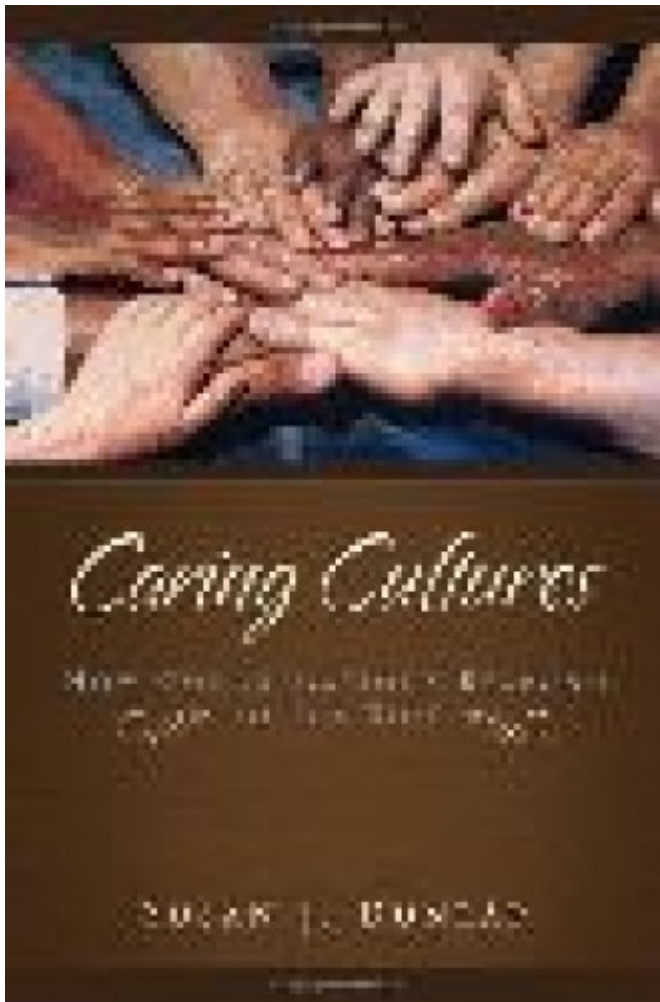


Kingdom of the sick

By [Shawnthea Monroe](#) in the [April 20, 2010](#) issue

In Review



Caring Cultures: How Congregations Respond to the Sick

Susan J. Dunlap
Baylor University Press

Eventually all bodies break down; human life is finite—it's a truth most people pretend not to know. Early in *Caring Cultures: How Congregations Respond to the*

Sick, Susan Dunlap writes, “A congregation’s beliefs and practices regarding illness are, finally, a congregation’s treatment of finitude.” This elegant description of the theological meaning of illness is at the heart of Dunlap’s thoughtful and practical work.

Her thesis is simple: congregations possess a diversity of wisdom about caring for the sick, wisdom that is grounded in particular theological traditions and unique histories. This wisdom is expressed through what Dunlap calls belief-practices. Understanding the belief-practices of other traditions, Dunlap suggests, will enable congregations to enrich and strengthen their own ministry with the sick.

To test this idea, Dunlap studied three churches in Durham, North Carolina, which she calls Healing Waters Church, Our Lady of Durham and First Downtown Church. In each case, she traces the development and theology of the denomination, the historical background of the congregants and the particular history of the local church. Against this backdrop, she gives a detailed description and interpretation of each congregation’s belief-practices around caring for the sick. While this may sound like dull stuff, Dunlap is a gifted writer and manages to turn flat ethnographic data into a sparkling narrative.

Healing Waters Church is a small, charismatic African-American congregation in the Pentecostal tradition. The church building may be worn out, but the worship at Healing Waters is full of life, including ecstatic manifestations of the Spirit. The belief-practices around caring for the sick are centered on healing. Whether they are praying, laying on hands or anointing with oil, the people of Healing Waters treat illness as a spiritual issue. Whatever ails you is caused by the devil, and God will triumph over evil in the end. As Dunlap describes it, “God’s obligation is to heal, and the petitioner’s obligation is to believe.”

