



**Center for Applied Research in the Apostolate**  
**and the**  
**Catholic Theological Union**  
*Survey of Lay Ecclesial Ministers*



The purpose of this study is to inform the process of creating and improving support programs that aim to address your needs and the needs of other lay ecclesial ministers who are based in the Chicago area. **Your responses are very important.** Please respond by marking an "X" in the appropriate boxes. If you do not know how to respond to a question, or if it does not apply, please leave it blank. Be assured that your responses are confidential.

A. Please enter your ID included in the email or letter:

B. Are you currently active in lay ecclesial ministry?

- 1. Yes
- 2. No

If the answer to the question above is "no," please **stop** here and return the survey unfinished. If the answer is "yes" please **continue** on.

0. How long have you been serving as a lay ecclesial minister? \_\_\_\_\_

1. What is your gender? (*Select one*)

- 1. Male
- 2. Female

2. Where do you carry out your ministry?

- 1. Archdiocese of Chicago
- 2. Diocese of Gary
- 3. Diocese of Joliet
- 4. Other

3. What is your marital/ecclesial status? (*Select one*)

- 1. Lay & Single
- 2. Lay & Married
- 3. Lay & Divorced
- 4. Lay & Widowed
- 5. Vowed religious
- 6. Other

4. What year were you born?

5. What category best describes your primary racial or ethnic background? (*Select one*)

- 1. African American/Black/African
- 2. Asian/Pacific Islander
- 3. Caucasian/White/Anglo
- 4. Hispanic/Latino(a)
- 5. Native American/American Indian
- 6. Other

6. What year did you begin serving in your current ministry?

7. What is your formal preparation for lay ecclesial ministry? (*You can select more than one*)

- 1. I do not have any formal preparation
- 2. I completed arch/diocesan training for lay ecclesial ministers
- 3. I obtained certification(s) in an area related to my ministry
- 4. I am in the process of obtaining a graduate theological or pastoral degree
- 5. I have a graduate theological or pastoral degree
- 6. Other, describe: \_\_\_\_\_

***If your answers to question #7 include response #1, skip to the line after question #9.***

8. *If you have formal preparation, what year did you begin initial formation for lay ecclesial ministry?*

9. *If you have formal preparation, what year did you complete/expect to complete initial formation for lay ecclesial ministry?*

***If your answers to question #7 do not include response #5, skip to question #15.***

10. *If you have a graduate degree referenced in question #7, did you pursue this degree to prepare for a particular lay ecclesial ministry?*

- 1. Yes
- 2. No (*skip to question #15*)

11. *If yes to question #10, after completing that degree did you work in the ministry you prepared for?*

- 1. Yes, years worked in this ministry: \_\_\_\_\_
- 2. No (*skip to question #15*)

12. *If yes to question #11, are you still serving in this ministry you prepared for?*

- 1. Yes (*skip to question #15*)
- 2. No

13. If no to question #12, what type of ministry did you later serve in?  
\_\_\_\_\_

14. If no to question #12, have you received additional training to prepare you for the ministry referenced in question #13 above?

- 1. Yes
- 2. No

15. Which category or categories best describe your current ministry? (Select your primary ministry in column one. If you are also engaged in another ministry, select your secondary ministry in column two.)

1. Primary      2. Secondary

Parish ministry

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 1. Pastoral Associate   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Parish Life Coordinator  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Parish Catechetical Leader<br>(i.e., DRE, CRE, RCIA)             | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Youth Ministry Leader  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Pastoral musician, Music director,<br>Cantor or Liturgy director | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Other parish ministry:<br>_____                                  | <input type="checkbox"/> | <input type="checkbox"/> |

Non-parish ministry

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 7. Diocesan administration                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Religious community<br>administration         | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Educational administration                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Campus ministry                              | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Hospital chaplaincy                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Healthcare administration                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Prison chaplaincy                            | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Social service / advocacy                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Counseling, spiritual direction,<br>retreats | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Not assigned                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Other ministry:<br>_____                     | <input type="checkbox"/> | <input type="checkbox"/> |

16. What percentage of people whom you were serving in your ministry in the last month could be described as:  
(the total should add up to 100%)

- \_\_\_ 1. African American/Black/African?
- \_\_\_ 2. Asian/Pacific Islander?
- \_\_\_ 3. Caucasian/White/Anglo?
- \_\_\_ 4. Hispanic/Latino(a)?
- \_\_\_ 5. Native American/American Indian?
- \_\_\_ 6. Other?

