

ANABAPTIST THEOLOGY AND CONGREGATIONAL CARE

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A Personal Perspective

All of us have roots, our history and life experiences, which shape our perspectives. My roots are imbedded in the history and theology of the Mennonite Brethren. My earliest recollections of a caring church are of a small rural Mennonite Brethren congregation in Northwest Oklahoma where I grew up. My grandfather served the church as a lay pastor. Pastoral practice was defined as *Seelsorg*. The small rural congregation was made up of hard-working farm families who were rich in faith and strong in community.

My most vivid memory of congregational care comes from my teens. My cousin, who was also a teenager, was believed to have fallen into a swollen creek on my grandfather's farm following a torrential rain storm. We received notice of his disappearance about 4:00 p.m. We left immediately to be with the family. By the time we arrived at the farm a large group of people from the congregation had already gathered. The men formed a human dragnet across the pasture looking for clues of the whereabouts

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of my cousin. Several even entered the swollen creek with ropes tied to their bodies to keep them from sweeping down the raging torrent. Late that evening our worst fears were confirmed. The body was found. My cousin had drowned.

I recall the continuous flow of support for my aunt and her husband. While my grandfather, our pastor, grieved the tragedy, the church community was there to support and encourage both him and the family. The congregation cared. Not to respond with love and care would have been a violation of our personal and community values.

The theological assumptions and ministry practice which intuitively motivated the congregation to respond to our family crisis were rooted in Mennonite/Anabaptist tradition. Three foundational assumptions form the basis for an Anabaptist theology of congregational care; they focus on discipleship, ecclesiology and ministry (Bender; Durnbaugh; Friedmann; Klaassen; Stayer, et al.; Weaver).

Theological Assumptions

Jesus is the Norm

Sixteenth century Anabaptists were not willing to simply reform the church. They wanted to reconstitute the church in the pattern of the first century. They believed that the will of God was revealed in the life, teaching and ministry of Jesus. For them the Christian life was more than simple belief in Christ. One must also follow him in life; i.e., obey his teaching and follow his example. They believed that it was better and more certain to build on Christ and his teaching than to rely on the traditions of the Church. The true church consisted of adult believers who sought to order their lives with Jesus as the norm.

This belief that Jesus is the norm for the Christian's life and ministry is one of the central tenets of the Believers Church tradition. Jesus is more than the one who died in the place of humanity. He is also Lord, the ruler of the Kingdom of God, and as Lord he is to be obeyed and followed. To obey and follow Jesus means that his teaching and example become the standard for those who would be part of God's kingdom.

Jesus, the norm, provides the link between discipleship and servanthood. To be a disciple is to be a servant, and to be a

servant is to follow Jesus' example and identify with those who suffer, i.e., sinners, the powerless, widows, orphans, outcasts, and strangers. This ethic combines love and sacrificial service and is reflected in Christ's redemptive act when he became the Suffering Servant for all people. This sacrificial act is the model for the believer's relationship with those who suffer and forms the substance of the ethical conduct of Christ's followers. Motivated by divine and compassionate love, believers are to so identify with the hurts and sorrows of humanity that they take upon themselves the sufferings of others.

In his response to humanity's hurt Jesus also taught his followers to be makers of peace and ministers of reconciliation. He rejected violence as a way to help the powerless and alleviate their suffering. Instead Christ's followers are to proactively promote and advocate justice and wholeness for all people. Peacemaking means not only to live peacefully with one another but to meet evil with good and to respond graciously and compassionately to people who experience brokenness and alienation.

The Church is Community

The nature of the church was one of the central issues of the Reformation. In contrast to the Reformers, Anabaptists were not interested in only reforming the church. They wished to recover the essence of the first century church. They understood the call to faith to have communal implications. While entrance into the church was by personal decision, through baptism the believer entered a covenant of new life with God and with a living and identifiable community of faith. One could not, therefore, be a Christian and refuse fellowship in the community of faith or fail to serve as a member of that community.

Anabaptists, believing it was difficult to follow Jesus given the evil influence in the world, instituted community admonition and exhortation. Through baptism the believer came under the discipline of a biblical people — a discipline the believer helped make and enforce. They believed that through the practice of a disciplined community, a strong and true church could be maintained. The important ingredient in a disciplined community was the power of the community to forgive sins, to bind and to loose.

