



A HISTORY OF CHARITY AND THE CHURCH

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A History of Charity and the Church:
Its Historical and Current Connections with Social Services

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Abstract

Many of the original foundations of benevolence and charity have their beginnings in religious institutions. Social work collaboration with faith-based establishments, such as churches, has great potential to optimize internal functions and service to the community. . The church provides a “unique context” for the practice of social work (Garland, 1992, p. 12). This article reviews the historical roots of charity in the church and describes the process of social services and the local church congregation collaboration as well as their individual involvement in caring for their communities. It also exemplifies the benefits of church collaboration in more effectively serving communities and those in need. A number of case examples of church collaboration are shared

A History of Charity

Introduction

“Religious organizations in the western world historically have been major sources of both funds and services for social welfare” (Westhues, 1971, p. 60). Many of the original foundations of benevolence and charity have their beginnings in religious institutions. “The desire to help others and, therefore the beginning of social welfare appears to have developed as a part of religion” (Langer, 2003, p. 137). Religious values and traditions have greatly affected the development of American social welfare (Cascio, 2003). This “concern for others is motivated by a spirit that has a religious character and not merely one designed to preserve a particular social order...” (Brodman, 2009, p. 1). Religious institutions like the church have “continued to be a prominent context for social work practice...” (Garland, 1992, p. 1). Holt (1922) maintained that the “early church grew out of the necessity of greater efficiency in ministry to the physical needs of” others (p. 43). “The Church continues to be a significant and influential institution -for good or for ill- in this nation’s formal social services, and to a greater extent, in the informal social support and services available to persons and their families” (Garland, 1992, p. 4). The following is designed to promote a greater “understanding of the historical religious roots of social welfare and in so doing remind social workers of the potential richness and shortcomings of religious attempts to help in earlier times...(Brandsen & Vliem, 2008, p.59).

Charity

“The roots of social welfare go deep into the soil of the Judeo-Christian tradition” (Karger & Stoesz, 2008, p. 39). From the beginnings of the biblical narrative, we find the concept of loving and caring for others. “The Old Testament law specified how the community should provide care and to whom” (Poe, 2008, 106). Poe (2008) notes that the Law addressed hospitality to strangers and foreigners (Exodus 22:21, Hebrews 13:2), allowing the poor to glean the field to obtain grain (Leviticus 19:9-10, Ruth), and the provision of care for widows and orphans (Deuteronomy 14:28-29, 26:12). The New Testament “added a new and more challenging idea of the care of the poor” (Poe, 2008, p. 107). The call

was to model the life of Christ in their conduct and attitude toward those with fewer resources. “One cares about others, especially the poor, not because it brings benefit but because that person in need is made in the image of God” (Poe, 2008, p. 107).

The Impact of the Church

“Almost all modern social services can be traced back to roots in religious organizations” (Garland, 1992, p. 1). The early Christians were noted for their charity to each other. (Acts 4:34) The early church in 4th century Cappadocia was noted for caring for the poor via feeding programs, and obtained “money, property and other goods from the rich to distribute to the poor” (Brandsen & Vliem, 2008, p.62). The Cappadocian Father (Basil, Nyssa, Nazianzus) “called on their audiences to imitate God, the author of philanthropic deeds, in their beneficence toward others” (Brandsen & Vliem, 2008, p.62). While “medieval religious charity was highly fragmented and inchoate”, it was the religious institutions that provide some level of coherence and connection (Brodman, 2009, p. 2). The writings of the day (Innocent III, Thomas Aquinas) focused on the duty and the right to be of assistance to the poor.

The beginnings of charity in the medieval church “go all the way back to the patristic era, and its practices can be detected during the early middle ages, it blossomed into an important force within western Christianity in the twelfth century.” (Brodman, 2009, p. 43). Monasteries in the middle Ages provided employment (Garland, 1992). There was also the development of shelters, almshouses, hospices, and leprosaria during this period (Brodman, 2009). However, “religious charity was not just a set of institutions: it encompassed an ideology that describes a distinctive version of the Christian life in the middle ages” (Brodman, 2009, p. 9). It was also during this period that some responsibility for the poor shift to the government. In 1349, the Statutes of Labourers was the first law enacted in England that gave the government a role in engaging the issues of the poor, which was followed by the development of the Elizabethan Poor Laws in 1601 (Karger & Stoesz, 2008; Poe, 2008). “A series of Poor Laws followed

the Statute of Labourers in 1349 to the mid-1800s. The shift had begun from the church responsibility for the poor to government responsibility”(Poe, 2008, p. 109).

