

Special Issue

How To Have A Healthy Church: NCD Introduction



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"Big isn't better; small isn't better. *Healthy* is better. If churches are healthy, growth will naturally happen. I don't have to command my kids to grow. If I provide them with a healthy environment, growth is automatic." (Rick Warren) But, what does a healthy church look like? How do I know if my church evidences biblical marks of health?

These kinds of questions prompted Christian Schwarz, director of the Institute for Church Development in Germany, to conduct an extensive cross-cultural, statistically reliable and biblically grounded search for universal principles of church health. What he and his co-workers found was that "natural church development means bidding farewell to superficial pragmatism, to simplistic cause-and-effect logic, to a fixation with quantity, to manipulative marketing methods, and to questionable 'can-do' attitudes." (*Natural Church Development*, p. 14)

His massive study, flowing from a survey of 1,000 churches, in 200 denominations, covering 32 countries and eighteen languages (over 4.2 million people!), identified eight marks universally found



The research project conducted by Germany's Institute for Church Development from 1994 through 1996 is the most thorough study to date of the causes of church growth.

in healthy, growing churches. The English translation of the German work is *Natural Church Development*, published by ChurchSmart Resources (800-253-4276).

Concurrently, Schwarz also found several misleading, though often followed, ideas on church health and growth. His study revealed that church health is:

■ Not size determined

Big churches are not necessarily healthy. In fact, they can often be **B**oring, **I**rrelevant and **G**loomy places! On the other hand, "small" does not necessarily translate into health or quality. "Small" to many means doctrinally pure, and the more educated the minister is, the better. What the study actually revealed was that churches who purport a highly educated

ministry with sound, doctrinal credentials often fall short of both growth and health!

■ Not programmed determined

Citing churches following a highly programmatic model as "technocratic," Schwarz's study points out that church health and growth actually may decrease as the church programs expand! "On nearly all relevant factors, larger churches compare unfavorably with smaller ones." (*NCD*, p. 48) Highly programmed churches often neglect the growth "automatisms" which God has inherently placed in every true church.

Well, then, for a church to be healthy, all we need is more and better prayer, some would say. Again, the study revealed that church health is:

■ Not "spiritualistically" determined

While nothing can be truly accomplished for God without prayer and the Spirit, the church must also responsibly obey Him in church organizational structures and evangelistic endeavors. A purely spiritualistic model can create passive, unhealthy people and

structures.

What then are the quality characteristics of a healthy church?

■ Empowering Leadership

The NCD study found that pastoral and lay leadership must actively lead a congregation for health to occur. The key is that these leaders *empower* others to be all that God wants them to be (cf. Eph. 4:11, 12). The diagnostic measures five aspects of church leadership: (1) match of pastor and congregation; (2) delegation and sharing of ministry; (3) leadership through vision; (4) leadership through mentoring and equipping, and (5) leading through change.

■ Gift-Oriented Ministry

Peter writes that "each one should use whatever gift he has received to serve others, faithfully administering God's grace in its various forms" (1 Peter 4:10). NCD has found that when individual gifts are identified, used and developed, the church evidences health in this area. In particular, the diagnostic measures four aspects of spiritual gift development in the congregation: (1) understanding my spiritual gifts; (2) matching gifts to tasks; (3) significance of service, and (4) coaching.

■ Passionate Spirituality

Right teaching, proper orthodoxy and straight-laced, puritanically minded lifestyles might seem spiritually healthy to some, but they can actually indicate a low level of passion for Christ and the faith. Healthy churches have a contagious faith. The NCD diagnostic measures three areas here: (1) personal spiritual disciplines; (2) corporate spiritual disciplines, and (3) contagious faith.

■ Functional Structures

While every church has structures and programming, the issue of health is do those structures facilitate the vision and mission of the church and promote ongoing multiplication of ministry. The NCD surveys measure four aspects of the structural life of a congregation: (1) organizational structures and systems; (2) leadership oversight; (3) vision, goals and planning, and (4) creativity and managing change.

■ Inspiring Worship

Noting that *style* of worship is not the issue of church health, whether or not God actually "shows up" in worship is crucial to church health. Is God manifestly present in the worship services? Do children experience God and are they being properly cared for during worship? Does the preaching and teaching transform lives? Is the church visitor friendly? Is the worship music God-centered and celebrative? These five areas of the public worship life of a congregation are measured by the diagnostic.

■ Holistic Small Groups

The Scriptures present us with a model church that met in both large meetings and small groups. In the New Testament, house churches and people meeting from "house to house" were the standard (cf. Acts 2:46; Rom. 16:3-5). The NCD surveys measure the small group health and vitality of the congregation in seven ways: (1) Is there an atmosphere of transparency, sharing and trust? (2) Are the groups and Sunday school classes more than just fellowship gatherings? (3) Do the groups meet felt needs? (4) Are they relevant to daily life? (5) Are they guest sensitive? (6) Do groups naturally multiply as part of their DNA? and, (7) Do group members freely and actively share in their meetings?

■ Need-Oriented Evangelism

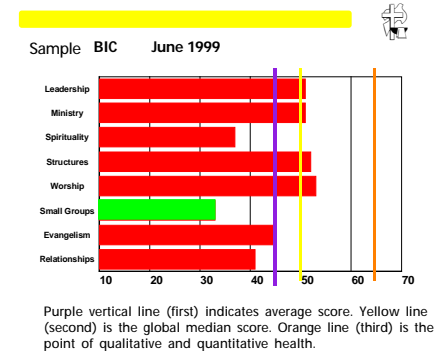
Being "active in sharing your faith" is a crucial aspect of knowing God's good will for our lives (cf. Philemon 6). The NCD diagnostic measures four aspects of outreach and evangelism in the church: (1) personal evangelism; (2) corporate evangelistic strategies; (3) seeker awareness, and (4) assimilation of new Christians.

■ Loving Relationships

The NCD diagnostic also measures four aspects of the relational health of the folks in the church: (1) Does the church manifest an atmosphere of joy and trust? (2) Are people evidently friendly with each other outside of church activities? (3) Is there public, visible applauding the efforts of people in the body?, and (4) Does intentional conflict resolution happen between people?

These eight health signs can be measured quantitatively as well as qualitatively. Thirty (30) surveys are distributed to the core people in a congregation who score the church on the above eight health characteristics. The surveys are then scored by a licensed NCD consultant with a resultant chart of church health and recommendations for improvement, such as that shown below:

Church Profile



The procedure we have been using in the Atlantic, Susquehanna and Allegheny conferences of the Brethren in Christ churches has been the following:

1. The church contacts a licensed NCD consultant.
2. The consultant meets with the pastor(s) and church leadership and introduces the NCD diagnostic model to them.
3. The church leadership orders the surveys through the consultant at a cost of \$100 (check made out to *ChurchSmart Resources*).
4. The church leadership chooses thirty core people to participate in the survey and distribute the surveys.
5. The consultant scores the surveys and meets with the leadership team sharing the results along with some initial NCD recommendations to deal with the "minimum factor" (lowest score).

Our area licensed NCD consultant is Carl Shank, Associate for Field Services (717-697-2634). He has also commissioned and trained associate consultants, Pastor Steve Smith (Atlantic conference at 626-4488), Pastor Terry Hoke (Allegheny conference at 749-5623) and Pastor Terry Burton (Allegheny at 776-5647).

You may contact any of these consultants for additional information and help.

