Kicking Around Sacred Connection: Coaching a "Soccer Team" of ACPE Learners



Paper Introduction: My Overarching Metaphor as Soccer Coach

During second grade, I developed vitiligo. Suddenly, parts of my skin turned bleach-white, making me feel like a cow with spots. I internalized this trauma with shame and compartmentalization. My first-born, assertive, and verbal part of me got diminished. Imitating my German-turned-white heritage, I stuffed my pain down. Except with soccer. With soccer, the loud, emotional, and bossy Benjamin re-emerged. It became my arena of grief, where I released my unsettled energy through sweat, tears, and laughter. All the way through college, I played soccer, captaining my last two years. Over those decades, I learned to fall back in love with my body and claim my body as a site of skill, curiosity, and joy.

From my two years of CPE residency to two years of CEC, I notice a common theme. Multiple educators encourage me to keep claiming my own power, voice, and truth. They see the gentle and sensitive side of me but wonder at times where the competitive soccer captain may be. My CPE journey has helped me to slowly integrate parts of me that have felt compartmentalized. This has expanded my spiritual care and teaching skills. Whereas before, I could be more reserved and intellectual, I now more readily open my heart, trust my instinct, and risk my own truth. The skills I learned in soccer—how to become team, to be resilient after setbacks, to work on myself, to receive feedback, to rest and play, to use my body to coregulate—became parallel skills for spiritual care development. The nuances and skills of spiritual care boil down, for me, into how to trust and develop authentic embodiment.

Therefore, my main theory is growing in <u>authentic embodiment</u>—an unending congruence between body, mind, and spirit—in relationship to self, others, and the sacred.1 This is my "why" of spiritual education: I desire learners to keep risking open-hearted spiritual care, a nondual approach of honoring the truths flowing through others' bodies, minds, and spirits by being in touch with their own. My goal is for learners to increase their own embodied flow in spiritual care. This emerges when **embodied awareness** of a learner's sacred truths—who they are—integrate with skilled, **embodied engagement**—how they care.2 At the heart of such education is an embodied form of knowledge.

As a visual learner who feels and receives insights in images, I will use the metaphor of soccer coach to ground my theories of spiritual care educator. In analogous-speak, I invite learners to kick around the soccer ball of sacred connection with their patients, peers, and myself. The soccer ball could symbolize each person's core truths—their loves, feelings, needs, purposes, and griefs—that are kicked around with others. Each person has their own individuated relationship with the ball, but the goal of soccer, and by consequence, spiritual care education, is to skillfully draw forth sacred truths and beautiful play through the dynamics and shared purpose of team. The "practices" of CPE education prepare learners to engage in the high-stakes "game" of interfaith and multicultural patient care.

My metaphor of soccer coach, like all metaphors, has its limitations, which I will address in the critical purchase at the end of the paper. Although I weave my theories around this metaphor, I rarely if ever make this metaphor explicit with learners. I desire learners to interpret their experience in their own way and make analogies that best reflect their lived experience. Furthermore, I recognize how this metaphor may not resonate with some due to the competitive spirit behind athletics. What I have learned from coaching soccer, however, is that it is much more than winning or losing. It is about cultivating team belonging, developing resiliency and skill, and experiencing the joy and demand that comes with play. So come join my team and kick around some of my own sacred truths!

Meet the Coach: Benjamin Paul Allward-Theimer

Born in Oklahoma and raised in Nebraska, I am midwestern at heart. I come from a long line of German-American immigrants who found meaning through conservative Lutheran churches and blue-collar work. I am a pastor's son and the eldest of three brothers. I felt a pull to follow in dad's shoes but to do so in my own way. Like many educated millennials, I moved away from my midwestern roots after high school to live in diverse city-centers. My four values—adventure, peace, faith, and vitality—which I will touch on below, have helped me to get where I am now. I am age 35, identify as white, male, cisgendered, am a Presbyterian PC(USA) minister, and am happily married to my wife, where we have made home the last seven years in Atlanta with our dog. We hyphenated together both our surnames to capture our love and equal partnership.

Adventure: Growing up in white suburbs in the middle of America, I wondered what else might be out there. My love of people, differences, and challenges keep stretching me beyond my comfort zone. I have lived in Chicago, Denver, and Durham, working in Title 1 schools, prisons and youth detention centers, churches of various denominations, and three hospital contexts—a trauma hospital, birthing hospital, and now, a veteran's hospital. I have scuba-dived in Australia, hiked Nepali mountains, canoed the Mississippi river, and spent summers in Syria and El-Salvador. My adventurous spirit aligns with my faith, to experience God through all peoples. I recognize how my white male body affords me more safety to transgress segregated boundaries. The gift of these experiences is that they continue to unfold a greater adventure within, of grief, co-healing, and transformation of my identity and beliefs.

Peace: The VA context fits my adventurous spirit and commitment to working in difficult contexts. At the same time, my experience with veterans only confirms my desire for peace and nonviolence. This belief in peace only crystallized when I witnessed love and peace transform my special education students. Several unrelated friends call me, "Gentle Ben." I attribute part of this peace and calm to my loving and attuning parents. My two other brothers have similar sensitive and calm spirits. This also may be attributed to the cultural *zeitgeist* of the Midwest. The brutal summers, harsh winters, and cycle of crops shape people with humility.

Faith: I am a theologian. From a young age, I have felt God's presence in and through all things. At the same time, I have had to differentiate God and my worth from the politics of church. Growing up as a pastor's kid, I developed much of my people-pleasing, Enneagram 3 persona from the rituals and performance of church. I enjoyed the gaze and minor celebrity status, but I also learned habits and theologies that prevented me from grieving and being authentic. I felt uneasy about a public role as pastor and the insular logics of church, when I had many friends who would never step into a church. My role as multicultural and interfaith chaplain and educator better fits my ability to affirm the loving gaze of the divine in all things.

Vitality: Throughout various stages of my life, my friends have seen me as a person of hope and possibility. When I am in new social situations, even CPE groups, I may minimize my vitality out of fear and the male conditioning of being composed. But when I am free with friends and authentic with my grief, I live like I did on the soccer field, with passion, intensity, and freedom. At my core, I long for myself and others to express the full range of human experience. Much of my skill as educator and chaplain is drawing forth emotion and honoring it. "The glory of God is a human being fully alive." This Irenaeus quote animates my theory towards vital and authentic embodiment.

One Page Summary on My Theory of Authentic Embodiment

Theology, **The Gift of Embodiment:** I begin this section with the gift of embodiment, how I believe God invites us into authentic, bodily expressions of love and grief in a loved-soaked, interconnected world. For me, the Divine is the Loving Life Force who continues to wake me up into deeper belonging with myself, others, and God. Often, however, I theorize it is pain, suffering, and disordering events that invite people to explore different, counterintuitive, and "upside-down" ways of relating, which may re-narrate one's theologies and assumptions. My third-way theology, modeled on the struggling new community between Jews and Gentiles after Pentecost, enables me to educate learners in how they relate to others with interreligious humility and justice seeking awareness of biases. My True Self theology, which draws on the contemplative practices, enables me to educate learners how they self-differentiate and practice self-care. This section attempts to illumine the ongoing integration of body and spirit in relationship to community. *Theorists: Willie Jennings* and *Richard Rohr*.

Human Development, Embodied Awareness and Choice: I begin this section with the power of attunement, how I utilize attunement to help learners feel safe and cared for, so they may attune to their own internal world, grow in awareness, and risk mindful and brave new choices. With *Internal Family Systems* as my main theory, I explore how lived experiences, culture, and trauma could keep one's wounded, reactive, and protective personality patterns in a repetitive and rigid cycle. Through bodywork, mindful and reflective speech, and connection with one's own centered Self, which is synonymous with my True Self theology, I theorize learners will grow in trust, empathy, and deepened communication with self and others. My critical purchase is self-transforming theory, which looks at how learners develop in their meaning-making frameworks. I utilize this theory to develop one's spiritual authority in relationship to the communities that form them. This section implies a deepening integration between body and mind. *Theorists: Richard Schwartz and Robert Kegan*.

Education, Empowering Flow through Play and Agency: I begin this section with my theory that learning begins by feeling disoriented, stuck, and unsettled by new experiences. I structure the paper on the emergent learning cycle of a) disorientation, b) exploration, c) "a-ha" reorientation, and d) flow. My theory is that if learners could trust both self and community with their disorientation, they would be able to play with new ideas and concepts, then proclaim their newfound insight, and refine that newfound insight through practice, experiencing flow. I use the theory of Multiple Intelligences to foster an environment of play and Critical Thinking to foster an environment of empowerment. My group theory is Systems Centered Theory. Throughout the paper, I interweave my three coaching styles: coach as i) motivator, ii) instructor, and iii) protector. As learners feel more embodied in body, mind, and spirit, I theorize they will embody their learning with instinctual flow in their spiritual care. Theorists: Howard Gardner, Stephen Brookfield, Yvonne Agazarian.

Context: These last two years I have worked with first- and second-year resident learners, not interns, and rotated and/or co-taught with my educator, MaryBeth Hayes. I want to shout-out my own theory "soccer team" who cheered me on and helped me refine my theory with consultation and edits: Blake Arnall, theory mentor; MaryBeth Hayes, head coach; Trey Morrison, my first educator; and to all CECs and CEs in my Friday CoP group.

The Gift of Embodiment: Third Way Community and True Self in Theology

Introduction: Christian Mysticism and Upside-Down Relating

Growing up as a social kid, I cherished the adventures with my best friend who is Jewish. I felt embodied joy as we played and confided over schoolwork. I also felt fear in my body when I heard him practice Hebrew or we watched movies I was not supposed to watch. The fear came from the story of my family and conservative-Lutheran heritage. They believed my best friend needed to become Christian. For years, I felt conflicted about this story and the love that was opening my heart. Then one day, love set me free, and I rewrote my own story: my best friend's differences only enriched and expanded our friendship. For me, I felt God not in abstract formulations but through experiences of love felt between bodies.