The great revival movements of the 19th century lead to a “dynamic Christian faith that would change society as a whole” (Poe, 2008, p. 111). Many social activities developed as a result of this revival movement. This included the establishment of orphanages by George Mueller, and the development of the Salvation Army, YMCA, YWCA, and Volunteers of America (Poe, 2008). Phoebe Palmer, a holiness evangelist, founded the Five Points Mission in New York City in 1850 (Garland, 1992). The Methodist Settlement Movement in the mid-19th century “staffed outreach programs to the most marginalized inhabitants of the inner cities” (Kreutziger, 2008, p. 81). Around the turn of the 20th century the Baptist Training School Settlement (Southern Baptists) in Louisville, Kentucky, and the Madonna Center Settlement House (Catholic) in Chicago provided services and aid to the immigrant and poor communities of the respective cities (Scales & Kelly, 2012). Karger and Stoesz (2008) maintain that three major influences (the enhancement of private religious organizations, development of female leadership, formation of African clergy) came out of this period that would affect social welfare in the future.

However, the development of the social gospel movement in late 19th and early 20th centuries would have great impact on the social welfare practices that would follow. “This more liberal theology called into question long-standing ‘fundamentals’ of the faith” (Poe, 2008, p. 111). The diverse theological emphases that emerged resulted in the liberal elements being more focused on social change and increased government involvement, while the more conservative elements emphasizes evangelism and church growth. “By 1920, evangelical Protestants had discontinued most social relief work, at least in part, as a means of distinguishing from the more public liberal theology of the mainline Protestants” (Karger & Stoesz, 2008, p. 44). The result was that the “two groups disassociated from each other in their work of service in the world” (Poe, 2008, p.111). A significant portion of the evangelical church had little involvement in the social welfare practices of their day.

The Increasing Role of the Government

In the 1930's, the development of the Social Security Act and its corresponding programs enhanced the role of the government in responding to the needs of the unemployed and needy in America. "While faith groups continued to provide much relief, the ultimate authority in American society for developing social welfare programming was given to the government" (Poe, 2008, p. 113). After the 1940s, public spaces in society became more secular in nature. "For example, public schools and public school teachers were prohibited from promoting religion in 1948" (Karger & Stoesz, 2008, p. 50). In the 1960s, prayer and Bible reading were removed and the teaching of evolution was enhanced in the public schools. Tax support for parochial schools was highly curtailed in the 1970s (Kaeger & Stoesz, 2008).

Most social welfare policy and programs have been products of state and federal governments up to our present day. Some recognition and cooperation with faith-based organizations (FBOs) did develop in the late 1990s under the Clinton administration. "The Charitable Choice provisions of the PRWORA of 1996 had opened the doors to partnerships between government and faith communities that had been essentially closed since the New Deal of the 1930s" (Poe, 2008, p. 115). In 2001, the Bush administration developed the White House Office of Faith-Based and Community Initiatives (OFBCI). "The assignment for this office was to strengthen the collaboration of government with faith-based organizations providing social services" (p. 115). There is a current re-awakening of interest in issues of social policy, especially regarding the issues of social justice and human trafficking.

The examples of William Wilberforce and Charles Finney in confronting slavery in England in the 19th century, Dorothea Dix in advocating for the care of the mentally ill and the development of rescue missions in the last century, point to a history of engagement and involvement of faith-based communities in fostering social action in America. The development of Charitable Choice and OFBCI may provide current opportunities for FBOs to again be more involved in social welfare provision and policy. This historical legacy and the re-emerging interest by the church in social issues such as social justice and

human trafficking provides an ongoing opportunity for social work and the church to work toward common ends and mission.

Social Service Collaboration

“Despite the secular evolution of the welfare state, religious congregations have continuously provided social services throughout our history” (Langer, 2003, p. 144). This includes areas of clinical work such as counseling, consulting with cell groups, marriage and pre-marriage sessions, and other related educational experiences (Edwards, 2003), consultation to churches with large congregations, supervision of community ministries, and assistance in implementing social action (Watkins, 1992; Ferguson, 1992; Bailey, 1992; Spessant, 1992). Wolfer and Sherr (2003) categorize congregational outreach into six areas: immediate needs (food, shelter, clothing), educational and health needs (tutoring, after school programs), community development activities (neighbor associations, AA, civic groups), evangelistic outreach, humanitarian efforts to deprived areas or countries, and finally, public advocacy.

