# Emerging Leadership Roles: Personal Transformation Experience to Ministry Project

Dr. Hilary E. Livingston Presbyterian Church (USA)

#### Abstract

This paper asserts that key leadership roles of ministry architect, mentor, and vulnerable role model emerged during the creation, implementation, and continuing development of a pilot project, *Take Care of the Temple*—a spiritual formation-based wellness program for participants in Suburban Pittsburgh, Pennsylvania. As ministry architect, I translated a personal wellness experience into a tangible project. As a mentor, I was a fellow companion, rather than an expert to participants. As a vulnerable role model, I am learning to come to terms with personal setbacks and embrace the strength of my own vulnerabilities while leading others with humility and self-compassion.

#### Introduction

Many leaders inspire change in others as a result of their own personal struggles to overcome obstacles and experience transformative change in a particular area of life. How does a leader take a personally transformative experience and translate it into a tangible process to help others make necessary changes that lead to positive growth? What roles emerge as leaders make such a transition? As an ordained Presbyterian minister, I work with local congregations to foster spiritual growth in members through preaching, teaching, pastoral care, and other activities. I had never been particularly interested in physical fitness or making personal wellness a priority in my own life. This changed during a particular season of life when I experienced an improved level of health and fitness due to significant weight loss. As a result of witnessing my wellness transformation, many came to me seeking guidance on how they could experience similar results in their lives. This led me to become a certified personal trainer and health coach to better understand how factors such as diet, exercise, and behavior modification techniques could be utilized to help people lose weight and make other healthy lifestyle changes. While a greater understanding and application of these factors was helpful, I sensed that there was still something missing in the overall picture of human wellness.

In reflecting upon my own weight loss journey, I realized that there was a strong spiritual component to the underlying causes of my struggle with food and weight. My chronic overeating and obsession with food were not merely physical problems, but spiritual ones as well. I was convinced that a more holistic approach is necessary to help people experience better health in the long term—an approach that integrated spiritual as well as physical components. With this new awareness, I wanted to take my own personally transformative experience of weight loss and spiritual growth and develop it into a wellness program that would integrate the physical with the spiritual to bring about wellness of the whole person—body, mind, and spirit, enabling participants to experience weight loss, improved health, and spiritual growth.

This paper asserts that key leadership roles of ministry architect, mentor, and vulnerable role model emerged during the creation, implementation, and continuing development of a pilot ministry project called, *Take Care of the Temple*—a spiritual formation-based weight loss program for participants in Suburban Pittsburgh, PA. This ministry project sought to empower participants to integrate healthy living habits with spiritual practices to produce healthy lifestyle changes, weight loss and spiritual growth. The pilot project was administered through the Westminster Recreation and Outreach Center [WROC], a faith-based organization offering wellness programming to residents in the South Hills area of Pittsburgh, Pennsylvania. This organization operates under the auspices of Westminster Presbyterian Church, a mainline Protestant church, which houses the facility on their campus. Thirteen local residents participated in this forty-day pilot ministry. There were three main components of the pilot program—an opening retreat, six weekly small group meetings, and a

closing retreat. The pilot of *Take Care of the Temple* launched on September 24, 2011. The pilot ran for six weeks, concluding on November 5, 2011. Participants in this project reported outcomes of weight loss, improved health, and spiritual growth.

As ministry architect, I combined creativity and visioning with planning and organizational skills to produce a tangible ministry structure. As a mentor, I came alongside participants as a fellow companion, rather than an expert. I fostered an environment of safety, trust, and togetherness which affirmed participants' self-worth and increased their self-efficacy in making positive behavioral changes. As a vulnerable role model, I struggled to maintain my own personal wellness practices while leading others toward greater health and wholeness. Following the work with this pilot project, I am learning to come to terms with personal setbacks and embrace the strength of my own vulnerabilities while leading others with humility and self-compassion.

## Translating a Personal Journey into a Ministry Blueprint: The Leader as Architect

Like an architect taking an abstract vision and putting it into a practical, concrete design plan for a building, I assumed the role of ministry architect, taking the insights gleaned from my own personal wellness journey and developing them into a concrete plan that would lead others toward greater health and wholeness. This role required analytic skills—examining my own wellness transformation, determining the factors that brought about the transformation, and translating those factors into a practical blueprint for working with others. This role also required organizational skills for putting together the various aspects of the project into a coherent plan for implementation. This role further required a large dose of creativity—dreaming of what could be and unleashing its potential.

## Key Spiritual Insight: Bodily Stewardship to Combat Gluttony

Every physical building needs a solid foundation upon which to stand. In taking on the role of ministry architect, I needed to establish a solid biblical and theological foundation on which to build the pilot project—a foundation that would give the project integrity and coherence. In developing this foundation, I reflected upon the spiritual awakening I gained on my own wellness journey. This led to a thorough study of the biblical and theological foundations undergirding this experience.

