

NAZARENE THEOLOGICAL SEMINARY

CIRCLES OF CARE:  
DECENTRALIZING PASTORAL CARE THROUGH SMALL GROUP MINISTRY

A THESIS IN THE PRACTICE OF MINISTRY  
SUBMITTED TO THE FACULTY IN PARTIAL FULFILLMENT  
OF THE REQUIREMENTS FOR THE DOCTORAL DEGREE OF

DOCTOR OF MINISTRY IN INNOVATIVE PASTORAL  
LEADERSHIP IN CHANGING CULTURES

by  
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KANSAS CITY, MISSOURI  
FEBRUARY 2022

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**Date of Defense:** March 20, 2023

We, the undersigned, determined that this dissertation has met the academic requirements and standards of Nazarene Theological Seminary for the Doctor of Ministry program.



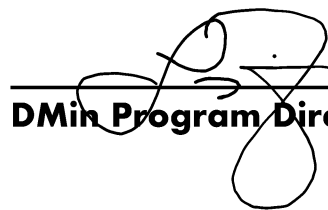
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## ACKNOWLEDGMENTS

I am grateful first to God who has blessed me with this opportunity and the call to minister. I give God all the praise and glory for this! God has surrounded me with so many people who have supported me and without whom this would not be possible. I am especially thankful for my family. My wife, Katie and my kids, Titus and Micah have been my biggest supporters and have sacrificed much to allow me to do this work. They are my world and this would not be possible without them. I am grateful for my parents, Tony and Deanna, and my sister, Aubree who have always held me up, cheered me on and prayed me through my efforts in education. To my grandparents and extended family, I am so thankful for your love and support. I am thankful also for Katie's parents, Susan and Charles for their encouragement and prayers. I greatly appreciate my church family in Tahlequah Church of the Nazarene who have not only been an inspiration for this dissertation, but have always supported me in furthering my education. I am thankful for my advisor, professors, and the faculty and staff at Nazarene Theological Seminary. I am also grateful for my colleagues in the program whose friendships now make up such an important part of my life. For all of these and many more who are not listed here, I am eternally grateful.

## EPIGRAPH

“Everybody should pray together, cheer along, root along. That brings the circle together. Everything is together.”<sup>1</sup> -Wallace Black Elk, SIOUX

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<sup>1</sup> Don L. Coyhis, *Meditations with Native American Elders: The Four Seasons*, (Colorado Springs: Coyhis Publishing & Consulting, 2007), xi.



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## ABSTRACT

Austin J. Troyer

### Circles of Care: Decentralizing Pastoral Care Through Small Group Ministry

All Christians have a responsibility to care for each other. However, the practices of care in the church have become centered around the clergy. This not only fails to empower the lay members of a congregation, but robs them of a more fully realized culture of care. This thesis proposes that Christians ought to come together not only underneath the tutelage of clergy members but around a common table, forming circles of mutually dependent relationships with one another. In conversation with Indigenous and Wesleyan theology as well as existing pastoral care models, this dissertation presents a model for developing a holistic culture of care. In doing so, it presents also a practical implementation of the model in the development of small groups for mutual care. The groups will serve not only to develop knowledge about shared challenges, but also community connection and accountability to one another as participants care for each other.

## CHAPTER 1

### WHO CARES?

*“Thro' this world of toil and snares, If I falter, Lord, who cares? Who with me my burden shares? None but Thee, dear Lord, none but Thee.”*<sup>2</sup>

#### Introduction

In the story of creation, the first thing God deemed *not good* was human beings existing in loneliness.<sup>3</sup> God is relational: Father, Son, and Spirit. God made human beings in God's own image. Therefore, God created them for relationship, to stand alongside one another. In the depths of our being, we *need* each other. In every generation, time, and place, people are made to care for others. It is sin that breaks relationships, separates and sets people in opposition. Through Christ, believers are restored toward a renewed creation reality, one in which we fully love God and our neighbors. Today, in response to conflicts in the world, a global pandemic, and other ongoing crises, the mission of the Church to be a community of image bearers of our relational God and put Christ-like love into practice stands as important as ever. The problem lies in the fact that we are not always effective at doing so collectively.

Christians are likely to affirm their need for each other. One would be hard pressed to walk into a church that did not claim, “This is a loving congregation.” However, if one examines *who* cares in a congregation and *how* they practice care as a community, congregations are often lacking a more holistic expression of compassion.

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<sup>2</sup> “Just a Closer Walk with Thee.” *Sing to the Lord: Church of the Nazarene Hymnal*. (Kansas City: Lillenas Publishing Company, 1993), Number 607.

<sup>3</sup> Gen. 2:18 (All scriptural references in this dissertation are from the New Revised Standard Version).

One factor contributing to this problem is the tendency toward pastor-centric ministry. Care can often revolve around or extend from the pastor as the resident professional of the church community. How a person often finds nurture in a congregation is through pastoral visitation and contact, pastoral teaching and counseling, or perhaps through a lay minister or ministry team which is often appointed by the pastor. These are important aspects of ministry and should be continued, but they should not be the only avenue for care in a congregation. Eugene Peterson and Marva Dawn, in *The Unnecessary Pastor: Rediscovering the Call*, exhort that, “Ministry is ministry, no matter who does it, when it is done in Jesus’ name,” and that it is, “...best when we do it together, lay and clergy, in the same room.”<sup>4</sup> Congregational care is not merely a service rendered by select professionals but a way of life practiced by a community of believers.

What is proposed here is the development of a renewed imagination of what congregational care is and how it can be practiced. The pastor is not the only person responsible to care in a faith community. Congregations would benefit from developing ministers and practices that connect people to each other as resources of care. In order to decentralize care, a cultural shift is needed, one which takes seriously the identity of the Church in relation to the triune God and thus one another. By reimagining congregational care on a theological level, practices of holistic care can emerge. One such application is the implementation of short-term small group ministries for the express purpose of mutual care through the sharing of life experiences together. Where it is contextually

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<sup>4</sup> Marva Dawn and Eugene Peterson, *The Unnecessary Pastor: Rediscovering the Call*. (Grand Rapids: William B. Eerdmans Publishing Company, 2000). 7.

implemented, this practice can both emerge from and be part of a shift toward a culture of care.

What has inspired this project are experiences in caring for the Tahlequah Church of the Nazarene in which I serve as pastor. After years of engaging in traditional pastoral care, it has been my observation that there are several families who have taken up the responsibility of raising their grandchildren. Whether through adoption, guardianship, or other significant steps, these “grand families” face challenges unique to their situation. The grandparents themselves confide in their pastor about the issues surrounding this major life change. However, they rarely reach out to each other for care and support. Here were people who were addressing something beyond an individualistic mindset – raising children that they did not anticipate rearing at this stage in their life. Yet, they remained individually isolated from a support system. They engaged in supportive care for their family but were not cared for by people who could fully identify with their unique struggles and celebrations.

The pastor’s responsibility is to seek systems of care where available. In describing what a full member of the local church is, the manual of the Church of the Nazarene states that, “The local church leadership shall seek to place every member into a ministry of service and a circle of care and support.”<sup>5</sup> It is the express purpose of the pastor and other church leaders to ensure that every member is placed not only in opportunities to serve but in interconnected systems of care. This call is necessary not just for “full members” but for every person connected to the church. If someone is a part

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<sup>5</sup> Church of the Nazarene, *Manual: 2017-2021*. Paragraph 107, (Kansas City: Nazarene Publishing House, 2017), pg. 71

of the church but remains disconnected from a network of care until they reach a certain level of commitment, we perpetuate our tendency to reduce Christian compassion to a service rendered rather than a cultural reality lived out in God's family.

Reflecting on the pastoral care for these grand-families, it became apparent that the structures of the church were not placing them in "circles" of care but rather in a triangular structure of care, the pastor at the top, with the rest of the congregation passively engaged in being nurtured. Thus, the inspiration for this project. Churches would greatly benefit from establishing practical expressions, circles of care, for connecting people together. While it is certainly my calling to provide care for this congregation regardless of the situation, they would greatly benefit by receiving care from those who have been through similar situations and can empathize, support, and hold one another accountable. Such a development requires decentralizing the responsibility of care and distributing it throughout the culture of the congregation. This would not only be helpful for pastors, but is important also for overall flourishing as believers in the congregation for the long-term and its witness of God's love to the community.

Cultural shifts like these are difficult and can take a long time. Each congregation in which this is applied would need to seek contextual ways to develop caring connections and decentralize pastoral ministry. Yet, it is worth the cost! If churches continue to center practices of care solely on pastors and a few lay leaders rather than the whole congregation, the problems which people face will perpetuate in isolation. We stand to lose more ground with people of younger generations and burn out those leaders who unfairly carry an exclusive burden to care for congregations. Because this reality is



intertwined with localized and cultural factors, any response should be contextualized and will take the long-term work of cultural change. Thus, we will first explore in this chapter the issues of pastor-centrism in congregational care and how the particular context of the Tahlequah Church of the Nazarene is poised to approach a shift to mutual support groups as a practice toward building a culture of care.

### **Care in the Context of a Community**

Tahlequah City is vibrant and growing with a population of approximately 17,164. It is located in the Northeastern portion of the state of Oklahoma, affectionately known as “Green Country.” Being in the midst of trees in the foothills of the Ozarks and close to the Illinois river and Tenkiller lake, Tahlequah attracts visitors from near and far. Many people choose to make this town their home for retirement, leading Tahlequah’s citizenship to consist of over 2,347 senior citizens (13.6% of the population). Tahlequah also attracts many veterans due to the Veteran’s Health Administration hospital in the nearby city of Muskogee. It is the location of Northeastern State University’s main campus as well, making the median age of Tahlequah 29.1 years old, well below the state average of 36.7. This also means that the citizens of Tahlequah range widely in their levels of education and types of vocation.<sup>6</sup>

Tahlequah is diverse in economics with 23.3% of the population under the poverty line. While this is a decrease from the number of persons in poverty in the 2010 census (32.4%), there is still a significant portion of the community which struggles financially. Additionally, 24% of citizens under the age of 65 have no health insurance.<sup>7</sup>

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<sup>6</sup> “Census Quickfacts: Tahlequah, Oklahoma,”  
<https://www.census.gov/quickfacts/fact/table/tahlequahcityoklahoma/PST045221>

This is a staggering number for a community with two hospitals.<sup>8</sup> As much as 14% of those same individuals are also on disability.<sup>9</sup> In addition, there has been an increase in unhoused neighbors over the years. Tahlequah's response to these issues is ongoing as city officials and local benevolence organizations seek to care for the needs of all residents.

Perhaps the most significant aspect of diversity in Tahlequah is reflected in its racial demographics. Tahlequah is not just the county seat of Cherokee County, but also the capital city of the Cherokee Nation and the Keetoowah Band of Cherokee. The reason for this dynamic will require some historical explanation. Before statehood, Oklahoma was a collection of territories allotted to various indigenous tribes by the United States. Upon the colonization of the new world, racist ideologies such as the "Doctrine of Discovery,"<sup>10</sup> undergirded the oppression of indigenous people. In his book, *The Color of Compromise: The Truth About the American Church's Complicity in Racism*, Jemar Tisby writes, "Colonists employed religio-cultural categories to signify that European meant 'Christian' and Native American or African meant 'heathen.'"<sup>11</sup> This theological

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<sup>7</sup> Ibid.

<sup>8</sup> Northeastern Health Systems is a regional hospital located in Tahlequah and it neighbors W.W. Hastings which is an indigenous hospital owed and run by the Cherokee Nation.

<sup>9</sup> "Census Quickfacts: Tahlequah, Oklahoma"

<sup>10</sup> Charles and Rah explain that the Doctrine of Discovery was a papal bull giving theological excuses for colonial conduct with the peoples they were conquering. "...in the Doctrine of Discovery, the primary role for the "heathens" is to simply receive the message and the charity of the benevolent, generous and well-educated missionaries...but they will never become full partners in the gospel." Mark Charles and Soong-Chan Rah, *Unsettling Truths: The Ongoing Dehumanizing Legacy of the Doctrine of Discovery*, (Downers Grove: InterVarsity Press, 2019), 103.

<sup>11</sup> Jamar Tisby, *The Color of Compromise: The Truth About the American Church's Complicity in Racism*, (Grand Rapids: Zondervan, 2019), 36.

distinction directly contributed toward the anthropological divisions between the races, placing Native Americans in a category inferior to their white counterparts. This led not only to violent conflict, but as colonists won those conflicts, they further widened the gap of equality through legislation. The Supreme Court of the United States ruled in 1831 in *Cherokee Nation v. Georgia* that native tribes were “domestic dependent nations” whose relationship with the United States, “resembles that of a ward to his guardian.”<sup>12</sup>

Under President Andrew Jackson’s direction, the Indian Removal Act allowed for lands in the west to be exchanged for Tribal lands East of the Mississippi River. The Removal Act was opposed by the majority of Cherokees who chose to remain in their homeland. Nevertheless, the government wrote a deceptive agreement entitled, “The Treaty of New Echota,” which was signed and forced removal of the Cherokee people after two years of preparation.<sup>13</sup> There were similar forced removals for the Creek, Seminole, Chickasaw, and Choctaw. The subsequent journey to Indian Territory is referred to as the Trail of Tears, which devastated these “Five Civilized Tribes.” The Cherokees for example, during the Fall and Winter of 1838 and 1839, suffered great loss and trauma on this trek to what is now Oklahoma, with approximately 4,000 deaths. About one in every four Cherokees died on this journey.<sup>14</sup> The Cherokees settled in the territory where Tahlequah now exists, under the assumption that this would be their land.

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<sup>12</sup> “Federal Trust Doctrine First Described by Supreme Court,” The United States Department of Justice, last modified May 14, 2015. <https://www.justice.gov/enrd/timeline-event/federal-trust-doctrine-first-described-supreme-court>.

<sup>13</sup> William G. McLoughlin. *The Cherokees and Christianity, 1794-1870: Essays on Acculturation and Cultural Presence*, (Athens: University of Georgia Press, 1994), 92.

<sup>14</sup> Charles and Rah, *Unsettling Truths*, 111-112. Gender exclusive language in the quote is of the time, but acculturation was experienced by indigenous people of all genders.

However, this would not come true. After reallocating tribal lands to government control, much of Oklahoma was made “settlement-ready” for non-indigenous ownership. The Land Runs of 1889 and 1893 were massive events where people, mostly white Americans, staked claim to the previously restricted land. Eventually, Oklahoma was established as part of the United States, leading not only to the loss of the majority of what little land indigenous tribes had been given, but also resulted in a further mixture of culture. White settlers did not at the time respect the culture of their neighbors. Indigenous peoples were denied the dignity of using their own language, cultural practices, and religious ceremonies as their white counterparts continued settling amongst them. Indigenous children were forced to attend Indian boarding schools, whose methodologies were, “Kill the Indian in him, and save the man.”<sup>15</sup> In these settings, those in the Christian religion were complicit. Part of the acculturation practices of these schools included Christian teachings, albeit construed with western cultural markers. Many were presented with a, “gospel message but were required to become like a white American in order to receive it.”<sup>16</sup> During this time, being indigenous and being Christian were presented as incompatible because of racist ideologies, thus exhibiting a corrupt social and theological image to indigenous peoples.

This history of tragedy has devastated indigenous peoples of North America. Charles and Rah note that, “Between 1492 and 1900 the estimated population of indigenous peoples in the continental United States dropped to 237,000 [from 9.4

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<sup>15</sup> Ibid, 120.

<sup>16</sup> Ibid, 123.

million].”<sup>17</sup> Yet, they are still here as an integral part of American culture, and still fighting for equality and the restoration of cultures under threat. The Cherokee are now considered a sovereign nation within the United States and both the Cherokee Nation and Keetoowah Band in Tahlequah are taking great strides to not only retain their cultural identity but flourish as a people. In Tahlequah, they are using their funds to develop healthcare programs at W.W. Hastings hospital, which neighbors our regional hospital, Northeastern Health Systems, and serves indigenous patients. They develop housing and assistance programs. Sequoyah High School, which was at one time an Indian boarding school, is now owned and operated by the tribe. They are making great effort to maintain their language as well with a Cherokee immersion school. Devastating as the history may be, the Cherokee people remain strong and are an integral part of the Tahlequah community today.

Therefore, Tahlequah is not entirely a westernized context. The Cherokee people are not isolated from the municipality but are interspersed throughout the community. Indigenous and non-indigenous people go to school, work, and church together. The Cherokee welcome, “*Osiyo*,” is on the city signs. The annual Cherokee holiday transforms the cultural landscape of the city with people coming to celebrate. All are neighbors, but the struggle has been how to live mutually with one another. Such interdependence is part of indigenous culture and can inspire holistic community. Because our Creator has formed the world to be mutually dependent on the other, there should be opportunities for people who might otherwise be disconnected to find

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<sup>17</sup> Ibid, 162.

interdependency with each another. Yet, the tendency remains for the community to operate in ways that isolate and divide.

The socio-economic diversity of life in Tahlequah presents a challenge to bridge the gaps of division. There are pockets of identity in the community which are often set against others. Many who are affluent speak disparagingly about the impoverished and unhoused. University students come and go as the semesters change, making it hard for them to establish roots. There is some division between those who grew up in Tahlequah and newcomers. The political discourse can at times be divisive. With both indigenous and city governing structures, it can make elections, land ownership and zoning contentious issues. Even the religious community sees division as the town has two ministerial alliances, one evangelical and the other mainline protestant. Therein lies the challenge of how the church practices mutual care in a community that sees such cultural isolation. How does one honor the voices and experiences of others in a place bound to a history of acculturation, oppression, and division? These competing sectors of identity pose a problem for creating a cohesive sense of communion between neighbors and congregational relationships. This issue cannot easily be addressed by hierarchical structures and individualized approaches to compassion.

Nevertheless, the diversity of the area is its greatest asset for moving forward and one through which the power of the Gospel can speak by the Church's compassion. Pastor-centered ministry does not work well here because of cultural diversity. Other principles and practices should be implemented in order to lead congregations to vitality. Moreover, such a change is necessary for a faithful witness as neighbors. Continuing to center our care in the ministry of one person or a committee produces communities which

reflect the divisions in our context rather than using the assets of our diversity to build an interconnected community. It also excludes our indigenous neighbors' culture and voice who not only operate on a different set of assumptions, but whose voices are also mutually needed in the sharing of compassion with one another. Complicated as it might be to build bridges and cross social divides, the message of the Gospel calls the believing community to engage its context with a compassion that sees no border. By establishing practices and changing cultural mindsets, it is the hope of this project that the Tahlequah Church of the Nazarene will begin to make connections of care encircling its community.

### **Care in the Context of a Congregation**

In order to understand the context of the particular congregation of the Tahlequah Church of the Nazarene, it is important to first explore its denominational background. The Church of the Nazarene is a relatively young denomination which emerges from the Wesleyan Theological tradition and the American Holiness Movement. It was established as a result of two mergers. Founders, Phineas F. Bresee and J.P. Widney had broken away from the Methodist Episcopal Church to pursue ministry to the poor in the inner-city and the preaching of holiness. In 1907, their congregations merged in Chicago, Illinois with a group from the eastern United States led by H.F. Reynolds. In 1908, this newly combined church joined with the Holiness Church of Christ in Pilot Point Texas. This formed what has now become known as the Church of the Nazarene.<sup>18</sup>

A local Church of the Nazarene was organized near downtown Tahlequah, Oklahoma in 1932. This was only 25 years after the first general assembly and after

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<sup>18</sup> Stan Ingersol, *Nazarene Roots: Pastors, Prophets, Revivalists & Reformers*, (Kansas City: Beacon Hill Press, 2009), 91.

Oklahoma became a state in 1907. It began with 14 full members, and while worship attendance was not a kept statistic back then, they averaged about 30 for discipleship attendance. The congregation moved to a new location on the eastern edge of the city limits in 1979. The reason for this change was a need for increased space for worship. The move does not appear to have positively affected long-term growth for the congregation. A previous pastor wrote in the church records that the attendance was down during the transition. The congregation worshipped at a rented space in Northeastern State University while the building was being finished. They decided to go ahead and start worshipping in the unfinished church there to boost morale.<sup>19</sup> Though that was a trying time, the church is now firmly established in its current location. Since its first days, the church has had seasons of growth and decline under approximately twenty-four senior pastors, including myself.

August of 2022 marks seven years that I have been pastoring the Tahlequah Church of the Nazarene. It is a small congregation which has plateaued in attendance, averaging about 34 for worship services and 25 for discipleship ministries during the last seven years. Though small, the congregation is a microcosm of the community of Tahlequah, exhibiting the benefits and challenges of its varied cultural identity. People from all walks of life gather for worship from Tahlequah City and neighboring towns. Rich and poor, educated and uneducated, old and young, white and indigenous, are together in the congregation. Of the 145 people in the directory, approximately 61% of them are white, 37% are indigenous, and 3% represent other ethnic minorities.<sup>20</sup> The

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<sup>19</sup> In the notes section of our church record book, written presumably by the pastor who was there during the transition to a new location. Various dates.



congregation has faced a wide variety of adversities and successes together. The church tries to pour its heart into ministry to younger generations and visitors but finds it hard to retain connection with them. The pandemic also set ministries back in many ways, but it also strengthened the resolve for relational connections and care. Compassion and generosity for those who are going through trials or mourning is an important part of the identity of the church.

Practicing care in pastoral ministry in this context has been filled with blessings and challenges along the way. Over the years, it has become apparent that there is a need to decentralize the ministry of care away from the pastor. Though the congregation responds well to steady pastoral leadership, the congregation has become too pastor-centered. A large percentage of resources is allocated to the pastor's salary and many of the ministries are directed by the pastor. Worship, discipleship, and administrative ministries are either orchestrated or overseen by the pastor. Pastor-centrism is also evident in congregational story telling. Seasons of ministry described in both positive and negative light are prefaced with statements like, "When pastor [blank] was here." In many ways, these factors are indicative of solo ministry in a small congregation, but it is troublesome in its long-term effects on the congregation.

Previous experiences of the church contribute to the rationale that pastor-centrism is detrimental to the church's effectiveness. Many in the congregation speak about how the women's ministry group has been vitally important in holding the congregation

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<sup>20</sup> This is an anecdotal percentage to illustrate my own estimation of our ethnic diversity as a result of a review of our directory and my own knowledge of people's ethnicity. Of those who are indigenous, many represent two or more ethnicities including four individuals who are part African American. Of those of other ethnicities, one is Asian-Pacific Islander, and three are Hispanic.

together through pastoral transitions. It is also notable that the decrease in mid-week gatherings and community events in response to the pandemic has been detrimental to relational connections. The more that stories and practices center on the pastor's ministry, the less connected the congregation seems to be. It is evident that centering ministries of care solely on the part of the pastor is inauthentic not only to how churches should care for each other, but specifically for the identity of the Tahlequah Church of the Nazarene.

Perhaps the most definitive evidence of how the congregation has felt the effects of pastor-centric ministry is during pastoral transition. As illustrated below in Figure 1, since changing locations, the previous seven pastoral transitions have mostly resulted in dramatic decreases in attendance and involvement at the church. Some left to become part of other congregations while others disconnected from congregational life altogether. While numbers do not tell the whole story, they point to an unhealthy adherence to a particular pastor's ministry with large numbers of people leaving the congregation when that person departs. It should be noted that the church responds well to consistent pastoral leadership, as attendance usually regains traction after pastors become established. It is also true that the data show that there are a core group of people who are supportive in involvement and tithe, as our membership and finances do not decrease at quite the same degree. Yet, when pastoral leaders leave, the congregation loses many people, likely those who are less invested in the church itself and have attached their belonging to the ministry of a pastoral personality rather than the whole collection of people.

**Figure 1: Pastoral Transitions in Tahlequah Church of the Nazarene (Rate of Change)<sup>21</sup>**

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<sup>21</sup> Church of the Nazarene Statistics, "Summary Report: Tahlequah Church of the Nazarene" <https://reports.nazarene.org/research/rdPage.aspx?rdReport=Research.StatChurchSummary&OrgID=4896>  
The rate of change here is calculated by taking the data in the year prior to the beginning of a new pastoral

Year	Worship <sup>22</sup>	Discipleship <sup>23</sup>	Membership	Finances
'81-82	+21	+11	-12	+\$5,424
'86-87	-2	-11	-11	-\$3,012
'90-91 <sup>24</sup>	-29	-17	-8	-\$1,548
'93-94	+1	-5	-5	-\$1,258
'94-95	-11	-5	0	-\$1,258
'09-10 <sup>25</sup>	-30	-16	-2	-\$15,076
'14-15	-17	-15	-1	+\$6,532

It should be stated that these numbers are indicative of a larger problem of the widespread decline of church involvement in the Tahlequah community. While approximately 2,321 people were added to the number of religious adherents in Cherokee County from 1990-2010, religious organizations saw an increase of only 310 in 2000-2010. While the numbers are positive in these ranges, the study shows that the vast majority of additions were made from 1990-2000 and is likely to continue trending downward. Conversely, the amount of people in Cherokee county who claim no religious affiliation reached 30,895 of the 46,987 people in the county and is likely to increase.<sup>26</sup> Yet, for us the problem goes beyond these cultural trends. Even while there was major

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tenure and comparing it with year the pastor began ministry. There are some instances where there is an extensive interim period, but because this is part of the transitional period, interim pastoral tenure is not included.

<sup>22</sup> We have one Sunday morning worship service per week. This number includes people of all ages who attend.

<sup>23</sup> Discipleship includes things like Sunday school, bible studies, prayer meetings, or other small groups. This number includes the attendance of all ages to such groups.

<sup>24</sup> Church of the Nazarene Statistics, "Summary Report: Tahlequah Church of the Nazarene," In 1990, the church had 89 full members, an average of 87 for worship attendance, and 73 for SDMI. In 2022, members total at 57, the church has an average of 36 for worship attendance, and 30 for discipleship.

<sup>25</sup> Church of the Nazarene Statistics, "Summary Report: Tahlequah Church of the Nazarene." During the pastoral tenure leading up to this, the church peaked in attendance at an average of 94 for worship in 2003 and 80 for SDMI in 2006.

<sup>26</sup> "County Membership Report: Cherokee County (Oklahoma)" *Association of Religious Data Archives*, 2010. <https://www.thearda.com/rcms2010/rcms2010a.asp?U=40021&T=county&S=Name&Y=2010>

increase in the religious landscape of our county from 1990-2000, our congregation has suffered drastic decline acutely during pastoral changes.

This has not always been the trend as pastoral changes prior to the change of location in 1979 are on average much smaller than those after the move. As one can see, the first pastoral transition while in the new location shows increase in attendance, while the vast majority of pastoral changes afterward are followed by decreased involvement. One could speculate that the transition to a new location led to a cultural shift away from centering congregational identity on the place of the church toward the personality of the pastor. Whatever has led to the apparent pastor-centrism in the congregation, it remains that it is both damaging to the mission and identity as a people, and that something should be done to counteract this tendency.

The need for change is also indicative of the congregation's identity denominationally. Pastor-centric ministry counteracts some key defining factors those who are a part of the Church of the Nazarene. Many traits of the denomination lend themselves well to decentralized practices of care. From its foundation, it has strived to preach the pursuit of holiness of heart and life in all believers which effects its ecclesiology. In the Church of the Nazarene, the liturgy for welcoming full members into the denomination describes its belief about the benefits of the church:

“The privileges and blessings that we have in community together in the Church of Jesus Christ are sacred and precious. There is in it such hallowed fellowship, care, and counsel as cannot otherwise be known apart from the family of God. There is the godly care of pastors, with the teachings of the Word and the inspiration of corporate worship. And there is cooperation in service, accomplishing that which cannot otherwise be done.”<sup>27</sup>

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<sup>27</sup> Church of the Nazarene, *Manual: 2017-2021*. Paragraph 704. “Sacraments and Rituals: Reception of Church Members” (Kansas City: Nazarene Publishing House, 2017), 272.

The church is to be a unique community in which one can experience the presence of God and a unique expression of compassion and care. Included in this is the, “care of pastors,” but pastoral ministry is not the exclusive expression of “hallowed fellowship, care, and counsel.” It is when the whole church engages in care that one can truly experience a kind of community unlike any other.

The roots of the Church of the Nazarene tradition’s call for a decentralized ministry of care go deeper. Its theological forefather, John Wesley, speaks directly against placing care as the sole responsibility of the clergy. In his sermon, “On Visiting the Sick,” Wesley explains an instance where an affluent congregant may want to hire a physician to visit the sick in their stead. The reasoning is that of training – “they can do more good than I can.”<sup>28</sup> Wesley combats this notion because, 1) the physician may not be engaging the person for the good of their “soul” as a Christian would, and, 2) even if the physician could offer them care for their soul, “this does not excuse you.”<sup>29</sup> Such an action would be denying the means of grace inherent in Christian visitation of the sick.

If one expands this sermon’s implication to all acts of care,<sup>30</sup> the grace of God works through the compassionate acts of all Christians. Pastors have all too often been like the hired out “physicians,” compensated to care in the place of the lay Christian. Yet, as explained by Phyllis Wiederhoeft in *Pastor and People: Making Mutual Ministry Work*, it is baptism which sets, “us together, pastor and people, in a common ministry that

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<sup>28</sup> John Wesley, *The Works of John Wesley*, vol. 3, *Sermons*, third ed. (Kansas City: Beacon Hill Press, 1978). 119.

<sup>29</sup> Ibid, 119.

<sup>30</sup> Ibid. Such an interpretation is possible, as Wesley even defines the “sick” in this sermon to include, “...all such as are in a state of affliction, whether of mind or body; and that, whether they are good or bad, whether they fear God or not.” 118.

we share as God's people."<sup>31</sup> Pastors and laity should reimagine the practice of care as that of every Christian's vocation, and not centered on one career position.

Pastor-centrism has been detrimental to fulfilling the care needs of the congregation. With all of the responsibilities of ministry, there is no way that pastors can address every need of care in ways adequate to each situation. Pastors are on call to be there to provide pastoral care and counseling in the name of Jesus whenever possible. However, pastors should not be the sole providers of care in a congregation. First, if pastors are the center of care in a church then there may be people who end up neglected due to the inability of the pastor to address every problem and the unavailability of any alternative relationship of compassion within the church. Secondly, it is a pastor's responsibility to equip the members of the church to exercise their ministry. Certain people have gifts and graces for compassion and by encouraging the use of these in the church, a pastor is fulfilling his or her duty to the church. A shift is needed away from pastor-centered care toward practices which invite all to participate as partners in supporting each other as vital members of the Body of Christ. If churches established ministries where people could find mutual support and developed a culture of care where compassion was a shared responsibility, it would free pastors up to do more effective ministry. It would also be a blessing to the lay people as it is in our best interest as believers to hear from more than one perspective.

There is great wisdom in gathering together as a community to hear a variety of stories, and there are some voices that go unheard when we focus on the pastor or on the

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<sup>31</sup> Phyllis Wiederhoeft, "The Whole People of God," in *Pastor and People: Making Mutual Ministry Work*. Ed. Laurie J. Hanson and Ivy M. Palmer. (Minneapolis: Augsburg Fortress Press, 2003). 23.

dominant voices in our congregations. The question of who cares for those in a community of believers should not yield an answer that points to one person or one select group, but instead gestures widely to the diverse collection of people in a congregation and their experiences. In our context, I am different demographically than a large portion of our congregation. I am a white, middle class, educated, male who did not grow up in Tahlequah and has limited life experiences. This does not disqualify me from administering Christian care in this context. Nevertheless, the congregation should hear more than one perspective and find Christian support not only in their pastor, but in their other neighbors. Pastoral transition is inevitable, making it imperative that the congregation solidify relationships within a community that goes beyond pastoral tenure.

