent. For instance, the article “The Unique Needs of Protestant Clergy Families: Implications for Marriage and Family Counseling” (Hileman, 2008) was written by a counselor whose father and husband were both pastors. It was an extremely informative article that used research, experiences of others, and her personal experiences to illustrate life in a ministry family and provide some understanding of the counseling needs for this special population. Hileman (2008) addressed three major issues faced by the clergy family: life in the “fishbowl,” termination and relocation, and sources of dissonance. These issues then rendered numerous effects on the various types of health of ministry families. Hileman (2008) demonstrated the contrasts of life in the ministry as follows:

There can be great joy, a sense of fulfillment and purpose, and also loneliness, frustration, and pain. There is a sense of belonging, not only to God, but to a large body of believers, but at the same time, clergy family members are often treated as if they are different; children may be left out of peer activities, and spouses may feel unable to share feelings with those outside the family. There is a sense of connectedness with others who have served God throughout history, and yet, clergy families tend not to make personal connections with others in ministry. A new pastor may be happy preaching the Good News and visiting the sick but finds her or himself bogged down in administrative duties. (p. 120)

The conclusion of the article indicated implications for counseling, including barriers to counseling and possible interventions. The barriers were reluctance of clergy families to go to counseling due to an already strained budget and because of peers, congregants, and
denominational officials looking down upon seeking counseling. However, counselors can help break down the barriers by offering psychoeducational programs in local churches and denominational meetings and by establishing trust through listening to their individual experiences and validating their emotions (Hileman, 2008). Other ways Hileman suggested counselors can assist were to entrust the clergy and clergy spouse to work past the negativity and help them find ways to make their family’s emotional health a priority, establish a positive rapport and a firm trust with the family before attempting to help them see the positive in their world, assist the clergy couple in the development of intimate communication, work on time-management, and encourage clergy families to take part in spiritual renewal outside the church and help them set this as a priority.

**Ways to Cope**

“Positive Coping Among Wives of Male Christian Clergy” showed a study used to describe wives of male clergy who exemplified emotional and spiritual health and what they did that helped them remain healthy (McMinn, Kerrick, Duma, Campbell, & Jung, 2008). The participants were 25 wives of clergy, and each was interviewed over the telephone. First, the article demonstrated three coping methods used by clergy and clergy spouses. These included intrapersonal coping, which “was defined as solitary, individual methods such as spiritual meditation, reading, time away from work, and individual exercise programs;” family coping that “involved interpersonal support from other family members, most often a spouse;” and community coping, which “involved social support from outside the family, such as friendship, counseling, support groups, and so on” (McMinn et al., 2008, p. 446). Three categories of stress were used in the study as well, and they were normal stress, which is stress that affects almost everyone; being married-to-a-pastor stress, defined as stress unique to the role as a pastor’s wife; and catastrophic stress that occurs a few times in life, such as from a job loss, marital crisis, death, etc. (McMinn et al., 2008). When researchers examined the results of the study, participants recognized two ways that they maintained emotional and spiritual health: God’s benevolence and relationships (McMinn et al., 2008). The outcome of the study identified several ways in which the clergy spouses and families coped. These included intrapersonal support; spiritual practices, such as prayer, meditation, and relying on the Bible; setting limits; reading; health promotion; intentionality, like maintaining a balanced family life, being flexible about daily scheduling, shielding children from unrealistic expectations associated with being the child of a minister, etc.; and various other coping strategies. Finally, when asked how they still grew as individuals while dealing with stress, the respondents emphasized closeness to God and personal challenge as being the two motivators (McKinn et al., 2008).

**Clergy Husbands**

One of the more recent articles, “The Pastor’s Husband,” was written by a female pastor and addressed a new phenomenon of the “clergy husband” (Daniel, 2009). The significant point made by the article was that a pastor’s husband was such a new concept that clergy husbands were not expected to do as much as clergy wives. The pastor’s husband even got exalted for things that the pastor’s wife had been doing for years. The article addressed the common battles spouses of clergy have to go through. Some of these struggles related to the male spouse included that since the marriages are so public, the
husbands felt second to the call of ministry, and they felt that they could not always be themselves. However, most of the role expectations of female spouses were not expected of the male. To compare the clergy wife to the clergy husband, the minister’s wife was expected to play the organ, teach Sunday school, and be another staff person at church; ministries and churches would go under without her. Role expectations were there and powerful, and when she did not do the tasks asked of her, the church became very disappointed. The pastor’s husband, though, had no role expectations because of the newness; the roles were powerless and nothing was expected; thus, when he did something extra, he got praised for it; and he had a full-time job as well (Daniel, 2009). The article provided an entirely new outlook on clergy spouses, gender roles within this context, and a novel aspect of an innovative intervention program.