My best friend was the first of many friends who reshaped my beliefs and deepened my core values. My friends of different positionalities than my own–black, queer, female, humanist, and Hindu–have provided many of my own theological transformations. These transformations corroborate my tradition of Christian mysticism,³ where all living things are reflections of God, full of grace, mercy, and love. For me, God is the animating life and love force that continues to "wake me up" to the illusions/stories I tell myself that block me from deeper belonging to self, others, and the sacred.⁴ My own ongoing evolution—of being decentered and deepened by love—frames my expectations as an ACPE educator. I anticipate learners will be faced with whether to evolve who they are, what they believe, and how they act by how they use the clinical method of learning. As they are decentered by difference and hopefully deepen their sense of self by their care, I invite them to explore at least three sites of belonging: their own body, community, and their spirit.

My Christian tradition, with belief in Jesus as the Embodiment of God, implies that God delights in inhabiting and companioning with bodies. In fact, my mystical tradition suggests that whole universe is God's body, bodies within bodies, that are perpetually loved into existence and continually animated by Spirit.⁵ Jesus invites me into his own example of divine embodiment, where he authentically channeled the spiritual energy from his surroundings into relational connection. Such authentic channeling of Spirit flowed through Jesus' body as tears, shouts, prayer, listening, healing, movement, etc. His teachings invite authentic ways to grieve and love, while warning of our tendencies towards disembodiment. Jesus suggests disembodiment manifests when selfishness blocks our connection with God, others, and self–a closing of the heart, compartmentalization of the mind, and coldness in actions.⁶

This (dis)embodiment theology sets my anthropology and epistemology for ACPE education. Our bodies–learners, patients, and my own–are the primary sites of learning, as each body, no matter their background or belief, is a unique vessel of divinity and flowing spirit. I believe the energy that is flowing between and within us–those sensations, emotions, desires–are divine clues for how to deepen belonging in this love-soaked world. As an educator, then, I trust the present moment to be our continual guide to an embodied knowing of what is real between us. The challenge, for learners and myself, is that the divine clues coursing within and between us are not just pleasant but also painful. Such painful sensations may trigger reactive defenses and interpretations that lead to disembodied behaviors. My core stance as an educator is of compassion and curiosity, as my faith tradition suggests we learn as much, if not more, from our disembodied ways of relating.⁷

Growing up Lutheran, I inherited a theology of the cross. How I interpret that now is that God loves to turn the world upside down. This means to me that broken and ailing bodies, ignored people and positionalities, our own failures and mistakes, and death are sacred windows into the heart of Mercy. This corroborates with Richard Rohr's invitation to find God in the chaos of this world. In Rohr's mystical process and transformation cycle, he suggests we continue to evolve our meaning through three spiraling stages: 1) order, 2) disorder, 3) reorder. As an educator, I invite learners to experience their own sense of the sacred when they or their patients feel "disordered." What I hope to empower in learners is an upside-down way of relating in spiritual care, where vulnerability is power, painful disconnection leads to healing connection, the things ignored are to be the most welcomed, and embracing powerlessness as the measure of true power. Somehow in these "weak" ways of exploring grief and letting go, learners will continue to embody their own unique way of opening their hearts and minds for warm, soft, and compassionate care.

With this panoramic introduction of Christian mysticism, the gift of the body, and upside-down relating, I turn now to a closeup of how I help learners more skillfully relate to community and their own spirit. I will use the concept of Third Way Community, based on the theology of my former professor and Yale theologian, Willie Jennings, to highlight how I assess and intervene with how learners care for others, particularly with interreligious humility and justice-seeking awareness of biases. Then I will explore the concept of True Self, which I borrow from the Franciscan Friar Richard Rohr to highlight how I assess and intervene with how learners care for their own self, with spiritual self-differentiation and self-care.

Coaching for Interreligious Humility and Justice: Third Way Community

Soccer teams bring out the best and worst in one another. They reveal each player's strengths and weaknesses. It is tempting to blame or undermine teammates if the team hits a setback. It is also tempting to put self before the team. The most effective teams, though, create an atmosphere of belonging and inclusion, where each player knows their role, everyone commits themselves to shared sacrifice, and each person is celebrated as essential to the greater whole. How do I as the coach cultivate such belonging for a CPE team?

Big Heart¹⁰ is a black, Guyanese American male person in his 50s, who is Seventh Day Adventist. He entered our CPE team as a second-year resident, with a sensitive, compassionate, and caring spirit. He stated how excited he was to join a more diverse context than his previous. However, I started to observe discrepancies between how he related to his peers and patients. On the floor, Big Heart was joking, loud, and light on exploring distressing emotions. During CPE group, he was quiet and reticent to share his truth. He appeared disembodied and compartmentalized in the head. I wondered if his immigrant background or pastoral expectations shaped these discrepancies. Then one day, he entered the CPE office, visibly afraid, and stated that he did not want to go to CPE group today. He felt like he did not belong.

Relating to community—others, groups, and patients—provokes fear. Like Big Heart, I have experienced at times sweaty palms, a skipping heart, and a closed throat when I relate to my own CEC groups. Even as a seasoned spiritual care provider, I feel a mixture of fear and excitement when I knock on patients' room doors. I believe these fears come from a combination of fear of intimacy, fear of difference, and possibly most importantly, the fear of the unknown. Within CPE, every learner will face a positionality that is different and foreign to

them in their care. How might conversative theologies mesh with liberal, female bodies with male, white with black, queer with straight, veteran with civilian, theist with nontheist, neurodivergent with neurotypical, emotive with cerebral, withdrawing with assertive?

My third way theology explores the fears, restraining forces, and transformations that emerge from creating community across cultures, faiths, and positionalities. Much of the Christian Scriptures are trying to understand, embrace, and even restrict the "third way" communal explosion Spirit has unleashed. Somehow Gentiles, who once were outsiders and enemies of the Jews, are scandalously welcomed and embraced as God's chosen people too. And yet, fears were felt about how exactly they were to belong to one another. Jewish leadership was afraid of being assimilated by dominant culture and Gentiles feared losing their political allegiances. To make third way community, each subculture had to navigate how to join one another's stories and let go of previous practices. They did so what they held in common: a self-emptying God who turns the world upside down by drawing together diverse bodies and beliefs to form beloved community. As educator then, I use my third way theology to first consider how I select a resident class. I attempt to select a cohort of learners with a variety of differences: theologically, culturally, and positionally. At the same time, I look for traits they will hold in common: courage, compassion, curiosity, and as first or second year residents, a calling for spiritual care development.

As an educator, I recognize communal belonging ebbs and flows, as my vignette with Big Heart bears out. Part of my assessment and intervention within third way theology is a posture of interreligious and cultural humility. Willie Jennings champions the need for progressive Christians to rediscover their Gentile heritage, an outsider posture of feeling sensitively estranged and graciously welcomed into a new people and faith. As an educator then, I am a "Gentile" to each learner's lived experiences. I ask if they would welcome me into the social identities that make up their self-narration. With an upside-down way of relating, I pay special attention to affirming identities that are marginalized by dominant ideologies, which stands in alignment with ACPE being an anti-bias and inclusive organization. Whether through didactics or the group process, I attempt to build an inclusive culture that seeks to explore and celebrate a variety of identities, where differences enhance communal belonging. I invite guest speakers/educators to speak on their own identities through didactics, like black womanism, sexual orientation and gender identities, nontheist approaches to care, and veteran's perspectives with moral injury and PTSD. If learners take on a Gentile perspective to others as I do to them, they will begin see and experience the fullness of identities as gifts to incorporate and bless in their care.

I am keenly aware, however, of how the dominant ideology of white supremacy plays on the fears of difference and restrains the driving forces towards intimate belonging. For example, I witnessed a learner struggle to integrate how they automatically called a transwoman with a beard, "sir." I unpacked with a male learner their nervous energy around meeting alone with female patients. When I invited a black male to express their anger more, they shot back how their publicly expressed anger could get them killed. Furthermore, for myself, I have explored with learners how my body affords me the privilege to dress less professionally than others and how I am drawn towards belief-systems with a Higher Power. For me, I believe that no matter one's background or culture, we all have tendencies to relate to one another through the white supremacist patterns of self-reliance and selfishness. I assess behaviors of white supremacy, what Jennings calls "white self-sufficient masculinity," as conscious or unconscious behaviors that minimize difference through sameness, segregation, and superiority. When individuals and groups downplay their unique identities,

power differentials, and feelings (sameness), when they isolate themselves from others and act rigidly (segregation), or when they assert certainty and judgment over others (superiority), I assess they are operating from a distorted story that prevents embodied and compassionate connection with others. These mindsets, whether conscious or not, often lead to more disembodied–closed, cold, and compartmentalized–care.

To create an environment of multiplicity, interdependence, and humility, the opposite of sameness, segregation, and superiority, I invite learners to use the CPE group as a "practice field" to risk new ways of relating with cultural and compassionate humility, what I call "scoring a goal." Like the third way community of Jews and Gentiles, I believe differences from patients, peers, and systems will initially decenter individual learners of their assumptions, biases, and ideologies. But as differences become authentically explored, accepted, and "kicked around," similarities will also emerge, providing opportunities for learners to stretch their comfort zones in how they relate differently to difference. If learners are resistant to differences in others, I invite them to consider similarities with them, particularly those upside-down commonalities of distressing emotions, vulnerable needs, unfulfilled dreams, and powerlessness. ¹⁴

If learners could "kick around" both the similarities and differences with others they feel in their bodies, they may question how biases, assumptions, and theologies may be blocking how they see, hear, and care. Like my Jewish best friend did for me, I invite learners to reframe their philosophy/theology to better capture their lived experiences, as they reckon with their sense of power, privilege, and personality amidst white supremacist systems. ¹⁵ Of course, they may choose not to change or adapt their meaning-frameworks, which I will unpack more in my critical purchase. To assist those that desire to reframe, though, I invite learners to not necessarily eschew their religious/spiritual heritage, but rather to mine deeper core values already there. For example, at the end of Unit 3, learners present on their own image of spiritual care to demonstrate Level 1 excellence. In doing so, they often integrate their emerging self-understanding and ongoing care experiences with their spiritual orienting system and grounded values. When I hear learners present on some of their own images, e.g., Fellow Sojourner, Park Ranger, Wood-Worker, Rebel-Eve, etc., I experience the testimony that comes from experiencing third way community with patients and peers.

