



Article

“Ministry of Presence” as Emotional Labor: Perspectives from Recipients of Care

Amy Lawton ^{1,*} and Wendy Cadge ²¹ Chaplaincy Innovation Lab, Brandeis University, Waltham, MA 02453, USA² Bryn Mawr College, Bryn Mawr, PA 19010, USA; wcadge@brynmawr.edu

* Correspondence: amylawton@brandeis.edu

Abstract: This paper analyzes the work of chaplaincy and spiritual care from the perspective of care recipients. Chaplains call their work a “ministry of presence,” a term of art that is often unclear to many who are not chaplains. How else might we conceptualize “presence” in order to ground it in the social science literature? Using sociological theory, we show that care recipients may experience a chaplain’s work as emotional labor, specifically “other-focused emotional labor.” Based on in-depth interviews with a sample of 38 care recipients, we find recipients feeling reassured by the chaplain; being offered support and help by the chaplain; and not feeling judged by the chaplain. These findings enlarge sociological concepts about spiritual care to include what recipients experience as emotional labor and call for a broader engagement between sociologists of religion and emotions.

Keywords: chaplains; ministry of presence; emotional labor; spiritual care



Citation: Lawton, Amy, and Wendy Cadge. 2024. “Ministry of Presence” as Emotional Labor: Perspectives from Recipients of Care. *Religions* 15: 1135. <https://doi.org/10.3390/rel15091135>

Academic Editor: Franziskus Knoll

Received: 19 August 2024

Revised: 12 September 2024

Accepted: 17 September 2024

Published: 20 September 2024



Copyright: © 2024 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

1. Introduction

Emotion is central to many people’s experiences of religion, yet insights about emotional and connective labor are rarely deeply engaged by scholars in the sociology of religion. Emotional labor, defined as the management of one’s own and others’ emotions by paid workers, is one insight that has important potential for conceptualizing how members of the public interact with religious leaders. Such interactions occur in houses of worship as well as in individual relationships inside and outside of local congregations.

In this paper, we focus on chaplains—religious or spiritual leaders who work with a broad cross-section of the population mostly outside of congregations in contexts such as hospitals, the military, colleges and universities, and other public settings. Much of chaplains’ work takes place in one-on-one interactions with constituents who are diverse and often different from the chaplain in terms of religion, gender, race, ethnicity, and other factors. Chaplains frequently describe their work as a “ministry of presence,” a term with many definitions in the literature. Religious studies scholar Winnifred Sullivan describes the ministry of presence as a “minimalist, almost ephemeral, form of empathic spiritual care” (Sullivan 2014, p. 174) that centers on a “chaplain’s willingness to simply ‘sit with’ a client without anxious expectation” (ibid., p. 175). When chaplains speak of “presence,” they are usually describing how they work to create psychological, spiritual, and emotional spaces for people where and as they are (Cadge 2023). Although the term “ministry of presence” is nebulous to some, it is nonetheless axiomatic to spiritual care practitioners (Cadge et al. 2011; Jacobs 2008; McCormick and Hildebrand 2015; Nolan 2011). Yet observers are left to wonder how *presence* is something more than just being *present*, which would describe every person and every object in the setting, not just chaplains.

In this paper, we explore how constituents experience the work of chaplains and their ministries of presence. In listening to how recipients of care describe their interactions with chaplains in interviews, we did not hear recipients talk about what chaplains describe as a minimalist “sitting-with.” Instead, care recipients described how chaplains made them

feel and reflected on what sociologists of emotions and of work call the emotional labor that chaplains perform. Our analysis foregrounds the care recipients' experiences and emotions: how they felt reassured by the chaplain; how they were offered support and help by the chaplain; and how they did not feel judged by the chaplain. Our findings lead us to categorize the "ministry of presence" as a form of emotional labor. Using emotional labor as an analytic framework heightens the visibility of presence within social science and allows us to perceive what happens in the social worlds surrounding a ministry of presence. Through this analysis, we expand the conceptual toolbox in the sociology of religion and show how emotional labor offers conceptual clarity to the elusive concept of "presence"—as used by chaplains, religious studies scholars, and theological educators—which is itself fundamental to the practice of spiritual caregiving.

