



Extract from CMS Addiction Study Pack: Unit 4

SUPPLEMENTARY NOTES: FURTHER GUIDANCE FOR CHURCHES

Some churches may be looking to deepen their engagement with addiction ministry by entering into partnership with a rehabilitation centre. This is a decision that demands a great deal of prayer, deliberation and thorough research into what local provisions exist.

The following is intended to offer guidance on some of the basic issues surrounding such partnerships. It may help to inform church discussions and provide a focus to the sort of ministry that can be offered.

It is not intended to be used as part of the study session, but you may want to use it as the basis of a wider fellowship discussion, or as something to reflect on in private study.

No matter what the type of relationship between churches and rehab centres, most centres desire churchgoers to have a greater appreciation and value for work with addicts.

Refer again to the results of the Finnish research into Christian anti-addiction centres.

“My vision for the future is the integration of church and rehab ministry; local churches becoming a rehabilitation environment and churches moving in the power of God to reach the most needy.”



If church-centre relationships follow the secular model, they have to be specifically fostered from both sides.

“I think that the relationship needs to be forged, you can't just assume it, you have to intention it.”



Such independent projects typically seek to relate to a variety of churches, both for support and for ongoing care of the graduates. Where the expectations and culture in the church and rehab centre are significantly different, this essential transition for graduates from the centre can be difficult.

“We want their pastors to be connected to the treatment process of the client, when we deal with a client that goes to a church. That they will know what is happening to their sheep. We organise meetings for them to come to and we instruct them.”



Where anti-addiction work is seen as a group of ministries of the church, such as prevention, after-care and support for co-dependents, – as in the spiritual and combination models – this is often initiated by the church leaders.

“This comes from apostolic leadership in denominations that really have a heart to embrace an addiction ministry. They are the exception not the norm, which I've seen in a lot of different denominations.”



Here, the church leaders feel responsible for the needs and problems of the ministry even if not personally involved. Therefore the church leader can be highly influential.



“The relationship of the church with the rehab centre is fully dependent on the attitude of the pastor. What he says will determine what others think.”



Graduates of the programme are at least in theory welcomed into the family of the church, and encouraged to attend if they live locally. *“Church attendance is part of the programme. It’s important that the word is applicable so that it is meaningful to them.”*



A fourth type of relationship is also beginning to appear, usually in pioneer situations. Churches are being planted as a direct result of addiction ministry, from the addicts and their family members and friends who have come to Christ as a result of the transformation seen in the ex-addict.

In this case, the project director feels responsible for the management of the churches. In this situation, there is normally little difficulty for graduates in adjusting to being part of the church as it operates with the same values and style of the rehab centres. Often the residents have already been attending services for the majority of their time in rehabilitation, easing their adjustment back into society.

There are also situations where the relationship fundamentally changes over time, either the drug ministry outgrows the church’s ability to cover it or they separate for not so positive reasons.

Churches born out of addiction ministry mature and start to attract non-addicts.

“The church has grown out of the graduates of the programme and their families who have been converted. And now we are getting people who have nothing to do with drugs coming to our churches. But for a long time we were lepers.”



Please consider how you can engage with addiction ministry in your community:

- Pray about what you have learned in this session
- Get more information by contacting CMS on 020 7803 3332, emailing info@cms-uk.org or visiting www.cms-uk.org
- Consider making a donation using the attached Giving Sheet