Faith, Health and Community (DMin. Track)
May 10-13, 2016

Session 1: Faith, Health and Community:
The Church’s Role in Promoting Health and Wholeness
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Course overview

Jesus was a healer—he healed the sick (e.g. Mark 5:25-34; Luke 17:11-19), opened the eyes of the blind (John 9:1-12; Mark 8:22-26), and cast out demons (e.g. Mark 5: 1-20; Mark 9:14-29). He commissioned his followers to go out and do likewise (Luke 10:9; Matthew, 10:8). As Christ’s healing hands in the world today, we are called to carry out that role now as the Body of Christ. What does is mean for us to be healers when we consider the complex and confusing health care industry that exists in our communities? How do we equip and support our congregation and community members in ministering with one another during times of illness, gaining access to health care (especially for those who are poor or lack insurance), and walking alongside one another as they enter into the health care system?

The Church today is called to be the healing hands of Christ in the world today. In his commissioning of the disciples, of us, we are instructed to teach the things that Jesus taught us, to give witness to the healing and wholeness and redemption that Christ brought about in his ministry, and for us to embody these things as we demonstrate who Christ is. Thus we do not speak of Jesus’ miracles primarily as proof that Jesus is the messiah, but instead as a model for us to live the way Jesus did, by continuing the good works that Jesus did. We understand that this means feeding the hungry, clothing the naked, and visiting prisoners, as Jesus instructs the disciples in Mathew 25. But we sometimes tend to forget it also means healing the sick, raising the dead, cleansing the lepers, and casting out demons (Mt. 10:7-8), which is what Jesus told his twelve apostles to do as their first “ministry internship” learning project. Long before Jesus speaks of the final judgment being based on how well we treat the stranger and care for one another, he has demonstrated by his own healing miracles what it means to embody the kingdom of God in the presence of everyday life. And he commands us to do likewise.

Through this course, we examine what this means for us in ministry today. This includes modeling and teaching health and holistic wellness in our own lives. It means equipping our congregations to engage in holistic health ministry. It means connecting our health ministry with the larger community. It means that that we are called to be about Christ’s work of redeeming the fallen system of health care so that it serves the health and wellness of all God’s children. It means ensuring that each child of God is cared for—body, mind, and soul—by their community so that they may live their life to the fullest. It means being part of the solution to bringing forth justice by dismantling the social determinants of health that disadvantage people’s health and mortality based on attributes such as race, class, gender, income, and geographic location. And it means that we share this as part of our story of who we are as disciples of Christ, to proclaim the good news of our healing and wholeness as the beloved children of God.
Requirements

The main components of this course are:

1. **Pre-class meeting preparation**: these are assignments to prepare you for our time together in May so that our time will be most fruitful. This will require your diligence in preparing by:
   - Reading all the assigned works prior to our first meeting
   - Viewing assigned videos and other presentation material prior to class
   - Preparing a brief video introduction of yourself and your ministry
   - Completing the health ministry assessments forms posted on Blackboard: your own health self-assessment; and your church’s health ministry assessment. (These are based on tools that we have developed and are useful for supporting your own personal well-being and your congregation’s successful development of health ministry.)
   - Completing pre-class assignments by the due dates
   - Making sure you are adequately resourced to access Blackboard and check your Wesley email regularly to keep abreast of course-related information.

2. **In-class participation**: our time together is limited to four days, May 10-13, so it will be packed full of content—presentations, lectures, discussion, guest speakers, and a site visit. It is imperative that you come to each class willing and eager to participate and contribute. We will all be learning with and from each other, so please be prepared to share generously of your experience and wisdom. Also, you are expected to make one presentation during the week on one of the assigned books. One of your pre-class assignments will be to prepare a powerpoint presentation to use for this class presentation. Please have this posted and be ready to prepare at any time during the week, as the schedule posted below is tentative and likely to change.

3. **Post-class synthesis**: there will be two primary formats to help you reflect on and synthesize your learning from the course: reflective journals or blog posts and an application paper. Within the first ten days after completion of the course, I will ask you for two short reflective responses to some idea or ministry that you learned about in the course. You are invited to write these in a way that you feel most comfortable for sharing with a larger audience beyond the class (e.g. for a blog that you contribute to or write; for a church or community newsletter; an op-ed piece for a local newspaper; a video-recorded public service announcement; a prayer or devotion; etc.). The second piece of writing will be a longer paper—roughly 6-8 pages in length—that focuses on one aspect of your learning from the course and how you are considering responding to that learning through your ministry. Again, this may take on a wide range of forms and you should select that which is most helpful for your ministry. Examples may include: a description of a bible or small group study on faith and health; plans for developing or extending a new form of health ministry in your setting; planning a sermon series on faith and health; or plans for developing a faith community health network in your setting. Please feel free to develop a plan or respond in a way that is helpful for your particular ministry.

**Pre-class assignments**: Please read this section carefully so that you may plan your time accordingly. You should acquire all of the assigned text and begin reading and writing immediately, to give yourself time to complete the assignments by May 9th.

**A. Required readings and analysis**: You should read the required texts prior to our first gathering, on May 10th, 2016. Before the first day of class, you should turn in a two page (500
words, double-spaced) analysis for each of the five assigned books. The format for the review should follow this suggested outline—although you are free to adapt this format as appropriate to fit your analysis and your ministry setting. For each book there should be a one page summary and a one page reflection/response/analysis. More specifically:

I. Summary—what is the author’s main argument or thesis? How does the author understand the connection between faith and health? How is it manifest when working positively; or conversely, how do things go awry when faith and health are not sufficiently connected? How is God at work in the world, linking faith and wholeness? How are men and women, the church, and our social institutions, either bringing forth wholeness through faith; and/or destroying health and wholeness by not acting in faith?