2. Background

Religious professionals, often but not always chaplains, speak in various theological languages of offering a ministry of presence. By presence, chaplains mean everything from being physically present to indicating divine presence to accompanying people through a range of life transitions. Chaplains carry out this work with patients, family members, students, prisoners, and others in the military, healthcare organizations, prisons, and a range of other settings.¹ The aim of the current study is to elucidate the concept of "ministry of presence" by using the sociological framework of emotional labor.

With its origins in theology and philosophy, presence is "a mystical, metaphysical concept, and as such, hard to define, hard to qualify, and is seemingly non-quantifiable" (Smith 2001, p. 306). Smith traces the history of presence from the Psalms to the philosophical writings of Martin Heidegger and Gabriel Marcel and, starting in the 1960s, to the nursing literature, where presence has been thoroughly theorized. Nursing is considered a "caring presence" (Covington 2003), which chaplaincy is as well, but a chaplain can also be a "faith presence" or a "sacramental presence" (Holm 2009). The distinction between a chaplain and other members of a healthcare team is not necessarily clear-cut. A taxonomy of chaplain activities in palliative care lists "convey a calming presence" as one of the intended effects of chaplain intervention but does not explain how the calming presence of a chaplain would be different from the calming presence of a medical professional (Massey et al. 2015). Presence has thus remained a murky concept to social scientists, even though "ministry of presence" is the term officially used by governments and institutions to describe what chaplains do (Sullivan 2014).

Researchers have made several attempts to define or delineate the ministry of presence in the work of chaplains. Presence "is short-hand for helping create or support psychological, spiritual, and emotional spaces for people as they are and where they are with difficult issues" (Cadge 2023, p. 80). Another researcher proposed that presence means "establishing an environment of care based on empathy, curiosity, and respect" (Adams 2019, p. 1155). Presence is slippery and is "dictated by the changing needs of the participants in each encounter" (McCormick and Hildebrand 2015, p. 68). Presence can also be defined by "a deliberate rejection of utilitarian action" (Sullivan 2014, p. 185). There is an ongoing discussion among chaplains and chaplain supervisors about whether presence can be considered an "intervention with therapeutic intent" (Massey et al. 2015).

Scholars have paid more attention to how chaplains offer ministries of presence than to how their work is experienced by those they serve. A survey we conducted in 2022 found that one in five Americans have interacted with a chaplain, largely through healthcare organizations. This article extends that work by exploring how members of the general population described their interactions with chaplains. In interviews, we consistently heard from respondents about interactions in which the chaplain enacted one or more definitions of presence, yet the stories were not relayed by respondents in the same language of presence used by chaplains. Instead, recipients of care recalled how the chaplain made them feel. This intentional evocation of emotion by a worker in another person is what

Karen Pugliesi calls, “other-focused emotional labor”—“efforts to help others manage distress, to enhance others’ self-esteem, and to mediate conflicts” (Pugliesi 1999).

The term “emotional labor” was coined by Arlie Russell Hochschild in her landmark study of flight attendants (Hochschild 1983). Hochschild described the processes of “surface acting” (faking emotion), “deep acting” (summoning emotion), and the “transmutation of feelings” (from a personal to a public product) to illustrate how employees maintain a desired emotional state during interactions with the public. The term emotional labor originally carried connotations of coercion and inauthenticity, but subsequent research has revealed ways in which emotional labor is also a positive experience and can confirm or enhance the laborer’s identity (Humphrey et al. 2015).

Hochschild first defined emotional labor as labor which “requires one to induce or suppress feeling in order to sustain the outward countenance that produces the proper state of mind in others” (Hochschild 1983, p. 7). There are two components to this definition: the management of one’s own emotions, or “self-focused emotional labor” (Pugliesi 1999), and the “efforts to change others’ emotions” (Seery and Corrigan 2009), which has been termed “other-focused emotional labor” (Pugliesi 1999). Much of the literature on emotional labor has prioritized self-focused emotional labor. One well-known definition of emotional labor, “the act of displaying the appropriate emotion” (Ashforth and Humphrey 1993, p. 90), describes emotional labor solely in self-focused terms. Yet the “effort of management over one’s own feelings will usually be made in order to create a desired emotional state in others” (Himmelweit 1999, p. 35), and how well we manage our own emotions may depend on the emotional labor of others (James 1989, p. 19). Other-focused emotional labor is thus integral to a complete understanding of emotional labor.

