

House calls: A vanishing form of ministry

by [Scott Dalgarno](#) in the [March 8, 2005](#) issue

A church I pastored in Portland, Oregon, ran an after-school children's program. One afternoon someone came to tell me that twin brothers, aged six, had pushed a little girl during a play period. Although she recovered quickly, we had some anxious moments. She had hit her head hard on a concrete floor and needed a CAT scan to make sure that there was no serious damage. After we had seen to her care, I left to visit the boys' home and inform their parents of the misdeed.

The woman at the door of the mobile home said she was the grandmother. The nervous, chain-smoking, woman expressed sincere regret and concern for the little girl. She explained that the boys' mother had never taken responsibility for herself or the boys, and that she, the grandmother, was raising "the little pistols." She was worried that I would no longer let the boys attend the church program and begged me to reconsider. She couldn't afford to pay for any other program, she said. I told her that they would not be expelled, and that I'd try to spend some personal time with them.

As I headed out the door, I saw something I'd missed on the way in. The woman had set up a shrine to Elvis Presley in a corner of her living area. On the wall, softly lit by candles and framed beneath by fresh-cut flowers, was a life-size photo of "The King." This was not the young Elvis, but Elvis after Liberace had convinced him that flamboyant clothes were the key to fame without end. As the woman and I began a second conversation, I began to understand the depth of her loneliness, and later was able to help our church relate better to all three family members.

House calls. I regret to say that I don't make as many house calls as I used to. I tell myself that I need the time for study—I teach more now. But I know I'm missing something. For one thing, I'm missing the visual clues that come with seeing people in their homes. I don't see Elvis posters or the kids' art work or a handmade afghan—things that can start a conversation. Yes, people do come to my office. But

although I may feel more comfortable there, my comfort comes at a price. People in their own environment are different than they are in mine. At home, they are more in control and less guarded; in my office, they come in and they see shelves of books. Many are intimidated. It may take the whole hour to get them to relax and to draw them out.

What happened to the house call? I recently studied the life and work of William Carlos Williams, the physician-poet who made a career out of house calls. Williams practiced medicine in blue-collar Rutherford, New Jersey, where doctoring was unglamorous. Yet he worked well into his 70s in that one community, and made house calls until the end of his life.

Williams was a good friend of child psychiatrist Robert Coles, and they made many house calls together. Coles says that Williams was “a real tough doc,” never sentimental. Yet Williams found the contact with his patients stimulating and often disarming. He claimed that in even the most casual visit he learned something elemental about the human condition, and found something that fed his spirit immeasurably.

Many of the people he visited were first-generation immigrants. In a story called “ancient gentility,” Williams records a visit to an old Italian couple who managed to live the traditional peasant life in a small “jerry-built house” in New Jersey. “In those days I was about the only doctor they would have on Guinea Hill. What a thrill I got!” He described the husband as “a gentle, kindly creature, big as the house itself, almost, with long pure white hair and a big moustache. Every movement he made showed an ancient gentility.” Since the couple had no money, payment for examining the man’s wife turned out to be a pinch of snuff. Williams described the barter as “one of the most gracious, kindly proceedings I had ever taken part in.” Inhaling the snuff was another matter: Williams sneezed his head off.

According to Coles, Williams found neurological clues by attending to patients at home. Williams would get excited about any detail—a newspaper clipping on the kitchen wall, a phone treated as an altarpiece, a bit of scripture printed on a card and displayed as if it were someone’s most precious possession—he took all of this to heart as he sized up the well-being or illness of his patients. He wrote:

My medicine was the thing that gained me entrance to these secret gardens of the self. . . . I was permitted by my medical badge, to follow the

poor, defeated body into those gulfs and grottos. And the astonishing thing is, that at such times and in such places—foul as they may be . . . just there, the thing in all its greatest beauty, may for a moment be freed to fly for a moment guiltily about the room.

I believe that the “thing in all its greatest beauty” was a subtle clue, something deeply human that was made available to Williams in what he saw or heard. This clue confirmed for him, again and again, that the profession of doctor-poet was tailor-made for him, and that he was called to his work.

When I was a young minister, I read that paragraph and was elated to realize that I had the same entrée into people’s lives. What amazing doors were open to me if I was willing to walk through them. As Williams said, “Whole lives are spent in the tremendous affairs of daily events without even approaching the great sights I see every day.”

Sadly, the doctor’s house call is mostly a relic of the past. The clergy call too is endangered. Many ministers work in megachurches, where they can never hope to know, let alone call on, all of their members. Other pastors are becoming increasingly specialized—and increasingly isolated. In many churches, “program” has become more important than “person.”

It’s not only the parishioners who lose out. “I don’t know what I’d do without those patients!” Williams said to Coles. “Everyone thinks doctors are good people because they help other people. . . . But if you ask me, the people who are sick are helping us all the time—if we’ll let them help us. How many times I’ve gotten up and felt lousy; I’ve felt lousy driving over there, and then I’ll knock on the door, and someone opens it, and it’s a mother or a father, and they want me to go right to their kid, or they have pains themselves, and you know what, the next thing with me is that I’ve forgotten myself—isn’t that an achievement!” (quoted in Robert Coles, *The Call of Stories*).

My own general practitioner told me recently about his years making house calls. “I remember every one of them. And now when I drive around town and see those houses, those visits come back to me.”

It was the intimate contact with people—the friendly contact that turns doctoring from a science into an art—that attracted him to the profession in the first place. And it is the memory of that contact that has sustained him in his retirement.

What will sustain those of us who are pastors today? Do we feel, as Williams did, that we are getting more out of what we do for the people we serve than they are getting from us? As we stand in the midst of families in crisis, what do we see? If we are lucky, we see ourselves. If we watch and listen, we'll see in others the essence of our own humanity.