

Pastor's Column

A Foundation for the Diaconal Role in Sickness

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Are we seeing a rise in illness and disease? I cannot document or support an answer to this question, but I am reminded of these words of God in Deut. 28:21-22, "The Lord will plague you with diseases until he has destroyed you from the land you are entering to possess. The Lord will strike you with wasting disease, with fever and inflammation, with scorching heat, and drought, with blight and mildew, which will plague you until you perish." These words were spoken to Israel. Yet, all nations are under God's law. The inhabitants of disobedient nations can be stricken with physical illness. Scripture provides many examples including the Egyptian plagues and the infliction of "serious diseases on Pharaoh and his household because of Abram's wife Sarai." (Gen. 12:17).

We live in a land at war with God's word. Abortion is legal. Homosexual "rights" are promoted. Immoral sex has been made "safe" by the use of condoms and/or other measures. As Christians we realize that immoral sex will never be safe because there is no "safe" sin. All sins are an abomination in God's eyes. It would not surprise me to see an increase in viruses and all sorts of disease in our own day.

Whether or not my speculation is true, there is no speculation in saying that sickness provides manifold opportunities to minister within the local church.

Perhaps your church is located near a regional medical center. A real need exists to minister to family members of patients who have traveled many miles to reach the hospital. Ronald McDonald houses are a help. However, a meal in a church member's home or a short period of lodging away from the hospital scene can be a

great ministry to weary families in a city that is miles from their home. Church officers in outlying areas would do well to establish communication with officers of churches in metropolitan areas to see if such arrangements are a possibility. This arrangement would allow ground work to be laid prior to an actual need arising. Physicians and other medical personnel, who see this need daily, can fill a vital role by encouraging their churches to pursue this ministry.

Deacons can draw up a list of volunteers within the congregation who are willing to donate blood needed for upcoming surgeries. Such blood would have to be typed as well as other medical precautions taken. An up-to-date list could be kept by the chairman of the deacons and a duplicate could be kept by the pastor or other responsible party within the church.

Many churches have members with long-term illnesses. Often, they are cared for by family members at home. Such care, when possible, ought to be commended and promoted by others within the church. Extended illness can become taxing on a family simply because it does not end after a week or a month. The illness of a close family member adds to the pain. These trials open up a multitude of avenues of ministry. Meals can be taken in to the family from time to time. This action frees up some moments that would have been spent on meal preparation, as well as provides a visible expression of love and concern. Christians can volunteer to spend an evening with the afflicted individual allowing family members to get away from the home for a few hours. Severe illness in a hospital also provides the opportunity for church members to take turns sitting with the sick for three to four hour shifts. This service is especially

important in cases where there are only one or two members of a family that can sit with their sick or dying loved one.

You will note that these ministries cost little financially. However, no monetary value can be placed on their worth to the afflicted or to his/her family.

In a future article we will cover more avenues of ministry.