II. Applied analysis—what does this mean for your church or ministry? How does this author’s analysis apply to the interconnectedness of faith and health in your congregation or your community setting? How is your church or ministry being in the world and/or what is it doing that is part of God’s healing and redeeming work (as understood from the perspective of this particular author)?

By way of offering more specific guidance for the second half of your paper, the applied analysis portion, please consider these questions.

Gunderson and Pray—Where are you seeing life speak in your community or ministry? Please use the five concepts highlighted by Gunderson and Pray as they apply to one of your ministry experiences.

Koenig—Where is one place in your community where you are seeing a brokenness between medical health and wellness and spiritual wholeness? Or conversely, where do you see a strong connection between faith and bodily wellness in your congregation or community?

Gunderson and Cochrane—Do a quick asset mapping of your own community—as you know it—of the seven components that are needed for a community’s health (see figure 1.1, p. 15). What do you see as working well in your community? What do you see as missing or not working well?

Bennett and Hale—How might you create a medical-religious partnership, for your church or your community, based on Bennett and Hale’s model? How might this work? What might some challenges be?

Lampe: How might you apply one or more of the specific tools suggested by Karen Lampe for your congregation or ministry setting? What fruits would you hope it would bring? What might some challenges be?

B. Watch my video—Please watch the video of me giving a talk on health care, based on Jeremiah’s call to “seek the welfare of the city” (Jer 29:7). Here is the link from the lecture with Dr. Sam Marullo on "Healthcare".

Please provide a one-page response to the video based on your reflections on the video. Your response might be a scriptural exegetical response as to how you might understand one of the scripture passages differently than discussed in the talk. Or it might be a commentary on how you might apply an insight discussed in the talk. Or it might be a critique of the perspective presented in the talk. Or it might be going deeper on a point or two raised in the presentation. Feel free to respond in whatever way you are moved.
C. Use assessment tools—Please use the two assessment tools found on Blackboard. One is a self-assessment of your own health. It is so important for you to take good care of yourself, not only for your own well being, but also for your fruitful ministry. Research shows that healthy clergy lead healthier congregations and that this is due to the clergy member’s modeling and embodying health. This is a tool that you can use and check in on yourself periodically, perhaps annually. Please complete this form and store a copy for yourself on your computer and keep a blank copy for yourself to do next year at this time.

The health ministry self-assessment is a tool to measure the development of health ministry in your setting. Please complete this form and plan to use it again in six months or in a year to assess the development of health ministry in your congregation. In our own research, we have found that the higher a congregation’s scores are on the scales, the more fruitful their health ministry is likely to be.

D. Video introduction—Please create a brief video introduction for yourself. This should be limited to 1-2 minutes. This can be informal and recorded on your smartphone, or more formally scripted and recorded for more professional use. This is a helpful way for us to get to know each other a bit before the class begins. Videos can also be helpful ministry tools, so feel free to use this video in other contexts of formats if you would like, or consider it a practice run for you making another video for ministry purposes at a later date.

Required texts are:


Additional suggested texts for further reading (NOT required to be included in your assignments in any way):


Follow up assignment (6-8 pages, double-spaced): After the course is completed, I will ask you to synthesize your learnings from the course as they apply to a particular ministry—preferably a health ministry in which you are currently engaged. This may be a ministry that you wrote about in your advance assignment summaries—that is perfectly appropriate. Or your analysis may focus on another ministry; or it may even focus on a proposed new ministry that you are considering. If you have other ideas about this final assignment, please feel free to propose it to me (before you start writing, please!). We will discuss this final paper when we meet in class. DUE DATE: June 24, 2016.

Tentative Schedule for our time together: Please note this is subject to change. Please plan to keep your dinner/early evening time slots open as we will have guests who will join us for dinner and conversation one or two evenings, to be determined.

(Notes: Times are approximate)

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<tr>
<th>Time</th>
<th>Tuesday 5/10/16</th>
<th>Wednesday 5/11/16</th>
<th>Thursday 5/12/16</th>
<th>Friday 5/13/16</th>
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<tr>
<td>Early AM (9:00 – 10:30 am)</td>
<td>Intros, course goals, your goals, your ministry setting</td>
<td>Medicine, Religion and Health presentation</td>
<td>Building Healthy Communities presentation</td>
<td>Church health ministry site visit</td>
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<td>Late AM (10:30 am – 12:00 pm)</td>
<td>Course and track overview; intro to sociological perspective and health ministry</td>
<td>Intro to Heal the Sick, Wesley program</td>
<td>The Caring Congregation presentation</td>
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<td>LUNCH/Break</td>
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<td>Early PM (1:00 – 2:30 pm)</td>
<td>Leading Causes of Life presentation</td>
<td>Religion and the Health of the Public presentation</td>
<td>Site visit to HHS</td>
<td>Reflection, wrap-up, and looking forward</td>
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<td>Late PM (2:30 – 4:00 pm)</td>
<td>Discussion and wrap-up</td>
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<td>Dinner speaker or activity (roughly 5-7 pm)</td>
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