BOOK REVIEW


Visit the Sick is part of the Practical Shepherding series published by Zondervan. Other titles in this series include Conduct Gospel-Centred Funerals by Brian Croft and Phil Newton, Prepare Them to Shepherd by Brian Croft, Comfort the Grieving by Paul Tautges, and Gather God’s People by Brian Croft and Jason Adkins.

Visit the Sick is written for the ministry generalist or local church pastors and laity who are commissioned by their local church to minister to the sick. With this in mind, Visit the Sick is not intended to explore the complexities of a specialist ministry such as hospital chaplaincy. Rather, Croft’s intent is to provide the ministry generalist or local church pastor with a biblically informed and practical primer on the practice of ministering to those who live with acute and chronic health conditions. This material is presented in five brief and readable chapters plus four appendices, each dealing with a topic he considers to be essential to this aspect of pastoral ministry.

Chapter 1, “God’s Care for the Sick,” develops a biblical theology of illness and ministering to those with health problems. Croft’s treatment of this topic locates it within the arc of the biblical story of redemption history and includes many texts that one might expect in this type of survey (e.g., Exod 15:26; Matt 25:36, 40; John 9:1–7; James 5:14) as well as a selection of other texts drawn from the Old and New Testaments. This survey of the biblical literature highlights key themes concerning health and sickness: i.e., good health is a gift of God, sickness and disease entered human experience following mankind’s fall
from grace, and the community of faith has a role in caring for the sick.

Chapter 2, “Spiritual Care for the Sick,” introduces the reader to the work of ministering to those who live with illness and disease. One strength of this chapter is the fact that it connects the work of visiting the sick with the traditional pastoral activity of soul care through engaging individuals to reflect on Scripture, the hope of heaven, and the state of their soul. There is much to be commended about Croft’s perspective on the subject as it clearly differentiates the pastoral act of visiting the sick from the roles of others who come into contact with the sick.

Chapters 3 and 4 speak to the question of how to minister to the sick. In “Wise Care for the Sick” (ch. 3), Croft considers the person of the one who ministers by providing direction on the mindset with which a pastor goes about this aspect of their ministry (i.e., prepare your heart, watch your time, listen, leave a note when necessary, and enjoy the moment). “Skilled Care for the Sick” (ch. 4) considers some practical aspects of ministering to the sick (i.e., eye contact, the pros and cons of “touch,” pleasantness, perceptiveness, and fresh breath). As a result, the guidance contained within these chapters offers a roadmap for the ministry generalist who has little or no experience with visiting the sick.

Chapter 5, “Community Care for the Sick,” reflects on ways to engage congregations in the care of the sick (i.e., teach them to care for the sick, include the sick in public prayers, make the congregation aware of who needs care, lead by example and acknowledge those who minister to the sick). Although his discussions of these topics are very brief, this focus on community care is a healthy reminder of St. Paul’s image of the Body of Christ and the protestant doctrine of the priesthood of all believers.

The four appendices provide a checklist for visiting the sick (Appendix 1), examples of spiritual conversations with the sick (Appendix 2), answers to frequently asked questions (Appendix 3), and an abridged version of J. C. Ryle’s essay on sickness (Appendix 4). Readers of *MJTM* are likely to find Appendix 2 helpful for its illustrative value and Appendix 4 useful for the
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The terms of reference (i.e., a practical guide for pastors) and the brevity of *Visit the Sick* are both an asset and a limitation to this book. For example, a key strength of this book is the fact that ministry generalists whose view of soul care is organized around a concern for the salvation of those who are spiritually lost have access to few contemporary resources to guide their practice of ministry. As a result, ministry generalists will find that this book offers a beginning point for integrating soul care with care of the sick. Similarly, although it may occasionally seem that Croft focuses on what is common-sense (i.e., chs. 3 and 4) this little book is a valuable primer for ministry generalists who have not had the benefit of either a course in the work of pastoral care or a healthcare-oriented experience in supervised pastoral education. The brevity of this book, however, is such that pastors who do a lot of hospital visitation may benefit from reading a supplemental text such as Neville Kirkwood’s *Pastoral Care in Hospitals* (Moorehouse, 1998).

Balanced against this are the limitations that result from both the terms of reference and the brevity of this book. The first limitation that merits mention is that the brevity of the text does not allow for a differentiation between disease and disability, whether a condition results from genetics or human action, or acute, chronic, and terminal conditions, and how these may affect the pastor’s approach to the care of the sick.

Second, while Croft is to be commended for seeking to ground the care of the sick within the biblical story, readers may find the brevity and structure of chapter 1 to be problematic for two reasons. Croft’s decision to separate his reflections on the Old Testament from his discussion of the New Testament texts about health and sickness risks blurring the continuity of the biblical message on this vital topic (e.g., God gives health and healing—Exod 15:26, Ps 41:3, Matt 4:24, Acts 5:15–16; not all illness is a result of personal sin—Job 2, John 9:1–7; and God’s people have a responsibility to care for the sick—Ezek 34:4; Matt 25:36, 40). In addition, the brevity and structure of this chapter does not clearly identify that the bible recognizes multiple reasons for poor health: i.e., as a consequence of the
general decay of creation as a result of sin (cf. Acts 3:2), as a consequence of the sins of others (cf. 2 Sam 11:15), as a consequence of a person’s sinful behaviour (cf. 1 Cor 11:30), and as a consequence of the conflict between God and Satan (cf. Job 2). My sense is that a thematic rather than a chronological approach to the biblical material would have assisted Croft to better address the above-noted concerns and themes and would have resulted in a more highly nuanced and balanced treatment of the subject.

Third, Croft’s emphasis on having conversations that focus on salvation and the Christian’s eschatological hope, while consistent with his theology and his understanding of pastoral ministry, runs the risk of placing the minister’s agenda of ensuring that a person is at peace with God ahead of hearing an individual give voice to what is on their heart and limits the scope of pastoral ministry with the sick. For example, a person who lives with a chronic non-degenerative disease or a disability may be more interested in discussing what it means to be faithful to Christ in the midst of their present suffering than they are in talking about the hope of heaven. Likewise, the parent who has been told that their newborn has a serious birth defect is likely to be more interested in experiencing God’s presence in the moment than contemplating a place where there will be no tears, illness or death (cf. Rev 21:4).

In conclusion, this book can be of benefit to the ministry generalist if they take the time to reflect on and develop Croft’s biblical-theological foundation for the work of caring for the sick, his emphasis on Soul Care, and his focus on the role the community of faith in ministering to the sick. Nevertheless, those who are engaged in the work of chaplaincy and those who have a broader understanding of pastoral ministry are likely to find this brief text to be of limited value.

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