Plante (2008) maintains that the church brings valuable input to this collaboration, such as spiritual tools and traditions (e.g., meditation), processes of forgiveness, acceptance of others, and a calling to volunteerism that can augment professional practice. “Overall, the religious and spiritual wisdom tools, at their very best, offer many tools to enhance psychological, physical, interpersonal and community functioning” (Plante, 2008, p. 444). Furthermore, the church provides a relationship with mental health gatekeepers, potential resources for clients, and connection to an established community of support (McMinn, Vogel, & Heyne, 2010).

Psychology Collaboration

Psychologists have functioned collaboratively with clergy in multiple settings including the armed forces and in churches (Spriggs & Slotter, 2005, Budd & Newton, 2005). The predominant model discussed and possibly utilized in the psychology literature is the notion of church-psychology collaboration. Much of the research appears to be focused on the concept of collaboration “with” the

church rather than serving “in” the church (Edwards, 2003; Bland, 2003; Plante, 1999; Edwards, Lim, McMinn & Dominquez, 1999). McMinn, Chaddock, Edwards, Lim, & Campbell (1998) define collaboration as “both parties working together each offering important expertise to solve a problem or help each other” (p. 565). The assumption of this approach is the notion of mutual respect, a value dearly held by the ethics of the profession, and the mission of the church. It is hoped that this collaboration “produces an outcome somewhat different, unique and richer than either of the contributing disciplines left alone” (Bland, 2003, p. 299). Plante (1999) has formulated several principles of collaboration which he feels need to be considered in fostering a successful interface with the church. They are: 1. a good understanding of the church’s religious system, 2. a knowledge of the unique language of that group, 3. the development of a network of key individuals within the system, 4. an expansion of the ways that professionals can effectively serve that specific group, and 5. the provision and application of the highest standards of professionalism and ethics. The ability to develop new ways of working with various religious groups or churches, and the structuring of a mutually beneficial situation can go a long way to fostering collaboration. (Benes, Walsh, McMinn, Dominquiz, & Aikens, 2000; McMinn, Chaddock, Edwards, Lim & Campbell, 1998, Plante, 2005). Psychologists can provide multiple services such as “counseling, program development and evaluation, needs assessment, training, and education” (Spriggs & Slotter, 2005, p. 65). Tan (2005) who is pastor and psychologist, states that “Psychology also helps us in the church to view human beings from a more comprehensive perspective: physically, emotionally, interpersonally and spiritually” (p .51).

Church Social Work

Holt (1922) in his classic discussion of social work in the churches reminds us that “religious experience cannot be held in a compartment by itself” (p. 5). The working of the church cannot but spill over into the needs and people around it. “A vigorous Christianity has always projected its great ideas about God, salvation, and human duty into the ordinary relationships of human living” (p. 5). So while

being involved in social service may be a natural outflow for the church, we need to remember that the culture and mission are unique.

Garland (1992) defines church social work as bringing “the social work’s profession’s knowledge, values, and skills to the church as a resource” (p.5). The professional literature for church social work tends to be limited to primarily texts and edited books, with few research-based journal articles. Garland (1992) states that “church social workers have not spilled much ink in the writing of their practice” (p. 10). She attributes this to little recognition of church social work as a unique specialization, and because of the limited time they have to reflect, research or write due to the high demands of their vocation.

Consultation is thought to be useful to the churches, “especially those churches with social ministries or those who want to develop such ministries for which the clergy cannot provide the needed leadership” (Watkins, 1992, p. 20). Social workers can provide assistance with organizational development and program evaluation, as well as, administrative oversight. Consultants, as outsiders, can sometime ask the hard questions or pose alternative solutions (Watkins, 1992). However, the social worker serving within a congregation can sometimes be more effective in reaching difficult groups, and have a practice that is “broader than practice in many other settings, including preventive, rehabilitative, and proactive...(Ferguson, 1992, p. 38). Social workers can also serve in developing faith-based community ministries.