A key spiritual insight emerged from my study and reflection—the concept of bodily stewardship to confront gluttony. Frederick Buechner once stated, "A glutton is one who raids the icebox for a cure for spiritual malnutrition." Gluttony is a spiritual condition marked by the overconsumption of otherwise good things, particularly food, in an attempt to mask deeper spiritual and emotional problems. Though gluttony is most commonly associated with food, it can also include all forms of overconsumption, including drinking, shopping and collecting. Like its sister deadly sins, gluttony distorts a healthy love and appreciation for the gifts of creation into an inordinate, all-consuming desire that eventually takes over an individual. When related specifically to food, gluttony is marked by an unhealthy obsession with food consumption that manifests itself in disordered patterns of eating. Such disordered eating patterns not only involve overindulging in food but also obsessive food restriction often associated with fad dieting. Any measure of food obsession, either in too little or too much, falls under the umbrella of gluttony.<sup>3</sup>

<sup>2</sup> Randy L. Rowland, The Sins We Love: Embracing Brokenness, Hoping for Wholeness, (New York: Doubleday, 2000), 43.

<sup>&</sup>lt;sup>1</sup> Frederick Buechner, Wishful Thinking: A Theological ABC, (New York: Harper and Row, 1973), 31.

<sup>&</sup>lt;sup>3</sup> In defining gluttony with reference to food consumption, it is important to make several important distinctions. First, while gluttony is marked by disordered eating patterns, it is not the same thing as an eating disorder. An eating disorder is a serious medical condition requiring specialized treatment by trained professionals. Second, caution must be taken

Gluttony is a spiritual problem requiring a spiritual remedy. I discovered that spiritual remedy was the understanding that our bodies are whole, integrated creations of God that required us to become good stewards of them, employing both physical and spiritual practices to care for them properly. God created human beings with bodies and spirits—both are intended to work together to glorify God. Good bodily stewardship involves cultivating a lifestyle of commitment to honoring God in and through the body that the whole person may be transformed, both inside and outside. Stewardship of the body is the value, nurture, and respect of the body as God's creation, redeemed by Christ, and empowered by the Holy Spirit for health, holiness, and glorifying God.

The Apostle Paul discussed the importance of bodily stewardship in 1 Corinthians 6:12-20. In this passage, Paul establishes the clear connection between the physical body and the spiritual life. Christ's resurrection gives his followers the promise of full redemption, including resurrection of the human body. Therefore, what human beings do in their bodies is of great importance to their spiritual lives. When human beings indulge their bodily passions in excess, or outside of God's appointed boundaries, it adversely affects their spiritual growth. When Christ redeemed humankind, he intended that redemption to be of the whole person—body, mind, and spirit. As Christians develop a healthy stewardship of the body, they participate in God's redemptive purposes, drawing themselves, soul and body, ever closer to consummate wholeness in Christ.

Like all spiritual growth, cultivating good stewardship of the body requires planning, effort, and proper training. Fortunately, individuals are not left to their own devices. God has provided time-tested tools to assist believers in their spiritual training. Spiritual disciplines have been utilized throughout Christian history to empower men and women of the faith to grow in greater health and holiness. Scholar Dennis Olkholm describes the disciplines as "a spiritual angioplasty that keeps a person open to God's life-transforming grace." Spiritual disciplines keep our spiritual arteries open and free from barriers that might hinder our growth or our connection with God. Through the practice of spiritual disciplines, individuals gradually replace destructive habits with healthier, lifegiving habits. The goal of practicing spiritual disciplines is to achieve a complete transformation of the whole person, both body and spirit.<sup>5</sup>

Spiritual disciplines are tools for training in becoming better stewards of the body. Such disciplines must be incorporated meaningfully into one's daily life in order to bear fruit. This kind of lifestyle is what ancient spiritual practitioners referred to as asceticism, or "a program of training, making the whole self 'fit' for God's service." A program of spiritual training is necessary to give an individual the inner resolve to say "no" to gluttony's inordinate demands and put the physical appetite in proper perspective. Spiritual training is also necessary to feed the deep, unresolved inner desires that are often masked by the consumption of food. Spiritual practice feeds the individual true spiritual food that can satisfy their deepest longings in a way mere food cannot. The biblical scholar Marcus Borg states, "We are fed by practice."

