

DEVELOPING A CHURCH-BASED AND LAITY-LED
BEREAVEMENT MINISTRY FOR INTEGRATED AND SUSTAINABLE
SOZO-HEALING.

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ABSTRACT

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A Doctor of Ministry Dissertation by

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Besides the Funeral Parlor, the Church is the place where people run to in times of death for funeral services, burials, celebrations of life and homegoing, memorial services, anniversaries. The Church has played these important roles for its members and the larger community over the centuries. However, the Church has left a major vacuum unfilled when it comes to providing bereavement support to grieving members and families. Most of what has been done by way of supporting grieving members and families has been on the shoulders of the clergy. Yet even that is not a systematic and sustainable mission of the Church. We have clergy and a few lay leaders, visit grieving members of the church during times of death in the family. The best most churches do is to follow up with phone calls, condolence cards, and flowers after the funeral service. An informal conversation with selected clergy reveals that the Church as a whole does not have a well-structured ministry of grief support that is led and managed by the laity. The sad situation is that the church has both the human and material resources to establish a viable bereavement support ministry. So why do we not have such an all-important ministry available in the church? Why do we, as a church leave our grieving members to resort outside resources for healing, when we have a mandate from our Lord, “Weep with those who are weeping and to rejoice with those who rejoice?” This paper is focused on how to establish a

church-based and laity-led bereavement ministry in the church that will provide sustainable and integrative healing, functionality, and better adaptation to the grieving members of the community. It is hoped that this paper will provide the framework and template for how a church can successfully develop a contextual bereavement ministry plan that will be relevant to its setting.

Drawing from his life experiences and his bi-locational ministry as a chaplain at Homeside Hospice, and as clergy, who pastors at Ghana Calvary United Methodist Church, the author believes that the church can learn something from the way hospice companies have structured bereavement services for their bereaved families, which last for at least thirteen months. To ensure that this is a ministry the church can establish and use as an outreach program, the author organized a ten-week Bible Studies in Ghana Calvary United Methodist. Twelve volunteers were selected to form the founding members of the bereavement ministry after the leadership of the church and the entire congregation have embraced the vision and committed themselves to make it an integral part of the church's mission.

This paper concludes that if the laity is trained to provide grieving members of the church with sustainable and integrative bereavement services that focuses on *Sozo-healing*, there will be an opportunity for members to discover and develop their God-given talents and gifts. We will also save the clergy a lot of time and free them to focus on other equally important aspects of their calling. Moreover, this collaborative effort can ensure trust and confidence between the service providers and the grieving members based on the familiarity that already exists.

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CHAPTER ONE

A Journey of Discovery: Understanding Who I am, the Ministry into which God has called me, and my Place of Work

In this chapter, my focus will be on the settings of my ministry. Specifically, I will identify and explore three contexts. This narrative will attempt to answer the following questions: “Who am I?” (The internal context); “Where is my ministry?” (The context for my work); and “Where are WE?” (The larger current culture). These three different contexts would be explored one after the other to paint the larger picture of who I am and the relevance of my ministry within the 21st century post-modern culture.

Who Am I? –The Internal Context

“Before I formed you in the womb, I knew you; before you were born, I sanctified you; I ordained you a prophet to the nations” (Jeremiah 1:5 NKJV).

I am a Ghanaian

Becoming a pastor was the last thing I ever imagined for myself. Who I am is confusing to me, but I am in the process of discovery. I am a Ghanaian; belonging to three different tribes, which is not typical in Ghana. This may confuse most Westerners because in Ghana where you are born has nothing to do with your hometown. (Some Ghanaians are even confused by this maze of hereditary paths, but I will explain it here to the best of my knowledge and ability). One’s hometown is predetermined by one’s parentage. Most people belong to one tribe if both parents happen to come from the same tribe. It is also common to find some Ghanaians identifying with two tribes if both parents belong to two different tribes.

It gets confusing when inheritance policies come into play. Some tribes like the Gas (based mostly in Accra) exercise Patrilineal inheritance. That means you are counted as Ga if your father is Ga. But if your mother is Ga, you are something else. All the Akan tribes, including Fanti, Twi, and Nzema practice Matrilineal inheritance. For example, if one's mother is Nzema then the one becomes Nzema. My confused heritage comes from the fact that I am both Patrilineal and Matrilineal; my father is Ga and Adamgbe whiles my mother is both Nzema and Ga, with Fanti in her mother's blood. Consequently, I speak Fanti, Twi, Nzema, and English, which is the official language in Ghana.

I find myself the odd one among my friends all of the time because I don't speak Ga or Adamgbe, though my last name "Addo-Nartey" is a Ga-Adamgbe name. My lack of mastery in the Ga language is due partly to my father being an absentee dad most of my childhood life (as a child, I was told he was always out on business trips. But I later found out that he was in Accra with his family); and being born and raised in an Akan-speaking town, Takoradi, did not do much to help my situation. I remember my friends making fun of me in the primary school because I bore a Ga name but could not speak Ga. Moreover, among my siblings, I am the odd one. My mother and father did not remain married for long. They split when I was six years old. After that, my mother had six more children; the second-born died before she turned two, remaining five of us. My dad on his part had five more children. So, between my dad and mom, there are eleven kids, with me as the *intersection* between the two sets of families.

It is very interesting when these two families come together; one set of us can dialogue frequently in Nzema. While the other set speaks Ga with my mother (my dad has gone to be with the Lord since 2010), all of us understand Fanti and Twi, but not all

speak them fluently. With my mother and two other siblings from my mother's side, I speak only Fanti because we all grew up in Takoradi (a predominantly Fanti-speaking town). The rest of my siblings from my mother's side speak Nzema with all of us because they were born and raised in Axim, a Nzemaland. Needless to say, with my Accra-based family we always communicate in English, due to my inability to speak Ga and their lack of fluency in the Akan languages, although my eldest sister Diana is very good at both Fanti and Twi. However, they communicate frequently in Ga with my mother because her father was Ga and part of her childhood years was spent in Accra.

This background oddity and family dynamics play a major role in shaping my identity as a unique individual, but most importantly in casting the pastoral image of discovery for me. Growing up, I was embarrassed by this peculiarity to the point of almost being troubled by it. I could not see anything positive or significant about it back then. However, now, I am all thankful to God for it. Not long ago, Dr. Leonard Sweet, my professor at Drew Theological Seminary, threw a different light on it for me. His comment when he first read this paper put in better words what I had struggled most of my life to comprehend. He observes that:

This feeling of interstices, of being in-between, is a key theological concept in the history of Christianity and in the life of faith. In fact, the Holy Spirit is an in-between God, an in-the-midst God—"Where 2 or 3 are gathered, there am I in the MIDST"...we live in-between the now and the coming, the promise and fulfillment.¹

That is what I now believe about myself; I have an idea of who I am, knowing from a scriptural point of view who I would be in Christ. Nevertheless, in the in-between, I am

¹ Part of this chapter was presented as end of semester paper in the first semester of this doctoral program. Quoted here with permission from Prof. Leonard Sweet.

still discovering who and what I am and must do, and I am thrilled about the journey and the quest.

I used to think I was a mistake, but now I am very proud and excited about the life God has given me. My life has been an exciting long quest of discovering my roots and discerning the future God has for me; it has been an initial journey of finding out who I am within the Ghanaian culture during my childhood years. There were times when I felt like I did not belong to any particular group of people, and that bothered me a lot. As will be discussed later in this paper, my Christian and Pastoral identity have also been characterized by the same sense of idiosyncrasy, moving me further and deeper into discovering new and refreshing expressions of the Christian faith and ecclesiastical responsibilities.

I cannot completely say when this feeling of insignificance and loss evaporated from my soul to be replaced by a sense of uniqueness and belonging. What I can say with some degree of confidence is that through prayers, scripture reading, and private meditation, I have come to see myself in a new light; that I am not an accident, my birth is not a mistake, where and when I was born and how my parentage is conceived are all part of God's intricate and providential plan for my life. There is a divine purpose for my life. This revelation has encouraged me more than ever to allow God's Spirit to use my peculiarities to minister to me as well as through me to others in more profound ways.

Two important scriptures have helped shaped and solidified this self-understanding in me. The first is Jeremiah 1:5 quoted above. "Before I formed you in the womb, I knew you; before you were born, I sanctified you; I ordained you a prophet to the nations." I encountered this verse at a Bible Studies in my early twenties when my

quest became a spiritual journey. I felt God speaking to me and through this verse reassured me of my identity in Christ no matter how odd my family background may be. The second scripture, which used to open both my heart and *eyes* came to me during my private devotional time in the first year of my seminary training at Trinity Theological Seminary (formerly Trinity College, Legon, Accra). The words of King David in Psalm 139 came alive to me that night as I said reading the Bible. I felt my spirit affirming these words:

For You formed my inward parts; You covered me in my mother's womb. I will praise You, for I am fearfully and wonderfully made. Marvelous are Your works, and that my soul knows very well. My frame was not hidden from You when I was made in secret, And skillfully wrought in the lowest parts of the earth. Your eyes saw my substance, being yet unformed. and in Your book, they all were written, the days fashioned for me, when as yet there were none of them (verses 13-17 NKJV).

From that time, I knew God was calling me to throw away all the negative feelings and thoughts I had formulated about myself and embrace who and what I am in Christ. I gladly and gratefully accepted this discovery and kept moving on with my life, trusting in the leading of Jesus my Lord.

I am a Christian.

Born and raised in Ghana, a West African nation notoriously rich in culture and religion, I grew up knowing that I am a Christian. Both my mother and father were Methodists; so naturally, I was baptized and nurtured in the Methodist faith. However, growing up in Takoradi, a harbor city along the southern coast of the Western Region of Ghana, I was exposed to a variety of religious beliefs including the different forms of the Christian faith at the early ages of my life. Being a harbor city, Takoradi attracted people from all walks of life; people of different tribal groups in Ghana and from other parts of

Africa made their residence there. Needless to say, various religious groups and Christian denominations were boldly advertised and attracted adherents.

Consequently, as early as age six, going to church, the mosque, and other places of worship formed the routine of my weekend life. Groups of children (between the ages of six and twelve) within a particular neighborhood or apartment building would form a 'congregation' and visit each other's place of worship (my group was made up of about seven kids). We would go to the Mosque on Fridays with our Muslim friends for the prayers (especially on the holy days when meals were shared and singing and dancing punctuated the celebration); on Saturdays, we visited our friends who belonged to the Seventh Day Adventists Church (SDA) for the Sabbath School classes. At least five different Sunday Schools would be visited on Sundays before the day was over. We would start with the Assemblies of God Church, which usually started earlier, then to the Methodist Church, the Church of Pentecost, The Presbyterian Church of Ghana, and the Apostolic Churches. Due to some of their restrictions, we did not frequent the Catholic Mass and the Anglican Churches, though we had some friends who were of those denominations. But occasionally, during special occasions, we would be there, with or without invitation.

This exposure helped me to be very adaptable and amenable to the differences of religious expressions in the community while still holding strongly to my Methodist Christian faith. As can be expected, some parents discouraged their children from going with us. But by and large, most of our parents were our greatest motivators. Religious conflicts, tensions, and differences were virtually unknown to us in those days. If they ever existed, they never became an issue in the 'world' in which I was growing up.

These formative years inculcated in me a very deep sense of reverential fear for God, the church, and the pastors. The theological expressions of these formative years can be summarized in the following words: God is everywhere; though loving, good, and caring, God also takes sin seriously. God sees and writes everything we do; if we lived ‘good lives’ there would be a reward for us and if we disobeyed parents, teachers, and the elderly (which, as children we often did), or told lies or stole, there was a severe punishment for us. The Church is God’s house and everyone coming to the church must comport themselves; no talking, no loitering about, and absolutely no littering. Foods and drinks in the sanctuaries were an abomination to God. Only in the Sunday school class were we allowed to be kids again.

I saw pastors as God’s holy men (female pastors were uncommon in those days, except in the African Indigenous Spiritual Churches); their presence commanded such holy reverence and fear that it was difficult and uncomfortable for me to be in the presence of any pastor. I do not have any clear memory of ever coming near pastors in those days, which is a big oddity since I was constantly in the church. My earliest memory of getting closer to a pastor was when I was ten years old. I really cannot tell if the pastors kept themselves away from the kids, or we, the kids kept our distance out of reverence for them. Needless to say, it was not a good experience growing up in the church with such fear hanging over me.

This image of the pastor remained strongly with me even into my adulthood, interfering my response to God’s calling into the ministry. I initially resisted passionately and struggled vehemently with it for two years. By that time, I had developed such a powerful reverence for the person and office of the pastor, that I did not see myself as

‘qualified’. Nevertheless, with hindsight, I now see that these formative years of exposure to all these varieties of faiths were God’s initial workshop shaping me to become the pastor that I am today. In the words of Eugene Peterson, in his book, *The Pastor: A Memoire*, “Here, I savored experiences and meetings, making them my own, attentive as they arranged themselves within me, becoming me, and I all the while becoming, without my knowing it, a pastor”²

All of these early years’ experiences coalesced and culminated into a real-life changing encounter with God during the final year of my teacher training. We were preparing to take the final certification exam with fasting and prayer. One night I could not sleep well; I felt restless and agitated in my soul, so I woke up, and with nothing much to do, I picked up the Bible and open it. As if by divine hands, the pages turned to Ecclesiastes 3, where after reading, I felt fear and panic gripping me. The words, “There is time to be born and a time to die” kept ringing in my mind till I saw that, without God, the path in front of me was leading to premature death. It was not the love of God through Jesus Christ that got my attention. Rather the fear of dying young and going to hell was a strong enough motivation to bring me on my knees, where I repented and asked God to forgive me and give me a new life.

It was May of 1989 when this happened. I immediately woke my roommate up and announced, “I’m a new man.” That evening, when the class met, I made the same declaration to the joy of some and the amusement of others. However, I officially invited the Lord Jesus into my life on December 31st, 1989 during the New Year’s Eve service.

² Peterson, Eugene, *The Pastor: Memoir*, (New York, NY: Harper Collins Publishers, 2012), 11

Since then, I have been so grateful to God for the new life and for saving me from a life I did not know was leading to premature death.

I am a Teacher and Pastor.

After high school, my elementary school headmaster (the principal) approached me with the suggestion that I pursue a professional teaching career. My immediate response was respectfully turning it down. I was not going to be a teacher. I had a plan to become a civil engineer. And I was going to prepare myself for it in college. To my adolescent mind, teaching was not a path leading to anywhere great and important. So, I closed the door to that discussion. But my headmaster and his wife, Mr. and Mrs. Benson, both of blessed memory, would not lay the matter to rest. One evening after work, they came to my apartment and literally, begged my mother to convince me to take the entrance exam to Teacher's Training College. He was one of the lay leaders of our church and his wife was on the ushering board. I did not think that anyone, let alone my headmaster and his wife would take notice of me.

In deference to them, I agreed to take the exam. Since I had not made any preparations, by way of studying, I thought I was not going to get the admission. To my surprise, I passed the exam and that same year started teacher training college. Amazingly, God did another wonderful thing for me. Instead of going straight to college, I was called to start teaching for two years during which I attended classes on vacations. Thus, I both worked and studied, providing me with financial stability, with which I could assist my mother who was then raising other five kids as a single mother. After two years, I then became a full-time student, training to become a professional teacher.

After the four years of training, I fell so much in love with teaching that I started planning to climb higher on the ladder of the teaching profession. I could not have made it to where I am now had not Mr. and Mrs. Benson taken notice of me; they were the kind of leaders the church needs today. Leaders who, in the words of Dr. Leonard Sweet, do not “lose the ability to see the individual”.³ The Bensons were used by God to introduce me to a profession, which turned out to be my heart’s passion and a catalyst for my pastoral ministry. I was constructing a future for myself, which was not compatible with the purpose of God for my life. I wonder how many people have ended up pursuing something God did not design for them, just because they did not have people like the Bensons in their life. Dr. Leonard Sweet is right on point when he said, “If the primary relationships of our church members lie in their relationship to the church en masse rather than in life-on-life connections with one another, then we have missed the sweet spot. We have attracted a congregation, but we have not developed a ‘Christbody’ community.”⁴

The amazing grace of God saved me when I did not know that I was lost. That unrelenting persistence shown by the Bensons had become one of my life missions; that I will align myself with the divine will of God, so that I too can be used to help guide others, especially to discover their God-given potential, pursue and fulfill it. For this mission, although I did not teach in the public education system for more than five years, God enabled me to help some of my students who would work with me, to discover their purpose in life. Many thought I was their model teacher (I did not see myself that way), and so were inspired to become teachers as well. Some of those in the debate club were

³ Sweet, Leonard, *I am A Follower: The Way, Truth, and Life of Following Jesus*, (Nashville: Thomas Nelson, 2012), 85

⁴ *ibid*

encouraged to either become lawyers or enter into politics. My biggest pride is in those who followed me (as I am following Jesus) into the pastoral ministry.

God has done a lot of work on me since then. I am discovering that leadership is a joint venture with the Holy Spirit. As J. Lee Whittington, writes in his book *Biblical Perspectives on Leadership and Organizations*,

For Paul, leading people was a joint venture that involved a team of leaders. But he also understood that leadership was a joint venture in another sense...between the human leader and the empowering presence of the Holy Spirit...The calling demanded that [Paul] deliver the message with an integrity that transcended the way he lived 'among' his fellow believers. But his ability to lead and the power to persevere came from the empowering presence of the Spirit.⁵

In this journey of discovering God's ways and how I can be relevant as a follower of Jesus Christ in the Kingdom of God, my prayer is always to be completely dependent on the guidance and empowerment of the Holy Spirit.

Pastoral Formation

Eye has not seen, nor ear heard, nor have entered into the heart of man the things which God has prepared for those who love Him. (1 Cor. 2:9 NKJV).

After two years of struggling to accept God's call to become a pastor, God used the above scripture to finally break into my thick head. That was 1993. However, it all begun in 1991 after I finished leading a dawn prayer meeting one morning. My pastor, the Late Very Rev. Emmanuel James Peters, who later became my spiritual father and mentor, together with some of the leaders of the church called me to the parsonage and shared with me that they believed God was calling me into the ministry. I knew then that God has anointed me for service in the church, but never saw myself as a pastor. That

⁵ Whittington, James. Lee, Ph.D., *Biblical Perspectives on Leadership and Organizations*, (New York, NY: Palgrave Macmillan, 2015)

office was too sacred and unattainable by the likes of me. I held the person and office of the pastor in such high esteem that I could not believe that I can fit that position. The scripture in 1 Timothy 3 was my constant reminder “*Here is a trustworthy saying: whoever aspires to be an overseer desires a noble task*” (1Timothy 3:1 NIV). That noble task was not meant for me. Not that I was living a terrible life; by worldly standards, I was a pretty “good” person. I felt inadequate and completely intimidated by the pastoral vocation. Therefore, I decided that I would serve the Lord as a layperson in the church, but not as clergy.

As God would have it, divine helpers would not give up on me. Here again, I received tremendous encouragement from my pastor and church leaders to follow the path God has laid before me. Encouragement has become another important virtue and pillar in my ministry. As David Jeremiah rightly pointed out in his book *The Joy of Encouragement: Unlock the Power of Building Others Up*, “The ministry of encouragement stands near to the top of God’s priority list...God knows we don’t have to look far to see people in need. To understand how we can encourage one another, it’s helpful to know what it takes to be encouraged”⁶ The Lord has been very gracious to me, putting the right people in my path at the right junction and at the right time, pointing me in the right direction. So, I am also enabled to encourage others who need it.

I remember one of the things I talked to God to help me accomplish if He really would have me as a pastor of His flock was not to do more funerals than celebrating marriages and baptisms. This may sound very weird and trivial, but it was very important to me at that point. Because I thought at that time that I had had my full share of funeral

⁶ Jeremiah, David, *The Joy of Encouragement: Unlock the Power of Building Others Up*, (Sisters, Oregon: Multnomah Publishers Inc., 1997), 74-75

services. As a lay speaker (used to be called local preacher), I was involved in more funerals than I can recollect. Long before that, I saw and experienced losses through death from as young as three years old. My own younger sister died of measles when I was about three and I saw the body laid in state. I saw one of my mates run over by an eighteen-wheeler when I only seven. Then, just before I turned ten, my great grandmothers and as part of the funeral rites and rituals grandchildren and great-grandchildren were made to not only file past the body laid in state but to spend some time with her before burial.

Moreover, I thought I had seen too many deaths of cousins, nephews, nieces, uncles, aunties not to mention friends and other close relations. I was ready for a break, so I told God that if He really would want me to serve in the ministry, then He should help me not to bury my parishioners but rather to officiate at their weddings, christen and baptize their children, and celebrate healing journeys and stories. This may sound unrealistic, but I was that adamant about it. (Ironically, the first service I conducted was the funeral and burial service of my paternal uncle).

After twenty-three years in the ministry as a pastor, I have buried five people from the total of eighteen churches I have pastored so far. For me, this a sign that God has answered my prayers. However, since I did not know I was going to be a hospice chaplain, I did not pray about that and I think God, in His divine sense of humor in connection with His purpose for my life, has immersed me deeply into a ministry involving death, grief, funerals, and burials. I thought I can completely escape from this calling, but the hand of God has once again, brought me to where I need to be. All the painful and overwhelming experiences with deaths, funerals, and griefs were shaping me,

conditioning me, and preparing me for this very time, and I had no idea what God was doing.

Having submitted to become a pastor, I enrolled in a three-year seminary training in 1994, which was actually a combination of intensive theological and ministerial formation. After graduating with Diploma in Theology (the equivalent of M.Div.) and a Diploma in Ministry from the Trinity Theological seminary in 1997, I was licensed by the Methodist Church, Ghana as a commissioned deacon with authority to perform all the sacraments and preach the gospel. I was assigned to pastor eleven small churches in the south-western part of Ghana, at the border between Cote d'Ivoire (Ivory Coast) and Ghana. During the next three years, I went through what is called the probationary period, being subjected to a series of exams and interviews, all in preparation for ordination as an Ordained Elder of the Methodist Church, Ghana.

My village of residence was Mpataba, a marketplace where other villagers would bring their farm produce to sell and buy. This is the place where I first tasted the ministry of teacher-pastor. In addition to pastoring the eleven churches, I was also a full-time teacher at the local Junior Secondary School. I do not know how I managed it, but the God who called me also prepared and equipped me with whatever is needed to serve the Church of Christ and the community. Due to the short supply of pastoral staff, training of local lay members to become lay preachers and lay servants was of primary importance to the ministry. The task was very easy since many members felt honored to be called to lead and preach and share the pastoral responsibility with me. I must say that this may sound overwhelming and strange to those who are foreign to the African Christian culture. However, my situation was not a peculiar one. It was, and still is the norm for all

the mainline churches in Ghana. Only a few privileged pastors in the big cities and urban areas oversee one church, with one or two more pastors on staff.

All the eleven churches needed new church buildings, including Mpataba. Both the church and parsonage needed an urgent replacement. Although I spent only 10 months at this post, by the time I left, five of the eleven churches had started building new churches, with the parsonage nearing two-thirds completion. The biggest challenge was financing all these building projects; however, that did not shift our focus from the most important thing—bearing witness to the kingdom of God within the community. The enthusiasm among the churches and the people in the villages was very contagious. The arrival of a young pastor (I was 27 years old), straight from seminary with fresh ideas, youthful, exuberance, and energetic, was almost impossible to overlook.

I was energized to work, and they were encouraged to worship. So together, we set off to work. We had a daunting task of building projects in front of us, yet we were contented to hold some of our Sunday services outside, under makeshift canopies, (made from bamboos and palm fronds) which were always fun, because other people from the community would stop by, join in the worship and give their offerings. They also served as outdoor evangelistic outreach services.

Our priorities were clear; worshipping God was our main reason for gathering and equipping the saints for the work of ministry was my calling.⁷ In this place of my first

⁷ Ephesians 4:11-16, “And He Himself gave some *to be* apostles, some prophets, some evangelists, and some pastors and teachers, ¹² for the equipping of the saints for the work of ministry, for the ¹³edifying of the body of Christ, ¹³ till we all come to the unity of the faith and of the knowledge of the Son of God, to a perfect man, to the measure of the stature of the fullness of Christ; ¹⁴ that we should no longer be children, tossed to and fro and carried about with every wind of doctrine, by the trickery of men, in the cunning craftiness of deceitful plotting, ¹⁵ but, speaking the truth in love, may grow up in all things into Him who is the head—Christ— ¹⁶ from whom the whole body, joined and knit together by what every joint supplies, according to the effective working by which every part does its share, causes growth of the body for the edifying of itself in love.” (NJKV).

pastoral assignment I discovered that when the churches were given clearly defined vision and purpose, everyone gave all their best. They were poor in material things, but the richness of God's grace gave them "joy unspeakable and full of glory." Not only did we see numerical growth in the churches, but we also experienced spiritual maturity as evidenced in the changed and transformed lives of holy living, love, generous giving, and exceeding joy.

One remarkable discovery for me was discerning that God is still in the healing and deliverance ministry. At that time I was reading Dr. Jack Deere's book *Surprised by the Power of the Spirit*. I was moved by the excellent and compelling arguments put forth in support of God's supernatural power working to heal and deliver God's children today. The following statement spoke to my innermost being as nothing has ever done before:

God is not in the business of gratifying our desires for excitement: nor in helping some of his children win arguments over others. He is in the compassion business. To the degree that you can enter into his compassion for the sick and for the hurting, you can be a vessel through whom the healing power of Jesus can flow. If you really want to be used in a healing ministry, as your heavenly Father to let you feel his compassion for the hurting.⁸

I took the cue and began to ask my heavenly Father to prepare me and allow me to serve in the healing ministry. Around the same time, my Superintended Minister asked me to be the main speaker for the Annual Circuit Camp Meeting coming up in a month. To say that I was both surprised and overjoyed by God's opened door will be a gross understatement. Needless to say, God showed up and showed off to the complete amazement and awe of us all. A turning point in my ministry had begun. Great signs of

⁸ Deere, Jack, *Surprised by the Power of the Spirit*, (Grand Rapids, Michigan: Zondervan Publishing House, 1994), 121

miraculous healings happened all around us; people traveled from nearby towns and villages bringing their sick to the Lord for healing.

With this positive evidence of God's gracious power to heal in our midst today, also came a huge embarrassing setback, which humbled me to the core. Around the time I was preparing to leave Mpataba to go further my education, a woman brought her three-year-old son, seriously ill: he looked already dead. It must be noted that in that part of the world, the closest hospital or clinic is miles away, and often time it is not easily accessible due to either bad road conditions or the absence of means of transportation. However, in this town, we had a health post with one nurse and a nurse's assistant working there. To cut a long story short, it was the nurse who advised the mother to bring the boy to me, because she could not find anything else to do to help him. I had a prayer team, so we immediately started praying, but deep within my heart, I knew it was not going to work. Yet I pressed on seeking God's favor for the boy and his mother, and us all. Later, someone found us a Taxi, and I took the child and mother to the hospital, where the boy died after a couple of days.

This incident, rather than discouraging me, set me on a deeper quest to know more about healing and deliverance ministry. I must say, I am still on this journey and have learned a lot more since then. But the truth is the more I think I know in this area, the less I know, requiring my total dependence and reliance on God. Nevertheless, God has been faithful and true in every direction. I may fail, other people may fail, but God never fails, and God's word is forever settled in heaven. Jack Deere puts it this way:

"I am sure that many people would come for the wrong reasons. Some would come to your church for entertainment...I am sure you would also attract a group of orthodox cult watchers, who having heard of the miracles, would come to disprove that any miracles had taken place, or failing that, to prove that the

miracles had been done by the Devil...As long as the gospel was preached with clarity and power, for then they would put themselves in a position to come under the convincing power of the Holy Spirit and be saved.”⁹

Where is my ministry?—The context for my work.

The Ghana Calvary United Methodist Church

I moved to the United States of America, following the dream to reconnect with my wife, Rebecca, who was then my fiancée. We met in 1996 in Ghana while I was studying at Trinity Theological Seminary and soon realized that we belong to each other. However, the next five years were anything but smooth and clear. While dealing with our cultural differences and worldviews and trusting God to enable us to discern what kind of future God has in store for us, we had to contend with the institutional roadblocks of the Methodist Church, Ghana. I was the first person in the history of the church to ever expressed interest in marrying an American Caucasian. Here again, I become an oddity, and strangeness colored even my marital life.

The challenges with which the church was struggling, as I was made to understand were these: how can my marrying an American Caucasian woman fit in the itinerant ministry of the church? Would the church be compelled to appoint me only in the cities and urban areas, where there were better resources and amenities to make Rebecca’s life convenient? If not, is Rebecca ready to live in the harsh conditions in the villages and rural communities, where we were likely to be stationed if we were permitted to marry? Of course, Rebecca was willing to live in any village. Frankly, at that time she had traveled to and stayed in villages that I never ventured going. These

⁹ Ibid, 223

challenging questions continued to engage the conferences of the church without any other alternative arrangement made for me.

In the year 2000 when I was readying myself for ordination, I was given an ultimatum: break my engagement and continue with the ordination process or quit the ministry and get married to Rebecca. This was very shocking and surprising, but as I reflected on it, my struggle boiled down to: was I ready to break fellowship with the church, which has nurtured and shaped me into becoming the Christian that I am; sponsored my calling and training to become a minister of the gospel of Jesus Christ? Was God calling me into an “unknown destination” like Abraham and Sarah? Was I ready to let go of Rebecca in pursuit of a ministry full of institutional bureaucracies and controls, and still fulfill God’s calling on my life? In the end, I “officially ended my engagement” with Rebecca and the church blew a sigh of relief.

