

Reformed Presbyterian Church

Special Needs Committee

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Covenant Care Group Ministry

I. Introduction

The purpose of this paper is to explore the topic of a Covenant Care Group Ministry. The text will address the following issues:

- What is a Covenant Care Group's definition and purpose?
- How do you determine the appropriateness of a Covenant Care Group to a given situation?
- How do you get started setting up a Covenant Care Group?
- What pitfalls do you need to be aware of in Covenant Care Group ministry?
- How will you know when a Covenant Care Group is no longer necessary?

II. Definition and Purpose

A. *Definition*

A Covenant Care Group is a covenantal relationship between a family in exceptionally difficult circumstances (usually not of their own making), and a small group of church members who commit to assisting the family in the meeting of legitimate needs. Covenant Care Group ministry is a burden-bearing ministry in a very biblically-boundaried sense.

B. *Purpose*

- 1) To act as a link between the family and the pastoral staff/Session.
- 2) To act as a buffer between the family and the congregation to enable a sense of privacy and normalcy.
- 3) To facilitate ministry opportunities within the congregation in mobilizing to provide emotional, physical and spiritual support to the family.

III. Evaluating Appropriateness

This is the central and most critical tool to implementing the entire concept of a Covenant Care Group. Problematic issues can occur if a group set up when one is not warranted, or if one is missed that should have been established for a family. This part requires much prayer for wisdom, love, and discernment in boundaries.

A. *Biblical Foundations*

1. Wisdom

“Listen, my son, accept what I say, and the years of your life will be many. I guide you in the way of wisdom and lead you along straight paths. When you walk, your steps will not be hampered: when you run, you will not stumble. Hold onto instruction, do not let it go: guard it well, for it is your life” (Prov. 4:10-13).

2. Love

“ For you were called to freedom, brethren: only do not use your freedom as opportunity for the flesh, but through love be servants of one another. For the whole law is fulfilled in one word, “You shall love your neighbor as yourself” (Gal. 5: 13-14).

“Love each other as I have loved you” (Jn. 15:12).

3. Discernment in Boundaries

“Carry each others’ burdens and in this way you will fulfill the law of Christ” (Gal. 6:2).

“Each one should test his own actions...for each one should carry his own load” (Gal. 6:4,5).

Determining the appropriateness of a Covenant Care Group ministry for a specific family situation requires a certain level of prayerful discernment of boundaries (understanding the “who,” “when,” and “under what circumstances”). Townsend and Cloud have an excellent description of this concept in their book entitled *Boundaries*. Much of the discussion in this section is built on their ideas. Difficulties in life consist of two types according to this text: “burdens” (boulder) and “loads” (backpack).

- **Burden (boulder):** not having enough strength, resources, or knowledge to carry the burden, and help is needed. A time of crisis and tragedy in our lives.
- **Load (backpack):** having a responsibility of everyday things that we need to take ownership and responsibility for and work out.

Covenant Care Group ministries are designed and formed specifically for families going through “boulder” times in their life. The most difficult thing to discern is whether the family is experiencing a “boulder” or a “backpack” situation. It is helpful to have a tangible mode for evaluating this (Keep in mind that Biblical forms of encouragement are warranted for both “boulder” and “backpack” situations).

B. Tools

In making this discernment, it may be helpful to ask the following questions:

- 1) **Is the family's difficulty concrete and definable?**
Can you name what it is and what it is not—where it begins and where it ends? If the issues are too “squishy,” then you are not ready to commit to assistance via a Covenant Care Group.
- 2) **Does the family's difficulty appear to be finite or open-ended?**
If a family is suddenly faced with a crisis (for example: brain tumor and three months to live), that is a finite situation. But if the family is facing a situation that is admittedly difficult, but in fact is part of their normal life and routine, it is probably going to fall under the definition of an open-ended backpack. It does not exclude coming alongside in encouragement, but it must be carried by the owners.
- 3) **Is the family truly in a state of crisis, “boulder”; or is their situation being perceived by themselves or others as crisis-like when in fact it is actually a “big backpack” that needs to be borne by themselves?** Sometimes a family will need encouragement to accept a Covenant Care Group for a boulder that they are trying to carry alone. Our nature tends to make us proud, independent beings. On the flip side, willingness to accept personal responsibility for one’s situation is a critical element. If a family has a “victim mentality” they are unlikely to be accurately assessing their situation.
- 4) **Is the family experiencing great difficulty due to choices that are reaping negative consequences?**
An answer of “yes” doesn't mean that a Covenant Care Group is not necessary, but it does mean that ownership of sin issues and repentance

will have to occur or the Covenant Care Group will simply exist as a rescue operation. Proceed with caution!