From my own wellness journey, I identified several spiritual practices, as well as certain healthy habits that contributed to my own personal transformation. Specifically, habits such as rest, good nutrition, and exercise, when practiced along with the spiritual disciplines of silence, solitude, Scripture meditation, prayer, journaling, fasting, service, celebration and worship, led me to

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against labeling all overweight individuals as gluttons. There are many medical and physiological factors that contribute to one's body composition. Therefore, it cannot be assumed that an overweight individual is automatically a glutton, nor can it be assumed that a person of healthy weight does not struggle with gluttony. Gluttony is about one's attitude and behavior toward food, not one's physical weight or body composition.

<sup>&</sup>lt;sup>4</sup> Dennis Olkholm, "Rx for Gluttony," Christianity Today, (September 2000): 66.

<sup>&</sup>lt;sup>5</sup> Richard Foster, Celebration of Discipline: The Path to Spiritual Growth, (San Francisco: Harper and Row, 1988), 62.

<sup>&</sup>lt;sup>6</sup> Mary Louise Bringle, The God of Thinness: Gluttony and Other Weighty Matters, (Nashville: Abingdon, 1992), 43.

<sup>&</sup>lt;sup>7</sup> Marcus J. Borg, *The Heart of Christianity: Rediscovering a Life of Faith,* (San Francisco: Harper Collins, 2003), 193.

becoming a better steward of my own body. In designing the ministry project, I wanted to integrate these healthy living habits and spiritual disciplines in a way that would enable participants to experience greater stewardship of their own bodies. In his work, *Renovation of the Heart*, Dallas Willard asserts:

Much more could be said of the role of spiritual disciplines on behalf of the spiritual formation of the body. A full discussion of disciplines focused on the body would have to deal with how exercise and diet can contribute to easing the influence of the 'sin that is in our members.'...In particular, specific disciplines go far in retraining particular parts of our body away from the specific tendencies to sin that are localized in them. They enable us to stop the practice and remove the tendency in question by entering special contrary practices and circumstances, and thereby breaking the force of habit that has us in bondage.<sup>8</sup>

It was hoped that this program would help participants discover the source, as Willard describes, "of where genuine beauty, health, and strength of the body come from and of what incredible grace lies in the spiritual transformation of the body."

Shaping the Project's Goals, Content, Structure and Timeline

After laying the biblical and theological foundation, it was time to begin developing the structures of the ministry project itself. The specific ministry plan for cultivating stewardship of the body involved a structured program of spiritual formation through retreats and small group participation. The pilot project consisted of three main components—an opening retreat, six weekly small group meetings, and a closing retreat. The purpose of this program was to help participants integrate healthy living habits with the practice of spiritual disciplines to promote holistic health, weight loss, and spiritual growth. This ministry aimed to achieve several goals—first, to articulate a theological understanding of bodily stewardship based upon 1 Corinthians 6:19-20, second, to explain the role of spiritual disciplines in cultivating a healthy stewardship of the body, and third, to facilitate the practice of specific spiritual disciplines in a supportive community. The fulfillment of these goals would then lead participants to achieve the ministry outcomes of weight loss, improved health, and greater spiritual growth. At the program's completion, it was hoped that participants would have the theological understanding, tools, and resources to implement a rhythm of bodily stewardship into their own everyday lives.

Just as a physical structure requires building materials to give it shape and function, this ministry project required a variety of resources to make it effective. A variety of resources were developed in order to successfully execute the ministry plan. These resources included theological research, the pilot project materials, evaluation surveys, and promotional materials. Additionally, the ministry required a recruitment plan and logistical coordination with other church programming.

Theological research was conducted in the areas of Reformed theology, the spiritual concept of gluttony, spiritual formation, and the biblical understanding of the human body in relation to one's spiritual life. This theological research was integrated into the actual components of the ministry project. The ministry's name and mission statement came from the project's theme verse from 1 Corinthians 6:19-20: "Do you not know that your body is a temple of the Holy Spirit within you, which you have from God, and that you are not your own? For you were bought with a price; therefore glorify God in your body." The project's mission is to help participants develop stewardship of the body—a way of life that values, nurtures, and respects the whole person as God's

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<sup>&</sup>lt;sup>8</sup> Dallas Willard, Renovation of the Heart: Putting on the Character of Christ (Colorado Springs: Navpress, 2002), 176.

<sup>&</sup>lt;sup>9</sup> Willard, 176.

creation, redeemed by Christ, and empowered by the Holy Spirit for health, holiness, and glorifying God. All of the ministry resources were derived from this mission and were designed to help participants experience holistic wellness in body and spirit.