After Big Heart shared his fear about not belonging, I started to assess that Big Heart and the group were feeling the restraining forces of sameness, a flight from exploring differences. I intervened with Big Heart individually and the group. With Big Heart, I joined him in his fears of speaking his own truth, as I have struggled with my own social anxiety in group. I wondered if he could trust himself enough to voice this sensation with the group. When Big Heart did voice his feeling of a lack of belonging, I limited the defensive posturing of the group and invited them to join in his fears from their own lived experiences. I invited Big Heart to keep speaking about his immigrant experiences, a cultural particularity that was factoring into dynamics. The outcome is that not only did Big Heart feel belonging by the end of residency year, but he also tapped into parts of himself that he had silenced. By doing so, his care deepened, and he began to reframe his theology with core values that helped him minister to people his tradition had biases against: LGBTQ identity, mental health differences, and people of other faiths.

I choose third way theology because it informs me in how I educate for interreligious and cultural humility, as I teach learners to use differences and similarities to create bridges for belonging and compassionate caregiving.

Coaching for Spiritual Self-Differentiation and Self-Care: 16 True Self

One of the most important aspects of playing soccer is letting go. Whether a player makes a mistake, or a team wins the game, everyone must learn how to let go of the past to embrace the present. Rest and recovery become essential practices that help learners detach from the past. Rest allows the body to recoup, and recovery gives the mind time to integrate their experience. How do as I CPE coach build rest and recovery in the rhythms of spiritual care?

To re-summarize, my third-way theology emphasizes the transformation that comes through community. *Big Heart* initially felt "disordered" in his body with how he related to differences in others, but he chose to "reorder" his beliefs after working through these fears. When a learner feels disoriented like *Big Heart*, what anchors them during these unsettling moments? For me, I compliment my third way theology with my True Self theology.

When I work with learners, I operate with the assumption that they have a True Self: an undamaged essence *within*. For me, this is the center of a person, where sacredness resides and lives on after death. It is the place *within* of ultimate compassion, acceptance, and love. True Self gives us the courage to trust and humility to say, "I do not know." I have witnessed True Self, no matter anyone's background, appear thousands of times when patients' bodies fail them in illness or death, as essence takes over for ego and lovingly surrenders to something beyond. Every time I witness True Self, I am moved to tears, as I experience the holiness, love, and tenderness of God. For me, my driving theory of supervision is to empower learners to reclaim the leadership of their own True Self *right now*, where their spirit knows what bodies most need.¹⁷

However, our True Self often becomes hidden and distorted by ego. I define the ego, with the help of Richard Rohr, as the selfish parts of us that cling to external things that will grant them security, power, and esteem. These external attachments, which occupy our thoughts and drive our behaviors, are illusions to the True Self reality of a love-soaked world where everything we need lies within. 18 Learners often face their ego-attachments when they provide care, as do I when I provide education. Often ego shows up when I or learners want to be in control and overstep our boundaries. Behaviors may emerge, like fixing, advising, saving, or straightening out, ¹⁹ an impulse that Motivational Interviewing describes as the "righting reflex."²⁰ These interventions, for all good intentions, still miss what I describe as True Self spiritual care. This is the type of care that uses empathy, resonance, and openended questions to return patients back to their own truest source, their own True Self. As an educator, I attempt to model such spiritual care with learners, as we honor together our separate-self egos. When a learner is distressed, I attempt to meet them with True Self compassion. When they come to me as an expert, I may flip it around, "what about the expert that is in you?" True Self helps learner better recognize how compassion strengthens boundaries between patient and provider. We are not there to fix or save. One of my resident's care mottos brilliantly captures this sentiment: "we are just walking one another home."

Such self-differentiated boundaries are equally important with systems. Before discovering alcoholism in my extended family, I believed I could change systems through willpower and skill. Since embracing 12-step practices as part of my True Self theology, I continue to practice the powerlessness I have over others and the agency I have over myself. Such contemplative grounding has been essential to empowering learners to navigate a challenging and dysfunctional VA system. The CPE team feels the gaps and pressures of a

system, where veterans receive slow care and staff are overburdened. On top of that, our own department makes thriving difficult with extractive philosophies that diminish the body. These frustrations rightfully take up much airtime during interpersonal-relational time. Part of the balance is how learners use anger in their care: will they withdraw in discouragement, overwork to fix a system, or use anger to explore their patients' and their own laments? With my True Self theology in mind, I assess and intervene for how learners explore their unmet needs and use them to seek self-care. I intervene in a myriad of ways. Sometimes I may pivot educational time for learners to rest and reflect. Other times, I may invite learners to practice "letting the ball drop," if they are tempted to over-function and fill a gap in our system. Other times, I self-disclose how I screwed up, got hooked by the system's needs, and failed to prioritize my own self. My goal is to foster a culture of rest and recovery and grace for the times we fail our bodies. In the process, learners may explore their boundaries for self and others.

Conscientious is a biracial-Latino-Euro-American male person in his 50s, who is a veteran and United Methodist. He shows up early, leaves late, and consistently checks in with authority figures like me or his preceptors. He is incredibly reliable and caring. However, he has been able to name his fear of not getting things right and not being present to the moment when he ruminates on his many responsibilities. I interpret him at times emotionally holding on to patients. With my True Self theology, I assess that part of his caregiving disposition is harming himself, as his boundaries between self and others blur. Over the year, I have intervened by giving him permission to "let the ball drop" for system gaps and to embrace self-care practices as subversive. By doing so, Conscientious has embraced the playful child in him, and he has grown in his ability to leave on time and release his patients to prayer and their own resources. My True Self theology has helped Conscientious experience self-care and self-differentiation as essential to care.

I choose True Self theology because it informs me in how I educate learners to embrace their own spiritual authority, as I invite learners to trust their own internal essence in how they care for themselves and others with healthy boundaries.

Embodied Awareness and Choice: Internal Family Systems in Human Development

Introduction: Attunement as the Catalyst for Change

My crash-course in human development and trauma-informed care came as a special education teacher. I worked with middle school students with emotional and behavioral disabilities. Every day was an emotional rollercoaster. One moment, the students and I would be feeling at peace, encouraging one another, and learning. The next moment, the students would act out their trauma sensations in maladaptive ways: cussing, fighting, fleeing, and destroying the room. The daily vacillation between peace and chaos wore on me, but my students were my greatest heroes. I learned from them the power of resiliency, an assetbased interpretation of behaviors. If I could help students celebrate themselves, co-regulate their bodies, and get curious about their actions, their growing self-awareness could give them more agency over their lives.

My trauma-informed sensibilities have only been deepened over the last five years of providing hospital-based spiritual care. I believe attunement is critical to human development. Almost every major psychology theory emphasizes the need for children to experience attunement from their caregiver(s) to develop healthy brains. This experience of being felt, seen, and heard by another provides the calm, connection, and curiosity needed to self-regulate, grow, and learn.²¹ Our need for attunement never ends. It is the catalyst to expand and evolve our personality constraints. As an educator then, I provide attunement and compassionate resonance for the learners. Such attunement relaxes learners with love, so they may be able to get curious about their default way of relating. As learners become more aware of what is going on within them and turn external attunement into internal attunement, where they "parent" their own inner world, they will broaden their choices for engaged care. What I celebrate, or what I call scoring a goal in this soccer metaphor, is when learners courageously risk new interventions and stretch their own comfort zone in how they relate to others. In the process, their care will deepen, as will their self-understanding.

I ground my focus on awareness and courageous choices with two theories on human development. First, it may be of little surprise that I rely primarily on a somatic-based theory called Internal Family Systems, developed by Dr. Richard Schwartz. This theory combines family systems theory, psychodynamic theory, and parts theory to suggest that the unconscious and conscious sensations flowing through the body are expressions of nameable parts, various internal family members in tension and relationship with one another. This theory resonates with me, not only from own therapeutic healing, but because it values community and mindful speech to reframe one's self-understanding. With IFS, I hope to coach learners to develop spiritual trust, empathy, and deepened communication with themselves and others. My critical purchase, which I call self-transforming theory, is based on developmental psychology and the constructivist theory of Robert Kegan. Like IFS, self-transforming theory emphasizes self-authorship and self-differentiation. However, whereas IFS is more concerned about internal understanding of self, self-transforming theory provides a developmental framework of how one navigates cultural formation and individuation.

Coaching For Trust, Empathy, and Deepened Communication:²² Internal Family Systems

Soccer players develop skills through practice. Soccer drills give players the opportunities to try on new skills with increasing levels of discomfort, so that during games, they will have the muscle memory and mindset to endure when their bodies are pushed to the edge. Soccer drills need a balance between repetition and surprise. Repetitive drills build muscle memory and new drills expand the brain's ability to imagine and adapt. How might I as the CPE coach provide repetitive and spontaneous spiritual care practices to prepare learners for the game of patient-centered and interfaith spiritual care?

Sensitive Warrior is an African American male person in his 40s, a combat veteran, and ordained minister in the Christian Methodist Episcopal Church. During his first verbatim, he sobbed uncontrollably, as a care experience with death triggered his own memories of death from childhood and on the battlefield in Iraq. Furthermore, a few months later, he encountered a veteran with no legs, which caused an automatic, triggering response to flee the room. From my trauma-informed background, I assessed Sensitive Warrior to be in a flight behavior due to feeling the trauma sensations and survival energy. Without dovetailing into the therapeutic, the opportunity before Sensitive Warrior and I was how to first regulate and attune to the body with calm and care, an essential skill I teach throughout the year.

When residents begin their year, I focus on three aspects during Unit 1 curriculum: emotional literacy, body-based mindful techniques, and communication skills. I moved these skills to the first unit due to trial and error. The previous resident group, I overemphasized narrative and social identities and came to realize halfway through the year, the residents struggled to communicate with emotions and needs, open-ended questions, and reflective listening. (I likely contributed to some of these gaps with my own communication style as well!) One of the spontaneous spiritual care "drills" I sprinkle throughout education days are body-based mindful techniques, such as body scans, compassionate meditations, mindful walks, humming, yoga, drumming, drawing, poetry readings, etc. Resmaa Menakem calls exercises like these, "soul nerve exercises," which help learners draw conscious and loving attention to their sensations, thoughts, and feelings.²³ After participation, I often have learners reflect on these exercises. I am attempting to help the learner befriend their body with self-regulation and grow its capacity to endure the stressful toll of grief work and crisis response.²⁴ By doing so, I hope learners will become more comfortable with the painful and joyful sensations that flow within and across their bodies in care.

