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Past, Present and Future Trends in Missionary Care
Dorris Schulz and Dale Hawley

Introduction

Missionaries go to the field to fulfill three basic commands: the Great Commission (Matt 28.19), that all may have the opportunity to hear, believe and obey the good news of Christ; and the two “greatest commandments”—to love God above all else and to love our neighbors as ourselves (Mark 12.30–31). The apostle Paul, who spent much of his life fulfilling these commandments in cross-cultural missions, described himself as “hard pressed on every side, but not crushed; perplexed, but not in despair; persecuted, but not abandoned; struck down, but not destroyed” (2 Cor 4.16). He did not lose heart in spite of the opposition he faced and the burden of the churches he carried. If anyone needed care it was Paul. God, of course, is the source of all care. Paul brought this to our attention when he described God as “the Father of all compassion and the God of all comfort” (2 Cor 1.3). He comes alongside us so that we may come alongside others.

But Paul was also blessed with a number of people who cared for him as he dealt with the stresses of ministry. After Lydia’s conversion, she provided housing and care for Paul and his companions (Acts 6.15); the church in Philippi sent provisions to him in Thessalonica (Phil 4.15) and later sent Epaphroditus to Rome to care for his needs (Phil 2.25–30). Stephanus, who devoted himself to the care of the saints in Corinth, and his companions, Achaichus and Fortunatus, travelled several hundred miles to Ephesus to refresh Paul’s spirit (2 Cor 16.17). When Paul was imprisoned in Rome, Onesiphorus sought Paul out and refreshed his spirit as well (2 Tim 1.16). In the depths of depression God, who comforts the downcast, comforted Paul by the coming of Titus (2 Cor 7.5–7). This was missionary care. Paul requests that all such people be recognized and honored (Phil 2.29; 2 Cor 16.18).

Missionary Care Defined

Missionary care involves spiritual, emotional, relational and physical nurture provided to missionaries by those who love and support them. Inherently, it values missionaries and their families and treats them with love, care and respect.¹ In Churches of Christ, missionary care is largely provided by stewarding and supporting churches that send missionaries to the field. By caring for their missionaries, churches help them adjust to the rigors of cross-cultural work, which enables them to fulfill their objectives of reaching the lost for Jesus Christ.

This is a critical task. While churches work hard in recruiting missionaries and getting them to the field, less attention is often given to their needs while on the field—the very time when they need the most support. Ministering in a cross-cultural context is a significant challenge. Larry and Lois Dodd summarize the stressors missionaries face and their need for support:

¹In this paper, “missionaries” refers to people who work cross-culturally with people overseas.
Missionary work is inherently stressful. Ministry itself is a hazardous occupation! It exposes one
to the deepest needs of humanity, many of which can never really be met. The values inherent in
ministry are for self giving and self sacrifice. Ministry calls for change—change in self, change in
others and change in society. Ministry is never finished. There is always more to do. It is often
difficult, if not impossible, to measure a ministry’s success. Feelings of failure and opportunities for
burnout among those who are ministers are inherent in this work. While stress can be a source of
growth, and although many ministers withstand the rigors of their work without adverse side
effects, many others do not.

Choosing to minister across cultures compounds the hazards almost geometrically. In addition to
the hazards of ministry itself, going cross-cultural means adding layer upon layer of complexity.
One steps out of one’s own context, exchanging it for a whole new set of struggles and challenges.
Change of culture brings with it changes of language, value systems, climate, geography, social
systems, role definitions and a host of other life elements. Usually a life of ministry across cultures
places one in a position to experience potential high levels of stress, as almost everything in one’s
self and one’s life must adapt to new realities.²

The picture painted by the Dodds is a daunting one. Fortunately, at its best, missionary care is a
shared responsibility. O’Donnell³ suggests a five-tier model of missionary care. At the center of this
model is Master Care, the daily renewal missionaries find from God as they walk with him. A second
layer involves self-care provided by the missionary him- or herself, as well as mutual care from their
immediate community of believers (including team members). A third tier of support comes those who
have sent them, the stewarding churches who are partnered in their cross-cultural mission. The fourth
and fifth layers of this model involve specialists in missionary care and the organizations that support
them who may be involved on a periodic basis as needed. Thus, care for missionaries potentially comes
from a lot of sources. Quite often, however, there are missing links in this model that leave missionaries
feeling as if they are dangling alone.

Abbreviated History of Missionary Care

Though the intentional ministry of missionary care is a relatively new concept among churches of
Christ, many American and European mission agencies began to be concerned for missionaries and
their families over thirty years ago. I (Dorris) attended the first International Conference on
Missionary Kids in Manila in 1984 and a follow-up conference in Michigan the next year. Other
conferences formed that benefitted the growing field of missionary care around this same time.⁴
However, there were interests and concerns even earlier by some. A master’s thesis was written
about the personality development of missionary children in 1936.⁵ Joseph Stringham published two
articles on the emotional health of missionaries for Evangelical Missions in 1970.⁶ The first book
addressing missionary needs was written in 1974.⁷ The first person in Churches of Christ to write

²Larry Dodd and Lois Dodd, “Stressed from Core to Cosmos: Needs and Issues Arising from Cross-Cultural Ministry,” from
Collected Papers On The Care of Missionaries (Heartstream Resources: 2002), 1.