Not only is it beneficial to a pastor and congregation to be mutually engaged in care, but it is likely that lay persons are already practicing ministries of care, but remain isolated from the larger church community. They do not see the compassion they show on a daily basis as part of the mission of Christ's Body. The people of our congregation are already exercising care. Many of our grandparents and parents have sacrificed much to care for their families; there are others whose careers revolve around caring for the sick and those with physical and mental disabilities; there are members who are contacting people both inside and outside the church with prayer and support. Yet there remains a need for cultural shift because the congregation remains culturally centered on the pastor as sole caregiver. The actions of the whole congregation in everyday life lay the foundation for building a culture of care in a church community that is mutually engaged, and not just the work of the pastor. By intentionally gathering together to make connections of story and empathy in care for each other, we can lean into our unique

experiences and gifts as believers and work together as a unit rather than continuing to operate from the top down.

### **Conclusion**

It is not good to be alone. Christians especially know the blessing of being together. God is love and has made us to love; to be there for each other so that we might come to be a community in which everyone cares for each other. We cannot force everyone in a congregation to engage in seeking and giving out the care that they are called to in Christ, but can invite them into such fellowship. It is important then that we develop principles and practices that are conducive to developing a community where everyone cares. As it is, we invite people into a system of support where a select few provide it and so it leaves some neglected in their care and does not give them the whole breadth of the compassion of the Christian community. This looks more like our westernized culture with its individualism and consumerism and the divisions inherent in such ideologies. As a context with a diverse array of voices and experiences, especially those from the indigenous perspective, Tahlequah Church of the Nazarene is a contextual case study for a larger conversation about how to build a culture of care and practices that are conducive to connecting people in interdependent relationships. We have described the problem and the context. It is now that we move toward critical engagement with various scholars that will inform ways that we can decentralize and invite all into congregational care. From there, we will explore the proposal for the theory of leading a congregation toward a culture of care and the practical ways that this was implemented in my context.



CHAPTER 2:  
CARRYING HEAVY BURDENS:  
A LITERARY REVIEW OF INVITATIONS TO COMMUNITY

*‘Come to me, all you that are weary and are carrying heavy burdens,  
and I will give you rest.’ Matthew 11:28*

**Introduction**

Jesus welcomes everyone to come and find Sabbath rest in his presence. This divine care extends through the invitation one gives to others to come and talk, pray, listen, learn, and grow together. The peace of Christ is found in the community in which the Spirit of God dwells. How we develop as leaders in church communities who wholeheartedly extend such invitations and who practically express their identity as such is essential for building up principles and practices of care in a congregation. In order to adequately approach the issue of pastoral decentralization and building a culture of care, we must first explore various definitions of what community looks like and the ways that our beliefs and practices present an invitation or lack thereof toward holistic care. There is a need to both reimagine each contextual expression of the Church itself as a circle of support and to implement various circles of care in the congregation.

In this chapter, we will first describe the issues at work behind the tendency for churches to be pastor-centric. We will also seek to understand various responses to this problem in the realms of theory and practice. There have been attempts to imagine a dynamic of pastoral ministry which sees the pastor as facilitator of a more holistic expression of care and congregations. Other practices on which we will focus are the building of lay ministry leadership teams who are under the direction of the senior pastor

to practice care and counseling in the congregation, and the establishment of small group ministries that create relationships. These practical solutions and their exemplars will lay the foundation for the principles needed to envision a culture of care and apply practices which support such efforts. Throughout this chapter perspective of indigenous scholarship is incorporated to form a contextually faithful response. The indigenous voice can help both critique and strengthen that of the traditionally westernized ministry responses to the problem of individualism and pastor centrism in dynamics of care.

### **Brokenness in Community**

Before exploring some possible interventions to the problem of pastor-centrism, one should first examine the root causes. The western cultural realities of individualistic consumerism and dualism are a source of and are perpetuated by pastor-centric ministry. Without interdependence in community, we face many of our existential crises alone, leaving the things we seek to overcome isolated from the support and experience of others. Theresa Latini, in her book, *The Church and the Crisis of Community*, acknowledges a breakdown of communal life in the United States to, “rampant individualism, narcissism, and myths of heroic self-sufficiency.”<sup>32</sup> These aspects of American culture have affected the way that people engage life in the Church. Without meaningful connections, one may face threats to what Latini terms, “ontological security,” that is our sense of self-identity.”<sup>33</sup> In other words, to know ourselves, we need other people, but the focus is often on the fulfillment of individual desires.

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<sup>32</sup> Theresa Latini, *Crisis and Community: A Practical Theology of Small-Group Ministry*. (Grand Rapids: Eerdmans Publishing, 2011), 12.

<sup>33</sup> Ibid, 25.

Individualist mindsets detract from a church's ability to practice care in mutual and interdependent ways. Pastoral care is traditionally considered a top-down ministry, with the minister as the paid professional and the congregants remain non-mutual participants. If one were to ask a congregation, "who cares for the people of the church," they may say that they are compassionate as a unit but it is often the case that tangible ministries of care revolve around a pastor or a select group of lay ministers. This not only reduces congregational care to the duty of trained semi-professionals, but also removes the riches of the rest of the congregation's collective voice.

A consumerist mindset also plagues the ministry of the church in American Christianity. John Pavlovitz describes the typical way the church, namely evangelical churches, approach community development – they do so as salespersons. He explains that, "As they welcome visitors, there is a goal, there is a product, and there is a clear objective: closing the deal, which is usually framed as some variation on a 'decision for Christ,' church membership, financial commitment, or ministry participation."<sup>34</sup> This has made the Christian community in America operate as another business-like entity. What community we are a part of has been based on our desires for what to buy, watch, play, discuss, etc. rather than an authentic connection to God and others. This makes the care of the church another service which it renders rather than a way of life exuding from its theology.

Furthermore, the way that many people go about choosing a congregation in the first place is by "shopping" around to meet their personal needs through services

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<sup>34</sup> John Pavlovitz, *A Bigger Table: Building Messy, Authentic, and Hopeful Spiritual Community*. (Louisville: Westminster John Knox Press, 2020), 96.

rendered, leadership personalities, and fellowship with likeminded people. Tahlequah, for example boasts a wide variety of denominational choices. There are two other churches in our neighborhood. The street from which the Church of the Nazarene in Tahlequah moved to its current location now has had no less than five different congregations within blocks of one another. Existing as a congregation where there are so many choices for “Christian community” and focus on numerical growth can create an atmosphere of competition rather than cooperation.

Worship services are also generally one-sided in conversation with the pastor and worship leaders as the performers and proclaimers with the rest of the congregation passively receiving. Discipleship opportunities consist mostly of curriculum-based groups that place one person as the resident “expert” and the others in the group as students. Even fellowship events revolve around consumption, mostly of food. If the time that a congregation spends together is in these forms, then it is difficult to see when there would be ample time to share experiences with each other in a meaningful way for the purpose of understanding and mutual support. This is made all the more problematic in a context like Tahlequah where many of these ministries are led and organized by the pastor.

This dynamic is part of what is driving our church into decline. People, particularly those in younger generations have become disenchanted with the ways that the institutional church promotes itself and operates. Many of our families have observed that the children that they raised in connection with a congregation are no longer going to church anywhere. There are many factors at play, but one way we can address these issues is by building more authentic expressions of interpersonal community. The more

that congregations operate as businesses, pushing community as a product rather than a way of life, the more that they will reflect a world focused on individualistic desires. This produces the opposite of biblical community. As is asserted by Craig Van Gelder and Dwight J Zscheile in *Participating in God's Mission: A Missiology for the Church in America*,

“The common spaces in which people of differing views, outlooks, and commitments intermixed and engaged one another are collapsing. Congregations once served this purpose...but today they can easily reflect ideological and socioeconomic homogeneity.”<sup>35</sup>

Gelder and Zscheile go on to indicate that people in the United States – especially the younger generations – are becoming thoroughly skeptical of institutional forms of spirituality, and subsequently the episcopacy. They point to the experience of the “nones,” people who do not identify with any organized religion regardless of spirituality, and the “dones,” people who have once been associated with religious identity but do so no longer.

Both arrive at their skepticism of religion partly due to the culture shifting “...away from external authorities and structures toward individualism.”<sup>36</sup> The “nones” place more emphasis upon the connections they have with family, friends, food, etc. as sources of spiritual meaning than the church.<sup>37</sup> The “dones” have lost trust in these institutions due to a sense that, “churches are not concerned with the day-to-day realities that their members face.”<sup>38</sup> Such a disconnect calls for a reorganization of the church or

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<sup>35</sup> Craig Van Gelder and Dwight J. Zscheile. *Participating in God's Mission: A Theological Missiology for the Church in America*. (Grand Rapids: Eerdmans Publishing, 2018). 241.

<sup>36</sup> Ibid.

<sup>37</sup> Ibid, 233.

at the very least a focus away from institutions and hierarchies and an emphasis toward the relational connections that churches can offer. Gelder and Zscheile also assert that many pastors are not trained for the world in which they find themselves in the United States. It may be an answer to this changing context to move toward more lay-led and small group practices so as to promote the development of a community that within itself cares about the relationships and realities of daily life by listening to and connecting with all the people of the church.

In an age where people are more suspicious of the institution of the church, a model of care where open conversation between the congregants occurs could lead to new engagement with a changing culture. One response to these realities could be to reshape structures of leadership in the church. Furthermore, the use of small groups can provide opportunities for diverse people within the church to engage with one another and enhance congregational care.<sup>39</sup> Such practices could form communities more compelling than the same institutional religious typically presented in western Christianity. Bruce Petersen, in *Foundations of Pastoral Care: An Introduction*, boldly states, “It’s time for ordained ministers to unleash the laity to do caring ministries so the Body of Christ can truly experience the level of pastoral care the church and the people of the world need and should rightfully expect from the church.”<sup>40</sup> If we want to reach out and extend authentic Christian community, it would be inauthentic if the community we are coming from in the Church does not embody communal practices that facilitate

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<sup>38</sup> Ibid, 229.

<sup>39</sup> Ibid, 311-313.

<sup>40</sup> Bruce Petersen, *Foundations of Pastoral Care: An Introduction*, (Kansas City: Beacon Hill Press, 2007), 66.

empathy, connection, and care amongst the whole congregation. It is imperative that one explores the principles and practices of care which invite a deeper sense of community.

## **Practices of Care**

### **The Role of the Pastor**

Having surveyed the issues which perpetuate the tendency toward pastor-centered ministry and necessitate efforts to change, one can consider what practices in a community can decentralize congregational care. Because pastors have so often held a primary position in congregational care, we begin by examining the role of pastor if looked at through a decentralized lens. Whereas some leadership styles center on the personalities of their leaders, pastoral ministry's prerogative is to lead people toward Christ and not toward themselves. Traditionally, the pastor is seen as the primary caregiver of the congregation. This is not without reason, as Denise Hopkins and Michael S. Koppel so eloquently say in their work, *Grounded in Living Word: The Old Testament and Pastoral Care Practices*, "Pastoral care givers serve as stewards of soul language. We help people sit with, make sense of, and eventually narrate their pain."<sup>41</sup> When people are hurting, troubled, or challenged in their journey of faith, the pastor must provide care for his or her flock. This is their sacred duty and calling.

However, the call to care is not just for the pastor, but is shared by the whole Christian community. This is due to the church's nature as "body" and "family." As the Body of Christ, the Apostle Paul says, "If one member suffers, all suffer together with it; if one member is honored, all rejoice together with it."<sup>42</sup> When a human body part hurts,

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<sup>41</sup> Hopkins, Denise, and Michael S. Koppel. *Grounded in Living Word: The Old Testament and Pastoral Care Practices*. (Grand Rapids: Eerdmans, 2010), 151.

the whole body responds to care for the one member. The same is true for the Church, whose members are connected to one another in the journey of life. Likewise, the “Body of Christ,” cares for one another as God’s family. People saved by the grace of Jesus are adopted into the family of God. As stated by Moyer V. Hubbard in, *Christianity in the Greco-Roman World: A Narrative Introduction*, “In Paul’s view, when believers gathered in homes it was as a family, ‘a household of faith.’”<sup>43</sup> As a family cares for each other, so does the church. Sociologists refer to such bonds as “fictive kinship,” but Paul would have likely bristled at the word “fictive,” as he saw the Christian bond as the most authentic form of community.<sup>44</sup>

Therefore, pastoral ministry should not facilitate dependency on the pastoral position but help to make relational connections in the congregation so that all of the people can be involved in caring for each other. Wright in his work, *The Mission of God’s People: A Biblical Theology of the Church’s Mission*, notes quite clearly that “...God gave pastors and teachers to the church in order to equip the saints. People don’t go to church on Sundays to support their pastors in the ministry. The pastor goes to church on Sunday to support the people in their ministry.”<sup>45</sup> This contradicts the way many congregations operate. Lay people and pastors both tend to see the role of clergy as the main operators of ministry, but the biblical story points toward a holistic mission not

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<sup>42</sup> 1 Cor. 12:26

<sup>43</sup> Moyer V. Hubbard, *Christianity in the Greco-Roman World: A Narrative Introduction*. (Grand Rapids: Baker Academic, 2010), 200.

<sup>44</sup> Ibid.

<sup>45</sup> Christopher Wright, *The Mission of God’s People: A Biblical Theology of the Church’s Mission*, Edited by Jonathan Lunde. Biblical Theology for Life, (Grand Rapids: Zondervan, 2010), 272.



only in what the work of the church is, but who participates in the work. Pastors are not there to bear all the responsibility for caring for the congregation, reaching out with the Gospel, etc. Wright states again that, “In order to exercise such a supportive ministry, we ourselves, who are pastors and teachers in the church, need to know the problems our people face in the world.”<sup>46</sup> Pastors are to encourage a culture of cooperation. This does not mean that the pastor is trying to work one’s self out of a job. Rather, equipping the work of such a community *is* the job of the minister. Through care, listening, and equipping, the pastor fulfills their unique role while also leading a congregation to where everyone has a role within God’s grand mission.

Building such a community will require a shift in how pastors and lay persons view the role of their pastor in congregational life. This can begin with the pastors themselves. Pastors have often conflated their vocation as Christian caregivers with their career as pastors. Henri Nouwen, Donald McNeill, and Douglas Morrison note in their book, *Compassion: A Reflection on the Christian Life*, that though career and vocation are not mutually exclusive, “As soon as we think that our careers are our vocation, we are in danger of returning to the ordinary and proper places governed by human competition...”<sup>47</sup> Christians are all called to be compassionate, and though some are called specifically to be pastors and care through that calling, their vocation is not bound to the pastoral office but to their identity in Christ. Yet, much of what is done in the area

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<sup>46</sup> Ibid.

<sup>47</sup> Donald P. McNeill, Douglas A. Morrison, Henri J. M. Nouwen, and Joel Filártiga. *Compassion: A Reflection on the Christian Life*. Rev. ed. (New York: Image Books/Doubleday, 2005), 82.

of Christian care has been centered around the pastor. This shapes not only how pastor's engage in practices of care, but how they see their role in a community.

A byproduct of pastor-centric care is a tendency for pastoral care to become therapeutic. William Willimon, in *Pastor: The Theology and Practice of Ordained Ministry*, draws a distinction between the view that pastors are there to “help people,” and the reality that pastors are instead called to help people “in Jesus’ name.”<sup>48</sup> Pastoral care is not an exercise akin to secular therapy, but is faith formation, giving people what they need in order to draw them closer to the likeness of Christ and love for God and others. The practice of pastoral care is also moving a church toward the development of a culture of care in congregations. Willimon exhorts that, in order for care to be distinctly Christian, it cannot be merely a pastor's responsibility. While the pastor must regularly examine the congregation's care for itself to ensure its faithfulness, “The pastor as giver of care ought not to rob the laity of their call to care.”<sup>49</sup> In order to invite people into a communal support system, pastors must reimagine what their role is in the community and the purpose of their care. Dawn and Peterson summarize this point well by stating that, as pastors, “We are merely equippers, prodders, encouragers, and promoters of all the people so that each one fulfills his or her vocation in the church.”<sup>50</sup> In order for care to be distinctly Christian, it must be faithfully administered and equally shared.

Therefore, the duty and joy of caring for one another is not a career position, but a part of belonging in a Christian community. The apostle Paul speaks emphatically about

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<sup>48</sup> William Willimon, *Pastor: The Theology and Practice of Ordained Ministry*. (Nashville: Abingdon Press, 2002), 91. Emphasis included by the author.

<sup>49</sup> Ibid, 106.

<sup>50</sup> Marva Dawn and Eugene Peterson, *The Unnecessary Pastor*, 228.

the tendency for churches to anchor their identity in human leadership in his letter to the churches in Corinth, stating, "...each of you says, 'I belong to Paul,' or 'I belong to Apollos,' or 'I belong to Cephas,' or 'I belong to Christ.' Has Christ been divided?"<sup>51</sup> Christ has indeed not been divided, and yet, we tend to see congregations center their identity on one pastor or another. This should not be so, as Dietrich Bonhoeffer notes in *Life Together*, "In Christian community everything depends on whether each individual is an indispensable link in the chain."<sup>52</sup> Divisions in belonging result in misplaced identity and responsibilities in care. If we do not belong to every "link in the chain," we will not faithfully practice compassion. In the Church, all belong to Christ, and in turn we all belong to and need to care for one another.

In addition to the decentralization of pastoral care being more reflective of a biblical understanding of community, it is also more practically sustainable. Siang-Yang Tan and Eric T. Scalise state clearly in their book, *Lay Counseling: Equipping Christians for a Helping Ministry*, that, "The laity of the church, just as much as the ordained pastor, has been called to a respectable vocation of serving the Lord and His people."<sup>53</sup> Therefore, the pastor should delegate the task of care to the laity because it is not his or her sole burden. I disagree with Tan and Scalise however that such delegation makes the ordained minister, "dispensable by equipping others...for ministry or service."<sup>54</sup> Pastors are not working themselves out of a job by equipping laity; equipping laity is their

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<sup>51</sup> 1 Cor. 1:12b-13a

<sup>52</sup> Dietrich Bonhoeffer, *Life Together*. (Minneapolis: Fortress Press, 2015), 72.

<sup>53</sup> Siang-yang Tan and Eric T. Scalise. *Lay Counseling: Equipping Christians for a Helping Ministry*. Rev. ed. (Grand Rapids: Zondervan, 2016). 29.

<sup>54</sup> Ibid. 31.

responsibility as pastoral ministers! There is no substitute for the role of the pastor in the congregation and, while there are ways to include methods of care that do not necessarily need constant clergy involvement, this by no means undermines or replaces the pastor in caring for the community. Rather, it fulfills the role clergy have to engage the laity and lead them toward living into their vocations as Christian caregivers.

Delegating pastoral care is not without its detractors even among pastors. Petersen points out that even though, “Lay people can do many, if not most types of regular pastoral care,” resistance to lay-led care can emerge from the pastors who, “...do not want to give up control, power, or think that the laity are unqualified.”<sup>55</sup> Whether the laity or the pastor resist the call to delegate care, it does not detract from the biblical mandate to, “equip the saints for the work of ministry”<sup>56</sup> Leading a community toward a culture of care and equipping laity to do so is indeed a facet of pastoral care itself.

Though pastors may be reticent to relinquish the centrality of their role, the reality is that pastors cannot feasibly do everything when it comes to care for the congregation. Petersen also exhorts, “...with all the other pastoral responsibilities, a pastor of a hundred people cannot have one-on-one contact with each person weekly or even monthly.”<sup>57</sup> Regardless of the size of congregation, care cannot be sufficiently given by one person in the community. Nor, is every pastor the best person in a given congregation at providing care and/or counseling. Edward White, in his article, “The Shortage of Capable Clergy: Root Causes,” derides some inadequacies in seminary training, stating that, “...we

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<sup>55</sup> Petersen, *Foundations of Pastoral Care*, 53.

<sup>56</sup> Eph. 4:12

<sup>57</sup> Petersen, *Foundations of Pastoral Care*, 52.

produce clergy who are often very smart and can preach good sermons but lack the competencies (emotional intelligence) to be fruitful leaders.”<sup>58</sup> White’s misgivings about the state of seminary education aside, it is true that some ministers are not as equipped or gifted in some areas of ministry. Just as one could easily examine the laity of the congregation and note that some are not spiritually gifted for ministries like lay counseling or group leadership, one could note that some pastors are not great pastoral care-givers or counselors.

Along with pastors, some lay people might not see the merits of decentralized care. This is rooted in the view that each lay person has of their Christian vocation. Lay persons might not currently imagine that their compassion in daily life, at home, school, work, etc. – is connected to the caring life of the Church, but their everyday lives are an extension of congregational care. Reijer de Vries, in the article, “Sacro-Carescape: Understanding Mutual Pastoral Care in a Network Society,” explains that religious rites alone imply a one-sidedness to care. He states clearly that, “...Pastoral care is moving from the ministers to the people and from the ecclesial domain to all kinds of places where people meet,”<sup>59</sup> People can encounter the compassion of God in experiences of all parts of life including involvement in a religious community.

For example, the families who are engaged in raising their grandchildren in the Tahlequah congregation have experience and skills that I do not have as their pastor. I can empathize and sympathize with a person going through such a predicament, and I can

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<sup>58</sup> Edward A. White. “The Shortage of Capable Clergy: Root Causes.” *Congregations*. (Fall 2006): 52.

<sup>59</sup> Reijer J. de Vries, “Sacro-Carescape: Understanding Mutual Pastoral Care in a Network Society.” *NIT Journal for Theology and the Study of Religion* Vol. 73, No. 1, (2019): 17.

care for them in pastoral ways, but they also need the care of people who face similar challenges. I have only just begun to raise my young children, much less taken on the responsibility of raising grandchildren. This does not mean I stop pastoring them, but that they are better cared for by being connected in relationships with more people in the congregation who can speak into their situation with their own wisdom, support, compassion, and experience. Thus, the spiritual gifts of each member of the congregation should be used to build up the church. All are tasked to engage in congregational care, and in working together to support each other in the ways that God has equipped, churches might become communities in which all are active participants in building up one another and carrying one another's burdens. Pastors are uniquely tasked with inviting and equipping the congregation to become mutual caregivers. Yet, they are not the centers of care, but are partners in Christian care with their fellow Christians.

### Lay Ministers

Engaging in holistic congregational care relies on more than just a shift in how churches view their pastor, but in ways lay leaders are equipped for ministry. There are unique ministries into which people are called based on spiritual gifting. These ministries which seek to equip and engage the laity in their role as Christian caregivers should be critically engaged as one seeks to understand the role of lay ministry in a culture of care where everyone is involved. Many have set out to create structures of care by equipping laity to provide care and counsel to the congregation. Siang-Yang Tan and Eric Scalise present helpful guidelines for a system of lay counseling that equips the church to train spiritually gifted lay counselors for ministry in an environment in which they have accountability and monitoring by the pastor or other lay leadership. For Tan and Scalise,

there are three models for lay counseling: 1) The Informal-Spontaneous Model, 2) The Informal-Organized Model, and 3) The Formal-Organized Model.<sup>60</sup>

Though the majority of their work is to direct churches toward developing the latter of these three models, Tan and Scalise indicate that it is important to be selective in recruitment and intentional about training lay counselors. Lay counseling is thus not for everyone in the congregation to do as it requires spiritual maturity, organizational structure and cooperation with the pastor, as well as ongoing training for the practice of counseling. This is also due to the issues of liability at work with any ministry that offers “counseling” services, particularly with the third model as there is formality implied. There is always a need to make sure that such leaders are maintaining confidentiality, extending referral services as needed, and caring in ways that are not damaging to the counselee. It is also an extension of the ministry of care in which the whole church participates.<sup>61</sup> In other words, all are called to care, but not all are called to counsel. Knowing the difference is critical to the effectiveness of laity supported care.

### *Informal-Spontaneous Model of Lay Counseling*

As the name suggests, this model does not establish a formal structure by which members of a congregation receive care from fellow lay people. Rather, “the care and counsel are spontaneous and the setting is informal.”<sup>62</sup> Within the already existing programs of a church like Sunday Schools, youth groups, fellowship events, etc. there are

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<sup>60</sup> Tan and Scalise, *Lay Counseling*, 91.

<sup>61</sup> Ibid, 30. “The laity of the church, just as much as the ordained pastor, has been called to respectable vocation of serving the Lord and His people.” Tan and Scalise reference Paul Stevens who in his book *Liberating the Laity*, “asserted that the whole *environment*, not just programs of the church should be designed to equip all Christians or member for such a high calling.”

<sup>62</sup> Tan and Scalise, *Lay Counseling*, 89.

people who might be seen as caregivers by the people involved. A person could come up to the pastor after a sermon for a conversation about an issue with which they are dealing. Sunday School teachers may hear a host of prayer requests and follow up with them as they sense a burden for them during the week. Youth group sponsors might be trusted people in a student's life who can, when appropriate, give support to them. For example, the Tahlequah Church of the Nazarene has members who will forward prayers to the pastor from people who habitually contact them first for care.

The practical implications of this model are not intentionally structured and occur organically. Marvin McMickle in his work, *Caring Pastors, Caring People: Equipping Your Church for Pastoral Care*, describes ways that congregational care can happen throughout the ministry of the congregation's care for each other. He uses the example of the men who brought their friend suffering from paralysis to Jesus as people who saw an opportunity to bring a friend to Christ for his needs to be met (Mark 2:1-5).<sup>63</sup> Everyone has a role in the congregation to see the needs of care and help out in Jesus' name. Although McMickle believes everyone can have a role in the ministry of care, "those who agree to serve ...should have a heart that has been shaped by the teachings of the gospel."<sup>64</sup> This implies a level of spiritual maturity that perhaps not all have. Tan and Scalise, for similar reasons, encourage that people who are involved in these ministries be given some training in order to provide the best possible care for such spontaneous occurrences.

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<sup>63</sup> Marvin Andrew McMickle, *Caring Pastors, Caring People: Equipping Your Church for Pastoral Care*. 1<sup>st</sup> ed. Living Church Series. (Valley Forge: Judson Press, 2011), 95. McMickle's insights on pastoral care will be further discussed later in the paper.

<sup>64</sup> Ibid, 105.



There are obvious benefits to this model as there is not a barrier to entry other than presence and the willingness to ask for/give a listening ear. That being said, there are a few ways that the model is not conducive for a holistic approach to care. On the one hand, those looking to decentralize pastoral care may see such a model as the ideal way, as the qualifications are just that people are there and willing to care. While this is true, it would be unwise to express care through this model alone, as it presents no way to ensure the quality of care and further connections of compassion in the congregation. It is spontaneous and so there will be people who only seek out the ones that they are comfortable with, when they feel like doing so. If people are being directed and encouraged toward engagement with the whole congregation as a resource but are dependent upon their own intuitions on who may be a good caregiver for the situation at hand, there is no guarantee that the people they seek out will be well-trained or aware of who is trained for counsel. A bad experience with a poor caregiver could lessen the likelihood of further spontaneous endeavors to seek counsel. Likewise, a breach in confidentiality could be detrimental to lay supported care efforts. Training which equips lay caregivers with the parameters of effective and ethical conduct is important for healthy congregational care.

Furthermore, as the model implies, most care is happening with no intentionality and is not supported or informed by the way of life in the congregation. There will likely be people neglected if they do not have someone with whom they are already in a trusting relationship. A call for holistic care implies that everyone be invited to show care when the occasion arises. To leave no structure through which people can be connected to the people and programs that can be most fitting to their need may lead toward preferential

treatment on the part of counselor and counselee, and thus leave some people neglected in both their need to receive care and their call to give it out.

### *Informal-Organized Model of Lay Counseling*

Tan and Scalise describe this model as an integration of the previous one with a system of supervised lay counseling ministry. In this model, people can still seek care from anyone in the congregation, but there is an intentionally selected and trained group of counselors available for care. The congregation is made aware of who such individuals are so that people will know who to go for counsel.<sup>65</sup> The example given by Tan and Scalise of this model is Stephen Ministries. The founder of Stephen Ministries, Dr. Kenneth Haugk says in *Christian Caregiving: A Way of Life*, “Every Christian’s job description includes being a spiritual care provider.”<sup>66</sup> Christian caregiving is a means by which we live into our mission. Haugk explains that God’s grace is experienced when people help one another, not just for those who receive care, but for those who give it out.<sup>67</sup> The Stephen Series is a lay minister development tool that churches can use to systematically train people who desire to be engaged in ministries of care or simply be better equipped should the occasion arise.

Tan and Scalise explain that Stephen ministers, “care and counsel in an organized way, but often in informal settings...”<sup>68</sup> This is intentional, as Haugk sees the work of Stephen ministers to be in response to the holistic needs of people. Stephen ministers are

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<sup>65</sup> Tan and Scalise, *Lay Counseling*, 89.

<sup>66</sup> Kenneth C. Haugk, *Christian Caregiving: A Way of Life*, (Minneapolis: Augsburg Press, 1984). 50.

<sup>67</sup> Ibid, 146.

<sup>68</sup> Tan and Scalise, *Lay Counseling*, 90.

encouraged to use Abraham Maslow's hierarchy of needs in order to evaluate which aspects of an issue should be addressed first, but the relationship between the ministers and those they mentor is for the sake of their whole wellbeing.<sup>69</sup> This means that Stephen ministers are trained to differentiate between a person's need and their wants as well as how to effectively interact with the wide array of care opportunities they have.<sup>70</sup> The formal training gives the assurance of the quality of care provided by Stephen ministers and the informal structure gives the flexibility for the ministers to meet holistically the needs of those for whom they care.

Another example of this model can be found in the use of Spiritual Directors. Fr. Thomas Acklin and Fr. Boniface Hicks share in their work, *Spiritual Direction: A Guide for Sharing the Father's Love*, define spiritual direction as, "a one-on-one relationship between a director and a directee in which the directee's relationship with God is the fundamental reference point."<sup>71</sup> As with Stephen Ministers, those who choose to be spiritual directors are called to enter into mentoring relationships to help build up their fellow Christian in the faith. Acklin and Hicks explain that the importance of spiritual direction being a one-on-one relationship is the greater impact it can have on a person than that which is usually experienced in a worship service or lecture.<sup>72</sup> This ministry is

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<sup>69</sup> Haugk, *Christian Caregiving*, 68.

<sup>70</sup> Tan and Scalise state, "Some of the areas that Stephen ministers have been involved in include people who are hospitalized; the terminally ill and their families, those who experience significant grief and loss...people in trouble with the law; parents who have children leaving home for various reasons...people who are lonely, depressed, or bereaved; new members of the congregation and/or community." *Lay Counseling*, 90. However, it should be noted that there are positive situations in which caregivers like Stephen ministers engage (e.g. major life events like birthdays, weddings, adoptions, graduations, retirements, all are opportunities for the presence and ministry of Christian caregivers)

<sup>71</sup> Fr. Thomas Acklin OSB, and Fr. Boniface Hicks OSB. *Spiritual Direction: A Guide for Sharing the Father's Love*. (Steubenville: Emmaus Road Publishing, 2017), 18

also one-on-one for theological reasons. The authors assert that, "...the dynamic of all our human relationships is supposed to be patterned on our relationship with God...In fact, Jesus revealed that the one-on-one relationship with God necessarily depends on how we live out our one-one-one relationships with human beings."<sup>73</sup> In other words, because of the intimacy with God that one can have through Christ, an individualized relationship is important for providing and receiving spiritual direction.

Acklin and Hicks also provide ways for those called and equipped to be spiritual directors in the Roman Catholic Church to effectively and faithfully come alongside people in their congregation to provide spiritual care and direction. Spiritual directors are to engage in vulnerability, listening, and communication. They are direct in stating, "Spiritual direction is not a relationship of equality or mutuality like friendship or marriage."<sup>74</sup> The focus of this relationship is unequally focused on the spiritual life of the mentee. This does not mean however that the spiritual director is not to be vulnerable with those they mentor but that vulnerability is guarded and should not distract from the task of listening. Primarily, spiritual directors take postures of active listening in order to hear the needs of the directee. Active listening requires encouragement and reiteration in order for good communication and mutual understanding.<sup>75</sup> In response to the task of listening, spiritual directors communicate back not only their understanding of what they have heard, but how the story of God interacts with the story they have heard. This

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<sup>72</sup> Ibid, 16.

<sup>73</sup> Ibid, 14.

<sup>74</sup> Ibid, 53

<sup>75</sup> Ibid, 97

relationship can be a true benefit for the directee and director. Acklin and Hicks explain that, “There is a real way in which they can give new life to a directee. This happens by fostering and nurturing the spiritual maturity of the directee in a way that is spiritually lifegiving.”<sup>76</sup> Spiritual direction both encourages a deeper relationship with God and builds trust as the director continues to lovingly respond to the directee.