Later, we both agreed that Rebecca should return to the United States that same year while I received my ordination. However, our relationship did not end there. We continued till the following year. As I was graduating from the Bachelor of Divinity (B.D.) program, it became clear to both of us that God is calling us into an unknown destination with a different ministry than the one which the Methodist Church, Ghana had envisioned for us. So we relocated and got married at Princeton Theological Seminary in July 2001, exactly two weeks after my arrival in the USA. The story of God’s call to Abraham became our prophetic mandate as we continued to discern and discover God’s direction for our lives. We quickly learned that to become who God created us to be, we

must leave our comfort zones and enter into God's "strange land" where God promises to bless us.¹⁰

I prefaced this section with the above description of my marriage to stress the important role my wife plays in the ministry. She has been very instrumental in the establishment and growth of the church. As I now pastor Ghana Calvary United Methodist Church, she serves as one of the Children's ministry facilitators and a member of the leadership team of the Women's ministry of the church. With her theological background (she holds M.Div. degree from Princeton Theological Seminary, from where both her parents graduated); and professional experience as a pediatric physical therapist, she brings a new and different flavor of compassion and love into the ministry which otherwise would be minimal in the church. Rebecca was born and raised a Presbyterian, with both parents who are retired, Presbyterian pastors.

I was the one called to be a pastor, not my wife; and both of us know it. But the ministry is not complete without the influence and the help of my wife. She became my first pastoral context, as I started learning to be a husband to a woman, who before we met was completely strange to my culture and I to hers.

As we follow God's leading and guidance, our main question was: what can we discover as we allow God to lead and shape us into becoming who we were called to be? We have discovered a lot since we started the church in 2006, yet there are many more surprises we continue to encounter daily. The road ahead is very uncertain, yet we continue to trust in the unfailing presence and guidance of the Holy Spirit to be with us every step along the way.

¹⁰ Feiler, Bruce, *Abraham: A Journey to the Heart of Three Faiths* (Harper Collins Publishers, Inc.: 2002) Audio Version

The church is predominantly Ghanaian, with 90% of the service conducted in English, with a Ghanaian style of worship, music, and dance. Originally located in the basement of Sanford Heights Presbyterian Church on 844 Sanford Avenue, Irvington, New Jersey, Ghana Calvary's vision is to minister to the Ghanaian community, reaching out to both the church and un-church with the gospel of Jesus Christ for the transformation of lives. The Church was established to become a United Methodist Church, but for the next nine years, we had to battle with a series of setbacks and roadblocks. The way forward was very uncertain, threatening to kill the church, but with the help of God and the commitment of the leaders, we sailed through. We were finally received into the Greater New Jersey Annual Conference of the United Methodist Church in May of 2015.

This good news also came with another challenge. The church was required to relocate to a UMC building. Fortunately or unfortunately, the readily available building that could accommodate our needs and preferences was in Montclair, NJ, a predominantly American Caucasian community. Moving from Sanford Avenue, which is one of the busiest streets in Irvington and also strategically accessible to most Ghanaians, became a very big challenge to the congregation. The move cost the church some of our founding members and key leaders of the church. This was a heavy blow that created a dent in the heart of the church. Morale was low, passions ran helter-skelter, and attendance declined. We have since recovered, but the struggle continues, and the ministry is exciting. After spending three years in Montclair, the church has now relocated again; this time to Verona NJ, where we hope to have a permanent place of worship.

I was called to be a pastor in Ghana to minister to Ghanaians within their cultural and traditional settings. I least dreamed to find myself married to an American Caucasian woman, living in New Jersey and ministering to Ghanaians in the diaspora. I have no regrets, for this journey of discovery has been the best adventure of my life. The members of the congregation are mostly first-generation immigrants, very strongly attached to their Ghanaian culture and traditions. But since we come from different tribes, we often find ourselves having conversations about what Ghanaian tradition(s) should be recognized and practiced. This has given birth to reading the Sunday scriptures in three languages: Akan, Ga, and English, an achievement that did not come easily overnight but is now celebrated as a cherished tradition of our church.

As first-generation immigrants, many of whom have only high school education and raising their children in a foreign land, members of the church face the challenges of sacrificing furthering their education in favor of working, usually low-paying jobs to secure their children's future. Having low-income earners for members of a congregation automatically translates to a weak financial status of the church. Hence, the need for me to become a bi-vocational pastor or a tentmaker-minister. Writing about the Episcopal Church and how the tentmaking ministry has contributed to the church globally, the Rev. James L. Lowery, Jr. says, "The tentmaker was one who carried on a Good News ministry supported financially by non-ecclesiastical work."¹¹ I needed to be able to support myself and my family while ministering to the church. So I became a hospice chaplain, another chapter in my life that I never thought possible. As will be seen later, my tentmaker ministry is not the typical one, because it is not a completely secular job or

¹¹ Lowery, Jr., James L. *Bi-Vocationals: Men and Women who enrich the human ecology and the World Surrounding Church, World, Community*, (West Conshohocken, PA: InfinityPublishing.com, 2006), 1

profession. It is providing spiritual care to people outside the four walls of the church or any congregation.

As an immigrant congregation, Ghana Calvary UMC is saddled with her equal share of peculiar challenges, including undocumented members facing language-barriers, cultural shocks, and threats of deportation; unemployed members struggling to make ends meet and keeping family together to prevent losing their homes. Additionally, African traditional beliefs and practices, with Ghanaian cultural undertones often seem to intersect with Christian doctrines and practices, creating tension within the congregation.

This particular tension has been dealt with in various ways, with no one particular solution at hand. Compounding the situation is the fact that most of the members of the church are either non-Methodists or used-to-be unchurched with no idea about Christianity and Methodism. Our membership is made up of former Muslims, professing Christians, and others, who used to serve under traditional shrines. The composition of the membership of the church naturally carved my job description as the pastor. If I was going to minister to these children of God in any meaningful way then my message must, as a necessity address the issues they face.

Consequently, I have played many roles of advocacy in the form of writing letters of accreditation on behalf of members seeking jobs and those filing for immigration documentation. I have worked with immigration lawyers within the community who agreed to take on cases that other lawyers refused to take. To the glory of God, all the members who were facing deportation have now become American citizens, a success story we always celebrate at our End of Year service on New Year's Eve.

Some members were arrested and put in immigration cells for months. Again, by the grace of God and through my advocacy and the intervention of legal personnel within the community, we were able to secure their release and got their immigration status normalized. This year, we have up to 20 members either becoming Green card holders or citizens. Considering the political climate in which we are, we deem this feat as a miraculous display of the power and the goodness of God.

To enhance this immigration ministry, we have networked with other pastors who are well versed in the field and some of the immigration lawyers within the community. A couple of times each year the network of immigration lawyers and pastors come to the church to do seminars on current and ongoing immigration policies and issues. Some of them take on new cases and work with the members till they secure their Green Cards. We have also extended this ministry to all undocumented people in and around our area and the results have been encouragingly exhilarating. There are still some difficult cases in which no certain future is in view. It will break my heart to see anyone deported yet. We are all sitting on the edge hoping and praying for divine intervention from God.

I am an immigrant who is now an American citizen, but I never had to deal with immigration lawyers, court cases, and other difficult processes that I see others going through, with many rejections. When I accepted the call to become a pastor, dealing with immigrants was never one of the possible areas of ministry I envisaged. In seminary, I took a course under Christian Ethics about Christianity and Immigration. I became passionate, in theory about our “God who is always biased in favor of the stranger.” I never thought of myself being in the position to help people with immigration challenges.

Yet I have discovered that my life is in the hands of God, who knows the end from the beginning, and I can trust that God will bring me to where I need to be at the right time.

Before closing this section, I have to mention that in 2017, I was honored when the Greater New Jersey Annual Conference of the United Methodist Church, invited me to be a part of the Conference Immigration Task Force. That year witnessed a lot of disturbances on the political platform when our President decided to end the Deferred Action for Childhood Arrivals (DACA) program. This immigration policy allows some individuals who were brought to the United States illegally as children to receive a renewable two-year period of deferred action from deportation and become eligible for a work permit in the U.S. The team was able to mobilize phone calls and personal contacts to congressmen and women in New Jersey to help stop the President from canceling the DACA program. We are thankful to God that congress could not get the mandate to cancel the program. Moreover, the team successfully organized a vigil in the immigration detention center in Elizabeth, New Jersey, which created awareness of the ongoing struggles as well as inviting God, who is biased in favor of the immigrant to lead us in the fight on behalf of God's children.

The Hospice Chaplaincy

My journey of discovering God's plan for my life and where God wants for me at any particular time took another dramatic shift in 2007. When it became clear that the church, I was pastoring could not financially support my family, I found it imperative to take another job. Upon prayerful reflection, I felt being called into chaplaincy ministry, since I was already in the healing ministry. During my Clinical Pastoral Education (CPE) training, my desire to become a hospital chaplain increased; I like praying for people to

be healed or get better adjusted with whatever conditions they have through the power and grace of God. To my surprise, right after my graduation, a hospice chaplaincy job was offered me without my applying for it. Indeed it was a moment of introspective prayers to actually discern if this was from God. In the end, God spoke to me in words similar to the following:

Many people do not have time for God when they are young and healthy...they are too busy running their lives to give God and church any attention, even though God has been with them and calling to them all the time. However, when they are faced with a terminal illness, all their guards are down...with nowhere or no one to turn to, they start seeking God, but they don't know how or where to turn to. You are going to be there to help them open up to God so that when they die, they will be delivered.

Since I had established in my heart to follow wherever God leads me, I had no argument or debate. I did have my trepidations though, not about death and the dying, but about how successful I would be since this was a completely uncharted and untested road for me. Once again, I had a test to trust the Lord who has called me. I must say, God has surprised me in these 14 years of ministering God's grace, comfort, and power to the dying and their families. I believe my childhood exposure to different religions and various forms of Christianity was God's way of laying that solid foundation for me. Hospice chaplaincy has brought me into contact with people of different religious affiliations.

Throughout all this process, God has proved over and over again that God is real and in believing we shall be saved. Atheists have turned to Christ Jesus and confessed Him as their Savior and Lord before dying. Families have jubilated over this turn of events and invited me to speak at funeral services. Muslims, Jews (religious and non-religious), Hindus, and Buddhists have all seen the goodness and grace of God in

sickness and death. Hospice chaplaincy has helped me discover so much about the mysteries of life, death, and the afterlife that I would not have otherwise known had I remained a congregational pastor. In hospice, I am enabled by the grace of God to help both patients and family, who under normal circumstances would not step foot in the church, to have an encounter with God.

Hospice patients and families have taught me that death should not be dreaded. When I preach the Easter story that through the resurrection of our Lord Jesus Christ, death, hell, sin, and satan have all been conquered, I affirm the fundamental truth of the Christian faith. But in hospice I see it being demonstrated in people's lives daily. I have seen people come on hospice with deep anger and fear about their prognosis. Without spiritual care, such patients and families go through unnecessary rocky and shaky processes of dying, which also complicates the grieving process.

Hospice companies provide bereavement support programs for 13 months, believing that one year is a reasonable duration to deal with the pain of the loss and prepare to move forward with life. For those who refuse spiritual care and chaplain's visits, the 13 months are usually very intense and are mostly insufficient for them. In such cases, we make referrals to external professional therapists and counselors for supports within their communities. I have had cases where after two years some families still come back with unresolved grief challenges.

The beauty of dying on hospice is the comfort of being in one's own home/family members' home, surrounded by loving, caring, and supporting families and friends. Being in such a familiar atmosphere mask the pain of death and provides a true sense of peace and comfort to the dying. Hospice provides a powerful tool for end-of-life dignity

and a measurable amount of control and independence of one's life and environment.

Writing about hospice care in her book *Midwife for Souls: Spiritual Care for the Dying*,

Kathy Kalina, herself being a hospice nurse, compares hospice care in the context of midwifery to traditional childbirth midwifery. She identifies the following stages in both cases:

1. The shock of diagnosis in a hospice patient is similar to the initial disbelief in a woman who receives the news that she is pregnant for the first time, even if she is planning for it.
2. Consulting professionals for the right kind of information about how to deal with the journey. The dying patient reads articles about the illness; the pregnant mother receives information from veteran mothers.
3. Time of spiritual search: dying person detaches from the world and the pregnant woman tries to do away with 'her pre-baby life.'
4. Period of Nesting: just as the pregnant mother prepares her home for the arrival of the new baby, the dying person does a 'reverse nesting,' giving away belongings, making funeral arrangements, and putting their house in order.
5. Embracing love: here the pregnant mother wonders how to make room in her heart to love the coming child. The dying patient expresses concern about loved ones and how to let go
6. Differences in the body: the dying body gets frustrated with their body as if it is the enemy, just as the pregnant mother feels her body has its own mind, it's out of shape and control.
7. Similar questions as the time approaches. Both the would-be mother and the dying person asks, "Will it hurt?" "Will I have my loved ones with me?" "What will it really be like?" "Will it take a long time?"
8. Natural process of birth and death. In giving birth the body naturally handles it well with minimal interventions. Similarly, there are self-protective changes in a dying body and any medical interventions only serve as prolonging and causing more pain and discomfort to the person and loved ones around.¹²

She concludes that "The goal of midwifery in childbirth is a healthy mother, a safe birth for mother and child, and a healthy baby. In midwifery for the souls, the goal is a comfortable body, a peaceful passage, and a triumphant soul."¹³ This is what *Sozo-*

¹² Kalina, Kathy, *Midwife for Souls: Spiritual care for the Dying* (Boston, MA: Pauline Books & Media, 2007), 6-7

¹³ Ibid.

Bereavement Ministry is all about; it is intended to ensure spiritual comfort and peace to the soul as the body begins to die and deliverance from this life into the next. Healing, in the sense of *Sozo*, is not always physical or pathological. In many cases, it includes salvation from this earthly life into life eternal, achieved only through death. I am very happy with what hospice chaplaincy has taught me; equipping me to support the dying, enhance peaceful death, easing both emotional and physical pain through clinical and spiritual interventions, and encouraging my patients to hold on to the hope of their final victory through the resurrection of Jesus Christ.

In my initial struggle to accept God's gift to be a hospice chaplain, I needed a scriptural foundation upon which to build my confidence and for the direction of the ministry, and God gave me Luke 23:39-43:

Then one of the criminals who were hanged blasphemed Him, saying, "If you are the Christ, save Yourself and us." But the other, answering, rebuked him, saying, "Do you not even fear God, seeing you are under the same condemnation? And we indeed justly, for we receive the due reward of our deeds; but this Man has done nothing wrong." Then he said to Jesus, "Lord, remember me when you come into your kingdom." And Jesus said to him, "Assuredly, I say to you, today you will be with me in Paradise" (NKJV)

Just as Jesus graciously promised paradise to this criminal without condemning him or demanding that he fulfill any religious conditions, so God graciously offers salvation and eternal life to every dying person who will open his/her heart like this dying criminal.

My role as a hospice chaplain is, after all, not any different from my responsibility as a congregation pastor. In the former, there are no definable boundaries, formalities, and creeds. Every patient from any background is my parishioner. With the latter, there are specific creeds, doctrines, places, and times of worship; and administrative structures

to observe. Yet, I have come to appreciate both as God's designed media of reaching out to God's children to give them comfort, peace, and eternal life here and hereafter.

Where are we?—The Larger context of the 21st Century Culture:

For many Christians, contemporary culture is going down the drain faster than dirty dishwater. Politicians cheating on constituents as well as spouses, appear more interested in their privileges and perks than the welfare of America. Business leaders bilk investor out of billions, while gilding their own nest-eggs. Hollywood celebrities check-in and out of rehab faster than finches at a bird-feeder. And media pundits wallow in the mud, slinging dirty denunciation at anyone who disagrees with their political opinions.¹⁴

The quote above from Crystal L. Downing accurately sums up the current larger culture where my ministry of serving our Lord Jesus Christ takes place. The description above about our contemporary culture sounds very bleak and discomfiting, making it seem like it is the worst of all generations, and that there is no hope for this generation. But as Downing herself noted, "Even though advances in technology alter the tools with which people commit abusive and destructive acts, 'public principle,' and 'private honesty' have long been lamented."¹⁵ It seems that in every generation and culture there is a strong decry against the current situation and a sentimental romanticizing of the past as the "good old days." So if this is how every generation deals with its peculiar challenges, then our contemporary culture is not an exception.

The political atmosphere in which we minister has created a lot of fear, uncertainties, mistrust, and suspicion of neighbors, co-workers, and schoolmates. Immigrants dealing with their documentation issues, look over their shoulders when

¹⁴ Downing, Crystal, L., *Changing Signs of Truth: A Christian Introduction to the Semiotics of Communication*, (Downers Grove, IL: InterVarsity Press, 2012), 37

¹⁵ Ibid.

walking down the streets. Immigrant families are being torn apart without prior notice or further information about where to find their loved ones. People are being picked up in busses, trains, airplanes, and from workplaces, and are being sent to detention centers, without giving them enough time to reach families and friends. Within a short time, many of them are being processed for deportation. This political milieu has created panic and is affecting immigrant churches in a very negative way. Undocumented members who are afraid have minimized their church attendance; others quit their jobs unceremoniously.

On the positive side, we see that this situation has created the opportunity for the church, which has intensified her prayers for its unfortunate members and other victims. This has generated a spiritual high fervor in some churches. Some pastors, who see the seriousness of the situation, are grabbing the bull by the horn by providing safe sanctuaries for immigrant families. Others have created cell groups in the communities through which the church is brought to the members in their homes instead of making them risk the chance of getting arrested on their way to church.

In Ghana Calvary UMC, a hospitality ministry has been launched to assist affected members financially and other means deemed necessary. These times call for prophetic advocacy to stir up action on behalf of the marginalized and disenfranchised of our time. Prophetic advocacy must be in word and deed, like the Prophet Jeremiah in the First Testament, who preached the word actively as well as acted it by carrying a yoke around Jerusalem.¹⁶ In her book *Prophetic Preaching: A Pastoral Approach*, Leonora Tubbs Tisdale suggests that:

...one of the most unnerving things about a prophetic witness is that it often requires the prophet to put his or her body on the line on behalf of

¹⁶ Jeremiah 27

the Word proclaimed...Yet this very costliness also makes it part and parcel of the gospel Jesus came preaching and living: a gospel that repeatedly reminds u that it is only as we lose our lives for the gospel's sake that we find them.¹⁷

One way we can do this is to remember and remind ourselves that immigrants are also human beings, created in the image of God, who need respect and value as any other human being. Writing about this as a human rights issue, M. Daniel R. Carroll points us to the beginnings of all things, stating,

If one takes what the Bible says in Genesis 1 seriously as a revelation from God, then what it communicates about humans becomes a divine claim on Christian attitude and actions toward those who have arrived in the country—irrespective of whether they are here with or without the documents the government might mandate.¹⁸

It seems that the immigration issues in this country have divided the Body of Christ into factions, yet those who feel the call of God to speak and act on behalf of godly and humane immigration policies and procedures in the country are growing stronger in their efforts and zeal.

The larger current culture as it relates to the hospice ministry is that many people profess to be Christians but have been unchurched in most of their adult lives. Many people who come on hospice care (both patients and families) have no active membership or affiliation with any church, although some of them recount with nostalgia, their childhood Sunday school experiences. Yet most of these patients and family are open to God in the most humble and submissive ways imaginable.

¹⁷ Tisdale, Leonora Tubbs, *Prophetic Preaching: A Pastoral Approach* (Louisville, Kentucky: Westminster John Knox Press, 2010), 89-90

¹⁸ R. Carroll, M. Daniel, *Christians at the Border: Immigration, the Church, & the Bible*, 2nd Ed. (Grand Rapids, MI: Brazos Press, 2013), 47-48

Unfortunately, some of them embrace faith as long as their loved one is around but after death comes, they gradually slip away and go on with their lives without getting actively involved with God and church life. Others move on into a deeper spiritual journey and continue even after their loved ones have passed on. Yet still, there is encouragement, because the visible church as identified by local congregations, denominations, and the fellowship of all believers, does not exhaust the parameters and composition of the church as the Body of Christ. As the Lord Jesus Himself stated, “And other sheep I have which are not of this fold; them also I must bring, and they will hear my voice, and there will be one flock *and* one shepherd.”¹⁹ God has other people outside the visible church and Jesus is not only working on bringing them into the fold, but He prays for them also: “I do not pray for these alone, but also for those who will believe in Me through their word; that they all may be one, as You, Father, *are* in Me, and I in You; that they also may be one in Us, that the world may believe that You sent Me.”²⁰

Finally, the tension between African Traditional Religions and Cultural practices, and the Christian faith and practices as witnessed within Ghana Calvary UMC, finds its expression within the wider current religio-political society of the African community. The African is notoriously religious and it is very difficult to extricate all religiosities from them. Quoting Mbeki in his article, “Christianity and the African traditional religion(s): The postcolonial round of engagement,” a Research Associate of Department of Old Testament Science, in the University of Pretoria, South Africa, David T. Adamo writes, “many millions of Africans are followers of more than one religion, even if they

¹⁹ John 10:16 (NKJV)

²⁰ John 17:20-21 (NKJV)

may register or be counted in the census as adherents of only one religion is correct.”²¹

This is because Africans are by nature, result-oriented, who look for answers through religious beliefs and practices—results that affect their everyday lives.

Being a Christian does not mean one is completely separated from the roots of African beliefs. Some Christians would secretly consult the Traditional priest or priestess during times of sickness or difficulties in life. Usually, through divination and sorcery, a case is diagnosed and a prescription provided. Interestingly, most of the diagnoses shift blames on someone trying to put a curse on another person, or some household witchcraft causing someone else’s suffering. While there may be some truth to some of these claims, it is clear that not all that people go through are the result of spiritual attacks. Thus, it is not uncommon to see some Christians with some form of talisman or amulet on the bodies, in their vehicles, workplaces, or somewhere in their houses. One does not necessarily have to be a devotee of any particular shrine or deity, as long as they follow the prescribed rituals purported to produce the desired results.

With the rise of Christianity and the increase in the number of independent churches across the African continent, there is a decline in patronizing the shrines of the traditional priests/priestess. This is because the same *spiritual practices* of sorcery, divinations and visiting omens have been brought into the church by some quack pastors.

Among the majority of Ghanaian independent churches both back home in Ghana and in the diaspora, ‘prophetic ministry’ is on the ascendency. However, what is being practiced is more akin to divination and sorcery than biblical prophecy. Unfortunately,

²¹ Adamo, David T., “Christianity and the African traditional religion(s): The postcolonial round of engagement,” This paper was originally presented at the World Reform Fellowship Conference, Krugersdorp (Agterberg Center), South Africa, 23–25 September 2008.

that is where the majority of Ghanaian Christians are flocking to these days. Most of the leaders of these churches do not refer to themselves as Rev. Ministers or Pastors. They are ‘Prophets’ and ‘Apostles.’ The abysmal result is that these so-called ‘prophets’ and ‘Apostles’ are exploiting their followers for wealth, material gains, making claims of divinity, and plunging people into deeper sufferings and the power of darkness. A clarion call of all God’s servants to rise to address the situation has gone out and pastors within the Ghanaian community are rising to the occasion. Churches are addressing the issues in the pulpit and seminars are being held to educate members of the church.

According to the Lutterworth Dictionary of the Bible, “The practice of divination attempts to contact the supernatural powers to attain answers to questions that usually involve the future and lie beyond human control.”²² The methods used in this practice include foretelling of the future by natural signs, mixing liquids (hydromancy), casting omens, or lots, astrology, consulting the dead (necromancy), and interpreting dreams. All of these were severely condemned in Deuteronomy 18:10-12:

There shall not be found among you *anyone* who makes his son or his daughter pass through the fire, *or one* who practices witchcraft, *or* a soothsayer, or one who interprets omens, or a sorcerer, or one who conjures spells, or a medium, or a spiritist, or one who calls up the dead. For all who do these things *are* an abomination to the Lord, and because of these abominations the Lord your God drives them out from before you (NKJV).

The New International Dictionary of the Bible categorizes sorcery under magic with the following explanation, “In a word, magic, is [human] attempt to make the future secure, whether by trying to find out about it in advance or by casting spells to make

²² Mills, Watson, E. Gen. Ed., *The Lutterworth Dictionary of the Bible*, (Cambridge: The Lutterworth Press, 1994), 539-540

things happen in a predetermined and favorable way.”²³ None of these practices can be described as prophecies by biblical standards and yet that is what the mainstream independent churches among Africans observe, practice, and promote; and the majority of Christians patronize them. Due to the similarity of these practices with the African traditional religious practices mentioned earlier, it is not easy for the ordinary African Christian to differentiate between the two. This is where the ministry of the 21st-century African pastor like me is direly relevant and needed. More biblically sound education is needed from the pulpit to address these abysmal situations and help the people to embrace true Christianity devoid of spiritism.

Conclusion

Prof. Leonard Sweet encourages that “As we join the Lord of the Dance in the art of pilgriming (being on the way), we form a community of followers, each relationally on the move and interested in each other’s life.”²⁴ Indeed, when the Lord called me into this journey of discovery, from my childhood to the present, little did I know that I will be able to establish a church, in the United States, become a hospice chaplain caring for terminally ill patients and family, providing extensive bereavement services, and helping with immigration issues. Truly, there have been some costs, but the price of leaving the safety and comfort of the land of my birth and my folks, following the Lord Jesus into the unknown, is nothing compared to the rich discoveries of God’s amazing purpose for my life, through His grace and power in creating something wonderful out of nothing.

²³ Douglas, J. D. & Tenney, Merrill, C., *The New International Dictionary of the Bible*, (Grand Rapids, Michigan: Zondervan Publishing House, 1987), 612-613

²⁴ Sweet, Leonard, *I am a Follower*, 9.

It is worthwhile because I left my family back home but I have gained a bigger family while still connected to my roots. My eyes are opened to new realities and horizons far beyond what I imagined possible. The journey has not ended; I am excited about the next stage and level God is going to lead me. I thought I would return to Ghana after obtaining a Ph.D. degree in Old Testament studies and teach in the seminary. However, God created this journey for me, bringing me into this D.Min program. I now find myself on this path and I trust the Lord to lead me into deeper discoveries that will enable me to serve God and the community better.

I have discovered that following God through Jesus Christ does not come with a road map with step-by-step and turn-by-turn directions. It requires complete faith and reliance on God, who knows the end from the beginning. I don't need to know what the future holds for me at any given time, all I need to concern myself with is that God holds the future and in God's great goodness and compassion, divine guidance will bring me to where I need to be. It is a thrilling mystery and I am enjoying the ride.

CHAPTER TWO

Understanding Bi-Locational Ministry within the Context of a Pastor and a Hospice Chaplain

Introduction—One Vocation, Two Locations

The phrase “bi-locational ministry” was borrowed with permission from my professor Rev. Dr. Gary Simpson, who introduced it during our one-on-one phone conversation to discuss the parameters of this paper and my overall ministry. As a head-pastor and professor himself, Dr. Simpson believes that we are not called into two (or more) different vocations, but rather that God has called us into one ministry, which can be expressed in different contexts. I must admit that although I have not completely grasped the full ramifications of this “new concept,” the idea is so tantalizing that I have decided to use this chapter to plumb some of its depths. I have always believed that I have a bi-vocational ministry: working as a pastor of a local congregation as well as ministering as a hospice chaplain. Like others, I used to understand that this trend of ministry is modeled after the Apostle Paul, who supported himself by making tents, hence “tent-making ministry.” My understanding was further strengthened by my father-in-law, Rev. William H. Dodge (retired), who worked as a pastor and a professor at Rensselaer Polytechnic Institute, Albany, NY. For as long as I have known him, he referred to himself and others in a similar category as “tent-makers,” describing ministers who support themselves by working other jobs.

The general worldview of bi-vocational or tentmaking ministry is that of ministers who support themselves financially by working secular jobs. As stated above, the Rev. James L. Lowery, Jr. has indicated that the tent-making ministry has contributed to the

church globally and has enabled pastors to financially support themselves through securing another occupation.²⁵ This understanding has influenced my outlook until recently. Attempting to depart from this way of looking at ministers working in multiple contexts, one needs to take a glance at the different categories of Tentmakers.

The first category is comprised of those who take the route of seminary training seeking ordination and afterward either personally decide to seek additional employment of interest to them or are made to do so by the financial constraints of the congregation. The second category is made up of people who come into the ordained ministry already employed in a profession. Again, such individuals may either choose to continue to serve in the local congregation in addition to their professional careers or might be put in that situation through the appointment of the denominational head. In either case, Lowery believes that bi-vocationals or Tentmakers contribute immensely to God's Kingdom²⁶ I believe my interest in ministering in multiple contexts is grounded in the work of the Apostle Paul. According to Acts 18:1-4,

After these things, Paul departed from Athens and went to Corinth. And he found a certain Jew named Aquila, born in Pontus, who had recently come from Italy with his wife Priscilla (because Claudius had commanded all the Jews to depart from Rome); and he came to them. So, because he was of the same trade, he stayed with them and worked; for by occupation they were tentmakers. And he reasoned in the synagogue every Sabbath and persuaded both Jews and Greeks. (NKJV)

Here we see Paul supporting his ministry by working in the marketplace as a Tentmaker. He, therefore, is the model of bi-vocational ministries. However, the more I reflect on Prof. Simpson's idea of "one calling expressed in more than one context," the

²⁵ Lowery, Jr., James L. *Bi-Vocationals: Men and Women who enrich the human ecology and the World Surrounding Church, World, Community*, (West Conshohocken, PA: InfinityPublishing.com, 2006), 1

²⁶ Ibid., 4

more sense it makes for me. So I now see myself as a disciple of the concept of bi-locational ministry for one major reason that both hospice chaplaincy and congregational pastor are not secular jobs.

A Working Definition

I am therefore adopting the phrase “bi-locational ministry” to discuss the nature and scope of my calling. I will look at myself as a ‘traveling-healer’²⁷ ministering both in a local congregation (Ghana Calvary United Methodist Church) and in Homeside Hospice. For this reason, I will define a bi-locational minister as one called to serve God in one or more capacities within different contexts. A bi-locational minister can be working as a clerk in the bank during the day and as a clergy in the church in the evening or vice versa. In this case, one is tempted to differentiate between ecclesiastical work and a secular job. However, such a distinction is overruled in this paper. I believe that God calls us into ministry, which is making disciples of all cultures of the world.²⁸ And whether a person is working as a Physical Therapist, a Fisherman (like the Apostles Peter, James, Andrew, and John), an Internal Revenue Officer (like Matthew) in addition to serving as an ordained minister, the person is still fulfilling the one calling in more than one setting and capacity.

