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Exercise Prescription for the Health and Wellness of the Clergy

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ABSTRACT

The clergy have special responsibilities that help to sustain and, in some cases, alleviate their congregation's personal and social burdens. Due to localised repetitive movements and static postures of sitting, hunching, or standing, they are frequently exposed to prolonged stressfulness. These may result in musculoskeletal disorders, cardiovascular disease, and mental health issues (such as anxiety and depression). This population is at risk of being overlooked because they are generally thought to be spiritually endowed. Specific exercises have been recommended to promote physiological functions such as flexibility, muscular strength, and cardiovascular health, as well as to reduce the risk of musculoskeletal pains associated with various occupations. As a result, the goal of this review is to highlight the risks associated with the nature of physical activity to which the clergy are exposed and to prescribe exercises to promote their health and wellness.

Keywords: clergy, spiritual exercise, health, emotional, prescription

INTRODUCTION

The health of any organization's workforce is important to its overall success and productivity. The church gets no religious exemption from this requirement (Weems & Arnolds, 2009). Just as many companies have begun to look more seriously at the health and well-being of their employees, many denominations also have begun to look at the health of the clergy that serve in their churches but not the clergy themselves most times. However, the challenging issue is that many members of the clergy are aware of the significance of physical activity and exercise to their health and even go to the extent of buying exercise machines in the home. The question is 'are these machines being put to use?' This calls for the need to create awareness on the integration of holistic movement in the lifestyle of the Clergy and even their congregation to prevent fighting what is not.

The review of the clergy's health by Weems and Arnolds found that their health was defined from the standpoints of a comprehensive definition of clergy's health and well-being (Weems and Arnolds, 2009). This was delineated and supported by the literature reviewed to include, not only traditional medical indices of physical and mental health but also, self-care practices and access to healthcare resources; supportive personal and professional relationships; balance and coping skills; positive attitudes and outlook; and a passion for ministry grounded in a robust spiritual life. They explained that all clergy health literature places the issue in a larger theological framework that views health from the perspective of a theology of ministry and God's ultimate intentions for creation. Therefore, recommending exercise for the clergy needs to be prescribed from holistic approach if such prescription will impact their lives and ministerial duties for total health and wellness for job performance.

Exercise prescription simply denotes specific plan of fitness and health-related activities that are designed for a specified purpose, which is often developed by a fitness or exercise specialists for the client or group of people to optimise their health and wellness. Due to the specific and unique needs and interests of the individual or group, objective(s) of exercise prescription should be successful integration of exercise principles and behavioural techniques that motivates the participants to be compliant and adherence if the goal set will be achieved (Suleman, 2021).

WHO ARE THE CLERGY?

The clergy are a group of people which studies indicate are among the nations' most overworked people, and that the long hours and constant stress of the job weigh on their health and lead to many pastors failing to take care of themselves. Clergy fulfil specific duties within the church as an organisation (Heitink, 2007). They are instrumental in its growth, both spiritually and numerically, by equipping members in their relationship with God, one another and those within their communities (Shaun, 2017).

Member of the clergy could either be a minister of any church, religious denomination or organisation, or accredited Christian Science practitioner who in the course of the discipline or practice of that church, denomination or organisation is authorised or accustomed to hearing confidential communications and, under the discipline or tenets of that church, denomination or organisation, has a duty to keep such communications secret (Heitink, 2007; Merriam Webster Dictionary, 2022). These roles demand both intrinsic and extrinsic resilience to cope with needing a balance between spiritual exercise and physical exercise. Emotionally, their health is tasked by job satisfaction, stress and pastoral demand, family and self-demands, age and entry of the ministry (Weems & Arnolds, 2009). The wholistic roles of the Clergy keep on tapping on their body physiologically, becoming the lifestyle and the medical risks which seems to be compounded by the demand of their job. In general, Clergy report better health than the population as a whole because they smoke less, drink less, exercise more often, and take more safety precautions than the population they oversee whose lifestyles are mixed grill. However, the need to balance home life with the church life puts pressure on the Clergy, especially the younger ones who have much demanding family with wife/children needing attention and care than older Clergy. The demands on older Clergy for fitness and wellness is higher than and differ with young being stronger and prone to emotional challenges more often than fitness and wellness issues.

The Clergy, as the leadership team's arrow head, is at vintage point to serve as role models for pursuance of wholistic health and wellness thereby leading to communal cohesion and health development, management and prevention of hypokinetic diseases due to physical inactivity and sedentariness, as well as psychological traumatic disorders (Dominic, 2021; Bolu-Steve & Dominic, 2012).