IV. Getting Started

A. *Recognize the Need*

Depending upon the situation in question, you have either: 1) been approached by a family asking for assistance, 2) been approached by someone else who believes that the family needs assistance, or 3) personally recognized the need for some form of assistance for a family in the church.

B. *Gather Information*

The next step is to gather as much information as possible about the situation so that all the facts are available when discerning the appropriateness of a Covenant Care Group.

C. *Evaluate Appropriateness*

Detailed steps on *how* to discern and evaluate appropriateness were talked about in length in Section III “Evaluating Appropriateness”. This section is where you *implement* the tools of evaluation for a potential Covenant Care Group. Your concerns should be discussed with appropriate church leadership/committees which are usually “in the know” about significant family issues in the church.

D. *Set Up The Group*

If it is recommended to the session that a Covenant Care Group is appropriate and should be established, and the Session approves the recommendation, then the following steps take place:

- 1) **Define terms of the covenant to be offered to the family in need.** This is the part where the church needs to establish guidelines / expectations for the commitment of Covenant Care Group members to the family and the commitment of the family to the Covenant Care Group members. It will define parameters set for the entire group according to each specific situation. (See sample Appendix A.)
- 2) **Approach the family to offer the preliminary covenant and option of a Covenant Care Group.** If you were approached by a family expressing the need for a Covenant Care Group, confirm with them the Session approval

of the group. Establish that all parties involved must want to willingly participate in the Covenant. If a family is not ready, do not push it.

- 3) **Review the terms of the covenant with the family.** Listen to specific felt needs and expectations. "This is what the Covenant Care Group is—this is what it is not." Encourage the family to define their needs and expectations. Gently steer them to understand which of these things fall into the scope of the covenant. You may need to suggest things that would be appropriate that they have not listed.
- 4) **Compile a list of potential participants.** Establish a list of people with whom the family would be comfortable sharing their difficulties and trusting with the delegation of certain responsibilities.
- 5) **Acquire appropriate approval.** It is important to choose those people who are not overcommitted already, and exhibit qualities of being wise, loving, and well-boundaried themselves.
- 6) **Establish group from contacts.** After reviewing the list with church leadership, contact those individuals and establish a group. Review the terms of the covenant with each individual. In the process of establishing a group, appoint a leader.
- 7) **Hold first kick-off meeting.** The family involved, the group chosen, a representative from church leadership, and the committee person coordinating Covenant Care Groups in your church usually attends this. The leader should run the meeting.

Review the purpose of Covenant Care Group ministry.

- a. Allow the family to share their situation and express specific needs that the Covenant Care Group can address.
- b. Review the covenant.
- c. Divide the family's needs into task-oriented categories. Assign group members responsibility for each of these categories. (See sample Appendix B)

Remember: It is the job of the Covenant Care Group to *mobilize* the congregation to ministry—not to do all the work themselves.

- 8) **Meet with the family on a regular basis.** Put the church to work being the hands and feet of Christ to this family in need. Be sure to keep the Session informed of activities and developments.
- 9) **Agree to a periodic ministry review** to evaluate status and “health” of Covenant Care Group members. The ministry review board could consist of pastoral leadership and any appropriate members of the church chosen by staff. They would meet separately with Covenant Care Group and family for evaluation. It would also serve as an objective problem solver.

V. Potential Pitfalls

Because we are all sinners and are at different stages in our personal maturity, even the best-organized team for an appropriate Covenant Care Group ministry can have issues. A brief explanation of the following concepts may help to avert unnecessary misunderstandings.

- 1) **Loyalty vs. Faithfulness**
A loyal friend sometimes will stick by that person no matter what, but will lack the courage to speak truthfully. On the other hand, as Christians, we are called to be faithful friends. When we are faithful friends we love the other person no matter what, but we speak the truth in love. Covenant Care Groups are about faithful friendship—not loyal friendship.
- 2) **Fear vs. Honesty**
Family and Covenant Care Group members should feel free to ask the hard questions without worry of judgment from either side. The Covenant Care Group must be a "safe place" for all parties involved. Honest sharing of needs and struggles on the part of the family and honest responses by the Covenant Care Group members are essential.
- 3) **Secrecy vs. Privacy/Confidentiality**
One of the benefits of a Covenant Care Group is the buffer of privacy and "normalcy" that it can provide for a distressed family that may be deluged with questions and concerns by other well-meaning Christians. The Covenant Care Group acts as a liaison between the family and the church-at-large in protecting the privacy of the family. This does not imply, however, that the Covenant Care Group is a secret, clandestine operation. Sometimes a family will be struggling with difficult decisions that may be controversial in nature. As faithful friends, the Covenant Care Group members will encourage the family to seek and employ Godly counsel. The family is ultimately responsible for making its own decisions

and should be encouraged to do so. Neither justification of those decisions to the congregation nor the concealment of them is the responsibility of a Covenant Care Group member. Spend time praying with the family!