Chaplains are “privileged emotion managers” (Orzechowicz 2008). In contrast to the “emotional proletariat” of service and paraprofessional workers who are paid to interface with the general public (Macdonald and Sirianni 1996), chaplains’ emotional labor is self-directed and chaplains have greater structural resources, such as high levels of education and training, to aid in their emotional labor. Because chaplains are privileged emotion managers, it is less important to focus on standardization and routinization, key elements of emotional labor for the emotional proletariat.

The concept of emotional labor has been used across the social sciences to describe emotional components of work (Wharton 2009). Along with Hochschild’s study of flight attendants, other studies have focused on frontline service workers (Wharton 1993), teachers (Brown et al. 2014; Isenbarger and Zembylas 2006), first responders (Mastracci et al. 2012), and nurses (Hammonds and Cadge 2013). Studies describe both self-focused and other-focused emotional labor, and many studies point to the often-gendered nature of care work. Using the concept of emotional labor to describe the work of chaplains helps bring their identities as religious *workers* to the forefront. It is to say that what chaplains offer by their presence is, in fact, their labor.

3. Data and Methods

The Chaplaincy Innovation Lab partnered with the Gallup Organization to conduct the first nationally representative survey about the United States’ public’s experience with chaplains. An online survey was sent to members of the Gallup Panel in March 2022 and respondents who completed the survey were asked if they wanted to participate in a follow-up interview. A total of 233 out of 1096 survey respondents agreed to be contacted. We offered a USD 25 Amazon gift card as an interview incentive. We excluded anyone who self-reported that they had never met a chaplain. Between May and November 2022, we contacted 171 people for interviews and garnered a 29% response rate. Everyone who replied to the invitation was interviewed. Two researchers conducted 50 interviews over Zoom following a structured interview guide. The interviews generally lasted between 15 and 45 min and were recorded and transcribed. Thirty-eight interviews were with people who had interacted with a chaplain by the Gallup definition; the other twelve interview respondents had interacted with a congregational leader and were excluded from the

current analysis. The research was approved by the IRB at Brandeis University. The names of respondents are either first names used with permission or pseudonyms.

For the purposes of this research, we defined chaplains as “clergy or other religious guides or spiritual caregivers who serve people outside of churches or other houses of worship, in settings such as hospitals, the military, prisons, or institutions of higher education, to name a few examples.” Chaplains are currently required in the military, Veterans Affairs healthcare facilities, and federal prisons, and are also present in most healthcare organizations as well as growing numbers of community settings. In the national survey, 18% of people reported interacting with chaplains, most commonly through healthcare organizations. The survey questions asked respondents about the content of their interactions with chaplains, finding that chaplains most often offered support through listening, prayer, and providing comfort. We explored these themes further in interviews. The interview data presented in this analysis were garnered in response to the question, “Tell me about the chaplain. What have your interactions with chaplains or spiritual care providers been like?”

To analyze the interviews, one researcher performed manual thematic coding using Atlas.ti 22, qualitative coding software. The researcher coded interactions with chaplains as positive or negative. Two researchers then analyzed the interactions abductively. Abductive reasoning is often called “inference to the best explanation.” Abductive reasoning produces likely explanations for observed data without guaranteeing the truth of the conclusion. Abductive reasoning is frequently used in the social sciences to orient researchers to the best place to focus their attention (Tavory and Timmermans 2014). Because chaplains describe their work as “a ministry of presence,” but the phrase “ministry of presence” never appeared in an interview transcript, abductive analysis allowed us to think about a variety of other ways that presence might be described by recipients of care. We conceptualized presence as, among other things, created spaces, environments of care, and rejection of utilitarian action, following the literature on presence.

4. Findings

Across settings, chaplains encounter people who are in vulnerable times in their lives, whether that is because of a loss, a transition, stress, or something else entirely. As a matter of course, many chaplains respond to this vulnerability with something they call “presence.” In 38 interviews with people who had interacted with a chaplain, most interview respondents described the chaplain’s activities in terms of the emotional outcome the respondent experienced. Respondents reported ways in which their interaction with a chaplain evoked a feeling or managed the emotions of someone present, which is the definition of other-focused emotional labor on the part of the chaplain. Interview respondents were majority female ($n = 21$, 55%) with a mean age of 45. The majority of respondents were white ($n = 26$, 68%) and non-Hispanic ($n = 34$, 89%). Most respondents were Protestant ($n = 25$, 66%). Future research without the limitation of self-selected respondents is needed.