My focus will be on one ministry in two locations. The first location is the local church. We shall look at the historical background and the demographical make-up of the

²⁷ Courtesy of Dr. Gary Simpson who introduced this metaphor as he listened attentively to my description of the extent of my calling and ministry.

²⁸ The Great Commission in Matthew 28:18-20, “And Jesus came and spoke to them, saying, ‘All authority has been given to Me in heaven and on earth. Go therefore and make disciples of all the nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit, teaching them to observe all things that I have commanded you; and lo, I am with you always, *even* to the end of the age.’ Amen.”

congregation, the various ministries, and their impacts on the larger community. What I do in this location as a pastor, its relevance, and how it shapes and prepares me as a traveling-healer will also be explored. The second location will be the ministry within the hospice chaplaincy context. The specifics of what I do as a traveling-healer, the geographical contexts where this ministry takes place and the persons with/to whom I minister will also be discussed. Finally, I will look at the challenges and privileges associated with this charge; what is it that inspires and keeps me going.

The First Location—Ghana Calvary United Methodist Church.

Finding the Right Soil for Planting

Ghana Calvary United Methodist Church evolved from another Ghanaian Church in Newark, NJ called Ghana Emmanuel Methodist Church, where I pastored for three years. After a few years, it became clear that some of the members of the congregation, led by some leaders had a vision that was different from that of the church. We had agreed to work towards becoming a United Methodist Church, but that vision was being undermined by a faction of the congregation. As time went by, through God's providence, the church prayerfully agreed that those who wanted to continue as United Methodist congregation should leave and pursue that dream, while the rest remained and continued ministering under the auspices of the Methodist Church, Ghana Conference. Although this turned out to be a very ugly separation, the outcome was the birth of another church pursuing the vision perceived to be birthed in us by God.

On October 1st, 2006, a new church was planted with the name, Ghana Calvary Methodist Church. Seventy-six (76) people attended the maiden service that day and registered to be members of the church. The garden was planted with 76 seeds sown in

joy and with great enthusiasm and expectation, but the nurturing and growing seasons were not going to be easy. As the founding pastor, I saw myself as the ‘chief-keeper’ of the Lord’s infant garden; the responsibility fell on me to train new leaders, establish governmental structures and help grow the various ministries that would eventually build the congregation, while all the time keeping our original vision alive. I had been in the ordained ministry for nine years by this time, three years of which were spent in the seminary pursuing another degree. Yet I felt like this was my first time pastoring a church. We were reinventing the wheel, so to speak; mainly because our vision of becoming a United Methodist Church was met with one challenge after another. Consequently, the church remained without any denomination or conference authority, a situation that did not augur well for me and the congregation.

We felt like the garden did not have a protective fence around us; without the denominational authority, we were exposed to outside influences of ideas, which served as predators against this nursery garden. I felt like a fish out of the water; I did not have a denominational authority over me for resources. I had no one to supervise me in the ministry; and no connectional fellowship with other churches of the same tradition. I still maintained my ordination with the Methodist Church, Ghana, but the conference back home decided they would not back me up with the vision of joining the United Methodist Church. Therefore, I felt alone and lonely.

A sense of *déjà vu* came upon me. I had been here before. I was then a young boy in Ghana, growing up as the ‘odd one’ among my family. That unique situation accorded me special opportunities to become who I am now. Being emboldened by the memory, I harnessed the strength from this peculiar situation and used it to lead the church as God

would have it. We took advantage of our Methodist heritage and started drawing from the tradition that has helped build the denomination. To accomplish this goal, in those days the adage, “standing on the shoulders of giants to see afar” became a daily reality for me. I would consult with other Ghanaian Methodist pastors, who helped the leadership of the church to prioritize our objectives and develop a plan of achieving them sequentially.

We started with a series of leadership training programs organized to help shape the kind of leaders the church needed. At the end of the second year of our existence, we had worked tirelessly and cohesively to develop all the organizational/governmental structures, including our by-laws and all the administrative leadership structures. Our first goal was achieved. Next in line was developing ministry goals. This was the easiest part since some of the members had been in some of these ministries before. We established five ministry groups: namely the Men’s Fellowship, the Women’s Fellowship, the Church Choir, the Youth Fellowship, and the children’s ministry (commonly called Sunday School).

In the years to come, these would be modified, and others added on. Along with the ministries was the task to nurture Lay Preachers; again I sought help from various pastor-friends from New York and Canada, who readily and dutifully assisted in providing not only their time in teaching but also gave us resource materials, which became a very valuable set of documents second only to the Bible and our by-laws. We kept moving forward on this path at a steady pace till we reached where we felt stable enough to move to our next goal, which was the affiliation with the United Methodist Church.

The Various Soils of the Church—the Nursery Soil, Irvington, NJ

Ghana Calvary UMC, as we now call ourselves started at the basement of Sanford Heights Presbyterian Church on 844 Sanford Avenue, Irvington New Jersey. Getting this location was a miracle of God in itself. As the founding members organized home-based Bible Studies, rotating from house to house, we were faced with the question of where the church was going to be situated. We gave this need a prayerful priority as we continued to search within Essex County, where we believed most of the church members lived. In August of 2006, we received news that Sanford Heights Presbyterian Church was being rented out. I quickly reached out to the committee in charge of managing the church building, which was headed by one of my pastor-friends, Rev. Dr. Ebenezer Obiri Addo, the then pastor of the First Presbyterian Church in Irvington, NJ, and a professor at Drew University. The news we received was not encouraging, but we trusted that God would make a way for us. Several churches had applied for that space ahead of us; we were the last in line. All the churches wanted to worship in the main sanctuary, but we asked for the basement (which was in a complete state of disrepair), to be renovated for us.

In the meantime, on October 6th of the same year, we had our maiden service and started worshipping in the main sanctuary at night, until the basement was completed. We joyfully moved into the basement on December 3rd, 2006, where we remained till November 2015. In Irvington, the church grew in numbers and in commitment to the Lord, which led outreach programs in the community. Sanford Avenue in Irvington became our nursery soil. The Lord, our Great-Gardner, planted us here and we believed we would flourish. As a Ghanaian congregation, the church seemed to flourish due to the proximity of its location to the Ghanaian communities in and around the Irvington and

Newark areas. The location was so strategically helpful that some members used to walk to church and back. This soil was providing nourishment and we were growing; it was like all the branches were strongly and tightly connected to the True Vine, Jesus Christ, our Lord while remaining truly connected with the larger community.

Irvington was a great location for outreach in the community; passion grew, members were excited about the ministry. To reach out to members and attract new ones, we divided the leadership into zip-codes for home-based Bible studies, ministry planning, and implementation. This continued successfully for a few years until other concerns engaged the attention of the leadership, and gradually loosened our connectedness with the True Vine. The major concerns, which became our distraction, were safety and security issues; our vehicles were vandalized, thieves were breaking into the church building and stealing properties. Our landlord did what they could to provide security on the windows and doors, but it did not solve the problem.

We also dealt with panhandlers regularly. Anytime the church doors were opened, whether day or night, somebody would walk into the service demanding to see the pastor. On a few occasions when I had the time, I met with some of them, ministered to them, gave them food and clothes (I never gave anyone money). The regular ones became my friends and attended service occasionally until we moved from there.

To make matters worse, during Hurricane Sandy, there was a major flood in the basement, which damaged most of our properties. Since then, any major storm would cause the basement to flood. Our garden was flooding regularly, 'enemies' were attacking us; we started seeing some of the members leaving, budding plants were being uprooted before they reached maturity. We dealt with the situation as best as we could. But

eventually, the congregation got tired of Irvington and worshipping in the basement. All energy and resources seemed to be focusing on these issues. They were at the top of every meeting discussion and prayer topic. We saw a decline in passion and enthusiasm as ministry stalled with energies seeping out of us. It was time for the transplantation of Ghana Calvary to new soil. The church had reached a stage of growth that the nursery box-soil could not sustain.

A decision was, therefore, made to look for a place to purchase and move out. A committee, led by the pastor, was set up for that project. Needless to say, all effort for the next eight (8) years proved futile. Either the place we would find was not conducive for us or that another buyer would step ahead of us before we could get the bank loan to move forward with the purchasing process. \After prayerful consideration, we came to a definite conclusion that God does not want the congregation to buy. The specific message was that “God does not want the church to owe a mortgage loan.” We took this as a confirmation that God wants us to move but not the way we thought. Therefore, in 2014 we put a stop to the project and dissolved the committee. That is when God opened an unexpected door for us so that in November 2015 the church moved to Montclair, New Jersey, where we shared the facility with the First UMC of Montclair. The details of this move and how it affected Ghana Calvary would be discussed in the next section under “Affiliation Process.”

We learned a major lesson during this process; I had been led by the Spirit of the Lord to inspire the congregation for this project with the story of Jesus calming the storm in Mark 4:35-41. We believed that God was calling us to “cross over to the other side” (vs. 35). However, like the disciples of Jesus, we did not bother to commit the project to a

serious prayer; we thought to know the will of God was simply enough. With hindsight, we now know that to fulfill God's plan we need to seek God's ways, God's timing, and God's resources. We got so excited about the prospect, we had saved some money for it, and so we felt prepared and equipped for the task. It was only when all our efforts and resources have failed us that we cried out to God, "Do you not care that we are perishing?" the Lord being the same yesterday, today, and forever, did not leave us to drown in our unbelief and self-exaltation; Jesus brought His peace to the storm and provided us a way to reach the other side. Now, the church has made it a rule never to embark on anything, be it a project, mission trip, local outreach program, or special event within the church without first praying for God's specific direction and timing. Dr.

Leonard Sweet captures this situation succinctly in his book, *So Beautiful: Divine Design for Life and the Church*,

The crisis of the church today has little to do with dwindling numbers, aging congregations, outdated facilities, financial crises, and lace-by-day/leather-by-night priests. Today's church crisis stems from one thing: Jesus Deficit Disorder. The church's narrative is biblically, theologically, and spiritually bankrupt. The church has been busy telling stories other than God's story, dreaming other dreams than God's dream as revealed by Jesus.²⁹

We learned this the hard way when we decided to go our way after we thought we discovered God's will for us. Not again.

On outreach and evangelism in Ghana Calvary, the words of Dr. Leonard Sweet can profoundly exhort, "The church that is missional had better know how to attract people to Christ. Come is a good word. Evangelism is come to Christ and come to

²⁹ Sweet, Leonard, *So Beautiful: Divine Design for Life and the Church* (Colorado Springs, CO: David C. Cook, 2009) Kindle edition, 22

community, or best of all, evangelism is announcing that Christ has come to you.”³⁰

Ghanaians, like all Africans, are very celebratory and extravagant. At every significant stage in life, there is an elaborate celebration: the naming of a child is mostly done early in the morning on Saturdays, followed by all day eating and drinking and dancing. After baptism on Sunday service, the celebration may continue with close family and friends.

Similar elaborate celebrations are done for weddings, funerals (traditional funeral rites are different from the funeral service at church), and birthdays. Such parties take all night long, usually on Saturdays. We use these occasions to distribute flyers, preach very brief evangelistic sermons (mostly at traditional funerals rites) and invite people to give their lives to Jesus. Some of our members have come to church through such invitations and commitments. According to David Schnasa Jacobsen and Robert Allen Kelly in their book, *Kairos Preaching: Speaking Gospel to the Situation*, “People come to funerals expecting to hear something that helps them makes sense of the fact that every life ends in death, that helps them to make sense of the particular life and death of the person being buried, and that helps them makes sense of their own life and eventual death.”³¹ We recognize that there are two categories of people who attend funerals; those open and vulnerable to the message and those who, for some reason very defensive and critical of the word. Either way, I use this occasion to deliver the “clear word of God’s unconditional promise.”³²

This is a very important community outreach outlet, which when handled well also yielded positive results. Now and then, few people would loudly protest during

³⁰ Ibid., 18

³¹ Jacobsen, David Schnasa and Kelly, Robert Allen, *Kairos Preaching: Speaking Gospel to the Situation*, (Minneapolis, MN: Fortress Press, 2009), 42

³² Ibid, 43

prayers. When that happened the organizers of the function immediately get them escorted from the premises. This cultural context within which Ghana Calvary expresses its faith is so beautiful and fulfilling. But can also be challenging at times due to some perceived conflicting cultural practices with that of Christianity. We believe as Clifford Geertz shares in his book, *The Interpretation of Cultures*, "...sacred symbols function to synthesize a people's ethos—the tone, character, and quality of their life, its moral and aesthetic style and mood—their world view—the picture they have of the way things in sheer actuality are, their most comprehensive ideas of order."³³ The Ghanaian embraces his/her culture as sacred and therefore, subjecting its principles to Christian values sometimes creates a big conflict. But, we have succeeded in easing the tension by seeing Jesus our Immanuel, with-us-God, who is in every culture, for every culture but also above every culture.

As a pastor, I am always supposed to be there to pray and speak on these occasions. In my absence, the Lay Leader or any of the leaders would perform the duty, which usually does not sit well with the people. They want their pastor to be at every gathering. Yet they know that is impossible. These are some of the times when one wishes that Yuval Noah Harari's prediction of Artificial Intelligent computers would be available now so that pastors can program customized prayers, teachings and sermons, and send them to places and events they cannot physically be present. I would love to have something like a Rev. Nathan Addo-Nartey AI robot speaking at a gathering, saying a prayer at a traditional funeral rite, or interacting with a new believers' class.³⁴

³³ Geertz, Clifford, *The Interpretation of Cultures* (New York, NY: Basic Books, 1973), 89

³⁴ Harari, Yuval Noah, *21 Lessons for the 21st Century* (New York, NY: Spiegel & Grau, 2018), Kindle edition

*Becoming United Methodist:
The Affiliation Processes in the Nursery Soil*

As indicated above, Ghana Calvary UMC was born out of a need and a call to belong to the United Methodist Church. Our vision is to “minister to the Ghanaian community, reaching out to both the churched and the un-churched with the gospel of Jesus Christ for the transformation of lives.” The goal of every immigrant is to improve his/her life economically, educationally, professionally and for some, it is for political security. We believe that Jesus is the only way to an improved life and that He is ready to save everyone including immigrants and offer them a better life. To achieve this vision, we needed to belong to the United Methodist Church, which offers resources and leadership in the area of evangelism, global outreach/missions, and immigration advocacy; but for the next nine years, we had to battle with series of setbacks and roadblocks.

The way forward was very uncertain; filled with palpable frustrations that were threatening to kill the church. Again, the Lord provided, and through the commitment of the leaders, we sailed through. We finally, were received into the Greater New Jersey Annual Conference of the United Methodist Church in May of 2015. In December of that same year, the church was chartered at Montclair, NJ by the Bishop of Greater New Jersey Annual Conference, the Rev. John Scholl at a service full of funfair, joy, and passion for the future possibilities of the mission.

Montclair, NJ—The Wilderness of Healing and Reconciliation

As stated above, the move from Sanford Avenue, which is one of the busiest streets in Irvington and also strategically accessible to most Ghanaians became a very big challenge to the congregation. This transition cost the church some of our founding

members and key leaders of the church. This was a heavy blow that created a dent in the heart of the church. Very soon, we were witnessing schisms and factions right before us, while everyone felt helpless to do anything about it. This was eating up the church from within. The beautiful plants in the Lord's garden were turning into wild plants, attacking each other. Through a series of unity and reconciliation programs, services and activities, we managed to settle down with the rest of the members who remained. Our numerical strength of 250 members shrunk to 162 adults and children. Consequently, we faced the question of how the church can thrive and make a relevant impact on "unfamiliar soil."

Not only did we change locations, but we also were compelled to change our time of worship, moving it from 10:30 am to 12:00 pm, another discomfoting challenge to many of our members. The members who work in healthcare had scheduled themselves so that they could come to church in the morning and go to work in the afternoon. Now, worshipping in the afternoon meant that they could not attend services, which naturally led to a decline in church attendance in Montclair, NJ. We could not embark on an outreach program to increase our membership since we had a dire need to heal the wounds of the members. We did not see Montclair as the soil for growth; rather it was the wilderness of reformation, healing, and reconciliation. We spent the next three years bringing in ministers and resource people to speak to the congregation. To the glory of God, by the end of the year 2018, the atmosphere of the church and the attitude of the members had returned to harmony and joy; and a great sense of purpose was restored in the congregation.

Since we recovered from the trauma, the health of the church has been restored. Strength and desire for ministry are returning slowly but steadily. However, we are still

dealing with the effects of the transition; this time God has led us to Verona NJ, where we hope to have a permanent place of worship. Verona is on the north-west side of Montclair, an additional 10 minutes away from the center of the Ghanaian community. We hope to see Verona as the soil for fruitfulness in ministry and mission as well as maturity in fellowship.

Demographic Information

The terroir of Verona, NJ

According to the 2010 census, the total population of Verona was 13, 332, but the American Community Survey's 5-Year estimates put it at 13,585 in 2017. In 2012, 97% of the people of Verona were either high school graduates or had obtained higher degrees. The same data estimates the mean household income at \$145,714, while individuals who live below the poverty level are estimated at 2.8%, making Verona township one of the affluent communities around. The predominant race of Verona is Caucasian. Of the 13, 332 people in the town, 12,100 are Caucasian. Only 269 Blacks or African Americans are reported living in Verona, which creates a very challenging situation for Ghana Calvary UMC, made up of Ghanaians. People of Asian descent number 864, and 749 are of Latino or Hispanic descent.³⁵

In contrast, Irvington, NJ has a total population of 53, 926, of which 46, 058 are Blacks or African Americans (85.4%) and 3042 (5.6%) being Caucasians.³⁶ This is where the majority of our church members live and work with a mean household income of \$51,745.³⁷ Here the church seemed to be at home because of the familiar soil. Members

³⁵ https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml?src=bkmk

³⁶ <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

³⁷ *ibid*

of the congregation lived near each other; the community itself is predominantly Black, making it easy to relate to the people with similar lifestyles and standards of living.

The leaders and I have visited our neighborhood residents and churches in the town to introduce ourselves to them to find common grounds of understanding and to enable us to do ministry together. We hope to bridge the gap between the “usness” and the “otherness.” I believe differences in ethnicity, race, education, economics, education, status in society, etc., should not be used as barriers to divide people. Rather all these differences can be seen as beautiful qualities that can be harnessed to bridge the chasm existing within human society.

The congregation at Ghana Calvary knows this in theory but struggles to embrace it in practice. We know the biblical foundation of the doctrine of justification, which the Apostle Paul proclaimed, “For [Jesus Christ] Himself is our peace, who has made both one, and has broken down the middle wall of separation...”³⁸ We are fully aware that God, in Christ brought us into an eternal and intimate relationship with the Divine, and that this wall of separation that existed between humanity and God due to sin has been broken down. David Schnasa Jacobsen and Robert Allen Kelly put it beautifully, “In the first place, the doctrine of justification claims that God, the Ultimate Other, encounters us not as monsters to be destroyed, but as children to be embraced.”³⁹ Since God has accepted us in Jesus Christ, the doctrine of justification continues to teach that schisms existing within the human community are also done away with. We need to embrace one another as God has embraced us in Jesus Christ. Again, the Apostle Paul puts it this way,

³⁸ Ephesians 2:14, New King James Version

³⁹ Jacobsen, David Schnasa and Kelly, Robert Allen, *Kairos Preaching: Speaking Gospel to the Situation*, (Minneapolis, MN: Fortress Press, 2009), 23

“There is neither Jew nor Greek, there is neither slave nor free, there is neither male nor female; for you are all one in Christ Jesus.”⁴⁰

Ghana Calvary knows this intellectually, yet, I say this to my shame, that we struggle to practice it. Since its beginning, the church has received other non-Ghanaian Africans and people for the Caribbean, including French-speaking Africans. However, either they did not see the church as a place for them, or members of the congregation did not make it a place for them. Honestly, I think the latter is the case due to the uniqueness of immigrant churches. We tend to focus more on our culture, traditions, and language as a means of maintaining a bond with the Motherland. Maybe, this is one of the reasons why God has transplanted us into new soil for growth in Verona: a place of strangeness, yet so fertile a soil for the church to learn, sink deep roots and embrace strangeness while holding on to the self-identity. I trust the Lord to lead us with love and wisdom to demonstrate open hearts, open minds, and open doors policies to the world around us.

As stated above, Ghana Calvary UMC being predominantly immigrants is saddled with her equal share of its peculiar challenges, including undocumented members, language restriction, cultural shocks, deportation, and unemployed members struggling to make ends meet and keeping family together, simply to trying not to lose their homes. Most of these challenges, including African Traditional customs, and how the church dealt with them have been discussed in chapter one above. Suffice it to say that my prophetic voice is growing louder as I continue to minister in Ghana Calvary. Leonora Tubbs Tisdalel’s suggestion that our call to proclaiming the gospel of our Lord Jesus

⁴⁰ Galatians 3:28 New King James Version

Christ requires us to put our lives on the line in order to find it, is worth repeating here.⁴¹

One way we can do this is to remember and remind ourselves that immigrants are also human beings, created in the image of God, who needs respect and value as any other human being.

On unemployment, housing, and financial issues, the congregation at Ghana Calvary has been very hospitable. Through the ministry of the Hospitality Committee, we have provided job opportunities for many of our new arrivals. Two years ago, we had 15 people who arrived in the country through the Visa Diversity Lottery system. Though they had their Green Cards and work permits, they were helpless in the area of job search. Through the leadership of the church, volunteers gave them rides to various job sites for interviews, with letters of references written by me. Thank God, they are all now gainfully employed. Some people facing eviction, including non-members of the church, came forward for assistance. The church paid for six months' rent for each one of them, including their initial deposits. Unfortunately, some of them lost their apartments due to non-compliance with regulations and policies. I am very proud of the generosity of the church and its willingness and ability to help those in need.

Additionally, African traditional beliefs and practices, with Ghanaian cultural undertones often seem to intersect with Christian doctrines and practices, creating tension within the congregation. This tension has been dealt with in various ways, without any particular solution at hand. However, in Ghana Calvary, I have attempted to educate the members on the importance of symbolism within the African cultures and how to apply some of the symbols in our Christian culture, without betraying our Africanness or our

⁴¹ Tisdale, Leonora Tubbs, *Prophetic Preaching: A Pastoral Approach* (Louisville, Kentucky: Westminster John Knox Press, 2010), 89-90

Christian identity. This approach has helped a lot in the areas of naming, funeral, and marriage ceremonies where some of the cultural/traditional nuances have been identified, clarified, and where necessary, modified and transformed to suit our current context.

The Second Location—Hospice Chaplaincy

Traveling Healer

The reason for spending much time on my first location is because it is the ethos of power, influencing, shaping, and invigorating my ministry in the second location. Speaking of location in this sense needs a working definition. I think of location in this context not as one place in particular, but multiple geographical places where patients and family live. Ministering as a hospice chaplain takes me traveling and covering three major counties in New Jersey, namely: Somerset, Middlesex, and Union, which spans from the lower part of Central Jersey to the upper part of Southern Jersey. In a sense, this is my second location for my ministry. It involves traveling, visiting my patients at their family homes, Nursing Homes, Assisted Living Facilities, and sometimes hospitals and Emergency Rooms.

I have gained a deeper insight into the ministries of preaching, teaching, and healing, as a congregational pastor and a hospice chaplain. In this bi-locational ministry, the goal is to bring people into an eternal relationship with God through our Lord Jesus Christ both in this life and in the life to come. This is accomplished through preaching and teaching the good news in word and deed. In the church, it is required of me and accepted wholeheartedly. Conversely, in the hospice, the chaplain is not supposed to preach or teach any particular religious dogma. On the surface, this situation may appear detrimental to the idea of integrating one ministry in different locations. However,

preaching and teaching for *healing* is done mostly through the ministry of caring, and comforting presence; answering and addressing burning questions and concerns; demonstrating love and compassion; saying or reading prayers and meditations, and simply reading scriptures to those who are open to it.

In each of these locations, people are touched by God and brought to a saving knowledge of Jesus. The church sees people touched by God and transformed to live as saved children of God. In hospice, God touches people with His power and love, especially patients, transforms and enables them to die as saved and redeemed people. Either way, salvation is presented and received.

Theologically speaking preaching *salvation* is the same as bringing *healing*. In the NT Greek, the word for *salvation* takes its roots from “Sozo,” which may mean “save” in a spiritual or religious sense. But it also may mean “heal” or “make whole” in the physical sense. “The account of the paralytic clearly links the external acts of physical healing with the internal act of spiritual salvation (Mark 2:1-12).”⁴² By causing the paralytic man to rise and walk, Jesus authenticated His declaration of forgiveness of the man's sins, thus proving that He is the Savior of the world who has the power both to forgive sins and to heal. By placing forgiveness of sin in the same context as physical healing Jesus has shown that salvation involves the healing of the physical body and forgiveness of sins, which are two parts of the same miracle of God.

Most of what I do as a hospice chaplain in this location has been discussed in chapter one above. I will, therefore, add a little more nuance to how hospice chaplaincy has prepared me for bereavement ministry. First of all, hospice people are enabled to

⁴² Mills, Watson, E., General Ed., *The Lutherworth Dictionary of the Bible*, (Cambridge: Lutherworth Press, 1994), p. 786.

discover that God is always with them within and outside religious settings. Under normal circumstances, most of my patients would not step foot in the church. Connecting my ministry as a pastor of a local congregation with hospice chaplaincy provides a solid and balanced unique ministry in my life. What I do as I lead the congregation has offered me deep spiritual roots in the Lord Jesus Christ, fomenting my faith and confidence in God's goodness and power. Furthermore, the conflict resolution and reconciliatory-healing season the church went through helped me develop powerful tools for decision-making skills that have helped me tremendously in my hospice chaplaincy ministry. In his booklet, *Hard Choices For Loving People: CPR, Artificial Feeding, Comfort Care, and the Patient with a Life-Threatening Illness*, Hank Dunn, a seasoned hospice chaplain, outlines specific questions to ask the terminally ill person and/or families;

- What is the agreed-upon goal of medical care for the patient at this phase of life?
- What does the patient want?
- What is in the best interest of the patient?
- What are the prognosis and probable consequences if a certain treatment plan is followed?
- Can I let go and just let things be?
- What are the facts regarding pain control?⁴³

Answers to these questions are not always black or white. There are so many grey areas, which mostly are emotionally charged, creating conflicts and tension in the family, leading to debilitating isolation from the patient. Some of the hospice staff marvel at the cool and serene demeanor with which I manage to mediate in such situations, and calmly

⁴³ Dunn, Hank, *Hard Choices For Loving People: CPR, Artificial Feeding, Comfort Care, and the Patient with a Life-Threatening Illness*, 5th ed., (Lansdowne, VA: A & A Publishers, 2009), 46-52

guide patients and families to the place where they are comfortable with the agreed-upon decision. I am often asked, “Aren’t you drained and put off by some of the nasty behaviors?” Or “Where do you get the strength to do all of this without breaking down?” In response, I always point to my ministry as a congregational pastor, which provides me the catalyst and foundation to grow intimately with and closer to God.

As I write this paper, I am reminded of a case in point. I just visited this patient today for the first time; an 86 year old Caucasian female is on hospice with a life-threatening illness. Her oldest son, in his sixties, has had two heart attacks in the past two years. He needs both heart and kidney transplants. His sister, who is the main caregiver, is frustrated because her brother is passive about deciding to go for these major surgeries. He expresses anger at almost everything. Now, sitting down with the two of them, some of the above questions were put to him, to which he responded in the following manner:

- The procedure requires him to be hospitalized for at least six weeks—he hates being in the hospital;
- He hates and mistrusts the only hospital where the insurance approves to cover the procedure;
- He is not sure how much of his deductible will be a burden on the family, which is already struggling financially;
- The thought of having somebody else’s heart and kidney in his body gives him the creeps;
- The feeling of uncertainties relating to the outcome of the procedure diminishes his enthusiasm—is he going to completely recover or is he going to be made invalid for whatever number of years left for him?
- Bottom line is, he knows he will die within a few months if he does not go for the procedure; he does not want to die and yet he hates the procedure.

At the end of two hours, we did not resolve his consternation; however, he reported feeling validated, reassured, and comfortable with thinking through his options. He felt supported in whatever direction his decision would take him. He was so animated by the process that he invited me for another meeting next week, something which normally does not happen on the chaplain's initial visit.

All of this is to say that my ability to minister as a hospice chaplain is not a vocation independent of my calling as a congregation pastor. I have discovered that I have one call, extended in two different, but not disconnected, locations. I can affirm that ministry in the church and that of hospice are interrelated and interdependent. One supplies the tools for the other to be fulfilled and vice versa. In the church, I am equipped through ministering to people who need to learn how to live as Christians in the here and now, while in hospice I am enabled to minister to people who need to die with dignity and be reborn in the hereafter.

Most of my regular interactions with patients' families happen post-death. This is because, with the presence of hospice staff, families are freed to use their time and energy to attend to other demanding errands. Thus, during my regular visits at home or long-term facilities, contacts with families are limited. When grief challenges set in that is when families reach out for support or they would open up when I call to provide support. Over the years, I have realized how powerfully helpful and needful the one-year bereavement support program is for bereaved families. With the knowledge and skills gained working as a hospice chaplain providing bereavement support to grieving families, the foundation is laid for me to help establish a bereavement support ministry in the church that the laity can lead and manage.

Conclusion

So far I have discussed my understanding of God's calling on my life as a bi-locational minister, serving God in the church at Ghana Calvary United Methodist, now in Verona; but also ministering as a hospice chaplain within the central and upper-southern part of New Jersey. As a pastor-chaplain, I see myself with one calling but serving in more than one location. The narrative has touched on the historical background of the church, the demographical information of its members. We have also seen the struggles and pains as the church continues to discover its identity, many soils within which the church has been planted and replanted. The struggles have led to discoveries and unearth potentialities I did not know were there.