Finally, the article, “The Priest’s Husband” focused on a study and on the experiences of Katharine Schori and her husband Richard (Platt & Moss, 2010). The article displayed a study in which a random sample of 100 subjects in the Diocese of Chicago was selected. The purpose of the study was to aid male spouses in reflecting upon their own answers to the study questions and, in raising such awareness, help them see they are not alone in this new phenomenon (Platt & Moss, 2010). The findings of the study showed that there were expectations and limitations of priest’s husbands, and these included loss of voice and ability to participate in decision making; expectations that follow whatever activities the spouse is involved in; greater share of parenting; trying to balance parenting and a full-time job; financial tension, which was more of a tension to the husbands than the wives; time in a family sense due to the congregation interrupting personal plans again and again; and other men in different cultures possibly looking down upon the husbands because his spouse was the “leader” (Platt & Moss, 2010). Although the priests’ husbands exemplified some struggles, they also took pride in their wives’ achievements and position in the church (Platt & Moss, 2010).

When historically comparing male versus female spouses of clergy, one similarity and many differences arose. For example, “41% [of male clergy spouses] said that parish life causes the most tension with their personal activities while only 28% of their female counterparts cited issues with personal activities;” “tension with the children was about equal with both sexes of clergy spouse;” “in 1976, 36.8% of clergy wives experienced more tension with their priest husbands than did 16% of the men with their priest wives;” and several men said that they could go to spouses for problem solving and also to close friends for help, but the wives said they felt like they could not go to the husband or friends for support and help (Platt & Moss, 2010, p. 239). The study also addressed the husband’s involvement in his wife’s ministry. In the article, Denton defined three different types of involvement: a team worker, who was highly active; a background supporter, who took on the role of a spouse or a parent; and an aloof participant, who was married to the person but not the priest and was almost never evident in the congregation (as cited in Platt & Moss, 2010). The results of the study stated that less than 10% wanted to be team workers, 46% attended nothing regularly, 73% were background supporters that were involved in a loosely structured way, and 16% were aloof participants (Platt & Moss, 2010). The conclusion of the article addressed that the men will eventually deal with similar stressors that the women faced, and hopefully there will be more clarity about the role of clergy families. Also, selectivity of priests and self-awareness of husbands needed to be addressed as soon as possible (Platt & Moss, 2010).
What Has Been Done to Help

There is a modest amount of research done on clergy families, but even less yet on what has actually been done to help with the problems they face. Of the research found, only one article illustrated a study that showed potential in helping non-clergy women married to clergy men to move towards alleviation of ministry-related stress. As a result of the need, Polly Roberts created a psychoeducational group called Clergy Wife Wings (CWW) to alleviate ministry-related stress in laywomen married to Protestant clergy (Roberts et al., 2007). CWW involved many different theoretical concepts: the multimodal-transactional model, BASIC ID modalities of multimodal therapy, rational-emotive behavioral therapy (REBT), and family systems therapy. The CWW decided to proceed with group counseling over individual counseling because pastors’ wives could benefit from the shared experiences and viewpoints of other pastors’ wives, and it would also aid with the stressor of having no social support or friendships. The reason the CWW chose to use a psychoeducational group was because it would introduce basic knowledge and helpful techniques related to a specific problem to the clergy wives.

The outcome goals of the CWW were to reduce stress related to clergy wife role expectations and time demands, clergy family boundary intrusiveness, and a lack of social support (Roberts et al., 2007). They chose a formative evaluation approach to evaluate the first and subsequent implementations of the intervention program. The group was made up of nine clergy wives, a group leader, and a group observer. The nine clergy wives, shortened from an original pool of 60, were chosen based on the information completed on the application forms. After qualitative analysis of the pre- and post-group tests, the group members felt that the intervention was effective, had increased confidence in coping, had created changes in thinking and behavior, and had led to slight reduction in informal stress levels reported before and after the intervention (Roberts et al., 2007).

There were a few strength themes and several weakness themes found with the intervention program as well. The strength themes included the nature of the group, the topics, and the specific techniques, activities, and other components used in CWW (Roberts et al., 2007). The weakness themes consisted of the stress song activity, the first two sessions had too much content, too much negativity in some discussions, some awkwardness and differences of opinion about the psychoeducational format, homework assignments, and the intervention’s implied emphasis on quick reduction of stress (Roberts et al., 2007). Finally, the article noted several suggestions of how future counselors should change the program to better meet the needs of clergy spouses. Though there were some critiques by the group members, the findings revealed that the CWW group plan has good potential as an intervention with clergy wives for stress-management but needs some revisions along with consistent implementation and evaluation (Roberts et al., 2007).