4.1. Chaplains Reassure Care-Seekers

Interview respondents did not report that the chaplain’s physical presence was reassuring in and of itself. Rather, most reported ways in which the chaplain they met actively reassured them emotionally. The chaplain’s physical presence was necessary but not sufficient for recipients of care to feel reassured about their difficult circumstances. We expected some respondents to report that the chaplain’s physical presence was in and of itself reassuring, but there was no evidence of this in our interviews.

When Jeff’s father was dying,

“The chaplain reached out to me because they were giving us the bad news and stuff like that and my aunties was crying and the chaplain was right outside the door and then he came in there and just pretty much put everybody’s mind at ease and just saying, the translation of life and what my dad’s going through. ...He was just sitting out there waiting, but he just knew that this family needed it.”

The chaplain did what he could to alleviate the doubts and fears of Jeff and his family, putting “everybody’s mind at ease,” and transforming a situation through his response to what “this family needed.” Although the chaplain did not perform a utilitarian action that could change the family’s situation, he was nonetheless actively shaping the situation with not only his physical presence but also his emotional reassurances.

Another example comes from Matthew. Matthew, who took his young son in for surgery and was shown around the children’s floor by the chaplain, also said that the chaplain “put us at ease” with his actions: “Aside from that practical stuff, [the chaplain] also spent some time praying with us, addressing some of the spiritual side as well, trying to put us at ease as best as he could.” The chaplain helped Matthew and his son in a variety of ways—not through a wholesale rejection of utilitarian action, but by simultaneously taking the time to address their emotional states. Matthew’s chaplain, like Jeff’s, was engaged in emotional labor.

A chaplain can provide reassurance not just by putting someone’s mind at ease, but also by affirming whatever the recipient of care is feeling. For example, Jamie met a chaplain when her infant daughter was diagnosed with cancer. Jamie was comforted when she expressed her anger to the chaplain and had that anger validated:

“When we got the diagnosis that it was cancer, it was just that earth-shattering moment where I was like, ‘This doesn’t happen. This is a one-month-old baby.’ . . . I felt so angry and just having the chaplain there to voice my concerns to, but also to let me know, like, ‘Hey, it’s okay to feel angry and it’s okay to be upset’ . . . I’m okay to be angry in this moment and having someone of the religious background kind of confirming that for me was really, really helpful.”

The chaplain was able to reassure Jamie that her response to the situation was rational and acceptable. The chaplain’s emotional validation was an important part of Jamie’s experience. A chaplain might describe this as standing with Jamie in the tension between the world as it is and the world as it should be—an important element of presence—which Jamie described as “confirming for me” that anger was an acceptable response.

4.2. Chaplains Offer Support and Help

More evidence of chaplains’ emotional labor is found in cases where respondents say that chaplains are supportive and helpful. In these cases, being supportive or helpful is a demeanor that the recipients of care perceived in the chaplain, without necessarily naming any type of support or help provided. The operative part is the offer of support and help. As Hochschild noted, “the emotional style of offering the service is part of the service itself” (Hochschild 1983, p. 5). The offer on its own, even if no practical support or help is eventually given, creates a positive impression in the care-seeker—evidence of other-focused emotional labor.

Karla met a hospital chaplain when her brother-in-law was dying. Of the chaplain, she said, “His demeanor, he was a very comforting person. He didn’t try to push his religion on you and he even said that it didn’t matter what religion you were. He was just there to help in any way that he could.” Karla did not name practical ways that the chaplain could or did help, but she was comforted by the chaplain’s offer of assistance. It is reasonable to assume that the chaplain made the offer in part to make Karla feel a certain way.

Kate described the support that she received from chaplains the night that her stepfather died:

“I ended up being the only one who stayed awake the whole night, so I sat there and did that. But [the chaplains] just were generally trying to be supportive and kind and asking like, ‘Do you need a water?’ They were just kind of like, I don’t want to say nurses for the people visiting but that’s kind of what it felt like.”

Kate was able to describe what the chaplains “felt like”—“nurses for the people visiting”—without being able to explain exactly what the chaplains did, besides offer her a water. Kate resonated with the environment of care provided by the chaplains—a

characteristic of presence—but did not see the chaplains as faithful or sacramental per se, reporting instead an emotional response that the chaplains evoked.