The resources developed for the pilot project comprised the retreat materials, participant's guide, promotional materials, and evaluation materials. The opening retreat materials included a power point presentation, a retreat guide for note-taking, Bibles, refreshments, a healthy lunch, and gift bags for participants. The weekly small group resources included participants' guides, blank journals, weekly supplemental handouts, and pens. The closing retreat materials included informational handouts, instructions for sharing personal testimonies, a roster of participants' contact information (for continuing fellowship), worship resources (Bible passages, responsive readings, hymn words, etc.) and healthy refreshments. In addition to the actual project resources, I developed evaluation materials for the retreats, small group meetings, overall program structure, and program effectiveness. I also developed promotional materials to assist with recruitment. These included printed brochures, posters, and articles for various online and print publications. I further drafted various letters including a welcome letter to participants, a follow-up letter sent about one month after the program's conclusion. I further worked with staff members from Westminster Church and the WROC to coordinate logistics such as reserving meeting spaces, ordering refreshments, distributing promotional materials, and setting up the registration process with existing WROC programming. Participants were charged \$25 for the program which covered the cost of the food, project materials, and promotion.

Recruiting the Target Population: South Hills Residents in Suburban Pittsburgh, PA

I determined that the best participants for this ministry project were individuals from throughout the South Hills area who were motivated to lose weight and improve their health through a holistic, spiritually-focused wellness program. They would need to be ready to make serious lifestyle changes and deepen their spiritual lives. They were cautioned not to expect the pilot to be a "quick-fix" approach to weight loss, nor were they to expect their wellness journey to be effortless. In recruiting participants for this program, attempts were made to clearly explain the program's intent, content, and expectations so that participants would not experience frustration or disappointment with the program. I worked with the program staff of Westminster Church, particularly the WROC director, Lisa Boyd, in recruiting participants for the pilot project. The pilot program was offered jointly by both Westminster Church and the WROC, with participation open to both church members and residents of the broader community. There were thirteen participants, all women, representing a variety of different denominational backgrounds. Two participants were members of Westminster Church, while the others were from the broader South Hills community.

As a ministry architect, I had taken an idea drawn from my own wellness journey and translated it into a concrete program that would hopefully empower real people to experience greater physical and spiritual wellness. With all the planning and developing completed, it was time to launch the pilot project.

## Implementing the Vision: The Leader as Mentor

In the implementation phase of the project, my leadership role shifted from architect to mentor. As a mentor, I would be coming alongside participants on their own wellness journey, and hopefully empowering them to experience a greater level of physical wellness and spiritual growth in their own lives. This new role would require the leadership skills of empathy, authenticity, good listening, interpersonal communication, and effective small group facilitation.

Facilitating Project Components as Fellow Companion Rather than Expert

One way I expressed my leadership role as mentor was to present myself as a fellow companion on participants' wellness journey, rather than an "expert" who knew all the answers and would tell participants what to do. In leading the project, I intentionally presented the information and practices in a way that invited exploration and experimentation, rather than a list of rules they had to follow. I have found that people are much more open to change when they are invited into potentially transformative experiences, rather than having those experiences foisted upon them. In my experience, people are also more willing to respond positively to leaders who are authentic, genuine, and caring—as opposed to those who are harsh, demanding, and closed. I was open about my own experiences, both the positive insights gleaned from my own wellness journey, as well as the struggles and challenges I continued to face. I strove to create a warm, inviting atmosphere during each aspect of the project so that participants would feel comfortable throughout the experience. I wanted to facilitate the various aspects of the project as a conversation where everyone had something of value to contribute. Above all, I needed to express empathy—the ability to understand others' experiences and "put myself in their shoes," so to speak. I knew that the tone I set as leader would have a big impact on participants' experience of the project. I sought to be nonjudgmental and affirming of everyone, celebrating each small step participants made along their journeys. I acknowledged the struggles participants expressed during the program, while encouraging them to continue making progress. I sought to inspire rather than intimidate as a leader.

Overall, participants seemed to respond well to my leadership style. One participant liked "the positive approach . . . built into the program." Another participant commented, "Hilary is not overpowering," and that she felt "very comfortable with her as a leader." Yet another participant described the program as "very well prepared and thought out." Overall, participants seemed to respond well to the material and myself as the program facilitator. A majority of participants reported that they valued the group interactions and enjoyed the relationships they made with others. Many participants also reported that the blend between group sharing/interaction and presentation of material was just right. One participant stated, "The balance was great. Not only did I learn from you, I also learned from others in the group." Another participant commented, "The fellowship and support from everyone is so helpful and positive." A third participant shared, "I felt really comfortable in my group and eagerly anticipated the weekly sessions." Participants generally responded well to one another, and the group dynamics were largely positive.