Overall, the CWW’s intervention program was helpful to clergy spouses. However, the sample was small, and the members had a few critiques of the program. Additionally, there has not been any adapted study of the psychoeducational group, which is a concern since the original study was completed in 2006. To conclude with what has been done on the topic of helping clergy families, other articles made suggestions of ways to help, but nothing was ever published about the suggestions being
implemented. Therefore, it is imperative to look at what has been done and create a list of things that can be tried.

**What Needs to Be Tried**

In the research, there were countless recommendations as to what should be done in the future regarding stress among clergy members and their families. After examining the suggestions made by the researchers, several themes arose. These themes included group counseling, encouragement and support, marriage enrichment, avoiding burnout, increasing coping skills, and a need for further research.

When looking at the issues ministry families face, the literature revealed that group counseling seems to be a great way to help. It can provide a place to relate to other clergy families as well as help with coping strategies. Additionally, group counseling can help with the reluctance ministry families have concerning counseling because it is a group effort, and there will be plenty of support. It would also assist with the need for a social network because it will provide people to talk to in a safe environment. Through the groups, the clergy families can express their issues and see what is working with other ministry families. Additionally, group counseling can provide an outlet to increase awareness for clergy husbands. Overall, group counseling appears to be the best avenue for helping a large number of clergy family concerns.

Second, in terms of encouragement and support, in addition to group counseling, research suggests that denominational, supervisorial, social, and familial support is needed for families of clergy. Darling et al. (2004) suggested that denominational leaders and supervisors, as well as clergy congregations, should encourage their clergy and their families to take time away from work. Taking vacations and attending retreats is crucial for clergy families to stay rejuvenated. Also, if the people in every facet of the church community support its leader and his or her family, the quality of life and of the ministry would be far greater than it is now.

Marriage enrichment is extremely important to the clergy and their spouses because their divorce rate is increasing. According to the Religious Research Association, “Divorce is a concern among clergy, with 24% of female and 19% of male clergy having been divorced” (as cited in Hileman, 2008, pp. 120-121). There is a call, in particular, by the clergy wives for marriage counseling because the men sometimes do not see all the issues their wives face. However, it is necessary to create marriage workshops and/or enrichment programs in order to rebuild the clergy marriage. The implications of this can go beyond the family and into the church as well.

Avoiding burnout and increasing coping skills are two more themes that emerged from the research. If an intervention plan can be created that utilizes the coping methods addressed in the article “Positive Coping Among Wives of Male Christian Clergy” (McMinn et al., 2008) and adds the constructive dimensions of the CWW, the chance of burnout can be decreased as well as coping methods exchanged, taught, and implemented.

Finally, there is a clear and immediate need for current, thorough research in this area. Much of the existing research has been conducted using relatively small samples which do not accurately represent the clergy population. Because of this, many of these studies may be culturally biased. For example, a study done by Echols of 1,101 clergy
members included only 4 Asian, 30 Black, and 23 Hispanic participants (as cited in Frame, 1998). Only 5% of the participants in this study were non-White. Women clergy members have also been overlooked in this research. Nearly all of the research done has been based entirely on samples of White male clergy. Future research needs to include more representative samples and broader methods of research (Morris & Blanton, 1998). Once research has been done which includes a greater diversity of gender, race, denomination, geographic region, socioeconomic environment, etc., there will be more accurate information as to just how badly counseling services are needed. This research will provide a greater understanding of the needs of clergy families, thus improving the well-being of these families as well as those that they serve.

Summary

There is a clear and present need for counseling interventions for clergy families. Research has shown that long hours, lack of pay and benefits, lack of privacy, unclear boundaries between work and family life, and stress from relocation place a tremendous amount of stress on clergy and their families. It has also shown that there is often a serious deficiency in counseling services available to them, and when such services are available, they are not utilized. It is the recommendation of the author that, in addition to the research indicated above, regular follow-up research should be done to assure that the needs of clergy families are continuously met. In addition to follow-up research, the author feels that members of the clergy and their families are under an extreme amount of stress which is unlike that of any other profession. Congregation members often misunderstand the needs of the clergy and are unsympathetic to their needs. Therefore, a new approach to counseling clergy and their families should be developed which will allow convenient, affordable, and effective support services to them, regardless of the setting. Improved counseling services for clergy and their families will answer the cry for help of the ministry family and improve their well-being, as well as that of their congregation.

