

MEMBER CARE NETWORK BRIEFING

A Communiqué of the Global Member Care Task Force (MemCa)

October 2001 No.1

Greetings:. Welcome to the Member Care Network Briefing. This is an expanded version of our occasional updates that we have sent out in the past. We are sending it to all those that we know who are actively involved in member care. So that means people on regional and national task forces, people who oversee member care related ministries, member care practitioners, and several mission leaders. The newsletter is a service of the Member Care Task Force (MemCa) which is part of the WEF Missions Commission. We intend to send it out three times a year, and include important updates and some analyses regarding the care and development of mission personnel. Currently there are over 1000 people to whom we are mailing this Briefing.



DEVELOPING A FLOW OF CAREGIVERS

There is a steady stream of workers ministering to the missions community around the world. We call this the "flow of caregivers" or the "flow of member caregivers". Some of this is planned, and other times it just happens in a less coordinated but very useful way. Care is going into the mission personnel so that care can flow out of them. It is about helping to support workers so that they can minister and love their colleagues and the people with whom they minister. So this flow is really a two-way street. And it is not only the "specialists" doing this, but mission personnel themselves as they provide mutual support for each other, loving one another even as the Master commanded us.

Let's talk about the intentional aspect of this flow. That is, not just letting it happen but prayerfully and strategically trying to foster it and direct it more. We believe there is such a need to do this. The thought is that developing relationships with others is key—good friendships and working relationships. In this way we can work together in different places, providing and developing a stream of appropriate care for mission personnel. We want to deliberately link together and deliberately support each other as we provide member care resources. Such a flow is a global expression of how caregivers from different regions (e.g., Asia, India, Africa, Latin America, Europe) and ministries (e.g., medical, counseling, team building, crisis management) are joining together on behalf of the church's mission efforts.

We link and we flow together when we do joint projects such as writing and training, consulting and exchanging information via email and on the member care web sites, attending mission conferences to provide member care resources together, and participating at regional/national member care consultations to strengthen the network of care for an area. This is happening all over the world. Let us share just a few examples with you--upcoming member care consultations/gathering--which are listed on the MemCa web site (<http://www.membercare.org>).

UPCOMING MC CONSULTATIONS/GATHERINGS

Netherlands Member Care Consultation October, 2001	Asia Member Caregivers Gathering October 5,6 2001 Pattaya, Thailand	Mental Health and Missions (annual) Indiana, USA November 2001
Bringing Hope to the Refugee Highway Nov. 15-19, 2001 Izmir Turkey (there will also be some presentations on Care for the Caregivers	Pastors to Missionaries (annual) North Carolina, USA December 2001	Global Connections Missionary Care April, 2002 High Leigh, UK

KITTING THE NET

The final item we would like to share is a list of some thoughts that can help us all "knit the net" together more. Each of us can play a part. It is difficult at times to look beyond our current work load, organizational commitments, and usual spheres of influence. But when we do, and connect with others, we find it to be not only enriching but of also usually of much benefit to the wider missions community.

So here are a few paragraphs taken from an article that Kelly wrote and Dave helped with, on developing member care affiliations. ("excerpted from "Going Global: A Member Care Model for Best Practice" EMQ April 2001)

CHALLENGES FOR DEVELOPING MEMBER CARE

The main challenge continues to be providing the appropriate, ongoing care necessary to sustain personnel for the long haul. A common practice is to creatively share member care resources with other groups and also tap into the growing international network of caregivers. Help with pre-field training, crisis care, tropical medicine consultation, and MK education needs are examples. Sharing resources can be especially important for personnel from Newer Sending Countries and smaller sending groups with limited funds and/or experience, as well as for those serving in isolated settings. It is thus not necessarily up to one organization to provide all of its own member care by itself. In spite of any group's best practice efforts, though, we must realistically expect that at least a few gaps will be present in the overall flow of care that it provides for its staff.

Another challenge is to help discern when it might be time to "atrit"—to find a new position in missions or to leave missions altogether. Longevity is not always a desirable goal. Thankfully both life and God's will are bigger than the Evangelical missions world!

Still another challenge is to simply raise the awareness of member care needs in certain sending churches and agencies, along with their responsibility to jointly help provide for these needs. Unfortunately, there are still a number of settings where member care is either overlooked or misunderstood.

Another help is to periodically review one's involvement in member care. As an example here are four best practice "check points" that can be used by member care workers, sending groups, national mission associations, and regions/partnerships.

- **ACCESSIBILITY.** How available/accessible are our member care resources--are we meeting felt needs in relevant ways?
- **BUILDING.** To what extent are we building member care into our settings--forming sustainable, comprehensive resources as well as an ethos of mutual support and spiritual vitality?
- **COOPERATION.** In what ways are we networking with others who are involved in member care--sharing resources, exchanging information/updates, working on joint projects?
- **PRIORITIES.** To what extent have we identified our guiding principles and priorities for member care--best practice statement, clear focus, at risk groups, designated budget?

FINAL THOUGHTS

Life does not always work according to our best practice models. Likewise our best efforts for providing a flow of care and caregivers can only go so far. We must remember that God is sovereign over any member care model or approach. His purposes in history often take precedent over our own personal desires for stability and order in our lives (Jeremiah 45). And this is frequently the case of missionaries, where hardship, disappointment, and unexpected events have historically been part of the job description.

So here are some questions for all of us. In what ways are we part of this flow of care and caregivers? And are we connecting with the various opportunities to work with others within our own organizations, and outside our organizations?

Warm greetings in our Lord,

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MemCa is an affiliation of international colleagues committed to help develop member care resources within missions. The Task Force (also called Global member Care Resources) is comprised of member care specialists who come from different mission organizations, and is one of the five task forces of the WEF Missions Commission. Currently there are 25 members. Task Force members work together and with other colleagues on projects which benefit the global mission community along with specific regions. A special emphasis is on supporting mission personnel from Asia, Africa, and Latin America, and on those working among unreached people groups. Members are also committed to provide personal/professional support for each other as needed. Our desire is for our friendship and Christian fellowship to provide the foundation for our joint work.

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