Such bodily awareness and settling skills are essential to my understanding of personality and human development. With Internal Family Systems as my framework, I assess each learner not as a singular entity but as a dynamic of multiple affects and parts.²⁵ With my soccer metaphor in mind, learners are not just individual members of my soccer team; they also have their own soccer team living within them. Due to each learner's lived experience and culture, parts of their history get frozen in time and lodged in their internal family psyche. For example, in my own intra-family from a German-turned-white culture, I have a loud four-year old, a hurt and anxious 4th grader, a snappy teenager, a self-effacing servant, a pastor-like internal critique, a sexy star, etc. These family members show up in different contexts with various affects. When I am flooded with emotion, am in tears and speechless, usually one of my wounded parts, what IFS calls our *exiles*, has been activated. When I am reacting with snappiness or overcompensating with speed, one of my reactive parts called our *firefighters* has been unleashed. And when I am measured, gregarious, or heady, my protective parts called our *managers* are in charge. Like any family system, these family members are in tension with one another, habitually repeating the same patterns while expecting different

results.²⁶ If I am not attuned and aware of these sensations within, my personality keeps me in autopilot, where I relate from my past experiences instead of the present moment.

Due to the nature of crisis-oriented care and the reflective group process, I theorize that the CPE process brings forth some of the wounded, reactive, and proactive parts of each learner. I believe each learner's personality forms and evolves around the wounded parts they are trying to protect.²⁷ When these wounded parts are touched upon by patients, peers, or systems, I am quick to attune to learners' wounded affects-often vulnerable, child-like affects-and those adolescent, reactive responses of fight, flight, and freeze. With my traumainformed focus on resiliency, I believe there are no "bad parts" within learners, even if behaviors, like shouting at peers or failing to show up for a shift, are maladaptive. Rather, parts of learners are burdened by certain narratives and stuck in repetitive patterns. With a trauma-informed lens, I am aware learners cannot learn or grow if they feel overwhelmed by the wounded or reactive energies within them.²⁸ For example, when Sensitive Warrior was grieving or fleeing due to his trauma-sensations, I did not try to correct them. Rather, by attuning to him and giving him space to regulate, we could reflect on these experiences after the fact when he felt safe enough in his body to learn from them. At the same time, this theory failed a learner of mine who struggled to both tolerate and revisit discomforting emotions in the moment and after the fact. I will address these concerns in the critical purchase at the end of the entire paper.

Once learners get more in touch with their bodies, they have the opportunity to use language to reflect on their experiences, which may in effect help them reframe their selfunderstanding and meaning. Consistent "drills" in spiritual care education are consultations and weekly reflections. During verbatims or individual supervision, I draw on the language of IFS to help learners reflect on their care experiences from their narrative history. My early interventions often explore bodily-based similarities, those feelings between the patient and themselves. Once adequately felt, I may ask an open-ended question about what "part" may have been at play. If we had not yet explored IFS, which I teach experientially with Play-Do early in Unit 2,²⁹ I may invite them to reflect on who or what the patient symbolized to them. Sometimes I may even take a guess of the dynamic at play. Did the patient bring out, for example, a learner's "mothering spirit," "drill sergeant," "Sunday-School answers," or "scared schoolboy." I take guesses at these dynamics to invite learners to reject or expound on them in their own language. I do not use this theory to try to label any part of a learner that they can only self-describe. I find the parts-language useful in absorbing feedback. I believe it helps a learner normalize the multiplicity within themselves, to experience grace for the contradictions, tensions, and ambiguities within themselves. As learners explore parts of themselves that show up in care—an emotion, bias, behavior, reaction, etc.—I believe they will gain more clarity on how they may have projected, attempted to fix, or got intertwined with a patient's part. Consultations provide conceptual knowledge and reflective speech to further gain awareness, so in their next encounter, they may have more choices for care.

Although each of us has our own beautiful ego-family, I theorize we are also much more than our ego-personality. Just like my True Self theology, Inner Family Systems suggests we are each guided by our Self, an undamaged essence within. When I or a learner have "stepped back" from ourselves and are experiencing what Schwartz calls the 8 Cs—compassion, courage, curiosity, connection, clarity, confidence, creativity, calmness—we are being led by our True Self soul. The goal of IFS is to help put the Self back in leadership, so that learners could act with courage and try something new, outside the familiarity of their personality patterns. One of the strategies of Self-leadership is to relax the most protective

and defensive parts of learners' personality through gratitude and compassion. If learners experience their own coping strategies with resilience and grace—doing the best with what they had—they may then develop the self-acceptance needed to explore whether they wish to modify their behaviors or not. When learners touch back into their Self, they re-center with their sacred purpose and unique identity.³⁰

As an educator then, I am aware of the variety of protective parts learners may employ in consultation, such as humor, competence, and venting, or assertiveness, compliance, and withdrawal.³¹ These protective parts will only become more entrenched if I or the CPE peer group do not first honor and celebrate these habitual responses. Part of my own work is to recognize when one of my own parts gets activated by a learner's part, such as the times my easy-going-star part got frustrated by Conscientious' compliant, rule-following behaviors, the times my self-sufficient part got frustrated by Big Heart's self-acquiescing to the group, or the time my people-pleasing smiley part got threatened by Sensitive Warrior's withdrawn and solemn part. This dynamic may happen at group level too. Therefore, I may intervene when the peer group, the group as a whole, 32 becomes entrenched with a consultee, seeing what the consultee fails to recognize. If a consultee remains defensive, I assess the learner, for that moment, is not yet ready to explore that aspect of themselves in care, and thus, I invite the group to redirect by joining on a similarity, like a shared struggle or curiosity. My goal is to help learners get in touch with their own Self and 8 Cs. From that place of abundance and self-acceptance, learners are more willing to try something different from their personality defaults and risk new interventions.

I assessed Sensitive Warrior hungering for language to explore the various aspects of himself that showed up in care. He mentioned, often with a mixture of humor and fear, that he "was tired of meeting me" in the veterans he visited. Over the year of consultations, Sensitive Warrior kept exploring parts of himself he met in care: son, dad, pastor, husband, drill sergeant, military buddy, etc. With my IFS interventions that honored his protective and reactive parts, I invited him to reflect on the coherence and meaning in his fragmented life. As he grew in his Self-confidence and made new meaning, he started to try new interventions in care, by consequence scoring goals!: exploring emotions instead of conceptual thoughts, using open-ended questions instead of assumptive statements, staying centered when he felt nervous about a war trauma surfacing. I used IFS to help SW feel empathy and trust for his own bodily sensations and mindful language to reflect on how he related to others, so he could translate those skills of empathy, trust, and communication into patient care.

I choose Internal Family Systems as my main theory because it combines body-work and reflective speech to help learners expand their awareness of their relational defaults and feel centered enough to risk brave, new, and mindful choices for care.

One critical purchase of IFS is that it is an evidence-based therapeutic model. By using the model conceptually for language within consultations, I do not employ it therapeutically. Such therapy would look like a learner having a corrective experience through an inner dialogue between parts. Even more, I do not press learners to use this personality framework or disclose more than they care to about their own inner world. As with any didactic or conceptual framework, I invite learners to take what is useful and leave the rest. Furthermore, another critical purchase of Internal Family Systems is it fails to highlight a developmental roadmap of growth. To complement IFS, I turn to self-transforming theory of Robert Kegan, to emphasize how learners develop their own spiritual authority in relationship to the communities that form them.

Coaching for Authority and Ethical Professionalism: 33 Self-Transforming Theory

During soccer practices and games, players constantly navigate when to be independent and when to be interdependent. At times, it is best for the player to be healthily selfish: to dribble by themselves, take the shot instead of passing the ball, and take risks to move out of position. At other times, it is best for the player to put the team first: pass the ball, stay in their position, and move in response to their teammates. How do I as the coach help learners in spiritual care to grow in their spiritual autonomy and simultaneously adapt to the ethical needs of their surroundings?

I discovered my critical purchase of IFS when working with Passion. Passion is a half-Indian, half Jewish female in her 30s who converted to Christianity. I was impressed by her fluidity in self-disclosing her lived experiences and her compassion to be with those suffering. But during CPE group, I became annoyed with her limited impulse control, as she quickly interrupted peers. Over the year, we used IFS to work on somatic practices and putting language to her lived experiences. Her ability to use silence and set boundaries flourished within care. However, I became confounded at how much energy she put into being liked by her peers and patients. This mindset prevented Passion from engaging from her own inner purpose and conviction. Over the year, it was difficult for Passion to write her theology and set goals for her own individual growth. What follows is how I adapted my theory.

I believe much of CPE is helping learners lead from the inside-out versus the outside-in. Inside-out leadership is being guided by one's own needs, values, and principles. Outside-in leadership is being dictated by cultural norms and societal expectations that form us. I still remember when an educator thanked me for showing up to an on-call shift. I responded, "well, it's my job, no big deal." And she responded, "you have a choice to show up, so thank you." As a system pleaser, I felt both angered and surprised by her intervention. It made me reflect on the choices I have to self-author my own existence, to claim my truth and needs as I chart my future. I use a similar approach to learners who are wrestling with the "oughts," and "shoulds" in their head. "Who says you need to respond that way?" may be my intervention. I want the learners to investigate whose story and meaning they are living by.

I base these self-led interventions on the self-transforming theory of Robert Kegan. As a constructivist, Kegan hypothesizes that the core human need is to keep creating meaning. And as developmentalist, Kegan uses stages to frame growth. Combining these two, Kegan believes we slowly transform our lives with massive perspective-shifts, mind-shifts akin to "personal Copernican shifts." ³⁴ Three of the five stages of self-transforming theory are as follows: Stage 3–The Socialized Mind; Stage 4–The Self-Authoring Mind; Stage 5–The Interconnected Mind. Studies suggest that 58% of the adult population remain at Stage 3, 35% arrive at Stage 4, and only 1% of adults arrive at Stage 5. One of the most crucial shifts is between Stage 3 and Stage 4, where adults develop from being fused to relationships and external sources of authority towards being fused to one's inner authority, identity, and principles. ³⁵ As I mentioned above, this crucial mind-shift is helping learners move from outside-in compliance into inside-out leadership.