222.

⁴Pastors to Missionaries Conference (www.barnabas.org) began in 1988; Mental Health and Missions Conference (www.mti.org)
began in 1980.

⁵A. E. Parker, “An Analysis of the Factors in the Personality Development of Children of Missionaries” (master’s thesis,
University of Chicago, 1936).


⁷Marjorie Collins, Who Cares About the Missionary? (Chicago, IL: Moody), 1974
about missionary needs was Clyde Austin, who started to focus on concerns related to reentry in the early 1980s.\(^8\) In the past three decades there has been a growing body of literature concentrated on a variety of areas of missionary care from recruitment to reentry.\(^9\)

### Status of Missionary Care

A primary goal of missionary care is helping missionaries stay encouraged and engaged as they minister in other parts of the world. According to George Murray, “Retention is far more important than recruiting.”\(^10\) Attrition is a genuine problem in both the business and mission worlds. “Approximately 30% of managers from the US return home early from an overseas assignment.”\(^11\) What is the financial cost to business? For a single, middle-level professional, the figure is close to $150,000; for a senior professional with a family, it is $350,000 or more. But there are different price tags also. The resulting human pain of a premature return cannot be calculated in dollars. Unfortunately, some returned missionaries and their families have become the walking wounded among us. No one has calculated the financial cost of early attrition to churches and to missionaries and their families, but bad experiences have caused some churches to simply withdraw from foreign missions and to concentrate on domestic missions instead. An extensive study of attrition among career missionaries conducted by World Missionary Alliance found that the most important factors in preventing attrition were a clear call to mission, a supportive family, a wholesome spirituality, good cultural adjustment, good relationships, pastoral care, which included clear communication, and financial provision.\(^12\) A second part of the study found that retention is highly correlated with candidate selection and pre-field training.\(^13\) These studies confirmed that there is a strong correlation between missionary care and retention, especially preventative care.\(^14\)

### Need for Missionary Care Policy

Stewarding churches will help themselves and their missionaries when they adopt a proactive approach to missionary care. This includes having a written missionary care policy that accepts the overall responsibility for helping missionaries and their families and teams deal with the rigors of cross-cultural ministry. The church can do this by educating their missionaries about the challenges of the work on the field and specific risks involved, as well as offering strategies for dealing with both normative and non-normative stresses inherent in mission life.

Clyde Austin\(^15\) has suggested a model for the life cycle of missionaries that begins with selection and training, continues through years of active service on the field, and concludes with reentry into the home culture. The experiences and needs of missionaries differ a great deal depending on where they are in this cycle, but each stage offers opportunities for care.

Good preventative care starts with stewarding churches systematically screening and assessing the suitability of cross-cultural workers as part of the process of employment. This means that the sponsoring congregation has the responsibility to understand the minimum physical, spiritual, relational and emotional health requirements for mission assignments. Prospective cross-cultural workers are screened with respect to the factors possibly

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\(^10\)George Murrany, Mental Health and Missions Conference (Indianola, Indiana, 2006).


\(^14\)O’Donnell, *Global Member Care*, 41–44.

\(^15\)Personal communication.
affecting the likelihood of adverse response to the risks and stresses of mission work. Assessment in each of the areas—physical, spiritual, relational, emotional—should be carried out by responsible, appropriately prepared individuals with expertise in each area. Missionaries seeking sponsorship are to be held responsible for revealing information that may be relevant to assessing the risks involved in an assignment.

Preventative missionary care also means that the church will send spiritually mature, emotionally stable, prepared and well-trained missionaries to the field. They will maintain an interest in the missionaries on the field and monitor their work. Stewarding churches also need to be aware of the dynamics of teams of which their missionaries may be a part. In some cases it may be in everybody’s best interest that a missionary leave the field. Taylor suggests, “some missionaries who stay should leave. Their presence sometimes can compound the tragedy, in that their staying makes some of the better people leave. This requires courageous, proactive leadership from the responsible church.”16 Stewarding churches need to be cognizant of their missionary family’s living conditions in order to provide appropriate, ongoing care. They need to seek ways to nurture their missionaries spiritually and to ensure their families are well taken care of.

It is often some sort of crisis, problem or failure that causes churches to think more seriously about the need for missionary care. Opportunities for crisis are magnified for individuals and families working far from their home base, and most churches with experience in supporting missionaries have seen their share of crises. So that stewarding churches are not caught unawares at the advent of a crisis, a written missionary care policy will include strategies in place to support their missionaries during traumatic events and other unusual and unexpected sources of severe stress.

The church will also provide both practical and emotional support of missionaries during home assignments (also known as furloughs) and upon final reentry. This includes understanding the missionaries’ pain of saying good-bye to people they have worked with closely, the concrete tasks of relocation, and the practical, interpersonal and cultural difficulties in readjusting to life “back home.” Stewarding churches will see that returned missionaries are not forgotten as they reenter their home culture. They will help them receive the spiritual and emotional care they need if they have been adversely affected by exposure to stress and trauma through their work, a process that can take months or even years.