## Nurturing growth by fostering group safety, trust and togetherness

Another way I expressed my role as mentor in this phase of the project was by fostering a sense of group safety, trust, and togetherness. In order to foster this atmosphere, certain program commitments and expectations were outlined at the start of the project. These included attendance, participation, confidentiality, respect, and open-mindedness. These commitments and expectations served as boundaries that ensured that everyone in the project was treated equally and that everyone's contribution was important to the overall positive outcome of the project. Participants were encouraged to attend all six weekly small group sessions of the program. Participants were also encouraged to participate in the program's weekly activities to the best of their ability. Each weekly small group session presented activities (practices) pertaining to that week's theme that helped participants apply the material to their own lives. Participants were encouraged to come prepared for each week's session by reviewing the material from the previous week's session and doing the recommended activities assigned for the week. Participants were also to be involved in the discussion portions of the small group time, sharing their insights with other group members. This was to ensure that everyone had an equal voice and contribution to the group. As a fellow

participant as well as project facilitator, I also sought to engage in the weekly practice assignments along with project participants, and I shared my own experiences with these in the group sessions. Encouraging this kind of mutual participation gave participants the sense that we were all on this wellness journey together, and that each individual contribution was of benefit to the whole group.

To further safety and trust, participants were expected to maintain confidentiality within the small group meetings. The small groups were designed to be safe spaces to share deep, intimate things pertaining to the joys and challenges of learning to be a better steward of the body. In order to foster this kind of safe environment, group members were told that whatever was shared in the group must stay within the group. This ensured that participants felt safe to share deeper things without fear of sensitive material being exposed outside the group. Along with confidentiality, participants were expected to treat each other with respect. The participants came to the program with different points of view and life experiences. Therefore, to ensure that everyone's contribution to the small group was valued, participants were instructed to listen to the various ideas shared by group members without interruptions, criticism or judgment.

As a leader, I had a particular responsibility to ensure everyone in the various groups was treated with respect. I had to make sure that everyone has a chance to share their ideas with the group without being belittled or put-down. I also had to strive for balance in the discussion, so that everyone shared equally and no one participant dominated the group time. I also had to allow for disagreement among group members, while making sure dialogue among participants was kind and gracious. This meant gracefully ending certain off-topic conversations and redirecting them back to the main theme of the session. Creating this atmosphere of resect ensured that the small group remained a safe, supportive space for people to grow in their wellness journeys.

Lastly, participants were encouraged to have an open mind during the project. Some of the ideas presented were new to participants and challenged their existing way of thinking. Likewise, some of the recommended practices were new to participants and felt strange to practice at first. Participants were encouraged to keep an open mind with both the material and activities introduced in the program. Participants were asked to commit to trying out each activity at least once, even if it seemed uncomfortable to them at first. At the conclusion of the program, participants could determine which activities they wished to continue practicing, as well as those which they preferred to leave behind.

While most groups had a good camaraderie amongst members, one group struggled at times to maintain cohesion and develop a strong sense of mutual trust and support. A few personality conflicts among certain members disrupted the overall flow of the group meetings. One group member in particular tended to dominate discussions, requiring an extra measure of patience and direction to the conversation to keep the meetings on track. It was a challenge for me as a leader to be supportive and patient with the more verbal participant, while not allowing her to monopolize the conversation to the detriment of others in the group. I maintained the flow of the group meetings by limiting discussion time on particular segments of the session, as well as by intentionally including different voices in the discussion. If one individual was spending a bit too much time sharing in a particular session, I would briefly affirm her point, then immediately ask another person who had not been as verbal to offer her thoughts on the topic at hand. The small size of the groups made it simple to gage who was speaking more than their fair share, as well as those who needed to be included more in the conversation. I made sure every participant had the opportunity to share something during group sessions. I also kept each small group session to a strict timeframe seventyfive minutes, which gave participants clear boundaries for their time commitment each week. Over the course of our time together, participants respected the overall timeframe of the sessions and worked within them. Despite these interpersonal issues, the group members managed to complete the six weeks of small group meetings and achieve some benefit from their time together.

As the weeks progressed, I observed that many participants did not do their weekly assignments. They liked the theological content but seemed to resist doing the work. Many expressed that they struggled to fit in the weekly spiritual practices into their schedules. Many had good intentions, but could not seem to follow through with the weekly assignments. One participant shared, "I think the program is a good one and offers to participants the tools needed to 'take care of the temple.' Unfortunately, I do not feel that I utilized these tools adequately during these forty days." I suspect that many participants were not used to being involved in a structured program that required weekly assignments. Also, much of the material was new to participants and took time to digest and implement. Perhaps certain aspects of the project were simply too ambitious and needed to be scaled back or restructured to better accommodate participants. Throughout the project, I strove to be extra affirming and encouraging to participants, appreciating their willingness to be involved in this project and retain what they could from it.

## Evaluation and Results of the Project

All the participants expressed positive feedback for the *Take Care of the Temple* program as a whole. On their written evaluations, all participants rated the overall program experience as good or excellent. Participants also thought that the forty-day length of the program was just right. The majority of participants reported that the program adequately or more than adequately met their expectations. However, responses were mixed in describing the program's effectiveness in meeting participants' wellness goals. Most reported that the program was only somewhat effective in meeting their wellness goals, while a small minority rated the program as effective or very effective.