The Anabaptists also understood the church to be a con-

crete visible community of faith in contrast to the Reformers' notion of a hidden or an invisible mystical phenomenon. Faith for the Anabaptists could, therefore, never be a personal, individual or private matter. Faith was communal and visible. To carry on activities in a selfish, individualistic manner without thought as to its effect on others was considered a gross sin, causing one to be shunned by the community.

For the Anabaptists, commitment to Christ and to the community was symbolized by sharing one's possessions with people in need. George Blaurock, when called before the council in Zurich to defend the Anabaptists' understanding of community, indicated that while he did not favor community of goods, "He who is a good Christian should share what he has, else he is none." Menno Simons reflected the broader practice of Christian community when he wrote that members of the community of faith

have divine love among them and that one member cares for another, for both the Scriptures and nature teach this. They show mercy and love, as much as in them. They do not suffer a beggar among them. They have pity on the wants of the saints. They receive the wretched. They take strangers into their houses. They comfort the sad. They lend to the needy. They clothe the naked. They share their bread with the hungry. They do not turn their face from the poor nor do they regard their decrepit limbs and flesh (Isa. 58). This is the kind of brotherhood we teach (Simons, II, 309).

Anabaptists understood that word and deed must be consistent. One's love for Christ must become concretely expressed in caring for people in need in the community of faith and in the world.

The Church Is Ministry

The pattern which emerged out of the Constantinian influence upon the church understood ministry to be the right and responsibility of the clergy. The Reformers attacked such clericalization of the church and argued that ministry was the right and responsibility of all believers. For Luther, justification by faith did not only mean a change in one's relationship to God, but included a life of service as a member of the "royal priesthood" (1 Pet. 2:9). He emphasized that members of Christ's

body are “not only his brethren, co-heirs, and fellow-kings, but also his fellow priests.” Moreover, the believer had a new status in which, paradoxically, one was both free and bound. Luther was emphatic: “The Christian is perfectly free lord of all, subject to none. A Christian is perfectly dutiful servant of all, subject to all” (Luther, 34, 354).

The Anabaptists embraced this new view of the church, but carried the reality to new levels of understanding. For them baptism was initiation not only into the body of Christ, but into ministry. Anabaptists, therefore, rejected distinctions between clergy and laity. Franklin Littell observes that their theology of ordination led them to these radical views. He notes that it was not that the Anabaptists had no clergy; it is more accurate to say that they had no laity. They believed that every Christian through baptism was “ordained” to ministry (Littell, 1963: 263). Walter Klaassen emphasizes that Anabaptism was a lay and not a clerical movement. Every believer was, in essence, a minister. Indeed, the secret of the growth of the Anabaptist movement was the fact that a Christian was a witness because of the profound sense of being a believer by personal choice, by baptism, by Bible study, and by congregational life where each was nurtured through encouragement, admonishment, and support (Klaassen, 20).

Ministry, therefore, is the right and responsibility of all. While trained persons are important in caregiving, professionals, including pastors and lay leaders, are not to replace the ministry all people of God have to those in need.

Caring practice for Anabaptists draws together these theological assumptions into an integrated whole commonly referred to as *Seelsorge* (soul care). Refusing to make distinctions between the spiritual and the secular, Anabaptists understood that the church should respond graciously and compassionately to all forms of human need. They were concerned with the believer’s life in the Spirit; they gave equal attention to the physical and material. For them *Seelsorge* drew on the rich resource of faith, the Scriptures, prayer, confession and repentance as they responded to the hurts of others. They were concerned with healing the hurts of humanity, offering sustenance and support in times of difficulty, providing guidance to people in search of meaning and purpose, and bringing restoration and reconciliation to broken relationships. Anabaptists did not understand health or whole-

ness to mean that people were free from pain or suffering, but that one could experience God's grace in the face of suffering and endure affliction without the loss of faith.

An Old Problem; A New Proposal

Unfortunately, one's theology and practice are not always congruent. The universal priesthood even today remains a declaration of principle rather than a realization even for congregations which find their theological roots in Anabaptist theology. More often than not the congregation is the object rather than the subject in its own calling and responsibility (Kraemer, 72). While Anabaptists have an excellent theology of congregational care, congregations have adopted current patterns by emphasizing the need for the caring expertise of pastors, pastoral counselors, and psychiatrists to the neglect of the caring ministry a community of faith can have.