A further example of this model is Karen Lampe whose work, *Caring Congregation: How to Become One and Why It Matters*, encourages congregations to train Congregational Care Ministers (CCMs).<sup>77</sup> The CCMs act as an extension of the pastoral ministry. The CCMs answer to the pastor and are often called on in response to needs that the pastor cannot immediately address. This includes but is not limited to counseling, hospital visits, and prayer. If a CCM senses the need requires pastoral attention, they delegate back to the pastor. This is in many ways a combination of the previous two exemplars. Similar to Stephen Ministries, CCMs are systematically trained in order to be fully ready to provide quality care.<sup>78</sup> In fact, Lampe has CCMs take the Stephen Ministry training as the intention for CCMs is also to be available for a wide array of opportunities in order to provide holistic care. Lampe’s model emerges from the Methodist tradition, so other safety and best practices trainings used by her are tied to the United Methodist Church. CCMs train also in the Alpha Course, an evangelistic resource for introducing people to the Gospel. Likewise, CCMs are similar to spiritual directors as

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<sup>76</sup> Ibid, 109

<sup>77</sup> CCMs are described briefly here, but will be discussed in further detail in the following chapter.

<sup>78</sup> Karen Lampe, *The Caring Congregation: How to Become One and Why it Matters*, (Nashville: Abingdon Press, 2011), 23.

they are trained to provide counsel and become good listeners and communicators to guide people in their spiritual life.<sup>79</sup> All of these examples are formal in their uses of training to equip lay ministers, but encourage a more fluid structure for how they engage the needs of the congregation.

The importance of Christian mentorship should not be understated. Entering into such spiritual guidance relationships as those provided through Stephen Ministers, spiritual directors, and CCMs can have an effective impact on people's lives and their faith in God. Nevertheless, the scope of congregational care should not stop with such relationships for two reasons. First, the Church is not merely a collection of good one-to-one relationships, but a whole community of believers walking in faithfulness together. While it is important to find spiritual guides and caregivers who are willing to take individuals under their direct care, one should also encourage ways to direct those being cared for to further relational connections in the church and lead them in ways they can provide care mutually for others.

The second issue then is that, though the group of lay ministers who are perceived as spiritually mature themselves are providing necessary care, the goal should be mutuality. This is not likely to exist as long as the relationship is mentor-mentee or director-directee. These are unequal relationships as a higher level of spiritual maturity in directors/mentors is important in this model. Furthermore, this poses the problem of creating a new person or committee on which to center the responsibility of care. One may decentralize from the pastor, but there is still hierarchy in this practice of care. These same two issues are at hand with the third model as well.

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<sup>79</sup> Ibid, 81-86.

### *The Formal-Organized Model of Lay Counseling*

In this final model, Tan and Scalise work to equip churches with formal-organized lay counseling teams. They found that there is benefit in churches not only having trained volunteers for the purpose of providing care, but a team of people specifically trained in counseling services. Though the examples above had organized structures to make care available for members of a congregation, Tan and Scalise advocate for there to be formal training specifically for counseling so that there can be official client-counselor relationships. This not only provides assurance for the quality of care, but does so in a way that reduces the risks to liability and confidentiality issues that spontaneous and informal ministries can experience.<sup>80</sup>

### *Lay Counseling and a Culture of Care*

While formal and informal lay counseling helps decentralize from the pastor and equips the laity to be engaged in caring ministries, it does not by itself equip the rest of the congregation to care. Further, lay counseling systems, no matter how formally structured, would benefit from engaging a more holistic network of relational connections within a congregation. Hypothetically, as an example, if a pastor was experiencing burnout and it were affecting family life, the pastor would benefit from seeking out another pastor who has likewise been trained to provide spiritual guidance and counsel. The benefit of the interventions suggested by such a caregiver might be cut short without further connections of care within the congregation. If more family time or rest were suggested, for example, the pastor would need to seek out the board to let them know of the need for rest, connection with people who can provide or suggest good child care if

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<sup>80</sup> Tan and Scalise, *Lay Counseling*, 90-91.

that is needed, support from people who might watch over the pastor's house and take up some responsibilities that need delegating. In order for the sabbath rest to happen, a counseling minister is essential, but not the only resource of care necessary.

Another example was observed when a local resident came into connection with the Tahlequah congregation through an event advertised on Facebook. We met and he became involved in our church. In sharing his testimony, it became apparent that he was a part of a local Alcoholics Anonymous group and served as a district sponsor, helping connect people in need with meetings in their local area. This was a groundbreaking resource for the congregation. Now if there is someone struggling with addiction in the congregation who seeks Christian counsel, the pastor can provide counsel and also have a means of connecting them to a support system. If the pastor is someone who does not struggle with alcohol, they cannot identify as much with them as another person with such experiences. Without a connection to people who can empathize, pastors can certainly assist in the area of spiritual direction, but can do little else to help directly. With systems of connection, one can point those in need of recovery in the direction of an AA meeting and better still, people who are willing to walk with them and specifically help them get involved in recovery. Christian care can begin at well trained counselling, but it does not end there. Connections to a larger body of care, namely the full expression of a congregation in its context, will mean a more holistic response than any pastor or lay leader can alone provide.

Having examined the principles and practices around lay ministries of care, it is evident that in moving toward a holistic culture of care, ministries like lay counseling and spiritual direction are still needed. Such ministries retain an encouragement to identify



and foster those spiritually gifted for unique ministries in the church, including those of counselling. The call for everyone to care within the church does not mean that every person will provide care in the same capacity within the congregation. Additionally, in moving toward a culture of care, there is a need for a catalytic means of doing so. Congregations cannot be led somewhere without people engaged in leadership to facilitate such movement. Such ministries as lay counseling can provide the means of moving a congregation toward a place where everyone is engaged in care for each other in the ways the Spirit has equipped them to do. Churches need lay leaders engaged in care in order to develop a culture where everyone cares.

There are still shortfalls however to stopping at lay counseling as the full answer to a need for compassion within congregations. Though such ministries can help decentralize from the sole care of pastoral leaders, the question is then how to decentralize from those lay counselors. The models above do well to equip and encourage the spiritually gifted and delegate responsibility for spiritual guidance away from just the pastor, and these models even provide ways for lay counselors to care for each other. Nevertheless, the pastor is still usually seen as head of these ministries and the models themselves do little to envision what the role is for the rest of the congregation who are receiving the care from these counselors. If all Christians are called to care, but not all are fit for certain ministries of care, how is it that all believers fulfill their vocation as caregivers in ways authentic to themselves? There is need to extrapolate further upon these models and find ways to integrate them into a more holistic vision of congregational care and practices which invite all of the community into mutual

caregiving. In order to do this, we must first explore another key practice which can facilitate this way of life in congregations, namely the development of small groups.

### Small Groups

Along with lay ministers, small groups have been a way for churches to decentralize their practices of care. Small groups lie in the midst of a tension between contributing to hierarchical systems and individualized care and decentralizing away from pastor-centered ministries and providing a more holistic sense of connection. These gatherings can be helpful in building community, forming a sense of being and belonging, and providing opportunities for care and support. At the same time, they can become disconnected from their context, isolated from the larger congregational community, and can struggle to give voice and support to all people mutually. As will be demonstrated, the indigenous perspective can shed some critical light on the ways that small groups can be better practiced and will help envision a way that small group ministry can help a congregation care more holistically.

#### *What is a Small Group Ministry?*

Before examining the way that they are held in a tension between being a benefit and a hinderance to decentralized care, one should seek to define the practice. Small groups are, as the name suggest, gatherings that are likely smaller than worship services or other fellowship events. There are varieties of opinions as to what size constitutes a “small” group. One could point to the number of twelve as a good parameter, as Jesus’ apostles gathered in times of more intimate discussions with Jesus than when he preached to the crowds.<sup>81</sup> There is variety of opinion on the size limits of small groups, but

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<sup>81</sup> Peterson, *Foundations of Pastoral Care*, 68.

scholars agree that the reason for reducing the size of a gathering is to create the opportunity for more intimate discussion and relationship building.

Small group ministries have a long and vibrant history. Robert Wuthnow, in the pivotal work on the subject, *Sharing the Journey: Support Groups and America's New Quest for Community*, explains that, in the early days of the Church, people would meet in homes, “for mutual support and to affirm their common faith,”<sup>82</sup> to worship, pray, fellowship, and read scripture together. The Reformation in the sixteenth century saw the study of scripture expand from the cathedrals to gatherings of Christians in their homes. Small groups as they are known in American Christianity today emerge from a diversity of religious life in the United States and the rapid growth of movements like that of Methodism. Methodists were effective in major part due to their use of small groups – the class meeting, societies, and bands. Baptist churches were also prolific in their use of small groups like midweek prayer meetings. These gatherings were instrumental in the makeup and expansion of American Christianity.<sup>83</sup>

Small groups have continued to be prevalent throughout modern church practices. Wuthnow did extensive surveys to garner insights on what the landscape of small group ministries in America consisted of in 1994. At the time, small groups were widely practiced. Wuthnow estimates that, if evenly distributed, there was one group for every 80 people living in the United States.<sup>84</sup> Though the quantity of small group ministry is high, scholars have long engaged the consideration of what defines the quality of a small

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<sup>82</sup> Robert Wuthnow, *Sharing the Journey: Support Groups and America's New Quest for Community*. 1<sup>st</sup> Free Press pbk ed. (New York: Free Press, Simon and Schuster, 1996), 41

<sup>83</sup> Ibid, 40-42.

<sup>84</sup> Ibid, 46.

group. In order for small groups to be effective, their goals and methods should be intentionally examined. As with their size, the types of small groups have wide varieties but can be placed into several categories.

Kevin Watson, in his book, *The Class Meeting: Reclaiming a Forgotten (and Essential) Small Group Experience*, defines three varieties of small groups. The first type of group is, “Affinity Groups.”<sup>85</sup> These are groups which are formed around common interests or hobbies. For Watson, they are to be least prioritized for Christian small group practices because he views the goal of small group ministry to be discipleship. Affinity groups do much to build comradery but do very little to seek substantial changes toward a goal of deeper faithfulness or understanding. In consideration of Christian care and small groups, affinity groups are good for relationships, but perhaps do little else to build systems of support.

The second type of small group Watson defines as, “Information-Driven.”<sup>86</sup> Examples of these groups are Sunday School classes and other groups which consist of Bible study or other curriculum focused activities. Even these groups can serve to provide environments of care and support if one is intentional about doing so. Wuthnow indicates that the Sunday schools which provide consistent care are great examples of how community formation and discipleship are not mutually exclusive.<sup>87</sup> One issue with information-driven groups however is that they give little room for reciprocal engagement beyond the subject matter. They usually center around a leader who is

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<sup>85</sup> Kevin M. Watson, *The Class Meeting: Reclaiming a Lost (and Essential) Small Group Experience*. (Wilmore: Seedbed 2014), location 171.

<sup>86</sup> Ibid, location 211

<sup>87</sup> Wuthnow, *Sharing the Journey*, 67.

bringing the group toward an understanding of the material. This leaves little time to discuss the experiences and perspectives of the other participants. Minds are transformed in these groups, but the application of insights is often left for the individuals to do beyond the meetings.

Watson emphasizes the third type of small group, which he defines as, “Transformation-Driven.” Such groups do not focus on, “...discussion or mastery of content, but on changed lives, on group member’s experience of God.”<sup>88</sup> On the one hand, Watson’s preference for this category is clear in his work and one could argue that all of these groups are providing some sort of transformation. The affinity groups could help transform relationships and many would argue that the curriculum provided in a Christian small group can be life-changing. However, Watson emphasizes a specific type of transformation, “making disciples of Jesus Christ.” His argument is that groups can be formed in a way that holistically address issues of faith and practice which shapes disciples. In developing a culture of care then, this seems like the preferred way of approaching the development of small groups. For, the goal is not simply to support one another, but to do so in pursuit of the way of Jesus. Christian care means to show compassion as believers pursue faithfulness together. This can be accomplished in transformation-based groups in particular. What is more, such small groups have the potential for personal change in particular group members and the development of a cultural transformation in congregations as a whole.

#### *Small Groups as Community Formation*

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<sup>88</sup> Watson, *The Class Meeting*, location 183.

Having defined small group ministry to some degree, we move now to critically engage the efficacy of the practice. Small groups have the potential to be great for community development. Wuthnow explains the findings from his extensive study done regarding small group effectiveness. He found that people were motivated to join groups, not just from a human desire to be in community, but because, “community is a value instilled by religious tradition.”<sup>89</sup> While one cannot just assume that people will take advantage of the opportunity to connect with one another, it would seem that small groups have been largely successful at being an expression of community formation especially when carefully implemented. Wuthnow affirms that through small groups, barriers of, “cultural differences, gender biases, racism can all be overcome as people learn to trust and support one another.”<sup>90</sup> Because of their small size, trust is more easily established in small group ministry. Relationships can be quickly and deeply established because there are a limited number of participants. Wuthnow affirms that the main way that trust is generated is if, “members feel they have a chance to share their problems with one another in the group.”<sup>91</sup> When one can share and listen freely in the presence of others, there not only is a transformation of the self, but also a comradeship formed amongst participants in small groups.

Conversely, studies have also shown that small groups that are poorly established can have the reverse effect. Theresa Latini, in, *The Church and the Crisis of Community: A Practical Theology of Small Group Ministry*, utilizes Robert Wuthnow’s research on

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<sup>89</sup> Ibid, location 108.

<sup>90</sup> Ibid, location 79.

<sup>91</sup> Ibid, location 154.

small groups to help form a practical theology of the practice. She summarizes the research, indicating, "...small groups represent an ecclesial and societal practice that both facilitates and undermines spiritual, communal and personal formation."<sup>92</sup> As Wuthnow indicates elsewhere in his article, "Small Groups Forge New Notions of Community and the Sacred," while some groups facilitate community, other small groups can at times further individualistic tendencies as people seek others of a like-mind. People can also tend to, "focus on themselves in the presence of others," reinforcing their own assumptions, and small groups can become isolated from the larger community.<sup>93</sup> If steps are not taken to form trust and support and in so doing take individual participant's focus off themselves, small groups can be hindered in their effectiveness.

Furthermore, if participants do not trust each other, they may only share as much as they want others to know rather than being open with their experiences. When focus is on the self, support that is experienced in these groups can also inhibit personal transformation. Support groups help people nurture their self-esteem as other participants honor, listen, and encourage them. However, if this group support becomes an end to itself with no drive for transformative change or accountability, participants may be left to face their problems with no resolution. The community formation that results from small groups relies heavily on both mutuality and accountability as participants seek to improve personally and support each other.

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<sup>92</sup> Latini, *The Church and the Crisis and Community: A Practical Theology of Small Group Ministry*. (Grand Rapids: Eerdmans Publishing, 2011), 43.

<sup>93</sup> Robert Wuthnow, "Small Groups Form New Notions of Community and the Sacred," *The Christian Century*. (December 8, 1993). 1237.

Such a paradox exists because of a disconnect between practice and theology. Cloud and Townsend explain that, “While we have a cultural movement of small groups in the church, we often lack a theological vision for their role. Nor do we have practical ways to do that vision.”<sup>94</sup> We have often adopted a practice without giving it a significant theological foundation. It could also be said that the reverse is true. Most churches certainly believe that they are, by nature, communities living toward a mutual love and life together. The issue is often that those beliefs are not adequately expressed in tangible ministries. This disconnect often results in the existence of small groups in which, “not all members experience this support equally.”<sup>95</sup> Though small groups can help build a supportive church community, it is important that there be careful implementation so as to create trust and a supportive environment for all participants as much as is possible.

#### *Small Group and Decentralized Ministry*

Small group gatherings can also be of great value for developing a decentralized culture of congregational care. Developing small groups can be a way to spread the responsibility of care to other members of the congregation. Lampe indicates that small groups can be helpful to participants in consolidating time spent in care as people share similar issues.<sup>96</sup> Groups can develop environments of support and care. As Wuthnow’s research also shows, most groups indicate participant satisfaction in areas like, “having people who trust each other, and addressing important issues,”<sup>97</sup> and relative

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<sup>94</sup> Henry Cloud and John Townsend, *Making Small Groups Work: What Every Small Group Leader Needs to Know*. (Grand Rapids: Zondervan, 2003), 23.

<sup>95</sup> Wuthnow, *Sharing the Journey*, 173.

<sup>96</sup> Karen Lampe, *The Caring Congregation*, 36.

<sup>97</sup> Wuthnow, *Sharing the Journey*, 143.



effectiveness in making connections for emotional support and relationships.<sup>98</sup> In all forms of groups, there is an opportunity for caring relationships to develop. It should be noted however that, as Rose Mary Dougherty explains in *Group Spiritual Direction: Community for Discernment*, small groups do not meet the needs of everyone, particularly those whose needs call for more direct and personal spiritual care or professional counseling.<sup>99</sup> Nevertheless, groups help nurture the development of spiritual guidance and care as Christians believe that God, “often chooses to minister to us through the sharing and support of others.”<sup>100</sup> The more meaningful relationships in a congregation, the better one experiences ministries of care.

As small groups spread the responsibility of support around, they can also reflect a less hierarchical model of leadership. Most groups have a designated leader, and there are many who claim, as Alice Fryling does in *Seeking God Together: An Introduction to Group Spiritual Direction*, that groups need, “...informed facilitators to lead.”<sup>101</sup> However, some research indicates that groups flourish regardless of facilitation. They can exist, as Wuthnow exhorts, “...not because of strong leaders and agendas, but despite

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<sup>98</sup> Ibid, 53. Table 2.3 “Meeting the Need for Community: Percentage of Group Members who have (A) Felt the Need and (B) Met Each Need Fully.” Needs listed as, “Having people in your life who give you deep emotional support; Having friends you can always count on when you’re in a jam; Having people you can turn to when you feel depressed and lonely,” were the most effective. All showed that more than 50% of participants affirmed that these needs were met.

<sup>99</sup> Rose Mary Dougherty, *Group Spiritual Direction: Community for Discernment*, (New York: Paulist Press, 1995). 72.

<sup>100</sup> Ibid, 82.

<sup>101</sup> Alice Fryling, *Seeking God Together: An Introduction to Group Spiritual Direction*, (Downers Grove: InterVarsity Press, 2009). 27.

them.”<sup>102</sup> While leaders are often a necessary part of small group ministry, it is possible for them to be mutual members depending on the principles and practices of the group.

In addition to the way small groups decentralize from a pastor, they also help the church live outside a focus on the physical structure. Church buildings have often become over-emphasized parts of religious practices. One critique of centering Christian identity only on traditional institutions comes from indigenous author, Vine Deloria Jr. Deloria explains that, “Indian religions consequently do not need the massive buildings, expensive pipe organs, fund-raising drives, publications, and other activities that the Christian denominations need to perpetuate themselves.”<sup>103</sup> It is certainly true that there has been too much focus on the physical structures of Christian community. I disagree with Deloria however, in that these things are not what perpetuate the Christian religion. As Deloria continues to expand on his point, he acknowledges that tribal religious practices, though not using the above described items, do utilize sacred grounds while others occur, “in apartments within the large urban areas far from the sacred lands of the tribe.”<sup>104</sup> Though the physical institutions of the Church have been a source of distraction, Deloria is mistaken to think that the Christian Church cannot also operate in a decentralized manner away from such institutions.

Indeed, many churches meet in apartments and houses far from “sacred places,” becoming themselves places of holy honor. This is especially true of small group ministry. Small groups have the ability to meet within church buildings or elsewhere in

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<sup>102</sup> Wuthnow, *Sharing the Journey*, 131.

<sup>103</sup> Vine Deloria Jr., *God is Red: A Native View of Religion*, (Wheat Ridge: Fulcrum Publishing, 2003), 213.

<sup>104</sup> Ibid.

homes, coffee shops, businesses, parks, etc. In the days of the Covid-19 pandemic, there has been a surge in online gatherings. Some churches have opted for a hybrid model, with members of small groups or classes attending through video conference while others meet in person. Other groups meet entirely online. The motivation for innovating the space in which small groups meet comes not just from the crisis of a pandemic, but the need for churches to go beyond their comfort zones in order to faithfully proclaim the Gospel to the world, one that is skeptical of whether or not the Church's value is more than an institution.

### *Mutuality and Interdependence*

In addition to community formation and decentralization, small groups can create an opportunity to build mutuality amongst members if they are established with ideals and methodologies of interdependence. Whereas the individual connections of lay counseling and pastoral care essentially are not mutual relationships, small groups can be effective in fostering equality among participants. This is especially important in contexts like Tahlequah which engages diverse people like those in indigenous cultures. Tribal identity is neither individualistic nor consumerist in nature. The primary symbol for the tribal community is the circle which connotes interdependence and equality among the people. For example, powwow grounds are circular fields, ceremonial drums are circles, hoops are used for traditional dances. This imagery in their gatherings emerges from their sense of connection to each other. Deloria explains,

“The concept of an individual alone in a tribal religious sense is ridiculous. The very complexity of tribal life and the interdependence of people on one another makes this concept improbable at best, a terrifying loss of identity at worst...he does not so much live in a tribe; the tribe lives in him.”<sup>105</sup>

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<sup>105</sup> Deloria, *God is Red*, 195.

Tribal identity stands as a corrective against individualism because it begins with an emphasis on the life of the collective. Alan Smith indicates in his article, “A Cherokee Way of Knowing: Can Native American Spirituality Impact Religious Education,” that teaching community development in a way that focuses on grounding personal identity in how one relates to the other can lead one, “...beyond the arrogance of individuation and personal agendas for development.”<sup>106</sup> For Deloria, Christianity as it exists today is beyond hope for such education. He believes that it has become so tied to western society that, were the colonial structures supporting it to have crumbled, “Christianity would have vanished long since.”<sup>107</sup> Though it is true that the Church must deconstruct its marriage to westernization, its complicity in this culture does not negate its value or its identity.

For, it is not the individual that makes up the church’s mission, but God at work in its people. Richard Twiss, another indigenous scholar, shares a different view of Christianity. He too acknowledges western Christianity’s disregard of communal identity in exchange for an individualistic focus. Twiss notes that, because of this focus, to convert to Christianity, a native person is faced with the possible rejection of the tribe, being tantamount to rejecting all their relationships, and even their identity.<sup>108</sup> However, while acknowledging the shortfalls of Christendom, Twiss sees value in Christ himself. He says adamantly that, “We must help Native people to see that the Christian faith is the

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<sup>106</sup> Alan Smith, “A Cherokee Way of Knowing: Can Native American Spirituality Impact Religious Education?” *Religious Education*. Vol. 90, No. 2, (Spring 1995). 251.

<sup>107</sup> Ibid, 216.

<sup>108</sup> Richard Twiss, *One Church Many Tribes: Following Jesus the Way God Made You* (Minneapolis: Chosen Books, 2000), 100.

only real and working power of God for today – that Jesus Christ is not only about eternal reward but shalom for this life also.”<sup>109</sup> For Twiss, decolonizing Christianity and its institutions is a part of discovering the core of Christian faith. Twiss retained that, though many have wrongly equated Christ with colonialism, Christ himself is the way, the truth and the life. Community formation in Christ, rather than a particular culture, leads toward shalom – a holistic expression of relationship that embodies the likeness of God.

Effective efforts in mutuality can thus be found in small groups that do not develop toward homogenization. A Christ-like community is one that celebrates diversity. Small groups, particularly those which are transformation-driven, can be helpful because they encourage people to get together with those different from themselves. If one only attends curriculum-focused classes or worship services, they are more likely to only personally process and evaluate things based on their own preferences and experiences. As Pavlovitz indicates, by getting together with people different than us and seeking transformation, we become a healthier community based on, “love, support, belonging, and mutual respect.”<sup>110</sup> Furthermore, small groups that are faithfully formed are not insular, but seek outward movement in mission. As people draw closer to each other in following Jesus, they can, “extend the gospel into all the world.”<sup>111</sup> Certain practices are transformational throughout all forms of small groups when they are established intentionally toward Christ-like community and mission.<sup>112</sup>

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<sup>109</sup> Ibid, 102.

<sup>110</sup> John Pavlovitz, *A Bigger Table*, 101.

<sup>111</sup> Chris Surratt, *Leading Small Groups: How to Gather, Launch, Lead, and Multiply Your Small Group*, (Nashville: B&H Publishing Group, 2019), 118.

One example of how to share power in a group is in the rotation of facilitators. Dougherty describes how some spiritual direction groups will have a person who shares and then the rest of the group asks follow-up questions. Each meeting, there is a different person who takes the lead, sharing the role of facilitator amongst all participants.<sup>113</sup> Another example is that of Eric Law, who explains the practice of Mutual Invitation in, *The Wolf Shall Dwell with the Lamb: A Spirituality for Leadership in Multicultural Community*. In this practice, one person will talk and then invite another person in the group to have the option to share. That person is not required to speak, but has the power of deciding to do so and choosing who speaks next.<sup>114</sup> This sharing of power can prevent people from dominating conversation and forces some to wait and listen when they are prone to speak first.

Though it is important to form groups that share equal power, the reality is that existing groups like Sunday schools, Bible studies, etc. may not currently work this way. This does not mean that they are not vital opportunities for care! In fact, as one moves toward groups that are not hierarchical, Dougherty encourages that there be, at first, a capable person who takes the leadership role.<sup>115</sup> There must be a movement toward rotating leadership or working to share the facilitation of the group among all participants. As this culture is built, each group, no matter how they are structured at first,

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<sup>112</sup> Henry Cloud and John Townsend, *Making Small Groups Work: What Every Small Group Leader Needs to Know*. (Grand Rapids: Zondervan, 2003), 29.

<sup>113</sup> Dougherty, *Group Spiritual Direction*, 99.

<sup>114</sup> Eric H.F. Law, *The Wolf Shall Dwell with the Lamb: A Spirituality for Leadership in a Multicultural Community*. (St. Louis: Chalice Press, 1993). 83.

<sup>115</sup> Dougherty, *Group Spiritual Direction*, 65.

can start to build in practices of care and group dynamics where everyone's voice can be heard.

Additionally, small groups can create interdependency in churches organizationally. In a church which establishes small groups that celebrate interdependence amongst members, there is potential that the different ministries of the church to be seen as cooperative entities rather than small groups being separate from each other. For example, David Slamp, in his work, *Care Rings: Sunday School and Small Groups Side by Side*, envisions how the church can expand outreach and discipleship opportunities. He does so by partnering Sunday school classes and the "care ring" groups he established to better connect people in relationships.<sup>116</sup> The former is an information-based group while the latter are groups to foster relationships in reference to the Sunday school gathering. This provides a way to integrate people more easily by intentionally forming caring relationships. It does not isolate the work of the care ring groups to themselves but brings people back toward the discipleship formation in Sunday school. Small groups should not just foster cooperation within themselves but between all the parts of the church's ministry. Interdependence and mutuality are not just methods for effective small groups but can be a way of life which a church can enter into throughout its ministries.

### *Storytelling and Meaning-Making*

Small groups can facilitate times of listening to the stories and experiences of others. By empowering others to speak, it can give voice to those whose perspective may

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<sup>116</sup> David Slamp, *Care Rings: Sunday School & Small Groups Side by Side*, (Wichita: Vessel Press, 2004), 101.

be undervalued and builds empathy within a group. If one only hears from like-minded, like-cultured people, systems of exclusion are perpetuated. Margaret Kovach, in, *Indigenous Methodologies: Characteristics, Conversations, and Contexts*, notes that this is particularly important for tribal communities, as story-telling is about “co-constructing knowledge” and can give voice to the marginalized.<sup>117</sup> Others, like Mary Rynsburger and Mark Lamport, have argued that there is not as much value in sharing experience as interpreting scripture.<sup>118</sup> However, biblical truths cannot be interpreted or applied outside of human experience. So, telling stories together is a way to truly put biblical insights into practice. By learning from indigenous culture’s emphasis on mutuality and story-telling, small groups can be an empowering place for embodying the value of diversity in the Church. In fact, there is some precedence in the effectiveness of seeing life experiences as a source not only of knowledge, but of community formation and care.

Consider the example of the class meeting in the Methodist movement. John Wesley was particularly impactful in his efforts to bring people together in community. One of the ways that Wesley did this was through the development of class meetings. These were groups, usually of no more than twelve people who would meet regularly to address the common goal of seeking holiness of heart and life.<sup>119</sup> They would use the question, “How is it with your soul,” as a prompt for discussing each individual’s faith

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<sup>117</sup> Margaret Kovach, *Indigenous Methodologies: Characteristics, Conversations, and Contexts*, (Toronto: University of Toronto Press, 2009), 100.

<sup>118</sup> Mary Rynsburger and Mark A. Lamport. “All the Rage: How Small Groups Are Really Educating Christian Adults.” Part 1 of Assessing Small Group Ministry Practice: A Review of the Literature. *Christian Education Journal*. Series 3, Vol. 5, No. 1. 126.

<sup>119</sup> Kevin M. Watson, *The Class Meeting: Reclaiming a Lost (and Essential) Small Group Experience*. (Wilmore: Seedbed. 2014), Location 413.



journey. One did not have to be a member of the church in order to attend class meetings as they were “open meetings.”<sup>120</sup> As Wesley explains, the groups were for all who were interested in uniting, “together to encourage and help each other in . . . working out [their] salvation, and for that end watch over one another in love.”<sup>121</sup> Indeed, in watching over one another in love there was opportunity for people to speak in supportive and caring ways for their fellow participant in the meetings.<sup>122</sup>

What made Wesley’s class meetings so effective were the way they connected community, provided accountability, and formed the faith of those involved. Community development is likely the most enduring attribute of the class meeting. Kevin Watson describes how the class meetings, along with the societies and band structures, stood apart from similar movements of the time in his article, “The Form and Power of Godliness: Wesleyan Communal Discipline as Voluntary Suffering.” Watson quotes George Whitefield, a contemporary of Wesley’s, who famously said of these structures, “My brother Wesley acted wisely – the souls that were awakened under his ministry he joined in class, and thus preserved the fruits of his labor. This I neglected, and my people are a rope of sand.”<sup>123</sup> Wesley did not enact such systems by accident, but through meticulous application of his theology into the structures of his revival movement. Wesley’s goal in his theological work was always focused on how it shaped the community of the Church. Tim Crutcher in his work, *John Wesley: His Life and Thought*,

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<sup>120</sup> Ibid. 863.

<sup>121</sup> Kevin M. Watson, “The Form and Power of Godliness: Wesleyan Communal Discipline as Voluntary Suffering.” *Wesleyan Theological Journal*, 43 no 1. (Spring 2008), 165.

<sup>122</sup> Watson, *The Class Meeting*, Location 965.

<sup>123</sup> Watson, “The Form and Power of Godliness,” 168.

says it best when he exhorts, “The peak of Wesley’s doctrine of salvation is, therefore, not individual sanctification; it is a community in which people who are being entirely sanctified...express their God-given love for one another and extend that love beyond the community into the world.”<sup>124</sup> How the people of God come together, pursue faith, and bear witness in community were the defining characteristics of Wesley’s movement and of the class meeting.

Another attribute of the class meeting was the system of accountability it produced in the community. Wesley was not developing groups that merely listened to one another with no other goal than to encourage. Rather, as Berk Affleck quotes Robert Chiles in his article, “John Wesley’s Spiritual Disciplines for Today’s Pastor,” Wesley was concerned with the pursuit of holiness, which took seriously the, “hard stubborn fact of sin and the warm triumphant gift of grace.”<sup>125</sup> This accountability unfortunately took on a “pharisaic rigidity”<sup>126</sup> which has been a source of resistance by the modern Methodist tradition. In fact, the practice of the class meeting as Wesley established it became almost extinct by the twentieth century.<sup>127</sup> With this in mind, it is important to note that bringing back such a system is not to resurrect any legalistic rigidity that took form, but rather the need for there to be mutual accountability which fosters transformation rather than judgement.

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<sup>124</sup> Tim Crutcher. *John Wesley: His Life and Thought*. (Kansas City: Beacon Hill Press, 2015). 162.

