

# **The Importance of Pastoral Care to Those with Addictions**

**PM 514 Pastoral Care  
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**Spring 2005**

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May 30, 2005

Through my recent study of Pastoral Care I have been deeply impacted by the importance for the church to provide care to the external community. Through this paper I will briefly examine the need for providing pastoral care in the form of drug and alcohol dependency recovery ministries for those in the outside community.

George G. Hunter utilizes an entire chapter of his book, Radical Outreach, to establish the need for recovery ministries to serve as a prototype for outreach ministries of the church. Through this chapter, he establishes the need for 'regular' people to experience the transformation of someone they view as 'hopeless' as a key experience that brings them to a deeper understanding of God's power (Hunter, 122). Hunter also describes the prevalence of substance abuse disorders to be as high as 25% within the general American population.

Through my interviews for this course and previous experience in ministry, I have rarely heard the body of the church discuss such terrifying statistics other than to scare youth to prevent such behavior in their lives. The mandate given by Jesus in Matthew 25:31-46 clearly outlines the task of the church and does not limit this task simply to those within the congregation.

"For I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I was a stranger and you invited me in, I needed clothes and you clothed me, I was sick and you looked after me, I was in prison and you came to visit me.' "Then the righteous will answer him, 'Lord, when did we see you hungry and feed you, or thirsty and give you something to drink? When did we see you a stranger and invite you in, or needing clothes and clothe you? When did we see you sick or in prison and go to visit you?' "The King will reply, 'I tell you the truth, whatever you did for one of the least of these brothers of mine, you did for me'" (Matthew 25:35-40).

As we have contemplated the meaning of the above passage this quarter, the basic mandate of this text has been examined. However, just as Jesus offered the woman at the well “living water” (John 4) the church should also utilize this passage as a guideline for understanding the critical importance of offering recovery ministries to those in the community struggling with substance abuse. In many ways those who suffer from addiction do not possess the will power to find freedom from the imprisoning physical and sociological bondage of chemical dependency.

“Will power alone is helpless in the face of addiction; the brain of a drug user is physically altered in ways that make it difficult to resist further use” (Hunter, 126). These ‘imprisoned’ individuals are often stigmatized by the people of God’s church as those who have bad character, weak will power and irresponsible parents. These attitudes do not enable an appropriate response in the pastoral care ministry of the church. Rather than reaching out to touch a leper with compassion and love as Jesus did in Luke 5:12-16, this attitude more closely resembles the ancient attitude of the Jews toward lepers. When God’s people begin to learn that addiction is much less caused by choice and character and more by cultural forces and the drug’s addictive powers, perhaps Christians will begin to hear the cry of hearts in bondage. Drugs and alcohol at some level promise pleasure and friendship; “no one chooses to become addicted” (Hunter, 130). There is always some void that a drug user is seeking to fill and as Christians we need to be aware of deep issues of the heart.

“Some church leaders express anxiety about the recovery movements’ less-than-adequate understanding of God” (Hunter, 137). As an individual who has had close friends actively involved in Alcoholics Anonymous (AA), I would agree and be quick to

point out that AA is essentially a lay movement. In my experience, most churches are not as confident in their approach to freeing those who are chemically dependent from bondage as AA is regarding its task. While the church is an essential tool in providing theological instruction to its members, the Sunday service may not be the best tool for reaching out to the unchurched and chemically dependent community. Recovery programs such as AA teach three main pieces of theology that a chemically dependent person needs to hear; first God is not me, secondly God is greater than me and thirdly God is willing to help me. These simple teachings begin to reorient a person's thinking making them far more receptive to the Good News of Jesus Christ.

Another important factor that the church may not be aware of is “addicts regularly violate, through addiction based behavior, values that they still claim to hold” (Hunter, 139). This cycle of shame causes an amazing amount of oppression and pain among the chemically dependent. This pain and oppression is not the addicts alone; almost 85% of reported child abuse cases come from families where there is chemical dependency (VanVonderan, 76). “The family of an addict is immersed in spiritual, emotional and psychological chaos” (VanVonderan, 76). When Jesus said “I have come that they may have life, and that they may have it more abundantly” (John 10:10); He was speaking for these families too.

There are a number of simplistic solutions that many churches and pastors employ that ignore many factors of chemical addiction. One of the most simplistic solutions offered by the church is abstinence. This solution simply states that if the church and family can get the chemically dependent person to quit using, we believe the problem will be over. This solution shows an “underestimation of the spiritual, emotional,

psychological and physical ramifications of dependency on the individual and a lack of awareness of the needs and pain of loved ones” (VanVonderen, 194).

A second over-simplistic and unhelpful solution to the problem of addiction offered by the church is to initiate a search for the cause. This cause is likely to label the addictive substance as ‘sin’ and then simply prescribe avoidance of ‘sin’ as treatment. In my experience, simple solutions are not effective because the problem itself is so complex. Listen to the denial of an alcoholic minister, “I did not wear a long, dirty trench coat and sleep in alley ways. I did not miss work due to alcoholism. I never drink before noon. I never had auto mishaps and never went to jail or the hospital as a result of my drinking” (Beibel, 113). Simple solutions are not enough when you consider those statements.

“Alcoholism is a family disease. It affects every member adversely, bringing personality and character damage to all. Educational family alcoholism workshops emphasize that children and grandchildren are hurt by the presence of even one alcoholic in the family” (Beibel, 116).

One may ask ‘what can a pastor do?’ and ‘Is this task too big for the church?’ Based on my research, there are steps that I believe any ministry can take to begin providing pastoral care for those in need outside the church. The first of these steps is to “strengthen motivation” (Miller, 324). Many who suffer from addiction do not perceive the serious nature of their problem and may not be aware that there are alternative ways to live and function. Many in the church may also be unaware of the needs of those with addictions.

A second step is to “provide support and understanding” (miller, 324) to those in need. In his book, Sharpening the Focus of the Church, Gene Getz lists six cultural implications for the twentieth century church. The sixth implication is “the church must

provide stability and security for people – something which culture is increasingly failing to do” (Getz, 279). This clearly reflects Jesus’ encouragement to care for those in need (Matthew 25:31-46) and calls us to reach out to those in our communities with grace-full intent.

Pastoral care in strengthening motivation and providing support and understanding are the first steps in creating a local “culture of recovery” (Hunter, 141) in the church. Pastors must be aware of local detoxification centers and halfway houses which provide treatment and ongoing recovery for addicts. Community awareness and participation of church members can become ways in which the “recovery culture” of the church sends its members out.

A local church can also provide rooms and hospitality for a range of recovery groups. Some churches such as Saddleback Church in Orange County, California, devote Friday evenings to people in recovery. They regularly offer a meal, worship and a speaker that discusses a recovery issue or theme. Further, the local church can find ways to include recovering addicts in their ranks, thus creating a place that understands addiction and addicted people and welcomes them. I believe the church is called to care enough and dare enough to hold people accountable, to join with them and their families to assist them in getting help, to provide ministries for those in recovery and a place for them among God’s people.

The church can be a powerful ally and Christian influence for recovery groups such as AA. The secularization and separation of recovery ministries from the church could have disastrous consequences for those in need. Less than ten percent of churches feature recovery ministries (Hunter, 144). Many may believe that my desire to see God’s people

direct pastoral care to this group in their community is too daunting a task. To these I would ask that they consider the parable of the Good Samaritan (Luke 10:33-35). Jesus did not allow this lawyer to rationalize away his lack of love for his neighbor on the grounds of his ignorance of who his neighbor was. Jesus knew there were no easy answers to providing pastoral care to those in need and that we must be exhorted to truly care for the most unlikely in our community.

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