Russell Burck in a very helpful article entitled "Pastoral Care and the People of God" proposes a radical shift from current caring practices in our society. Contemporary practice operates on a three tiered model.

Primary Level: professionally trained care givers including psychiatrists, pastoral counselors and other health care specialists.

Secondary Level: pastor and selected trained lay persons (deacons and elders).

Tertiary Level: the congregation.

Burck proposes turning this model on its head and returning to a more biblical model by making the congregation the primary caregiver. With this "new" model the pastor and selected lay persons form the secondary level of care giving and the professionally trained psychiatrists, pastoral counselors and other health care specialists the tertiary level of care.

The proposed model does not mean that professionally trained care givers or pastors and selected trained leaders in the congregation are no longer important. The role of the competent and fully trained professional is not replaced by the congregation. Pastors and specialists will and must continue to carry out their vital caring functions. The Burck model, reflecting Anabaptist theology, places the congregation at the center

of ministry and calls for the rightful recognition, affirmation and validation of the congregation's appropriate role in its ministry of mutual care.

The congregation as primary care giver reflects the ministry pattern of my childhood congregation in Oklahoma. It validates the ministry of the people of God. It affirms the numerous social networks, both formal and informal, within the church and community which provide opportunities for care giving ministries by the unskilled, even untrained. Fellowship, Bible study and self-help groups, clubs, Sunday School classes, choirs, youth groups, women's and men's organizations plus personal friendships all provide opportunity for caregiving. Indeed, much of the care that occurs in congregational life is like an informal underground movement that is not readily visible. Since much of congregational care is informal and, therefore, goes unnoticed, it can easily be ignored by clergy and health care specialists.

Implications For Congregational Care

Caregiving from an Anabaptist perspective requires fundamental changes in one's beliefs and practices regarding discipleship, ecclesiology and ministry. The following are reflections on the implications for congregational care from an Anabaptist perspective.

- **Discipleship and ministry are inseparable.**

If Jesus is the norm for the Christian's life and ministry, the disciple brings together Jesus' teaching and example in a life of sacrificial ministry to whoever has need. Our Lord focused on those others rejected. His model was that of sacrificial love. To be a disciple is to be a servant and to model Christ's spirit of servanthood.

- **Disciplemaking and caregiving are linked.**

Our task as caregivers is to help people follow Jesus and experience his love and wholeness. Our concern is both to respond caringly to the hurts and cares of people and enable them to grow in faith and in their ability to respond to human need.

- **The believing community orders its life from a common value system.**

Anabaptists understand the church to be a community of discernment where the congregation develops a consensus around the critical moral and ethical issues it faces. The church, however, often attempts to care for people without the support of a community ethic. While the pastor or professional may have moral and ethical convictions which guide caring practice, effective congregational care emerges out of a value system that is established and affirmed by the community of faith.

- **Reconciliation is at the heart of caregiving.**

Through his sacrificial death Christ created a new humanity by reconciling people with God and with one another. He committed this ministry to the church. Caregiving from an Anabaptist perspective understands the church to be a reconciling community, i.e., the church responds compassionately to the spiritual and interpersonal brokenness in the church, community and world. This ministry of reconciliation is a wholistic concern for the relational and spiritual as well as the biological and psychological well-being of all people.

- **Ministry assumes a corporate rather than an individual context.**

Much present day pastoral care literature depicts caregiving as a one-on-one relationship. The individual Scriptural metaphors such as “shepherd,” “priest,” or “pastor” have been the primary images which have shaped caring practice. The corporate metaphors, “the people of God,” “the household of faith,” “the body of Christ,” and “the *koinonia*” have been largely ignored. These corporate images emphasize the group rather than the individual, and reflect family bondedness and solidarity within the community of faith. The communal metaphors reflect the image of a cohesive family where members respond to human need in a spirit of mutuality. Moreover, it is not only that an individual ministers to the people of God, but the people of God serve one another.