To assess the program's effectiveness in meeting its stated goals, surveys were developed that asked participants to share information regarding their lifestyle and spiritual habits. The surveys asked for basic information such as participants' age, gender, height, and weight. The survey then asked participants to describe their current lifestyle habits, such as hours of sleep per night, the number of days of exercise per week, minutes per exercise session, stress level, and dietary habits. The survey also asked participants to rate on a scale of one to five (five being excellent) a variety of aspects of their current lifestyle, including closeness to God, spiritual growth, self-care, physical health, body image, and overall integration of their spiritual lives with their physical wellbeing. This survey was given to participants at both the beginning and end of the program, so that their results could be compared. Although these surveys collected more subjective rather than objective information, a comparison of the beginning and ending results would demonstrate changes in participants' behavior and lifestyle. The surveys were anonymous to protect participants' personal information. Surveys were coded with a unique sticker and distributed at random to participants at the beginning of the pilot. At the end of the pilot, participants were given the same survey, which was matched to their unique code. These results were then compared to those of the initial survey. The results of these surveys were compared with the stated goals of the project to determine if these outcomes were met. Out of thirteen participants, ten completed in full both the beginning and ending effectiveness surveys.

The group as a whole lost a total of twenty-six pounds by the program's conclusion. Six participants lost some weight, while the other four maintained their original weight. The most weight lost by a single participant was eight pounds. None of the participants reported a weight gain at the end of the program. The level of weight loss was modest, but reasonable for the timeframe of the project. Participants also reported improvement in healthy living practices, such as sleep, exercise, and eating habits. Participants indicated getting more sleep each night. The group averaged an increase of almost two hours of sleep per night. Participants also recorded a twenty to forty percent improvement in their level of exercise. Participants reported an increase in both the frequency and duration of weekly exercise sessions. Participants increased the number of days per

week they exercise by an average of almost three days. At the same time, participants increased the number of minutes of exercise per session by an average of nearly twenty minutes. Participants also indicated that they obtained a better balance between rest and physical activity as a result of the program.

Participants further reported improvement in their eating habits as well. A majority of participants either maintained or improved their consumption of a healthy diet. Several participants indicated that they not only made healthier food choices, but they also reduced the portion size of the food they consumed. A majority of participants reported having fewer occasions of emotional and stress-induced eating at the program's conclusion. A majority of participants reported an improvement in their overall health as a result of the program. Participants also reported an improvement in their overall health. Specifically, participants reported improvements body image, body potential, and personal self-care. Nine out of ten stated that their overall health was good or very good, compared to only seven out of ten at the start of the program. Three out of ten participants reported that their overall health improved from average to good over the course of the program.

In addition to improving their physical wellness, a majority of participants experienced spiritual growth. Participants reported an improved closeness to God, level of spiritual growth, depth of spiritual practice, and overall spiritual health as a result of the program. More than half reported an improved ability to integrate their physical and spiritual wellness. One participant concluded, "I feel very fortunate to have shared this unique experience with these beautiful people. I am hoping to grow spiritually and change my habits in regards to diet, exercise and rest. I thank God for leading us to *Take Care of the Temple*."

# Gaining Weight, Gaining Perspective after *Take Care of the Temple*: Leader as Vulnerable Role Model

Following the *Take Care of the Temple* pilot, a new leadership role emerged, and it was not a role into which I was particularly comfortable stepping. This new leadership role was one of the vulnerable role model. This role emerged through a season of setbacks and struggles, but is ultimately leading me to a healthier place for myself and my work with others.

## The Struggle to Maintain Personal Wellness Practices While Leading Others

Despite the positive outcomes of the project, the whole endeavor proved to be much more work than I had anticipated. Though rewarding, the project was also a highly stressful experience. I was overwhelmed at times in developing and leading all aspects of the program. Developing all the pieces of the project and executing them proved to be much more labor intensive than I had realized initially. Facilitating the group experiences also proved to be more of a challenge than I expected. Managing the group dynamics of people from different backgrounds with different personalities and different expectations often left me feeling depleted. I struggled to keep up with the project development and facilitation while also participating in the project's activities with the other participants. The immense time commitment and emotional energy that this program required left me drained and overwhelmed. In working to help others, I struggled to take care of myself. I fell out of my rhythm of healthy eating, exercise and spiritual nourishment. I turned to food, my previous form of comfort. And I paid the price in the form of gaining weight—ten pounds, in fact. I found this aspect of the project to be both humbling and disconcerting. Despite my experience both with losing weight and facilitating this program, I realize that food and eating are still issues for me. How quickly I still turn to that old habit of gluttony in times of stress. Instead of berating myself and wallowing in self-pity, I reluctantly accepted what had occurred and resolved to rejoin

the path to good bodily stewardship that I discovered in the early days of my own wellness journey. However, this path proved not to be an easy one.