The challenges of a hospice chaplain serving as a local pastor have also enabled me to understand the mystery of life, the strength and willpower of people facing terminal illness. I have grown to appreciate the paradox of willingness to live a longer life and the desire to die when one is facing terminal illness. I have seen "beautiful" deaths and deaths that make you want to ask, "Oh God, why?" I have ministered to parents as they watch their infants and toddlers slowly die, without knowing what to do. I have stood with families, sat with patients as they weep and mourn their losses. I have been privileged to offer reassurance, hope, and meaning that have brought a lot of comfort to patients before death and families before and after death. I believe, this is where God wants me to be. And if God permits, I intend to remain a bi-locational minister, serving the church under the United Methodist denomination and ministering to and with hospice patients and families.

CHAPTER THREE

Toward A Church-based And Laity-led Bereavement Ministry For Integrated And Sustainable Sozo-healing.

How can the church equip its members to embark on an integrative and sustainable ministry of support to the bereaved members among us? We know how to visit and pray for the sick as a church; we know how to prepare for and organize funerals when one of us dies. However, the body of Christ seems to do little to nothing in the area of supporting our grieving members. Why is it that the Christian church seems to have virtually non-existing bereavement ministry? It is in response to these questions that I propose this project.

This project is rooted in my 22 years of pastoral ministry and 15 years of hospice chaplaincy experiences. As a congregational pastor, I have ministered to the sick, assisted families to plan for funerals, officiated funeral services, and buried the dead without challenges and difficulties. These pastoral responsibilities come easily to me, practically due to the availability of resource materials, most of which are found in church hymnals or liturgical books, not to mention, the intensive ministerial and theological training. Additionally, I find my pastoral work in these areas less challenging, thanks to well-written detailed outlines and guides found in bookstores and the denominational websites. The situation is different when it comes to bereavement ministry for the members of the church. I find there are fewer materials and resources available in the church to help our effectiveness as pastors and laity providing bereavement support. Moreover, there seems to be less focus on training the lay people in the church to undertake bereavement ministry.

Thankfully, sufficient materials and training are available in hospice, making my chaplaincy ministry easy and comfortable. Additional resources and training are provided to hospice chaplains equipping them to provide bereavement support to the grieving family for a minimum of 13 months starting from the day a patient dies.

The big question begging for an answer in this project is, why do we not have a church-based bereavement support ministry for our grieving families? This question crystallized for me during our August 2019 cohort gathering at the Theological School at Drew University. During the discussion of topics for the project, Rev. Dr. Gary Simpson suggested that I consider designing a bereavement ministry in the church. My initial suggested project was on how a better understanding of the concept of salvation can enable us to live as saved people and die well as Redeemed saints. Dr. Simpson's recommendation received nods of agreement from my cohorts, with Rev. Dr. Leonard Sweet adding, "This is a complete project in itself."⁴⁴ Upon further prayerful reflection and consultation with other pastors and my advisory team, it became clear that not many churches have a church-based bereavement ministry in which the laity is equipped and empowered to lead and facilitate. Hence my quest to design an integrated, sustainable, and bereavement support ministry that promotes Sozo for its members, using Ghana Calvary United Methodist Church, located in Verona, New Jersey, and hospice chaplaincy as my contexts.

In this project, I propose that the church of Jesus Christ is well resourced to embark on a ministry of providing bereavement support to its grieving members and others in the community. The Christian church is blessed with both material and human

⁴⁴ Rev. Dr. Gary Simpson and Rev. Dr. Leonard Sweet are professors at the Theological School at Drew University and are the co-mentors of the D.Min program, "Pastoral Identity and Prophetic Fire."

resources for such a project. We also deal with deaths, funerals, and questions about the afterlife regularly in the church. What we need is an integrated and sustainable bereavement support ministry, with the pastor as the trainer, equipping the laity who will, in turn, be at the forefront of carrying out the ministry.

The Christian life is not exempt from hardships and tragedies. We are not called out of this world. Rather, the Gospel message is that believers of the Lord Jesus are in the world, but we are not of this world. In His high priestly prayer, Jesus prays,

But now I come to You, and these things I speak in the world, that they may have My joy fulfilled in themselves. I have given them Your word; and the world has hated them because they are not of the world, just as I am not of the world. I do not pray that You should take them out of the world, but that You should keep them from the evil one. 16 They are not of the world, just as I am not of the world. Sanctify them by Your truth. Your word is truth (John 17:13-17, NKJV).

Jesus affirms that being a Christian does not absolve us from the hardships of this world. The opposite seems to be the case as is expressed in the scripture above.

Therefore, as Christians, we do have our share of life's troubles and traumas. This includes grieving the loss of loved ones. The focus of this project is on how the members of the congregation can support the grieving families of the church and on how this supporting ministry can be an integral part of the church's vision and mission. In her article "Congregational Care for the Chronically Ill, Dying and the Bereaved," Helen Wilson Harris states, "The truth is we [all] experience grief throughout our lives, from mini losses like losing our keys or a favorite item, to major losses in moves, divorces, empty nests, and death."⁴⁵

⁴⁵ Helen Wilson Harris, "Congregational Care for the Chronically Ill, Dying and the Bereaved," *Journal of Family Ministry* 14, no. 1 (Spring 2000): 35-36.

Again, the question to which I will attempt to respond in this project is, “Is the way the church, in general, providing support to its grieving members enough? Or is there a subtle but a clarion cry from the pews for more?” Philip Kenyon contends that “comforting the bereaved people takes more than good intentions.”⁴⁶ The general situation within the body of Christ is that we provide extensive support to organize and celebrate elaborate funeral services for the bereaved members of the church. We spent more time, money, and other resources on meals and flowers. However, after the funeral services, food, and flowers, we do not do much. The bereaved may receive a few phone calls, condolence cards, and rare visits from cordial sympathizers. After that, the grieving members of the body of Christ are left on their own to grieve and find strength and comfort in their own ways. The best some of them receive from the church is a few phone calls or visits from the pastor/pastoral staff within the first few months after death occurs.

This project is not intended to re-invent the wheel, because a lot of work has been done on bereavement support in and outside the church. However, I maintain that the bulk of the tasks and responsibilities have been laid on the shoulders of pastors and professional counselors, and non-profit organizations, some of which are para-Christian groups. I also propose that designing such a laity-led bereavement ministry within the church will ensure that both the laity and clergy work together to minister to people with whom they are familiar. This collaborative effort in ministry to the bereaved will provide the perfect space and opportunity for members of the church to put their gifts and callings to use in the church. The goal of this project is to have a ministry that outlasts pastors or specific members of the congregation and becomes part and parcel of the vision and

⁴⁶ Philip Kenyon, “Why We Fail The Grieving,” *Christianity Today*, April 6, 2015, <https://www.christianitytoday.com/pastors/2015/april-online-only/why-we-fail-grieving.html>.

mission of the church. In the end, this collaboration between clergy and laity will also help deliver clergy from the savior syndrome, which so often plagues the latter.

Generally speaking, the format of most bereavement support programs, including the ones provided under hospice and professional counselors, is made up of once-a-week meetings for some time (usually six weeks). This includes story sharing, engaging them in selected activities, providing tools for coping, and answering questionnaires. In contrast, this project proposes to focus on how to journey alongside those who are grieving the loss of loved ones, supporting them to move from a life of devastating loss, in which all is brokenness and despair, into an unimaginable place of hope and renewed confidence enabling them to move on with life. Such bereavement ministry will emphasize healing in the biblical sense, using *Sozo* as the framework for salvation through Christ Jesus, and healing/deliverance for eternal life. In the words of Alan D. Wolfelt, “To look into the eyes of someone mourning the death of someone precious is to look into the window of the soul.”⁴⁷ I am convinced that we need such a model of bereavement support in the church through which we provide a soul-to-soul guide to grieving members of the body of Christ.

Hospice Experience and African Cultures

Moreover, I suggest that providing physical space in the church for non-profit organizations in the community to organize periodic bereavement support group meetings is not enough. The church has both adequate human and material resources to provide bereavement ministry both to its members and as an outreach program, to members of the

⁴⁷ Alan D. Wolfelt, *Companioning the Bereaved: A Soulful Guide for Caregivers* (Fort Collins, CO: Companioning Press, 2005), 4.

community. Such a bereavement ministry has to be integrative and sustainable. This is why the examples of hospice companies and African cultures can serve as models worthy of consideration.

Hospice Bereavement Support Models

The importance of hospice bereavement models lies in the success stories received over the years. As mentioned above, my hospice experience has taught me that the church can learn a thing or two in the area of bereavement ministry. As a general philosophy, hospice provides comfort care to patients and families and not focusing on the cure for the disease. When people come under hospice service, they are near the end of their lives. There is a well-structured and documented procedure to follow so that nothing is left to the whims of the “experts.” though a great deal of professional creativity and imagination is required for relevant bereavement support.

Under hospice, bereavement assessment begins on the day the patients and family come on service. Certain indicators are noted as reasons for concerns that the survivors may have complications during bereavement. Sarah E. McKinnon, M.A., Director of Volunteer and Bereavement Services at Vitas Healthcare (a hospice company), highlights the following reasons for concern:

- Serious or chronic health problems
- History of emotional/mental problems, such as anxiety or depression
- Concurrent life stressors
- Change in living environment for the survivor as a result of the death
- Unresolved past losses and/ or multiple losses over a lifetime
- Relationship problems with the deceased (anger, ambivalence, or excessive dependence)
- Lack of coping skills
- Loss of a long-term relationship or a constant companionship

- Financial problems
- Lack or loss of support system
- Lack of religious affiliation or spiritual beliefs
- History of domestic violence, alcohol/substance abuse, and/or suicidal ideation
- Role changes occasioned by the illness such as emotional nurturer or decision-maker.⁴⁸

This list is not exhaustive but must be seen as a guide to show how we can prepare and develop a plan of care for patients and families before death occurs. Drawing examples from the above, I believe that the church is well-positioned to make use of this model. We can utilize what hospice calls a “risk assessment tool” to anticipate what family members may go through after they lose their loved ones through death. With such knowledge, an integrative and sustainable bereavement support ministry in the church can design a plan of action for families during the time their loved ones are nearing the end of their lives. As Richard Nysse observes, “Addressing the reality of death at the time of the funeral is too late. The pastor’s judicious use of biblical laments prior to any specific funeral will help prepare people to recognize the full terror of death so resurrection can be heard with the surprise it deserves.”⁴⁹ I hope that this project will equip the laity with tools and guidance to enable them to anticipate grieving trends before death occurs and provide them with the right kind of model to use for supporting the surviving families.

⁴⁸ J. Richard Williams, *The Surviving Spouse* (Miami: Vitas Healthcare Corporation, 2003), 29-30.

⁴⁹ Richard Nysse, “Funerals before the Funeral Service,” *Word & World* 34, No. 1 (Winter 2014): 84.

Grieving and Bereavement Rituals Within Ghanaian Cultures

Africans are said to be notoriously religious⁵⁰ because religious beliefs, practices, rites, and rituals are so embedded in every aspect of daily life that separating religion from African life is impossible. Some of these practices, rites, and rituals relate to grief, mourning, and bereavement. Concepts of death, grief, and bereavement are expressed philosophically and theologically in proverbs. These proverbs are euphemisms and maxims that are used to convey and conserve cultural values, traditional concepts, and customs.

For example, the Akans of Ghana (the largest ethnic group in Ghana made up of homogenous groups who are related by language and cultural traits) speak of the universality of death in these words, *Owu atwer baako mmfor*, meaning, “death is like a ladder, which is not designed for only one person to climb.” This proverb captures the inevitability of death, the mortality of all human beings, and by implication, the communal nature of the support Africans provide to the grieving members of the community. For the Akans, not only does it take a village to raise a child, but the same village is also needed to bring comfort and hope to the grieving members of the community.

Another proverb stresses the importance of community bereavement support: *Owuo tese nnɔbua*, which means, “death is like cooperative farming.” Among the farming communities in Ghana, a group of farmers takes turns working in one person’s land till everyone’s land is cleared and crops planted. The same trend goes on during harvesting

⁵⁰ John S. Mbiti, *African Religion and Philosophy*. (London: Heinemann, 1969), p. 1

seasons. In likening death to this mode of farming, the Akans in Ghana are again stressing both the universality of death and the importance of the whole community supporting the bereaved members.

Moreover, among the Gas and Akans in Ghana, there are special rites and rituals for different kinds of deaths. Though some of these traditions have been modified over the years, there are still special widowhood rites performed over a specified period when a spouse dies. Other special rituals performed are for the death of a king, a priest/priestess, a twin, accidental death (also called unnatural death) such as suicide, drowning, auto accident, and murder. During the time of grief on each of these occasions, special care is taken to ensure that the surviving family is never left alone.

A grieving person is never left alone. There are always people around the grieving family, providing support, ensuring that the proper ritual procedures are followed. But most importantly, they serve as a security and safety net to ensure that the grieving person feels secure and safe emotionally, spiritually, and physically. Household chores like cleaning, laundry, grocery shopping, and cooking are taken over by other relatives from the extended family. All of these ensure that the pain of death is acknowledged by the surviving family, the deceased are honored appropriately in accordance with custom, and a new way is paved for life to continue.

Such is the hope envisioned by this project. I am proposing that as an integrative, church-based bereavement ministry, the grieving members' culture and ethnicity will be taken into serious consideration. The African model is an important contributor to this project because it ensures that the surviving members will not be left on their own to sort

things out or bury themselves with activities/work that may not necessarily help with healthy grieving. This will then make grieving and bereavement a community affair.

The Akans in Ghana also say in proverbs that, “*Oka hwen a nna Oaka enyiwa,*” literally meaning whatever the nose smells directly affects the eyes. In context, they believe that when one person/family is grieving the whole community grieves along. This is well captured and reflected in the words of the Apostle Paul, “Rejoice with those who rejoice and weep with those who weep” (Romans 12:5, NKJV).

An Operational Definition of Bereavement

Helen Wilson Harris asserts that “The bereaved are people who are acknowledged to have ‘lost’ a relationship with a loved one. The term, bereaved, comes from the Latin root word ‘to have been robbed.’ Whether the death occurs suddenly or after a terminal illness, the losses are multiple.”⁵¹ Bereavement, therefore, can be seen as a process of grieving a loss either of a loved one or a favorite item in a person’s life. In bereavement, there is a tremendous sense of being robbed of an important or significant person in our lives. For this project, the key is the acknowledgment of this sense of loss by death and walking side-by-side with those grieving in order to bring them *Sozo* that Jesus brings to the world. This *Sozo* is not only salvation in Jesus through the forgiveness of sin, but also healing, wellness and wholeness during times of brokenness and loss.

It is important to note that there is no right and wrong way of grieving; everyone is uniquely endowed with personal characteristics that make their grieving different from another person’s and sometimes contrary to theories or models. A sustainable

⁵¹ Helen Wilson Harris, 32.

bereavement focuses on the experiences of the loss and how the bereaved person copes with it. The bereaved person suffers in so many different ways, ranging from increased risk of physical health problems, psychiatric morbidity, and psychological distress, to spiritual crises, which may manifest in perceptions of loss of faith and a sense of security. Research confirms that families with insufficient bereavement support “are at risk for problems such as posttraumatic stress disorder (PTSD), anxiety, major depressive disorder, and prolonged grief.”⁵² Hence, the need for a church-based and laity-led bereavement ministry in the church that will provide sustainable healing and wellbeing.

Methodology

I plan to launch this project on the first day of Lent, which will be Wednesday, February 26, 2020; and celebrate the conclusion of the project on Easter Sunday, April 12, 2020. My target audience or context will be the members of Ghana Calvary United Methodist Church in Verona, New Jersey, where I pastor. There will be a six-week Bible study within the Lent season based on the topics outlined below.

On the day of launching, I will ask for volunteers who will commit to participating in the six-week Bible studies program. These volunteers will become the ministers who will spearhead the project. The hope is that all or some of these volunteers will also commit to becoming members of the bereavement ministry, who will be referred to as, ‘Bereavement Ministers.’ On the day of the celebration of the conclusion of the

⁵² Jennifer L. McAdam and Kathleen Puntillo, “Pilot Study Assessing the Impact Of Bereavement Support On Families Of Deceased Intensive Care Unit Patients,” *American Journal of Critical Care* 27, No. 5 (September 2018): 373, www.ajconline.org.

project, the bereavement ministry will be inducted, and the ministers installed into service.

Story-telling, a narration of members' experiences with death, bereavement, and grief directly or indirectly will also be utilized alongside the Bible studies. From these stories and narratives, the framework for the bereavement support guidelines will be designed.

Additionally, members of the bereavement support ministry will be encouraged to gather as many as possible stories from friends, families, and other sources that will help us gain a comprehensive understanding of the variety of grief models and expressions.

Finally, members who have received any form of grief support informally or through professional counselors will also be invited to share their experiences with us. Where appropriate, their recommendations and suggestions based on their experiences will be encouraged and considered.

Bible studies

Each study will take two hours, divided into specific blocs of items to cover. There will be an opening devotion, which will include a hymn/song, scripture reading, and prayer. One volunteer will be assigned to lead devotion at each session. The pastor will present the topic for the day; the materials will be distributed to the members ahead of time to enable them to prepare for the meeting. Following this, individuals will be invited to share their personal or other stories and experiences relating to the topic under discussion. After the storytelling/sharing time, there will be a period of questions and answers during which members will ask and answer questions. The session will conclude with a light refreshment followed by a closing hymn/song and prayer.

Below is an outline of a typical Bible Study session:

- First 10 minutes—opening devotion: hymn/song, scripture reading, and prayer
- Next 30 minutes—presentation of material/content
- Next 15 minutes--individual stories and experiences with grief and bereavement
- Next 30 minutes—discussions, Q&A time
- Next 30 minutes—refreshment
- Last 5 minutes—Closing courtesies: hymn/song and prayer

Participants will be provided with written study materials and questions for reflections to be used during the Q&A time. I will be the leader and facilitator of all sessions.

Outline of Topics

The following topics will be discussed during the project implementation.

1. Christian Understanding Of Death And Funeral Rites
2. The African Understanding Of Death And Funerals: Rites, Rituals, And Practices Surrounding Death And Grief/Bereavement
3. Victory Over Death—Resurrection Of Jesus Christ: The Basis For Our Hope In The Resurrection Of The Body
4. Models And Expressions Of Grief/Bereavement
5. Some Selected Bereavement Support Programs For Discussion
6. The Formation Of A Sustainable, Integrative, And Effective Bereavement Support Ministry In The Church

Towards an Integrated Approach to Bereavement Ministry

In this approach, we will carefully analyze some selected bereavement support programs to ensure the designing of a grief ministry that will focus not only on theories and ideas but on hand-holding and walking the journey together with the bereaved

person. The grieving family does not need to be put under a microscope for analysis as an object of curiosity. What they need is a friend—a *parakletos*—space and time for companionship, and freedom of expressing grief without the fear of others feeling uncomfortable. The ministry shall provide an unbiased opportunity for those grieving to tell their stories, feel validated, embraced by the group as a normal human being expressing uniquely different signs of grieving, which may or may not be similar to any other person's experience. All of this, with the hope of providing reassurance and strength for recovery.

Wondering the absence of a church-based bereavement ministry, Philip Kenyon captures some of the reasons why we have avoided providing support to our grieving members. He describes his experience with friends in the church when his father died:

They knew my father had died but they did not approach me. I think they wanted to do something to extend support or comfort, but they did not know what to say or do. So they just stood there. It made me feel like I had a contagious disease. Let's call it 'Grief Pox.' No one ever sent a card or expressed any tangible support through my bereavement. I was left to navigate the waters of grief by myself.⁵³

Sady, this example is a reflection of what is generally going on in the church in the area of bereavement ministry. An integrative approach to bereavement ministry is, therefore, the ideal path to developing a collaborative response to the grieving members of our faith community. Here, not only is the pastor responsible for training and equipping the laity to lead and organize bereavement ministry in the church but understanding the complexity and fluidity of the grieving process will enable the church

⁵³ Kenyon, Philip "Why We Fail The Grieving." <https://www.christianitytoday.com/pastors/2015/april-online-only/why-we-fail-grieving.html>, April 2015. Page 1.

to restructure its programs and timetable to incorporate the losses and the grieving families in the ongoing life of the church. Helen Harris suggests:

The entire first year after a major loss is one loss after another: the first birthday, the first anniversary, his/her first birthday after the death/loss, the first vacation, the first Thanksgiving, the first Mother's Day, the first Father's Day, the first family reunion, the first winter storm, the first spring cleaning, and on the list goes. Congregations who understand this will consider the bereaved when celebrating special occasions and make accommodations for (or at least mention of) the changes and adaptations being made.⁵⁴

Moreover, Philip Kenyon postulates three reasons why the church neglects this important ministry, including a feeling of awkwardness, discomfort with one's own mortality, and unrealistic expectations.⁵⁵ First, people want to help, but they are concerned about saying or doing something that will cause further distress to the bereaved family. The underlying truth is that no one has taught us how to comfort and support bereaved people. We all grieve; we all know that death is inevitable, yet we take for granted that thriving through grief is a natural ability we all possess. This is why this project focuses on equipping and empowering the members of the church with the skills, knowledge, and zeal to be able to support one another in times of grief.

Secondly, we are uncomfortable with supporting the grieving members because through it we come face to face with our own mortality. The reality of death is known to all of us, but not all of us are comfortable talking about it. Hence, the benign neglect of the bereavement ministry in the church. In this project, I intend to use biblical truths and the gospel message to highlight our hope

⁵⁴ Harris, 37.

⁵⁵ Kenyon, Philip. "Why We Fail The Grieving." 2-3

for resurrection in Christ Jesus and our eternal dwelling with the Lord, after our earthly life has come to an end. I believe within the context of bereavement ministry, this message, though heard many times, will provide a supporting pillar and bulwark for all who will be involved in providing support to the grieving members of the church and community. Responding to reviews to her book, *Grief: Contemporary Theory and the Practice of Ministry*, author Melissa M. Kelley noted a reviewer's question,

...how does the grief born of injustice shape one's sense of self and sense of one's place in the world? How does it influence and/or challenge one's sense of and relationship with the Divine, if one believes in the Divine? How does one understand and make meaning of one's suffering due to injustice and the life that follows? What sort of coping and support may be necessary to endure and perhaps even thrive in the face of the grief born of injustice? What sort of grief trajectory may one experience when the loss is due to injustice?⁵⁶

These questions, though asked within the context of grief born of injustice, are equally legitimate here, in that they need to be addressed by all people supporting grieving members of our faith community.

Thirdly, Kenyon suggests that we are hindered by unrealistic expectations held by ministers. This happens when people who are grieving are expected to follow a certain laid down path or expressions of grief. Any appearance of deviation from what the book says would be considered as non-compliance on the part of the bereaved. Yet, as noted above, grieving is one of the most fluid and amenable experiences in our human life. When the bereaved feel that they are being forced to follow a certain pattern that is not conformable to their grieving personality, they either boycott the entire process or just go

⁵⁶ Melissa M. Kelley, "Author Response to Reviews of *Grief: Contemporary Theory and the Practice of Ministry*," *Pastoral Psychology* (2014) 63, 118, <https://link.springer.com/article/10.1007/s11089-013-0563-3>.

through the formality. It is my goal that the integrative approach to bereavement ministry will help address this concern and provide a ministry that will allow people to grieve following their own paths and models, without feeling boxed in some stereotypical structures. Here, we will free the grieving people to pursue and embrace the healing that *Sozo*-Jesus brings to them. This is not to suggest that there will not be recommended guidelines and options to follow. The essential goal is that this ministry will not be the responsibility of the “experts” alone. But the entire congregation will have the necessary tools, resources, information, and space to comfortably and confidently provide bereavement support to the grieving members of the church and beyond. Yet whatever model or tool is used will be largely determined by the person(s) grieving.

As noted by Kelley, sometimes a person’s grief trajectory may not be a trajectory at all due to the complexity of one’s life’s dynamics.⁵⁷ A family suffering from financial hardship may not have the time and energy typically devoted to the grieving period. They would be required to immediately resume work and conduct themselves as normally as possible, giving their best as though nothing grievous has happened. They would do this in an attempt to take care of the family and keep life moving forward. To such a family, grief is a luxury they cannot afford.⁵⁸ In the integrative bereavement ministry project, we will carefully study people of such a socio-economic background to recommend a knowledge-based approach to support the bereaved persons.

Additionally, the integrative approach to a knowledge-based bereavement ministry in the church will take into consideration the cultural, religious, and ethnic

⁵⁷ Ibid.

⁵⁸ Ibid.

backgrounds of the bereaved. How people of African descent view death and the mourning rituals associated with it will be looked into. Addressing the importance of this approach, Rabi Ilemona Ekore and Bolatito Lanre-Abass assert, “This becomes imperative particularly when one understands the fact that culture is the ‘worldview, values, norms, and behavior patterns shared by a group of individuals,’ and profoundly impacts behavior and the family; it shapes how persons make meanings out of illness, suffering, and dying.”⁵⁹

Tools for Ensuring Sustainability in Bereavement Ministry

For a sustainable church-based and family-focused bereavement ministry, we need adequate resources. Members of the church will be invited to share their experiences with death, grief, and bereavement. These experiences will form the core narrative building blocks for this project. Knowing that how a person grieves depends on what type of death occurred in the family, will help to design the corresponding support. Therefore, the project will address grief born of all these different kinds of deaths and consider the relationship the mourners had with the dead. In this direction, some of Harris’ suggestions listed below can be considered:⁶⁰

1. Normalizing the experiences of the grieving person, especially when they report seeing or hearing the dead a few weeks following the funeral.
2. Assigning helpers from the church to assist with tasks and responsibilities that the bereaved person is forced to undertake by the absence of the loved one.
3. Helping with storing excess food from the funeral by providing additional refrigerators/freezers and continuing to provide food after the funeral is over.

⁵⁹ Rabi Ilemona Ekore and Bolatito Lanre-Abass, “African Cultural Concept of Death and the Idea of Advance Care Directives,” *Indian Journal of Palliative Care* 22, no. 4 (Oct-Dec, 2016), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5072226/>.

⁶⁰ Harris, 38-41.

4. Marking calendars and contacting the bereaved family on important days such as birthdays, anniversaries, holidays, etc.
5. Acknowledge the emotional difficulties the grieving family endure when they return to the church for the first time after the funeral and provide support.
6. Permitting the grieving members of the church to decide whether they are ready to attend the next funeral service in the church following that of the loved one.
7. Developing rituals incorporated in the service to allow and encourage remembrance, for example, the lighting of candles and saying a special prayer.
8. Knowing what not to say to the grieving family, for example, "It was God's will," "He/she is one of God's angels now." "You will be able to have other children" (or "At least you have other children.") "It was probably for the best." "I know you tried to tell him to stop smoking." "I know just how you feel." "You'll be fine because you are so strong."⁶¹

Continual refresher seminars where stories and experiences will be shared and annual evaluation of the program will ensure effectiveness or the lack thereof.

Educational tools to be provided include how grief impacts the individual. It is generally agreed that mourners are deeply affected physically, emotionally, mentally/cognitively/intellectually, spiritually, socially, and economically. However, not every individual may exhibit all of these areas of suffering. Some may not display any expressions at all, and the bereavement support minister must be knowledgeable enough to provide individualized support relevant to the person and his/her peculiar situation.

Similarly, I envision that the educational tools for effective and sustainable bereavement ministry will evolve from a collaboration between the shared experience of

⁶¹ Harris has more of these suggested guidelines in her article, which will be considered alongside others during the implementation of the project.

members of the church, some of the theories of bereavement as suggested by the following:

1. William Worden's "Four Tasks of Mourning,"
 - a. Task I—To Accept the Reality of the Loss
 - b. Task II—To Process the Pain of Grief
 - c. Task III—To Adjust to a World Without the Deceased
 - d. Task IV: To Find a Way to Remember the Deceased While Embarking on the Rest of One's Journey Through Life.⁶²
2. Elisabeth Kübler-Ross' & David Kessler's "The five stages of grief:"

Denial and Isolation, Anger, Bargaining, Depression, and Acceptance."⁶³

The tools to be developed will allow the bereavement ministers to acknowledge that not everyone will go through these stages in the prescribed order and to be sensitive to those who do not go through all of these stages.

Likewise, as observed above, the tools will engage and provide support to the grieving from the background of knowledge of their ethnicity and cultural expectations. For example, Dag Nordanger in his research work, "Discourses Of Loss And Bereavement In Tigray, Ethiopia," concludes that among non-western cultures such as African, there are "... authoritative ...discourses that encourage people to avoid disclosing and expressing emotional pain."⁶⁴ Such encouragement is entrenched in all fabrics of life such that, when Western psychoanalytical and behavioral specialists insist on disclosing and confronting traumatic memories, there is a feeling of "medicalizing" people's adjustment responses as well as interfering with indigenous resources for coping

⁶² Worden, J. William, PhD, ABPP. *Grief Counseling and Grief Therapy*, Fifth Edition (p. 41). Springer Publishing Company. Kindle Edition.

⁶³ Elisabeth Kubler-Ross and David Kessler, *On Grief and Grieving: Finding the Meaning of Grief through the Five Stages of Loss* (New York: Scribner, 2005), 7-28.

⁶⁴ Dag Nordanger, "Discourses Of Loss And Bereavement In Tigray, Ethiopia," *Culture, Medicine and Psychiatry* 31 (2007): 173–194.

and recovery.⁶⁵ What we seek to avoid is to treat bereavement as a disease in need of medical treatment; though we acknowledge the complexities involved in complicated grief that require medical intervention.

Biblical & Theological Framework

The Christian Bible ponders three types of deaths: physical death, spiritual death, and the second death. Our focus in this project will be on physical death, but we shall take a brief look at the other two to understand the mystery of life, death, and life after death. On physical death, *The New International Dictionary of the Bible*, states, “Both OT and NT present death as an event belonging to our sinful existence, but also in relation to the living God, Creator, and Redeemer.”⁶⁶ To this end, physical death brings human life on earth to an end. In Gen. 3:19, God declares that human beings are dust and to dust shall we return.