Bailey (1992) maintains that community ministries are increasing due to the limiting of federal monies causing a greater burden on local communities, and the inability of individual congregations to meet the growing demands of a community. While this creates the possibility of greater flexibility and awareness in meeting local needs, these ministries have limitations as well. “There are limitations to what community ministry can do. Because of budgetary needs, it is tempting to seek every possible grant, regardless of community need or agency mission” (Bailey, 1992, p. 63). Finally, social action is a way

that the social worker can assist and collaborate with the church. “Social change in America has been spurred on by organized religion” (Spessant, 1992, p. 106).

In summary, psychological literature tends to be primarily research-based journal articles with some edited texts. The focus of psychological literature tends to be on collaboration, while social work literature focuses on consultation, practicing within the church, the supervision of church-based community ministries and social action.

Case Examples

While it is important to note the historical examples of the church’s involvement in the provision of social services to those in need. It is also significant to note the current manifestations of FBOs and their contemporary applications to the present society. A number of examples of church collaboration exist and can be found both in America and other countries. Galloway (2003) highlights three programs developed by Christ Community Health Service to serve the needs of inner city Memphis, Tennessee. Church Collaboration and Counseling Service was designed to bring counseling into the church, while Memphis Healthy Churches utilize local congregation as vehicles for health care education. Finally, Shelby Alliance of Faith-based Efforts (SAFE) attempts to use churches in preventing sexual assaults.

The Lawndale Christian Health Center is an outreach of the Lawndale Community Church located in an underserved community of Chicago. It provides medical, mental health, and other related social work services to people with limited means and options (Serrano, 2003). Through its Lay Minister program, volunteers from the church are equipping via an 11-week course to minister to the emotional and spiritual needs of the patients who utilizes the clinic services. It serves over 40,000 patients annually at five sites, including a dental and optometry clinic, a pharmacy, fitness center, and café. Over 85% of its patients are on Medicaid or uninsured. (Lawndale Christian Health Center, n.d.)

Shepherd Community Center is an outreach of Shepherd Community Church of the Nazarene, which has been serving the near east side of Indianapolis since 1985. It provides adult education for women, tax

preparation courses and a greenhouse. It has after-school program, mentoring and college access assistance for students. High school students can receive help in applying, completing paperwork, and transportation for college visits via “college coach”. The most significant contribution of this FBO is its continuum of care model of operation. Many children are given assistance via Project Jordan through to the college access program discussed above. Project Jordan, the first step in the continuum of care, is design to engage the social and emotional development of children in their first three years of development. This is accomplished via personal visits, group visits, evaluations (Shepherd Community Center, n.d.)

Such collaboration is not limited to the United States. Londrina Bible Seminary in Brazil is working with local churches to provide counseling, clinical supervision, consultation, marital enrichment and ongoing training (Edwards, 2003). On-going training is also provided to the pastoral staff and lay leadership via the use of two professional counseling courses provided by a trained clinical professional. Assistance in community development is also provided by this individual. The Psychology and Christianity Project at the University of Cambridge, England is attempting to develop two initiatives, Church Consultancy and Pastoral Care, to support and strengthen local congregations. Church Consultancy is utilized to assist clergy with communication, teamwork, conflict resolution, and development of goals, while Pastoral Care is designed to enhance pastoral and personal growth via a beta course developed for the “facilitating [of] churches as caring communities” (Savage, 2003, p. 340).

Howell (2005), who is a psychologist at a local university, developed a five-week series of classes designed to educate a local congregation about the dynamics and patterns of depression. The hope was to provide individual awareness regarding this issue, as well as, to assist trainees in better helping those within and without the church who are struggling with its situation. Holland (2010) notes the work of The Riverside Church in New York City whose Social Service Ministry provides assistance to those in need, a food pantry, barber training program clothing distribution, shelter, and HIV testing and support. They also support several social justice ministries, which arrange worship in local prisons, and assist those returning

to the community from prison (Riverside Coming Home) via community mentors, as well as, task forces set up to promote dialogue with the New York City Police.(The Riverside Church, n.d.)