Coming to Terms with Personal Setbacks: Practicing Humility and Self-Compassion

I experienced a number of personal and professional setbacks following the completion of the Take Care of the Temple pilot project. I continued to develop the program for future use within the local church. I revised and reformatted the program materials and ran a second session of Take Care of the Temple as a six-week small group program through the WROC in the fall of 2013. Despite making attempts to get additional pilots of the program started in other venues, nothing materialized. Then, due to leadership changes within the organization, I no longer had the opportunity to offer the program through the WROC. At the same time, I was experiencing vocational struggles as well. I was searching for a new pastoral call, but the process was slow and tedious. I was serving as a part-time pastor in a local church while doing some fitness training on the side. I was struggling financially, as well as struggling to discern God's call for the next stage of my life. I sensed that God wanted me to do more with Take Care of the Temple, but all the doors around me were closing. The project in which I had invested so much time and effort was going nowhere. While these things were happening, I experienced an injury to my lower back which limited my mobility and required extensive physical therapy to rehabilitate it. The combination of these setbacks left me feeling quite discouraged. Once again, I struggled to maintain my normal wellness rhythms. Once again, I also turned to food for comfort and stress relief. I gained weight. I struggled with my failure to live up to my own wellness ideals. I struggled with the feeling that I was a hypocrite for not consistently "practicing what I preached" in terms of my own personal wellness lifestyle. I felt a great deal of guilt and shame over not living up to the wellness ideals I had set for myself. I questioned whether I should be working with people in the area of wellness since I myself was struggling so intensely in this area. I lost confidence in my ability to live a healthy, Godhonoring lifestyle, as well as my ability to effectively work with others as a wellness practitioner.

After much reflection and soul-searching, I gradually began allowing God's grace to shine through the discouragement, guilt, and shame I had been experiencing. Over time, I experienced more inner healing of my own beliefs about my weight, body image, and overall sense of wellness. I am slowly coming to terms with the reality that my own personal wellness journey is just that—a journey rather than a destination. Practicing bodily stewardship is more of a marathon than a sprint. With continued reflection and practice, I am learning a greater gentleness with my body, accepting its limitations while celebrating it as a wonderful creation which God has made. I am learning to honor my body through its different seasons of my life, particularly as it adapts to the natural processes of aging. In a culture that glorifies the young, slim and fit, I needed to learn to be content with my body as it actually is, rather than how I want it to be. I am learning to accept my body in its current state, whatever state that happens to be at the time, even as I strive to improve it. I am learning to become more comfortable in my own skin as a wellness practitioner. I am learning to practice self-compassion in the area of my own wellness that I may hopefully express greater compassion to those with whom I work as a wellness practitioner.

If I could go back and do the project all over again, I wish I would have not made weight loss such a strong focus of the project. Though the project ultimately took a turn toward more general health, weight loss was still a main outcome of the project. At the time, it made sense to keep weight loss as a prominent component of the project. Wellness in generally seemed to broad a topic for a D.Min project, while weight loss is a specific outcome that can be measured and compared. However, I worry that the weight loss emphasis of the project might place too much moral judgment and burden on some participants. Weight and body image are sensitive matters for many, including myself. Our culture tends to unfairly assess moral failure to those whose bodies do

not meet their often unrealistic standards of beauty and fitness. Weight discrimination and body shaming are unfortunate realities in our culture, and it is never my intention to contribute to these in any way. Although I tried to be exceedingly sensitive and nuanced in both my writing and practice with matters such as gluttony, spiritual formation, and bodily stewardship, I fear that some may experience guilt, shame or moral judgment regarding weight or other lifestyle matters. It is certainly never my intention to burden others with moral judgment either intentionally or unintentionally through my work or writing. My desire for the *Take Care of the Temple* pilot was to be a positive experience for lifestyle change that empowers others, rather than one that weighs them down with guilt or shame. From the feedback I received from participants, the pilot seemed to be positive rather than negative experience for them. I am very grateful that this was the case.