<sup>125</sup> Bert Affleck, “John Wesley’s Spiritual Disciplines for Today’s Pastor.” *Perkins Journal*. (1987), 6.

<sup>126</sup> *Ibid*, 8.

<sup>127</sup> Watson, *The Class Meeting*, Location 802.

Watson defines the class meeting as a type of “transformation-driven group,”<sup>128</sup> which is the type of small group he claims should be emphasized above others in churches. The class meeting in particular is a practice which Watson argues is important to reintroduce for modern congregations. Recapturing the merits of the class system means that the ways the group is accountable to one another is in the common pursuit, not of conformity to a set of rules, but, as Petersen notes, the mutual support of, “diverse people with a common purpose of experiencing personal faith.”<sup>129</sup> The purpose of small groups inspired by the class meeting should be transformation toward holiness of heart and life. To this one can be held accountable by the community, not so that one might meet some kind of standard defined by fellow participants. Rather, it is so one might seek the transformative power and call to faithfulness set by Christ.

In addition to community formation and accountability, class meetings were also a result of Wesley’s theological method which utilized the role of experience in the formation of faith and theology. For Wesley, faith sharing was faith formation. As Watson explains, “Wesley saw that one of the important results of these class meetings was that Christians ‘began to bear one another’s burdens, and ‘naturally’ to ‘care for one another.’ ...When Christians united together, they also tended to grow in faith.”<sup>130</sup> Believers come to know more about God and themselves through putting the Scriptures into practice and hearing the testimonies of others. As the people in class meetings shared

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<sup>128</sup> Ibid, Location 183.

<sup>129</sup> Petersen, *Pastor Care and Counseling*, 70.

<sup>130</sup> Watson, “The Form and Power of Godliness,” 167.

stories pertaining to how it was “with their soul,” the faith of all who heard were by the Spirit being transformed.

This transformation comes from God, who forms believers through Scripture and through our putting interpretations of Scripture into practice in daily life. Crutcher explains in his book, *The Crucible of Life: The Role of Experience in John Wesley’s Theological Method*, that for Wesley, “Both divine revelation and human experience of the world are valued, and each are employed to comprehend the other and to create scriptural space in experience for an encounter with divine reality.”<sup>131</sup> Just comprehending the scriptures is not enough until it is, “tested and further refined,”<sup>132</sup> in lived experience. Thus, the value of class meetings is that participants debrief not only what they comprehend of their faith through scripture and tradition, but what they have experienced in living out their faith. The sharing of experience then is a transformational and theological exercise for the Church community and so any iteration of a group inspired by class meetings should seek to define the role of experience and the voice of all God’s people as a tool of God’s grace.

The Class Meeting itself is no longer practiced in the majority of Methodism today. This is for various reasons. As Watson points out, there has been a shift toward prioritizing curriculum-based groups over those which invite everyone to be mutual facilitators in the meeting. This has occurred, in Watson’s view, from a tendency toward catering to individualistic preferences of personalities, teaching styles, and homogeneity

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<sup>131</sup> Tim Crutcher, *The Crucible of Life: The Role of Experience in John Wesley’s Theological Method*. (Lexington: Emeth Press, 2010). 210.

<sup>132</sup> Patricia S. Hill, “Let My Story Speak for Me: Story Circles as a Critical Pedagogical Tool,” in *The Akron Story Circle Project*. Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017). 60.

in groups that are more information focused. It is also due to a desire to step away from the aspect of accountability which is inherent in the class meeting sharing one's own story and seeking after a common goal. Watson is not advocating for a return to Wesley's rigidity, but a renewal of transformation focused groups in the church. The principles and practices put forward in this project are there to help congregations form groups which accomplish this goal by meeting around the purpose of care. Thankfully, there are some examples of such groups which, in a way similar to the class meeting seek transformation through sharing experiences.

Another example of storytelling and meaning-making in small groups is Story Circles. Patricia S. Hill, one of the facilitators of the *Akron Story Circle Project*, in her essay, "Let My Story Speak for Me," defines Story Circles as, "...a gathering of individuals together in a circle with the objective of sharing their own real-life experiences – listening to and learning from the experiences of others."<sup>133</sup> Where the class meeting is a long-term group, Story Circles offer regular meetings for a short term, usually in response to a common crisis. Story Circles originated during the civil rights movement as a way to get people together to talk about the issues of race in their communities. This was for the crossing of social and cultural boundaries as people who likely did not know one another were brought together to share their common experiences and learn from one another. In more recent years, this practice has been used in the arts community as they would use the experiences shared to present in artistic expression the realities of race relations through media like theater and painting.

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<sup>133</sup> Ibid.

The University of Akron used Story Circles to bring students together to address racial justice issues. The university took groups of six to eight individuals and gave them questions to prompt discussion so as to help them understand themselves and others.<sup>134</sup> As with Wesley, there is a heavy emphasis on experience as a tool for discernment. Hill explains that, “The telling of experience is constructed in relation to how we have come to understand the world.”<sup>135</sup> The purpose of Story Circles is to help people not only share their worldview through experiences, but have their worldviews widened by hearing the stories of others.

In, *The Akron Story Circle Project*, researchers juxtaposed the effects of Story Circles with focus groups that utilized a far more structured format and controlled interactions among participants. They found that the Story Circle structure and method facilitated more conversation and contemplation amongst participants. Carolyn Behrman and Sandra Prettyman, in their essay regarding the project, “The Story Circle Method and the Social Science Toolkit,” concluded that, though the openness of story circles could lead to the conversation being dominated by one or more participants, there was more “heterogeneity” in the conversations of story circles than focus groups, whose structures sometimes led toward conformity in conversation.<sup>136</sup> The issue of dominance for story circles can certainly be overcome. Behrman and Prettyman note that, because Story Circles, “...offer participants the opportunity to hear and be heard in a structured and

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<sup>134</sup> Ibid, 104.

<sup>135</sup> Ibid, 61.

<sup>136</sup> Carolyn Behrman and Sandra Prettyman, “The Story Circle Method and the Social Science Toolkit,” in *The Akron Story Circle Project*. Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017). 104

‘safe’ environment, they are very effective for group bonding.”<sup>137</sup> So, while one must be careful that all are heard, when they are, story circles become an effective community building exercise.

Another conclusion was that focus group discussions were largely dependent upon the “skills and background of the facilitator.”<sup>138</sup> Just as those leading story circles need to make sure that all are heard, focus groups depend largely on the skill of the facilitator to move the conversation along and fill the silence when necessary. Because story circles revolve around the experiences of the participants and not the facilitator, breaks in conversation are good, leading to contemplation amongst the groups.<sup>139</sup> So, while there are some dangers in the open structure of story circles, such groups facilitate more open discussion and reflection.

Some churches have also utilized Story Circles to help people share experiences and build bridges in the face of difficult subjects. On a personal note, I had the opportunity to take part in a “Circle Story for Beginners” for the duration of three weekly meetings and one training session to equip the participants to lead such groups in their contexts. We discussed stories of experiences of racial issues in church contexts. The meetings were held virtually through video conference due to the pandemic. The group had four participants and was facilitated by two people on the steering committee of the NOW Movement,<sup>140</sup> a group within the Church of the Nazarene that is self-described as “a grassroots movement for pursuing justice.”

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<sup>137</sup> Ibid, 78.

<sup>138</sup> Ibid, 108.

<sup>139</sup> Ibid.

The first meeting began by affirming a commitment to confidentiality and reading a liturgical commitment to making the meeting into brave space - a place where all were heard and respected. Then the facilitators used a story conduit, which in Story Circles can be a current event, critical issue, or common text. We used Scripture. We were then asked the story question, to which each participant and the facilitators responded with life experiences. We were admonished to then follow-up, not with advice, but with clarifying questions so that everyone properly understood one another. We closed with a blessing and a prayer. Story Circles not only present a compelling model for group dynamics but also a timely answer to some issues people face. With the COVID-19 pandemic, the church could benefit from a model that can be achieved via video conference.

Additionally, our emergence from separation due to social distancing and quarantine necessitates a sharing of experiences, hurts, and challenges that cannot be achieved by simply moving forward with business as usual. Communal crises require communal answers, and a small group structure of care like Story Circles may yield a fruitful venue for caring and sharing faith together. This model thus requires further consideration.

The first benefit of Story Circles as a model is in the circle itself. The use of circles as a model for group dynamics does not only find roots in this contemporary model, but also among indigenous cultures who used them, as Caitlin Morneau states in *Harm, Healing, and Dignity: A Catholic Encounter with Restorative Justice*, "...to address conflict and live in right relationship with one another."<sup>141</sup> Morneau's research

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<sup>140</sup> In speaking with one of the facilitators, I was informed that "NOW" is unofficially an acronym for "Nazarenes On the Way," referencing the denominational name. At the time, this was at the time not official as they were still deliberating. It is also an exclamation, communicating the need to act "now" in response to social justice issues.



displays the power of circles when used for the purpose of reconciliation, primarily in victim-offender dialogues initiated by the victims. She elaborates that such groups, what she calls “restorative circles,”<sup>142</sup> can be used beyond situations where parties need reconciliation with each other, explaining that, “Circles can be a powerful tool for guiding community in addition to addressing specific instances of harm.”<sup>143</sup> The power of small groups like these are that people of diverse background can get together on equal footing to address a common issue. I assert that Story Circles can be used in response of congregational care needs precisely because they both build community and can be healing in response to challenges people face as all involved get an equal chance to have their voices heard and learn from one another.

Secondly, a benefit of the Story Circles is the “stories.” With each person sharing their experiences, the group is not trying to learn a curriculum from an expert. Rather, the story-tellers themselves provide the material for spiritual formation. They share their experiences as a result of a common prompt. So, if used as a tool for congregational care, a common issue, event, or subject could be utilized as the prompt so that everyone can share from their unique context the ways they experience those issues. Sharing stories can lead to faith formation and experiences are where faith is lived out. Even when people face similar situations, each one experiences them differently, so sharing together as equals and not just learning from an individual or curriculum can be a conduit for faith formation.

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<sup>141</sup> Caitlin Morneau, *Harm, Healing, and Human Dignity: A Catholic Encounter with Restorative Justice*. (Collegeville: Liturgical Press, 2019). 8.

<sup>142</sup> Ibid, 48.

<sup>143</sup> Ibid, 39.

In addition to Story Circles and class meetings, recovery groups such as Alcoholics Anonymous (AA) help to elevate the voices and stories of those in their meetings. While we will not examine all of the aspects of the twelve-step program, it is important to note the group dynamics and methodology of Alcoholics Anonymous. The Tahlequah congregation currently has an AA group meeting at the facilities. They are autonomous, in that they are not attached to any group other than the communion formed around a common problem – the need to address an addiction to alcohol. They are decentralized in that, though they have a board whose members facilitate the meetings, the program does not center on any individual’s leadership. In fact, anonymity is central to their identity as a group as it helps keep focus on, “principles before personalities.”<sup>144</sup>

Meetings involve sharing stories of redemption and struggle as well as reading from the “big book” of AA. Thus, the community formation at work in their efforts is not information-based alone, but seeks transformation by sharing experience and working toward a common goal. The barrier for entry is simply the willingness to try out the way of life inherent in seeking sobriety. Those seeking this are accompanied by sponsors, people who have been through the program and are willing to encourage and hold accountable fellow recovering alcoholics. The accountability comes through those relationships with sponsors and fellow members as well as periodic markers of success, namely, “chips” which mark the duration of one’s sobriety. While not exclusively for Christians, these groups effect change in the larger religious and secular communities.

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<sup>144</sup> *Alcoholics Anonymous: The Story of How Many Thousands of Men and Women Have Recovered from Alcoholism*. 4<sup>th</sup> ed. (New York City: Alcoholics Anonymous World Services, Inc. 2001), 562.

The members of the AA meeting which gathers at the church are part of the everyday life of Tahlequah and their members go to various churches or religious organizations.

There are also the indigenous approaches to recovery like Wellbriety.<sup>145</sup> One of the people in the Tahlequah congregation works at an organization called The Peaceful Warrior's Way, which is focused on providing recovery programs including "talking circles" in their wellbriety recovery program. These groups take place in a circle, promoting equality and interdependency. The guidelines for the recovery groups describe the role of the group leader by explaining, "The facilitator is not a leader in the sense of someone in control, but rather is a person who allows the circle to take place in a good way."<sup>146</sup> Like Story Circles, the facilitator might speak on a prompt for conversation to get started, but each person gets the opportunity to share their perspective.

When someone is holding the "talking object," usually a feather or another meaningful object to the community, they can speak without interruption. The rest of the group listens. Such a model should help demonstrate that it is beneficial to gather in contexts where all participate in community development and transformational actions, and that small groups can be an effective way to put into practice the belief that all members can contribute. While the examples of Story Circles, Alcoholics Anonymous, and Wellbriety seek to do something other than build up networks of care in Christian communities, they can be an inspiration for congregations. Just as these groups have led to transformed lives, a congregation might benefit from establishing small groups for the

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<sup>145</sup> *The Red Road to Wellbriety*. (White Bison, Inc, 2002), f. Wellbriety is an indigenous version of AA's 12-step addiction recovery program. It is not focused only on alcohol, but includes addictions to other substances. The name Wellbriety is to connote that holistic wellbeing, rather than sobriety alone, is the goal of the group program.

<sup>146</sup> Ibid, 18.

sake of building relationships and seeking a common goal of mutual care and support by sharing experiences and life together.

### **Conclusion**

The theology and being of a Christian community should be connected to our practices. God is by nature a mutually interdependent relationship which fully exists in loving unity and honor for the other persons. While the Church cannot fully match the love of God in how it relates, it can by grace reflect the triune relationship. Pastor-centric ministry detracts from a reflection of God's love and care. This is a symptom of the larger problem of individualism and consumerism in American Christianity. Reflecting competition and individualized services reduces the effectiveness of the Church's witness and care. Work can be done however to address this issue, particularly the symptom of pastor-centric ministry.

Attempts have been made to develop ministries which decentralize from sole pastoral care for a more holistic congregational care. Pastors are invited to change their practices to equip and encourage all believers to participate in the mission of the Church. Lay ministers and small groups can take some of the burden from the pastoral office and provide great benefits to a congregation's ability to care. Yet, there is more work to be done in order for the whole congregation to be connected and participate in care for one another. There should be a renewal of our congregational imagination and imagery for the interdependency between not only faith and practice, but every aspect of ministry and life itself. That vision of a culture of care can flow into a holistic practice which contextually utilizes the pastor, lay ministers and small groups for the purpose of equipping the whole church to live into an ever-developing culture of care.

## CHAPTER 3

### FROM TRIANGLES TO CIRCLES: A THEOLOGICAL, CULTURAL AND CONTEXTUAL RATIONALE FOR DEVELOPING A CULTURE OF CARE

*“But God has so arranged the body, giving the greater honor to the inferior members, that there may be no dissension within the body, but the members may have the same care for one another. If one member suffers, all suffer together with it; if one member is honored, all rejoice together with it.” 1 Corinthians 12:24b-26*

#### **Introduction**

The reality of pastor-centric ministry and the way it detracts from care relates to how one views and structures the relationships within congregational care. The image of the triune God draws us into a new kind of relationality, one in which all are interdependent and mutual in their love for each other. It is apparent however, that the way care is usually viewed and exercised does not match the practices which are needed for a decentralized ministry of care. One response to this issue is the reimagining of the structure of congregational care. In this chapter we will explore how trinitarian theology is a corrective for hierarchical and individualized care. We will also examine some models of community which call churches toward a holistic expression of care and connection. Finally, we will consider a reimagined model of care which engages concepts of the trinity and comparative models of care and integrates them so as to adequately represent the dynamics of support and compassion in and around Christian caregivers.

#### **Congregational Care and the Trinity**

A transformed congregational imagination and practice of care should emerge from theological affirmations. Beliefs about God will shape the practice of congregational compassion, as there is no better image of community than God. It is the

disconnect of practices from faith in a God who is embodied in interdependent relationship between Father, Son, and Holy Spirit that can lead to a hierarchical and compartmentalized views of Christian caregiving. Through God's revelation of God's self as Father, Son, and Holy Spirit, we come to know the one through whom all things were made and all things hold together. Theology of the Trinity lends itself to the discussion of Christian care as congregations seek to be communities of people united in uniqueness, serving one another in humility, and living in interdependent mutuality. God's very nature as Father, Son, and Holy Spirit is like an interconnected and mutual circle of triune relationality.

God has revealed the way that God exists relationally through Christ and the testimony of the Spirit. Neil Pembroke, in, *Renewing Pastoral Practice: Trinitarian Perspectives on Pastoral Care and Counseling*, seeks to inform the practices of care in a congregation by drawing us into the trinitarian themes of kenosis and perichoresis. Pembroke explains that, "Kenosis points to the fact that authentic relational life requires an emptying of the self in order to be receptive to the other."<sup>147</sup> Just as Christ did not regard equality with God as something to be exploited and humbled himself, the Church is invited into the same downward movement.<sup>148</sup> Even in the areas where there are unique positions of authority in a church, as with pastoral ministry and appointed lay leadership, the power inherent in those positions is to be relinquished. Kathleen Greider, in "Congregational Care: Lay Leadership Toward an Expanded Vision of Pastoral Care,"

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<sup>147</sup> Neil Pembroke. *Renewing Pastoral Practice: Trinitarian Perspectives on Pastoral Care and Counseling*. (S.I.: Routledge, 2021). 43.

<sup>148</sup> Phil. 2:4-11

explains it this way, “We will need to demonstrate that we are a community that can create power by sharing power.”<sup>149</sup> When ministry is seen as exclusive, it implies a power imbalance. Pastors must not lord their positions over the people, but instead stand in equal solidarity with their communities as they exercise care together. Non-clergy persons ought to also humble themselves to find receptive community with others.

Furthermore, Christ’s kenotic movement toward obedient humility, even to death on a cross, is consistent with God’s nature. As Michael Gorman points out in *Inhabiting the Cruciform God: Kenosis, Justification and Theosis in Paul’s Soteriology*, it is precisely because Christ was in the form of God that Christ took the posture of humility.<sup>150</sup> Likewise, it is not contrary to the Church’s nature to forego hierarchical methodologies, but is reflective of its identity as the Body of Christ. The apostle Paul, explains that, “...God has so arranged the body, giving the greater honor to the inferior member, that there may be no dissension within the body, but the members may have the same care for one another.”<sup>151</sup> The Body of Christ exists in reflection of the being of the Godhead. No person in the Trinity is greater or lesser than the other, and they share power with each other that they may retain mutual love. God has made the Church to reflect such love and the Church should orient its principles and practices toward fostering such relationships.

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<sup>149</sup> Greider, Kathleen J. “Congregational Care: Lay Leadership Toward an Expanded Vision of Pastoral Care.” *Impact*, 29, (1992): 9

<sup>150</sup> Michael Gorman, *Inhabiting the Cruciform God: Kenosis, Justification, and Theosis in Paul’s Narrative Soteriology*, (Grand Rapids: William B. Eerdmans Publishing, 2009). 23.

<sup>151</sup> 1 Cor. 12:24b-25

Another theological definition that can help us envision a culture of care is that of the perichoretic nature of the Triune God. Pembroke explains that perichoresis, or, “mutual indwelling, refers to the fact that there is both closeness and open space in the triune God.”<sup>152</sup> In order for a culture of care to be developed, equal honor is given to every part of the Body through humility and putting the belief that each member belongs to one another into practice. The Trinitarian relationship of God offers the means by which one can embody the vocation to care for one another. Miroslav Volf explains in, *After Our Likeness: The Church as the Image of the Trinity*, “Since the members of the church are interdependent, their life must be characterized by mutuality.”<sup>153</sup> There is much talk about a congregation’s unity with one another through analogies of family, friendship, and the like. However, there is often little done to demonstrate our need for each other beyond one-directional interactions in worship, sermons, teaching, etc.

For Pembroke, the idea of perichoresis is that, in reflection of the triune relationship, the Christian community, “...balance intimacy and unity with a respect for individuality and personal freedom.”<sup>154</sup> Christian unity should not lead to uniformity, but sees every person as necessary for the full expression of Christian compassion. Efforts should be made to develop practices which invite people to not only care, but to do so mutually so that there is not just a set of caregivers and care-receivers but a culture of care. Churches should engage in interdependent indwelling with one another and give mutual space for the means of grace inherent in Christian compassion to be given and

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<sup>152</sup> Pembroke, *Renewing Pastoral Practice*, 43.

<sup>153</sup> Volf, *After Our Likeness: The Church as the Image of the Trinity*, (Grand Rapids: William B. Eerdmans Publishing Company, 1998), 231.

<sup>154</sup> Pembroke, *Renewing Pastoral Practice*, 42.



received. Western congregations are culturally taught to prioritize the individual and be accountable to no one. In a trinitarian perspective, the opposite is true. Christians are called to confess sins and pray for each other,<sup>155</sup> bear one another's burdens,<sup>156</sup> cry and rejoice with each other.<sup>157</sup> Presence and a sense of belonging are needed for such care to take place. One cannot care for those one is not with. One will not care for those to whom one does not believe one belongs. Pastor centrism detracts from the unity of the church by leading people to isolate the compassion of the Christian community to one sector of an institution rather than a way of life encompassing the whole of every congregation.

To refrain from decentralizing also takes away from the dignity of each member's unique place within the Church. The life of a church and the experiences of its people are not mutually exclusive. Miroslav Volf further explains, "The members of the church do not stand over against the church as an institution; rather their own actions and relations are the institution church."<sup>158</sup> The ways in which these relations should manifest is in reflection of the Triune God mediated by the Spirit. This love between believers is not only vertical, in relating to God, but horizontal, in their relationships with other people. By the Spirit, Christians are in communion with God and others in order to know and express the fullness of love. Samuel Powel, in explaining how the Trinity informs our ecclesiology, explains,

"Thinking of the church as communion implies that each member has an active role to play in nurturing this communion...just as the Father and Son dwell in

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<sup>155</sup> James 5:26

<sup>156</sup> Gal. 6:2

<sup>157</sup> 1 Cor. 12:26

<sup>158</sup> Miroslav Volf, *After Our Likeness*, 241.

each other, so through the practice of love, each member of the church dwells in the others. As members of Christ's Body, we are members of one another."<sup>159</sup>

Just as worship and discipleship call for every follower of Christ to be engaged in deepening their relationship with God, Christian care is for every believer to be drawn deeper into the compassion of God. As every believer gives and receives care, they all further commune with the love of God.

The belief in the Trinity shapes the identity of the Church in communion with God and others. In the Church of the Nazarene's liturgy of communion, the invitation for the people to partake exhorts, "We come to the table that we may be renewed in life and salvation and be made one by the Spirit."<sup>160</sup> Yet, the Church has not always exercised our communion well. Though believers are in communion with God and others, they are also in the process of becoming at one with others. Western congregations do not often form in circles of care and community, but rather draw strait lines of connection to the things which can promote personal preference in congregational life – the pastor, music, denominational stances, friends, shared views, etc. A trinitarian ecclesiology calls us to practice what we preach, which requires God's work and a vulnerability to the critique of those who can provide nuance to this discussion.

Indigenous theologians can help westernized congregations form in ways that may look more trinitarian than typical church hierarchies. Theologians Clara Kidwell, Homer Noley, and George Tinker present an indigenous theology in, *Native American*

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<sup>159</sup> Samuel M. Powell, *The Trinity*, The Wesleyan Theological Series, (Kansas City: The Foundry Publishing, 2020), 68.

<sup>160</sup> Church of the Nazarene, *Manual: 2017-2021*. "Sacraments and Rituals: Lord's Supper," Paragraph 700, 260.

*Theology*. For them, community is represented by the connection people have to all other beings, as a circle we are connected to each other. They write in hope that non-indigenous people can honor and learn from their way of community,

“Perhaps one can begin to understand the extensive image of inter-relatedness and interdependence symbolized by the circle and the importance of reciprocity and respect for one another for maintaining the wholeness of the circle.”<sup>161</sup>

Trinitarian theology and the way of life which emerges out of communion with the Father, Son, and Holy Spirit, creates such an inter-related existence – God brings wholeness to the circle. Randy Woodley, in *Indigenous Theology and the Western Worldview*, explains that the theology of the Trinity can be a bridge toward a more holistic relationality. The dualism of western worldviews leads to, “the hierarchy of humans over creation and the hierarchy of humans over other human beings via gender, race, class, and such.”<sup>162</sup> Through the revelation of Jesus Christ, we come to know the fullness of a God of vulnerable and missional love who denounces such divisions.

Woodley also connects the very being of God to Shalom, which in scripture is a holistic peace. The reality of Shalom is both all-inclusive and tangible; “There is no private or partial shalom.”<sup>163</sup> It is not merely an absence of conflict but an active harmony between all parts of creation. The being of God as Trinity is not separated from the structure of the relationship God has in God’s self and God’s actions in the world. Woodley calls for the community of faith to embody Shalom in their structures and

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<sup>161</sup> Clara Sue Kidwell, Homer Noley, and George E. “Tink” Tinker, *Native American Theology*, (Maryknoll: Orbis Books, 2001), 51.

<sup>162</sup> Randy Woodley, *Indigenous Theology and the Western Worldview: A Decolonized Approach to Christian Doctrine*, (Grand Rapids: Baker Academic, 2022), 73.

<sup>163</sup> Randy Woodley, *Shalom and the Community of Creation: An Indigenous Vision*. (Grand Rapids: William B. Eerdmans, 2012), 21.

actions – to no longer divide their being and doing. He connects Shalom to a Cherokee concept of *Eloheh*, a word describing, “The Harmony Way.”<sup>164</sup> Harmony in the circle of life is broken when people set themselves over and against one another.

When one sees themselves as the primary relationship (individualism) or separates being from doing (dualism), there is a break in the harmony of the created order, a relationship that is supposed to reflect the interdependent, vulnerable, and holistic being of the Trinity. Woodley advocates for structural changes away from westernized models of hierarchy that detract from trinitarian ecclesiology that there might be a restored Shalom. As Woodley eloquently states, “Wherever relationships are fragmented, it is by living out shalom that they can be made whole.”<sup>165</sup> It is the proposal of this paper that we cannot restore shalom if we are fragmented in how we care for each other. A relationship with the Trinity and communion with others in this shalom-seeking way of life called the Church should lead us to rethink our structures and practices. This transformation of thinking leads to changes in very concept of the congregational community, pastoral ministry, and the practices which lead toward mutual care.

### **Models of Congregational Care**

Reframing the conception of congregational care is important for decentralizing care and developing more holistic practices. Thankfully, there have already been attempts to reshape ministry toward a more holistic image of care. First, one can revisit the example of Karen Lampe used above. She advocates for the practice of care to be decentralized from the sole responsibility of the pastor by the development of what she

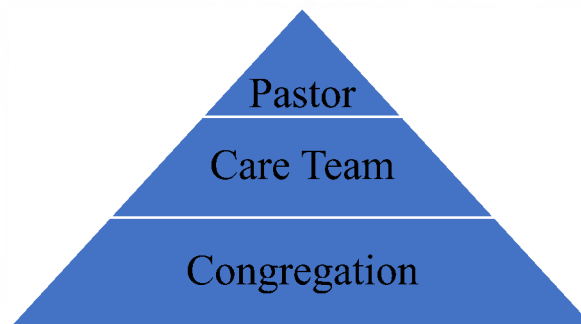
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<sup>164</sup> Ibid, 71

<sup>165</sup> Ibid, 24

calls “Congregational Care Ministers (CCMs).” These are teams of lay persons who are trained and equipped to visit the sick, make calls, and provide encouragement and prayer to other members of the congregation.<sup>166</sup> The CCMs answer to the pastor and meet regularly with her or him to keep accountability and to be cared for and encouraged in their ministry. Where there are situations that require the pastor, the CCMs will delegate back to the pastor those responsibilities so as to retain the authority and role of the pastoral office.<sup>167</sup>

Figure 2 – Karen Lampe’s practice of congregational care ministry in *The Caring Congregation*.<sup>168</sup>



Lampe’s model gives good practical implementation of a decentralized caregiving in the congregation. The existence of lay ministers affirms space for specific ministry roles and gives opportunity for people to further pursue callings to lay counseling and visitation. Furthermore, as congregations move toward a culture of care, such ministers or leaders can act as a catalyst for reimagining congregational care from the sole ministry of the pastor toward the life of the whole congregation. However, what seems to be lacking

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<sup>166</sup> Karen Lampe, *The Caring Congregation*, 23.

<sup>167</sup> *Ibid*, 43.

<sup>168</sup> Lampe does not provide an image of her method per se. This is an interpretation of how her work presents the relationship between pastor, CCM, and congregation.

in Lampe's model is an explanation of how the rest of the congregation is invited into the practice of care. Lampe exhorts that, in the process of forming a care team, "keep in mind that there is a need to collaborate with every part of the church...It is a ministry of all the people, not just a specialized group."<sup>169</sup> However, the majority of what she writes is in how the specialized group, the CCM team, operates. The model does not ultimately move us to the goal of caregiving as the whole community's responsibility both in practice and imagery, though that is part of her stated goal.

Lampe's model, though she does not give an illustration of it herself, retains the practical hierarchy of the church's care ministry. The pastor is at the top, and delegates responsibilities to the CCMs who are under the pastor's guidance. They then care for the rest of the congregation. Care in a sense, trickles down from the pastor to the rest of the congregation as it is expressed from the pastoral office and the group of lay ministers who answer to the pastor. In order for us to decentralize the ministry of care so that the whole congregation is engaged, it is important to deconstruct models that continue to have the pastor in a position above that of the congregation.

Another example of a model for congregational care is that of Marvin A. McMickle in his book, *Caring Pastor, Caring Congregation: Equipping Your Church for Pastoral Care*. He explains that pastoral care is not an isolated section of ministry in the church, but is the, "...overarching vision for how all ministry tasks can and should be conducted."<sup>170</sup> He presents a model for congregational care that shows three concentric circles, with the pastor at the center, then the congregation, and the community around

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<sup>169</sup> Karen Lampe, *The Caring Congregation*, xiv.

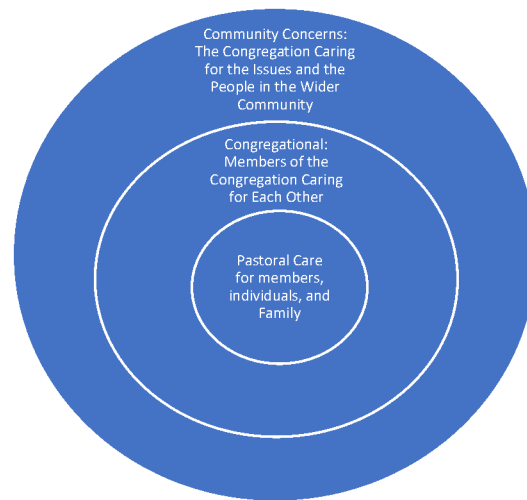
<sup>170</sup> Marvin A. McMickle, *Caring Pastors, Caring People*, 3.

the church as the outermost circle.<sup>171</sup> For McMickle, all pastoral ministry is part of care and extends out into the congregation. Whereas Lampe presents the Congregational Care Ministers as a unique and perhaps separate entity from the rest of the laity's care for each other, McMickle is more inclusive. The whole congregation is invited by the pastor's example, proclamation, and vision casting to engage in care and reimagine their current actions of compassion as part of ministry. In a further move from Lampe, McMickle explains how congregational care expands outside the walls of the church. The third concentric circle is the community where the church exists. A church's community is included in those that receive the care of the church. This is a welcome addition, as a church cannot exist outside of its context. Christian compassion happens in a community and as the congregation cares for each other, it happens in contextual ways and extends out into the community. In caring for others in the congregation, believers can hopefully stand in solidarity with those who are in the wider community outside their institutions.

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<sup>171</sup> Ibid, 6. See also figure 2 in appendix.