PHYSICAL AND EMOTIONAL HEALTH CHALLENGES OF THE CLERGY

The physical and psychological demands placed on the clergy affect all aspects of their health and wellness, leading not only to psychological and mental health disorders but also chronic diseases and burnouts and at times, withdrawal from the Clergy roles. According to Fickel (2022), burnouts lead to fatigue/exhaustion; irritability, negativity and inadequacy; reduced empathy and productivity; sense of despair and feeling of being isolated; relationship conflict, withdrawal and reduced intimacy; headaches, stomach upset or blood pressure; and mental health problems such as anxiety and depression (Dodd, 2013). Engagement in physical activities and exercises have been well documented to have all round benefits for health and well-being (Dominic et al., 2022).

The Clergy job description belongs to caring professionals and pastoral roles of leading by example tasking all aspects of their lives. A 2013 study from the Schaeffer Institute (2013) reported that 90% of pastors report working 55 to 70 hours a week; 50% of them feel unable to meet the demands of the job and that about 1,700 pastors leave the ministry each month, citing depression, burnout, or being overworked as the primary reasons. According to Dodd (2013), pastoring is one of the top suicide rates of any profession which might be due to non-supporting members of their faithful leaders as demonstrated by complains and too much expectations from the Clergy. Other psychological stressors causing depression and burnout are struggling to solve all congregational problems 24/7, criticism and poor conflict resolution skills, non-delegation of tasks and distrust, poor social networks, limited social life outside the church and inadequate professional education on all aspects of the clergy roles and duties (Fickel, 2022; Schaeffer Institute, 2013).

THE NEED FOR EXERCISE PRESCRIPTION AND THE CLERGY

Advancement and innovations had lured more people to become lazy and sedentary (Omonu, 2015). Sedentary lifestyles (lack of or inadequate exercises, sitting for long time in office or workplace and on computer), lead to series of diseases (cardiovascular diseases, allergies, headaches) and expose individuals to many physical, social, emotional and psychological challenges, that trigger body ailment increasingly (Nascente, Jardim, Peixoto, et al., 2016; Dominic et al., 2018).

The job of the Clergy also involves long hours of studying and meditation, prayers, counselling and caring from multiple dimensions including caring for members' physical, psychological, economic, spiritual and even financial and environmental/family challenges. Furthermore, the burden of maintaining a balance between the Church and his family might lead to being stressed with inadequate time to rest, eating between meals and loss of sleep as well as emotional bottlenecks and burnouts. These conditions or situations for discharge of duties are risk factors which could dispose the clergy to cardiovascular diseases, metabolic disorders and even cancers. Sedentariness is regarded as an independent risk factor for cardiovascular and metabolic diseases that increase the risk for mortality (Trembley *et al.*, 2017; Dominic, 2021). Examples include overweight, obesity and other diseases such as cancer, type 2

diabetes, sleep apnea, psychosocial problems and others. These diseases can also be comorbidity diseases that increase the risk of cardiovascular and metabolic diseases mortality. Engaging in exercise or other forms of physical activities is the most potent way to decrease inactivity and sedentariness and these are known to induce dose-response health and fitness benefits on the body. An underlying risk to most individuals, including active people (athletes and those who exercise regularly), is that sedentariness is often a common habit that is entrenched by various socio-environmental needs; for example, occupation, use of vehicles, studying, social life, and relaxing among others. Our awareness actions against sedentariness are, therefore, necessary to avoid mortality while adherence to regular formal and informal movement (play, dance, physical activity exercises) will confer long term benefits (Dominic, 2021). For the Clergy, prescribing only physical exercises without psychological dimension tonic might not solve the predisposing factors. There is the need for multidimensional approach. Apart from prescribing physical movement and exercise regimens, spiritual exercise is essential for emotional health and wellness.

HANDLING PSYCHOLOGICAL STRESSORS, STRESS AND BURNOUT

Psychological stressors are central to the Clergy roles leading to different types of stress-causative factors of burnouts. Fickel (2022) highlighted that Pastoral and church leadership roles lead to chronic burnouts and the feelings of failure, deteriorating health and crisis in the family life among others. Just like other caring profession and to resolve the distress and resume leadership roles, one of the recommendations spelled out by Warren and Fickel (2022) are:

- **Releasing of ones pent-up emotions and frustrations to the Caller (God)** by verbally and non-verbally telling God about their worries and frustrations, thereby expressing their trust of Him through their feelings. This is confirmed in the Bible through God's encouragement of Elijah after the Victory of Prophets of Baal and threatened by Jezebel led to his hiding and frustration. Twice God encourages Elijah to "tell Him what is on his heart" (1 Kings 19: 9-19) showing God's readiness to listen and solve the psychological burnout.
- **Clergy are humans who must bear this in mind and should not allow the congregation push them to play God. Therefore, they need to recharge their convictions by refocussing on God** (1 Kings 19:11) intermittently – God ensured he revived Elijah's conviction that he reset his faith through the wilderness experience of the storms by sending multiple storms to demonstrate His awesome power and ability, after feeding him for three days' for the journey before his last assignment.
- He treated his burnout through seclusion from mortals to refresh him. **By faith after recharging we boldly resume serving** and not demonstrating withdrawal syndrome (1 Kings 19:15-16) – Elijah was given a new assignment (Fickle, 2022; Warren, 2013).
- Lastly and very key to psychological/emotional health is submission to others for counselling in diverse areas for their health and wellness.

MOVEMENT LIFESTYLE AND HEALTH AND WELLNESS CHALLENGES

Technological and urban transitions over time have changed movement lifestyles creating more avenues to avoid bodily movements, which has self-yielding physiological benefits to the human body functions. According to Johnston, Eagle, Corneli, Perry and Proeschold-Bell (2022), some of the common occupational risks of Clergy are health problems that include high rate of chronic diseases, joint disease, asthma, angina and diabetes. Notable risk factors of these health problems are unhealthy lifestyle behaviour in which reports revealed increasing obesity rates, (Lindholm, 2016; Proeschold-Bell & LeGrand, 2010), frequent eating out at meetings, church events or restaurant. The often-high stressful nature of Clergy work can also induce cravings for calorie-dense foods among Clergy (Terry & Cunningham, 2020; Proeschold-Bell et al., 2017) leading to longer period of sedentary behaviour and physical fitness challenges. Therefore, the Clergy need to take their physical health seriously since it is a known fact that it influences other aspects of health and wellness (social, mental, psychological, environment, spiritual, financial) (Dominic, 2021).

CLERGY OCCUPATIONAL MOVEMENT OPPORTUNITIES FOR HEALTH MAINTENANCE

Most fully employed adults spent a substantial part of their time at work and depending on the type of occupation, the time spent at work varies. Among occupation with longer working hours are transportation, security, clergy and shift workers. Those in highly active occupations may accrue substantial amounts of movement to qualify physical activity through their job alone (Gudnadottir et al., 2019). Individuals with higher-status occupations (white collar/non-manual labour) had lower total physi-

cal activity compared to individuals with lower-status jobs (blue-collar/manual labour). Occupational movement of the clergy hybrid manual and non-manual and in some case the manual may take very long hours of sedentary behaviour and increase in physical inactivity. This requires a balance in the discharge of their roles to optimise their fitness and wellness. Furthermore, it demands purposefully inculcating physical movement in-between and within occupational lifestyle behaviour.

Clergy with more favourable perceptions and of their health status and positive health behaviours are likely more confident to counsel congregants on health-related matters (Fallon et al. 2012) or provide resources for health in their church (Bopp and Fallon, 2011). This highlights the important place of movement on the health of Clergy and on shaping the culture and environment for health enhancing and maintenance behaviour in faith-based organisations.

A single moderate-to-vigorous intensity exercise session (less than 60 min) improves important immune system adjuvant and when repeated daily, enhances immune defence activity and metabolic health, overall anti-inflammatory (reduce pains) influence mediated through multiple pathways that has summation effect over time in modulating tumorigenesis (abnormal or cancerous cell), atherosclerosis (accumulation of fat in the blood vessels), and other disease processes (Nieman & Wentz, 2019).

Some factors that may pose barriers to maintenance among the Clergy are the interest of their congregation, access to other community sources of health enlightenment, lack of knowledge/expertise to deal with health behaviours, lack of time, self-efficacy and unsupportive doctrine (Webb, Bopp & Fallon, 2011). Others asserted that those who are more religious are less likely to exercise (VanderWeele, 2017) and religious attendance is more associated with better cardiovascular disease survival than the incidence of the disease itself (Li, Stamfer, Williams & VanderWeele, 2016) are further limitations.