- **All believers are ministers.**

Ministry is a word which comes from the Greek term *diakonos*, meaning “one who serves.” In both Old and New Testaments it refers not to a special office but to a

function. It is a ministry given not to a special class of people, but is exercised by every member of the community of faith. Ministry is not the function of a few multi-gifted persons, but the service of a multi-gifted community designed by God for a priestly ministry. Within the Christian tradition the life-signs of the Spirit in the body of Christ are not the prerogative of clergy. They are the privilege and responsibility of all followers of Christ. This means that whether one ministers to another as a friend, a business person, a health care professional or pastor, all are servants of God, an extension of the entire community of faith.

- **Ministry is expressed in diverse ways.**

The biblical metaphor of the body of Christ suggests that a variety of people, each uniquely gifted by God's Spirit, grace the community of faith with special ministries. Each believer is gifted by the Holy Spirit and is called to ministry. Indeed, every person has a ministry and in that sense is a minister. Every member has caring opportunities that are uniquely hers or his. Each member has gifts which reflect the spiritual graces given each person by the Holy Spirit for ministry (1 Cor. 12:7-11). And each ministry is needed if the community is to experience health and wholeness.

Spiritual giftedness in the body of Christ reflects the interpersonal character of ministry. We give and we also receive the ministry of our brothers and sisters. Caring ministry within the body of Christ is, therefore, a double call to discipleship in which persons are called into a community of love and service and at the same time are asked to cultivate the capacity to be ministered to by others.

In other words, the caring event is both mutual and reciprocal. Those who give care, receive care; those who receive care, give care. Indeed, the one who receives care and the caregiver often both give and receive care within the same event.

- **Congregation, pastor, and professional form a healing network.**

Caring for people in crisis takes place within a healing community. This community of care is formed by drawing

together the various levels of care in an interdependent relationship. The congregation, the pastor and church leaders, and professionally trained caregivers work together to care for persons in need. Full-orbed care draws the three levels together where each works to support the rightful and necessary ministry of the other.

- **Congregational leaders equip the community of faith for ministry.**

The pastor and professional have a unique role in the life of the congregation. From a biblical perspective the pastor's task is to equip the congregation for ministry (Eph. 4:11-12). There are two aspects to this equipping process.

- 1) The cultivation of a climate of health and wholeness.

Creating a climate of health and wholeness will require a variety of educational efforts which are formal and informal, spontaneous and intentional. These efforts are designed to create openness, sensitivity and acceptance for people who are in need. The pastoral concern is to work preventatively by fostering an environment where people can be supported and encouraged when experiencing crisis. To do this the congregation will need to attend to its communal life so that beliefs and values are cultivated, pain and concern can be shared, where unconditional love and mutual support can be fostered.

- 2) The enablement of people to minister to one another. Pastors, chaplains and health care professionals will need to enable people to discern and utilize their spiritual gifts for ministry in the church and world. The emphasis should not be upon creating tasks for people to do, but upon helping people learn how to respond to those who experience human hurt with sensitivity, support, encouragement, and care. Equipping people to care for one another is to help them discover those avenues of ministries which are in harmony with their personal gifts and interests.

- **Congregational care changes the focus for theological education.**

Current patterns of theological education in caring practice have emerged primarily out of clinical or medical

models of caregiving, e.g., CPE (Clinical Pastoral Education) and pastoral counseling centers. The primary contexts which have shaped pastoral care training have been medical, psychiatric or penal institutions. Since the setting for congregational care is the community of faith, training for congregational caregiving calls for community models of theological education. Pastoral education which will spawn congregational involvement in ministry requires that at least a portion of the training take place in a congregational setting. In such settings seminarians can serve as pastoral interns under the tutelage of gifted and experienced pastors who model caregiving in the context of the life and ministry of the church community. Pastors will also need to develop mentoring and equipping skills to enable the people of God to become a healing community. This is not a "do it yourself" style of ministry, but an "equip others" style.

Conclusion

To promote the congregation as primary care-giver is to affirm the congregation's divine design to bring health and wholeness to people in the church and world. It is to enable the congregation to become a community in which love, acceptance, encouragement, forgiveness and compassion work together to foster growth, support, healing and wholeness. Our goal is to enable the congregation to support people who are in pain, to love without needing to be loved, and to care even though cure may not always be possible.

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