Figure 3 – Marvin A. McMickle’s Model of Congregational Care<sup>172</sup>



McMickle's model does provide a move away from hierarchy and presents pastoral care as a part of all of the church's work; the responsibility of all its people. However, it continues to present a model where the pastor is differentiated as a primary source of the ministry of care for the congregation. The fact that these circles are concentric, in that it moves from the center-most circle (the pastor), outward, seems to suggest that 1) the pastor is somehow separated from the congregation's care of itself, and 2) the care given by the pastor is not mutually received. I argue that there is a simultaneous, dynamic exchange of care between pastor and congregation. Care does not simply start with the pastor and emerge from pastor to congregation, but exists in the relationship of the whole church together in its context. Pastors are better caregivers as their people care for each other and vis a versa. While McMickle does not see the pastoral office as separate from the congregation, his model draws a line between the

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<sup>172</sup> McMickle, *Caring Pastors, Caring People*, 6. McMickle illustrates congregational care by drawing three concentric circles. He notes that the center-most is the easiest to achieve. The mid-level circle is more difficult, as it is achieved when one can, "access resources to respond in corporate life. The outer-most circle is the most difficult as it consists of "Social outreach as an extension of pastoral care; not members of congregation but neighbors within 1 mile of [the] church."



two. He explains that, “The circles of care model challenges pastors and congregations alike to resist [a] pastor-centric ministry mindset.”<sup>173</sup> Though he says this, his model still places the pastor at the center! To change the culture of a church toward holistic care, there should be a model of caring ministry that is more illustrative of the interdependency between pastoral care and congregation which we desire to achieve.

These models can perhaps be sharpened toward the goal of interconnected practices of care in a congregation by engaging with indigenous theology. Indigenous peoples have two concepts that can help churches to better express community development in gathering as the Church. The first is the aforementioned, “Harmony Way,” which Randy Woodley defines as an indigenous expression of biblical shalom. He explains that, though individualistic societies encourage loneliness and isolation, through shalom one can build, “authentic relationships and restore a sense of community.”<sup>174</sup> Just as the models of Lampe and McMickle seek to lead a community beyond one’s individual identity and desires toward a communal expression, the Harmony Way is about connections in identity, not just with ourselves, but with God, with creation, and with other humans. Where they differ is that the Harmony Way does not start from one part of the community, but from the whole expression of the people together. While Lampe and McMickle’s models represent divisions and layers to community, indigenous culture does not see such divisions indicative of the western mindset. Unlike western ideologies of community, the concept of the Harmony Way does not start with

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<sup>173</sup> McMickle, *Caring Pastors, Caring People*, 99.

<sup>174</sup> Randy Woodley, *Shalom and the Community of Creation*, 24.

individuals, nor does it stop at insular community development. Rather, like the Kingdom of God, it is ever-expanding and welcoming more people into the circle.<sup>175</sup>

This is seen more clearly in a second concept, which encompasses family relations in indigenous culture. The Church often calls itself “family,” but to say this term means different things between indigenous and western mindsets. In the west, people organize by nuclear families, and within those families are individualistic tendencies. One in a western mindset focuses more on one’s nuclear family than others, and this as long as there are positive ties between family and one’s individuality. In indigenous thought, there is a wider definition of who is part of the family. This is given different terminology depending on tribe, but two important expressions are *tiyospaye*, meaning “extended family,”<sup>176</sup> and *mitakuye oyasin* or “all my relations.”<sup>177</sup> These are orientations of living toward how one relates to God, creation, ourselves, each other – to all things. In other words, “We are at all times aware of being part of a bigger family.”<sup>178</sup> Instead of building communities and group identities around personal desires, indigenous peoples see their connection to all relations.

One could note the separation of tribes and wonder how there can be this sense of *mitakuye oyasin* between tribal identities. However, much of the emphasis upon the divisions between tribes is colonially instituted. As Vine Deloria Jr. describes, the names that indigenous groups are known by today (e.g. Cherokee or Navajo tribes) are not how

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<sup>175</sup> Ibid, 33.

<sup>176</sup> Twiss, *One Church Many Tribes*, 103.

<sup>177</sup> Ibid, 104.

<sup>178</sup> Ibid.

they self-identified in their language. The Cherokee for example, called themselves *ani yun wiya*, which means, “real people.”<sup>179</sup> Indigenous people are not bound to the demarcations of borders and tribalism. Their identity emerges out of their being as a people in the land and in their time, while western Christianity has historically proclaimed a largely otherworldly gospel. Deloria notes that Christianity, “Appears incapable of providing any reality to the life in which we are here and now presently engaged.”<sup>180</sup> One should acknowledge that there has often been a failure by the church to voice the holistic message of the Gospel. However, it seems apparent that this can change as Christianity is compatible with both calling for transformation and valuing people in their cultural context.

Through honoring the culture and identity of our indigenous neighbors in our congregational care, we can better know what it is to relate to each other as indigenous culture points toward an ever-expanding interrelatedness. The Cherokee tribe in particular has this reality built into their language. Melissa Harkrider explains, that,

“In Cherokee, to speak of a hand or a foot must necessarily include reference to the person it is a part of...To speak of ‘a hand’ without noting to whom it belongs is to acknowledge that it has been permanently detached from its body and, thus, can no longer be considered part of it.”<sup>181</sup>

She relates this to how Christians have connectedness built into ecclesial language. The Church is the “Body of Christ,” and to allow congregational identity to reflect individualism in western culture more than this reality is to ultimately say to the other

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<sup>179</sup> Vine Deloria Jr. *God is Red*, 301 Appendix II

<sup>180</sup> Ibid, 74.

<sup>181</sup> Melissa Harkrider, “We Belong to One Another: Reconciliation in Cherokee Hymns and Worship.” *North American Institute for Indigenous Theological Studies*, Vol. 13, (2015). 37.

parts that there is no need of them.<sup>182</sup> Christ calls believers toward connection with one another, and partnering theological language with tribal perspective can develop practices toward a more holistic connection. As Woodley, a Keetoowah Cherokee himself, explains, “We are a part of everything around us and everything around us is a part of us...When we are all together in one room, we are sharing more than a metaphor.”<sup>183</sup> We need each other, and so we gather together, and are connected to all our relations. Such realities are echoed throughout scripture and so these indigenous views on community can strengthen our understanding of the ramifications of gathering as the Body of Christ.

Furthermore, the expression of *mitakuye oyasin* is communicated mostly through the imagery of circles. For instance, tribal ceremonial grounds are formed in a circle, hoops are used in dances, dream catchers are circular in shape, meetings are often held in a circle. This communicates how they relate to all their relations; *mitakuye oyasin*. A prime example of this imagery is in what is called a “medicine wheel.”<sup>184</sup> This symbol shows a circle with a cross in the middle, each section a different color. The medicine wheel represents the holistic nature of life and the interdependency of community – there is nothing in life separated and in community there is equality. The sections are not isolated from each other but represent the cycles of life (children, adolescents, adults, and elders), the four seasons of the calendar (spring, summer, fall, winter) and the four directions of the earth (North, South, East, West).<sup>185</sup> This symbol represents the belief of

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<sup>182</sup> 1 Cor. 12:21

<sup>183</sup> Woodley, *Shalom and the Community of Creation*, 87.

<sup>184</sup> *The Red Road to Wellbriety*, 11. See also Appendix B.

<sup>185</sup> *Ibid*, 12-14.

tribes that one's being is shaped by one's belonging not only to other people but to all things in creation.

As Woodley explains, "There is something of God in all creation. Living out these relationships as sacred is living in shalom."<sup>186</sup> Whenever there is a break in harmony, some indigenous peoples refer to it as a "broken hoop," or "broken circle."<sup>187</sup> This is not just for relationships between human beings that need reconciliation, but relationships with all our relations. Communities are to seek identity formation that is not individualized or compartmentalized, but move a community toward internal and external shalom. Such existence is, "communal, holistic, and tangible."<sup>188</sup> In other words, when we come together faithfully to care for each other, all of who we are is transformed because of how we faithfully embody our belonging to one another.

This circle thus does not connote exclusivity through its sections, but as George E. Tinker explains in *American Indian Liberation: A Theology of Sovereignty*, the phrase *mitakuye oyasin*, "includes all human beings, all two-leggeds as relatives of one another, and the ever-expanding circle does not stop there."<sup>189</sup> The connection communicated in the circle includes all animals, birds, and even the ground upon which we stand. Tinker exhorts that when indigenous peoples pray, they do so often in a circle, representing the "whole of the universe and our part in it."<sup>190</sup> When these prayers happen it is not unusual

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<sup>186</sup> Woodley, *Shalom and the Community of Creation*, 20.

<sup>187</sup> Ibid, 21.

<sup>188</sup> Ibid.

<sup>189</sup> George E. "Tink" Tinker, *American Indian Liberation: A Theology of Sovereignty*, (Maryknoll: Orbis Books, 2008), 49.

for individuals to refrain from holding hands, a typical practice for western Christian prayer. This is because, as Tinker indicates, "...we know it is enough to stand in the circle already joined together, inextricably bound, through the earth which lies firm beneath our feet..."<sup>191</sup> The indigenous perspective of what it means to be part of a community can speak critically into how American Christians see their relationships within a church and the connections it has to the life of the world. That being said, it is not just that believers are all connected by their mere existence, but because of the nature and character of the one by whom they were made. Humans are made in God's image, and people redeemed by Christ are image bearers, drawn into a way of life predicated by a relationship with God.

### **An Interconnected Circle of Care**

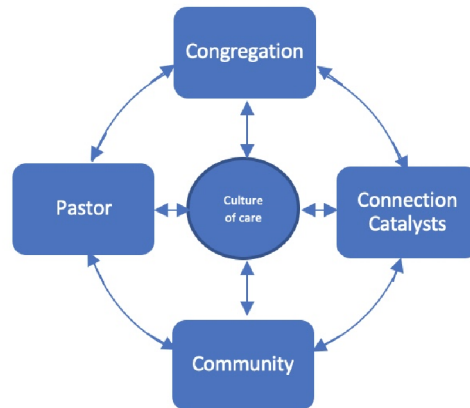
The models of Lampe, McMickle and indigenous theology provide a good foundation for cultural formation in congregational care. However, more development is needed to create a holistic view of care. This project proposes a model which integrates these perspectives but ventures away from the hierarchical structures of Lampe, decentralizes the pastoral role in McMickle, and envisions the harmonious connection of the indigenous concepts with a central theological reality by which congregations are defined. Rather than a triangular set or a concentric circle around a pastoral vision, it is important to see the church, in relation to its ministries of compassion, as an interconnected circle of care, such as the one demonstrated in the figure below.

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<sup>190</sup> Ibid, 48.

<sup>191</sup> Tinker, 48

Figure 4: Circle of Care



This model utilizes the areas of ministry described in both Lampe and McMickle's methods, but in a way that is more representative of trinitarian theology in that it moves downward from a hierarchical model (kenotic), and illustrates a mutual indwelling of all participants (perichoretic). Whereas Lampe's description of the congregation and lay ministers places them under the pastor's ministry, this model presents the congregation, pastor, and lay ministers as mutual partners in care. While her work does not actually present an illustrated hierarchical model, one can extrapolate from her description that the pastor is in the higher authoritative position.

Conversely, McMickle's model does not place the pastor at the top, but at the center. From the pastor's vision-casting and example, the rest of the congregation is invited into a way of caring for each other. In his model, pastor and people are not illustrated as being alongside one another as partners but as a people dependent upon the central reality of a personality. No matter how faithful that pastor is and how wonderfully they envision and practice congregational care, it is problematic to put them as the center of the church's care. This retains pastor-centrism, albeit unconventionally so, and detracts from mutuality in ministry. In McMickle's model, care emerges from the pastor, but does

not flow back inward towards her or him. Furthermore, the congregation's care for the community flows outward as if it is a separate reality.

Inspired by trinitarian theology, the model that I present envisions a perichoretic existence with arrows pointing inward and outward (mutual indwelling). The arrows point both directions and reach across the circle as well as connecting those side by side to connote a simultaneous interconnectedness. Each part of the circle is connected to the other to represent their mutual care for one another. Even as the pastor cares for the congregation, their faith and life are nurtured by the love and example of the congregation. As the congregation cares for the community, the church is affected by its community's acts of compassion and resources. As the Connections Catalysts, this model's alternative version of Congregational Care Ministers, provide care for the neighbor, they are also being connected to a network of support. This does not result in uniformity as each part of the model is given some individuality. Pastors are still uniquely called, lay ministers still have unique gifts, each community and congregation are distinctive with a diverse set of people. It is the case however, that each are seen as partners to the others rather than superiors or inferiors. While each part retains its identity, it is always drawn back into relationship with the whole.

The model also connotes a reflection of the kenotic aspects of the triune relationship. The model is itself a downward movement so as to give no start or end in any particular person, group, or structure. There is mutuality as everyone is receiving and giving support. No one is above the other, but all are equally working alongside each other. One might argue that there *is* a top and bottom to this model as the circle is presented on the vertical plane with the congregation at the top. The explanation for this



is that the medium in which this is presented forces a two-dimensional viewing (i.e. this is printed on a page, likely held upright). However, despite the limits of the medium, this model should be seen in a horizontal plane. It is intended to be interpreted as if someone set the book down and imagined each part of the model sitting next to each other around a common fire at the center. In response to our belief in a God of mutual interdependent relational love, the imagery of congregational care changes. Rather than being built as a triangular structure or a concentric circle, the church in every context should be envisioned as a mutually interdependent circle of care.

### Culture of Care

The circular structure is inspired by the indigenous theologians discussed in this dissertation. In a circle, none are higher than the other, nor is there a starting point. Pastors, congregations, connections catalysts, and communities should exist alongside one another. There are arrows between the different parts of the model to signify the mutual giving and receiving of care. The cross section in the middle is there to communicate that, 1) each part is connected not only to those next to them but also across; no one is disconnected. 2) The practices of each of the parts feed into and emerge out of a cultural reality of care. To view the relationships of care in this way is important for the vitality of how the church puts the love of the triune God into practice.

A circle intersected by a cross-section is similar to the indigenous symbol of the medicine wheel. The connection to this imagery emerges from the Tahlequah context being largely indigenous and subsequently the engagement here with indigenous scholarship as a result. That being said, the Circle of Care is not intended to acculturate this imagery as it is not derived solely from the medicine wheel. It is rather that the

mutuality and interconnectedness inherent in the circular imagery common in indigenous culture is preferable to the usual way western ideology imagines structures of church dynamics. The model also diverges in major ways from the medicine wheel in that, as opposed to its image, the Circle of Care *has* a central reality by which it is informed and in which each part is immersed. This central reality is what is described as the “culture of care” itself which is being formed by and also shaping each part of the circle.

The culture of care in this model is both the nature and character of God and the anticipation of the Kingdom of God. Though McMickle’s structure of care is also circular, what is problematic is that the pastor is at the center. However, the Circle of Care model emphasizes that the care ministries of the church should not center on the pastor’s vision and ministry. Nor should they emerge first from the work of the congregation or even the dynamics of its context. Rather, it is God’s vision of the Kingdom that should shape how a church lives and cares for each other. The nature and character of God is the example and empowerment toward a new way of relating to each other. It is not because a pastor wishes to decentralize ministry that one arrives at the conclusion that it is beneficial. Rather, it is because God values equality and in God’s Kingdom people are restored so as to live into their function as bearers of the divine image.

God enables all believers to reflect the same kind of humble indwelling love and care as the Triune relationship. It is not that we have reached the goal of mutual love, but that we are being empowered from glory to glory by the Holy Spirit to better reflect the love of God in our relationships. The Kingdom of God is an alternative culture inspiring a new way of life. It is a reality already through Christ, but is not fully consummated. Jesus

demonstrates this in his Sermon on the Mount in describing the beatitudes as a renewed way of seeing the world. For example, he says, “Blessed *are* those who mourn for they *will* be comforted.”<sup>192</sup> Because we anticipate a day when there will be no mourning, crying and pain, whenever we are there to cry with, comfort, mourn, and stand in solidarity, we are blessed!

At the center of a church’s actions is the life of communal compassion that Christ is forming, our “culture of care.” This reality of theology and eschatology informs practices of care as Christians and those experiences shape further how we view God and the Kingdom. This model operates as a dynamic hermeneutical circle. The more that Christians in a context come to know God by faith and the testimony of the Spirit, the more they will be empowered to care faithfully. Their experiences in putting that faith into practice will develop in their relationship with God and their interpretation and experience of the anticipated Kingdom. The arrows pointing both inward and outward demonstrate the interaction between the central reality of our culture of care and our practices. Our theological imagination of what care looks like in Christ shapes our practices and identity in this culture of care. Likewise, our practices feed back into what we believe as our faith is affirmed and challenged by what we experience.

This cultural compassion extends throughout the model as the experiences and practices of each part informs the life of the other. For example, a pastor’s preaching and faithful living does indeed have an effect on what his or her congregation sees as Christian compassion. The reverse is also true as a pastor’s ministry is not done in a vacuum but in partnership with their congregations. They experience care and learn to

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<sup>192</sup> Matt. 5:4, (Words italicized for emphasis).

practice it through faithful living with their congregation. This image expresses the simultaneous interdependence of all in the church as they care for one another in context. It provides a framework by which a congregation can decentralize care and envision a lifestyle of compassion. Even the central “culture of care” which God is forming is not static but dynamically informs the whole and all its parts.

### Congregation

One can now move to the other parts of the model. As with McMickle’s concentric circles, the Circle of Care presents the areas of pastor, congregation, and community but in a simultaneous and equal arrangement. The term congregation is a comprehensive description of the people that make up a local church. In receiving a call to specific ministries, pastors and lay leaders remain part of congregations. The context in which those spiritual gifts are exercised and nurtured is in a congregational context. Without the whole expression of the church, one cannot adequately describe pastor or lay leader, nor ground an identity of a group of believers within a community. The care practices of a congregation are intertwined with one another.

The apostle Paul, in his first letter to the Corinthians describes the use of spiritual gifts in connection with the analogy of the Church as a Body. He states that “you,” the collection of all the believers in Corinth, “are the body of Christ, and individually members of it.”<sup>193</sup> Each person in the congregation then brings something valuable for the building up of the whole Body – “a hymn, a lesson, a revelation, a tongue, or an interpretation.”<sup>194</sup> The problem with the Corinthians is that they did not use these gifts to

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<sup>193</sup> 1 Cor. 12:27

<sup>194</sup> 1 Cor. 14:26

build each other up, but were dividing and excluding along lines of personality and power. They divided over pastoral personalities, socio-economics, and opinions about the effectiveness of the gifts themselves. Paul responded by encouraging congregations to live into their identity as the Body of Christ and use spiritual gifts for the good of others rather than to support egos and divisions.

Healthy ministry takes place as Christians each bring their unique selves to sit at Christ's table together and build one another up in nurturing spiritual care. When united in life together, congregations can better support each other. Each member of a congregation, whether or not they have a specific "ministry position," can exercise care together in vital ways. McMickle and Lampe both describe how people who are equipped with certain trainings are part of the cultural shifts needed to become a caring congregation. However, it is in every other member's participation in care that this vision becomes reality. If care is sequestered to a committee, it will not become a way of life. It is vital that every member of a congregation is included in the mission of caring for others. One does not have to be a lay minister to offer hospitality to fellow members, connect with guests of the church, give gifts for birthdays and holidays, call and visit the sick and homebound, etc. The possibilities are endless only inasmuch as a vision of the primary actors and practices of congregational care expands to include all believers.

Congregational care also effects the pastor. The congregation's actions in transitioning away from pastoral tenure and preparing the church for the next pastoral leader is also part of a church's compassionate ministry. Like everyone else in the congregation, if pastors are not the central actors in care, they are also free to be supported by others. For example, when my wife and I moved to Tahlequah, we were

greeted by many church members who helped unload the moving truck and welcome us to our new home. During our first year of ministry, my wife would spend the week in Oklahoma City to finish her nursing degree and return to Tahlequah on the weekends. We were offered food, calls, and hospitality to help with the transition and times apart. It was a blessing to experience the care of this community, and it helped me develop as a pastor as we were being cared for even while discovering the needs in the congregation. Holistic congregational care is affected by a pastor's ministry, extends to the pastor personally, and strengthens their effectiveness.

The way a church cares as a whole extends to its neighbors as well. Anyone in a congregation can be helpful to people in their community. In Tahlequah, one of the members is part of the local gardening club which helps beautify the neighborhood and specifically landscapes Habitat for Humanity homes. In their care for these neighbors, they got the idea for our church to help spruce up the lawn and gardens for a family in a Habitat home. As a church we invited the members to get together in support of this family. One member showed compassion through their work in the garden club, and invited the rest of the congregation to participate. At every step, this was an extension of the church's care as a whole in partnership with its community.

Furthermore, as has been mentioned, Tahlequah Church of the Nazarene has an Alcoholics Anonymous group that meets in the facility. The way that this came about is through congregational care and connections. This started with a fundraiser for youth and children's programs. One member shared the event on Facebook, which attracted a college student who was new to the town. They came, ate and fellowshiped with the church members and myself. This further opened the door to this individual who became

involved in a small group held at a coffee shop. They shared their experienced of drastic change in life since beginning recovery from alcoholism through AA. I asked what our church could do to help their group. Years later, when they needed a change of location for the meeting, the individual asked if the AA group could begin meeting at our church. An event meant to support the youth and children of the congregation expanded to provide a church family for a college student and connected the church to an organization in the community which serves an important function of care. Rather than through a hierarchical system or the effectiveness of a centralized personality, congregational care simultaneously and organically engages with every part of the body of believers and the context in which the church lives. This mutual interconnectedness includes the clergy, who are usually placed in an unequal position in ministries of compassion.

#### Pastor

Having discussed the congregation's role in the circle of care, we now move to the role of pastors in the model. One will notice in the image that the pastor is not in any more prominent place than the other members. This is because, from as far back as the early church, congregations were healthier when they saw pastoral leaders as coworkers in the Gospel rather than superiors.<sup>195</sup> A prominent example of this is the first letter of the Apostle Paul to the believers in Corinth. There were many issues Paul addressed in the letter, including how fragmented the church had become. Particularly in relationship to their pastoral missionaries, they were divided. Paul heard news that their identity was

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<sup>195</sup> Willimon describes how ministers were designated as *diakonoi* in the New Testament, primarily by the apostle Paul, "a word derived from the Greek word for 'service.'" Rather than clergy being in a heightened position, this indicates a kind of humble partnership in ministry among believers. Every believer is a minister in a sense, even as some are called to particular expressions of ministry. Willimon explains that, "...in the topsy-turvy ethics of the Kingdom, this is as high as anyone rises – *a servant of servants* at the Lord's Table." Italics added by the author for emphasis. *Pastor*, 35.

divided, each saying, “I belong to Paul,” or “I belong to Apollos,” or “I belong to Cephas,” or “I belong to Christ.”<sup>196</sup> Paul responds, “Has Christ been divided? Was Paul crucified for you? Or were you baptized in the name of Paul?”<sup>197</sup> Paul even makes a surprising admission that he is, “thankful he did not baptize anyone else,”<sup>198</sup> because it would have only divided them further. Division over ministerial personalities and spiritual giftings is damaging to communion and witness.

Such divisions have remained an issue for churches due to an unhealthy view of the laity and clergy relationship. Willimon explains that the early church, as expressed through scriptures like First Peter, affirmed that, “All the baptized share in Christ’s priesthood to the world.” However, there began to be a discrepancy between clergy and laity as far back as Hippolytus in his *Apostolic Tradition*, which linked together Christian ministry with the structures of the Old Testament priesthood. The Third and Fourth Lateran Councils of 1179 and 1215 further distinguished the clergy from the community by placing ordination principally in the hands of the bishops rather than the particular community from which the ordination candidate came. As a result, “Ordination becomes an office held by an individual, passed down by a duly appointed bishop.”<sup>199</sup> This differentiates the role of the pastor from that of fellow believers in the congregation.

The traditional role of clergy does not however stand simply on the structures of the episcopacy, as ordination is an extension of the sacrament of baptism. Thomas Oden

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<sup>196</sup> 1 Cor. 1:12

<sup>197</sup> 1 Cor. 1:13

<sup>198</sup> 1 Cor. 1:14

<sup>199</sup> Willimon, *Pastor*, 41-42.



in *Pastoral Theology: Essentials of Ministry*, exhorts that Christians, lay and clergy alike, are called to, "...witness to the gospel, visit the sick, serve the needy, and assist in the building up of the community."<sup>200</sup> What makes pastors unique is the rite of ordination which commissions them to serve as, "...persons within the ministry of the baptized who are called of God and set apart by the whole church for the specific task of ordained ministry." Even in the rite of ordination however, ministers are not disconnected in any way from other believers. Peterson recalls the commitments of the ordination liturgy in his tradition, one of which reads, "Will you, in your own life, seek to follow the Lord Jesus Christ, love your neighbors, and work for the reconciliation of the world."<sup>201</sup> A pastor's call and commission to do the work of a minister is an extension of the underlying responsibility to be a follow of Christ, a commitment that finds its roots in one's baptism. Ordination does not set pastors above their fellow brothers and sisters in Christ, but are commissioned by the Church as partners in care as they serve in their role to build up the Body.

Therefore, pastors should be encouragers and equippers of congregational care who seek to connect each member to others and center the identity of the church in relationship to God and God's Kingdom. Oden explains that even a church that has been well-equipped for ministry is in constant need of an, "equipping, ordained ministry." In preparing a people for a ministry of care, pastors shape the imagination of a congregation by embodying and echoing the story of Christ and of that particular context. Pastors should use their voice in preaching, teaching, and counsel to help congregations envision

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<sup>200</sup> Thomas Oden, *Pastoral Theology: Essentials of Ministry*, (New York: Harper Collins, 1983), 26.

<sup>201</sup> Dawn and Peterson, *The Unnecessary Pastor*, 13.

what a culture of care can look like and how they are already interconnected in compassionate ministry. As Greider states, pastors should contribute in, “highlighting the important pastoral care work that is already being done by the members of the congregation but is seldom named and valued as such.”<sup>202</sup> Part of decentralizing congregational care will take the pastor’s voice in encouraging the care already going on and communicating the mission of the congregation and the purpose of the Connections Catalysts which we will discuss below.

Sharing these experiences and shaping the imagination of the congregation can begin to expand the story-telling beyond the pastor’s voice, as the congregation and Connections Catalysts begin engaging and telling stories of care. As an example of such a story, one of the Tahlequah church Sunday school teachers was in the hospital and I was visiting as she prepared for surgery. As we waited, one of the children that she taught and had at times cared for in her home while her grandmother worked came to visit. I realized that this woman had provided support through teaching and babysitting and this 5<sup>th</sup> grader was now caring for her in ways no less significant than myself. Moments like these, when communicated as part of congregational care can open up imaginations. Not only should pastors name actions like these as congregational care, but the stories of those deeds of care should also be told by their administrators. There will be deeds of compassion that are not always on the pastor’s radar, and so providing opportunities for testimony will be essential for a shift toward a culture of care.

Furthermore, because the pastor is in an interdependent relationship with the congregation in this model, pastors are not the sole providers of care but are mutual

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<sup>202</sup> Greider, “Congregational Care.” 8.

partners. Just as they can connect people in the congregation together, opportunities for pastoral care can emerge from the congregation's care for their pastor and for one another. For example, when my oldest son was born, the church gave me a few weeks off. One of those Sunday mornings, as I rocked my son to sleep and looked through our parsonage window, I saw people leaving the worship service. A man I had never seen was also standing in the parking lot. He had attended worship, but it was apparent he had no car. Then I saw members inviting him to ride with them to lunch. I as pastor was not present or needed for this act of compassion to occur. In that moment not only was this man being cared for by the congregation, but I was also being cared for by the church in the time of rest they provided for my family. In this image, congregational care is illustrated as a set of practices which rest not on a person or committee, but as part of the church's whole way of life together.

Christian care is not solo ministry, as it takes a network of resources to provide holistic transformation for a congregation and such connections to engage missionally within a community. Lampe states that, "No one person, lay or clergy, can address all the hurt of a congregation or community... Your job as a leader is to evaluate the needs of your community and then prioritize them as you assess available resources."<sup>203</sup> It is important for the pastor to help connect people to the resources of care around them and envision possible ministries which can help care for the hurts of the people. The people of the congregation themselves are resources with which pastors can connect people. Pastors also utilize the community around the church as resources for those within the church, referring when appropriate to skilled counselors, encouraging engagement with medical

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<sup>203</sup> Lampe, *Caring Congregation*, xii.

professionals, and partnering the educational institutions of a community as a resource. It is also important to note that the search that pastors engage in contextually for available resources should also not be done alone. There are individuals in congregations to whom the Spirit has equipped to make connections of care for the congregation. These members are Connections Catalysts.

### Connections Catalysts

The Circle of Care model makes use of Lampe's Congregational Care Ministers, but with a slightly different function and name. It is important when moving away from a hierarchical model to avoid terms like facilitator, leader, etc. as it communicates superiority. It is also important to call this team something other than "care ministers" as this communicates that the care of the church is localized to *their* ministry and not that of the whole community. Thus, the term "Connections Catalysts" is used as they are not the sole providers of care but are catalysts for connecting people to opportunities to receive and give care. That being said, Lampe is correct in explaining that, "Not every member of your congregation will have the gifts and skills necessary to fill this [Congregational Care Minister] role of caring for the congregation."<sup>204</sup> There are those in a congregation who are equipped and can be trained to specifically engage in this ministry.

The role of the Connections Catalysts consists of many of the things that Lampe describes for the Congregational Care Team – calling on people, making hospital visits, etc. However, they are also inviting others into connections and opportunities to care, as their name suggests. The Connections Catalysts are there not only to give spiritual guidance and support for their fellow members of the congregation, but also to connect

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<sup>204</sup> Ibid, 23.

them to the pastor, groups, and other individuals, who can provide them care and/or receive care from them. Consider that every prayer request and visitation can be an invitation toward connection – to inform the congregation of the ways that a person is in need and connect them to God and others. There may be members going through similar issues, and while it is important that those on the Connections Team are attentive to those care needs, it is also vital in a culture of care that they connect those who are hurting to the pastor and the rest of the congregation. All should seek to do this, but the Connections Catalysts work to spark the imagination of the congregation in word and deed toward a culture of care. Every Christian is called to care in the ways God has equipped them to do so. All can show kindness through deeds like mowing lawns for the home-bound and elderly, cooking for their neighbors, visiting the sick and prisoner not in an official capacity but simply as Christian people who show care. The possibilities are endless just as God's compassion is endless. Connections Catalysts work to give each part honor as they are connected and encouraged to care for each other.

It is not that Connections Catalysts are to be alternatives to pastoral ministry. Rather, they are essential parts of the network of support that a church can build when everyone is engaged in caring for each other in the ways that God has called each one to do. God certainly calls people into ministries of caregiving that are more traditionally ascribed to as lay counseling. Yet, these lay ministers and those for whom they care would be better benefited by a congregational culture in which people are being drawn into connection. Pastors are also aided by their ministry in that they too need care and cannot conceivably provide adequate care to every person in the congregation. Structures of sole care are not only unhealthy, but contradictory to goals that God has for believers.

Take for example the delegation practices of Moses in Exodus 18. After their liberation from Egypt, the people are centered around Moses. All of their lives in Egypt, they have been under one central authority in Pharaoh. Moses tries his best to hear all of the people's cases and inquiries and does so from dawn to dusk. His father-in-law Jethro, sees this and says to Moses, "What you are doing is not good. You will surely wear yourself out, both you and these people with you. for the task is too heavy for you; you cannot do it alone."<sup>205</sup> He does not strip Moses of his unique position in the community to mediate between them and God. He instead suggests that he appoint leaders who are trustworthy and faithful to take charge of, "thousands, hundreds, fifties and tens."<sup>206</sup>

While this may sound hierarchical, one must note the role of Moses is also to teach the people and, "make known to them the way they are to go and the things they are to do."<sup>207</sup> The central instruction of Moses' ministry is later communicated in God's covenantal goal for the whole community of Israelites to be, "a priestly kingdom and a holy nation."<sup>208</sup> By delegating power and practices away from Moses, the people reflect more of what God's goals are than their previous life in Egypt. This decentralized structure is but a step toward a way of life for an entire people to live into the shalom of God. When ministry is shared, everyone can live into God's vision of a priesthood of all believers as each uses their unique gifts for the blessing of others. When ministry is

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<sup>205</sup> Ex. 18:17b-18

<sup>206</sup> Ex. 18:25

<sup>207</sup> Ex. 18:20b

<sup>208</sup> Ex. 19:6

shared, as Jethro states, “Then you will be able to endure, and all these people will go to their homes in peace.”<sup>209</sup>

A further example of biblical leaders delegating authority and practice is Acts 6 as the church responds with concerns about neglected widows. Even in the early church, pastors, or in this case apostles, could not fulfill every need. Because the focus of the apostles was on the proclamation of the Gospel, there was not adequate time for them to personally address the needs of many of the poor in their communities. Rather than spread themselves thin or continue the neglect, they appointed people who were, “of good standing, full of the Spirit and wisdom,”<sup>210</sup> to tend to the widows. While the former served the word, the latter would serve food. The apostles could not accomplish everything to meet the needs of care in their community. There was a need for spiritually gifted persons to be directly engaged in ministries of care.