The brevity of human life on earth is also discussed in scripture; human beings are like the flowers of the field, alive for a brief moment, then wither and die (Ps. 103:15; Isa. 40:6-7). In the New Testament, especially in the Epistles of the Apostle Paul, death is the wages of sin (Rom. 6:23), and “sin entered the world through one man, and death through sin” (Rom. 5:12). Therefore, from the Christian Bible, we believe that physical death is a natural event created by God and caused by sin. However, Shirley C. Guthrie in *Christian Doctrine* asserts that “some suffering and death is the result of our own or others’ sinfulness, but according to scripture, suffering and death as such are not evil.

⁶⁵ Ibid., 174.

⁶⁶ J. D. Douglas & Merrill C. Tenney, *The New International Dictionary of the Bible* (Grand Rapids: Zondervan Publishing House, 1987), 163.

They only mean that we are creatures and not God. Unlike the Creator, we creatures do not live forever.”⁶⁷ From this point of view, we will stress the naturalness of death and the normalness of grief in human history.

Seen from a biblical perspective, death is understood as human life’s only guaranteed event on earth and this understanding will lead to designing a bible-based bereavement ministry in the church that assists grieving members to put death in its proper perspective. This project will acknowledge the naturalness of death and emphasize the need to accept the finitude of human life, refrain from worshiping youthfulness, and treating old age as a horrific stage in life.

Additionally, we will lean on scriptural edification to put our total trust and confidence in God, in the face of death as depicted in the Book of Job: “For I know that my Redeemer lives, and He shall stand at last on the earth; and after my skin is destroyed, this I know, that in my flesh I shall see God” (Job 19:25-26, NKJV). Our hope of bodily resurrection, based on the atoning sacrifice of our Lord Jesus Christ and His resurrection, leads us to believe in life everlasting (1 Corinthians 15). Such is the story of hope that the bereaved need to hear for reassurance.

On spiritual death, the Bible describes it as separation from God, which is also caused by sin in general. This way of understanding death is more theological, and not biological affirmation. Yet its consequences lead to physical death. Describing the spiritual death, Guthrie states, “It is the death Paul speaks of when he speaks of being

⁶⁷ Shirley C. Guthrie, *Christian Doctrine* (Louisville, Kentucky: Westminster/John Knox Press, 1994), 169.

‘dead through trespasses and sin’ (Eph. 2:1). It is the death John refers to when he says, “Whoever does not love abides in death’ (1 John 3:14).”⁶⁸

The hope that this project seeks to bring to the grieving members is grounded in the story of the resurrection of Jesus Christ and the hope of eternal life. “As Representative and Substitute Man, Jesus tasted death for every human being so that those who believe in him and are united to him have passed from death (separation from God) into life (that triumphs over physical death). Thus, the Christian can say, ‘Whether we live or die, we belong to the Lord’ (Rom. 14:8).”⁶⁹

Toward a Biblical framework of Sozo-healing in bereavement

Biblically speaking, the word *Sozo* is Greek for Salvation. But a cursory study of the New Testament usage reveals a more in-depth understanding. According to the Olive Tree Enhanced Strong’s Dictionary, *Sozo* means “to save, i.e. deliver or protect (literally or figuratively): — heal, preserve, save (self), do well, be (make) whole.”⁷⁰ It goes on to describe *Sozo* in terms of saving someone from peril or injury; rescue from danger; preserving a person’s life from suffering and perishing; to save from satanic and demonic attacks and saving from the penalty of sin through forgiveness in Christ Jesus. The goal of *Sozo-healing* as applied in the life and ministry of Jesus Christ and the early disciples is not only to save us from sin and hell and prepare us for heaven. For Jesus, *Sozo* also brings physical, emotional, mental, and spiritual healing to us. Therefore, the salvation that Jesus procured through His life, death, and resurrection affects our whole being, including our everyday challenges and sufferings.

⁶⁸ Ibid., 226.

⁶⁹ Douglas and Tenney, 264.

⁷⁰ Blue Letter Bible online reference:
<https://www.blueletterbible.org/lang/lexicon/lexicon.cfm?t=kjv&strongs=g4982>

Since grief and bereavement affect the wellbeing of the individual, healing is required to bring wholeness and wellness to the bereaved. *Sozo-healing* in this sense is not about curing a disease or illness but rather restoring a person to wellness and wholeness—not curative but restorative. The approach of this bereavement healing is an adaptation of the Christian faith and practices through biblical analysis and traditions received from our ancestors of faith. We will consider the roles corporate worship, private devotion, proclamation, and music in the church play in bringing healing to the bereaved. Writing on a similar topic Benjamin Shikwati, Vhumani Magezi, and Rantsoa Letšosa suggested that the following tenets of the Christian faith and practices can help bring the bereaved face to face with the reality of healing:

- belief in the presence of the Triune God
- affirmation of life
- the comfort of the Holy Spirit
- edification from reading the Bible
- efficacy of prayer
- grace of the sacraments
- the hope of resurrection
- mutual help by the faith community.⁷¹

There are two guiding principles suggested for providing *Sozo-healing* to the bereaved. The first is to help the bereaved members come to terms with the reality of their loss, facing the pain and confusion that the death of their loved one brings to them.

⁷¹ Benjamin Shikwati, Vhumani Magezi and Rantsoa Letšosa, “Bereavement healing ministry amongst Abaluyia: Towards a ‘circle for pastoral concern’ as a healing model” In *die Skriflig/In Luce Verbi* 47(1), Art. #663, pg. 6: <http://dx.doi.org/10.4102/ids.v47i1.663>

This is hoped to enable them to mourn in proper context and perspective. The second is to carefully and sensitively introduce them to the resources available to them through the Christian faith, thereby allowing them to appreciate and accept the comfort and healing offered to them during their time of need.⁷²

⁷² Ibid.

CHAPTER FOUR

Project Implementation

Launching the Project

As planned, we were able to launch the project on Ash Wednesday, February 26, 2020, at 8:00 pm in the church sanctuary in Verona, NJ. Thirty people attended the service, which was a great improvement for a Wednesday evening service in recent years. I reiterated the need to recruit volunteers to be a part of this project. We needed members who will meet, study materials together, share experiences, and receive positive feedback, embark on hands-on projects as and when necessary over six weeks. At the end of the service, nine people registered to be members of the bereavement/grief ministry team. The Ash Wednesday service was the right occasion to discuss the mortality of the human life on earth; the eternal grace of God that comes to us through our Lord Jesus, making us partakers of the divine nature; and our hope of the physical resurrection when our salvation is fully realized at the second coming of the Lord Jesus.

Two vital steps were taken to introduce the project to the church. First, I had to meet with the church council and explain the need for a church-based sustainable bereavement ministry to them. It took about two hours to finally get all the leaders to embrace this vision. Having satisfied themselves with the answers regarding how the project would be funded and where the resources for the ministry were going to come from, the council voted unanimously to adopt the project as an integral part of the church's vision and mission. An agreement was reached for the church to shoulder the financial responsibility of the project as well as the bereavement/grief ministry itself.

The second step was to bring the project to the entire congregation. Therefore, on the following Sunday, some of the leaders of the church who had understood the

importance of the project, volunteered to share their understanding with the congregation, which made it easier for me; because their explanations shortened the questions and answers period that followed.

Consequently, on the day of launching the project, my task was to open the floor for discussion; we highlighted death as a fact of life and the need for continual grief support to the members who are bereaved among us. Members of the congregation also accepted the vision for a church-based bereavement ministry that can be integrated into the larger vision and mission of the church.

Introductory Meeting

Our first meeting was held after worship on Sunday, March 1st, 2020. We had twelve people show up as volunteers for the bereavement ministry team. We now call them “The Twelve Apostles of Grief Ministry.” The meeting lasted for one hour, during which members did self-introduction, with a brief description of educational, cultural, and professional background. Following that, I provided the outline of topics to be discussed for the next six weeks, along with the format of each meeting. We spent the rest of the time sharing our previous experiences with death and bereavement. The team agreed to meet for two hours once a week, after Sunday service in the pastor’s study. However, later development moved our meetings to a virtual platform through Zoom Conferencing App. Below is the meeting format the team agreed on.

The following table contains the Timetable of topics, meeting date, time, and venue suggested for the project implementation phase:

TOPICS	MEETING DATE	MEETING TIME	MEETING VENUE
Introductory Meeting	March 1, 2020	2:00 pm	Church
Christian Understanding of Death and Funeral Rites	March 8, 2020	8:00 pm	Zoom Video Conference
The African Understanding of Death and Funerals: Rites, Rituals, and Practices Surrounding Death and Grief/Bereavement	March 15, 2020	8:00 pm	Zoom Video Conference
Victory Over Death—Resurrection of Jesus Christ: The Basis for Our Hope in The Resurrection of The Body	March 22, 2020	8:00 pm	Zoom Video Conference
Models and Expressions of Grief/Bereavement	March 29, 2020	8:00 pm	Zoom Video Conference
Some Selected Bereavement Support Programs for Discussion	April 5, 2020	8:00 pm	Zoom Video Conference
The Formation of a Sustainable, Integrative, And Effective Bereavement Support Ministry in The Church	April 12, 2020	10:30 am	During Easter Service at church

Meeting Format—We also agreed to follow the following format for our meetings as best as we could:

- First 10 minutes—opening devotion:
 - hymn/song
 - scripture reading
 - a prayer
- Next 30 minutes—presentation of material/content
- Next 15 minutes--individual stories and experiences of grief and bereavement
- Next 30 minutes—discussions, Q&A time
- Next 30 minutes—refreshment
- Last 5 minutes—Closing courtesies: hymn/song and prayer

Participants will be provided with written study materials and questions for reflections to be used during the Q&A time. I will be the facilitator of all sessions. Members will take turns to lead the opening devotions. We also agreed to attend funeral/memorial services as part of our training to have fresh experiences to help with the project discussions.

As much as possible we followed this format throughout the meetings, but there were times when things took different directions and we allowed the fluidity of the moment and mood to dictate the flow of meetings.

Composition of the Team

The twelve-member team is made of three males and nine females. All but one of the members of the team are currently working in the healthcare system in different capacities: eight are Certified Nursing Assistants (CNAs) and/or Home Health Aides (HHAs); one nurse, one Surgical Assistant, one Healthcare Administrator, and a construction worker. In terms of education, two members already hold a nursing degree, another currently in school for her nursing degree, and a third member doing his Ph.D. in medical administration. This composition is an immense blessing and makes for a rich background of resources for this ministry. The healthcare background provides them with firsthand experiences with death and some sort of bereavement/grief support, giving us a reliable foundation upon which to build the ministry of grief/bereavement support.

Effect of Covid-19 on the Project

Due to initial concerns of conflicting schedules from the team members, we agreed to meet via Zoom video conference for the rest of the sessions. Coincidentally, the Covid-19 pandemic and social distancing guidelines and restrictions made it imperative

to continue meeting on Zoom. The onset of Covid-19 was a huge concern for us.

Members of the team, including myself faced daily challenges and complications relating to Covid-19 at home and work. As many workers around the globe were either laid off, furloughed, or asked to work from home, our bereavement ministry team continued to work throughout the terrifying and intense pandemic.

Everything we planned to do was interrupted and modified to accommodate the new normal. With two of our members testing positive for the Covid-19 virus, the team was initially rattled and anxiously perturbed. The fear and concern were so palpable and raw, mostly evidenced in our discussions. Within a short time, we rallied behind each other to allay fears and to avoid panic. The situation was compounded when we realized that we could not use the usual modes to render support to the affected members and families. During the fourteen-day quarantine period, phone calls were limited due to the severity of the symptoms that made it difficult for them to talk. Consequently, most of the contacts including prayers and messages of best wishes were made by me on behalf of the church and the team, sometimes directly to the members and other times through their families. These were very troubling and frightening times, but thankfully, God heard our prayers, and the two members recovered after two weeks and rejoined the team. During those times, our meetings were put on hold to focus on supporting affected members and families. Needless to say, our timetable was completely shattered and the date for the completion of the project, delayed.

Additionally, six other members of the congregation were also infected with the Covid-19 virus, some of whom were asymptomatic; others so severely, they had to be hospitalized. Things came to a sad head when one of the male members of the church, a

choir member died due to complications with the coronavirus. Once again, the bereavement ministry team suspended its meetings for a couple of weeks to sufficiently provide time and space for the church community to come to terms with the loss.

All over the State of New Jersey, funerals as we used to know them, were no more the same, due to fears and uncertainties associated with the mutation of the virus. Some Funeral Parlors and cemetery managements allowed burials with only one family member, the funeral director, and the officiating minister at the graveside. Such was the case during the burial of our church member. I felt like I was on a different planet; everything seemed strange, unfamiliar, and disconnected. I was at the graveside with the funeral director and one family member who took pictures and videos with his cell phone. The rest of the family was standing outside the cemetery, by the roadside weeping and wailing. To add to my discomfort, the weather was cold, windy, and rainy as if it were winter. I do not know how I managed to complete the graveside service wearing latex gloves on both hands, a mask on my face, holding an umbrella in one hand, and my liturgical book in the other.

I could not shake hands with, give hugs to, or get anywhere closer to the grieving family. To my dismay, it hit me then, that the power of presence and touch in times of loss and grief had unnaturally found new meanings and applications. The Coronavirus pandemic forced us to find new ways of being present in our social distancing. There were no more in-person visitations and sitting down with the bereaved family to provide support. Thankfully, we had the technology to aid us in these complications.

Consequently, we quickly learned to use Zoom video conferencing and telephone calls

to provide grief support. Now, I can provide a powerful presence without being physically present.

Moreover, the power of silence came in handy as a useful tool in providing grief support to the bereaved. I found strength in my vulnerability and the strangeness of the times, which compelled me to remain helplessly silent on the phone while the grieving family sobbed, wailed, and cried in an expression of their loss and grief. Gradually, this too had become a new norm for me. Before all of this, I used to be physically present in silence during such times, providing a touch, or a hug or offering a drink or paper tissues to crying, sobbing, and wailing families. But all of that has changed in these days of coronavirus.

To address the need for church-wide bereavement support, we redesigned our Friday evening online prayer meetings to include grief support. Members of the bereavement team took turns to lead and facilitate the services, providing support for anticipatory grief to all front liners and essential workers; listening to stories of intriguing challenges, allowing individuals to share their experiences with Covid-19, and coming face-to-face with deaths. After that members would take turns to provide positive feedback, validate other people's feelings and concerns, and the seriousness of their situations; reassurances were provided, using scriptures and personal experiences to increase strength and effective coping with the challenges. The meetings would conclude with a prayer for the dead, the grieving, the front-liners, essential workers, and those who were living with fear, anxiety, and challenges due to the pandemic. Such became the new norm, that our Friday evening prayer meetings attracted increased attendance and participation. People are recognizing the importance and power of prayer and staying

connected with God and with one another within our forced-disconnected community life.

I am extremely impressed by the resilience of the members of the bereavement team, who were able to rise to the occasion each time a need arose. The insights from their personal experiences and feedback have enriched my understanding of this process and equipped me tremendously for the project.

As stated above, our scheduled six-week meetings were interrupted due to the coronavirus pandemic. Things became so irregular that we ended up having ten meetings in addition to community outreach and contacts for hands-on grief support. Ironically, this process had indeed provided us with a useful opportunity to delve deeper into unearthing some relevant grief-related issues. Consequently, we modified our topics and extended the scope of our study to embrace some unresolved/uncompleted grief issues and many unanswered/unanswerable questions that came up during our meetings. Some of these issues and questions are listed below:

1. Delayed Grief—How do we make sure that delayed/suspended grief does not mutate into complicated unresolved grief? How can the church help those facing delayed/suspended grief navigate through the daily routines of work and family responsibility without breaking down or losing themselves?
2. Delayed Funeral and Life Celebrations—When will it be appropriate and convenient to plan and hold funerals and life celebration services? The family of the late brother in our congregation could not hold a funeral or a celebration of life or memorial service. All of that was pushed to the later uncertain time.
3. The Racial-interplay in Covid-19—Why are people of color, especially African-Americans dying disproportionately compared to people from other races? Is it true that this virus was created to destroy people of color?

4. Comprehensive effects of Covid-19—How do we address the emotional, spiritual, physical, sexual, and economic effects the coronavirus has on our communities? What form and shape would the support take?
5. Concerns about our school?—How can we ensure that our schools are safe for our children to return to the classrooms? Are schools going to be virtual or in-person or a hybrid of the two? How do working parents with younger children juggle between work and staying home to help their children with online classes? How are teachers going to deal with the daily challenges and complications associated with planning for virtual and in-person classes? What will happen to those families who do not have access to Wi-Fi, computers, or other electronic devices needed for the online classes? Who will orient parents/guardians who do not have any knowledge about electronics and the virtual platform, to equip them to assist and supervise their little kids? If schools go completely virtual, what will happen to all those kids who depend on the school meals for sustenance? (Thankfully, my kids' school district continued to supply meals to families in need during the Summer break and continued through to the Fall semester. It is also, encouraging to note that the same district has adopted a hybrid of in-person and virtual classes, which has helped parents like me.)
6. Recognizing specialized grief—the group was able to identify these specialized griefs: male specialized grief; female specialized grief; specialized grief among millennials, Gen-X, Gen-Z, and Baby boomers? How do we recognize them? How do we provide corresponding support to these groups? The group also admitted that some of these issues need professional and technical referrals and suggested that for a future project, we can start collecting information about such professionals within the community and build a database of resources to make available to church members who may need referrals.
7. Grief among medical personnel, healthcare professionals, and front-liners—What effective support systems are in place for healthcare workers and front-liners who have to risk their lives and that of their families to help save

others? They helplessly see their patients dying in unprecedented numbers daily. What kind of emotional and spiritual support do they need? And how can that be provided? Some of them are forced to stay away from home due to exposure to the virus.

- a. One of the team members shared that his company has given every employee a scheduled two weeks paid vacation and has also partnered with Delta airlines for a getaway trip to a destination of their choice when things normalize. This news was received with such joy and hope that members of the team desired similar things to be done in all other companies.
 - b. When it became apparent that more and more members of the congregation were facing economic crises, I proposed to the leadership of the church and was approved to set up a Disaster Relief Ministry to help address such need. Subsequently, from March to July the church procured a variety of household and food items that were difficult to find in the stores and distributed them to the houses of members in need. Members who benefited from this ministry included those who lost their jobs, those who, for various reasons, could not go to the stores, and those who were generally in a financial crisis.
8. Recognizing the different types of losses—among losses due to death, the team identified and recognized the loss of financial power due to death of the wage earner of the family; loss of job due to complete layoff, reduced hours and voluntary unemployment; loss of intimacy due to exposure to the virus and/or simply by the type of work some people do; finally, loss of social freedom, affecting all social gatherings and activities. Even the all-important protection like the facial masks have affected our ability to recognize people we know.

These were the many questions that we struggled with during our meetings. To some of them, we were able to provide some suggested ways to handle them within our

church communities, which we will talk about later. The rest, we raised as part of our Christian duty, not knowing how to resolve them.

The First Topic—"Christian Understanding Of Death And Funeral Rites"
(see appendix A)

For this topic, we met for two weeks to adequately exhaust it. We met online through the Zoom video conference platform on Sunday, March 8 and 15, 2020 from 8:00 pm to 10:00 pm each night. We began each meeting with a short devotion, involving a hymn, "Guide Me O Thou Great Jehovah" (on the first meeting), and "A Charge to Keep I Have" (on the second). A member of the team said the opening prayer. When we all check-in on the first meeting, we immediately identified another challenge: five of the members joined the meeting from work. They were working night shifts at hospitals, nursing homes, and Assisted Living facilities. The discussion shifted to addressing this situation. After a long discussion, the team agreed to maintain our current schedule, since no other day and time seemed suitable for our purpose.

With that hurdle cleared, we started our discussion for the day. I presented the topic and highlighted the important points for our contemplation, and later discussion. We followed this procedure for all the other meetings. We noted the three types of deaths described in the Bible: physical death, spiritual death, and the second death. To understand the mystery of life, death, and life after death, we drew special attention to the truth that death is an event belonging to our sinful existence. We discussed how the OT and NT both reflect on physical death in different but collaborative lights to harmonize God's revelation of this mystery. Physical death only means that we are creatures and not God. Unlike the Creator, we creatures do not live forever. Death is a natural

phenomenon; it is the result of human sin (individual sins and that of others), and it is also brought upon us by the devil. We observed that the NT enjoins believers to not grieve like those who do not have hope because of the resurrected Lord Jesus.

On Spiritual Death, we understood that scripture describes it in theological terms rather than biological, meaning it is a separation from God. This separation from God is also caused by sin, like physical death, and can lead to it. Touching on the Second Death, we learned that it was described as eternal separation from God and all the redeemed people of God and that it will happen at the end of the age.

Finally, we noted with interest the simplicity of funeral rites and ceremonies in the Bible and how Jesus seemed to have ruined every funeral He ever attended on earth, by raising the dead, giving us a foretaste of the resurrection life to come; and by attending them, Jesus established that it is all right to have funerals.

Following the presentation, members were invited to reflect and share their individual experiences with death and funerals. Of particular interest are the stories of two members of the team; the first one was a sister who shared her troubling experience of losing her husband during the early years of migrating to the United States with her family. He died suddenly from a mysterious illness. Not knowing her way around, she was limited to the small circle of friends and family members, all of whom were busy with their jobs and family. Consequently, the only support she received and relied on was from her children, some of whom had started working. These children talked to her, cooked for her, shopped for her, and provided the bulk of the finances for the burial and funeral of their father. At the end of her narrative, she acknowledged that she never grieved well and after many years she still had not gotten over the loss. I realized then

that this sister had gone through reliving her loss and grieving all over again. We, therefore, gave her time and space to grief afresh, while the team provided emotional support, validation of the difficulty of her situation, and reassurance. In the end, she expressed her gratitude to the team and the opportunity to be able to finally put her long-standing grief in its proper perspective.

The second one was a brother who shared his experience of attending the funeral of his father-in-law in Ghana. He is an Ashanti, (one of the major tribes in Ghana located in the mid-west), but her wife's father was a Fanti, (another major tribe in Ghana, mostly found along the coastal and south-central regions). Though both of these tribes are part of the larger homogeneous group called Akan, this brother was so shocked by the differences in funeral rites and ceremonies between the two that he could hardly go through it without receiving assistance from some elders. Without taking the time to study his wife's tribal background, he was unprepared for the role he had to play and could not meet the required expectation of a son-in-law on such occasions. His take-home advice to the group is for couples, who are from different tribes, to be intentional about learning each other's cultures and teach them to their children, to avoid his type of embarrassment. This then became one of the new issues to discuss in the church setting with the members.

The final session of these two meetings was devoted to questions and answers to evaluate ourselves and plan for the next meetings. The responses members gave to these questions demonstrated full understanding and grasp of the topic for discussion. At the end of each meeting, I said the closing prayer and benediction.

*The Second Topic—"The African Understanding Of Death And Funerals: Rites, Rituals,
And Practices Surrounding Death And Bereavement"*
(See Appendix B).

Like the first, this second topic also took us two weeks on March 22 and 29, 2020 to complete. As usual, we began these sessions with devotion, involving a hymn and prayer. We sang, "Jesus Keep Me Near the Cross" on March 22, and "Give Me the Wings of Faith to Rise" on March 29. Opening prayer was said by a member on each of those days. Following that, I presented the topic for discussion in 30 minutes. The highlights of the topic include the understanding that among Africans the concepts of death, grief, and bereavement are expressed philosophically and theologically in proverbs. I presented some of those proverbs Akans in Ghana use and invited the team members to contribute, after which we discussed their meanings as pertain to death, funerals, and bereavement. The major lessons learned from this topic include:

1. Africans believe that when we die we do not cease to exist, but rather we enter into the realms of the spirit where the ancestors dwell and influence life in the physical realm.
2. For the Akans, not only does it take a village to raise a child, but it also takes a village to bring comfort and hope to the grieving members of the community.
3. The Akans in Ghana stress the universality of death
4. Special rituals and funeral rites are preserved over the years for various reasons: for example, to ensure that the pain of death is acknowledged by the surviving family, the deceased are honored appropriately, according to custom, and a new way is paved for healing and restoration
5. Some African traditional beliefs and practices are to protect, guide, and help the grieving family, although others have outlived their usefulness and some communities are doing away with them.

We also looked into Widowhood rites and their impact on the community, beliefs about the causes/modes of death among Ghanaians, and types of deaths, and how the Akans treat them. On the subject of funerals in Ghana, the team noted that like all other rites of passage, funerals are characterized by specific rites, rituals, and customs that are processed with great care and attention to enable the deceased to enter the world of the ancestors. The team also expressed its ambivalence at the influence western ideologies and cultures are having on some of the African traditional beliefs. For instance, the belief that the soul of the dead wanders around until all burial and funeral ceremonies and rites are properly performed, no longer hold water in modern-day Africa.

We continued to discuss the different stages and ceremonies to observe for a complete funeral among Ghanaians. These are ceremonies for the day death occurs, the first one-week observation, the fortieth-day celebration, the final funeral rites, and the first-anniversary observation. Each of these occasions must be properly observed with the appropriate rituals to ensure socio-economic equilibrium between the world of the spirits and that of the physical.

Finally, we looked at death and funeral rites among Ghanaians in the United States, with particular reference to members of Ghana Calvary United Methodist Church; the influence Western cultures and Christianity have had on how death is perceived, which in turn determines the different ways funerals are held here. This knowledge was harnessed to help cultivate a suitable grief support program for the church.

These two meetings were held during the peak of the Coronavirus when tension and fears were high. As a result, we spent the rest of the meetings discussing the impact

of the pandemic and how we can respond to them. (See “Effect of Covid-19 on the Project” above for details of our discussions and some of the outcomes).

*The Third Topic—Resurrection of Jesus Christ: The Basis for Our Hope in The
Resurrection of The Body
(See Appendix C)*

To discuss this topic the team once again met twice on Sundays, April 5th and 12th from 8:00 pm to 10:00 pm. The pandemic was at its peak around this time, and the State of New Jersey like other states in the country were under complete lockdown. Many people had been laid off or furloughed from work, escalating the already heightened sense of hopelessness and anxiety due to the rising number of affected people and deaths in the State. The message of the passion and resurrection of Jesus Christ was a timely and fitting one as this period also marked the Passion Week and Easter, 2020. Therefore, after our meeting on Palm Sunday night on April 5th, it was suggested that for our Easter meeting we should invite the entire congregation to participate in the program.

This suggestion was well-received by the team for two reasons: firstly, according to our original schedule, we were to induct the bereavement support ministry and its members on Easter Sunday. So, it will be a good opportunity to update the church on the progress of the project and explain why it was not possible to do the induction service on Easter. Secondly, that this teaching will serve as a spiritual balm and salve for our sore souls and troubled minds and restore hope for a better world because all of us were grieving multiple losses and in different ways. The collective soul of the church was in dire need of emotional and spiritual comfort and healing. We wanted to know how the message of Jesus’ victory over death impacts our everyday lives, especially within the

context of facing sudden, imminent death. More importantly, we wanted to explore how this knowledge will help us develop the kind of grief support program that will give the bereaved members hope and assurance

Consequently, on Easter night our attendance rose to fifty-five people at its peak and forty-two, at its lowest. There was an air of excitement and enthusiasm as I presented the topic for the day. The meeting format was also changed for this occasion. We invited the church praise team, who led us in passionate 15-minute praise and worship to open the session, followed by an inspiring prayer by the Lay Leader.

In the presentation of the topic, we decided to make it celebratory, highlighting such salient points as:

- Life in this present age is marred by tragedies, deaths, famine, poverty, displacements, sicknesses, and all kinds of suffering. But through Christ Jesus, God has overpowered death and the grave, that dreadful foe, and has created a new life to which He invites all to partake through faith in Jesus Christ alone.
- Faith in our Resurrected Savior, Jesus Christ produces such peace and hope that we can go through any dark valley of grief with great expectation that our healing will be complete.
- The resurrection is not a resuscitation that seeks to bring the old life back; rather it is a creation of an entirely new life. Therefore, as resurrection believers, we do not seek to return to how things used to be during our time of grief. Instead, we look forward to new ways and opportunities to live the new life in the new normal by God's grace.
- The death of believers is, therefore, not the termination or a loss of their lives. The Bible refers to believers' death as "fallen asleep," painting that hope of waking up again at a future time. We thus believe that at His second coming, Jesus Christ will set all things right and set up His throne and reign as the King of kings and the Lord of lords.

After the presentation, participants were invited to share their experiences and stories with death, Covid-19 related challenges, testimonies of healing, and faith reports. So many people enthusiastically shared their stories that we did not have time for our usual questions and answers forum. The enthusiastic interest demonstrated by the congregation members was so great that I once again felt confirmed and validated that this project is a perfect desideratum for the church. However, to answer some of the questions these church members asked, we had to go back to previous topics, which was both a good and a bad opportunity. The good thing was it served as a revision. On the other hand, it prolonged the meeting and prevented us from finishing what we scheduled to do.

The following week, we could not meet as a team because one of our church members died from complications from the coronavirus. This brother had been hospitalized the previous week, however, due to social-distancing guidelines, no family or friends were allowed to visit. Therefore, we spent time on the phone providing support through reassurances and prayers, which did not go well all the time due to his shortness of breath and pain. Yet, he excitedly assured us he was getting better and hoped to return home shortly. Unfortunately, on Sunday, April 19th we received the news that his condition had deteriorated rapidly.

The congregation gathered together on the evening of that day, like the church in Acts chapter 12, and prayed for him to recover. Later, that night the hospital called to report his death. My loss, pain, disappointment, and despair had to be shelved so that I could be the pastor for the grieving flock. Subsequently, I spent most of the night on the phone with the family, consoling them and guiding them to plan for his burial. During the

week, the bereavement ministry team took turns contacting the family members on the phone for support since social distancing guidelines prevented in-person visits.

