

Mission's Devastating Dichotomy

by Paul Hiebert

Debate among evangelicals concerning the relationship between evangelism and social responsibility has intensified in the past decade. With the successful conclusion of the Grand Rapids Consultation on this subject (see box), we were reminded of a cogent statement by Dr. Paul Hiebert in a recent letter. With his permission we have edited that letter slightly and reproduce it here as our Guest Editorial.

As we face the task of mission in the 1980's, it is my opinion that it will be increasingly difficult to carry out our commission in countries abroad unless we are willing to deal with the full range of human needs including health and development. The reality of this is already seen in a number of countries. Others seem ready to follow. Thailand is an example.

I am fully aware that God does open doors we never expected for purely evangelistic work in countries formerly closed, and that we will probably never be short of areas where this will be possible. But if we wish to reach the whole world, we will in many cases have to face the question of ministry to humans in all their needs.

But I have a more fundamental concern regarding this. The dichotomy we make between ministry to human needs and spiritual needs is a result of the introduction of Greek thought into the church through the conversion of the Gentiles. It was a case of poor contextualization of the gospel, for the dichotomy is not present in the life and ministry of Christ or Paul.

The dichotomy has had devastating results. As Newbigin points out, our normal, modern Christian response is to deny the world of spirits and evil powers with the result that Christian missions have been one of the greatest secularizing forces in modern history. When faced with belief in spirits, we have denied their existence and in so doing secularized people's beliefs.

But more than that, we have an attitude that hospitals and schools are secondary functions. It is this, rather than that we had hospitals and schools per se, that I charge with the failure of these institutions to serve as effective means for evangelism.

I have seen it far too often that the doctor says "I will heal their bodies (by natu-

ral science), and then I will come later to witness to the people." But there is seldom time to witness. When there is, it is totally divorced from a sense that God operates in natural Christian beliefs. The people probably sense we really trust science when it comes down to everyday matters.

I would argue, then, that a truly Christian theology of mission would take all of human needs into question and seek to minister to them, doing so with Christ as central to every such ministry and His concern for all their needs expressed

Consultation Affirms Lausanne Position

A report of the Consultation on the Relationship Between Evangelism and Social Responsibility recently held in Grand Rapids lists three kinds of relationships between evangelism and social action:

1. "Social action should be the *consequence* of evangelism." That is, when a person becomes a Christian, his new life manifests itself in service to others."
2. "Social action can be a *bridge* to evangelism. It can break down prejudice and suspicion, open closed doors and gain a hearing for the gospel."
3. "Social action is a *partner* of evangelism."

The Consultation, jointly sponsored by the Lausanne Committee and W.E.F., stressed that evangelism and social responsibility are inseparable fruits of the gospel and basic to the mission of the Church. Concerning the matter of relative emphasis, the Consultation affirmed the Lausanne Covenant which stated that "In the church's mission of sacrificial service, evangelism is primary."

The Consultation was attended by 50 evangelicals from 26 countries, one of whom was our associate editor, C. Peter Wagner. Over half the participants were from the Third World.

throughout. We need a new integrated theology that rejects the platonic dichotomy we have inherited from Aquinas and others.

Finally, let me comment on what I think is essentially a strategy question. The division we have made between evangelism and social service is strongest in the west and among planners and mission strategists. I say that because I



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have often seen that in the time of real need on the field, Christians, especially missionaries, have not been able to stand idly and coolly by without doing something.

When famine strikes, no matter what the denominational affiliation, missionaries have stepped in with what they have to feed the dying, tend the sick and care for orphans. The love of God does manifest itself no matter how we debate that matter in committees.

What does change, of course, is the allocation of resources within an agency for various tasks. But here I would argue we need to think of evangelism through education, through hospitals, through preaching, through personal witness and so on. Our failure in some, as I pointed out, is not due to the methods per se, but the fact that we did not *ourselves* really see these as spiritual tasks. Medicine we thought of as a natural process. God wasn't really put in the middle of it. I have seen a few doctors for whom God was the center in healing, and they have had very effective ministries in evangelism as well as healing.

It is in this context that I make my statement about the need for dealing with the full range of human need in missions in the years ahead. I believe we must deal with human needs for strategy purposes, but much deeper, I think we have to do so from a truly Christian theological base. □

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