

**Caring Cultures:
How Congregations Respond to the Sick**

Susan J Dunlap.
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In *Caring Cultures: How Congregations Respond to the Sick*, Susan Dunlap breaks new ground by moving away from solely individualistic models of care by focusing on how three congregations from vastly different socio-economic, ethnic, cultural, ecclesial, and theological backgrounds understand sickness and respond to it. Dunlap clearly states the book's objective this way: "This book is devoted to describing congregations as repositories of meanings from which individuals consciously or unconsciously gather illness meanings or interpretations" (13). Her thesis is:

Congregations are repositories of wisdom about how suffering can be overcome. They are bearers of wisdom from sacred texts, founding forebears, and living saints who not only speak words of wisdom but also embody them in their lives. ... It is my firm conviction that congregations have much wisdom to share with one another. As congregations from different traditions enter into the places of suffering together, and hear stories, beliefs, and accounts of responding to suffering, the wisdom residing in each congregation will be enhanced (3).

Dunlap wants congregations of various traditions to share their beliefs and practices of caring for the sick with other congregations in a spirit of mutual

learning, one from the other. With this in mind, Dunlap studied the distinctive care practices of three congregations in her home southern city of Durham, North Carolina by employing extensive historical research, ethnographic methods of participant observations and directed interviews, focus groups, the collection of artifacts, and practical-theological reflection in order to offer “thick descriptions” which she openly admits are colored by her own theological background (Presbyterian; M.Div. and Ph.D. from Princeton Theological Seminary), and social location. The three pseudonymed congregations are: Healing Waters Church (A small Africa-American congregation in the Holiness Tradition); First Downtown Church (a 650 member chiefly anglo-European Presbyterian church where Dunlap is a member); and Our Lady of Durham (a Roman Catholic Hispanic (chiefly Mexican) congregation which is part of a larger Catholic parish).

She devotes two chapters to each of the three congregations. The first covers the larger history and theological/ecclesial tradition in which each church is situated. The second describes and evaluates each church’s particular beliefs and practices of care for the sick. The churches were chosen to depict the three predominant ethnic groups in Durham: African-American, White, and Latino. They also represent three diverse ecclesial traditions: “Spirit centered, Word centered, and Eucharist centered” (13). Dunlap notes that they were not chosen as an “ideal type” or representative example (e.g., a “typical black church”), or because they employ “best practices” of caring for the sick – but were chosen

chiefly because of personal contacts she had in each congregation. Dunlap aptly notes that although each congregation was formed in the same city, Durham's history of segregation, racism, and class distinction – means that the congregations were formed in very different "historical streams" and "cultural soups" (13).

In these six chapters Dunlap does a fine job of offering "thick," critical, yet fond descriptions of each congregation's communal and spiritual wisdom. She does this with great candor, integrity, and transparency as she notes both her resonance and visceral uneasiness in encountering traditions quite different from her own. Dunlap does not just let us see and hear what she sees and hears – she invites us into her "gut" which sometimes percolates with discomfort. The book is nicely written and her poetic descriptions help place us in the contexts she so accurately describes – to the point where we can not only imagine the scene in our mind's eye – but her descriptive writing allows us to hear the tambourines, the dancing on hardwood floors, and smell the anointing oil.

Her method employs "various perspectives on bracketing and empathy" through what she calls "three moments" which are: 1) "empathic description," 2) "appreciative interpretation," and 3) "cautionary warning" (49). Dunlap does a good job of articulating the dangers and pitfalls of any researcher entering others' ecclesial settings and hoping for any semblance of "value-neutral" objectivity. She names well her ecclesial, theological, and social biases as well as her social location which understandably colors her research spectacles. In spite

of all the inherent risks and possibilities of being “inaccurate,” and writes:

“Nevertheless, I have engaged in this study with the hope that my efforts are in service of a good that can only be accomplished when people of good will begin to meet, talk, and connect on holy ground” (50).

Herein, however, lies one of the complicated challenges of any study that attempts to meld and integrate theological reflection and ethnographic research – the potential of blurred boundaries, competing agendas, and methodologies that counter or confound each other. On the one hand, most ethnographers admit that there can be no purely “objective” ethnographic study; yet Dunlap’s research does not set out simply to study three congregations and merely report what she discovers – she seeks to study particular beliefs and practices around caring for the sick and then assess and interpret them from her “white, Presbyterian feminist, woman’s” perspective (48). In fact, Dunlap states that she may have an investigative advantage as a Christian researcher over a “scientific researcher” because she shares “the same sacred texts, core statements of belief, and institutional expressions of these texts and beliefs” which give her better entry into understanding these Christian communities (50). Still, Dunlap agrees that even the most sensitive and personally aware ethnographic researcher entering others’ ecclesial contexts and assessing and interpreting them with a view towards offering critical theological reflection or “cautionary warnings” is always tricky business. At the end of the day, however, Dunlap pulls it off as best as anyone could be expected to do.

After offering her observations, reflections, and critical assessments of each congregation's distinctive beliefs and practices of caring for the sick, she concludes her book with this chapter: *A Practical Theology for the Care of the Sick*. Here she engages the work of Ed Farley and others to reflect theologically on what it means to be sick and to offer an ideal of a "church that evokes courage" when ministering to the ill (203). In her ideal paradigm, she prophetically articulates the following eight qualities or features that constitute a "courageous church." For Dunlap, a courageous church is where: 1) finitude is regularly and mutually acknowledged; 2) the human body is recognized as a realm for God's redeeming power; 3) it is known that God can meditate God's presence in any part of finite creation; 4) grace abounds so that members are free to acknowledge their sin; 5) worship and personal piety involve fullness of the human body; 6) where "social sin" (i.e., poverty, racism, social location, etc.) is recognized as contributing to the many origins of illness; 7) solidarity with the sick beyond the church is embraced and emphasized; and 8) where difference is openly embraced and accepted (203-220).

Relevance to Doctor of Ministry education: Since Doctor of Ministry programs are getting more interested in ethnographic theory and methods to aid us in crafting good final ministry projects, and since our 2011 conference theme was: "Ethnography as a Pastoral Practice," Dunlap's book is a timely contribution to our field. Doctor of Ministry instructors and students alike can learn much from Dunlap's ethnographic curiosity and congregational research methods.

Observing and assessing how vastly different congregations within the same city understand and practice pastoral care to the sick offers a myriad of possibilities for her work to be expanded or generalized into creating Doctor of Ministry final projects that engage local churches in learning “best practices” from each other in many areas of ministry.

Employing Dunlap’s work, I can envision final doctoral ministry projects being crafted on her basic template and then expanded or tweaked to fit the particular concern being investigated. For example, I can envision a ministry project that engages and studies diverse congregations on such topics as evangelism, mission, stewardship, leadership, lay involvement and training, discipleship, worship, youth ministry, conflict management, grief, divorce, addiction, etc. in order to learn “best practices” from each other.

I highly recommend this book both to Doctor of Ministry students who wish to learn more about how to craft final ministry projects by employing ethnographic and practical theological methods— but also to those who teach and supervise them. This is a deep and thoughtful book that has much to teach us about how to engage and learn from ecclesial traditions different from our own, and offers great insights on the wisdom embedded in diverse models of congregational care.