It became painfully obvious that not only were we dealing with delayed grief and celebration of life, but we were also facing difficulty locating a funeral parlor willing to take his body and prepare for the truncated burial and funeral services. This was due in part to the fact that many funeral parlors were over-booked and/or overly cautious about dealing with bodies of Coronavirus victims. The latter being due to a lack of adequate knowledge of and the uncertainties surrounding how the virus was transmitted. Truly, those were frightening and troubling days for all of us. Thankfully, the family was willing to bury him within the next week and plan for the funeral at a later convenient time, (which happened to be on Saturday, October 3rd for the traditional final funeral rites at the deceased brother's house and Sunday, October the 4th 2020, for the thanksgiving/memorial service at the church). This made it easier to negotiate with the funeral parlor, which accepted the responsibility. Consequently, as mentioned above, only one family member, the funeral director, and the pastor were allowed at the cemetery on the day of burial.

The following two weeks were dedicated to providing support to the church members using zoom video conferencing. Together with the bereavement support team, we met with small groups of the church on different occasions, allowed them to express their griefs, share their experiences with the late brother in the form of life review, received positive feedback, emotional support, reassurances, and concluded the sections with scripture reading and prayers. This process provided the team a real context in

which their knowledge was put to use; and helped the church heal and put our grief into its proper perspective.

Fourth Topic—Models and Expressions of Grief
(See Appendix D)

As we continued grieving, it became necessary to regather as a team to continue with the project, especially since the next topic directly speaks about grief. Hence, as usual, for this topic, we met on two Sundays beginning on Sunday, May 17th, and continuing on Sunday, May 24th, 2020 at 8:00 pm, still using the Zoom video conference platform. For these two meeting days, we saw the need to modify our meeting format and commenced with inviting team members to check in with where they were with grieving the loss of our brother, how the coronavirus was impacting the general outlook of life and what kind of support was needed. That took the first 45 minutes: after everyone has had a chance to check-in, we decided to have a miniature celebration of life and thanksgiving moment in commemoration of our late brother's life, and for the preservation of our lives, that of our families and friends during these dangerous times. We sang a few hymns and closed the opening session with a prayer of thanksgiving, which was offered by one of the team members.

Our study on May 17th, focused on the “Five Stages of Grief” by Elisabeth Kübler-Ross & David Kessler, which is generally considered among some psychologists as one of the earliest models of grief. It is noteworthy to understand that Kübler-Ross developed this model originally as “Stages of Dying”, which she later redeveloped as “Stages of Grief. However, over the years, there have been numerous expressions of grief models, calling into question the effectiveness and viability of Kübler-Ross’ model.

Others have completely departed from it. However, as a team, we deemed it necessary to take a look at it to better help us understand the other models of grief expressions. These five stages are identified as denial, anger, bargaining, depression, and acceptance; and are summarized as follows:

1. Denial—this initial stage is our natural way of preparing and preserving ourselves in the face of the shock of death. The fact of death is acknowledged intellectually, but the feeling of numbness, hopelessness, and meaninglessness so overwhelms us that, denial is the way to filter our emotions and allows us to cope with the loss in measured gradients.
2. Anger—our logical way of responding to the loss of a loved one manifests in the form of anger. This stage provides us with something or someone to focus our attention on. We are angry at ourselves, other family members, healthcare workers, like doctors, and ultimately God. As a necessary stage of the grieving process, anger must be allowed to run its full course, if we hope to heal. However, we must note that anger, like denial, also has its negative connotation, and can be dangerous if not handled well.
3. Bargaining—on the surface the bargaining phase of grieving appears irrational. Here, we ask, “What if...?” and “If only...” all in an attempt to probe into the past to see if there was something we could have done differently to save our loved one from dying. Hope is inverted to where living in the past helps us to create a new normal in which our loved one is still alive. This temporally helps us to escape the harsh realities of the loss, but it also piles mounts of guilt and self-condemnation on us.
4. Depression—at this stage, we can allow all the emotions and feelings which were suppressed during the first three stages to surface unhindered. The reality of the death of our loved one hit us like a floodgate, plunging us into what seems like bottomless waters of grief. Life losses its meaning and simply going on is pointless. We alienate ourselves from family and friends, who intend to think we need some clinical treatment. The normalcy of this stage demands that we treat it as an unwelcomed guest

who deserves our full attention. This must be differentiated from clinical depression, which is a mental illness requiring a professional therapist.

5. Acceptance—this final stage should not be confused with getting healed, feeling better, or liking the situation. Acceptance, in this sense, means coming to terms with the fact of the death of your loved one and accepting to move on with our life without them. Here, we make adjustments; we relearn new ways of doing the old chores and taking on new responsibilities, allowing ourselves to love again and meet new people. Acceptance does not mean we may never cry again, miss our loved ones, or feel depressed at some point.

On May 24th we studied another model of grief expression by William Worden, a Psychologist, who holds academic appointments at Harvard Medical School and the Rosemead Graduate School of Psychology in California. He has come out with “Four Tasks of Mourning,” which he outlines as:

- a. Task I—To Accept the Reality of the Loss
- b. Task II—To Process the Pain of Grief
- c. Task III—To Adjust to a World Without the Deceased
- d. Task IV: To Find a Way to Remember the Deceased While Embarking on the Rest of One’s Journey Through Life

To understand these tasks, it is important to note that these tasks are like significant and necessary moments in the life of the grieving persons, providing opportunities for them to acknowledge the process of mourning, complete it, and reestablish equilibrium in their lives. We summarized these tasks as follows:

- a. Task I—To Accept the Reality of the Loss

This is the number one task grief presents to the mourner and can be achieved on two levels; simple or basic and deeper and complex. At the simple level, the mourner organizes funerals and performs routine chores that used to involve the dead loved one or

speaks of them in the past tense. The complexity of accepting the reality of the loss involves dealing with stigmatized forms of death like suicide, murder, and accident. How the family deals with this stigma determine their level of acceptance. Also, time is required for performing this task because emotional acceptance takes longer than intellectual. Accepting the reality of the loss can be hindered by denial.

b. Task II—To Process the Pain of Grief

Accomplishing this task requires the grieving family to acknowledge the pain and hurt they feel like a normal part of mourning. Those who do not feel the pain of losing a loved one usually practice the avoidant-dismissing attachment style. To avoid the intensity of the pain some mourners adopt shortcuts like using drugs and alcohol to numb themselves or moving from place to place.

c. Task III—To Adjust to a World Without the Deceased

This task can be accomplished in three different but inter-related levels; namely, external, internal, and spiritual adjustments. Externally, the bereaved would need to learn to do chores alone; for example cooking, eating, and sleeping alone, without the deceased; raising children alone, or learning to managed finances.

When a person losses a spouse, there is also a loss of self-worth and confidence affecting the behavior of the surviving spouse. Successful completion of the internal adjustment requires relearning how to integrate into a world without the dead relative, leading to a restoration of self-worth, self-significance, and self-confidence.

On spiritual adjustment, we learned that when death occurs, the worldview, fundamental life values, and philosophical beliefs of the mourners are shaken and challenged, producing a sense of loss of meaning in life. Therefore, grieving people are

essentially seeking meaning in the loss. Some deaths agree with our fundamental worldviews and faith values, while others, like suicide and murder, challenge our core values and beliefs.

The team recognized that the bereavement support ministers, need to help mourners to relearn how to align their belief system with the reality of their loss, receive satisfying answers to nagging questions about their faith and God, and adjust to those unanswerable realities, and learn how to move forward despite them.

d. Task IV: To Find a Way to Remember the Deceased While Embarking on the Rest of One's Journey Through Life

This task is mostly psychological and can take the form of roleplay using the power of imagination. A child who loses a parent would imagine the parent still around, watching over him/her, and can even talk to them. A surviving spouse will need to memorialize his/her dead spouse, for example, by leaving a seat at the dining table for him/her or creating a special place in his/her heart for the dead spouse while at the same time, opening up to loving another person and for a new relationship, without feeling guilty of abandoning the dead loved one.

The team strongly embraced this task, recognizing that the role of the bereavement ministry, family, and friends is to embrace it as an essential part of the grieving process, validate it and help the grieving persons grow through this path.

After the presentations, we had our usual questions and answers forum, during which we had an exciting time engaging the topics of discussion. To my satisfaction, some of the members who are nurses in the team expressed their delight in re-learning the five stages of grief, adding that they understand it better now than when they were in school. The group unanimously agreed that though some grief counselors are departing

from this model, it will be worthwhile to include it in our grief support dossier to help people understand and normalize their unique grieving process, without feeling like an object of clinical curiosity. After some discussion, we agreed to adopt both models of expression of grief for our bereavement ministry document, while at the same time being open to new ideas and theories that may arise to always be abreast with time and current trends.

*Fifth Topic: An Outline of Bereavement Support Model for The Ghana Calvary
United Methodist Church To Consider
(See Appendix E).*

Our last meeting occurred the following week, on Sunday, May 31st, 2020, from 8:00 pm to 10:00 pm. As usual, we met online through Zoom video conference. As our original plan suggested, our task was to outline a bereavement support model for the church to consider.

The unique context of the members of Ghana Calvary United Methodist Church suggests that any bereavement support program must reflect the socio-economic, and religio-cultural milieu of the people. Inspired by a paper written by Penelope J. Moore; LaVone V. Hazell and Edna M. Honeyghan entitled, “A Profile of Bereavement Supports in African American Church Congregations” and published in 2001, the following questions were addressed in the process of developing a unique bereavement support ministry for the church.

1. What is the nature and scope of bereavement services available to the members of the Church?
2. Who can provide bereavement services?
3. When should bereavement services/support be offered?

4. Where can the support be provided?
5. How can they be instituted?
6. Why is the church an important provider?
7. What can a provider expect when taking on bereavement services?

Members of the Ghana Calvary United Methodist Church share unique experiences with other immigrants and non-immigrants living in the United States. This uniqueness reveals a generalized non-availability and under-utilization of bereavement support resources among Ghanaians in the diaspora. Conversation with other Ghanaian pastors serving in the U.S.A. suggests that the following factors may contribute to this unfortunate state of affairs:

- Lack of proper immigration documents creates a low-socioeconomic status, which in turn builds up fear of being exposed to government officials in the process of seeking support.
- Lack of access to healthcare, which is caused by cultural alienation, and cultural mistrust based on African traditional beliefs and worldview.

The goal of instituting this bereavement support program is to help alleviate some of these concerns and bring the resources to the doorsteps of those who need support during times of loss and grief.

1. What is the nature and scope of bereavement services available to the members of the Church?

Traditionally bereavement support to the mourners is provided by members of the grieving family. Those who are close to the dead person, e.g. widows/widowers, parents, children, and siblings are supported by other relatives, friends, and members of the community. Some of the support include shopping for the bereaved, cooking, doing chores in the house, running some errands, and providing rides. During the first few weeks after the death, some members of the family spend time with the bereaved. This

type of support provides the power of silence and presence, enabling the mourners to feel safe and secure as they cope with the pain of loss.

Other forms of support come from the members of the larger Ghanaian community during traditional funeral services. Financial contributions are provided to help the bereaved defray some of the funeral expenses and future undertakings.

The church already plays an important role in providing support services to the members in times of grief. On the day death happens, the pastor and other members of the church including leaders visit the bereaved members in their house. During this visit they say prayers, sing hymns and songs, relevant scriptures are read and the Gospel of salvation and hope for the final resurrection is shared. Moreover, on the one-week celebration and the day of the final funeral/burial services, the congregation members join family and friends to celebrate the life of the dead loved one, and also provide support through extending condolences, hugging, handshaking, and crying with the bereaved family. All of this not only ensures that the grieving family is not alone in this journey, but also establishes a bond with the outside world enabling the surviving members to trust themselves to receive needed support.

Additionally, the church provides support through different services like funeral and burial, memorial and thanksgiving, and anniversary. On these occasions, the grieving member(s) receive prayers and are encouraged to be strong. However, these support services do not extend to and cover the full scope of the period of grieving. There is no formalized and well-structured ministry of bereavement to continue with the services. Hence, the importance of the church-based, laity-led bereavement ministry.

2. Who will provide the bereavement support services?

The bereavement ministry members who have agreed to undergo the studies will continue to facilitate this grief support ministry. During the training sessions we identified specific important qualities members of the bereavement ministry must possess:

- 1) A natural propensity of compassion and caring attitude with a strong desire to help people in crisis.
- 2) Ability to cultivate and utilize empathetic and non-judgmental communication skills and tools in supporting grieving members.
- 3) Willingness to adopt a hand-holding inter-personal relationship with grieving members of the congregation.

It is important to note that this ministry is not intended to be a professional endeavor; members of the team are not called *counselors* or *therapists*. Those who will receive the grief support will not be addressed as *clients* as it prevails in professional settings. We have decided to refer to the bereavement ministry members as *bereavement ministers* and call recipients of the support as *grieving sisters/brothers*. We gratefully acknowledge the professional and personal experiences of the members of the team, which have greatly enhanced the learning process in this project implementation.

3. When should bereavement services/support be offered?

There will be three levels of engagement in the provision of bereavement support. The first level will be the anticipatory grief stage, during the time a loved one is terminally ill, and death seems inevitable. This will take the form of helping the family of the terminally ill person to process the different forms of emotions they feel, ranging from fear, anger, denial, anticipation, etc., and to be present with them during those times. Where appropriate, the patient may be involved in this process. The second level will focus on the immediate effect of death on the surviving family. This will be in the

form of appropriate services, programs, and rituals necessary to acknowledge, normalize ease the pain of grief of the loss. The third level will involve ongoing activities, programs, visitations, support group meetings, and cards, all aimed at reassuring the grieving persons that they will be supported at every stage throughout the grieving process.

4. Where can the support be provided?

Typically, survivors of loss by death need to feel safe, secure, and comfortable in time and space. Therefore, bereavement support sessions need to be held in a private setting where confidentiality and comfort can be assured. Ideally, the church is a place where most mourners find comfort and solace when receiving support. Alternatively, the support service can be provided in the house of the mourners; or the house of one of the ministry members; or any other place preferred by the grieving individual. It is important to note that sometimes mourners will avoid particular places that remind them of the death of their loved ones. For example, hospitals, nursing homes, assisted living facilities, funeral homes, or even the church building. Therefore, ministry members need to be sensitive to the preferences of the ones receiving support.

5. How can bereavement support services be instituted?

It is envisioned that this ministry will be funded and supported by the church and its leadership as an integral part of the ongoing ministries in the church. This will include presentation and adaptation of the program proposal that will detail mission and objectives; financial needs; appropriate time and space for training and programs; the constitution of ministry members; leadership of the ministry; publication and enlisting of members in need of support; and the nature and scope of support services to be provided to the bereaved members of the congregation.

6. Why is the church an important provider of bereavement support services?

The church is the first place, besides healthcare providers, people call upon when facing terminal illness or anticipating grief due to death. The church is always there to support its members during times of sickness, through visitations, prayers, present companionship, and sometimes, financial assistance. It is the church that provides the appropriate time and space for funeral and memorial services. Such services make the church a relevant institution for the provision of bereavement ministry.

Moreover, members of the congregation share and have a mutual understanding of socio-cultural background that tends to bring a trusting environment, which is an essential component of an effective bereavement service.

When the church provides its members with its bereavement ministry, it frees itself from governmental interferences and enables the church to tap into the talent bank of its lay members.

7. What can we expect when providing church-based bereavement services to members of Ghana Calvary United Methodist Church?

We anticipate an initial misunderstanding of this ministry on the part of the members of the congregation, which stems from seeing the pastor as the legitimate and professional pastoral counselor of the church. This misunderstanding may escalate to an unwillingness to embrace this ministry or outright opposition. The group has developed plans to educate members of the church to address such concerns in the hope of allaying all fears and misunderstandings.

As the bereavement ministry becomes an integral part of the general mission of the church, it is hoped that wider participation will be reached beyond the four walls of

the church. If successful, we envision the ministry being integrated into the outreach program of the church, reaching to other Ghanaians who are unchurched in the community with our support services. This can be used as an evangelism program and naturally improve the membership of the church.

In conclusion, establishing a bereavement support program in Ghana Calvary United Methodist Church is a needed ministry, which we believe has the potential, not only of helping congregation members in their times of grief but also providing sustainable and effective support to Ghanaians in the wider community who go through the grieving process with minimal or no access to support services. I am grateful for what we were able to accomplish considering the difficulties we encountered during the period of the implementation of the project. We had a lot of twists and turns but we were able to complete what we set off to do. We could not work within our timeframe and had to extend the period, yet I appreciate the willingness and contributions of each member of the team.

CHAPTER FIVE

Findings And Conclusions

“Rejoice with those who rejoice, and weep with those who weep” (Romans 12:5, NKJV).

Introduction

This chapter is devoted to sharing some important findings from the project implementation conducted in chapter four. Already, some of the lessons learned and their implications for my ministry in the communities which I serve, and the larger community have been discussed in the previous chapters. What I will do here is to add more findings and conclusions; we will also look at the attempt the bereavement ministry team made at putting together a guidebook as a working dossier for the church (see the conclusion for the template of bereavement support). Finally, we will discuss some crucial questions we raised and how we addressed them. It is important to note that the answers we provided to such questions are not to be taken as absolute or the best. Rather they are reflections of our hearts as we pondered on these crucial questions. We acknowledge that there may be better and similar responses and answers, which other scholars, psychologists, and counselors have provided, and ours can simply be additional thoughts and ideas to consider.

Working on this project has greatly improved my personal and professional understanding of death and grief to such a degree that if I were to minister all my life only as a pastor and hospice chaplain, it would be near-impossible to obtain such a benefit. The sheer magnitude of extensive materials and researches on the subject of bereavement and grief in this field is more than can be addressed within the parameters of this paper. I have come across a variety of materials and resources in the form of books, articles, websites, blogs, and vlogs, which throw more light on the nuances of death,

grief, and bereavement. What I thought I already know had been challenged and stretched to such a degree that it has enabled me to reconfigure my approach to bereavement support already going on in my hospice chaplaincy to correspond to current trends of psychological theories and practices. Somehow, this enhancement made me feel almost outdated because I discovered that some of the practices and approaches I had relied on were undergoing tremendous upgrades, an advantage to this project and my ministry in general. As a result, my appreciation for this doctoral degree program and especially the choice of this project has greatly increased.

Foremost among these resources are the social media and online trends which make bereavement interventions easily accessible to the bereaved and researchers. There are *online memorial* websites, internet-based bereavement interventions, online-based support groups, peer support webpages, and websites dedicated to helping people seeking to normalize their grieving experiences, to name a few. All of these are useful attempts at bringing bereavement and grief support to the doorsteps of those who desperately need it. Some of these supports are offered free of charge, while many of them do charge minimal fees for participation in groups and or accessing the materials. As much as I appreciate all these online support services, it is equally important to establish a church-based and laity-led bereavement ministry that will create a sense of familiarity with persons, places, and procedures.

Through these materials, I have also enhanced my understanding of the acutely delicate distinction between *mourning, grief, and bereavement*. According to William J. Worden, “The term mourning [indicates] the process that occurs after a loss by which a bereaved person comes to terms with the loss. Grief, on the other hand, refers to a

person's reaction to bereavement comprised of thoughts, feelings, and behaviors experienced after the loss that change over time."⁷³ Such distinction, though may be considered trivial by some, is so necessary for anyone who provides grief support to accurately describe and prescribe the right type of interventions that grieving individuals need. We see, therefore that mourning is a process and among Africans and especially, Ghanaians, this involves rituals and rites performed at the various stages of mourning to ensure a healthy grieving that results in *Sozo-healing*. Grief is an individual's reaction to this process whiles bereavement can be seen as a period of mourning, or a state of loss due to death. However, mourning and bereavement can be used interchangeably. For example, when we say a person is grieving, we mean those internalized feelings, thoughts, images, and behaviors they have about the loss. Whiles those who mourn outwardly express all those feelings and thoughts through rites and rituals.

Consequently, it was a surprising revelation to learn that many people go through grief, bereavement, and mourning without getting the needed or the right kind of bereavement support to help them heal and recover, and to move on with their lives. It is surprising because, as observed earlier, there are so many resources and materials available yet not many people make use of them. In our discussions during the project, we discovered that the overwhelming emotional, mental, and physical exhaustion a grieving person goes through, sometimes makes it difficult, if not impossible for them to seek the right kind of support. Others simply are not aware of the support services available to them.

⁷³ Worden, J. William, PhD, ABPP. *Grief Counseling and Grief Therapy*, Fifth Edition (p. 39). Springer Publishing Company. Kindle Edition.

Equally surprising is the realization that this all-important ministry has been neglected and/or excluded from the vision and mission of the church as a whole. Most pastors and ministers we spoke to during this project confessed that there is no grief support ministry, the kind of which this project is proposing in their churches. There is a unanimous agreement among these pastors that such bereavement support ministry is necessary and needed in churches today because barring funeral parlors, the church is the one place where events relating to death, funerals, memorial, and life celebration services occur. This realization encouraged and emboldened the team to make this project work. We determined to get at least a framework in place upon which future endeavors can be built.

However, it is very important to note that this discovery is juxtaposed with the reality that there are a wide variety of grief instances. Whereas for some people grief begins immediately after death, for others it comes at a later time (delayed grief). Moreover, for some people grief is an intense experience; yet others go through it as an easy and mild process. Then there are those for whom grief seems to go on forever, while still others seem to have relatively a short period of mourning.

Finally, some do not exhibit any grief and therefore, may not need support. Such people can manage their grief without another person's intervention. For example, most Ghanaians in the diaspora and Africans, in general, are forced by economic circumstances to continue working or engage in some economic or commercial activities to provide for their families. To such persons, though the loss of the loved one is as grievous to them as it is to any other person, yet the need to keep food on the table for the surviving family members truncates any feeling of grief. I consider these findings very

important because they determine the relevance of this project to people who may need bereavement support. No one would be forced to receive support who does not see the need for it. Moreover, the effectiveness and success of grief support to any individual will depend on the value the person places on their need and the importance of healing.

Additionally, a more dismal picture was painted by the team members. As mentioned in chapter four above, most Ghanaians in the United States find it difficult to get grief support of any kind. This is due to many factors, including lack of knowledge, immigration status, fear of the stigma attached to grief-related symptoms, financial constraints, and family dynamics. To help address these issues, the team plans to organize regular seminars, which will bring specialists like Funeral Directors, Grief counselors, and pastors who will come to the church to provide education and answer participants' questions. If successful, such programs will be extended to the larger community, where hopefully people's fears will be allayed, and concerns addressed.

On the subject of developing the Guidebook for the Bereavement Ministry, the team had to grapple with a couple of other questions. The first question which arose during our deliberations is, "What kind of guidebook do we need? Should we design a guidebook for the use of the bereavement ministry team or a material that will be given to the grieving members seeking support?" Knowing the answer to these questions will determine the content of the guidebook. The next question that engaged our attention is "What is the scope and goal of this project; is writing a guidebook part of the project?"

We decided to address the latter question first. Looking back at the proposal for the project, we concluded that the project proposed to establish a church-based and sustainable bereavement ministry managed by the laity. We concluded that this goal has

been achieved already, in that the church has approved and embraced the ministry; the ministry team has been formed; series of Bible studies has been organized to orientate the team and get them ready for the task. Therefore, technically speaking, we have achieved our goal at this point and do not need to go further from here by adding another task.

However, we all agreed that the ministry cannot function without a guiding principle, hence the need for a guidebook. Yet still, the team believes that as important as designing a guidebook for the ministry is, it is something reserved for another project and not this one. Having arrived at this conclusion, the team confidently decided to defer designing a guidebook for the ministry to a future project, which it will handle as its first assignment after its induction into service. In answer to the first question, the team concluded that since this can be a project for the team outside academic requirements, we can take time to develop two different guidebooks; one as a handbook for the team members who will provide bereavement support and the other to be given to the grieving members seeking for support. In the end, we came up with a template, outlining the bereavement support process, which can be found in the preface of this paper.

The rationale behind this conclusion is twofold. First, some people may not be comfortable attending bereavement support meetings but can benefit from having access to resources and materials that will help normalize their grieving experiences and lead them in the path of healing and recovery. Second, the bereavement team will need a reference material to fall back on to provide relevant support to the grieving members. I must confess that at this point I felt ambivalent about the situation, not knowing the correct path to take.

On one hand, I was eager to put this bereavement support guidebook together as my crown jewel of this project. The prospect of having a guidebook to show created such an exhilarating excitement in me that to postpone this part of the project, felt like someone has busted my bubble. I needed to control the process, but I could not. I was disappointed and flustered. At that time, the words of Proverbs 13:12, “Hope deferred makes the heart sick, but when the desire comes, it is a tree of life,” became flesh and dwelled in me. My heart was indeed sick to the point of grief; it felt like I had failed, unable to complete the task. So, I grieved my loss and disappointment till the fog cleared. I did not share this with the team, however.

On the other hand, part of me felt in total agreement with the bereavement team; that including the designing of a guidebook in this project would mean taking on too much for our purpose. It would add another aspect to the project, which is not within its scope and purpose. After my grieving, this realization was later crystallized by my coming to terms with the truth that designing the guidebook would have taken too much time to complete that eat into the time desperately needed for the writing of this thesis. I could not afford to be hard-pressed with time. Therefore, we unanimously agreed to postpone the writing of the guidebooks to another convenient time, tasking ourselves with gathering the information necessary to start the draft once we begin.

The impact of this process on my pastoral identity was profound. I grieved because a part of the project had suffered some sort of “death.” Or “miscarriage?” I did not know at that time but later observed that I wanted the guidebook as my “trophy” to show that my project was successful. I found myself in need of grief support and received it at the collective suggestion of the team. The irony of the situation is that I am their

pastor, who always provided the support they needed to heal and recover. But this time they *pastored* me; they guided me; they brought me out of the fog. I did not like it initially, but soon, I came to appreciate their collective effort in rescuing me from drowning myself in the ocean of too many ambitious tasks. They did this successfully, without knowing my grief, or that they were helping me. To them, it was just another discussion, which ended in a unanimous decision, though they saw my disappointment. Here too, I learned to appreciate how to become a wounded-healer. In the words of Eugene H. Peterson, “We practice our death by giving up our will to live on our terms. Only in that relinquishing or renunciation are we able to practice resurrection.”⁷⁴ In my vulnerability through surrendering to others’ opinions, I gained a relationship of trustworthiness between me and members of the team, which confirmed to me that they were the right fit for the task.

Moreover, this turned out to be a good death in many ways, as I later reflected. My hope, though deferred, was not completely shattered. Designing a guidebook for the bereavement ministry was not dead after all; maybe the deferment is like a coma, or in the words of Jesus, “Our friend...sleeps” (John 11:11). There is the hope of resurrection for that part of the project. The team had agreed to take up the task at a later time and do it thoroughly, something that can endure the test of time, rather than rushing through it now, just because the pastor wanted a trophy of accomplishment. By giving up this want, I now can look forward to a time of resurrection in which we will work together to make this part of our dream a reality. In the time being, we came up with a template that can be used by other churches interested in starting their own laity-led bereavement ministry.

⁷⁴ Eugene H. Peterson, *The Pastor: A Memoir*, (New York, NY: Harper One, 2011), 290.

My appreciation and respect for the team and laity in general, have increased exponentially since then. Their gifts, graces, and talents, their contribution and support to the general ministry of the church and especially to this project have received a new level of appreciation in me that I otherwise, would not have without this project. I have always believed and respected the contributions of gifted and talented laity in my ministry. But now, thanks to this project, I have learned new ways to respect and include not only those openly recognized as talented and gifted but also everyone in the body of Christ, because as these volunteers have confirmed, some layback people need to be invited and assigned with responsibilities to enable them to identify their gifts and talents.

Prophetically, this project has brought me face to face with both the existential and philosophical realities of grief and the need for a relevant and sustainable bereavement support ministry in the church. The mortality and brevity of human life including that of my own, rose to the forefront demanding attention; it moved from intellectual awareness to being a reality in need of addressing. I remember when the news media kept reporting the rising number of Covid-19 related deaths in the Tri-state area, fear gripped all of us. As we went through the Bible studies the reality of our mortality hit us with a barrage of emotions like a tsunami.

This was no more something we believed could happen somewhere in the future or to some other people. Now death was all around us and with us. We saw death in the next-door neighbor, in the grocery stores, at the workplace, on the street, and more intimately, at church. The next person I came across could be the one who could potentially transmit the virus to me. We were forced to be uncomfortable around and suspicious of one another. Even with the proper Personal Protection Equipment (PPE)

and social distancing guidelines in place, we could not trust the next person around us. Seeing on the TV several tents, and trailers converted into morgues and treatment centers in parks and the streets of New York City, Newark, NJ, and other places around us heightened the fear and anxieties in all of us.

In the days following this awareness, we submerged ourselves in this project as an anchor and a life-line for our survival. The project for establishing a church-based bereavement ministry was gradually becoming a place of solace for us. our meetings created space and time for us to share our fears and challenges and received positive feedbacks and support as best as could be provided. We became each other's keeper in a give-and-take relationship in which the harsh reality of human helplessness in the face of a pandemic shaped our somber narratives and moved us closer to God. Running to God was our only way of finding peace and a sense of normalcy. At some point, we were relieved to realize that this project was not just an academic exercise for the pastor. We found out that reading and discussing those materials spoke to us as though we were receiving grief support. They became our quest for comfort, reassurance, and solace in God in the face of "imminent" death and our helplessness and hopelessness.

At one point, I remembered and shared with the team, the last words of John Wesley as he laid dying surrounded by his close friends, "The best of all is, God is with us...The Lord is with us, the God of Jacob is our refuge!"⁷⁵ Sharing the story surrounding the last hours of John Wesley, the founder of Methodism became the breakthrough lifeline on which we all hung as we continued to wade through these uncertain times of sicknesses, social distancing, and deaths. I felt being called upon to speak to these

⁷⁵ John Wesley, *The Journal of John Wesley*, (Grand Rapids, MI: Christian Classics Ethereal Library, 1951), 284. Downloaded from the internet at: <http://www.ccel.org/ccel/wesley/journal.html>

existential issues and believe that through introspective self-evaluation, I challenged myself and my team to rise to the occasion. People needed us, we needed each other, and we all need God.

