Pandemic brings new issues to consider when teaching future theology students

By Pat Fosarelli

The pandemic of the novel Coronavirus has consumed much of the world in the last two years with its incredible ability to infect seemingly everyone in its path—young or old, rich or poor. However, its most devastating feature is its ability to kill so many people, especially those who are poor, elderly, sickly, or persons of color.

We have all had to come to terms with the massive impact this virus has had on our individual and communal lives. Naturally,

we experienced the pandemic through the perspectives of ourselves and of our loved ones. But for those of us in theological education, we teach students who are experiencing or will experience this pandemic through the eyes of those to whom they minister. In terms of education for ministry, although we have done a good job of pivoting to online course offerings when we could no longer meet in person, there are several basic issues this pandemic has shown us that we must also consider as we educate future ministers. Among others, these issues include (1) theodicy, (2) ministry in atypical circumstances, and (3) self-care (broadly defined).

As both a physician and a theologian, I've encountered these three issues repeatedly during the last two years. I've had numerous people ask me the age-old theodicy question, "Why is God letting this happen?" I've seen friends and colleagues struggle with how to offer ministry when in-person contact is impossible. Colleagues have described heartbreaking stories of families who could not have the funeral they most wanted for a loved one or family members dying alone in a hospital. How does one offer meaningful ministry in such atypical



circumstances? In addition, so many people wonder if they (or any of us) will ever be "normal" or "healthy" again. How do we care for ourselves and for others when seemingly it appears that this virus affects even those who practice good self-care—physically, psychologically, and spiritually?

Because of my dual background, I teach several courses embracing both. At the start of the pandemic in spring 2020, I happened to be teaching "Stress and Resiliency" to master's-level ministry students. Pivoting to Zoom classes was the easy part. The much harder part was coming to terms with the fact that we didn't know what this virus was going to mean for us personally—would we all still be around by semester's end? Students talked about the stresses they already had in their lives . . . and now they had this. We talked about the physical effects of stress and how it can make chronic medical conditions worse. Naturally, we talked about self-care and how to keep oneself (and one's loved ones) as healthy as we could. But, at that time, we were in lockdown and most students felt helpless—just like the people to whom they ministered.

In fall 2021, I was teaching "Healing Trauma" to doctorallevel ministry students. When we originally envisioned this course, there was no pandemic. But now, in addition to the traumas we had already decided that we would cover (childhood traumas, relationship traumas, societal traumas aimed at one because of gender, race, country of origin, religion, and traumas experienced from church and church leaders), the trauma of a pandemic was included. Most of the students (and their teacher) had lost at least one family member, colleague, or congregant to COVID-19. Putting a face on the pandemic took it from the realm of the hypothetical to one that is painfully personal. In student discussions, a recurrent theme emerged—how do we minister to people with multiple traumas without being traumatized ourselves? After all, for most people, the pandemic was just "one more" trauma. Most human beings have faced several traumas in their lives, and this pandemic simply tore—and continued to tear—the scab off wounds that were already poorly healing.

Stresses and trauma are much more than "in the head." Even if the body has not been physically struck or touched, stresses and traumas find their ways into body processes—the exacerbation of a chronic condition, the poor functioning of the immune system, the silent progression of a cancer, the wearing down of the cardio-vascular system. And though stresses and traumas do not necessarily cause a disease or dysfunction, they may play a hefty role in the failure to prevent it in the first place or to improve it once it appears.

Without making ministry students into biologists, how do we equip them to take good care of themselves precisely so they can thrive and have something to give to others? Without making ministry students into psychologists, how do we teach them about people with multiple stresses/traumas who seem fragile or hostile (and sometimes both simultaneously)? Without making ministry students into academic theologians and philosophers, how do we teach them how to grapple with issues of theodicy—not based on past events (e.g., the 18th century Lisbon earthquake), but on the pandemics of viruses, racism, or xenophobia in our own century?

It has always been true that students learn as much by observing how their teachers behave as they do by listening to them in class. How do we model behaviors of self-care? How do we model what ministry to those who are ungrateful, unlike us, or a potential threat to us looks like? How do we struggle with issues of theodicy?

There are, of course, no easy answers and each situation calls for its own set of responses, but I offer several ways of approaching these age-old issues—experienced anew with each generation of ministers.

Theodicy

It is appropriate that students understand what theologians have written about theodicy over the ages, but that is insufficient. As teachers, we must help them connect the dots, bringing previous understandings into current situations. The aforementioned Lisbon earthquake was noted because it is so often referenced in the classroom and seemed to be purely "an act of God," without the involvement of human freewill. In courses exploring theodicy themes, do we ask students explicitly "Which of these explanations for why bad things happen would best help you explain the COVID-19 pandemic?" "Which of these explanations seem less persuasive today, and which more so?" "How would the people to whom you minister respond to these questions?" In this way, students can explore their own beliefs and biases, while realizing that what they believe may not line up with what those to whom they minister believe—even when it seems so self-evident to them.

Ministering in atypical situations

Our students are increasingly called upon to minister in places where seminaries and theological schools have not (traditionally) given them much preparation. I've taught students who were called to minister in neighborhood clinics as well as on city streets where murders had occurred. Granted, our schools cannot prepare students for every ministry eventuality, but we must be more diligent in preparing them for ministry in sites outside of a church—especially in places full of suffering people where ministry is most needed. We must also alert them

to the reality of trauma in people's lives and its cumulative effect. In ministry courses (in-person or online), we can begin to do such preparation by using case studies, vignettes, and roleplay more liberally, especially highlighting situations that are atypical. In addition to the specific purpose of a given discussion, students should be asked to imagine that they're ministering in person *and* ministering only through an electronic screen. How does the modality of contact impact what is said and done? How does one assess a situation or a person if one is not physically present? What is lost? What might be gained?

Self-Care

Although self-care, to some, sounds a bit "new age-y," there is nothing flaky about it. As stated earlier, if we don't take care of ourselves, we have little (or nothing) to give others when they most need it. Students need to see that we teachers take care of ourselves *and* that none of us is perfect in this regard—we *all* could do better. But that is no reason to castigate ourselves (or others).

Many people (including us, if we are honest) are doing the best we can, given our own past histories and current circumstances. In courses that discuss minister self-care or burnout, do we encourage students to voice their own failures or reluctances to engage in physical, emotional, and spiritual self-care? Do we ask them to reflect on why that is so (and what might get them to change) without making judgments? Do we leave time for students to reflect on the people they serve and ask them to consider what interferes with *their* self-care? Do we ask about what they think they could do to help those entrusted to their care to take better care of themselves?

Indeed, the current crisis of the pandemic will pass, but we are foolish if we do not permit it to help us reflect deeply on what we teach our students to do and how to do it. This will not be the last pandemic we will experience, but perhaps it can be the first to inspire us all to a greater understanding of ministry in the 21st century.

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