In short, sending missionaries implies a responsibility to support them, not only financially but also spiritually, emotionally and relationally. Written missionary care policies can help both missionaries and the churches that send them be successful in this goal.

**Future Trends**

We are living in a changing world; as it changes, so does the face of missions and the way in which we practice missionary care. George Murray,17 in an address to missionary care specialists, identifies the following points of change in the United States and the Western world.

- The population has moved from largely rural to urban.
- It is estimated that by 2050 the majority population in the United States will consist of minorities.
- Our cities are becoming increasingly internationalized. (A recent study posted by *The New York Times* reveals that as many as eight hundred languages are spoken within New York City, making it the most linguistically diverse city in the world.18)
- The number of youth in the Western world is on the rise.
- Rapid global travel and communication advances are available to the majority of people in the West and are shrinking our world.
- There is an increasing disparity between rich and poor, with a decreasing middle class.

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17Murray, Mental Health and Missions Conference.
Murray goes on to note that these sorts of changes have a significant impact on missionaries, both those who are currently serving in the field and those who are preparing to go. Non-western nations increasingly see the United States as an imperialistic superpower which calls itself a Christian nation. In some parts of the world, Christianity is synonymous with materialism and immorality. This contributes to an escalating polarization of religions worldwide and an increased concern about physical danger. Moreover, influences from Western cultural changes impact the paradigms missionaries carry with them into the field. Emerging missionaries who hold a postmodern worldview frequently want to do missions by knocking down the doors of injustice. Female missionaries who have grown up in a culture that is striving for equality of the sexes may experience dissonance when working in non-western countries where the cultural norm is for women to be subservient.

In addition to impacting missionaries, these changes have clear implications for the churches that send and support them. Murray offers the following recommendations as a best practice guide for sending and supporting missionaries:

- Recognize the local church as the biblical missionary sending agency.
- Create better partnerships between local churches and mission ministries, who can come alongside in a consulting role.
- Have the courage to say “NO” or “WAIT” to missionary candidates. Be sure missionaries have the personal and spiritual maturity and family stability to weather the myriad challenges they will likely face.
- Send those with proven ministry experience in their home culture.
- Insist on language proficiency and cultural adaptation.
- Send ministry teams.
- Give missionaries a Sabbath rest once they get on field.
- Provide missionaries with adequate training, direction, resources, authority, accountability and evaluation.
- Insist that missionaries know how to pray; emphasize spiritual formation. Missionaries (and, for that matter, all Christians) should experience the Spirit-filled life; Christian living and service should be seen as normal.19

In short, changes in the world we are seeking to serve have expanded the complexity of missions and, in turn, have intensified the responsibility of providing care for missionaries. While not an exhaustive list, ideas such as these can help missionaries and the churches that support them adapt and thrive as they navigate changes in the world around them.

**Rise of the Global South**

With the rise of the church in the Global South, American churches must turn from being the master of the mission enterprise to the servant of Global South stewarding churches. Mutuality and partnership are essential priorities between the Global North and the Global South. We must think of ways to help churches reach their own people and those in neighboring countries. Churches that practice missionary care well need to ask the new stewarding churches in the Global South how they can help.

Dr. K. Rajendran, the associate director of the Missions Commission of the World Evangelical Alliance (WEA) has wide leadership experiences in different capacities with Operation Mobilisation and the India Mission Association. Concerning the need for missionary care among Indian missionaries, he states:

Missionary recruitment is decreasing. Missionary children are withdrawing as a reaction. Young people and parents do not want to come into missions. The church has abdicated its pastoral care responsibilities with the dichotomy of ‘goers and senders’ syndrome.

If the missionaries are not looked after, missionary endeavours in India will diminish. Is it a theological or missiological problem? May the Lord help us to address the total need of India by strengthening the followers of Christ. Missionary welfare is only one issue of a bigger missionary

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19Murray, Mental Health and Missions Conference.
package or challenge. Here is a need for simultaneous change in total missionary approach to change the nation to respect and follow Christ.\textsuperscript{20}

God is at work in the world. A new generation is preparing itself for mission. Global South churches are sending their members in the pews to fulfill the Great Commission in their own and in other countries. Churches need to be intentional and proactive in their care; to shift from crisis care to preventative care. Wellness is always preferred to illness. Care should be provided for entire teams and not just individual missionaries. If one member of the body is hurting, then the whole body suffers. Multinational teams will become the norm. Churches will need to learn how to minister cross-culturally to these teams. Though ministry skills are important, missionary care in the future will focus more on character and spiritual formation.

\textbf{Conclusion}

Global North and Global South churches that practice appropriate care allow their missionaries to develop professional and life skills, character and competence, so that every nation, every tribe, every people, every language group will bow their knees to Jesus. While the world around us is changing and the need to support missionaries in response to the complexity of those changes increases, the mission itself does not change. It is based on love: fulfill the Great Commission by loving God and loving your neighbor.

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