Though I wish I had not emphasized weight loss to the extent I had in the pilot, I do think the spiritual themes of the project were of value to participants on their wellness journey. I think gluttony is a real spiritual problem with which many people struggle. Gluttony can affect people of any shape or size. Gluttony is seen both externally in our surrounding culture of consumption and excess, as well as internally in our human tendency to fill spiritual needs with worldly desires. Our culture beckons us to overconsume, while at the same time presenting us with a picture of bodily fitness that is unattainable for the majority of people. In light of these cultural mixed messages, I think there is something of great value in helping people to understand God's view of themselves as creations of great worth—whole persons who are well in body, mind and spirit. I think it is worthwhile pursuing a lifestyle of bodily stewardship—one that values, nurtures, and respects of the body as God's creation, redeemed by Christ, and empowered by the Holy Spirit for health, holiness, and glorifying God. Such physical and spiritual training together transforms us into the healthy, whole people God desires us to be.

I still sense a strong calling to work with others in the area of holistic wellness, and hopefully *Take Care of the Temple* can be part of this vocation. I think that this project can be a useful resource for congregations who want to better support the overall wellness of their members. I am trusting that God still wants to use my knowledge, training, and personal experience in working with others to achieve holistic wellness. Since completing the *Take Care of the Temple* pilot, I have been able to pursue further training in the area of health and wellness coaching. Additionally, I have recently accepted a new pastoral call with a local church that is interested in utilizing my experience and training in the area of holistic health to develop new wellness initiatives for the church and surrounding community. It is my intention to continue refining the *Take Care of the Temple* resources and identifying new ways in which this material can benefit others on their own wellness journeys.

## Leadership Paradox: Embracing Personal Struggle as Strength

Since the development and completion of *Take Care of the Temple*, I admit that I still continue to struggle with food issues as well as with maintaining a healthy weight. Through this experience, I have developed a greater ability to have grace with myself and others. I realized that my struggle with food is, in a strange way, also one of my strengths. My struggle with food gives me the unique ability to empathize with others who also struggle with this issue. Helping others who struggle helps me in my own continual struggle to be a good steward of the body God has given me. In my calling to help others experience a more holistic sense of wellness, I never want to lose the ability to relate to those who struggle with food and eating. I have determined that if I ever cease to struggle with food, I should probably find another calling.

On a recent podcast episode, Chris Gonzalez, a marriage and family therapist, shared a powerful insight he received while going through a particularly hectic time in his life. He described sensing a voice deep within himself revealing, "The reason you exist is to heal and to heal." It took him a while to unpack the meaning of these words. Eventually, he came to understand their

meaning for his life and practice. He explains, "First, I exist so that I can participate in healing my own wounds, which are many. And...at the same time, participate in other people's healing...if can participate in some way of helping people heal...that freed me up to know that it's okay to be in the healing process for the rest of my life. That has benefit for me and other people." This statement from Gonzalez resonates with me as I seek to be a "wounded healer" in the area of holistic wellness. With God's grace, I can be a vulnerable role model for others. I can work to heal others while working out healing in my own life through God's power and grace.

#### Conclusion

I thoroughly enjoyed my experience with the *Take Care of the Temple* pilot project. It was very rewarding to take a vision based upon a personal experience of transformation and develop it into a practical project that was used to help others experience positive change. Working with all the participants was such a joy, and I deeply appreciate having had the opportunity to partner with them on their wellness journey. Reflecting upon the various leadership roles that emerged during the creation, execution, and continuing development provided me with valuable insights that will assist me in leading others more effectively in future endeavors.

People are often inspired to make positive changes in their lives as a result of witnessing transformative experiences in leaders around them. While not every leader has the time or resources to devote to a project such as Take Care of the Temple, leaders can inspire positive change in others through their own personally transformative experiences. Through an intentional period of selfreflection, leaders can identify a particular area of personal growth in their own life over a particular time period and explore concrete ways that such an experience may facilitate change in others. Leaders may ask themselves, what is one positive growth experience I have had over the past twelve months? What is one specific, tangible way this experience may inspire change in others? What specific context or group of people may benefit most from this personally transformative experience? What leadership role may emerge in translating this personal growth experience into a tangible means of facilitating growth in others? What knowledge or skill set does such an emerging role draw upon in affecting change in others? In my case, I identified three specific leadership roles: architect, mentor, and vulnerable role model. Other leaders may find different roles emerge, depending upon their experience and context. I believe personally transformative experiences not only benefit ourselves as leaders, but can also be harnessed to ignite positive change in others. With reflection, planning, and thoughtful action, leaders can step into new and varied roles that can birth positive transformation in others.

<sup>&</sup>lt;sup>10</sup> Ian Morgan Cron and Suzanne Stabile, "The Enneagram and Therapy – A Dialogue with Chris Gonzalez," *The Road Back to You: Looking at Life Through the Lens of the Enneagram,* Podcast Audio, January 18, 2017, https://www.theroadbacktoyou.com/podcast/2017/1/18/the-enneagram-and-therapy-a-dialogue-with-chris-gonzalez-enneagram-9-the-peacemaker-episode-24, (Accessed: April 7, 2017).