Like Kate, Cayce also met a chaplain in connection with her stepfather’s death.

“She was very warm and inviting, and she wasn’t super preachy, which I really enjoyed. I liked that she didn’t trying to use that opportunity as a, ‘Well, let me try to preach to you.’ Just was more of, ‘Okay. What can I do to help you get through this difficult time?’ That’s the biggest thing I remember.”

Cayce specifically enjoyed that her experience of chaplaincy was non-religious. Instead of religion, she associated the chaplain with an offer of help to “get through this difficult time.”

4.3. Care-Seekers Do Not Feel Judged

Recipients of care widely found chaplains to be nonjudgmental. It was the first thing Amalia noticed when she met a chaplain after enlisting in the military:

“[The chaplain] was an individual that you knew you could talk to, you know you wouldn’t [be] judged by. . . He was one that was truly an open individual, and nonjudgmental, so he made it easy for me to just know that I could come talk to him. . . You didn’t feel like you had to hide anything.”

In Amalia’s recounting, the internal state of the chaplain is an unknown. He may or may not have been as nonjudgmental as Amalia perceived him to be. However, we can know from Amalia’s account that the chaplain was conveying a nonjudgmental stance. Indeed, she mentioned it three times. This is another aspect of a chaplain’s “presence” that can be described through the lens of emotional labor. The chaplain effected the feeling of nonjudgment in Amalia.

Christina encountered a chaplain when her father, with whom she did not have a good relationship, was dying. Communicating her internal difficulties to the chaplain was helpful to Christina:

“I had a lot of guilt and stuff that I had to get off in my past. I felt like a horrible, horrible person. I didn’t have the best relationship with my father. So being able to communicate that to somebody was helpful and [the chaplain] wasn’t judgmental at all, just wasn’t.”

While Christina felt like she deserved judgment for her prior relationship with her father, the impact on Christina indicates that the chaplain performed emotional labor to lessen Christina’s feeling that she should be judged.

Jamie, who above found reassurance that her anger was a valid response to her daughter’s cancer diagnosis, also reported that she continues to seek out chaplains in difficult moments because she knows that they will not judge her for her feelings: “And it just felt like, yeah, I could be more open with them than I could with other people in my life because they came from a place of understanding and nonjudgment.”

Nicole was an in-patient for depression when she encountered a chaplain. She worked with a chaplain who led group sessions and classes and met with care-seekers one-on-one. Given the stigma associated with mental health problems, Nicole particularly valued that the chaplain was nonjudgmental.

“It was spiritual in a sense, but it was also the teaching and just the, ‘I’m here for you.’ And he would come talk privately as well, if you wanted. I think he came to, yeah, he did come to my room once, too. And just the warmth, the understanding, comfort, just being there and not being judgmental.”

Nicole described the chaplain’s affect as “here for you” and “just being there,” phrases that evoke presence but do not describe what attributes the chaplain brought into a situation. A particular important attribute of the chaplain to Nicole was that the chaplain was there in a nonjudgmental capacity.

5. Discussion and Conclusions

Given its prominence in studies of chaplaincy and spiritual care, we expected to hear a lot about presence in these interviews. However, the language of presence was virtually absent. In listening for talk of presence amongst care recipients, we heard them talking about emotional labor. Emotional labor has a value component by definition. In the case of the ministry of presence, we heard that a chaplain's success is not measured in classical terms of cost-efficiency, as with "pecuniary" emotional management (Bolton and Boyd 2003, p. 291), but can be measured in other terms, without reference to business outcomes. Its value is firmly located in the emotional state produced in the recipient of care.

This paper highlights the possibility of using emotional labor as a central concept in the study of spiritual care, where the sociology of emotion has not been central. From the perspective of care recipients, we did not hear about the chaplains' "faithful" or "sacramental" ministry of presence, which the theological and chaplaincy literature suggest. Instead, we discovered accounts about how chaplains made care recipients feel. Through a sociological lens, a ministry of presence can be conceptualized as a subtype of caregiving emotional labor. Previous studies have not utilized such a conceptualization and in fact have excluded some types of religious workers, such as chaplains, from studies of emotional labor altogether.