Most of my CPE residents fall on a continuum between the early stages of Stage 3 to the early, middle stages of Stage 4. I assess learners who celebrate their community, denomination, and culture but also may struggle stating their own needs and boundaries to be in Stage 3. I assess learners who are clear about their values, identity, and ethical

principles, but may struggle with viewing things with impermanence, paradox, and surrender to be in Stage 4. This theory enables me to assess learners on a continuum and to differentiate my interventions. For Stage 3 learners, my interventions involve drawing out future Stage 4 independence, e.g., the learner's feelings in care, advocating for individuals in IDT teams, finding their own voice in their writing. For example, with both Big Heart and Sensitive Warrior, I assessed them on the threshold of Stage 4, and thus encouraged both of them to claim and risk their own inner truth and feelings within group and consultation. For learners already at Stage 4, my interventions invite learners into Stage 5 interdependence: e.g., surrendering to lack of control in present moment, exploring the paradoxes in their belief systems, experiencing groups and others from a multi-perspective-systems lens. In my upcoming educational paper, both Anchor and Catalyst were in early stage 4, as they knew what they wanted and at moments struggled with surrender and seeing conflict from a group lens. Although I am in Stage 4 myself, I appreciate the Stage 5 invitation into interdependence. As learners embrace and celebrate their heritage and culture (stage 3), and lead from the inside-out from their values and unique identity (stage 4), they return to community with their values to keep recreating their sense of self in relation to others (stage 5).

With self-transforming theory in mind, I was able to reassess my expectations of Passion. What I came to realize is that due to her trauma history, she was just beginning Stage 3, coming recently out of Stage 2 adolescent-like-impulses. Her Stage 3 concerns with community and belonging were important for her development. Therefore, instead of being annoyed at her lack of spiritual authority with peers and patients, which would be beginning Stage 4 behaviors, I could rather celebrate how much she grew by working on listening to and accommodating others, Stage 3. Many of my interventions involved her working on mutuality and commonalities, especially with peers and patients that she felt disgust towards. Her outcome was one of learning to listen better, interrupt less often, and grow in trust.

I choose Self-Transforming theory because it helps me differentiate how to work with learners on various paths of growth in how they relate to others (Stage 3), themselves (Stage 4), and systemic interdependence (Stage 5).

As I conclude this theory, I recognize how Stage 4 foci of leading from the inside-out could be co-opted and misinterpreted by the dominant ideologies of white supremacy, individualism, and self-sufficiency. As an educator intervening for Stage 3 moving to Stage 4, for example, I may invite learners to use "I statements" so learners could differentiate themselves from their cultural heritage and community. For learners from Asian or African heritages, who emphasize the interconnected "we," such self-differentiation may not be culturally sensitive or the best intervention. In response, I return to the relational model of Internal Family Systems and my Third Way community to invite learners to consider how their relational and cultural identities shape their identity. I desire to showcase how relationships and cultures affect the self-understanding of learners who lead with embodied awareness and conscious choice.

Empowering Flow: Play and Agency in Transformational Learning

Introduction: Feeling Stuck to Trusting Community

My sophomore year of college, I led my soccer team to finish second in the nation. The playoff push was a thrilling ride but during the season it was anything but. Not only did we have a poor record before the playoffs, but I had lost my confidence. It was as if I was playing soccer in the mud. What had given me such vitality was now a burden and source of frustration. I have felt similarly writing these theory papers. Writing has often been a gift of mine. But the past year, I have felt muddy in the head, unable to articulate my heart and emerging theories with simplicity. In both these ruts, I got unstuck with the help of relationships. Relationships provided me with the play and relaxation to accept my situation, see it from another perspective, take on new behaviors, and experience finally, the gift of embodied flow.

These two experiences help me empathize with learners, who will likely experience deep agony and great joy in the learning process. As an educator, I believe learners are always learning, as they are biologically wired to take in new information and use it to solve problems, construct new meaning, and adapt behaviors. However, I theorize learning is often catalyzed by new experiences that disorient the learner with feelings of confusion, anxiety, and a loss of confidence.³⁶ These feelings could be as quick as a few seconds or last years. For example, a learner could feel anxious the first few times they navigate their new clinical assignment until they learn it and feel confident again. Or a learner could still feel rudderless years after a profound loss. As an educator, then, I anticipate learners to feel unsettled in cycles throughout the year. With a trauma-informed approach, I have no desire to poke, prod, or stir up learner's anxiety. Rather, I invite learners to lean into both self and community when these sensations arise. From expression in community comes a depth of learning.

I experience newfound insights, or those a-ha moments, to be the fuel and motivation for CPE learning. Whether these a-ha moments are small, like a learner naming for themselves the gift of silence in care, or monumental, like a learner naming for themselves a newfound vocation, CPE provides opportunities for a learner to not just declare their learning but refine it through action and practice. In other words, CPE gives learners the chance to "flow" and embody their newfound learning in spiritual care. Flow is that experience of "being in the zone," where one loses oneself to the present moment with clarity, confidence, and connection. As I have experienced with soccer, spiritual care, and writing, flow leads to internal satisfaction that is less attached to an outcome, but paradoxically, flow leads to optimal performance.³⁷ Examples of flow in CPE are when learners feel embodied in mind, body, and spirit, such as instinctually reflecting on a part of themselves that shows up in care or trusting one's authority as they assess and intervene in care. My goal is for learners to use those disorientation moments to move through a communal learning cycle that ultimately leads to flow.³⁸

I ground my theory of learning on transformational learning, with a focus on the emergent learning cycle.³⁹ Like Rohr's theological framework of 1) order, 2) disorder, and 3) reorder, this learning cycle framework, which I reframe it with my own language, moves from stages of a) disorientation to b) exploration to c) "a-ha" reorientation and to d) flow. I will structure the rest of the paper by this framework and use Howard Gardner and Stephen Brookfield to support my educational assessments and Yvonne Agazarian to support my

group theory. As I draw together my coaching metaphor, I will outline three different coaching styles that inform my interventions: i) coach as motivator, ii) coach as instructor, and iii) coach as protector. In conclusion, I will explore my critical purchase of my overall theory of authentic embodiment, along with some limitations of viewing CPE education through my lens of soccer team.

Disorientation:

As I implied above, I believe learners often experience short and long cycles of learning. In my context, short cycles of learning may be learning how to chart electronically, pray with interfaith, patient-centered language, provide trauma-informed crisis care, and connect over feelings. Longer cycles of learning often involve radical perspective-shifts, akin to the self-transforming theory of Kegan. These longer cycles of learning could be a learner's newfound awareness and meaning around their shifting identity, losses, and family system interactions. I believe many shorter cycles of learning overlap and get resolved within longer cycles of learning. But as I mentioned, both cycles begin with moments of feeling disoriented.

Anchor, a black female person in her 40s, from a non-denominational background, experienced a shorter cycle of learning within a longer cycle of learning. She exudes calm and is quick to listen, so she challenged herself to offer critique. When she did take initial risks to offer critique with peers, initially her voice would shake, and she would look at me, not in the eyes of a peer. At the same time, she revealed another disorientation, a longer cycle of learning she was living out. As group began, she declared that she was deconstructing her faith due to church hurt and family tragedies. Despite naming this deconstructive season, at the end of Unit 1 evaluations, her peers invited her to share more of her soul, identity, and lived experiences. With both these short and long cycles of learning, I assessed Anchor wavering between disorientation and exploration, taking risks in community at moments and then reverting to self-isolation at other moments.

I relate to Anchor and other learners who are hesitant to bring their learnings to group. With Systems Centered Theory as my group theory, I am all too aware of how each time group begins, no matter how many times the group has met before, the first stage of group is "flight," an anxious move away from intimate community into our separate-self concerns. When I feel that our group is feeling fear or distracted with their own separate-self concerns, I may invite the group to name the distractions and fears that are keeping them away from connection. ⁴¹ By using the present moment to explore feelings of disconnection, learners start to build the muscles of sitting at the edge of the unknown, using discomforting feelings of avoidance, vulnerability, and ambiguity to build community together, which in turn will aid learners to engage their patient's own uncomfortable sensations.

To set a team of trust, I employ my first coaching style: i) coach as motivator. When soccer players fall, make a mistake, or get stuck in a rut, they need a coach who roots them on and believes in them, no matter what. In conjunction with my True Self theology and IFS personality theory, I use attunement and compassionate engagement to build trust with individual learners. I believe learners continually need a balance between spiritual care and educational enrichment. I believe feeling cared for and believed in is a prerequisite for learning. Therefore, I assess when I provide spiritual care versus education. I pay special attention to meeting learners when they feel disoriented, defensive, or discouraged before rushing into exploring conceptual knowledge with questions or instruction.

The coach as motivator also shows up in how I set the vision of team belonging and common learning. With Systems Centered Theory in mind, I recognize that CPE learners need to keep revisiting their role, goal, and context.⁴² Therefore, I set the vision and continue to revisit expectations of CPE learning and the VA context through orientation, handbooks, syllabi, group processing, and individual consultation. When learners and groups feel disoriented and loss, I may return them to their individual learning goals or end our IPR sessions with, "how does what we are exploring relate to spiritual care?" This keeps the emotional taxing work of CPE focused on learning spiritual care. My motivational style is also collaborative and democratic, where I empower learners to take ownership of their learning. For example, at the beginning of most educational days, I set the vision for what I hope to accomplish, but then invite learners to consider their own needs for the day. Learners then collaborate with one another to set our schedule, and even at times, propose alternatives for learning due to their current needs. This sets a container for learners to self-direct their learning with the group, a crucial motivating factor for trusting community with one's own disorientation and unsettledness.

Exploration:

For me, playing catalyzes learning. Play is one of the primary reasons I choose soccer as my overarching metaphor. Play at its best is both demanding and fun, exhausting and inspiring. At the heart of playing is curiosity. With my trauma-informed IFS theory, I believe we fail to learn as effectively until we move out of survival mode into a curious, relaxed state. Such curious and relaxed states are often catalyzed by trusting and safe community. I attempt to foster an environment of play by naming that I am co-learning myself, and I desire to have fun in group! I never teach the same unit twice, as I consider both what newly energizes me and what the learners want to explore. If learners trust their disorientation with a playful community, they now have more perspectives and personalities to provide insight on their disorienting dilemmas. During an exploration phase, I assess learners experimenting with a range of ideas and concepts on their learning challenge.