OCCUPATIONAL PHYSICAL ACTIVITY AND EXERCISE PRESCRIPTION FOR THE CLERGY

The clergy should wholly integrate into occupational movement. Religious movement as occupational rituals for the clergy are sources of informal movements within diverse modes of worship. Prayers and worship postures have been found to be beneficial to fitness and wellness (Kamran, 2018; Dominic, 2021) and improve cardiovascular and musculoskeletal health. These include:

- Prayer walk: within the house; compound, on trekking for a distance; at the Church premises, either as individual, family, groups in the Church or the Clergy monthly or weekly programme.
- Congregational ritual participation and direction in service conduction: The Clergy should endeavour to fully participate in all aspects of the service rather than seat and watch congregation doing it—leadership should be by example.
- At home
- Family altar: Praise worship on the feet and moving revolution
- Personal altar: Use of diverse posture promotes flexibility and strength of body parts depending on how long, type of posture adopted.
- Use of diverse postures to reduce sedentariness or physical inactivity such as
- Kneeling: either tall kneeling, short kneeling or half kneeling are all beneficial for trunk strengthening, balance and hip flexor stretching.
- Squatting: Squatting challenges most muscles of your body. However, the correct techniques must be used; making use of both upper body for balance and target the lower body muscles by raising your hands as you go down. Do not go down beyond your threshold if you are not an exerciser or have injury or traumatic issues in the joints.
- Walking: Walking especially when it is brisk either during prayer session, aerobics or length of the room, around the house or home is very beneficial.
- Dancing: Involves rhythmic body movement. It should be taken advantage of to stretch the whole body and strengthen body joints. It is also a medium of inner expression which brings good memories leading to secretion of good hormones.
- Stretching intermittently such as in expression of worship and thanksgiving in different directions. When sitting for at least 30 minutes to 1 hour, it is essential we stretch the joint and muscles.
- Short breaks between conferences, long hours of meetings/seminars.

FORMAL EXERCISE PRESCRIPTION FOR THE CLERGY

Exercise programme for the clergy

Considering the nature of work, sometimes it may not be possible for the Clergy to engage in long exercise session of 30 minutes or more. In such instances, research-based modification shows 3 – 4 sessions of exercise bouts spread across the day confers protective health benefits to the body systems. Therefore, this paper recommends two categories of exercise programmes that may fit into the schedule of the clergy- *Exercise on A Busy Day and Exercise on Other Days*.

Exercise on busy days (EBD)

The sacred and complex nature of clergy's work makes most of them reluctant to take breaks, especially if there is no co-pastor in their church to provide back-ups. Furthermore, the stress and the availability of food at so many church meetings have also created a situation in which 78 percent of pastors are overweight or obese, which then makes them vulnerable to chronic diseases leading to above-average rates of depression, obesity and several chronic diseases for clergy (Proeschold-Bell, 2021). To tackle this predisposing risks there is the need for exercise programming on busy days and other days when the Clergy are less busy.

Prescription of exercise on busy days (EBD)

Requirements for exercise on busy days (EBD)

- i. Exercise space: Create space within the office, home or church environment for EBD. This depends on the space available in the office, home or church. For available large space, it should be a minimum of 2.5 metres x 1.5 metres and 1.5 metres x 1 metre for a small space. The target is to have enough space for movements such as swinging the arms, twisting the trunk, jogging on the spot, bending at the waist (forward), bending at the knees (forward and backward), etc.
- ii. Exercise attire: Dress to allow free movement.
- iii. Duration of exercise: 10–20 minutes
- iv. Intensity (amount of exertion): moderate to vigorous bodily exertions.

Exercise on other days

Target body parts

- i. Upper limb exercise
- ii. Core strength and stability exercise (the abdominal and back muscles-trunk)
- iii. Flexibility/range of motion
- iv. Lower limb strength and endurance
- v. Total body mobility
- vi. Cardiorespiratory endurance

CONCLUSION

The clergy is a special group of people whose job demand is multidimensional and calls for a specially designed wholistic exercise programme integrated into their daily routines to provide health and wellness benefits. Movement routines embedded within their occupational lifestyle behaviour are needed to be strengthened for physical, physiological, mental/emotional and overall health and wellness. Prayer walk, kneeling to pray (both half and full kneeling) have implications on the core muscles and keep the muscles in constant work, thus reducing sedentariness and physical inactivity. Regular exercises involving different postures within religion rituals should be encouraged always even among the congregation for health Church.

Summarily, for adherence to exercise prescribed, the Clergy should act on these nuggets:

- Be involved in group exercise (family, aerobic groups-clergy)
- Encourage weekly or monthly group sessions for the congregation
- Get breaks between job schedules to walk for 5 minutes
- Encourage stretching of team members in-between long hour meeting sessions
- If you are a non-exerciser, consult an exercise and sport scientists/qualified fitness and wellness experts for exercise programme.

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