As shown, the recipients of care describe other-focused emotional labor on the part of the chaplain and do not find the chaplain's physical presence to be particularly salient. While chaplains themselves have reason to continue to use the language of presence, that language appears to have no meaningful resonance for recipients of care in this study. Using the language and framing of emotional labor provides more leverage to decode what actually happens in chaplaincy interactions from the perspective of care recipients, and may be usefully extended to others who receive care from religious professionals in a range of contexts. We suggest that we have added to the definition of presence by associating it with emotional labor. This framing makes presence more interpretable to social scientists and may be more accessible to some recipients of spiritual care.

In this study, we cannot speak to what the chaplains did to create feelings but can inductively construct a narrative that explains the relationship between chaplaincy and how respondents reacted to a chaplain's care. This is both a strength and a limitation of the study. It is a strength because recipients of care, or what we call the demand-side of chaplaincy, are rarely the focus of research, and in gathering data from recipients of care, we begin to fill an important gap in the research. The limitation is that this study provides no data about the chaplains in these encounters—what emotions they felt, what emotions they were trying to display, or what emotions they were trying to evoke in recipients of care. Relying on the prevalence of "presence" in chaplain self-reports (Idler et al. 2015; Jacobs 2008; Nolan 2011), it is reasonable to infer that, from the chaplains' perspectives, presence constituted a significant part of what they were doing/how they were being in these interactions, yet our study also highlights that recipients of care were not aware of this.

Author Contributions: Conceptualization, A.L. and W.C.; methodology, W.C.; formal analysis, A.L. and W.C.; writing—original draft preparation, A.L. and W.C.; writing—review and editing, A.L. and W.C.; funding acquisition, W.C. All authors have read and agreed to the published version of the manuscript.

Funding: This research was funded by the Templeton Religion Trust grant number 0380.

Institutional Review Board Statement: The study was conducted in accordance with the Declaration of Helsinki, and approved by the Institutional Review Board of Brandeis University (protocol code 21158R-E, approved 14 June 2021).

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: Data are unavailable due to privacy restrictions.

Conflicts of Interest: The authors declare no conflicts of interest. The funders had no role in the design of the study; in the collection, analyses, or interpretation of data; in the writing of the manuscript; or in the decision to publish the results.

Notes

¹ Other staff in these settings do not necessarily know what chaplains do because the theological language used by chaplains is a de facto “code language” that is not accessible to the rest of the team and can occlude the work of chaplains (Lee et al. 2017).