In line with these examples, the Circle of Care model continues to celebrate that God equips persons for certain acts of ministry in the church. Those who are called by God to be particularly involved in visitation, calls, and counsel should be affirmed by the pastor and the congregation as Connections Catalysts. Their role is first to provide care to their fellow members in the congregation as they follow Christ, connecting them to the love of Jesus. This in itself requires a lot of listening as they seek the needs of those they care for. The Connections Catalysts should also work with the pastor in listening to the care needs of the whole congregation and community. An example of this type of ministry is in the Mutual Ministry Committee that is part of the Evangelical Lutheran

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<sup>209</sup> Ex. 18:23b

<sup>210</sup> Acts 6:3b

Church of America. This group is designated as a, "...mission-oriented enterprise that is characterized by a broad vision of ministry and a healthy practice of mutuality."<sup>211</sup> In the Mutual Ministry Committee, there is no designated leader but shared power amongst its members. Even the pastor, who is part of this committee does not serve as a superior but as a mutual member.<sup>212</sup> Likewise, the Connections Catalysts serve toward building mutuality not only in the congregation but in the team itself.

The Connection Catalysts serve to provide care and to make connections of both cultural and relational significance. The more people who are listening to the needs of a congregation, the more that a community can know what opportunities there are to care. So, the Connections Catalysts will name some of those issues within the congregation and the community as they care for people, making connections to a renewed imagination of what care can look like. Their work is not unidirectional, but is an opportunity for people to be dynamically connected to others. The Connection Catalysts' role is to direct people to small groups or to other individuals in the church to develop what Angela Reed defines as "spiritual friendships" in *Quest for Spiritual Community: Reclaiming Spiritual Guidance for Contemporary Congregations*.<sup>213</sup> They could even be the leaders of small groups, connecting people to the relationships in those groups. They can also direct people to the pastor, toward professional counseling in the community, or to ways that they can care for others.

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<sup>211</sup> Rick Summy, "Mutual Ministry" in *Pastor and People: Making Mutual Ministry Work*. (Minneapolis: Augsburg Fortress Press, 2003). 44.

<sup>212</sup> Ibid, 56.

<sup>213</sup> Angela H. Reed, *Quest for Spiritual Community: Reclaiming Spiritual Guidance for Contemporary Congregations*, (New York: T&T Clark, 2011). 161.



All of these connections and practices of care for the Connection Catalysts are to help lead people to places where they can be heard and where they can listen to others in an exercise of mutual care in community. These relationships are essential, as Reed notes, “If seekers cannot find resources and encouragement for their spiritual journey in a congregation, they will find a social network somewhere else...”<sup>214</sup> These leaders thus work as catalysts to a culture of care by leading others toward such relationships. It is likely that there are people in congregations who are already engaged in connecting people together and leading them to resources of care. It is the movement toward a culture of care which highlights these actions as important parts of congregational compassion. As the culture of care develops, these individuals will increasingly serve a less central role as care gradually becomes understood as everyone’s responsibility, thus retaining decentralization from the pastor and also the Connection Catalysts.

### Community

The final part of the model to consider is the role of the community in which a congregation does ministry. Every church is fundamentally shaped by its context. The cultural, economic, political, and social landscape of the place and time in which a church exists will inform what compassion looks like. The way that Christians practice care in a rural context will look different than in urban city centers, even though such love extends from a relationship with the same God. The church should first seek to exegete their community, to know its story and hear its needs. One recalls the way that God says to Moses, “I have observed the misery of my people who are in Egypt; I have heard their cry on account of their taskmasters. Indeed, I know their sufferings (Exodus 3:7b).”

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<sup>214</sup> Ibid, 34.

Liberation begins with looking, listening, and being empathetic. Compassion literally means, “to suffer with.” One cannot suffer with a place or people they are not willing to hear. God invites people to also live their lives for the good of their place in which they dwell. In Jeremiah 29, God’s plans include for the people to build houses, start families, plant gardens; to obey even in exile the creational command to be fruitful and multiply.<sup>215</sup> God’s work, “to build and to plant,”<sup>216</sup> also invites the people to do the same for the good of their neighbors. Even as Israelites live among their enemies in Babylon, God says to the people, “...seek the welfare of the city where I have sent you into exile, and pray to the Lord on its behalf, for in its welfare you will find your welfare.”<sup>217</sup> Compassion begins with listening and extends to every aspect of life.

The care of the church thus reaches out to its community, not as if it were a separate entity, but as the Body of Christ which dwells in that context. Rebecca Laird explains in her article, “The Priesthood of All Believers: A Theology of Laity,” that in these times of declining involvement with religious organizations, churches which continue to grow show a common characteristic of being involved in an outward movement toward their community. Ministries like small groups often held in the community have been the reason many people have joined churches. It is often the case that the church has, “gloriously left the building.”<sup>218</sup> The innovative way churches have faithfully gathered and scattered in their contexts should be celebrated.

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<sup>215</sup> Jer. 29:4-6

<sup>216</sup> Jeremiah is commissioned by God in Jer. 1:10, who says, “See, today I appoint you over nations and over kingdoms, to pluck up and to pull down, to destroy and to overthrow, to build and to plant.”

<sup>217</sup> Jer. 29:7

It is important however that one does not create hard distinctions between what is done inside and outside the institution of the church. What one does to show compassion and care by gathering at a church building or religious institution, cannot be separated from a movement outward. Michael Goheen in *The Church and Its Vocation: Lesslie Newbigin's Missionary Ecclesiology*, explains that, "Neither the church as new being nor the church as a new social order is limited to the church as a *gathered community*."<sup>219</sup> Just as life does not occur through either inward or outward breaths, but requires both continually, the life of the Church is found in both going out and coming in. For example, a pastor is no less a Christian outside the pulpit, a nurse is no less a Christian caregiver in what they do in the hospital than at a church building, a business owner has no less a call to show compassion at work than at worship, etc. One's profession does not exclude her or him from the fullness of exercising Christian care.

This is not to denounce the view that the Church is a unique community of people called out for a radically different purpose than that experienced in secular life – the Church is indeed not *of* the world. Rather, what is presented here is a model by which the Church is reminded that it is *in* the world. Dawn and Peterson exhort, "Still, at some level, everything we do and say, think and pray, requires a believing and obedient relation with God's love for the world, with Christ's reconciling work in the world."<sup>220</sup> It is impossible to engage in mission disconnected from a context because the people who

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<sup>218</sup> Rebecca Laird, "The Priesthood of All Believers: A Theology of Laity," in *Essential Church: A Wesleyan Ecclesiology*, editors Diane Leclerc and Mark Maddix. (Kansas City: Beacon Hill Press, 2014), 196.

<sup>219</sup> Michael W. Goheen, *The Church and Its Vocation: Lesslie Newbigin's Missional Ecclesiology*, (Grand Rapids: Baker Academic, 2018), 80. Italics placed by author to provide emphasis.

<sup>220</sup> Dawn and Peterson, *The Unnecessary Pastor*, 18

worship and live in connection to a church are all shaped by the place and time in which they live. A church's care engages its community simply because God is already active in every community.

How a church practices compassion also has great effect on how they are viewed by their community. The early church for example, referred to itself as *ekklesia* or “public assembly,” but its detractors used terms like *heranos* and *thiasos* which connote private religious cult practices with an otherworldly focus.<sup>221</sup> It is because they consistently lived into the public presence of the *ekklesia* that their witness spread. A common misconception is that the church has an insular mission – to serve those on the inside and bring more people to be within the bounds of the church. However, this is not its mission. Christians have always been a gathered and scattered people, there for the good of the world.

Therefore, clergy and laity exist to care in the context of their community. They are members of it, but are also ambassadors of the coming Kingdom of God. Peterson and Dawn state, “One major function of the pastor that seems unnecessary to the world is to equip the congregation for its reconciling work in society...”<sup>222</sup> Pastors and lay members are there to work together to encourage and equip their fellow Christian to do the work of reconciliation even as they are representatives of the Church, an “alternative society.” Good Christian leadership shapes the beliefs of a church toward engagement with their communities rather than retreating from or excluding them. The act of reconciliation is also mutual. As is stated in, *Practicing Theology: Beliefs and Practices*

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<sup>221</sup> Goheen, *The Church and Its Vocation*, 62.

<sup>222</sup> Dawn and Peterson, *The Unnecessary Pastor*, 219.

*in Christian Life*, “A religious community’s best insight into the possibilities and deformities of its beliefs and practices often comes from the outside.”<sup>223</sup> A church cannot faithfully evaluate whether its culture is compassionate or not unless it is in connection to the community in which it practices care. A church can easily convince itself that it cares for its neighbor if it only evaluates its practices through self-examination. It is until one asks one’s neighbor how well one is doing at loving neighbors that one can truly name practices as faithful compassion.

The life of the community also shapes opportunities to care and churches respond in ways that are shaped by their location. In Tahlequah, the large presence of grandparents raising their grandchildren has not only led to the development of new practices of care for the service of the congregation, but has opened up awareness of the prevalence of these situations in the community. Engagement with these families has increased awareness of issues surrounding foster care, Indian Child Welfare, adoption processes, and other aspects of life that many in our community face. The same can be said when churches feed the hungry, welcome the unhoused, counsel those challenged with addiction, and engage with racial issues. One cannot divorce these issues with the resources and challenges of the community in which one lives. There is a need to change the practices of the church toward those that share the stories and resources of its members so that it can expand its ability not only to serve its members’ needs but to be good neighbors to a community in need of compassion.<sup>224</sup> Placing people in times of

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<sup>223</sup> Miroslav Volf and Dorothy Bass, eds. *Practicing Theology: Beliefs and Practices in Christian Life*, (Grand Rapids: William B. Eerdmans Publishing Company, 2002), 43.

<sup>224</sup> Tim Soerens invites such action in *Everywhere You Look: Discovering the Church Right Where You Are*, “Let’s learn how to collectively give ourselves away to Jesus and his mission and see our gifted and skilled neighbors as participants in this mission. We just might discover who we are meant to be by

small group connection for the purpose of sharing experiences can be a way not only to build empathy between participants, but expand one's horizons for how to love a community in need.

This shift in imagination also broadens the scope of our compassion beyond the church building. Congregational care is not reduced to what the church does programmatically or institutionally. Rather, it encompasses the whole life of each believer. The circle of care connects to the deeds of compassion members practice every day. Christian compassion extends through believers at work, home, school, etc. in every part of life as they walk in faithfulness. For example, church members who work in a hospital are not only faithfully practicing Christian care when they pray for patients. It is also when they do well in changing a patient's linens, starting an IV, instructing a patient, or consoling a mourning family. When teachers value and engage with their students, when factory workers speak in ways that build up rather than tear down their coworkers, when artists value their work and their audience, this is an extension of Christian care. When one is kind to the server who messed up an order, patient with a cashier, reserved when frustrated in traffic, these are practices centered on God's love. When children see their Christian fathers and mothers honoring each other consistently both at home and away, it is part of congregational care. This is the Church at work! The majority of people church members serve in their community will never know how compassionate a particular church is on the "inside." Most will only know how caring its members were in their life as coworkers, customers, family members, friends, and neighbors.

## **Conclusion**

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weaving a fabric of care and trust between all the amazing people in the neighborhood who are not yet connected, supported, and championed." (Downers Grove: InterVarsity Press, 2020), 106.

Congregational care is not adequately represented by a hierarchical system or a concentric circle extending from the pastor outward. Rather, it is reflective of the triune relationship and anticipates the coming Kingdom of God. Because of this, while one should continue to retain the unique expression of spiritual gifts and ordination in the Church, how we view their connection together is important to the exercise of Christian care. In order to become a people of compassion, it is important to renew our imagination and imagery. The Circle of Care model presented in this chapter seeks to provide such a shift.

Each congregation is called as a people to practice care and invite all of its members to live out the love of Christ to each other and their community. In that congregation, there are members whose gifts lend well not only to counsel, visitation, and support but also connecting others to relationships which can further provide care for them. These are Connections Catalysts, people whose practices of connecting people to resources of care further solidify a culture of care in a church. Partnering with those congregations are pastors who practice care and speak into the vision of who God is and how a church can become a compassionate people. Congregations live in a place and time which informs their practices and provides a context in which to live out their faith. Communities also care for the members of the church through their resources (hospitals, schools, government, etc.) and can provide needed evaluation of the effectiveness of a church's practices. All of this acts as a hermeneutical circle of care. As we continue to know God and each other, we are equipped to love holistically. As we practice our compassion, we grow in our relationship with each other and a God of love who is making all things new.

Both the shift in imagination and imagery described above need tangible implementation in the life of the church. The reality of the matter is, churches do not change overnight. Even when convinced of how identities *should* shape a church's actions, it may take many years to change the culture of a congregation to match those perceptions. Yet, this should not discourage but instead embolden the church to embark on the journey of building culture in the dynamic tension of practical ministry. With this in mind, the explanation in the next chapter of one practical application emerges from both scholarly insight and personal experiences in my own context. Even scholarly research emerges from a context. So, as we engage how pastors, connection teams, congregations and communities are involved in the implementation of a culture of care, these suggestions should also be contextualized to each congregation in which they are applied.



## CHAPTER 4

### BEARING ONE ANOTHER'S BURDENS: INTERDEPENDENT SMALL GROUPS AS A WAY TO PRACTICE MUTUALITY IN CONGREGATIONAL CARE

*“Bear one another’s burdens, and in this way, you will fulfil the law of Christ.”  
Galatians 6:3*

#### **Introduction**

One possible implementation for this model of decentralizing pastoral care in the local church is through the development of short-term small groups. It is the hope that in these “Circle of Care groups,” each participant embodies a call toward mutual interdependence as an equal partner in sharing experiences and caring for others in the group. The practical aspects of these groups need an integrative approach of the practices examined in the literature review. Through aspects of leadership, methodology, and theological foundation consistent with the principles described in the previous chapter, these small groups can help to not only decentralize care from the pastor but also foster the relationships necessary for building a holistic culture of care.

Circle of Care groups can be a way of developing connections of care that effect all the relations of a congregational context. The way that this has been envisioned and put into practice in the Tahlequah context is through integrating the models of leadership like Karen Lampe’s Congregational Care Ministers and the caregivers of Stephen Ministries with the idea of Connection Catalysts described in the previous chapters. In aspects of methodology, the groups utilize the approaches of Story Circles and Wellbriety in their invitations for all to speak and be together as equals. This practice is undergirded by the Wesleyan theological tradition of which the Church of the Nazarene is a part and

the cultural/theological insights of the North American Indigenous community among whom the Tahlequah Church of the Nazarene ministers. After defining the practice, I will seek to describe the way that a Circle of Care group was implemented in my context. More application is needed for any definitive findings of this qualitative research, but describing the experience with the practice can give some insights into how these groups worked in this context. It can also show how congregations like ours, who are just starting this journey toward building a culture of decentralized care, can begin the process in part with this small group ministry.

### **Circle of Care Groups**

In shifting toward a view of congregational care as a circle of interconnected relationships, it is important to implement practices consistent with that viewpoint. The use of small group ministry has been shown to build up community and help people foster meaningful relationships. What is proposed here is a particular type of small group which can be incorporated into the practices of the church to facilitate relational growth and support in congregations seeking to build a culture of care. These Circle of Care groups are ways of bringing people together who may be dealing with similar issues or around a common theme for the purpose of mutual participation and sharing of experiences. It is a practice which integrates aforementioned principles of leadership, methodology, and theological foundations.

### **Leadership**

Effective congregational care stems from the ways congregations intentionally build leadership, structure practices and theological belief systems. In developing the Circle of Care group, there was a need to think strategically about leadership. The Circle

of Care group is hopefully a way to decentralize from the hierarchical structure of many church practices. However, good leadership is necessary even if the person who is helping lead the group is a mutual participant. Ideally, it would be the case that every person in the group has common experience with the issue at hand including the leader, but as it was with our experience, the initial implementation of the groups might have to use Connections Catalysts or pastors to lead so that later groups can have leaders who have been through the process.

The leadership model for the groups uses a synthesis of Kenneth Haugk's Stephen ministers and Karen Lampe's Congregational Care Ministers (CCMs). As said in the literature review, both of their methods reflect an informal-organized model in that those who are leaders are not placed in a formal role as small group facilitators. Small group leadership can be an extension of their work as caregivers in the congregation. Lampe suggests that pastors begin to build teams of ministers who can share in the ministry of care by visitation, spiritual guidance, and prayer. By leading these CCMs in part through the Stephen Ministries training, she affirms the effectiveness of how Haugk's efforts at equipping people in the church to serve and care. Lampe also mentions that small groups can be ways to get such leaders involved in care. Not only can group care ministries help take the load off of pastors if they are led by lay ministers, but they are also ways to connect others to relationships in the church.

In the Circle of Care model, both Connection Catalysts and pastors can be leaders in these small groups. Though leaders would benefit from to being previous participants or go through training. Such training would be minimal as these are not group counseling sessions, nor is the focus on the leader as expert. In Watson's categorization, these are

“transformation focused small groups.”<sup>225</sup> The group is not attempting to understand a particular curriculum or even the perspective of one person, but the experiences of one another. It is an empathy building exercise, and so even the leader can be a mutual participant. The groups can be an opportunity to take responsibility off of the shoulders of pastors, but as Lampe states, are more importantly there to, “address the needs of your community.”<sup>226</sup> For example, if there are many in a congregation who struggle with addiction, then these groups can be contextualized to that need. Where there is a need for racial reconciliation and addressing racial issues, these groups can be a good resource. Intergenerational connections are an important way that churches can help build their communities for the long-term. Forming groups that might reach beyond boundaries like these or strengthen connections on familiar experiences help address care needs in the church through engagement with the congregants themselves.

It is apparent also that the development of these small groups must also meet the needs of the congregation in that, for churches that have yet to train up such leaders as Lampe and Haugk describe, the pastor may have to lead the groups at first. Though the model above suggests that there be members of the congregation whose gifts and graces help them to serve in the role as connection catalysts, congregations like the one in Tahlequah who have not fostered that kind of thinking might have to start with the pastor. In implementing the first Circle of Care group, I served as the one who made the connections between the participants and led the group. However, as we plan to do similar groups in the future, those who were part of this first practice would be ideal

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<sup>225</sup> Watson, *The Class Meeting*, location 177-178

<sup>226</sup> Lampe, *Caring Congregation*, 37.

candidates for facilitation. This is especially true for our context as the subject matter was about something I had no direct experience with raising grandchildren. Someone who is already a good informant for that subject would be an ideal leader next time as they could better serve as a mutual member of the circle and can serve as Connection Catalysts in inviting more participants to the group.

The leadership issue is also assisted by the methodology that is used. Whether a pastor or lay person leads, the point of the circle of care group is that there is no unequal position of power or influence. Such a dynamic was implemented in how the meeting was structured and the method utilized. While I started the meetings, I was not the discussion leader per se, as most of the conversation did not involve myself. Each session began with a reminder of purpose, conduct, and a story prompt (usually a passage from the Bible). I spoke this portion as a way to introduce the methods of the meeting to the participants. When it came time to share stories, I did very little if any talking. Methodology will be described in the next section, but the purpose of the methods used were to reduce my voice and influence on the conversation as much as possible.

### Methodology

It is essential that one carefully constructs such groups in a way that will facilitate their purpose to help decentralize from a pastor or lay leader as one above the other participants and to create a mutuality among every person in the group. The methodology used in our case study was reminiscent of groups like Story Circles or the Wellbriety indigenous recovery meetings described earlier. The latter of these examples organizes the groups around the imagery of a medicine circle, arranging chairs in a circle so that everyone is facing one another and there is no one in a more prominent place. The group

begins with an indigenous exercise called “smudging,” where a designated person wafts smoke from burning sage to bring renewal of spirit and peace to the group. The leader then introduces a subject to talk about as it relates to recovery and each person has the opportunity to share.

This method of sharing together is to create a trusting environment of shared healing. As is said in *The Red Road to Wellbriety*, “The honor of one is the honor of all. And if that is true, then the pain of one is the pain of all. In an interconnected system, because everything is connected, if there is pain anywhere, then that pain is everyone’s pain.”<sup>227</sup> The way this is practiced is through the act of telling stories in a circle. Though the stories begin with a facilitator, that person is explicitly not a superior member of the group, but is there to allow “...the circle to take place in a good way.”<sup>228</sup> What defines good is not the facilitator but the orientation toward mutuality and the transformational act of hearing one another’s stories. When one enters into this methodology, “We heal in a circle and we talk in a circle.”<sup>229</sup> In other words, the parameters of the meeting and the facilitator are there to open up the opportunity for mutual growth.

The Wellbriety group creates in its methodology an interconnected circle of healing from addiction. It is the goal of these groups to create a space in which there can be trust and safety to recover. For the Wellbriety exercise, “communities heal best if much of the community begins to participate in the healing. We must create a Healing Forest.”<sup>230</sup> A Healing Forest is an analogous image of community where those who are in

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<sup>227</sup> *The Red Road to Wellbriety: In the Native American Way*, 14.

<sup>228</sup> *Ibid*, 18.

<sup>229</sup> *Ibid*, 17.

recovery are rooted in connection to those actively engaged in recovery or support. As with all trauma, not everyone is safe to speak to and supportive of the healing needed. Practical exercises like this create an atmosphere of support and empathy which can help in recovery.

Along with Wellbriety, a group method inspired by similar dynamics is Story Circles. These are short-term small groups of ideally six to eight participants which encourage each member to share a personal story regarding a common subject.<sup>231</sup> Though there are key parameters set, Story Circles are not meticulously structured but are left intentionally broad so as to open discussion freely.<sup>232</sup> Meetings will usually begin with introductions of participants or other prompts to help people get engaged. The main portion of the meeting is in the sharing of stories. These stories are usually centered on a theme and a story prompt. In the Story Circle that I engaged in through the NOW Movement, the facilitator stated that the themes helped deepen the conversations as the group continued. Thus, the themes used were, “shifting sand, shifting responsibility, and shifting effort.”<sup>233</sup> Stories and any follow-up help create what the *Akron Story Circle Project* describes as “chaining” or a “cascading effect,” in the meetings so that each one

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<sup>230</sup> Ibid, 23.

<sup>231</sup> James Slowiak. “Introduction,” in *The Akron Story Circle Project* by Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017), 3-4.

<sup>232</sup> Carolyn Behrman and Sandra Sickard Prettyman, “The Story Circle Method and the Social Science Toolkit,” in *The Akron Story Circle Project* by Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017), 106.

<sup>233</sup> The group was focused around stories of racial issues in churches. The first theme of “shifting sand,” helped us define when we first noticed racism as an issue among Christians. The latter two were to help us focus on how we had participated in these issues and how we could engage in solutions moving forward.

builds on the other.<sup>234</sup> Each participant then shares a story in response to a prompt which focuses on the theme. After they have all shared, the participants ask clarifying questions. This is not an opportunity for making evaluations, but creating common understanding. The main objective of Story Circles is that everyone engages, listens and understands as much as possible.

The University of Akron studied the efficacy of Story Circles in contrast to focus group exercises. They found that one of the chief differences between the focus group exercise and the story circles was first in the role of facilitator. The focus groups depended heavily on the skill of a facilitator while the story circles share the role of facilitation among participants as the open discussions were focused on stories of personal experiences.<sup>235</sup> Story Circles can help to reverse traditionally hierarchical environments to create a more interdependent practice. The University of Akron found that, "...story circles flipped the classroom, treating students as co-learners rather than passive consumers."<sup>236</sup> In forming groups like these, one can decentralize group practices and help every participant to know their voice is meaningful.

Story Circles also help shape meaning for their groups as a whole. For example, I was personally part of a Story Circle exercise in which each participant shared about racism in church contexts. It was eye opening not only to hear other's stories but to communicate experiences I had rarely shared. This is because, "...stories not only tell

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<sup>234</sup> Donna Web, "Once Upon a Time," in *The Akron Story Circle Project* by Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017), 147.

<sup>235</sup> Ibid, 108.

<sup>236</sup> Amy Shriver Dreussi "Story Circles," in *The Akron Story Circle Project* by Carolyn Behrman, et. al. (Akron: The University of Akron Press, 2017), 157-158.



about individual experiences, they also consolidate opinion and confirm values.”<sup>237</sup> This is meaningful not only for the group itself, but for the community around it. As is affirmed in *The Akron Story Circle Project*, “...sharing individual stories can, among other things, contribute to community history.”<sup>238</sup> For congregations which are using this method for meetings to facilitate care, there is potential for the stories shared to shape theological imaginations both within and outside the group. For example, as with the story circle I participated in, the more stories shared about experiences of racism within the church, the more one may be aware of that reality and make efforts to fight against it and contribute to communal changes.

The practical application of this thesis emerges out of examples like Wellbriety and Story Circles particularly in their methods and group dynamics. As churches are imagined as a circle of care, these methodologies help to implement practical circles of care in congregations to help build a culture of compassion. The first area in which this method is meaningful for the efforts of the project is in how it decentralizes the leadership role to all participants. Though the facilitator of the group is there to provide a framework of engagement and act as a guide if things get off course, they are not in a central position as a result of how the meetings are structured. Even if the leader shares, she or he does not have to share first and their story is not more or less important for the discussion. The story which each person brings and shares helps build up the group. The less the facilitator talks, the better.

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<sup>237</sup> Donna Web, “Once Upon a Time,” in *The Akron Story Circle Project*, 131.

<sup>238</sup> Ibid, 120.

Circle of Care groups also benefit from the methods of story circles in particular due to their short-term nature and their tested ability to be held online. Small group ministries that only last a short time can be a benefit to the whole community as they create an atmosphere of urgency, creating deep engagement in the group because it is temporary. Some authors like Searcy and Thomas place this benefit in opposition to the option of long-term groups, claiming that such groups can create fatigue.<sup>239</sup> Being short-term also prevents the Circle of Care from being an end unto itself, encouraging participants to take what they have done in the group and carry on the story in their congregational life together. Furthermore, the methodology of story circles applied here is advantageous as churches do more outside the building. As with any small group, they do not have to occur in a church building but can take place at homes, coffee shops, parks, etc. In response to the Covid-19 pandemic, more church practices have moved online. The story circle in which I participated was entirely through video conferencing. This means that the invitation to participate can extend to those isolated from in-person gatherings in response to the pandemic and broaden participation in the group to people who might not want to gather at a church building for other reasons.

Where the Circle of Care groups differentiate from Wellbriety and Story Circles is in the pliability of focus for the groups and the goal of their practice. Wellbriety is exclusively about addiction recovery and Story Circles are most often practiced around racial reconciliation issues. Though both of these subjects can potentially be the content

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<sup>239</sup> Nelson Searcy and Kerrick Thomas, *Activate: An Entirely New Approach to Small Groups*. Revised Edition (Grand Rapids: Baker Publishing, 2018), 54. Searcy and Tomas assert that, “When people are stressed and then released, they grow much deeper in their spiritual walk and much closer to other believers than when the stress period continues indefinitely.” While this seems valid, it does not negate the positive aspects of long-term groups.

of a Circle of Care group, the group stories can include a broader array of issues faced by each context. The Circle of Care group which was applied at the Tahlequah Church of the Nazarene focused on custodial grandparents and their experiences. The stories and prompts addressed the participants' experiences and each meeting had a new theme to help build the group discussion. The first theme was "stories of origin," to introduce how each participant entered into the situation in which they find themselves. The second meeting, the group shared "stories of setbacks," to engage our shared hardships. The third session focused on "stories of forgiveness" as participants told how they struggled or succeeded in giving and receiving forgiveness in their experiences. Finally, the fourth session, "stories of breakthrough," celebrates the ways that their hopes were envisioned and realized. This structure can be applied thematically to many different situations addressed by groups. Though the method of telling stories is the same as Wellbriety and Story Circles, it is expressly hoped that one would diversify their application and contexts.

Circle of Care groups also have a distinct goal which differs from the other methods. The goal is to become better followers of Christ as groups share stories and care for of one another. Particularly the third session points to this as Jesus teaches us in the same prayer in which we request daily bread to pray for forgiveness: "Forgive us our debts, as we also have forgiven our debtors."<sup>240</sup> For the Christian, forgiveness is a necessary part of healing and care and so it helps further the goal of being formed by God's will and way. There is also the intentional need to extend the care beyond the group. At least in my experience with Story Circles, there was not much opportunity to

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<sup>240</sup> Matt. 6:12

continue fostering the conversations or relationships created in the meetings. For Circle of Care groups, they encourage members to continue in prayer and calls between and beyond the gatherings. This is because the goal of the Circle of Care is not just for mutual understanding as with Story Circles, but transformed congregational life. The stories are not just to create a common history, but draw us deeper into relationship with each other and the story of God of which we are a part.

### Theological Foundations

As one develops these practices of care, one should give great intentionality to connecting the purpose of the practices to a theological foundation. Circle of Care is not simply to provide an opportunity only to support and encourage. Rather, they exist within the context of the larger mission of the church. In the care given between members, what should emerge from the group is a development of community, spirituality, and accountability. The theological foundation used for Circle of Care is that of John Wesley and the Methodist movement.

The use of Wesleyan theology as the foundation for Circle of Care groups comes from the connection between the Church of the Nazarene and Methodism, as the denomination broke off from the Methodist Episcopal Church but retained much of its theological ties to John Wesley. Wesley's theological method in particular lends itself well to developing interdependence in care. Traditionally, Wesley's use of Scripture, tradition, reason, and experience has been described as the Wesleyan Quadrilateral, four connected aspects of the theological process. Crutcher however, asserts that a more adequate way to view this methodology is as a hermeneutical circle. Crutcher proposes

that Wesley puts scripture and experience in constant dynamic conversation with one another through the interpretive lenses of reason and tradition.<sup>241</sup>

One's interpretation of the Bible can inform how one's experience is viewed as faithful or not; fruitful or not. Likewise, one's lived experience greatly informs how scripture is read and how one's interpretations are refined. That conversation takes place through the lens of one's use of human reasoning and the traditions of Christianity. For example, if one studies Jesus' Sermon on the Mount, one will come across Jesus' instructions, "Love your enemies and pray for those who persecute you."<sup>242</sup> In doing so, they bring to that reading a concept of "enemy" shaped by what they have been taught and experienced. One also likely brings to that reading an understanding of the traditions of the church regarding how seriously to take Jesus' words and examples from church history of people who obeyed this teaching. Then, having interpreted this scripture, one is obliged to go and put into practice love for enemy and persecutor, an experience that will further inform their interpretation of the scripture.

Circle of Care groups utilize this theological foundation in that there is a need for the inclusion of both scripture and experience in the small group conversation. It also takes place in connection to the larger church community. This again is why the small group is for the short-term so that it does not become an end in itself to the caring practices of the church but can further shape how care is traditionally conceptualized and

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<sup>241</sup> Crutcher, *The Crucible of Life*, 209-210. Crutcher explains that, "Both divine revelation and human experience of the world are valued, and each are employed to comprehend the other and to create scriptural space in experience for an encounter with divine reality...Once theological knowledge is constructed from Scripture, however, it *must*, according to Wesley, be placed back into the crucible of life to be tested and further refined."