As a special education teacher, I witnessed the brilliance of each of my students. Unfortunately, the K-12 educational system only focused on a few intelligences, like reading comprehension and analytical ability, that minimized and downplayed my students' other intelligences. In response to my experience, I attempt to cultivate a more expansive and playful learning environment for CPE learners. Using Howard Gardner's theory of multiple intelligence theory, ⁴³ I attempt to create "soccer training exercises" that honor the multiplicity of intelligences each learner possesses. For example:

IPR, improv-role-play games, and group consensus exercises enhance the intelligence of the *interpersonal learner*, whereas reflection papers and writing pauses during group enhance the *intrapersonal learner*. For the *linguistic learner*, I provide not just a common reading for the unit, like a book or journal articles, but links to supplemental research. But for the *kinesthetic learner*, I utilize body-based mindful techniques and teach didactics with tape and diagrams on the floor, so learners could move through them. As a *visual* and *analytical learner* myself, I present my verbatim format with a 3x3 diagram, and use the whiteboard often to diagram concepts or visualize responses. For the *musical* and *naturalist*, I invite learners to reflect outside or use a song to capture their weekly reflection. Part of this play is not only to honor the 2-3 dominant intelligences of each learner, but to also stretch the comfort zone of all learners. By playing with their discomfort, learners start to gain confidence

by taking on new risks. For example, Conscientious reflected to the group that when we went out on a mindful walk without our shoes on and repeating a mantra from Thic Nhat Han, he kept repeating to himself, "this is f---- stupid." But by the end of the walk, he could hear the birds, feel his heartbeat, and he wondered what else he was not hearing in spiritual care moments.

When learners are in an exploratory and experimental stage of learning, I am more ready to employ my coaching style of ii) instructor. When soccer players are at practice, it is not uncommon to hear the whistle blow, so the coach could pause play to instruct. As an educator, my role as instructor is not limited to didactics, which I often lead dialogically and experientially, but also to those moments I invite learners to reflect about alternative possibilities. For example, I may get curious how a learner thinks their peers see them in individual consultation or provide books and journal articles on spiritual assessments to explore patient care. I may "blow the whistle" within a relatability group to mediate communication if I perceive peers talking past one another or "blow another whistle" during individual supervision when a learner may minimize an aspect of themselves.

With Anchor, who was learning how to navigate critique and explore her changing faith, I honored her intrapersonal intelligence by pausing dialogue in groups for reflective, writing breaks. I also supported her analytical and linguistic intelligences by giving her concepts during consultations and inviting a guest speaker to speak on black womanism. In the process, as Anchor tried on a range of ideas and concepts to help her explore her own learning, she started to gain more confidence in trusting her own voice. She started "playing" with offering critique through different techniques and using different reflection prompts and projects to express her emerging theology. I used my coaching styles of motivator to encourage Anchor to trust community and coach as instructor to showcase different concepts and perspectives that Anchor could explore.

"A-Ha" Reorientation:

Once a learner has explored a range of ideas and had time to reflect on them in relationship to their distress, the learner discovers their "a-ha" moment, where they land on a newfound insight. At the heart of reorientation is publicly expressing their learning, as learners reframe their disorienting experience with settled clarity. Such moments, I theorize, presuppose an environment where learners feel empowered to voice their own sacred truth.

The restraining forces of an empowering community are what I shared in my theology paper, those forces of sameness, segregation, and superiority that stifle authenticity. These "one-up" dominant forces shape the interpretations of how learners may perceive each other and myself as authority figure. Unlike autocratic forms of coaching, I use my role as coach to empower learners to openly challenge me and interrogate the systems of power around us. I theorize that as learners feel empowered to risk critique with me, they will feel even more empowered to claim their own truths in relationship to others. Using the critical theorist of Stephen Brookfield, I employ techniques that interrogate power. I may state openly the power I have over learners in the evaluative process and inform learners at orientation about their rights, ways to file a complaint, and other support systems like the PAG. I also invite feedback at the end of each unit about what I could improve, and I often invite learners to playfully push back against my own interpretations, ideas for the department, and personality quirks.

Ironically, I believe such pushback comes from my third coaching style, iii) coach as protector. In soccer, the coach has a role in defending individual players from outside critique. Furthermore, the coach set boundaries for the team, like standards for players, to protect team culture. As an educator, I protect the team culture by holding learners accountable to clinical hours, their CPE assignments, and other professional expectations of our VA system. I also attempt to protect individual learners from administrative overreach or from feeling scapegoated and marginalized by their peers. My goal as protector is to empower the CPE group to continually process how power affects relationships. For example, the current resident class has had difficult, process-oriented discussions throughout the year. They explored, for example, how racial, gender, and neurotypical biases affected the group process, and how clashes in learning styles caused tension.

My group theory helps me engage with power and authority. After the first stage of "flight," I believe groups move into the second stage of "fight." In group life, this is a move towards intimacy, as feelings of frustration and irritation get projected onto others. Usually, groups may find themselves bonding over things they are against, like hospital systems or staff chaplains, until they move toward expressing frustration towards one another. When fighting happens between peers, I attempt to provide a settling presence for these uncomfortable moments, as learners practice their own regulation and conflict skills. With a trauma-informed IFS theory, I do not believe it is optimal for the body to stay in "fight," so I invite learners to subgroup with feelings of frustration, irritation, and similarities. Or as the protector, I may call a timeout, to help learners regain their equilibrium when a "foul," such as labeling or accusing or attacking, has been committed against one another.

When I am feeling in my True Self space, I feel both nervous and excited when the CPE group moves toward the third stage of "killing the leader." These are those moments learners express their collective frustration with me and other educators for letting them down. If I could validate their feelings, acknowledge my role, and explore what else could be done collegially, the group could move into the fourth stage of "intimacy" and fifth stage of "work." ⁴⁶ These are those group moments when groups feel trusting, explore differences, and use humor to keep exploring the work of spiritual care development. By fostering an empowering environment of listening and pushback, learners will risk voicing their a-has throughout the year. As the coach, I am constantly balancing the criticism and needs within group life. What must I de-personalize as the authority figure? What must I respond to and tend to when I have missed a "foul" or let others down?

Catalyst is a Euro-American female person in her mid-30s who is LGBTQ+ and United Church of Christ (UCC). She is a fast learner. Her many "a-has" throughout the year keep the group excited and engaged. She actively challenges me and the group in a playful, depersonalized way, which reinforces her own convictions and passions. One of her longer cycles of learning was ministering to patients who were deeply apathetic. She presented three verbatims in a row, each on a different patient exhibiting apathy. Furthermore, during IPR times, Catalyst used group to explore her own beliefs about apathy from her lived experiences. As she kept exploring ideas and concepts, she finally made an a-ha for herself. She realized that she could embrace apathy in the room and could celebrate her care, even if the patient remained apathetic after her care. When I asked her recently about her learning with apathy, she stated she felt like it had been resolved. By claiming her a-ha, Catalyst now has ownership over disorientation.

Flow:

Once learners declare and expound on their newfound insights, there is a reduced emotional intensity to the initial disorientation, a calm and settled confidence. During this stage of learning, learners get a chance to refine their newfound insight through action and practice. This stage could be an optimal time to experience flow. In this stage, it is as if body, mind, and spirit almost magically sync, where embodied awareness and adaptive care flow together with ease and joy. ⁴⁷ With Bloom's Taxonomy in mind, these are moments where learners not only demonstrate their learning but self-evaluate their care and even create opportunities to pass on their learnings. I experience moments of flow when learners share a major unit project without any script, reflect with ease on a pain-point that used to trip them up, respond to a patient or peer with compassionate and skillful nuance, or lead staff-care initiatives on their own volition. Flowing with learning happens not just through talk but when something intangible shines forth from the learner. Their learning now inhabits them. Embodied knowledge now flows out of them.

Of course, moments of flow are fleeting, as the learning cycle inevitably starts again with disorientation. Furthermore, as I have mentioned ad nauseum, I theorize learners are going through multiple learning cycles at once, so in one aspect of their learning, such as providing rituals in care, they may be flowing, and in another learning cycle, such as reckoning with one's changing identity, they may feel disoriented. For me, this validates and honors the messy, contradictory, and ambiguous process of human becoming. It is never linear nor straightforward.

I hope it is evident how my theory of authentic embodiment expands beyond just my VA hospital context. My theory is applicable to any context that seeks to connect soul with role, exploring one's personal truths in relationship to one's professional skill. I have experienced from learners, past and present, that their big takeaways are not necessarily skills and techniques, but a deepening trust in their own self and sacred essence. They not only survived CPE but hopefully even thrived, as they faced and overcame barriers unforeseen or never imagined. My goal is that each learner leaves feeling empowered to keep risking the unknown of inside-out, compassionate, brave, and authentically embodied care. For me, kicking around sacred connection never ends.

Critical Purchase of Coach, Soccer Team, and Authentic Embodiment

I have experienced at least three critiques of my theory: a) what to do if a learner struggles with motivation to change; b) what to do if a learner prefers to learn independently instead of with the team; c) what to do if my "coaching" metaphor appears distancing, one-up, and not as connecting as other spiritual care education models that emphasize fellowship and mutuality.

Advocate is a Euro-American female person in her 30s who is neopagan and a veteran. She is religiously knowledgeable, energized by crisis response, and incredibly adept at navigating the complex VA system. She self-describes as being neurodivergent, with ADHD and PTSD, and revealed a challenging childhood. Her early behaviors in group were dominating discussion, lecturing others, missing social cues, and repeating how many "crises" she was currently in. She could assess emotion in others but struggled to embody affect. Throughout the year, Advocate experienced the most conflict directed at her, as the other group members were frustrated with her dominant and "take-charge" behaviors that she struggled to change, even after many conversations. When conflict arose, she shut down, withdrew, and rarely re-engaged. Advocate and I had an up and down relationship, as she avoided me during non-educational days but seemed to stay engaged during educational days. Her trust waned in me when I made a clinical decision not to grant her the floor she desired. I assessed she was not ready for a more advanced mentally acute unit. Around once every week or two, she had a pattern of withdrawing and avoiding patient care due to feeling emotionally dysregulated and distracted by her personal concerns.