References

- Adams, Kevin. 2019. Defining and Operationalizing Chaplain Presence: A Review. *Journal of Religion and Health* 58: 1246–55. [CrossRef] [PubMed]
- Ashforth, Blake E., and Ronald H. Humphrey. 1993. Emotional Labor in Service Roles: The Influence of Identity. *The Academy of Management Review* 18: 88–115. [CrossRef]
- Bolton, Sharon C., and Carol Boyd. 2003. Trolley Dolly or Skilled Emotion Manager? Moving on from Hochschild’s Managed Heart. *Work, Employment and Society* 17: 289–308. [CrossRef]
- Brown, Elizabeth Levine, Christy Galleta Horner, Mary Margaret Kerr, and Christina L. Scanlon. 2014. United States Teachers’ Emotional Labor and Professional Identities. *KEDI Journal of Educational Policy* 11: 205–25.
- Cadge, Wendy. 2023. *Spiritual Care: The Everyday Work of Chaplains*. New York: Oxford University Press.
- Cadge, Wendy, Katherine Calle, and Jennifer Dillinger. 2011. What Do Chaplains Contribute to Large Academic Hospitals? The Perspectives of Pediatric Physicians and Chaplains. *Journal of Religion and Health* 50: 300–12. [CrossRef]
- Covington, Holly. 2003. Caring Presence: Delineation of a Concept for Holistic Nursing. *Journal of Holistic Nursing* 21: 301–17. [CrossRef]
- Hammonds, Clare, and Wendy Cadge. 2013. Strategies of Emotion Management: Not Just On, But Off the Job. *Nursing Inquiry* 21: 162–70. [CrossRef]
- Himmelweit, Susan. 1999. Caring Labor. *The Annals of the American Academy of Political and Social Science* 561: 27–38. [CrossRef]
- Hochschild, Arlie Russell. 1983. *The Managed Heart: Commercialization of Human Feeling*. Berkeley: University of California Press.
- Holm, Neil. 2009. Toward a Theology of the Ministry of Presence in Chaplaincy. *Journal of Christian Education* 52: 7–22. [CrossRef]
- Humphrey, Ronald H., Blake E. Ashforth, and James M. Diefendorff. 2015. The Bright Side of Emotional Labor. *Journal of Organizational Behavior* 36: 749–69. [CrossRef]
- Idler, Ellen L., George H. Grant, Tammie Quest, Zachary Binney, and Molly M. Perkins. 2015. Practical Matters and Ultimate Concerns, ‘Doing,’ and ‘Being’: A Diary Study of the Chaplain’s Role in the Care of the Seriously Ill in an Urban Acute Care Hospital. *Journal for the Scientific Study of Religion* 54: 722–38. [CrossRef]
- Isenbarger, Lynn, and Michalinos Zembylas. 2006. The Emotional Labour of Caring in Teaching. *Teaching and Teacher Education* 22: 120–34. [CrossRef]
- Jacobs, Martha R. 2008. What Are We Doing Here?: Chaplains in Contemporary Health Care. *The Hastings Center Report* 38: 15–18. [CrossRef] [PubMed]
- James, Nicky. 1989. Emotional Labour: Skill and Work in the Social Regulation of Feelings. *The Sociological Review* 37: 15–42.
- Lee, Brittany M., Farr A. Curlin, and Philip J. Choi. 2017. Documenting Presence: A Descriptive Study of Chaplain Notes in the Intensive Care Unit. *Palliative & Supportive Care* 15: 190–96.
- Macdonald, Cameron Lynne, and Carmen Sirianni. 1996. The Service Society and the Changing Experience of Work. In *Working in the Service Society*. Edited by Cameron Lynne Macdonald and Carmen Sirianni. Philadelphia: Temple University Press, pp. 1–26.
- Massey, Kevin, Marilyn Barnes, Dana Villines, Julie Goldstein, Anna Lee Hisey Pierson, Cheryl Scherer, Betty Vander Laan, and W. Thomas Summerfelt. 2015. What Do I Do? Developing a Taxonomy of Chaplaincy Activities and Interventions for Spiritual Care in Intensive Care Unit Palliative Care. *BMC Palliative Care* 14: 10. [CrossRef]
- Mastracci, Sharon H., Mary E. Guy, and Meredith A. Newman. 2012. *Emotional Labor and Crisis Response: Working on the Razor’s Edge*. London: Routledge.
- McCormick, Steven C., and Alice A. Hildebrand. 2015. A Qualitative Study of Patient and Family Perceptions of Chaplain Presence During Post-Trauma Care. *Journal of Health Care Chaplaincy* 21: 60–75. [CrossRef] [PubMed]
- Nolan, Steve. 2011. Hope beyond (Redundant) Hope: How Chaplains Work with Dying Patients. *Palliative Medicine* 25: 21–25. [CrossRef]
- Orzechowicz, David. 2008. Privileged Emotion Managers: The Case of Actors. *Social Psychology Quarterly* 71: 143–56. [CrossRef]
- Pugliesi, Karen. 1999. The Consequences of Emotional Labor: Effects on Work Stress, Job Satisfaction, and Well-Being. *Motivation and Emotion* 23: 125–54. [CrossRef]
- Seery, Brenda L., and Elizabeth A. Corrigan. 2009. Emotional Labor: Links to Work Attitudes and Emotional Exhaustion. *Journal of Managerial Psychology* 24: 797–813. [CrossRef]
- Smith, Thomas D. 2001. The Concept of Nursing Presence: State of the Science. *Scholarly Inquiry for Nursing Practice: An International Journal* 15: 299–322.
- Sullivan, Winnifred F. 2014. *A Ministry of Presence: Chaplaincy, Spiritual Care, and the Law*. Chicago: University of Chicago Press.

-
- Tavory, Iddo, and Stefan Timmermans. 2014. *Abductive Analysis: Theorizing Qualitative Research*. Chicago: The University of Chicago Press.
- Wharton, Amy S. 1993. The Affective Consequences of Service Work: Managing Emotions on the Job. *Work and Occupations* 20: 205–32. [[CrossRef](#)]
- Wharton, Amy S. 2009. The Sociology of Emotional Labor. *Annual Review of Sociology* 35: 147–65. [[CrossRef](#)]

Disclaimer/Publisher's Note: The statements, opinions and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of MDPI and/or the editor(s). MDPI and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions or products referred to in the content.