The question of the meaning and purpose of life was raised during this project, together with a query into the eternal destiny of those who died unexpectedly during the pandemic. More crucially, the team needed to know what happens to criminals, murderers, and those who hurt others when they die. Addressing these same sentiments in his book, “Rings of Fire: Walking in Faith Through a Volcanic Future”, professor Dr. Leonard Sweet, aptly asked such poignant questions. “Are there no consequences for our actions, no matter how evil or depraved, or abusive? Is life not Truth and/or Consequences?”⁷⁶ These questions were both a reminder and confirmation of the rightness of a conversation I once had with one of my hospice patients, who I believe is now in glory with the Lord Jesus.

For the sake of privacy, I will refer to him as Maxwell. He was in his 90s and suffering from terminal sickness. Upon our first encounter, Maxwell identified himself as non-religious, but more leaning towards agnosticism. He did not believe in God, hell, heaven, or life after death in general. He was very strong and emphatic about that and in adherence to hospice policy, I respected his views and philosophies. As a chaplain, it is unprofessional and ethically wrong to evangelize, seek to convert, or change the religious views or affiliations of my patients and families. So initially, I was very certain that Maxwell will ask me not to return since he did not have use for my services. To my

⁷⁶ Sweet, Leonard, *Rings of Fire: Walking in Faith Through a Volcanic Future*, (Colorado Springs, CO: NavPress, 2019), 197-198

astonishment and aspiration, he wanted me to visit him once a week, which is my highest visit frequency on record so far, barring emergencies.

For the first few months, our conversation focused on everything but religious and spiritual matters. But one day, Maxwell, who was scientifically oriented, brought up the subject of the mind, which never ceases to exist after we die. After an interesting discussion, we both agreed that what Maxwell referred to as the mind, is what Christians call the soul. From then on, Maxwell's interest was piqued and, in the days following, our conversations centered on God, hell, heaven, and the afterlife. Though he did not yet believe in any of them, Maxwell was at least open and comfortable to discuss and respect the views of others.

Then one day, he expressly stated he might allow the concept of life after death, but he would not go farther into believing in heaven or hell. I believe God was at work all along because, without me preparing in advance for it, these rhetorical questions came out of my mouth. Borrowing the words of Dr. Sweet again, "The sealed moral universe of secular ethics, where right and good are things we make up as we go along, cannot be broken without the eschatological claims of an ultimate judgment." Maxwell was confronted with his mortality and needed to decide on his eternal destiny. I asked, "What is the point of morality or the need for rightness if there is no eternal consequence for our actions?" Eventually, my questions to him and the subsequent interesting discussions led Maxwell to confess faith in Jesus Christ and asked me to pray for him. Maxwell and I discussed the following questions later in detail: "What happens to those who get away with murder, so to speak, and never faced justice on this earth?" "If there is no hell or

heaven, how would all those millions of people murdered, raped, robbed, exploited, and generally maltreated ever find peace?"

To these questions, Maxwell confidently but simply responded, "I guess there must be a heaven or hell, after all, to balance things." I needed to clarify this conclusion, because I was afraid he would fall into the same trap of the kind of theology that believes that God is vindictive, who cannot wait to send some terrible people to hell, just "to balance things." From then on, I helped Maxwell to understand the love of God and the fact that God created people for God and hell for the devil and not people. However, people can choose to reject God's love and invitation to enter into a loving and intimate relationship with Him and ultimately decide their eternal destiny apart from God.

Something spectacularly beautiful happened afterward. In the last few months before his death, Maxwell's life took on a new vibrancy and purpose, which made him do things that shocked all of us. Not only did he share his new-found faith with family, friends, and neighbors, he enrolled in the adult gym program, in his adult living community for a couple of months. This he religiously occupied himself with till his body could not cope with the strain and stress anymore. Looking for new meaning and purpose in life, he then enrolled in a painting class. To his credit, Maxwell left behind a room full of paintings of animals, nature scenes, and family portraits, which the family takes as a treasured legacy of their father and grandfather.

After he died, his family graciously called upon me to officiate at his homegoing service, which I accepted with gratitude and honor. Maxwell's family was so relieved and elated to know that their father and grandfather believed in God and got saved before his death. They had harbored concerns about this situation without knowing how to approach

him about it. So when Maxwell told them about his faith in Jesus, they could not be happier. At the funeral service, I was honored when my name was mentioned by all the children and grandchildren who shared their tributes as being instrumental in helping Maxwell find purpose and meaning in the last few months of his life and ultimately dying as a follower of Jesus. They celebrated the hope of our final resurrection in which they shall reunite with Maxwell again, never to be separated through all eternity.

I shared this story by way of addressing the existential questions that confronted us during the project implementation. We believe that life has meaning and purpose only when we see it from God's perspective; it is not so much about how long we live as it is about how well we live following God's will. At any stage in our lives, God is calling our attention and inviting us to receive and enjoy a better life than what we have created for ourselves. The Prophet Isaiah saw this about God when he proclaimed, "Even when you are old, I will be the same. And even when your hair turns white, I will help you. I will take care of what I have made. I will carry you and will save you" (Isaiah 46:4, NLT).

We also faced another question, namely, anticipatory grief and how to support those who go through it. Towards the end of one of our meetings, a team member raised this question, "What can we do for those who are dying slowly from a terminal illness? Is there some kind of support for patients and families who are going through the end of life process?" In other words, what kind of support is there for those who go through anticipatory grief? The question reminded me of an experience I had with one of my hospice patients. The story I shared with the group helped us all to better understand the intricate dynamics involved in anticipatory grief and provided us with the needed resources and tools to prepare ourselves to support those facing anticipatory grief.

Trevor (not his actual name) was an African-American male who came on hospice with a terminal diagnosis of pancreatic cancer. He was in his mid-50s, a tall, slender, energetic, good-looking, and intelligent man. By the time he came on hospice he had a huge case of anger and resentment in him, yet he tried to be friendly with me the first time I visited him. He was a typical case of anticipatory grief, which is the process of anticipating one's death or that of a loved one. In this process, we grieve the death, which is in the future, whereas in regular grief, we look back to the loss of the past. Discussing this subject, Elisabeth Kübler-Ross and David Kessler pointed out that, "We may experience all five stages of loss (denial, anger, bargaining, depression, and acceptance) before the actual death. We may experience only anger and denial. Not everyone experiences anticipatory grief, and if they do, certainly not in the same way."⁷⁷ I was curious to know more about Trevor's anticipatory grief process.

At this time he was living in his sister's apartment, was physically weak but could do most of his activities for daily living (ADLs) by himself; needed little or no assistance, except cooking, driving, shopping, and laundry. Aware of Trevor's anger, I wanted to know where he was in the process and how best to support him. When asked, he graciously and confidently opened up and shared that he had denial for two years when he was diagnosed. He had hoped that some medical breakthrough could help him but that did not happen, and when it became apparent that he was going to die eventually, he could not help but become very angry. After a few weeks, his anger morphed into guilt, as he started asking for scriptures and prayers to help him make amends because even though he did not want to go into details, he explained that there were people he had hurt

⁷⁷ Kübler-Ross, Elisabeth; Kessler, David. *On Grief and Grieving: Finding the Meaning of Grief Through the Five Stages of Loss* (p. 4). Scribner. Kindle Edition.

and relationships he destroyed. As he faced his impending death, an uncertain future, and the unknown, Trevor expressed feelings of aches in his heart, lamenting he did not want to die with unresolved issues and unfinished business.

Eventually, Trevor recognized the toll the slowly dying process was having on his sister, so he boldly decided to take control of some aspect of his life before he died. Consequently, he requested that the hospice team find and arrange a long-term facility where he would relocate to when he physically was unable to take care of himself. In this way, he chose not to be an extra burden on his sister, who later expressed her appreciation of her brother's thoughtfulness and consideration of her needs. Here, we see Trevor at the *negotiation stage* of grieving his anticipated death, focusing on things he could change and leaving those beyond his control.

As a teacher, his sister was mostly out of the house, so I did not see her often, or was I able to observe any expression of anticipatory grief on her part. Yet her response to Trevor's decision and the motive behind, demonstrated that she was internalizing how the days leading to Trevor's death were going to affect her. Later, she told me that she was very apprehensive of having her brother die in the apartment but did not know how to broach the subject with him, since she did not have any alternate solution.

Eventually, Trevor could not wait to relocate to the long-term facility, where he became the *darling boy* to both residents and staff. Through social activities, helping others, and his simply charming personality, he seemed to be mentally stimulated. Although he was not healing, neither was he declining; he plateaued for some time, raising the level of the sense of living and dying in dignity for him. I was so happy for

him because though he was grieving his inevitable death, Trevor was also learning to live his life the best way possible.

Then, one day during my visit, Trevor shocked me with a question, which initially unsettled me. We had strolled around the building talking about the meaning of life and the consequences of our choices; now we were sitting in the atrium of the facility, watching people coming and going. Out of nowhere, he asked, “Nathan, do you think there is hope for me?” As I said earlier, I had no idea what he meant. I thought maybe he was talking about the hope of getting completely healed since everybody was congratulating him on how good he looked. Then, I reflected, what if he wanted to know if he would go to heaven? In the end, I asked, “what do you mean?” His response was as shocking as it was revealing. He muttered, “I mean, do you think I have a chance of getting into a relationship?” The silence that followed this declaration was so deafening I had to look away for a moment. In the interim, Trevor stared at me with an expression I could not define on his face. After what seemed like an eternity, I released the breath I did not know I was holding, and looked back at him, asking, “Well, have you found someone...I mean do you have someone in mind?” He said, “Not exactly.” In the conversation that ensued, he revealed that his last relationship did not end well on a good note and he felt like reviving it, but he is afraid the woman would reject him for the pain he caused. Conversely, he did not want anyone to accept him out of pity for his terminal condition.

Eventually, through the support of his sister, Trevor was able to reconnect with his girlfriend and the spark of a loving bond that ensued was simply miraculous. This woman came and lightened up Trevor’s life to such brilliance that he sometimes forgot

that he was a resident in a Nursing Home. She would visit daily, spent time with him, and sometimes took him out in her car, just to drive around. Their rekindled love and companionship were admirable. With hindsight, I can see Trevor moved from the stage of negotiation to acceptance all within a brief period, in which reconnecting to the woman he loved, helped him to deal with his anticipatory grief in a healthy manner.

As is commonly said, this turned out to be “the sunshine before the storm.” After a month of the *honeymoon* experience, things abruptly came to an end as Trevor rapidly declined. His cancer kicked back with such a force and vengeance that he could not keep anything down. He violently threw up anything he ate and drank, including his medications. Sometimes he would retch with such a convulsive noise that everyone in his hallway would hear and feel bad for him. Naturally, the negative effect of not being able to eat or drink, shrunk his already emaciated body, making Trevor look like a walking skeleton. Needless to say, this was excruciatingly painful to watch, not knowing what to do to help him. I felt so devastated, not being able to imagine what the family was going through, let alone imagining Trevor’s pain and suffering.

Initially, his girlfriend visited and sat by his bedside, holding his hands and offering a soothing and comforting presence. Unfortunately, as Trevor’s condition worsened and his body deteriorated, becoming bed-bound and total care-dependent, the girlfriend could not take it any longer. One day, she simply stopped coming, refused to pick up his calls, or returned them. No attempt at contacting her proved successful, a deadly blow that plunged Trevor into a deep depression from which he would not return. A few weeks later, Trevor died. It was a sad day. No one knows what he must have felt prior to his death since he stopped talking and responding to us. To some, Trevor died an

unhappy, rejected, and depressed man; we may not know. But I want to believe that although he was disappointed when his girlfriend absconded at the time he needed her most, Trevor died knowing he was loved by God and surrounded by loving family and friends who never left his side till the end.

In his anticipatory grief, Trevor was able to identify his spiritual, physical, and emotional needs and received the needed support to cope appropriately with his symptoms and condition. He knew people he had hurt and received support to deal with his guilt and made amend with some of them. he felt love-starved as well as estranged by the woman he loved. Again, bringing this out, helped him to receive the support he needed to reconnect and reconcile with his estranged girl-friend. Though it was by some standards, an unhappy ending, we can say in the words of Alfred Lord Tennyson, "'tis better to have loved and lost than never to have loved at all." Physically, Trevor knew he was getting weaker, was aware of the burden his care was going to put on his family and volunteered to move to a long-term facility, where his death would not produce trauma to his family.

After sharing the story with the group, I opened the floor for reflections. The majority of the members noted the sad ending of a story that had the potential of ending with life instead of death. Others emphasized the ups and downs, hope, and despair that were woven in this anticipatory grief narrative. Still, others were able to describe the role the chaplain, nursing home staff and residents, and family played in guiding Trevor through the maze of the anticipatory grief process. Finally, we noted the role the girlfriend played in lifting his spirit by bringing him life and hope but inadvertently, taking it away in the end.

More importantly, there was a shared feeling of inadequacy in the face of such an unpredictable journey in the lives of those dealing with a terminal illness. The team was quick to point out its inability to accomplish such a task. When asked whether the fear related to anticipatory grief alone or the entire bereavement ministry project, the team unanimously responded that they do not see themselves successfully helping grieving people recover from grief to health and new life.

This honest admission was well appreciated and validated, but it also created a dent in the progress we had made so far in the project implementation. After more discussions and reflections, we were able, to sum up, our thoughts and conclusions in the following words:

Firstly, the success of grief support does not depend exclusively on the providers of the support. As important and relevant as the providers of grief support are, none who support bereaved people unnecessarily impose on themselves the full responsibility of recovery and functionality. Rather, we acknowledge the equally important role the bereaved persons must play if they will successfully come to full adaptation and functionality. The grieving person must be ready and willing to accept the support and perform the necessary tasks required for the desired goal of recovery and restoration.

Secondly, we recognize that not every mourning and the grieving process always results in full functionality and restoration; and that we should not think of always seeing success in the support we give to the persons who are mourning. As William J. Worden quoting George Engel, observed, "Therefore, Engel sees the process of mourning as similar to the process of healing. As with healing, full function, or nearly full function, can be restored, but there are also incidents of impaired function and inadequate

healing.”⁷⁸ We find this truth relieving and encouraging in that what we envision as success may not necessarily look the same to everyone.

Thirdly, and more importantly, as Christian bereavement ministers, we see our adequacy not in and of ourselves, but in the unchanging grace, power, and faithfulness of God. Our confidence is not in ourselves, for we believe that God equips us for the ministry into which He calls us. These words of the Apostle Paul comforted us and established our hope for the ministry: “And I thank Christ Jesus for our Lord who has enabled me, because He counted me faithful, putting me into the ministry” (1 Timothy 1:12, NKJV). What the Apostle is saying is that God counts us faithful and enables us for the ministry. We, therefore, believe that through our dependence on God’s power, grace and providence, we will be able to bring the desired comfort and recovery to those who need it; and if for some reason, we do not see the fulfillment of the expectations, we would still be thankful, reassess and keep on with the ministry.

More questions followed, some of which came from me. Typically, I needed to know, “Is grief a type of sickness from which we must heal, or is it simply a natural stage in life to be expected by everyone?” This curiosity came to me from reading Worden, J. William’s book “Grief Counseling and Grief Therapy: A Handbook for the Mental Health Practitioner.” William discusses a thesis by George Engel, who first raised this question in an essay published in *Psychosomatic Medicine*.⁷⁹ “Engel’s thesis is that the loss of a loved one is psychologically traumatic to the same extent that being severely wounded or burned is physiologically traumatic.”⁸⁰ I, therefore, started looking into what

⁷⁸ Worden, J. William, PhD, ABPP. *Grief Counseling and Grief Therapy*, Fifth Edition (p. 18). Springer Publishing Company. Kindle Edition.

⁷⁹ Ibid.

⁸⁰ Ibid.

others have said in response to that and to find out what the team thinks about the question.

We discovered that without being philosophical and intellectual about this ministry, we came across more questions in the process than answers. We bumped into such questions as “What is normal or abnormal about grief?” And “If grief is a universal experience of all humans, how can it be a disease?” Psychologists and Psychiatrists like George Engel and Katherine Shear have used the term Pathological in describing certain types of grief. If this is so, “Should we then seek medical diagnoses and treatments or a cure for our grief?” In other words, “Is grief a pathological condition in the sense that the best solution lies in pharmaceutical realms?”

According to J. Worth Kilcrease, a bereavement counselor in Texas, there are three reasons why we are tempted to see grief as a disease,

First, both grief and an illness make it harder to function, at least temporarily. Second, we may experience grief reactions we have never encountered before and think something is drastically wrong with us. We must be sick for this to be happening to us. Third, we tend to use words to describe grief that we associate with an illness, words such as “heal,” “symptoms,” and “recover.” (For this reason, I prefer to use words like “manifestations” or “expressions” of grief rather than disease-related words.)⁸¹

He concludes that as a healthy reaction to a loss, grief cannot be regarded as a disease because it is not caused by viruses, bacteria, or any physiological condition. To this, our ministry team subscribed and further differentiated between healthy/uncomplicated grief and grief that is so much ruffled with complications, including clinical depression and suicidal ideation. Moreover, the team observed that grief can adversely affect a person’s

⁸¹ J. Worth Kilcrease, LPC, PLLC, “Grief and Disease,” <https://www.kilcrease.com/index.php/about-loss/grief/grief-and-disease>

health, but it does not mean that grief in itself is a disease. Rather, if not properly managed, complicated grief can cause or lead to sickness.

In the end, we were persuaded to conclude that this is definitely an ongoing debate whose end is nowhere closer in view; that there are two extreme positions to this debate, with a third running in the middle. On one extreme is the school of thought which generally sees grief as a disease requiring medical interventions including medications for healing. The other extreme position believes that grief should not be seen as a disease at all. One such proponent is Gerald May, who argued, “Grief is neither a disorder nor a healing process; it is a sign of health itself, a whole and natural expression of love. Nor must we see grief as a step towards something better. No matter how much it hurts—it may be the greatest pain in life—grief can be an end in itself, a pure expression of love.”⁸²

The group decided to tow the middle line option, which states that there may be situations, when grief can be seen as a disease, namely complicated grief, which affects a person’s physical, mental and emotional health, requiring clinical and medical interventions. These interventions include medications, counseling, or therapy. On the other hand, there are a majority of grief cases in which the grieving persons were able to recover from the loss easily and comfortably, leading to successful adaptation to their new norm. We noted among members of the ministry team that some of us have gone through this sort of grief without the associated sicknesses or diseases.

⁸² Ibid.

Therefore, we agreed to maintain this line of understanding in the bereavement ministry and when faced with signs of complicated grief as outlined in chapter three, we will make the necessary referral for professional interventions as needed.

Then came an interesting follow-up query, namely, “What terminologies will we use to avoid the confusion of associating grief with a disease?” We agreed to follow Kilcrease’s line of reasoning:

1. We will call our team Bereavement Support Ministry and the members referred to as *ministers* of bereavement support.
2. If we organize support groups, we will call them *network*
3. Instead of *symptoms*, we will use words like *expressions* and *manifestations*; and in place of *healing* and *recovery*, we will use *adaptation* as William Worden suggested.
4. We will not have *clients* but *mourners, the bereaved, and the grieving*. There will be no *sessions* but in the words of Dr. Alan Wolfelt, *companioning with the bereaved*.⁸³ More like a handholding relationship with people in grief.

With these questions and queries out of the way, the team concentrated on plans for the induction of the ministry members. We unanimously agreed to have a special service on Sunday, November 8th, 2020. In collaboration with the leadership of the church, certificates of achievement were procured for the “Bereavement Ministers” of Ghana Calvary United Methodist Church. A special service was held on that day, though the church was not reopened completely, we had a hybrid of in-person and online service, something we had been doing since August 2020. During the service, I stressed again the necessity of the bereavement ministry in the church, not as pastoral counseling but as a

⁸³ Alan D. Wolfelt, Ph.D., “Companioning the Bereaved: An Introduction,” <https://www.massfda.org/Files/Griefwords>

ministry of the laity. I also highlighted the Bible studies conducted so far and the plan to design and complete the specific guidebooks for the ministry. When the certificates were awarded, I was thrilled to see the jubilations in the faces of all the members who were able to make it to church on that day. Three members of the team could not make it due to work schedules and other commitments. Overall, I was overjoyed with the outcome of the induction service. When service was over, members of the church gathered around the team with congratulatory messages and best wishes for the vision and ministry ahead.

Interestingly, the feedback I received from both church members and the bereavement team was both encouraging and hilarious. Whiles, they expressed their enthusiasm for the ministry, their excitement was such that they did not think about it when they said, “even if you don’t get to graduate, please let’s continue and have the ministry in the church.” Of course, it is my desire and determination for the ministry to be functional in the church and assured them of such. Yet the hilarity of their comment did not escape me.

Conclusion

I must humbly admit that when I started this project, I thought I was entering into my *comfort zone*. However, I have been surprised in so many ways that I can count. I will however share one of such surprises. I thought I was familiar with death and dying, and grief and bereavement but reading and talking about these subjects have awakened a grief experience in me that I never thought I had. According to William Worden, the experiences of the bereaved can affect the bereavement counselor’s abilities to be helpful. He goes on to discuss three of such experiences; first, he observes that working with

grieving people acutely makes us aware of our own losses. Second, he contends that bereavement counselors are confronted by their own fear of impending losses or deaths, maybe of a child, spouse, or parents. Finally, the existential anxieties of the counselor's own death create such fears that can impede on his or her effectiveness.⁸⁴ In my case, it was the first kind of experience that affected me for a while, draining my enthusiasm, and stalling my writing progress, but did not impede my counseling ministry.

I was around three years old when my younger sister, who was born directly after me died of measles at age one. Although I remembered and sometimes fondly talked about her with my family members, I never grieved, nor did I or anyone see the need for it. Growing up, only my mother and I shared that memory, for my dad was an absentee father and my siblings were born after the fact. So, it was not so much of a big deal in the family. Yet for the first time in my life, this year on my birthday, I woke up in the middle of the night (around 2:00 am) with a deep sense of foreboding hanging over me. Then out of nowhere, as if my mind did a 50-year rewind, I saw my little sister when she was sick, my mom's frantic attempt at saving her daughter's life, her painful death, and the effect it had on my parents. Some of these scenes were so clear they felt like they were happening in the present. Others were very cloudy and murky. I could not go back to sleep again till morning. The scenes kept playing back in my mind all day long. I felt I was losing my sister all over again, and the painful thing was, this time it hurt more than ever because I was older and acutely aware of grief. To help me cope well with this re-grieving, I called my mom and asked her to fill in the missing pieces of my memory.

⁸⁴ William Worden, pg 252

Thankfully, my mom was very empathetic with me; she listened attentively to my experience without judging me or accusing me of having it all wrong. Rather she lovingly and gently filled in the gaps for me and finally said, “Your sister misses you too and is probably praying for you on your birthday.” Such a touching remark was so invigorating and comforting that all the tears I had tried to hold back all day, were finally set free and I sobbed, wept, and cried, for myself, for my dead sister, for my mother, and all of us. Intellectually, I knew why my mind would dig up past personal losses but as to why this particular loss, the first in my life, I still have no idea why. I only take consolation from my mother’s comforting words. Consequently, I occupied myself with this new-found grief for some days without touching this paper. I was only able to come back to writing after two weeks of properly re-grieving.

I thought I was strong in this area; I felt secure and confident embarking on this project, which I still do to some extent. However, this experience of re-living the death of my younger sister and losing her all over again has put a new understanding on grief experience for me. I believe that certain events in our lives can trigger a person’s suppressed memories and open the floodgates of grief or make them grief all over again as if their loved one had just died. I am both thankful and surprised by this understanding because it is very close to home.

For fifty years, I have been able to move on *meaningfully* with my life without the physical presence of my younger sister. But now I can move on with a new perspective. The comforting words of my mother’s put grief in its more important sphere for me—a spiritual journey—in which my dead sister prays for me. Grief is, therefore, a spiritual journey in which both the dead and the living travel together. It is only when we see our

struggles in grief and mourning that we can find a place for our soul and spirit to provide us with the ability to find meaning in life. In the words of Alan Wolfelt, “In the end, as we as human beings mourn, we must discover meaning to go on living our tomorrows without the physical presence of someone we have loved. Death and grief are spiritual journeys of the heart and soul.”⁸⁵ My heart and soul are on a spiritual journey of finding meaning but I know all my dead loved ones are with me, maybe praying for me, encouraging me, or simply being present. Whatever their role in this journey maybe, I am comforted and satisfied by their presence.

A Template For A Laity-led Bereavement Ministry

Introduction

This template is designed for the church community, spearheaded by the lay members with the pastor serving as a facilitator. The model is only a suggested guide to be used by lay ministers who are looking for something upon which to build their bereavement ministry in the church. It is suggested that the pastor of the church organizes and recruits volunteers from among the laity who will devote themselves to this ministry of providing support to the bereaved members of the congregation. My recommendation is that such lay ministers of bereavement should undergo a period of training organized by the pastor, which will prepare them for this all-important ministry.

This template is not intended to be a one-size-fits-all design. The goal of using this template is based on the understanding that bereavement ministry is not about fixing people with problems or saving people from drowning in the ocean of grief; but rather to

⁸⁵ Alan Wolfelt, pg. 6

learn how to walk alongside the grieving members of the community, providing silent companionship, handholding journey and establishing a relationship of trust between the grieving and the lay minister. We are not into instant solutions here, so be patient to invest time and encourage the grieving members that it is alright to experience the pain and allow themselves to go through the process, facing their questions and fears. We must always bear in mind that we are dealing with people who are experiencing loss and need to adjust to life without their loved ones. Since adjustment to loss comes in different shapes and forms, to different peoples, we must hesitate to introduce theories and formulas of therapy before we have walked the journey of the grieving person. The suggested template below will be explained in detail in the body of this paper.

This model of bereavement ministry adopts J. Worth Kilcrease's line of reasoning in the following ways:

5. The team who will spearhead ministry will be called Bereavement Ministry and the members referred to as *bereavement ministers*;
6. If we organize support groups, we will call them *networks*, which emphasizes giving and receiving support from each other, with the members serving as primary resources; and being each other's keeper;
7. Instead of *symptoms* of grief, we will use words like *expressions* and *manifestations* of grief; this is intended to avoid the confusion associated with whether to classify grief as a disease or not;
8. We will redefine *healing* and *recovery* through the biblical concept of *Sozo*;

9. We will use the term *adaptation* as suggested by William Worden about the *functional* grieving process, instead of effective grieving;
10. To steer away from professional and clinical challenges, the ministry will have *mourners, the bereaved, and the grieving* and not *clients*;
11. Our meetings will not be *sessions* but *companioning with the bereaved*.
More like a handholding relationship with people in grief.

Before Death Occurs

To ensure bereavement support produces the desired goal, it must begin when death is imminent in the family. This is because for most people bereavement begins long before the actual death of their loved one; usually, it starts upon diagnosis of a terminal illness. Consequently, the under-listed indicators can be used to assess the surviving family by the bereavement ministry and to help to prepare them for the impending death and how to adapt to meaningful life without their loved one.

- Serious or chronic health problems;
- History of emotional/mental problems, such as anxiety or depression;
- Concurrent life stressors;
- Change in living environment for the survivor as a result of the death;
- Unresolved past losses and/ or multiple losses over a lifetime;
- Relationship problems with the deceased (anger, ambivalence, or excessive dependence);
- Lack of coping skills;
- Loss of a long-term relationship or a constant companionship;

- Financial problems;
- Lack or loss of support system;
- Lack of religious affiliation or spiritual beliefs;
- History of domestic violence, alcohol/substance abuse, and/or suicidal ideation;
- Role changes occasioned by the illness such as emotional nurturer or decision-maker.⁸⁶

Note that this is the time of hopelessness and helplessness for both patient and family due to loss of control of activities of daily living and other functionalities.

Therefore, as support ministers, providing choices will serve well to empower them and reinforce some sense of control.

Anticipatory Grief Healing Model:

Having determined that anticipatory grief is present, a combination of the following grief coping approaches can be utilized to support the patient and family before death, which will ensure a smooth and seamless transition to bereavement support itself when death occurs:

- Help patient and family verbalize understanding the dying process and identify areas of needs for support;
- Assess the level of anticipatory grief using a scale of zero to ten where zero is the lowest and ten the highest;

⁸⁶ J. Richard Williams, *The Surviving Spouse* (Miami: Vitas Healthcare Corporation, 2003), 29-30.

- Provide an opportunity for patient and caregiver(s) to redefine hope and focus on the quality of life while still facing end-of-life situation;
- Encourage family bonding or reconciliation and reconnection with the surviving members; this will help resolve outstanding tensions and establish communal and mutual strength with loved ones;
- Emphasize to the family, the importance of enhancing a connection with the dying loved one. Rather than focusing on the impending death, families can develop meaning and strength as they spend time with their loved ones;
- Creating a supporting network: this can be done by helping caregivers identify people in their lives with whom they can comfortably and conveniently share their sorrows, fears, and struggles, and from whom they can receive positive feedback;
- Utilizing the church community: individuals and/or groups of church members can be the supporting network for grieving caregivers/families;
- Practical ways of supporting the supporters (Primary Caregivers);
 - Look for errands we can run,
 - Schedule some time to stay with the sick member to allow caregivers to have a break,
 - Cook meals for the family,
 - Send out encouraging cards and notes,
 - Find out if we can pick children up after school and help with their homework and other after-school activities.

- Make phone calls to caregivers.
- Professional counseling: when necessary encourage grieving family/caregivers to seek professional counseling and therapy;
- Rituals and cultural traditions: for some people performing certain culturally-relevant rituals during this time can serve as a great coping mechanism for strength and hope;
- Encourage caregivers about the importance of learning new skills or relearning old ones for better adaptation to the new norm without their loved ones;
- Utilizing Christian spiritual exercises: the benefits of prayer, faith songs/music, scripture reading, meditation, taking reflective or meditative walks cannot be overemphasized.
- Practical suggestions when visiting:
 - Be creative with in-person visits during the Covid-19 pandemic and restrictions.
 - Keep visits under 30 minutes to minimize fatigue (except when relieving caregivers).
 - Take off jacket, sit down and maintain eye contact. This communicates presence and attention-giving.
 - Stay off your phone and other devices except when using it as part of the visit benefit, i.e. reading, playing music, showing photos, etc.