Advocate presented as a confirmation to all three of my critiques: a) struggle to change: she grew in her one-to-one care but struggled to integrate feedback around her behaviors. She would swing from being highly defensive to emotionally shutting down. My theory and interventions with body-based IFS work did not always work, as her chronic pain and trauma history prevented her from accessing her body calmly and revisiting these painful emotions after the fact. b) prefer to learn independently: Advocate's own spiritual care image was the lone park ranger. With Howard Gardner's Multiple Intelligence theory, I assessed her as a brilliant analytical and linguistic learner, who often learned and worked independently through reading text and patient notes on the computer to solve problems. Her learning style and personality conflicted with the ways I prioritize interpersonal and intrapersonal learningembodied and emotionally attuned reflection within the CPE team. Her neurodivergence and/or trauma-history may have contributed to her challenge with communicating her own emotion. c) struggles with me as "coach": maybe because of my gender, similar age, and religious persuasion, Advocate respected me and the learnings I presented but her trust in me waned as I challenged her to relate with upside-down methods of vulnerability. Part of my curiosity is how my "coaching" around vulnerability might have pushed her away.

From my consultations about my dynamic with Advocate, I learned I could supplement my authentic embodiment theory through Kolb's experiential theory, Social Exchange Group Theory, and Maslow's Hierarchy of Needs. Kolb's experiential theory emphasizes a "thinking" and "doing" learning style, which prefers technical tasks over interpersonal activities. This type of learning cycle, which focuses on skill development, over and against transformation through disorientation, was more effective for Advocate, as I intervened by presenting her opportunities to work on different micro-skills in care. Since she was smart and related conceptual, I invited her to lead book discussions and supplemented her learning through journal articles.

Furthermore, I noticed that Advocate often provided care like a social worker, with concern first for a veteran's safety, physical, and financial needs, the second rung of Bloom's Taxonomy. I wonder if the lack of these in her childhood factored into her focus and assessment. Due to my lived experience, I often focus on higher rungs of Maslow's Needslike belonging, esteem, and self-actualization-with the assumption-at times incorrect due to my social privilege-that social work and other institutions are more adept at meeting the lower rung needs of physiology sustenance and safety. I had to work on my judgment of her care that emphasized solution-focused responses to physical needs, like providing phone chargers, researching for the veteran their eligibility status, and etc. I then invited her to explore with me how meeting these physical needs came out of her spiritual orienting system. Considering how Systems Centered Theory focuses on prioritizing the group dynamic instead of the individual one, I use Social Exchange Theory⁴⁹ for my group theory as a critical purchase, which puts primary emphasis on the individual within groups. Since my educator, MaryBeth, had a better relationship with Advocate, she provided consultation with Advocate around weighing the costs and benefits of CPE education for her goal as professional chaplain. How may the benefits of getting four units of CPE, getting ready for professional certification, learning new concepts, outweigh the costs of interpersonal learning?

The experience with Advocate presents me with further questions around how I evaluate one's capacity for both spiritual care education and professional spiritual care. Did Advocate present a learning challenge or a challenge with learning? Would an improvement plan have helped or further pushed her away? Despite the difficulties for me and the peer group, I ended up learning much about myself and the group process, particularly around the scapegoating stage within Systems Centered Theory. Our group struggled with the scapegoating group stage—"if she only left, it would be better"—and a consistent invitation to join around CPE group norms and professional expectations. The challenge for me was how to redirect Advocate back to the "practices of CPE" when she thought she did not need practice but was already ready for "the game of spiritual care."

The critical purchases from Advocate also reveal the limitations of any one metaphor or image. If I extend this metaphor, does that mean I am a coach on the sidelines, who does not participate with learners as a co-learner? For example, when I lead inter-personal relational time (IPR), am I the facilitator, participator, or both—the coach on the sidelines or player-coach kicking around connection? I wonder then about other images that are less sporty and emphasize being, mutuality, fellowship, and healing, such as the wounded healer, banquet host, and/or dance partner? Or does my image of coach presuppose empathy, trust-building, and mutuality built into it, like a Ted Lasso figure?

Altogether, though, my Christian mystic heritage warns against trying to prop up any concept, image, story, or even theory that takes one away from the unfiltered reality of divine and flowing love. My tradition teaches me that for every word I write or say, I may counterbalance that with stillness, silence, and unlearning. From that, I assume I will let go of this metaphor in the future and remake another one, as I continue to grow and learn from my CPE experiences.

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Endnotes:

¹ For me, I use the triad of body, mind, and spirit to capture a person's wholeness. I am less interested in trying to define each specifically, as a variety of fields use these words, along with 'heart,' 'soul," and "will" interchangeably. Re. Hebrew Scriptures, Enneagram, Interpersonal Neurobiology, ancient philosophy, etc. For me, if I had to define them loosely, the body consists of all the physical sensations flowing through us, the mind consists of how we interpret and pay attention to these sensations, and the spirit is where soul and divinity are one, opening one's heart to receive and create loving connection.

- ² I do not explicitly use Parker Palmer but his work on integration, "connecting soul to role," factor into my True Self theology. I desire learners to use the fullness of their personal selves to inform their professional practice.
- ³ Saints like Francis of Assisi, Teresa of Avila, Thomas Merton, and Howard Thurman belong to this tradition. The mystic is a "third-eye person who has moved from mere belief systems and belonging systems to actual inner experience." "The mystical gaze happens, by some wondrous 'coincidence,' whenever our heart space, our mind space, and our body awareness are all simultaneously open and nonresistant. I like to call it presence. It is experienced as a moment of deep inner connection, and it always pulls you, intensely satisfied, into the naked and undefended now. At that point, you either want to write poetry, pray, or be utterly silent." Richard Rohr, The Naked Now (New York: The Crossword Publishing Company, 2008), 29-30, 28.
- ⁴ For me, all the great religions, from their own unique vantages, are inviting us to wake up to what is real. In my Christian tradition, "any kind of authentic God experience will usually feel like love or suffering, or both. It will connect you to Full Reality at ever-new breadths and depths...Anything that draws you out of yourself in a positive way–for all practical purposes is operating as God for you at that moment." Richard Rohr, The Universal Christ (New York: Convergent, 2021), 51, 52
- ⁵ I hold to an incarnational worldview: "I want to suggest that the first Incarnation was the moment described in Genesis 1, when God joined in unity with the physical universe and became the light inside everything...everything visible, without exception, is the outpouring of God." Richard Rohr, The Universal Christ, 13. Furthermore, such incarnational view of "bodies within bodies" reflects my group theory, of Systems Centered Theory, which presupposes like Russian Dolls, that we are made up of systems within systems within systems.
- ⁶ See Jesus' teachings in Matthew 5-7, teachings much of institutionalized Christianity have downplayed.
- ⁷ For me, I tend to view suffering as being trapped in systems of addiction of our own making. Like Rohr, I hold that once I confront the powerlessness to affect my own change, I am more likely to turn to a higher fuel source. But often mistakes and suffering are the pathway to deeper understanding: "people who fail to do it right, by even their own definition of right, are those who often break through to enlightenment and compassion." Richard Rohr, *Breathing Underwater: Spirituality and the Twelve Steps*, (Cincinnati: Franciscan Media, 2011), 2-3.
- ⁸ Richard Rohr, The Universal Christ, 247-252.
- ⁹ The newly adopted ACPE outcomes and indicators look at Category B, Outcome 2 and 3, "Justice Seeking Awareness of Biases" and "Intercultural and Interreligious Humility" as essential outcomes in developing competent spiritual care.

- ¹⁰ I am taking a risk by choosing a name / descriptor for the learners I work with. These names are how I experienced parts of a learner's essence. Of course, no name does justification to the fullness of a learner. There are risks of mistyping. However, I prefer these names over and against stale initials.
- ¹¹ "There at the body of Jesus the futures of Israel and the Gentiles are being drawn to a new destiny in God. This does not mean the loss of identity but its expansion. But there is loss involved, especially for the Gentiles...it requires that the Gentiles turn away from other gods. The book of Acts reminds us that to follow Jesus is to already be a betrayer of one's people." Willie Jennings, *Acts*. Belief: A Theological Commentary of the Bible (Louisville: Westminster John Knox Press, 2017), 8-9.
- ¹² The differences among us are not an inevitable impediment for relationship but the very stage on which God will create a deeper and richer reality of communion with the divine life. God draws us without destroying us, without eradicating the differences among the creatures. Jews with Gentiles and Gentiles peoples with each other, all borne on the wings of God's desire toward life together in the Spirit of God. Ibid, 145.
- ¹³ "White masculinist self-sufficiency is a way of being in this world that aspires to exhibit possession, mastery, and control of knowledge first, and of one's self second, and if possible of one's world. The formation of the self-sufficient man has always been the great temptation for Christian formation because Christian formation has always been so close to it: one who is self-directed, never apologize for strength or ability or knowledge, not given to extremes of desire or anger, hardly the same as a crucified slave who cried and prayed to God for help." Willie Jennings, *After Whiteness: An Education in Belonging* (Grand Rapids: Eerdmans, 2020), 29-32.
- ¹⁴ Due to MaryBeth's mentorship, I have adopted *Systems Centered Theory* as my group theory. The language of "joining on similarities" by connecting over shared emotions is central to this group theory.
- ¹⁵ I use Emmanuel Lartey's simple phrase to navigate how I educate learners to navigate differences and commonalities, cultures, and unique identity: "we are like all others, some others, and no other."
- ¹⁶ The newly adopted ACPE outcomes and indicators look at Category B, Outcome 1,"Self-Care" and Category C, Outcome 2, "Relational Boundaries" as essential outcomes in developing competent spiritual care.
- ¹⁷ "When this happens to you, you are now a living paradox: at one and the same time utterly connected to everybody else in a compassionate and caring way, and absolutely free to be your *own self*. Your identity comes from within. You will want to love and serve others, but you do not use them or need them to define yourself either positively or negatively. Such people know *you* very well, because *they* are out of the way." Richard Rohr, *The Naked Now*, 137-139.
- ¹⁸ Richard Rohr, Breathing Underwater, 5.
- ¹⁹ I adopt this language from Parker Palmer's *Circle of Trust* practices.
- ²⁰ The Righting Reflex in Motivational Interviewing, https://www.youtube.com/watch?v=17qHqklweYM
- ²¹ Daniel J. Siegel, founder of the theory of interpersonal neurobiology, connects secure attachment with neural integration, mindfulness, and self-regulation: "We use the concept of 'attunement' to examine how one person, a parent, for example, focuses attention on the internal world of another, such as a child. This focus on the mind of another person harnesses neural circuitry that enables two people to "feel felt" by each other. This state is crucial if people in relationships are to feel vibrant and alive, understood, and at peace. Research has shown that such attuned relationships promote resilience and longevity." *The Mindful Brain* (New York: W.W. Norton and Company, 2007), xii-xiv.