<sup>242</sup> Matt. 5:44

practiced beyond the group sessions. Above all, Circle of Care groups benefit from Wesley's theological method as a foundation because the group exercise should be for the formation of faith. Participants in Circle of Care are not only building support and empathy by sharing their experiences, but are actively doing the work of theology, putting the varied belief and practice of the group in conversation together.

It is not just the theoretical methodology of Wesleyan theology that makes it beneficial for the groups, but the precedent set in Wesleyan practices, namely the class meeting. Class meetings were formed around a common goal and a shared question. The goal was to, "watch over one another in love."<sup>243</sup> To watch over one another meant that there was not only care involved in the class meeting, but accountability. If sins were confessed to, the group held one another accountable that those were repented from. When someone had a breakthrough of faith, the others celebrated, holding the account in each person the good things of God that the person might continually move from grace to grace. Watson describes how this aspect of the class meeting is a main cause for why it has been largely discontinued in modern Methodism. Wesley's rigidity with holding people accountable often resulted in legalism and exclusion. Accountability without love hurts more than it helps. Thus, using the theological foundation of the class meeting does not invite the same rigorous methodology used back then. Rather, it invites us to seek a sense of belonging with one another that we might watch over each other in love. One cannot hold accountable someone they do not know, and certainly cannot do so Christianly if they are not willing to also be held accountable by that person.

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<sup>243</sup> Watson, *The Class Meeting*, Location 410.

Circle of Care seeks to develop practices by which participants are invited to seek the good of each other, and share their goals of faith with one another. In our practice of the group, the way we sought to hold each other accountable was by encouraging each participant to call on another during the week. We had men draw a name and number of another man in the group. We had the women do the same, and encouraged them to call each other and ask, “How are you doing? How can I pray for you?” If a person had a goal they shared in the group when they talked about forgiveness, for example, then a person who called on them might be praying for that; they might ask them how that is going. Likewise, if there was a struggle someone was having which was shared in the group, they could call on another participant that might have gone through something similar and talk through how they dealt with the issue. This is to help the conversation continue and open up further vulnerability by which people could pray for each other and keep each other accountable.

The Class Meeting also served as our practical theological foundation for the Circle of Care group because of the shared question for the meeting, “How is it with your soul?” This question addresses challenges to the soul that might be commonly experienced by our fellow Christians. For the class meeting, those seeking the Lord at various points in the Christian journey might experience temptations, doubts, fears, breakthroughs of faith, new understandings of scripture. These were shared together as the group discussed how it was with their soul. By this question, these class meetings built up the Body of Christ. They were formed so that every member was given a voice

and so that everyone rejoiced when one rejoiced and mourned with those who mourned. Even the leaders of the groups operated as equal participants.<sup>244</sup>

That being said, the class meeting was not itself the full expression of the Body. Wesley encouraged all Methodists as they developed spiritually to be part of the bands and societies. The class meeting was itself a catalyst of community formation. Because of people's engagement in these small groups, their connection to their church was strengthened long after Wesley, itinerate preacher as he was, moved on. Likewise, Circle of Care groups are gathered around common "challenges to the soul." The common experience that is being addressed can vary based on context. When people are brought together in these groups, it is the hope that this will strengthen their relationships with each other and will open their eyes to see the care needs around them. By caring for each other as equals in the groups, it may also change how participants engage with others in the whole congregation through worship, Sunday school, fellowship, etc.

This theological foundation formed how we implemented the group in Tahlequah. By rooting our practice in Wesleyan theology, the group was purposed around spiritual formation, community connection, and accountability. One of the ways that the story circle methodology is insufficient apart from a theological foundation is in how it does not have any particular goal of transformation. In, *The Akron Story Circle Project*, the product of the story circles was a play entitled, "The Akron Color Line Project

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<sup>244</sup> D. Michael Henderson in, *John Wesley's Class Meeting: A Model for Making Disciples*, elaborates by explaining that the role of the leaders in the meeting was dynamic. He states, "The leader was a peer...and on the same level with the rest of the class, but he or she was also chosen and appointed for this task in order to assume spiritual oversight and pastoral care of others." (Wilmore: Rafiki Books, 2016) 98. This dual role of leadership in the class meetings may help one understand better the way that Connections Catalysts or those serving as leaders of the Circle of Care groups are both providing care and being cared for in the exercise.



Performance,” which presented a dramatic retelling of the story of Akron, Ohio through the lens of stories told in the groups.<sup>245</sup> The goal for churches in the telling of stories should not be the simple presentation of the past but a connection to a larger story, the story of God. In a sense, the product of the Circle of Care groups used in the development of Christian care can be the drama of faith lived out together.

Thus, Circle of Care groups should be inundated with scriptural themes. In the Story Circle group of which I was a part, this was beneficial, as they used scripture to set up the story prompt. By incorporating scripture, it places our own stories in connection to the story of God who informs and transforms the tale of our lives. Furthermore, the use of scripture further decentralizes the ministry of these groups. It is not an opportunity for preaching or presentation of a curriculum. The voice of scripture is another participant at the table, along with the one reading. The more we learn from experience and the more we are confronted with the counternarrative of the scriptures, we are shaped toward a new way of life. Circle of Care groups is not an informational small group, but a transformational one.

Furthermore, methodology alone does not form community. When partnered with a theological purpose, Christian community formation can result from small group practices. The Story Circle methods alone fall short because it does not invite participants into community with each other beyond the group sessions. Once the stories have been shared, one might be inspired to change one’s ways but may find that there is not an immediate community in which to practice a new way of life. When the group of which I

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<sup>245</sup> Carolyn Behrman, et. al. *The Akron Story Circle Project: Rethinking Race in Classroom and Community*, (Akron: The University of Akron Press, 2017), 180.

was part was over, especially because we met remotely, the community of that group essentially ended. I could go to my congregation with new insights, but was alone in my experience of shared stories. For the Christian, the Church is the gathered and scattered people among whom one puts into practice the directives of the Holy Spirit. Circle of Care groups are thus short term for theological reasons. The limitation provides an invitation to go and live further into what one has learned in this environment of care. Rather than remain static and continually discuss the stories that have already happened, the group members are sent to go have more experiences in the congregational life.

What is more is that the groups are supposed to inspire a sense of accountability amongst members. Being held accountable is not just about letting one know when they have done wrong, but is an exercise in mutual remembrance and recommitment. In scripture, the Israelites were constantly held accountable for their actions and encouraged in their faithfulness by being reminded that they serve the “Lord your God, who brought you out of the land of Egypt, out of the house of slavery (Ex. 20:2)” They are held to account by being reminded of the story of their encounter and covenant with a liberating. Likewise, these group exercises help participants share stories and connect them to the story of God not only so that one can remember what God has done, but so that one can join in connection to the lives of one another. One cannot hold another accountable to living into a story they have not shared together. These groups seek to create connections of accountability by sharing life together beyond the meeting through calls, prayer, and further support.

Circle of care groups are designed to be practical ways that churches can create opportunities for empathy, care and a sense of connection between people in the

congregation. It is a meeting in which leadership takes a secondary role to the voice of each participant. The method by which one forms the group should create a setting in which everyone has the opportunity to speak and the focus is clear. The groups should also have a set theological understanding through which congregations retain the purpose of the groups to not only create connection for the sake of itself, but Christian care. It is with this effort that such a group gathered in my context. While the way that the group was implemented in Tahlequah did not perfectly capture these ideals and the model described in the previous chapter, it served as a way to move the participants farther toward realizing the kind of mutual care it imagines.

### **Contextual Prompt for Connection**

In addition to its connection to the theories above, the Circle of Care group is also contextually applied. As was briefly described, in pastoring the Tahlequah Church of the Nazarene, it became apparent that a common issue was shared among an increasing number of our members. Many of our grandparents had taken steps to take custody of their grandchildren through adoption, guardianship, etc. I had the privilege pastorally to provide care through hospital visitation, pastoral guidance, prayer, and presence at various events like the graduations and concerts of the grandchildren. What I noticed however, is that though these grandparents were open to my pastoral care, they sought little to no care from the other people in the congregation in similar situations. At the beginning of this project, there were seven people who had previously or were presently raising their grandchildren. In a church which averages around 30 in attendance to both discipleship events and worship services, this means that nearly a third of those usually in the building have thorough experience in this area. Pastorally, it left me to wonder why

they were not more engaged in supporting each other in this journey and how to connect them together.

It is important that they become connected with each other as the challenges and blessings of their situations are different than my experiences practically and, in some ways, culturally. Personally, I have neither raised grandchildren nor been raised by my grandparents and as a white male cannot identify fully with the cultural nuances of the indigenous grandfamilies in my congregations. So, though their pastor can provide care at some level, it would be beneficial for them to have people who can walk alongside them and empathize from their own experience. It is the hope of this case study that the experiences of this particular group of people in the Tahlequah congregation prompt further implementation of Circle of Care groups to address other care needs in different contexts. It is necessary therefore to describe the issues surrounding grandfamilies not only to illustrate the benefit that support groups may have for creating comradery, but also because these factors will be evident in the discussions used in the case study below.

They are most certainly not alone in their decision to take direct responsibility of their grandchildren. According to Deena Strong, Roy Bean, and Leslie Feinauer, in their article, “Trauma, Attachment, and Family Therapy with Grandfamilies: A Model for Treatment,” this family dynamic is called a “grandfamily,” with the members of the grandfamilies referred to as “custodial” grandparents and grandchildren.<sup>246</sup> As of 2008, 9% of all children in the United States (6.6 million) lived in a household with their grandparents. Of those children, 23% (1.5 million) lived with no parent in the

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<sup>246</sup> Deena Strong, Roy Bean, and Leslie Feinauer, “Trauma, Attachment, and Family Therapy with Grandfamilies: A Model for Treatment,” *Children and Youth Services Review*, 32 (2010): 44.

household.<sup>247</sup> That number remains consistent as census data from 2019 shows 2,335,355 grandparents who are, “responsible for care of coresident grandchildren.”<sup>248</sup> Nearly half of them are also in the work force.

Though there are grandfamilies of most racial demographics, ethnic minorities, including indigenous peoples, make up a disproportionate percentage of the grandfamilies in the United States. Jan Mutchler, Lindsey Baker, and SeungAh Lee, in “Grandparents Responsible for Grandchildren in Native-American Families,” note that, individuals aged 30 and over who are American Indian/Alaska Native (AIAN), are three times more likely to be custodial grandparents.<sup>249</sup> This is due to a particular openness to grandparents being present with and honored by their grandchildren in AIAN cultures. This can be especially true for grandmothers, as more single indigenous women are likely to be custodial grandparents than single men.<sup>250</sup> Whereas white family dynamics tend to be structured around the nuclear family, indigenous culture places a special emphasis on the role of elders and inter-generational connection.

Therefore, while custodial grandparenting is usually something one does in response to the various needs of the grandchildren and representation of custodial grandparents can be found in all cultures, indigenous peoples have a special openness to the practice.<sup>251</sup> One reason for this is pointed out by Suzanne Cross, Angelique Day, and

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<sup>247</sup> Ibid, 44

<sup>248</sup> Infographic: Grandparents Still Work to Support Grandchildren. American Community Survey, [www.census.gov/programs-surveys/acs/](http://www.census.gov/programs-surveys/acs/). 2019

<sup>249</sup> Jan Mutchler, Lindsey Baker, and SeungAh Lee, “Grandparents Responsible for Grandchildren in Native-American Families,” *Social Science Quarterly* 88, no. 4, (December 2007): 991

<sup>250</sup> Ibid, 1003

Patricia Farrell, in “American Indian and Alaska Native Grandfamilies: The Impact on Child Development,” who explain that grandchildren who remain with kinship caregivers like grandparents are often able to stay with their siblings and can retain their connection to cultural traditions and identity.<sup>252</sup> This tendency is reflected in the congregational context in Tahlequah. Half of the custodial grandparents in the church are indigenous. The openness of indigenous persons to give a more significant role to their grandparents can also be seen in some of our members who, though they have not taken custody of them, share a greater responsibility in care for their grandchildren than their white counterparts. Of these families, all of them have taken a step that I have not experienced. I have not finished raising my young children, much less grandchildren and did not grow up in a grandfamily dynamic. Though I can provide care in ways authentic to myself and my role as pastor, by sharing life with those who have walked a similar path, there would be increased empathy and care in the congregation for these families.

This is due to the fact that custodial grandparents have unique challenges and blessings. It should first be said that, though the reasons for the formation of grandfamilies are diverse, they can be a viable and healthy option for both the custodial grandparents and grandchildren. Strong, Bean, and Feinauer explain that, “Many grandparents and grandchildren are resilient and resourceful and their difficulty in adjusting to the grandfamily custodial arrangement can be considered minimal.”<sup>253</sup> That

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<sup>251</sup> Ibid, 992

<sup>252</sup> Suzanne Cross, Angelique Day, and Patricia Farrell, “American Indian and Alaska Native Grandfamilies: The Impact on Child Development,” *American Indian Children and Mental Health: Development, Context, Prevention, and Treatment*, Editors Paul Spicer, et al. 1<sup>st</sup> ed. (Santa Barbara: Praeger, 2011). 50.

<sup>253</sup> Strong, “Trauma, Attachment, and Family Therapy with Grandfamilies,” 44.

being said, the reasons grandparents take custody of their grandchildren can be traumatic (e.g. the death of the grandchild's parents, abandonment, incarceration, removal of custody from the parents due to their inability to care for the child, abuse, divorce). For the grandchildren, this can cause the transition into their grandparent's care difficult. They can at times exhibit behavioral issues as they work through the grieving process. They may experience bereavement due to the death of a parent or grieve the loss of a constant connection to their parent even if the separation is necessary. They also may change geographical location when moving into their new homes, leaving behind other normalcies and attachments like friends.<sup>254</sup>

For the grandparents then, they strive to meet the needs of their grandchildren who are going through this process of transition while simultaneously entering into a new way of life themselves. They too deal with physical, emotional and psychological distress even as they support their grandchild through their experiences of trauma and change. Strong, Bean, and Feinauer explain, "As grandparents take on caregiving, they frequently do so at times of high stress and crisis or traumatic events. In some instances, as grandparents are gaining a grandchild they may be losing their own child."<sup>255</sup> If the parent is still living, there can be tension between the grandparents and their child over the care for the grandchild. This can put a strain on relationships with friends, family, and spouses as becoming a custodial grandparent can disrupt schedules and plans of retirement.<sup>256</sup> There is also the social pressure to fulfill the expectation to care for

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<sup>254</sup> Ibid, 45

<sup>255</sup> Ibid, 46

<sup>256</sup> Ibid, 47

grandchildren in their need, particularly among indigenous families. Mutchler, Baker, and Lee exhort that ethnographic research has long established a cultural expectation that the role of grandparent includes a component of substantial caregiving. This pressure, partnered with higher rates of poverty among indigenous families necessitate programs which aid the holistic needs of grandfamilies.<sup>257</sup>

The interventions needed include those which provide support and care to address the relational needs of custodial grandparents. Strong, Bean, and Feinauer explain that interventions for grandfamilies have typically been individual treatments of the grandchild and grandparent, with the latter usually referred to support groups. They propose a model of treatment based on family systems theory which involves providing family therapy rather than individual counseling to increase attachment between grandchild(ren) and grandparent(s).<sup>258</sup> While a congregation cannot usually provide professional family therapy as described, there should be in the church a way to care for those dealing with this issue. This is especially true of the Tahlequah context as it is a shared aspect of a large portion of the congregation. Just as it is suggested that there be interventions which increase attachment between members of grandfamilies, it would also be important to build attachment to other similar family systems so as to build a network of support. Such connections could not only provide care, but perhaps those involved could suggest options of therapy or other interventions they have tried. For this reason, in the context of the Tahlequah Church of the Nazarene, the first Circle of Care

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<sup>257</sup> Mutchler, Baker, and Lee, "Grandparents Responsible for Grandchildren in Native-American Families," 1005.

<sup>258</sup> Strong, Bean, and Feinauer, "Trauma, Attachment, and Family Therapy with Grandfamilies," 48.



group was established to address these particular members in their need for connection and care with each other. Below is the explanation of the group meetings and the field notes from the case study. Though this case study shows a group which provided mutual care in response to a particular problem, it may prompt further implementation and study for other contexts and care needs.

### **Circle of Care Group Experience**

The first session of Circle of Care took place on January 3<sup>rd</sup>, 2022 and met weekly for four sessions, about one hour each. Excluding myself, the group had seven participants with various experiences in being custodial grandparents. The ages of the participants ranged from the youngest at 46 years old to the eldest who was 80 at the time. The group was composed of three couples and one single person. Four of the participants were female, and three were male. For one couple, both spouses are white, another couple is indigenous, and for the third the husband is white and the wife is indigenous. The single participant is indigenous and is a widow.<sup>259</sup> At the time that she was requested to be part of this project, she was raising her grandchildren with the help of her mother who passed away before the group started meeting.

Before we officially started the session, each person in the group signed a disclaimer and confidentiality agreement<sup>260</sup> and took a preliminary survey. Both the entrance and exit surveys are here used as anecdotal research that were helpful in ascertaining the demographic information described above and gain insights from their

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<sup>259</sup> See “Appendix D: Participant Demographic Data,” for more demographic information on the participants. Two of the women refused to disclose their age, so the age range and other information is reflective only of what was communicated through surveys.

<sup>260</sup> See “Appendix C - Disclaimer and Confidentiality Agreement,” and, “Appendix E - Circle of Care Group: Preliminary Survey Questions.”

experiences with care before this exercise. When asked if they would contact their pastor for, “guidance when [they] face challenging situations or problems,” most agreed to a certain degree, with only one disagreeing and another neutral. However, when asked if they would contact another member of the congregation for the same reason, far more disagreed (two strongly agreed they would, but all others disagreed or were neutral).

This does not mean that they are not speaking to other members of the congregation as most agreed that they had kept in contact with others in the church in the past month. It does seem to indicate that they see the pastor as more of a resource for care than the other members of the congregation, if they seek help through the church at all. This dynamic seems at least perceived as normal for them, as all but one who was neutral on the matter agreed or strongly agreed that they were satisfied with the level of care the church provides for their needs.<sup>261</sup> The group was also asked what their hope was for the group sessions. Several noted that they were unsure what to expect. Others however were looking forward to sharing insights and experiences as well as, “support and prayers from members.”<sup>262</sup>

### *Session 1: Stories of Origin*<sup>263</sup>

In our first session, we focused on introductions to the process, participants, and the focus of the stories. In each meeting, there were refreshments to try to develop as comfortable an atmosphere as possible. We met in the fellowship hall of the church, a multi-purpose room in which we usually have bible studies and meals. The church does

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<sup>261</sup> See Appendix E: Preliminary Survey.”

<sup>262</sup> Ibid.

<sup>263</sup> See “Appendix F: Group Meeting Handouts.”

not have round tables, so we sat in a square. This was less than ideal as the participants sat in the sections of the tables away from me in a fashion similar to the way we do bible studies. Were we to do this again, I might sit in an unusual place to physically communicate that this group is structured differently than others.

Though we could have been better organized physically, the mutuality of the group was communicated verbally. Each meeting began with an introduction to purpose both scripturally and logistically. The first day, we used 1 Corinthians 12:24b-27 to communicate that we are here to mutually share, “the same care for one another.” Each week, the scripture was followed up with the statement of purpose for our particular group: “This group is for sharing experiences with each other for the purpose of encouragement, accountability, and care.” There was also a communicated commitment to confidentiality and “Brave Space.”<sup>264</sup> The latter is a poem by Micky Scottbey Jones used during my experience with the Story Circle group mentioned earlier. In the Circle of Care group, this was used to help communicate the guidelines of the group which is, “not a place to preach or cross-talk. It is a place to listen and learn.”<sup>265</sup> This aspect of the meeting was heavily emphasized in this first session, but was not a focus of further meetings unless it was apparent that the spirit of these guidelines was being broken in some way.

We then used scripture and a story prompt to guide discussion moving forward. This session, we told “stories of origin.” There is a story behind how one ended up in

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<sup>264</sup> Micky Scottbey Jones. <https://www.grossmont.edu/faculty-staff/participatory-governance/student-success-and-equity/resources/assets/pdf/brave-space-poem.pdf>. See also Appendix.

<sup>265</sup> See “Appendix F: Group Meeting Handouts”

their situation, whatever that may be. Our focus was on the experience of raising grandchildren. Ephesians 1:3-10 was used as a story conduit, the theological foundation for the way we are connecting our stories to faith. For the Christian, the origin of our relationship with God is from God's own decision to adopt us as children. For these grandfamilies, a decision was made to welcome in these children into their life in new way. Thus, the story prompt: "Tell the story of when you made the decision to take your grandchildren under your care."

Each participant around the room shared their stories, myself excluded. I tried to speak only when I could clarify the prompt or encourage the participant to speak further. Those who were married answered as couples and about 40 minutes were given for the stories so that each person could contribute in sharing their story. Each grandfamily had unique situations which led to their situations. For some, it was the parent's inability to care for the children at the time that led them to the decision to take custody. For another, it was concerns over safety. Their child was in an abusive relationship, so they took the grandchildren under emergency guardianship. One of the couples described how their grandchild's parent had passed away and because of a lack of preferable alternatives, they decided to adopt. A common theme for each was the sense of duty to respond in this way for their families. To some degree, there is anxiety over where else they might have ended up, like foster care or another set of family members. For all of these grandparents, raising their grandchildren seemed like the only viable option, one they would take again if needed.

That decision has come at a cost and with its own set of challenges. The children themselves ranged in age when they were taken in by their grandparents, some pre-

elementary and others teenagers. Issues of technology and social media are to some degree unfamiliar territory. One couple had a youngest child who was nearly finished with high school when they started raising their much younger grandchildren. Another described how their grandchildren have now grown and need continued care, though things have changed. Still another spoke about how they have since given up custody and now struggle with being disconnected with the way in which the grandchildren are raised.

All of these issues were communicated in the stories, affirming the complexities of the experiences of custodial grandparents. The stories also demonstrated a surprising level of openness and vulnerability in the group. Many of the stories were ones that I have heard as a pastor in one-to-one counseling sessions, and it was good to hear them told to others in the congregation. Other aspects of what was shared were things I was unfamiliar with. So, this exercise was not only helpful for making connections between participants, but also a benefit to me as their pastoral caregiver. What is more is that some participants stayed afterward and continued the conversation. Though some of the participants knew each other well prior to the meetings, others did not. Already, there was an increase in community through this exercise.

A comment was even made that seemed to indicate a desire for more time to interact with one another in conversation. Our time was hindered by a few factors, 1) If everyone gets equal opportunity to talk, there may not be time for thorough conversation centering on something one participant wants to speak about. 2) There were time constraints during the meeting. We did not start on time due to a few tardy participants and the preparation of food. The food was brought by a participant and added to the atmosphere of hospitality and comfort, but took time. 3) There were also preliminary

items (survey and release form) which were not part of the other meetings. Nevertheless, this feedback went to shape the next session, as I tried to make some room for follow-up conversations. The issue of time management is why it was encouraged that participants call on one another. The contacting done during the week is supplementary so as to provide opportunity for advice and further conversation outside the meetings.

*Session 2: Stories of Setbacks*<sup>266</sup>

We began this session with a reminder of purpose with Galatians 6:2. Whereas the previous week's scripture was more about communal connection, this scripture adds further biblical context to what we are doing as a congregational care exercise – “bear one another's burdens.” One of the participants was unable to be there the previous week, so we did a quick review of the guidelines for confidentiality and conversation. They were given the survey and release form and filled both out. One of the couples was not able to attend for this session due to a scheduling conflict of which I was notified prior to starting the meetings. It is not realistic to expect that such meetings will garner perfect attendance.

A new practice was introduced in this session, called “roses and thorns,” an invitation to share positive and negative highlights from the week. It was an attempt to incorporate conversation earlier in the meeting so that it was not just my voice until we started sharing stories. Not everyone shared for this, but I thought that how people responded helped set the tone for conversation. Because most of the participants were already familiar with the process, this introductory section went quickly and we were able to enter into the stories much sooner.

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<sup>266</sup> Ibid.

The story conduit for this session was Romans 5:1-8 to help set up the theme of stories of setbacks. When we strive to be faithful, we are likely to experience hardships. We are confident that, “Endurance produces character, and character produces hope, and hope does not put us to shame.”<sup>267</sup> In the life of our grandfamilies, this was the case as they shared stories in response to the following prompt: “Tell the story of a time that you felt a major setback or challenge in your care for your grandchild; a time you felt in over your head or frustrated. How did you deal with that? How did God help you endure and give you hope?” Some participants were more engaged, while others talked less than the first week. Issues of discipline seemed to be a commonality amongst participants when it came to “setbacks,” especially early on in their time caring for their grandchildren – a change of household is also a change of expectations and responsibilities for all parties. Many of the stories exemplified endurance on the part of these caregivers. For some, this included patiently waiting for new patterns, disciplines, responsibilities to develop for themselves or their grandkids, including for some spiritual disciplines like family devotions. While they saw results, others did not see as much positive change, but they still endured and tried their best. It was interesting to see what stage of their situations they were pulling from for their stories (i.e., some talked about recent events, others talked about the very beginnings of their experience).

In response to the comments from the previous week, time was allotted for two follow-up exercises. First, we provided some time for questions from the participants for the sake of clarity. This encouraged some follow-up conversation to help clarify and provide better connections with the various stories represented. Though it did not always

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<sup>267</sup> Rom. 5:4-5

stay on track with the subject matter, this did facilitate discussion. When it seemed that most of the conversation was between one or two people, I tried to follow-up with those who had not had an opportunity to speak in this portion of the meeting. After this, we closed by naming some common themes. Participants were invited to sum up their impressions of the stories with a word or phrase. This did not garner the expected response, but further conversation, most of which was helpful, though not all. This did help us to end well.

What was apparent in the practical aspects of session two is that flexibility and adaptability are necessary and achievable for these groups. We tried new ways of engagement to varying success because of the response from the first session. Just as one is learning from the experiences of others, one learns from the practice of these groups as they develop and strengthen in their execution. It was very important that everyone was there for the first session as it serves as an introduction to the group dynamics and flow, and acquaintances are made between participants and the subject-matter. However, it is possible that people will be unable to attend one of the other meetings. Though we highly encourage good attendance, it cannot at times be achieved, and it does not altogether hinder the value of the meetings.

Despite the challenges to this second session, the participants expressed the value of these group sessions so far. One of the participants was, “surprised by the differences.” They came into the group anticipating the commonalities amongst group members due to their situation. What they found was that every couple/participant entered into and experiences raising grandchildren differently. These differences seem to be based on their circumstances and upbringing. It is a sign of success that a participant noted the variety



among participants, showing that they are, 1) listening and engaged with the stories of others and, hopefully, 2) empathizing with the experiences of those different from them. There is value in the commonalities and differences in the stories. Each person was dealing with a common challenge, but the contexts and responses to those situations varied.

### *Session 3: Stories of Forgiveness*<sup>268</sup>

For this session, changes were made to the location and dynamics of the meeting out of necessity. We were missing one person in attendance due to a prior engagement. They missed the previous week as well, so that may have changed how effective this group was for them. Two of the group members tested positive for Covid-19 a few days before the weekend and were in quarantine. This meant we also had to move to the other church building to get a better internet connection so that they could attend via video conference. Both aspects of this situation demonstrate the versatility and adaptability of these groups.

This week, the stories focused on forgiveness. The Lord's prayer, our scripture used during this session as a call to purpose, seeks for forgiveness to be received and extended to others. In following Christ, reconciliation is a way of life. The story conduit was Ephesians 2:11-21 which describes the ways God is breaking down, "the dividing wall, that is, the hostility between us."<sup>269</sup> The story prompt was as follows: "Tell the story of a time that you gave or received forgiveness in the situations around caring for your grandchildren?"

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<sup>268</sup> See, "Appendix F: Group Meeting Handouts."

<sup>269</sup> Eph. 2:14

For some, they explored how difficult it is to voice forgiveness. There was an expressed need to extend forgiveness for the sake of all involved. For one participant, they were wrestling with forgiving the parents of the children. Though they internalize it, they had not vocalized it yet. A participant expressed that their approach to issues of forgiveness are definitely different due to their faith. Before their relationship with Jesus, they would have responded with more vindictive attitudes and actions. Another participant told a story about a disappointing decision on the part of a grandchild. They questioned whether or not they had failed as a caregiver due to the decisions of their grandchild. This led the participant to not only wrestle with forgiving their grandchild but also forgiving themselves.

The issue for some is one of receiving forgiveness. One participant was hoping for forgiveness as they feel their grandchild still blames them for the situation in which they find themselves. Another participant told their story around times that they were in the wrong, expressed remorse and asked for forgiveness from their grandchildren. They talked about how receiving that forgiveness felt and the positive way it affected them. Conversely, one of the participants commented that there was not a moment that they felt they needed to forgive their grandchild. Rather, they feel that their relationship with God has been part of their closeness to their grandchild. This participant came back around to tell a story of when they taught their grandchild about forgiveness.

The discussion blossomed beyond specific relational reconciliation to the situation of custodial grandparenting as a whole. A participant expressed how grandparents fulfill an essential need in child development. Another responded that they felt that, while it is true that grandparents fulfill an important need, they feel they have

been, “robbed of being grandparents.” Because they have to be the parental figure in lieu of their biological parents, they do not feel they can truly step into the role of grandparent.

This session in particular tested my expectations. There was more hesitation before they started telling the stories. Some who were more talkative in previous weeks, talked less while others who spoke less in previous weeks talked more. As the discussion went on, I was particularly surprised by the vulnerability and direction of their stories. My preconceived notion was that they would center discussion around forgiving people like their children, in-laws, or others besides their grandchildren or themselves. They had shared some of their feelings toward these individuals in times of pastoral care. However, the focus of the stories seemed to be directed toward how they teach their grandchildren forgiveness and how they give and receive forgiveness in their relationships with their grandchildren. My own surprise at this goes to show that one should never assume the content of another’s story. Once again, things were shared in this context which had not yet been discussed with me as their pastor. It further highlights the importance of taking a posture of listening when engaging in a community and the ways that a communal effort in care can expand the boundaries of compassion.

Another way that this session pushed the scope of expectations was in its dynamics. Video conferencing is not ideal, but it is an effective tool when necessary. After the online participants shared their story (they went first), they did not get much of a word in edge-wise during the exchanges going on in the room. I tried to turn the computer screen and camera toward each participant who was talking so that they could remain engaged, but they did not speak as much as in prior weeks. Because of this, I

made sure to set apart a moment for them to say anything that was on their mind. They expressed that they were engaged in listening to the stories and did not have anything else to say. While a challenging situation, this demonstrates the variety of settings in which small groups can occur. Not only did we change venue, some of the members were not physically present and we were still able to grow together.

The change of scenery and decreased size also seemed to make some participants a little more comfortable. At times, this meant that they were too comfortable. The technological connection needed for video conferencing meant that cell service was available in ways it was not in our other building, leading to distractions (phone ringing, checking texts, etc.). In some ways, however, it decreased any focus on me as facilitator. The fact that I had to be next to the computer meant that I was not in a section of the table to myself. We were more “circular” in our seating during this session. We also did not have time in the agenda for asking questions of clarification because, after the portion for story-telling, the participants just kept talking! The conversation kept going and revolved around the subject matter, and I did not want to interrupt.

#### *Session 4: Stories of Breakthrough<sup>270</sup>*

We ended the Circle of Care group sessions on a high note. All participants were present for the meeting. We met in the original room in which there is very little cell service. I noticed that this took away some distractions that were present during the previous meeting. Though we started with a reminder of our purpose, we did not do any ice breakers or review guidelines. At this point, the participants were following those parameters well enough that they did not need review. They also were already engaged in

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<sup>270</sup> See, “Appendix F: Group Meeting Handouts.”

conversation prior to the agenda. By this point in the group, everyone seemed more comfortable with each other and the rhythms of the meeting.

The focus of this final week was on “stories of breakthrough.” Just as it is appropriate to experience the tension between hopes and disappointments, we celebrate the victories! Ephesians 2:11-21 was once again the story conduit but with a new emphasis. Out of the rubble from the destroyed walls of hostility, God is building up a new structure, a household built with Christ as the cornerstone. With all we have been through, in Christ, we are part of that household of God. There is victory in this reality, and so we look for the victorious moments in life. The story prompt was then asked: “Tell the story of when you had a major breakthrough toward your goals in caring for your grandchildren?”