- If the sick member is unresponsive, reading scriptures, meditating materials, singing or playing faith songs or favorite songs helps to ensure peace comfort, and relaxation.
- Be a silent companion. To avoid overstimulation, watch out for signs calling for silence. Silent companion is a powerful way of providing a ministry of caring presence when we don't know what to say.
- When necessary, bring food in disposable, portable, and microwavable dishes, clearly marked, for easy storage and use.
- Observing social-distancing guidelines during the Covid-19 pandemic means redefining and finding new ways of *handshaking*, *hugs*, and other appropriate ways of touching that communicate empathy and compassion.
- Be sensitive to the hardness of hearing and other symptoms and speak loud enough without yelling or screaming;
- When you make phone visits, always ask if it is a good time to talk and ask permission to end the call. (Notice that we call it a *phone visit* and not a *phone call*; because in the era of Covid-19 we visit through phone calls).
- Offer to coordinate with family (caregivers) in planning and celebrating special occasions like anniversaries, graduations, birthdays, etc.

After Death Generalized Grief Support

Not every bereaved family will need grief support, but it is important to offer the support and be available when support is needed. The model below as suggested by Helen Wilson Harris can be used with other models as a guide to supporting grieving families:⁸⁷

1. Normalizing the experiences of the grieving person, especially when they report seeing or hearing the dead loved one before and after the funeral.
2. Assigning helpers from the church to assist with tasks and responsibilities that the bereaved person is forced to undertake by the absence of the loved one.
 - a. Starting widows/widower network in the church;
 - b. Encouraging youth ministry to do some yard work or cleaning the house;
 - c. Assigning surrogate “grandparents” in the congregation.
3. Helping with storing excess food from the funeral by providing additional refrigerators/freezers and continuing to provide food after the funeral is over.
4. Marking calendars and contacting the bereaved family on important days such as birthdays, anniversaries, holidays, etc. Offer to go to the cemetery with them.

⁸⁷ Helen Wilson Harris, “Congregational Care for the Chronically Ill, Dying and the Bereaved,” *Journal of Family Ministry* 14, no. 1 (Spring 2000): 38-41.

5. Acknowledge the emotional difficulties the grieving family endures when they return to the church for the first time after the funeral and provide support.
6. Permitting the grieving members of the church to decide whether they are ready to attend the next funeral service in the church following that of their loved one.
7. Developing rituals incorporated in the service to allow and encourage remembrance, for example, the lighting of candles, singing their favorite hymns/songs, and saying a special prayer.
8. Knowing what not to say to the grieving family, for example, "It was God's will," "He/she is one of God's angels now." "You will be able to have other children" (or "At least you have other children.") "It was probably for the best." "I know you tried to tell him to stop smoking." "I know just how you feel." "You'll be fine because you are so strong."⁸⁸ These statements tend to hurt more than offer support.
9. Talk about the dead loved one in ways that take into consideration fears, sadness, or guilt. Do a sensitive but celebratory life review of the deceased with survivors.

I pray that this basic material will be useful to any church that is interested in establishing a bereavement ministry for its community. I hope it provides a framework for building a more relevant and customized ministry for your context.

⁸⁸ Harris has more of these suggested guidelines in her article, which will be considered alongside others during the implementation of the project (see chapter four).

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APPENDICES

APPENDIX A

SUBJECT ONE

CHRISTIAN UNDERSTANDING OF DEATH AND FUNERALS

APPENDIX B

SUBJECT TWO

THE AFRICAN UNDERSTANDING OF DEATH AND FUNERALS: BELIEFS, RITUALS, AND PRACTICES SURROUNDING DEATH AND GRIEF/BEREAVEMENT

OBJECTIVES

At the end of this study participant will be able:

1. To demonstrate an understanding of the various ceremonies, rituals, and rites surrounding death and funerals among the Ghanaian communities.
2. To compare and contrast Biblical concepts of death and funeral with that Ghanaian beliefs and practices
3. Use the understanding gained so far to recommend and suggest a model of bereavement ministry that will meet the needs and aspirations of members of the church

OUTLINE OF SESSION

- First 10 minutes—opening devotion:
 - hymn/song.....MHB 199 “*Jesus Keep Me Near the Cross*”
 - Scripture reading.....
 - prayer
- Next 30 minutes—presentation of material/content
- Next 15 minutes--individual stories and experiences with grieve and bereavement
- Next 30 minutes—discussions, Q&A time

- Next 30 minutes—refreshment
- Last 5 minutes—Closing courtesies: hymn/song and prayer

Participants will be provided with written study materials and questions for reflections to be used during the Q&A time. I will be the leader and facilitator of all sessions.

Africans are said to be notoriously religious because religious beliefs, practices, rites, and rituals are so embedded in every aspect of daily life that separating religion from African life is simply impossible. Some of these practices, rites, and rituals relate to grief, mourning, and bereavement. Concepts of death, grief, and bereavement are expressed philosophically and theologically in proverbs. These proverbs are euphemisms and maxims that are used to convey and conserve cultural values, traditional concepts, and customs.

For example, the Akans of Ghana (the largest ethnic group in Ghana made up of a homogenous group who are related by language and cultural traits) speak of the universality of death in these words, *Owu atwer baako mmfor*, meaning, “death is like a ladder, which is not climbed by only one person.” This proverb captures the inevitability of death, the mortality of all human beings, and by implication, the communal nature of the support Africans provide to the grieving members of the community. For the Akans, not only does it take a village to raise a child, but it also takes a village to bring comfort and hope to the grieving members of the community.

Another proverb stresses the importance of community bereavement support: *Owuo tesɛ nnɔbua*, which means, “death is like cooperative farming.” Among the farming villages in Ghana, a group of farmers takes turns working in one person’s land till everyone’s land is cleared and crops planted. This is also done during harvesting seasons. In likening death to this mode of farming, the Akans in Ghana are again stressing both the universality of death and the importance of the whole village supporting the bereaved members.

Moreover, among the Gas and Akans in Ghana, there are special rites and rituals for different kinds of deaths. Though some of these traditions have been modified over the years, there are still special widowhood rites performed over a specified period when

a spouse dies. Other special rituals performed are for the death of a king, a priest/priestess, a twin, accidental death (also called unnatural death) such as suicide, drowning, auto accident, and murder. During the time of grief on each of these occasions, special care is taken to ensure that the surviving family is never left alone. A grieving person is never left alone. There are always people around the grieving family, providing support, ensuring that the proper ritual procedures are followed. But most importantly, they serve as a security and safety net to ensure that the grieving person feels secure and safe emotionally, spiritually, and physically. Household chores like cleaning, laundry, grocery shopping, and cooking are taken over by other relatives from the extended family. All of these ensure that the pain of death is acknowledged by the surviving family, the deceased are honored appropriately, according to custom, and a new way is paved for healing and restoration.

Such is the hope envisioned by this project. I am proposing that as an integrative, church-based bereavement ministry, the grieving members' culture and ethnicity will be taken into serious consideration. The project will provide the space that will normalize grieving within one's own cultural setting. This kind of integrated bereavement support ministry can make the church an effective provider of support to its bereaved members. The African model is an important contributor to this project because it ensures that the surviving members will not be left on their own to sort things out or bury themselves with activities/work that may not necessarily help with healthy grieving. This will then make grieving and bereavement a community affair.

The Akans in Ghana also say proverbially, “Oka hwen a nna Oaka enyiwa,” literally meaning whatever the nose smells directly affects the eyes. In context, they believe that when one person/family is grieving the whole community grieves along. This is well captured and reflected in the words of the Apostle Paul, “Rejoice with those who rejoice and weep with those who weep” (Romans 12:5, NKJV).

Matilda Amissah-Arthur shares some typical Ghanaian attempts at consoling the bereaved in her book, *Strength in the Storm: When a Loved One Dies*. She identifies some statements used in an attempt to comfort the bereaved, which may produce a negative outcome, adding certain individuals to be avoided:

“Don't cry”--

“Your spouse is in a better place”

“Don’t worry, you will be fine”

“If there is anything I can do, don’t hesitate to call me”

“It is well”

“God needs him more than you”

“Attitudes”

“Toxic People”

“Hypocrites”

“Busy Bodies”

“Safe People”⁸⁹

TRADITIONAL BELIEFS ABOUT DEATH AND BEREAVEMENT

The African traditional beliefs and practices are to protect, guide, and help the grieving family. Some of them are still necessary, practical, and relevant today, others have outlived their usefulness and some communities are doing away with them.

SOME TRADITIONAL BELIEFS AND PRACTICES

Widowhood rites

1. The widow/widower is kept indoors and not allowed outside the house until after the burial of the dead, which in Ghana, can take months. This is intended to ensure safety and avoid unnecessary exposure to the outside world, but if care is not taken, it can promote depression and exacerbate the grieving process
2. The widow/widow cannot take shower after 6:00 pm—it is difficult to find the rationale behind this practice. Some think that in the ancient days, there were only outhouses and no electricity; therefore going out in the dark to use the bathroom can result in falls and injuries. Others think that the ghost of the dead may be encountered during the night in the bathroom. Since, most modern houses have indoor bathrooms with electricity, more and more people are considering this practice irrelevant.

⁸⁹ ⁸⁹ Matilda Amissah Arthur, *Strength in the Storm: When A Loved One Dies* (Accra, Ghana: Step Publishers, 2019), 18-25

3. No cooking in the house of the dead until after the burial and funeral—Again, this can go on for months. The motive behind this belief/practice is to ensure that the bereaved person/family maintains focus on planning for the funeral, and not be distracted with receiving and waiting on guests and sympathizers. Cooking is done by other relatives and friends from another house and brought to the house to feed the bereaved and guests.
4. Wear only black clothes for one year—This particular practice has received the severest backlash in recent years. Some people don't see the relevance of subjecting a widow/widow to such a gloomy appearance. Others believe that one year is too long and the duration must be allowed to be determined by the person grieving. Still, others think that wearing black clothes does nothing to either enhance or alleviate the pain in grief. How can a widow/widower meet this expectation if their profession requires wearing a uniform?
5. Other widowhood rites Amissah-Arthur identifies as questionable are as follows:
 - a. Tying a rope around the neck of the widow and dragging her around the house
 - b. Confining the widow to a room in the house
 - c. Limiting the widow to the use of a short kitchen stool instead of a chair or couch
 - d. Giving the widow ritual baths, using by elderly women from the dead husband's family
 - e. Forcing the widow to drink concoctions
 - f. Forcing the widow to spend a night with the corpse in a room⁹⁰

It is interesting to note that the above widowhood rites are only for women, not the men who lose their wives, making the rituals more and more questionable. Due to their demeaning and dehumanizing nature of womanhood, many feminists have called for the total abolishment of these widowhood rites.

Beliefs about the causes/modes of death among Ghanaians

Most tribes and clans in Ghana use superstitious beliefs to blame the death of a family member on others. Usually, when a husband dies the woman is accused of either

⁹⁰ Ibid, 36

poisoning him or using spiritual means to kill him. One such accusation is made and believed the widow is then subjected to various kinds of cruel and demeaning treatment as penalty for her offense. This usually results in in-fighting among the children, spreading to the larger family, and eventually creating divisions and rifts.

Other causes of death believed by Ghanaians are as follows:

1. When one breaks a taboo through negligence or folly, the gods or ancestors may strike them dead
2. When one responsible for organizing a befitting burial and funeral rites shirks his/her responsibilities, the ancestors will visit them with sickness leading to death or a sudden death
3. God will punish someone with sickness and/or sudden death when that person lives a wicked life of harming and hurting other people.
4. The gods will punish those who steal from their shrines and kill them
5. If a person sells or misuses property of ancestors without the due protocol, that person may be killed by the ancestors
6. Mass death caused by an epidemic, pandemic, natural disasters like earthquakes and floods are a direct manifestation of the wrath of the Supreme God, the gods, or the ancestors.
7. Witchcraft operations in and outside the family can also cause death in the community. Usually, their victims are considered innocent and so making witches by wicked and shunned.
8. Sorcery and divination are also used by wicked people to target sometimes innocent people or those who have offended somebody in the community. Sorcerers can cause prolonged sickness, which can be averted by another “good” sorcerer, thereby stopping death.⁹¹

Categories of deaths and how the Akans treat them

⁹¹ Peter Sarpong, *Ghana In Retrospect: Some Aspects of Ghanaian Culture* (Accra-Tema: Ghana Publishing Corporation, 1974), 24-26

For the Akans of Ghana, the dead deserves a befitting burial, as they are considered on a journey to join the ancestors. A befitting burial consists of performing all the appropriate rituals, like pouring libation, laying the corpse in the state for viewing in the big hall of the family house, (or the compound, if the funeral attracts, large mourners), proper wake keeping (the vigil for all night long), singing of dirges, the appropriate wailing and crying as a sign of love and respect for the dead, necessary gifts put inside the coffin for use in the next life, an elaborate funeral procession to the cemetery and burial that incorporate the necessary rituals.

When death occurs in the family, eating and cooking are limited; as a sign of respect and honor to the dead, during the first seven days, the family eats only light food; no red meat, no fufu, or any heavy meal is allowed in the house. On the eighth day, the family sits down to celebrate the one week and plan for the final funeral rites, which sometimes can be months into the future. Due to distance and traveling in modern days, the burial and final funeral rites are done at the same time, which again can be as early as two weeks after the death or six months.

Most of these practices have been modified considerably due to Christianity and the influence of Western Culture. However, it is important to know them, because many in the Christian community, who still pay homage to the traditional beliefs and practices.

Concerning the death of an elder who lived to see children, grandchildren, and/or great-grandchildren, such restrictions are lifted. They consider this death as honorable worthy of celebration. Therefore, children, grandchildren, and great-grandchildren are coated with white clay (hyire), as a sign of long life for the living.⁹² There used to be shaving off their hairs, but this practice has died out and in its place, people pay redemption money. Mourning outfits for these types of deaths are red cloth/clothes (Koben/Krogyan) for the very close relatives and black (kuntukuni/birisii) for the distant relatives. All other mourners wore any dark-colored clothes/cloths.⁹³

For the Akans of Ghana, death is both a person and a journey. It is a journey to the underworld or the spirit world, where the dead are made to join ancestors and other

⁹² K. Appiah Kubi, *The Akan of Ghana, West Africa: A Cultural Handbook for Reference*, (Bloomfield, CT: Cowhide Press, 1999), 166

⁹³ Ibid, 164-165

relatives who have gone ahead of them. Such a journey is considered very long and hazardous requiring dexterity, great preparation, and care. Additionally, death is personified as a 'Skeleton' called *Egya Owu* (Father Death). It is heartless and cold. As such a befitting burial will ensure that the necessary gifts, money, essential items, cloths/clothes, etc. are put in the coffin to help the dead on their journey and also to give to the ancestors on arrival. When this is not properly done, it is believed that the dead returns to haunt the living, sometimes in dreams or through some manifestations.⁹⁴

Like the Christian view of heaven and life after death, Ghanaians believe that the world of the spirits is far superior and better than this life. Yet, such belief does not negate the fact that death is seen as cruel, unkind, forceful, and inconsiderate, no respecter of the young or the old, irresistible and inevitable. It is from this belief that when death occurs, it is accompanied by relentless crying and wailing.

However, certain deaths are considered dishonorable.

1. The death of a murderer:
2. Death by suicide
3. Death through childbirth
4. Accidental death

These are given a very simple burial and sometimes when laid in state, insults are hurled against the body for the harm caused. For their burial, the funeral possession is usually done by drunkards who sing profane songs, and the burial itself is so brief, uneventful, and unceremonial.

5. Women dying in childbirth—the body is washed, and preparation for burial is done within a few hours. No viewing or laying in state, because it is believed that the presence of the body will at home perpetuate the misfortune among the women in the family. However, honorable funeral rites are performed for such a woman.⁹⁵

⁹⁴ Peter Sarpong, *Ghana In Retrospect: Some Aspects of Ghanaian Culture* (Accra-Tema: Ghana Publishing Corporation, 1974), 22

⁹⁵ Appiah-Kubi, *The Akan of Ghana, West Africa*, 166

6. Death of a baby—this is seen as tragic and sad, but it is usually not lamentable because, babies are not considered fully “human” yet, and as such can connive with death to play dirty tricks on poor mothers and fathers. Such belief is entrenched in the reincarnation of the ancestors who can be reborn multiple times.⁹⁶
7. Accidental/Untimely/Unnatural death—this is considered very wicked on the part of death. Without warning or signs to allow the bereaved family enough time to prepare.

Ghanaian Funerals

The African traditional societies have elaborate rites of passage that crystalize four important transitional stages in life. These are, birth, signifying entrance into earthly life, with its associated naming ceremonies; puberty rites, which ensures proper transition into adulthood; marriage ceremonies, which celebrate the union of two families with blessings of the fertility of the womb for the expansion of the families; and, death with all the stages of funeral rites, marking the entrance of the dead into the spiritual world, joining the ancestors and sometimes preparing to re-enter this physical/earthly world, according to traditional beliefs of *incarnation*. In the dissertation, *A History Of Death And Funeral Rites: A Case Study Of The Ga In Jamestown (Ghana)*, Mitja Potočnik states that “These rites mark the transitions of the individual passing from one stage of the life cycle to another. Every ethnic group in Ghana has a different attitude towards these rites, which are determined by customs, values, morals, and originally based on traditional beliefs. Death and funeral rites, which are the last rite of passage in a person's life, should be processed with great care and attention that will enable the deceased to enter the world of the ancestors.”⁹⁷ In contemporary-Christian terms, these rites of passage would be equivalent to Baptism, confirmation/graduation, wedding ceremonies, and funeral services.

In traditional Ghana, the soul of the dead is said to wander around until all burial and funeral ceremonies and rites are properly performed. This period used to take a few days

⁹⁶ Peter Sarpong, *Ghana In Retrospect*. 23

⁹⁷ Mitja Potočnik, “A History Of Death And Funeral Rites: A Case Study Of The Ga In Jamestown (Ghana),” (University of Ghana, Legon: July 2017), page 1

to complete in the old days. Some cultures believe it takes four days for the soul to finally return to the spirit world. However, in contemporary Ghana, Western cultural, Judeo-Christian beliefs, Islamic understandings, and migration have influenced and thereby extended this period. Sometimes, depending on the status of the dead person, it would take months for funeral rites to be completed. Again, funeral ceremonies in recent-day Ghana have taken on a more ostentatious outlook, in which there is a lavish display of wealth to depict the socio-economic status of the living family members and not the posthumous fate of the deceased.⁹⁸

The above, notwithstanding, there are important days that the Akans observe or commemorate as part of the funeral ceremonies.

The One Week Observation

The 8th day (commonly called “One Week Observance”), is the observance of the first week following death. On this day, the close family sits down in the family house with the traditional elders to discuss and plan for the funeral. This is also the day that other sympathizers will come with gifts, usually food items, and mourn with the family. All arrangements for the final funeral rites are announced publicly at this time.

Fortieth Day

The 40th-day observance is the occasion forbidding the soul of the dead a final farewell into the world of the ancestors. This day can be before or after the final funeral rites. It is mostly restricted to very close relatives. Depending on the dead person, this can be a joyous occasion, where food and alcoholic beverages are served.

First Anniversary

The one-year commemoration of the dead is an important part of the funeral rites. On this day, the properties of the dead are distributed among the family members. In the case of an elderly, somebody in the family would be chosen to be “an inheritor” called *adzidzifo* by the Fantes. The widowhood period also ends on this day with the appropriate rites and rituals performed the widow/widower is free to re-marry.

The situation is even more complicated among Ghanaians in the diaspora, where observance of the traditional beliefs and practices surrounding death and funerals is

⁹⁸ Ibid., 39-40

virtually impossible. As a result, many innovations have been adopted suitable to the prevailing conditions of the area. We shall look at some of these innovations later.

Honoring the dead through the final funeral rites

If a sick person shows signs of dying, the close relatives are called upon to gather by the bedside and provide support during the dying process. This is done to ensure that there is connecting link between the dead and the living. An elder of the family gives three drops of water to the dying person to ensure that he/she dies peacefully without struggle and complication. After the water is given, the family remains silent at the bedside until death occurs, then, the preparation of the body for burial begins.

Before the body is prepared, specific rituals are performed, such as pouring libation, which is meant to announce to the ancestors that a member of the family is on the way to join them. The name of the dead is mentioned and some of the ancestors are invoked by name during this ritual. Following this, the larger family is notified of the dead, before the chief, elders of the town, and the general public are informed about the dead.

The Wake Keeping (The Viewing)

Traditionally, the wake keeping would be held on the same day or the next day, if death occurred late in the night. With the advent of modern technology, immigration, and sophistication with ceremonies, families have allowed an extended period between when death occurs and when the final funeral rites are performed.

Today, wake keepings are held on Friday nights in consideration of weekdays in which most people go to work. Traditionally, the wake-keeping begins at 8:00 pm, but the corpse would be laid in state at midnight, in the family house. Traditionally, if the death was an adult, who married and had children, the corpse would be laid in a stately bed, lavishly decorated. Unmarried adults with no children and children would be put on a mat on the floor. In some cultures in Ghana, there is no wake keeping for children and they are laid in the state during the day, not at night. According to K. Appiah Kubi, the nature and manner a body is laid in state and the rituals performed, depend on the age, gender, and status of the dead in the community.⁹⁹

⁹⁹ K. Appiah Kubi, *The Akan of Ghana, West Africa: A Cultural Handbook for Reference*, (Bloomfield, CT: Cowhide Press, 1999), 164-166

Before the body is put in the coffin, mourners are allowed to send goodwill messages to their dead relatives. Others send money or gifts and solicit blessings, good fortune, and other forms of help from their dead relatives. This is done under the belief that the dead are in a better state of existence and can influence the lives of the living either for good or evil. Some of the things they say to the dead person embarking on a journey to the spirit world is, “Take this money and use it on your way to the ancestors. When you are thirsty, stop and get something to drink. When you are hungry, stop and get something to eat; and know that we all wish you a safe journey to the ancestor.”¹⁰⁰

If the dead belonged to a social group or a cooperative profession, this group would be represented during the wake keeping, with singing. On the other hand, if the person was a Christian, the church is represented by the pastors, the choir, and other members. In the case, of Christian wake keeping, an official opening is done by the Minister and church elders, with the singing of hymns, reading of scriptures, prayers, and a short message of encouragement. The rest of the night would be filled with music provided by a hired DJ, or local singing group, or church choir/singing group. A typical Ghanaian wake-keeping would have a cacophony of sounds: signing, music on loudspeakers, dirges, and wailing on the side. Light refreshments are served with beverages. At Christian wake keeping alcoholic beverages is not allowed. Additionally, family members, children, and grandchildren sing dirges as a sign of reverence and respect for the dead. Wake keepings typical last till daybreak.

Some of these dirges have lyrics expressing the deepest sentiment of the grieving family. Consequently, when the grieving family cries, “I’ll go with you”, “Don’t go and leave me alone”, they don’t mean they want to die along with the dead relative. They are only portraying a cynical expression of deep-seated sorrow and the degree of their loss.

As stated above, before the body is laid in the casket another libation is poured, asking for the ancestors to receive the dead person into their community and if he/she did anything to offend the gods, ancestors, they should forgive him/her.

The Final Funeral Rites

The final funeral rites which follow the burial on a different day, usually occur on a Saturday, among the Akans of Ghana. However, due to some of the innovations, when

¹⁰⁰ Ibid

burial day is extended, the final funeral rites follow immediately after burial or the next day, depending on the day of burial.

At the final funeral rites, people are made to sit according, clans, family, gender, and other groupings. Donations are received and announced during the celebration. You will know where to sit by the totem on top of the linguist's staff in front of a group. People coming to sympathize with the grieving family, enter the gathering and greet, following the traditional custom, going round and shaking hands, or waving to those gathered. If a person of prominence in the community is entering, the gathering, all proceedings would cease to acknowledge their arrival, sometimes with folksongs and dancing, talking drums, or a linguist announcing their arrival by calling their names and accolades. Here too, food and drinks are served to indicate that though there is mourning, yet there is also reason to celebrate a life well-lived. The final funeral rite usually, comes to an end at sundown, when the chiefs and elders depart, but the celebration would continue as music and dancing extends into the night.

Symbolic ways of identifying widows and widowers at the final funeral rites vary from tribe to tribe. Among the Akans, they would tie raffia fonds around the elbow or bind their hands with green grass. Wearing grass is the widows'/widowers' way of saying the death of the spouse means absence of real food; only grass is left to be eaten.¹⁰¹ This especially happens at the death of a husband who is the sole breadwinner of the family.

The funeral accounts statements are read, one week after the final funeral rites. If there is profit, it is shared among the family members. But in the case of debts, the one who succeeded the dead, takes the greater part of the debts and the rest is distributed among the family members.

Funeral Rites/Rituals Among Ghanaians In The U.S.A.

This portion of the project will give a synopsis of how Ghanaians in the United States of America, especially in the state of New Jersey have adapted and modernized funeral rites and funerals.

The announcement:

¹⁰¹ Ibid., 170

As observed earlier, this process has not changed much from how it is done in Ghana. We shall look at the following categories of deaths and their associated funeral rites and rituals.

1. Death of a loved one in Ghana or outside the U.S.A.

- a. Death by prolonged sickness—members of the family in the U.S.A. are given regular updates about the status of the sick person. Usually, monetary support is solicited for medications and other necessary procedures for healing and cure. When it becomes clear that death is imminent close relatives in the U.S.A. are called and are made to stay on the phone, while family members in Ghana stay with the dying person at the bedside. Where this is not possible, immediately after the person dies, a phone call is made to the close relative in America to announce the death of their loved ones. From here the news is shared among other relatives, friends and pastors, and church members. Due to the prolonged sickness grief seems less intensive for the bereaved, though the pain and suffering associated with it, are still acknowledged and supported.

Due to employment conditions in the U.S.A. family members are not able to take days off from work to mourn during the first few days following receiving the news, as they would have if they were in Ghana. Most people focus on the one-week celebration and final funeral rites.

One-week observation—The celebration follows the same trend as the one in Ghana. Except that if the lead family member here is a Christian and the church is involved libation, and certain rituals are omitted. People come with foods and drinks, there is singing, reading of scripture, and a short exaltation by the pastor or a lay leader present. At this time, the event surrounding the death is shared and all necessary arrangements for the final funeral rites are also announced to the public. It must be noted that this day has gained a very important position among Ghanaians, as can be seen in the elaborate nature it sometimes takes. Sometimes, it takes the entire day; family members with elders sit as members of the public come and go with their gifts and condolences. There are both socio-economic and spiritual benefits accrued from the celebration. Flyers are made and distributed within the Ghanaian community; announcements are made at church. The dead relative may not be known in the U.S., yet the patronage of the

event can be very big, depending on the social status of the lead relative. Economic status does not play many roles here; one has to achieve a certain level of novelty through social gatherings to attract people to such gatherings.

Final Funeral Rites—Most people do not celebrate the forty days due to time constraints and employment restrictions in the U.S.A. However, the final funeral rites take a prominent place within the Ghanaian community. The atmosphere is more a celebration for the sympathizers than mourning. It is usually held on a Saturday night rather than in the morning as it's done in Ghana and continues till 1:00 am or 3:00 am the following morning. The dress code does not follow the usual traditional distinctions. Both the close family and general public put on a prescribed attire, which is usually black and red. Sometimes the close relatives would distinguish themselves by wearing black and red cloth with a specific pattern or design in it. Unlike Ghana, where funerals are held outdoors, usually at the community/school park or on the street of the deceased family house, Ghanaians in the U.S.A. usually rent an auditorium for such events.

The content of the final funeral rites also differs from the way it is done in Ghana. There is the usual seating of guests, which may include dignitaries as chiefs, queen mothers, the clergy, etc. amid music. A linguist is appointed, who serves as MC (Master of Ceremony) for the night. The services of a local DJ, photographer, and/or videographer are employed. As at any Ghanaian event, here too light refreshments and drinks are served. There is a huge financial expense and time commitment involved in making this night successful. As stated above, if the lead relative is popular in the community, people volunteer to cook and financially sponsor the event. Otherwise, everything is done by the family.

The celebration is opened with a prayer and a short exaltation by the clergy. After this, the family members go around welcoming the guests by shaking the hands of those sitting in the front rows and waving to those at the back. This is followed by the first dance to selected music, by the close relatives as a way of expressing their joy and sorrow of life well lived and lost. At some point the MC would invite the general public who so wish, to join them on the floor by way of expressing their solidarity in joy and grief. Like in Ghana, dignitaries would be ushered in with a fanfare

Death by short-term sickness

Sudden death

Accidental death

Death of a loved one in the U.S.A.

Death by prolonged sickness

Death by short-term sickness

Sudden death

Questions

1. What was the original attitude of the Ga ethnic group towards death rites?
2. How did colonial administration, formal education, Christianity, and Islam impact the rites?
3. How did the environment, trade, and neighboring ethnic groups influence the rites?
4. Which legislation changed the rites?
5. To what extent has the modern state of Ghana preserved these rites?
6. How do funerals function today in comparison to the traditional ones from pre-colonial times?¹⁰²

¹⁰² Ibid. page 14

APPENDIX C

SUBJECT THREE

RESURRECTION OF JESUS CHRIST: THE BASIS FOR OUR HOPE IN THE
RESURRECTION OF THE BODY

APPENDIX D

SUBJECT FOUR

MODELS AND EXPRESSIONS OF GRIEF

APPENDIX E

SUBJECT FIVE

AN OUTLINE OF BEREAVEMENT SUPPORT MODEL FOR THE GHANA
CALVARY UNITED METHODIST CHURCH TO CONSIDER