4) **Responsibility FOR vs. Responsibility TO**

In their book *Boundaries*, Townsend and Cloud make an excellent distinction between "responsibility for" and "responsibility to." They state, "We are responsible to others and for ourselves" (p.30). Covenant Care Group members have voluntarily assumed covenantal responsibilities to the family in need. But, Covenant Care Group members are not ultimately responsible for the family—the family is still responsible for itself. Covenant Care Group members can be agents of change and angels of mercy but only God is in the business of determining outcomes. Don't make the job bigger than it already is!

5) **Pride vs. Humility** The Covenant Care Group is not a club. The potential for pride or gossip can creep in from being in the "inner circle" or being "in the know." This is a ministry to people in deep pain—a ministry based on absolute trust. That must not be violated by attitude or action. It needs to be approached with the humble attitude in which all respect-based relationships should function. Understanding what an overwhelming privilege it is to be part of a serving ministry should result in great humility!

VI. Conclusion

So how do you know when a Covenant Care Group has run its useful life? It is time to disband a Covenant Care Group when:

- 1) the family is no longer carrying a "boulder," or
- 2) the parties involved are no longer willing to abide by the covenant established.

Remember that circumstances change over time and so do people. Eventually, a family may not need a Covenant Care Group due to the modification of their circumstances or an improvement in their ability to handle those circumstances. A "boulder" can change into a "backpack" over time. (The opposite is also true.) Once again, this will require prayerful discernment. The goal is for a Covenant Care Group with a healthy start, a healthy life, and a healthy end. A healthy, biblically-bounded Covenant Care Group can create bonds of friendship and memories of God's faithfulness that can last a lifetime. Those blessings remain long after the last meeting is held.

Please feel free to call or email with questions and / or suggestions.

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APPENDIX A

SAMPLE COVENANT CARE GROUP COVENANT

Purpose for Establishing a Covenant Care Group for the Family:

(Describe specifics of current situation that have brought about the need for a Covenant Care Group.)

Commitment of Covenant Care Group Members to Family:

1. I commit myself to maintain confidentiality by refusing to share outside the group information shared within the group unless I gain permission from the one whom shared.
2. I commit myself to not becoming a "one-man-show," but to allocating the family's specific legitimate needs to available individuals within the congregation-at-large, in order that the body of Christ may benefit from the opportunity to minister.
3. I commit myself to be available to assisting the family with mutually agreed-upon responsibilities for a period of _____ months. These responsibilities are as follows _____, _____, and _____. After that time, I am free to re-commit or to choose to not participate in the Covenant Care Group. If at any point along the way changes in my circumstances affect my ability to keep this commitment; I will openly communicate that to the group as soon as possible.
4. We commit ourselves to open honest communication within the group.
5. We commit ourselves to regular prayer on behalf of the family.
6. Every member of the group holds every other member accountable to abide by the covenant.

7. We commit ourselves to ministering to the whole family and helping them to “function within their own normalcy” being careful not to isolate family from the care of others.

Commitment of the Family to the Covenant Care Group:

1. We commit ourselves to the open, honest communication of our current circumstances and struggles.
2. We commit ourselves to the open, honest communication of our needs, as we become aware of them.
3. We commit ourselves to the prayerful, periodic assessment of our on-going need for a Covenant Care Group.
4. We commit to an honest periodic review of the helpfulness and positive /negative function of the Covenant Care Group.

APPENDIX B

SAMPLE DELEGATION OF RESPONSIBILITIES

The following is an example of a sample breakout of key responsibilities for a family with intense medical issues and small children in the household.

1. Session Liaison
2. Household Issues:
 - Cleaning
 - Meals
 - Laundry
 - Fix-it projects
3. Medical Issues:
 - Transportation
 - Medical Record-Keeping
 - Pharmacy Pick-ups
 - Accompaniment to Dr. appts.
4. Child care:
 - For Dr. Appointments
 - For Regular Respite
 - For Date nights
5. Prayer Chain