These grandparents expressed the breakthroughs they have seen in their grandchildren. A participant described the pride in seeing them do kind things for others. Another described how their grandchild had overcome adversity. For another, their grandchildren, now grown, have shown more gratitude and are willing to do more to help. Job changes for one participant can lead to more rest and more time with the grandkids. Quality times of recreation and rest remind them of the positive influence and presence they can have on their grandchild’s life. For another, it is seeing them make good decisions and seeking their dreams. One told a story about a conversation with one grandchild who asked, “Are you proud of me.” Being able to share pride for them and hearing that they still want to make their family proud was a victory. Some participants shared multiple stories, some of which did not address the particular prompt, but helped expand their stories and experiences as grand families. Again, participants just kept

talking after things were done. Both when we ended the stories portion and after I prayed and ended the scheduled agenda, they kept talking with one another. We concluded with an exit survey and encouraged them to continue contacting one another beyond the group.

### **The Effectiveness of Circle of Care Groups**

This group exercise was positively received by the participants. There were many members of the group who communicated that they had a good experience, would likely meet again if asked, and would invite others to have this experience.<sup>271</sup> Beyond the positive response in our context, this exemplified a way to implement the Circle of Care model. Through the joining of experiences, scripture, and fellowship we saw demonstrated a positive step toward building a mutual culture of care. Community and spiritual development, accountability and reintegration into the larger church community has helped decentralize care and form a network of compassion in the congregation.

Gatherings like the Circle of Care groups can provide a place to experience community and spiritual development. One participant in our group stated that they felt assurance in their relationship with the group members going forward, explaining, “I feel that, overall, we know we can talk to each other.”<sup>272</sup> Another participant stated that they were better able to pray and care for the others in the group, saying, “When there is more communication, there can be more understanding.”<sup>273</sup> The members of this group do not have an explicit role as care ministers in the congregation and many of them have not

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<sup>271</sup> Further detailed responses to the exit survey can be found in Appendix G.

<sup>272</sup> Response in the Exit Survey to the question: “How has your understanding of your fellow participants changed through this group?”

<sup>273</sup> Response in the Exit Survey to the question: “Would you recommend a similar group meeting to a friend? Why?”

had opportunities like these to give or receive care through sharing experiences. Yet, the testimonies of the group communicate that they felt the trust and support indicative of an effective small group, and they grew in their understanding and compassion for each other. Though I served as facilitator and did not have experiences to share personally, I was also affected by this group as the pastor. Many of these stories were unknown to me, and had we not had this context in which people felt comfortable and equally part of the conversation, they may have remained unheard.

These groups can also facilitate improvements in accountability. Attempts were in our group to develop a sense of shared responsibility for each other beyond the meetings. Participants were encouraged to contact one another outside the group time by giving contact information each of the four weeks we met to help build relationships and encourage prayer and further conversation. While there were those who tried to contact each other, there were those who missed the calls or admitted that they did not contact others. A possible reason for this is that many participants were not practiced at contacting others in the church to seek out connection. One participant stated in the exit survey when asked if they would recommend such a group to a friend, “Not sure I would encourage or discourage personally. I’m not that big on small groups but I know they can help some people.” This seems to indicate that even the group meetings were pushing beyond some participant’s comfort zones for practicing contact and support.

Another possibility is that the meetings were too frequent. When asked, “Do you desire to continue meeting with this same group?” One participant requested that if the group continue, it be perhaps once a month instead of weekly. Perhaps more time between sessions would allow opportunity to contact each other, but it may also allow

more schedule conflicts and decrease continuity between meetings. This challenges us to develop better methods for follow-up and is a reminder that growing a culture of care is a work in progress. Though it was difficult to get group members to contact each other outside the meetings, it is encouraging that some did! I also noticed some increased comradery between participants. They went out to eat after church together and had increased engagement with each other. In developing a culture of care, every part of the circle should look for ways to learn from mistakes, but also celebrate the breakthroughs.

Furthermore, the conversations had during groups like this could lead to further occasions for the Church to support people in their need. God's transformational grace has been experienced as we help one another, not just for those who receive care, but for those who give it out.<sup>274</sup> After the group stopped meeting, there were opportunities to support each other's needs in connection to the wider church community. The church has had the opportunity to serve two more families who have experiences with foster care and guardianship. One of our group members also became concerned of the need another participant had for a motorized wheelchair. They communicated this issue the board and the congregation gathered an offering and paid for the wheelchair in full. These are examples of ways the church is taking ownership of its vocation and time will tell how these acts of kindness help us change our culture.

As we develop this as a way of life, there will be opportunities to both extend and receive help to people outside the church walls. When we become aware of the needs of others, we can better direct them toward resources pertinent to their situation such as counselors, healthcare, or social services. Churches can also take their practices of care

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<sup>274</sup> Haugk, 146.



out into the community. McMickle explains that this starts with a good understanding of who our neighbors are.<sup>275</sup> For our group, some of the participants mentioned family members and neighbors who were going through raising their grandchildren too and affirmed that meeting in solidarity with others could be a help to them. The possibilities are extensive and should be contextually applied, but each step toward better care within a congregation simultaneously should engage the community in which that church resides.

### **Conclusion**

Congregations which are seeking a cultural shift in their care to something more holistic and mutual should consider employing practices which encourage similar dynamics. One such practice is a particular type of small group here presented as Circle of Care groups. Circle of Care groups employ leadership dynamics that promote a more decentralized approach. This means that the leader takes a less prominent role in discussions, could rotate to different participants, and is seen as more of a guide through the rhythms and goals of the group rather than the expert in the room. They also utilize methodologies of group practice which invite each participant to have equal opportunity to speak and engage. The prime examples of this are Story Circles and an indigenous recovery group called Wellbriety, which invite every person in the room to share including the leader if necessary.

Furthermore, Circle of Care groups utilize theological foundations as they are primarily to develop Christian care in a context. The theological perspective primarily used in the implementation of this project is that of John Wesley whose elevated the role

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<sup>275</sup> McMickle, *Caring Pastors, Caring People*. 167.

of experience as a source of theological understanding. His practical expression of this methodology was in part in a small group system, including the class meeting in which each participant would share the challenges to their soul and hold one another accountable in serving the Lord in pursuit of holiness of heart and life.

In the context of the Tahlequah Church of the Nazarene, the group sessions were implemented to address a specific issue shared by many of the congregants, that of being custodial grandparents. In these groups they shared experiences together and grew in compassion and relationship for one another. For us, it has been a positive step toward developing the culture of care referenced in chapter three. The group brought together members of the congregation from diverse backgrounds to share about a common issue they face. It was helpful for me as their pastor and connection catalyst to see how they connected and through their group engagement grow in my own understanding and ability to serve them in ministry.

The effect of the group went beyond the parameters of the meetings as the participants continued in care for each other. It also has potential to help us empathize and engage with the community. This issue is prevalent in our community and in need of compassionate people whose stories can resonate with the needs of their neighbors. Mutual engagement through small groups like these can help churches who are pursuing the vision of being a circle of care by implementing practical expressions of that idea. Care is communal and narratively construed. By sharing our stories in concert with the story of God and each other, care become centralized not on a personality but on a vision of a new way of life in love for God and neighbor.

## CHAPTER 5

### CLOSING REMARKS

#### **Summary**

Life is too difficult to face alone. This is why God has given us such a gracious gift in the fellowship of the Church in which there is, "...such hallowed fellowship, care, and counsel as cannot otherwise be known apart from the family of God"<sup>276</sup> Yet, churches are often too reflective of a culture in which people are isolated from one another, seeking community and finding institutions, leaving them with care as a product rather than a way of life. This problem has perpetuated the notion that pastors are the primary facilitators of care. The unique resource of congregational care is hindered when the practice of compassion is isolated to one person or group in the church. This hierarchical view of care also excludes those like our indigenous neighbors whose cultures imagine life in a drastically different way.

The very nature and character of God invites us toward mutuality and interdependence. The kenotic and perichoretic way of life exemplified in the triune God looks different than the individualized and institutional practices of care in which churches engage. Seeing one member or group in the church as more necessary or capable of providing care strays from the equal humility in the love of God which Christians are called to reflect. This does not mean that there are not unique ways in which clergy and laity are called to administer specific ministries such as counselling, teaching, preaching, etc. In fact, it enhances the exercise of spiritual gifts in the Christian

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<sup>276</sup> Church of the Nazarene, *Manual: 2017-2021*. Paragraph 704. "Sacraments and Rituals: Reception of Church Members," 272.

community, as each person is invited to live into their vocation of compassion as they follow Christ and are equipped by the Spirit. It is important then that the practices of care in the church be decentralized away from a clergy member or committee in order to develop a culture of care reflective of the nature of the God we worship.

There have been practices through which churches have tried to decentralize ministry. Many scholars point to ways in which pastors can lead as coworkers in ministry, delegating and empowering laity. Yet, even the achievement of the decentralization of care does not emerge from the pastor alone but the whole congregation. Churches have also employed ministries of lay counseling which equips those called to certain areas of care to practice their spiritual gifts among the congregation. However, these lay ministers can become at times an extension of the hierarchical reality of pastor-centric ministry, or become a new center themselves. Thus, there need to be practices that invite all members of the church to the table of caregiving. One way in which this is practiced is through small groups, which can be of great benefit to community formation and care practices in a church. However, some of the ways they are implemented are insufficient for a cultural shift toward holistic congregational care.

As a place of diverse people with unique issues, churches like the Tahlequah Church of the Nazarene would benefit by integrating and refining these insights in order to reshape the imagination of what congregational care looks like theoretically and what is done to put it into practice. The way that is proposed in this project is to envision each church in context to be a circle of care. Pastors help to set the language and example of care as they lead and practice ministry. Lay people with gifts for compassion are here described as Connection Catalysts as they can help facilitate the connections needed to

become a culture of care. Everyone in the congregation has an essential part to play in the care practices of the church both within and outside the institution. The community in which a church exist provides resources for practicing care and a context in which to implement them. In such a model, pastors, congregations, connections catalysts, and their communities exist in dynamic connection as partners in compassion. This model also lends itself to a renewed orientation in our gatherings, particularly in small groups.

One way that churches can implement this model is by establishing small groups which gather people for the express purpose of caring for each other in a way that fosters mutuality. As churches seeks to develop the imagination of being a circle of care, they should establish practical circles of care in which people can have their stories heard and grow together in response to their shared challenges in life. Such groups require intentional development. In the context of the Tahlequah Church of the Nazarene, we implemented a circle of care group around the subject of being custodial grandparents, a shared challenge of many of the church members. Through emphasizing mutual participation and interdependence amongst members through how leadership, methodology, and theological principles were put into practice, the group was able to grow together in care and empathy.

### **Next Steps**

In the Tahlequah Church of the Nazarene, we need more time and effort to reach the goal of developing the culture of care described in this project. For the congregation to move toward this interdependent way of life, they need to reimagine care in this context. Sermons, lessons, and stories are beginning to help us navigate the journey of

shifting our theological and cultural imaginations. The more we become aware of our mutual roles in caring for each other, the more we can put it into practice.

Our practices will help further solidify these cultural shifts. There is a need to further implement the Circle of Care small group ministry. The first Circle of Care group was a positive experience that should be beneficial for the health of the congregation moving forward. How beneficial it can be will only be evident when more groups are tested. It was apparent in the initial group that aspects of the practice could be improved. For example, the structure of the group was refined each week as it was implemented. A more established use of the best parts of that structure could make the group sessions flow better logistically. Also, in response to the pandemic, many have not returned to physical worship attendance, generating the need to test the effectiveness of the groups if done entirely through video conferencing.

Another major need for future implementations in this context is the need for different leaders. While it was necessary for me to serve as the initial Connection Catalyst for the group, there were participants that would serve well as facilitators of the group meetings in the future. By inviting one of the participants to be a Connection Catalyst and lead another group, he or she goes well equipped with prior experience with the group. The leader can also become a mutual participant in the discussion if we have a group meet around the same subject or another issue the leader has faced. Along with the prompt for further study of this thesis here in Tahlequah, there is also a need for continued exploration of these principles and practices beyond this context.

### **Prompt for Further Study**

More research is needed to know the effectiveness of the Circle of Care groups and the model of this thesis. While valuable, the insights of this project and the practical implications of the group experience in this context are limited. One could more clearly see the effectiveness of the group or the lack thereof through further experiments. It is suggested that research be done into what practices in the groups lead to the best results for the goals described here. One could also study what group sizes or methods for participant engagement produced better mutuality.

What is perhaps the most important for providing further refining to the practice is testing it with different subjects and in diverse contexts. By forming groups to share experiences and compassion around issues of divorce, grief, addiction, racial reconciliation, the effects of the Covid-19 pandemic, major life transitions, etc. would help increase the body of knowledge around this subject. Additionally, different contexts may yield a variety of results with the groups. What groups talk about and experience in a suburban church may be very different from that of an urban congregation. By adding diversity of subject and context, those seeking to decentralize care through small groups like the one presented in this project can be better equipped to apply them having a broader scope of research from which to draw.

Along with research into the groups themselves, study should also be done on the long-term efficacy of these principles and practices. One could measure the qualitative data around the effect that practices like the Circle of Care groups have on developing a culture of care. One could also implement further how a culture of care is changed through different practices of the congregation or pastor. Furthermore, one could explore

ways to educate pastors on how to lead efforts of cultural changes toward holistic care in congregations. As this is not a typical model of pastoral care and counseling, efforts to incorporate these insights into seminary education could be beneficial.

The suggested reimagining of lay leadership in caregiving can also be tested through extrapolating the concept and practice of Care Catalysts. Research can be done to further explore how to train such leaders and set the appropriate parameters around what is safe and effective for lay care. As it was necessary that a pastor lead the group in this context, it will be prudent to study how well a lay leader does, how follow-up practices can be enhanced if a Care Catalyst was placed in charge of oversight. Furthermore, study could be done on the ways that reimagining the role of the community in the practice of Christian care can change the way churches do ministry in their contexts.

Additionally, more research is needed particularly as it pertains to the indigenous perspective referenced in this project. Though engagement with indigenous voices in this work was both important and beneficial due to the context of Tahlequah, my commentary on another's cultural context remains insufficient. This project is not an attempt to acculturate Indigenous perspectives, but to learn from the viewpoints of the cultures represented in this congregation. What has become apparent through that engagement is that the indigenous perspective provides necessary critique to westernized Christianity and is vital to the conversation moving forward. So, there is need especially for indigenous scholarship to give further voice to the way churches can be transformed in their ministries of care to move away from the individualistic and hierarchical ways of colonized religious tradition toward those which are more holistic and interdependent.



## **Conclusion**

Christian care should not be viewed or implemented as a service rendered under the tutelage of a clergy member. Rather, Christian compassion is a way of life shared by all believers. While pastoral care is essential to the life of every congregation, its effectiveness is correlated to how much it is seen as a part of a holistic culture of care. It is the hope of this project that churches will be inspired to see every member as essential to their life of compassion toward one another. By getting together to share stories, congregations can grow together in empathy and build one another up in support. The trials of life are far too difficult to face alone. If we envision and embody the church as a circle of care where each person is a partner in showing compassion, we will be better equipped to face those challenges faithfully.

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## **Appendix A: Comparative Demographics**

### **Racial Demographics of Tahlequah City 2020<sup>277</sup>**

	<u>Percentage</u>
White/Caucasian alone	53.9%
American Indian or Alaska Native alone	27.4%
Hispanic	7.7%
Two or More Races	13.1%
Black or African American alone	2.1%
Asian alone	1.4%

### **Racial Demographics of the State of Oklahoma 2020<sup>278</sup>**

	<u>Percentage</u>
White/Caucasian alone	74%
American Indian or Alaska Native alone	9.4%
Hispanic	11.1%
Two or More Races	6.3%
Black or African American alone	7.8%
Asian Alone	2.4

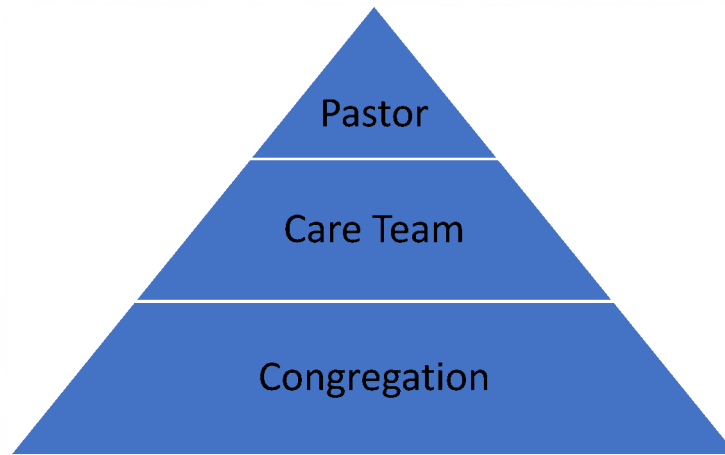
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<sup>277</sup>“Census Quickfacts: Tahlequah Oklahoma,” *United States Census Bureau*.  
<https://www.census.gov/quickfacts/tahlequahcityoklahoma>

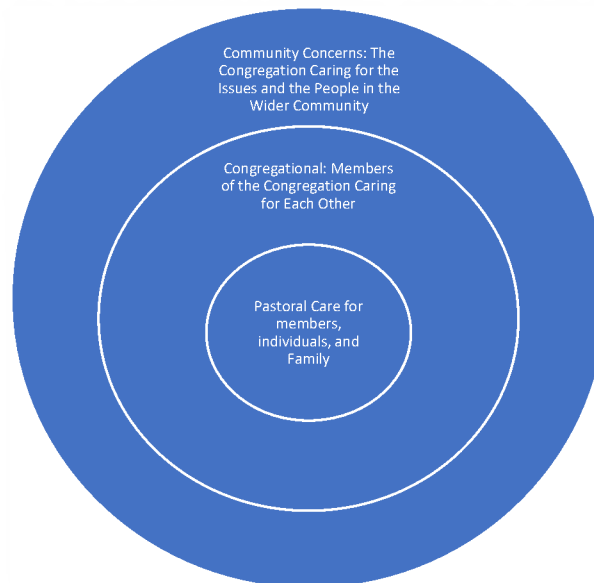
<sup>278</sup> “Census Quickfacts: Oklahoma,” *United States Census Bureau*.  
<https://www.census.gov/quickfacts/OK>

## Appendix B: Models of Congregational Care and Other Illustrations

Karen Lampe's Practice of Congregational Care Ministry in *The Caring Congregation*.<sup>279</sup>



Marvin A. McMickle's Model of Congregational Ministry<sup>280</sup>

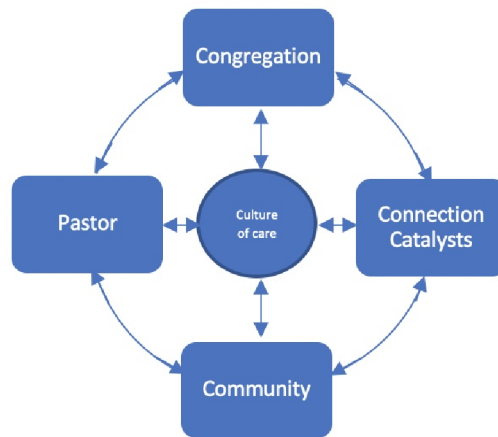


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<sup>279</sup> Karen Lampe, *The Caring Congregation*. Lampe does not provide an image of her method per se. This is an interpretation of how her work presents the relationship between pastor, CCM, and congregation.

<sup>280</sup> McMickle, *Caring Pastors, Caring People*, 6. McMickle illustrates congregational care by drawing three concentric circles. He notes that the center-most is the easiest to achieve. The mid-level circle is more difficult, as it is achieved when one can, “access resources to respond in corporate life. The outer-most circle is the most difficult as it consists of “Social outreach as an extension of pastoral care; not members of congregation but neighbors within 1 mile of [the] church.”

Circle of Care, a model of congregational care proposed in this dissertation.



The Medicine Wheel, a sacred symbol of indigenous people used to connote wholeness and connection between all aspects of life.<sup>281</sup>



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<sup>281</sup> Image from, "The Medicine Wheel: Pipestone National Monument," October 10, 2020. *National Park Services* <https://www.nps.gov/articles/000/the-medicine-wheel.htm>.

## **Appendix C – Circle of Care Group: Disclaimer and Confidentiality Agreement**

This Circle of Care group is a ministry of Tahlequah Church of the Nazarene. The purpose of this group is to provide spiritual care, support, encouragement, and accountability in a safe and confidential manner. It is expected that the discussions of this group be kept confidential and respect demonstrated to all participants.

Circle of Care group facilitators are trained volunteers under the direction and general supervision of assigned staff members at Tahlequah Church of the Nazarene. Regardless of their education, training, licensure or expertise, Circle of Care facilitators do not function in a professional role and do not provide clinically oriented mental health treatment, therapy or diagnosis.

This group will be used by Pastor Austin Troyer as a case study for his dissertation work with Nazarene Theological Seminary for the completion of his Doctor of Ministry degree. Names of participants will be withheld from published materials.

Your participation in this ministry is appreciated.<sup>282</sup>

## **Appendix D – Circle of Care Group: Participant Demographic Data**

### **1. Participant A**

Age: 67

Sex: Male

Race/Ethnicity: White/Caucasian

Marital Status: Married (to participant B)

### **2. Participant B**

Age: undisclosed

Sex: Female

Race/Ethnicity: Indigenous

Marital Status: Married (to participant A)

### **3. Participant C**

Age: 80

Sex: Male

Race/Ethnicity: White/Caucasian

Marital Status: Married (to participant D)

### **4. Participant D**

Age: undisclosed

Sex: Female

Race/Ethnicity: White/Caucasian

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<sup>282</sup> All seven participants were presented with this document and signed in affirmation that they understood and agreed.

Marital Status: Married (to participant C)

5. Participant E

Age: 48

Sex: Male

Race/Ethnicity: Indigenous

Marital Status: Married (to participant F)

6. Participant F

Age: 46

Sex: Female

Race/Ethnicity: Indigenous

Marital Status: Married (to Participant E)

7. Participant G

Age: 69

Sex: Female

Race/Ethnicity: Indigenous

Marital Status: Widowed

### **Appendix E – Circle of Care Group: Preliminary Survey Questions**

Preliminary Survey conducted on January 3<sup>rd</sup>, 2022:

*Questions 1-4 ask participants to answer in the following method:*

*How Strongly do you agree with the following statements?*

- *Strongly agree*
- *Agree*
- *Neutral*
- *Disagree*
- *Strongly Disagree*

1. “I am likely to contact my pastor for guidance when I face challenging situations or problems”

Participant Answers<sup>283</sup>

- a. Disagree
- b. Agree
- c. Neutral
- d. Agree
- e. Strongly Agree
- f. Strongly Agree
- g. Agree

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<sup>283</sup> These answers reflect the list of participants above (i.e. the response of participant “A” is recorded in answer “a”)

2. “I am likely to contact another member of the church that I trust who is not the pastor for guidance when I face challenges or problems.”

Participant Answers

- a. Disagree
- b. Neutral
- c. Disagree
- d. Neutral
- e. Strongly Agree
- f. Strongly Agree
- g. Disagree

3. “I have contacted someone else in my church congregation to check in on them in the last month.”

Participant Answers

- a. Agree
- b. Agree
- c. Disagree
- d. Strongly Agree
- e. Strongly Agree
- f. Neutral
- g. Agree

4. “I am satisfied with the level of care my church provides for my needs.”

Participant Answers

- a. Agree
- b. Agree
- c. Agree
- d. Agree
- e. Strongly Agree
- f. Strongly Agree
- g. Neutral

*Question 5 is in essay question format*

5. “What are you hoping to get out of these small group sessions?”

Participant answers

- a. “No specific Expectations”
- b. N/A
- c. “At this point, I’m not sure what to expect”
- d. “Support and prayers from members”
- e. “Hope/Help”

- f. “Different versions and how they face challenges with raising the grandkids”
- g. “Helping the pastor and to a small degree hearing what others experiences and what they say.”

## **Appendix F – Circle of Care Group: Group Meeting Handouts**

### Circle of Care Groups: Grandparents Raising Grandchildren

#### Session 1: Stories of Experience

1. Preliminary Survey
2. Welcome and Introduction
  - a. 1 Corinthians 12:24b-27 – “the same care for one another”
  - b. This group is for sharing experiences with each other for the purpose of encouragement, accountability, and care.
3. Guidelines
  - a. Confidentiality and “Brave Space”
  - b. Not a place to preach or cross-talk – a place to listen and learn
4. Story Conduit – Ephesians 1:3-10
  - a. God chose to adopt us out of love and for our benefit.
  - b. Each of you have made the decision to care for your grandkids in significant ways – guardianship, adoption, or just for a season; for months and years.
5. Prompt: “Tell the story of when you made the decision to take your grandchildren under your care.”
6. Activity: Call a fellow participant between sessions...*How are you doing?*  
*How can I pray for you?*



Invitation to Brave Space<sup>284</sup>

*Together we will create brave space.  
Because there is no such thing as a “safe space” —  
We exist in the real world.  
We all carry scars and we have all caused wounds.  
In this space  
We seek to turn down the volume of the outside world,  
We amplify voices that fight to be heard elsewhere,  
We call each other to more truth and love.  
We have the right to start somewhere and continue to grow.  
We have the responsibility to examine what we think we know.  
We will not be perfect.  
This space will not be perfect.  
It will not always be what we wish it to be.  
But  
It will be our brave space together,  
and  
We will work on it side by side.*

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<sup>284</sup> Micky Scottbey Jones. <https://www.grossmont.edu/faculty-staff/participatory-governance/student-success-and-equity/resources/assets/pdf/brave-space-poem.pdf>

## Session 2: Stories of Setbacks

### 1. Welcome and Introduction

- a. Galatians 6:2 – “Bear one another’s burdens.”
- b. This group is for sharing experiences with each other for the purpose of encouragement, accountability, and care.

### 2. Guidelines

- a. Confidentiality – the stories told here held in confidence
- b. Brave Space – This is a place to grow and be vulnerable
- c. Not a place to preach or cross-talk – a place to listen and learn.

### 3. Story Conduit – Romans 5:1-8

- a. Life can be hard, even for those who are faithful to Christ. But God gives us hope, and helps us to build endurance and character, even when we suffer.

### 4. Prompt: “Tell the story of a time that you felt a major setback or challenge in your care for your grandchild; a time you felt in over your head or frustrated. How did you deal with that? How did God help you endure and give you hope?”

### 5. Activity: Call a fellow participant between sessions...*How are you doing?* *How can I pray for you?*

### Session 3: Stories of Forgiveness

1. Welcome and Introduction
  - a. Lord's Prayer - "forgive us our trespasses, as we forgive those who trespass"
2. Guidelines
  - a. Confidentiality and Brave Space
  - b. Not a place to preach or cross-talk – a place to listen and learn.
3. "Peaks and Pitfalls" – What is a highlight from the week? A lowlight?
4. Story Conduit – Ephesians 2:11-21 (breaking the barrier of hostility)
  - a. Through Christ, God has brought us close to God's self through forgiveness of our sins.
  - b. Because he forgave us, he is calling us to receive and give forgiveness.
5. Prompt: "Tell the story of a time that you gave or received forgiveness in the situations around caring for your grandchildren?"
6. Questions for clarification
7. Activity: Call a fellow participant between sessions...*How are you doing?*  
*How can I pray for you?*

## Session 4: Stories of Breakthrough

### 1. Welcome and Introduction

- a. Ephesians 4:3-6; 15-16 - “bearing with one another in love”
- b. This group is for sharing experiences with each other for the purpose of encouragement, accountability, and care.

### 2. Guidelines

- a. Confidentiality and Brave Space
- b. Not a place to preach or cross-talk – a place to listen and learn about each other.

### 3. Story Conduit – Ephesians 2:11-21 (built up as a holy temple)

- a. We are all in the process of being made into the people God wants us to be.
- b. Picture your goals for how you want your relationship with your grandkids to be. Our families are in process. Along the journey, there will be moments when you see glimpses of that becoming reality.

### 4. Prompt: “Tell the story of when you had a major breakthrough toward your goals in caring for your grandchildren?”

### 5. Activity: Call one another and care for each other...*How are you doing? How can I pray for you?*

## **Appendix G – Circle of Care Group: Exit Survey**

Exit Survey conducted on January 24<sup>th</sup>, 2022

*All Questions are in essay format to allow room for explanation if needed.*

1. Did you contact a fellow participant at least once between sessions?

Participant Answers

- a. "No"
- b. "No"
- c. "I tried, but got no answer."
- d. "Yes"
- e. N/A
- f. "had missed calls"
- g. "No"

2. Were you contacted by a fellow participant at least once between sessions?

Participant Answers

- a. "No"
- b. "Yes"
- c. "No"
- d. "No"
- e. "Missed his phone call"
- f. "had missed the call"
- g. "No"

3. Did you feel like this group was a safe environment for sharing your story?

Participant Answers

- a. "Yes"
- b. "Yes"
- c. "Yes, I trust all who participated."
- d. "Yes"
- e. "Yes"
- f. "yes, I enjoyed it very much"
- g. "Sort of"

4. How would you rate your overall satisfaction with the results of these sessions?

Participant Answers

- a. "Satisfied"
- b. N/A

- c. "Very Satisfied. I Learned much about the needs and situation of the participants."
  - d. "Good"
  - e. "10 out [of] 10"
  - f. "Very good – sharing stories"
  - g. "7 (of 10)"
5. What changes have you experienced in response to participating in this group? Tell one specific way that this group has been helpful for you.

Participant Answers

- a. "No specific changes. It has been helpful to get to know people and their situations/stories better."
  - b. "The same way as a grandparent, it seemed like we wanted the best for them."
  - c. "I will have much more sympathy for some of the other participants."
  - d. "Helpful to know each other's circumstances – I have been impressed with definite ways to pray for each group member."
  - e. "Helping me to use their way for how [unintelligible] punish their kids"
  - f. "Hearing different ways of how we got our grandkids and knowing that we would do it all again if we had to."
  - g. "There are no perfect grandparents! We all seem to draw from our upbringing and environment."
6. How has your understanding of your fellow participants changed through in this group?

Participant Answers

- a. "Yes"
  - b. "I feel that overall we know we can talk to each other."
  - c. "I realized that some were in a much more difficult position than I."
  - d. "I have become more tolerant of certain behaviors."
  - e. N/A
  - f. "That in different ways, we are all the same."
  - g. "Misery loves company"
7. Would you recommend a similar group meeting to a friend? Why?

Participant Answers

- a. "Not sure I would encourage or discourage personally. I'm not that big on small groups but I know they can help some people."
- b. "Yes – just a way to open up."
- c. "Yes. It helps to broaden one's perspective"
- d. "Yes – When there is more communication, there can be more understanding."
- e. "Yes, to be close; to know each [other]"

- f. "Yes, others' insights really help w/ things going on at home."
- g. "Yes, it's good to speak – it cleanses your emotions."

8. Do you desire to continue meeting with this same group?

Participant Answers

- a. "Not a burning desire, but not totally opposed either."
- b. "Yes"
- c. "Perhaps, but less often. Once a month might [be] better."
- d. "If there are further goals of the administrator."
- e. "Yes - family feeling"
- f. "Yes - I really enjoy it"
- g. "Yes – They seem nicer than just our daily church meetings."

9. Would you consider participating in a similar group in the future?

Participant Answers

- a. "Possibly"
- b. "Yes"
- c. "Yes, depending on the topics discussed."
- d. "Yes"
- e. "Would like to"
- f. "Anytime"
- g. "Yes"

10. How likely are you to continue to contact fellow participants?

Participant Answers

- a. "Not Likely"
- b. "I will try to keep in touch"
- c. "Very. The church makes it possible."
- d. "Highly"
- e. "Once or twice a week"
- f. "I will reach out more"
- g. "Only a little; Mainly the couple I already know"