²² The newly adopted ACPE outcomes and indicators look at Category C, Outcome 1,"Empathy" and Category D, Outcome 1 and 2, "Develop Spiritual Care Relationships" with skilled communication and interventions as essential outcomes in developing competent spiritual care.

- ²³ I am disappointed I could not include more of Resmaa Menakem's work in my theory. He suggests reptilian-based, bodywork is key to counteracting racial bias, white body supremacy, and other forms of intergenerational trauma. "Recent studies and discoveries increasingly point out that we heal primarily in and through the body, not just through the rational brain. We can all create more room, and more opportunities for growth, in our nervous systems. But we do this primarily through what our bodies experience and do–not through what we think or realize or cognitively figure out... a calm, settled body is the foundation for health, for healing, for helping others, and for changing the world." My Grandmother's Hands (Las Vegas: Central Recovery Press, 2017), 13, 152.
- ²⁴ "Learning to settle your body and practicing wise and compassionate self-care are not about reducing stress; they're about increasing your body's ability to *manage stress*, as well as about creating more room for your nervous system to find coherence and flow." *Ibid*, 155.
- ²⁵ "Multiplicity transports us from the conception of the human mind as a single unit to seeing it as a system of interacting minds. This shift permits the same systems thinking that has been used to understand families, corporations, cultures, and societies to be applied to the psyche. The mind then becomes just a human system at one level, embedded within the human systems at many other levels." Richard Schwartz, *Internal Family Systems Therapy*, (New York: The Guilford Press, 1995), 17.
- ²⁶ Richard Schwartz labels our ego-family with three categories, the managers, exiles, and firefighters. *Ibid*, 46-52.
- ²⁷ "The way many people react to trauma sets up a polarization between parts that are exiled and those that are trying to protect and run the system. The more the hurt, rageful, or sexually charged exiles are shut out, the more extreme they become, and the more the managers and firefighters legitimately fear their release. So they resort to more extreme methods of suppression. The more the exiles are suppressed, the more they try to break out, and all three groups become victims of an escalating vicious cycle." *Ibid*, 46.
- ²⁸ With the seminal releases of *The Body Keeps the Score* by Bessel Van Der Kolk and *Building Resilience to Trauma* by Elaine Miller-Karas, several organizations, like Community Resilience Model, have expounded on the resilient zone, that place where people feel regulated and settled. To try to help people grow and reflect when they are outside their own resilience zone is often counterproductive.
- ²⁹ As an experiential, interpersonal, and visual learner, I created a didactic where learners use four colors of PlayDo to create a figurine of their inner world. I have them sculpt different symbols and shapes without telling them yet what they represent. Throughout unfolding dialogue, I slowly unveil the roles of managers, exiles, and firefighters, and ultimately their undamaged essence, their Self. Learners have shared that this has been an instrumental didactic in their self-understanding.
- ³⁰ I find watching videos of Richard Schwartz sharing about his theory to be as informative, if not more, as he is often embodied in his presentation on his theory of Self. *Introduction to Family Systems Q&A*, https://youtu.be/BiCGcVcmzzg.
- ³¹ The Enneagram has been an extremely powerful resource for my own growth. I appreciate not only how Enneagram classifies types based on their dominant intelligence, emotion, and driving motivation (body, heart, and mind), but also how they classify people based on strategies for getting needs met. Some people are assertive (Type 3, 7, 8), others compliant (Type 1, 2, 6), and others withdraw (4, 5, 9) to get their needs met. When people do not get their needs met, some cope with a positive outlook

(Type 2, 7, 9), others move into problem-solving (Type 1, 3, 5) and others express themselves reactively (Type 4, 6, 8). Don Richard Ruso and Russ Hudson, *The Wisdom of the Enneagram*, (New York: Bantam Books, 1999), 59-68.

- ³² My group theory is Systems Centered Theory. Yvonne Agazarian argues that every group is a system made up of at least three parts: individual person, group member, and group as a whole. This theory believes that the goal for groups are to progress into multiple ways of viewing an experience, with a progression from moving from separate-self concerns to resonating with subgroups to ultimately experiencing information flow from the context of group as a whole. What this develops for CPE learners is the ability to let go of their separate-self interpretations and join the "dance" of group interdependence. Agazarian, Yvonne M. *Systems-Centered Therapy for Groups*. (New York: Guilford Press, 1997), 32-37.
- ³³ The newly adopted ACPE outcomes and indicators look at Category E, Outcome 2, "Ethical Practice and Professionalism" and Outcome 3, "Consultation and Feedback" as essential outcomes in developing competent spiritual care.
- ³⁴ Cf. Prologue of Robert Kegan, *The Evolving Self*. Cambridge: Harvard University Press, 1982.
- ³⁵ I find Kegan's writing to be dense and have found other internet articles more simple, like Alvaro Anspach's summary of Kegan's Theory of Development: https://aliveandthriving.substack.com/p/kegans-theory-of-development-framework or Natali Mallel's blog on How to Be an Adult: https://medium.com/@NataliMorad/how-to-be-an-adult-kegans-theory-of-adult-development-d63f4311b553.
- ³⁶ Disorientation as the first stage of learning is the basis of transformational learning. In this edited book, Jack Mezirow, Robert Kegan, Stephen Brookfield, etc. all reflect on this learning cycle. Jack Merizow and Associates, *Learning as Transformation: Critical Perspectives on a Theory in Progress*. San Francisco: Josey-Bass, 2000.
- ³⁷ Psychologist Mihály Csíkszentmihályi, one of the founders of positive psychology, has spent decades researching flow, what he calls the secret to happiness.
- ³⁸ In connection with my personality theory around growth, Resmaa Menakem likens resilience--that ability to endure and recover after setbacks--as a flow: "I often tell people that resilience is not a thing or an attribute, but a flow. Resilience moves *through* the body, and between multiple bodies when they are harmonized. It is neither built nor developed; it is taken in and expressed as part of a larger relationship with family, a group, community, or the world at large." *My Grandmother's Hands*, 51.
- ³⁹ I utilize the less-known four-phase model of the emergent learning cycle proposed by Marilyn Taylor. I am indebted to Dorothy Mackeracher's summary of this cycle, which is the underpinning of this section's insights about each phase. Dorothy MacKeracher, *Making Sense of Adult Learning*, 2nd edition (Toronto: University of Toronto Press, 2004), 64-70.
- ⁴⁰ I base these three different coaching postures based on a few sources. Kurt Lewin discovered three types of leaders, 1) an authoritarian leader known as the autocrat 2) a participative leader known as the democratic, and 3) the delegative leader known as the laissez-faire leader. Furthermore, Terry Real, therapist and founder of Relational Life institute explores the three roles of compassionate parenting: 1) nurturer 2) protector and 3) guide. For me, although I have three coaching styles, I lean towards the democratic leader who is nurturing and a guide. I struggle with my third aspect of coaching, the protective type who is firm with boundaries and unwavering with a perspective.
- ⁴¹ Susan P Gantt and Yvonne M. Agazarian, eds. *SCT in Action: Applying the Systems-Centered Approach in Organizations*, (Lincoln: IUniverse, 2005), 20.

⁴² Ibid, 8-11.

- ⁴⁴ In Stephen Brookfield's book, *Powerful Techniques for Teaching Adults*, Brookfield argues that the goal of education is to empower learners to challenge dominant ideology. He views the role of teacher as removing the barriers that threaten student autonomy, knowledge, and skills, but only students can empower themselves. For Brookfield, he believes the educator must take account of power dynamics, support learners claiming empowerment, illuminate how power works, and be transparent about one's agenda, while being open to democratic critique. The book provides a variety of process-oriented games that help educators consider how to frame discussion with power imbalances in mind. pp. 5-27.
- ⁴⁵ Susan P Gantt and Yvonne M. Agazarian, SCT in Action, 20.
- 46 Ibid, 20.
- ⁴⁷ Resmaa Menakem likens resilience to flow: "resilience is built into the very cells of our bodies. It is not a thing or an attribute *but a flow*. It moves *through* the body, and between multiple bodies when they are harmonized. It is neither built nor developed; it is taken in and expressed as part of a larger relationship with a family, a group, a community, or the world at large." *My Grandmother Hands*, 51.
- ⁴⁸ Dorothy MacKeracher, *Making Sense of Adult Learning*, 56-63. In Kolb's learning style, he suggests we go through a four phase model of a) experiencing b) processing c) interpreting and d) experimenting. Each learner prefers one of these stages more than the others, which could be described as their preferred learning style: a) diverging b) assimilating c) converging and d) accommodating. Learners who are a) diverging prefer to feel and watch, are sensitive and imaginative, prefer to watch and take in multiple perspectives rather than do. Learners who are b) assimilating prefer to think and watch, who are concise, logical, where ideas and concepts are more important than people. Learners who are c) converging prefer to do and think, who love to solve problems and prefer technical tasks over interpersonal aspects. Learners who are d) accommodating prefer to do and feel, who use intuition over logic to lean into an experiential practical approach.
- ⁴⁹ Social Exchange Theory is used more in social work and economics, as it takes into consideration a capitalistic logic of exchange of goods, in this case, the rewards that come from group life.

⁴³ Howard Gardner, *Multiple Intelligences*. New York: Basic Books, 1993, 2005. The original eight intelligences are: visual-spatial, linguistic-verbal, logical-mathematical, body-kinesthetic, musical, interpersonal, intrapersonal, and naturalistic, with possibly a 9th geared towards existential-spiritual, and in a video I watched, Gardner even proposed a 10th intelligence, the ability to teach.