17. How well prepared do you feel to carry out your current primary ministry...

1. Not at all    2. Only a little    3. Somewhat    4. Very much

- |   |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. overall?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. based on your initial formal education and training? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. based on your more recent training opportunities?    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

18. In the last month, did you suffer from stress-related symptoms (e.g., anxiety, sleeplessness, depression, stomachache, headache, tiredness)?

- 1. Not at all
- 2. Only a little
- 3. Somewhat
- 4. Very much

19. How does your ministry work affect your stress level?

- 1. It reduces my stress level a lot
- 2. It reduces my stress level a little
- 3. It does not affect my stress level
- 4. It increases my stress level a little
- 5. It increases my stress level a lot

20. Are there any areas of your ministry you find stressful? Please describe the top three most stressful.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

21. What are the top three strategies that help you manage stress in the areas listed above?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

22. How would you characterize **your satisfaction** with your current ministry in the following areas?

	1. Not at all	2. Only a little	3. Some-what	4. Very much
1. Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fulfillment:

2. Sense of contribution to larger purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Sense of personal accomplishment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sense of meeting the expectations of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Utilization of gifts/talents/skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Life balance:

6. Amount of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Level of responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other:

8. Remuneration for ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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23. In your ministry, how much support do you experience from each of the following? *(select one response for each)*

	1. Not at all	2. Only a little	3. Some-what	4. Very much	5. n/a
1. Local bishop	<input type="checkbox"/>				
2. Clergy and religious	<input type="checkbox"/>				
3. Your spouse	<input type="checkbox"/>				
4. Your children	<input type="checkbox"/>				
5. Your extended family	<input type="checkbox"/>				
6. People in your parish	<input type="checkbox"/>				
7. Friends	<input type="checkbox"/>				
8. People <u>to whom</u> you minister	<input type="checkbox"/>				
9. People <u>with whom</u> you minister	<input type="checkbox"/>				
10. Spiritual director	<input type="checkbox"/>				
11. A support group	<input type="checkbox"/>				

24. How interested would you be in the following forms of training / support program?

	1. Not at all	2. Only a little	3. Some-what	4. Very much
1. Mentoring program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Classroom program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Online only program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Only in-person meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Program based on academic-style curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Informal, open discussion style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Field education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Program with both men and women participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Program with both lay and religious participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. An enhanced program of formation already in existence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. A stand-alone program that is separate from current formation programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Book-based program involving a mentor and not involving other participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Program taught in English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Program taught in Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Program taught in another language:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

25. What obstacles do you see to your participation in a training / support program for lay ecclesial ministers? *(Select all that apply)*

- 1. I would not be interested
- 2. I do not have time
- 3. My schedule is inconsistent/changing
- 4. I do not have computer access
- 5. I do not have access to transportation
- 6. My employer (if working outside the ministry) won't be supportive
- 7. My ministry supervisor won't be supportive
- 8. Other

26. How many hours could you commit to a training / support program on a weekly basis?

\_\_\_\_\_

27. Please provide information regarding the following items. *(if not applicable, leave blank)*

	24.1. How do you rate your competence in each of these?				24.2. How helpful would more training in each of these be to you?			
	1. Inadequate	2. Low	3. Sufficient	4. Excellent	1. Not at all	2. Only a little	3. Some-what	4. Very much
1. Theology in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Pastoral education in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Preaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Spiritual / retreat director	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Interpersonal (e.g., conflict management, communications)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Administration (e.g., budgeting, investing, and insurance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Personal skills (e.g., time management, stress management)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Intercultural skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Interreligious skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Teaching/Catechetics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Spirituality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Bible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Liturgy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Service skills (i.e., skills to enhance the well-being and satisfaction of those served in your ministry)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. English language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Spanish language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Other language(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Science-related knowledge/understanding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Practical computer or technology-related skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Speaking communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Writing communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. AV and other tech communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Social ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Medical ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Sexual ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. What would you find most helpful in supporting you in your current ministry? *(add more pages if needed)*

29. If you would be interested in participating in a focus group to help the Catholic Theological Union design support programs for lay ecclesial ministers like yourself, please provide your contact information.

1. Name \_\_\_\_\_
2. Email address \_\_\_\_\_
3. Postal address \_\_\_\_\_