Churches of various denominational, ethnic and racial roots have had a distinctive role in addressing social issues and problems. “For generations, the Black Church has been a literal haven from relentless oppression, abject poverty, and their attendant consequences” (Hardy, 2014, p. 4). Historically, it has functioned as a “de facto social service agency” in order to meet the spiritual, economic and social needs of its members and communities (p. 4) Choi (2003) highlights the importance of the Korean American Church as a social service provider. It has acted as a “surrogate family” for Korean immigrants in their financial, cultural and spiritual transition to this country (Choi, 2003, p. 159). The goals are to assist the new immigrants, provide emotional support, support one’s ethical identity, and provide connection to other communities. As a denomination, “the Roman Catholic church in the United States remains deeply involved in social welfare. More than 25,000 children live in foster homes under the auspices of Catholic agencies and other 20,000 in Catholic orphanages” (Westhues, 1971, p.60). Catholic hospitals treat over 20 million persons annually (Westhues, 1971).

Finally Tirrito’s (2003) Faith-Based Community Action Model provides a template to assist churches and other faith-based organizations in the development of community action programs. Dominquez & McMinn (2003) developed the Multimethod Church Assessment Process (MCAP) as a means to provide assessment and consultation. The process is designed to assist a church to “better understand needs, resources, and ministry successes” (p.333). This is completed in three stages-the generation of specific question, the collection of information, and provision of feedback to the church. This allows the church to focus on those aspects of their organization that are most important to them.

Above is just a brief and small sampling of the involvement of FBOs in collaboration with other professionals, and their involvement in social services in ministering to the needs of their communities.

This brief review does not fully survey the long and deeply committed work of many FBOs who believe their faith calls them to engage the people around them.

Implications for Professional Practice

The church provides a “unique context” for the practice of social work (Garland, 1992, p. 12). It has historically been involved in caring for the poor, underserved and people at risk. However, “despite their considerable contributions, congregations are not social agencies” (Wolfer & Sherr, 2003, p.45). They each have a unique perspective, focus, and process they bring to the task at hand. It is, therefore, essential for the professional to be aware of the values and culture of various congregations. Some maintain that to effectively serve churches, “the first step is determining what services are appealing to clergy” (Lish, Fitzsimmons, McMinn & Root, 2003, p. 297). The development of effective community, shared values, and mutual respect are thought by some to aid in the forming of useful alliances with the church (McMinn, Ammons, McLaughlin et. al., 2005; McMinn, Runner, Fairchild, Lefter & Suntay, 2005).

Many churches, such as the Korean-American Church, have limited professional assistance and overly rely on paraprofessionals to run social services (Choi, 2003). This creates a need and a niche where social workers can often be of aid and guidance in enhancing services and effectiveness. In some diverse churches, certain helping professions have been more successful in fostering connections than other professions. Hardy (2014) in a study of help seeking preferences in Black Churches found that psychologists and pastoral counselors were overly whelming selected for assistance over social workers. This raises questions as to social work’s fostering of connection with diverse churches.

The skills in the area of assessment can be useful in helping congregations to focus and formulate a meaningful direction. “Assessing needs, planning and evaluation are basis principles in effective ministry” (Ferguson, 1992, p. 53). Certain assessment approaches such as the MCAP can provide a focused inquiry based on the needs and desires of a specific congregation (Dominquez & McMinn, 2003). As Galloway (2003) maintains “we have much to offer our community churches...” (p.346). Whether we are effective

in collaborating with churches will, to a degree, depend on our ability as professionals to be open to innovative ideas and approaches beyond our traditional roles and practices. We need to “re-think the possibilities” in order to not just work *in* churches, but work *with* churches (Benes, Walsh, McMinn, Dominquez, and Aikens, 2003, p. 519). If we are “interested in collaborating with clergy (we) would be wise to consider innovative possibilities for a changing world” (Edwards, Lim, McMinn & Dominquez, 1999, p. 550). We need to be willing to think and practice outside of our traditional professional *box*

Conclusion

The church and related FBOs have had a long and valued history in service to its members and the communities that they are called to serve. This natural outflow of the lives and beliefs of these faith communities and organizations has, and continues to have, a great impact upon those in need. While much of the provision of social services comes from governmental agencies, significant, targeted and much needed support continues to be offered via churches and other FBOs. Services provided by the Lawndale Christian Center, the development of the MCAP, and the collaborative efforts at the University of Cambridge illustrate the powerful effects of the church and its ability to cooperate and network with other professions. We have seen the long historical roots of the church in service to others. We still see evidence that it continues to flower and bear fruit in meeting the needs of individuals and communities in the present. It is hoped that continued collaboration will strengthen and provide greater effectiveness and balance to both.

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