Introduction to Triangular Reality Therapy

In response to the needs of clergy families, as revealed by the previous literature review, the author combines reality therapy with a metaphor of a triangle, creating Triangular Reality Therapy, which addresses three ways to help clergy families cope with their everyday stressors and improve their quality of life: educating the congregation, group counseling, and individual counseling. The title also originates from the triangular relationships relating to this population: the congregation, clergy, and the clergy’s family. When one person or group in the triangle is not happy, no one in the triangle is happy; thus, it is imperative to work on the relationships within the triangle.

Theory

The theory that will be utilized in the group counseling is William Glasser’s Choice Theory. The researcher chose this theory because two of reality therapy’s basic philosophies are (1) that we need quality relationships to be happy, and (2) the problem is the way clients are choosing to behave. All of the issues that clergy families face are
linked to relationships or behaviors; therefore, helping the clients evaluate their current relationships, or the lack thereof, and their current behaviors will ultimately assist them in planning to make the necessary changes to maximize their quality of life (Corey, 2009, p. 316).

**Congregation**

First, the clergy could elect guest speakers to hold a service for the congregations in which they will inform the attendees about the current roles of a pastor and his or her family, the stressors they may go through, and what the parishioners’ roles should be in the church. The hopeful results would be new congregational awareness of what to expect from clergy and the family, additional empathy in the attendees, and knowledge regarding how church members can help.

**Group**

Subsequently, the researcher will implement psychoeducational and growth group counseling with the sample population. The researcher chose a psychoeducational group because it educates the clients about their issues, as well as ways to cope with them. Additionally, she chose growth group counseling for the clergy and their families to create an environment of encouragement and support as well as to provide a safe place to talk with others that have the same issues, which in turn will help with the lack of their social network.

**Implementation**

The counseling program will last 10 weeks. During the first session, the clergy families will get to know each other and the process of group. Then, in week two, reality therapy will be implemented through teaching the clergy families the concepts of quality world, total behavior, and the five genetically encoded needs of survival, love and belonging, power or achievement, freedom or independence, and fun. After the clients are familiar with the key concepts of reality therapy, the researcher will further aid the clients by employing Dr. Robert Wubbolding’s WDEP model in weeks three through six. The acronym WDEP is used to describe a cluster of strategies in the practice of reality therapy that are designed to promote change: W = wants and needs; D = direction and doing; E = self-evaluation; and P = planning (Corey, 2009, p. 325). In week three, wants, needs, and perceptions will be explored. The counselors will help the clients define what they want from the counseling process and from the world around them. Next, in week four, the “D” portion of the model will be explored, where the researcher will discuss where the clients are going and where their behavior is taking them. Then, in week five, the clients will be asked to evaluate their current behaviors and whether these behaviors are getting them what they want. Finally, during week six, through the planning and action stage of the model, clients will identify specific ways to fulfill their wants and needs and come up with an action plan. During the WDEP model, the therapist will connect the five genetically encoded needs to the clergy family’s issues: lack of social support/network, lack of self-worth, intrusiveness, time demands, and mobility. The lack of social support directly connects to the need of love and belonging and fun; the lack of self-worth deals with the need of power or achievement; intrusiveness, time demands, and mobility relate to the freedom or independence need. Once the clients are aware that their needs are not
being met because of the issues they are facing and how they are responding to those issues, they will be able to better evaluate their behaviors and create a plan of action to increase their quality of life (Corey, 2009, p. 325-327).

Lastly, in the final sessions of the group counseling, the researcher will model, implement, and evaluate coping strategies in the therapy sessions that the families will put into practice at home. She will also take the families on required field trips to meet the need of fun and to rejuvenate the clients’ marriages, families, and lives. Overall, the therapeutic goals are to help clients get connected or reconnected with the people they have chosen to put in their quality world and learn better ways of fulfilling their needs.

**Individual**

After the group is concluded, any individual needing further counseling can continue to see the therapist. The therapist will employ a more vigorous, direct reality therapy approach.

**Conclusion**

This counseling model will potentially help meet the needs of clergy families, specifically to increase their quality of life. Based on the research, only one other counseling program was tried, and though it was helpful, the participants found some weaknesses. It is the researcher’s hope to add to the existing literature on programs to help this population, which is limited. Optimistically, in the future there will be a counseling program that clergy families love and can benefit from. Perhaps this proposed model will be the answer to their cry for help, or at the least, a step towards an answer.

**References**


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