If Healing Waters Church is all about the Spirit, then Our Lady of Durham is all about the body. Founded by Mexican immigrants, many of whom are undocumented, Our Lady of Durham stands in the tradition of Latino Catholicism, with an emphasis on ritual and mystery rather than dogma and doctrines. The belief-practices around caring for the sick include visitation, prayer and the reading of scripture. Rather than expecting healing, the members of Our Lady pray for patience and for the ability to submit to God’s will and trust in God’s redemption. Through actions and words, the people express a radically incarnational theology in which the common stuff of life shimmers with the light of the divine. Even illness is knit into the narrative of

redemption, and bodily weakness has the power to draw us deeper into the mystery of God.

Standing in sharp contrast to these two lively ethnic congregations is First Downtown Church, a white, middle-class mainline Protestant congregation. The spiritual forebears of First Downtown are Scottish Presbyterian immigrants, a “staid, sober, settled people of steady character.” This also describes worship at First Downtown. When it comes to belief-practices around caring for the sick, First Downtown is all about care, not cure. The congregation is well educated and well organized. When someone falls ill, a network of care is put in place to provide practical assistance. Personal piety is a private matter, and spiritual issues are left for the minister to handle.

When it comes to analyzing the belief-practices of each congregation, Dunlap is careful to lay her cards on the table. She admits that she cannot be a neutral observer; after all, she was once a member of First Downtown Church. But she tries her best to be objective, viewing each practice through three lenses: empathetic description, appreciative interpretation and cautionary warning. One weakness of the book is that her cautionary warning, or critique, is only a discussion of how a particular practice could become a form of idolatry. While this is useful, some of the practices seem not idolatrous but theologically suspect, and Dunlap doesn't address this.

Dunlap uses a lackluster tone to describe her own tradition. Like many mainline Protestant ministers, she seems to suffer from charismatic envy. Dunlap clearly wishes that her own church were livelier and more embodied in all its practices, more like Healing Waters and Our Lady of Durham. Yet what she sees as a practice issue is also a theological issue.

Sometimes oppressed peoples develop a communal theology rooted in a specific eschatological hope: because this life of suffering and oppression cannot be God's will, there is clearly another life to come where God's will is accomplished. For the members of Healing Waters Church, when it comes to illness, that eschatological hope takes the form of healing; for the Latino community at Our Lady of Durham, it takes the form of redemption. Because their hope is anchored in the world to come, these two congregations are able to embody and celebrate God's goodness even in the face of serious illness and loss; theology gives rise to the embodied practices. Dunlap seems to suggest that mainline Protestant churches can import the

embodied practices without their theological roots. But Dunlap's research persuades me that we don't need better practices; we need better theology.

The book concludes with a very helpful chapter titled "A Practical Theology of Care for the Sick." Here, Dunlap finally outlines her own theology of illness and care. She believes that rather than being caused by the devil or human sin, illness is simply the inevitable result of our finitude. Although God does not make us sick, God's goodness and mercy are made manifest in the spiritual and physical care we receive from others, which brings us real comfort in times of fear and anxiety. This theological description of illness fits mainline sensibilities but also challenges us to care for the soul as well as the body, to be prayerful as well as practical. Dunlap concludes the chapter with a robust description of "the church of best practices." Given that much of the book is descriptive, I was pleased that Dunlap finally connected the dots and became prescriptive.

There are lots of gems to be found in *Caring Cultures*. Dunlap's brief prologue is a brilliant account of Durham's history, and some of the best writing in the book. She also makes a compelling argument for creating a theological category of tragedy for speaking of catastrophic illness, which gives sick people a way to interpret their experience without needing to speak of sin. After all, we will all eventually join the kingdom of the sick.