ASSISTING ANCHOR BAPTIST CHURCH OF GRAND RAPIDS,
MICHIGAN, WITH ENGAGING THE CELIAC
COMMUNITY WITH THE GOSPEL

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ASSISTING ANCHOR BAPTIST CHURCH OF GRAND RAPIDS,
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This dissertation is dedicated to my loving wife, Rachel, who not only supported me in my doctoral study efforts, but also helped me understand the importance, impact, and significance of Celiac Disease. A special thanks is also given to Marsha, Nancy, Laura, Alana, Ginger, and Wendy for their grace and sacrifice in assisting the completion of this project.
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PREFACE

Throughout the course of developing my project, I found myself especially indebted to the academic challenging of the faculty at Southern Baptist Theological Seminary. Dr. Michael Wilder and Dr. Troy Temple especially sacrificed their time and efforts towards my development academically, personally, and professionally. Marsha Omanson showed an assertive grace towards me and my struggles with the technicalities of writing mechanics.

Anchor Baptist Church has been surprisingly patient with me and the doctoral process. Many within the congregation have Celiac Disease and anticipated the development of this project with pins and needles. Even members of the local adult Celiac support group were kind enough to allow me to present some of my thoughts and provide helpful feedback.

My hope and prayer is that based on the research and development of the ministry developed within this project, Anchor Baptist and other churches will be able to read, learn, and discover ways of engaging those with Celiac Disease in their own communities.

John Ross Coin

Grand Rapids, Michigan

December 2014
CHAPTER 1
INTRODUCTION

Purpose

The purpose of this project was to holistically engage the Celiac community with the gospel through diet education, biblical counseling, and discipleship practices.

Goals

The first goal of the project was to engage the Celiac community by conducting annual gluten-free food fairs to raise awareness of the ministry and by offering Celiac support groups designed to teach the gospel and its implications for healthy living. Entrance and exit exams were implemented to assess the effectiveness of the ministry intervention.

The second goal of the project was to assist Anchor Baptist Church with incorporating the use of internet technology as a resource for continued ministry to the Celiac community. Members of the workshop/support groups formed their own online groups allowing the continuation of encouragement, support, and growth after the completion of the workshops/support groups. In addition, Anchor Baptist Church’s website was further developed to include helpful links, video-podcasts, and other online resources for continued discipleship, diet management, guidance, and support. Assessment of this secondary goal was both the completion of setting up and activating social network accounts through Facebook, as well as having a functioning webpage for the Celiac ministry. Once the completed support groups formed their web community, a follow-up survey was given six weeks later to assess the effectiveness of the continued online support.
Context

Few words describe West Michigan better than being the Bible belt of the North East. To offer a glimpse of the religious exposure in the Grand Rapids area of West Michigan, there are 373 Christian churches\(^1\) for a population of fewer than 300,000.\(^2\) Diversity runs rampant amongst these churches: some churches are “multi-site” where the pastor is live-streamed via either internet or LAN connection to all the remote locations simultaneously, some churches pride themselves in being anti-technology, some are hyper-conservative, forcing male members to undergo church discipline if they associate with a person from a different denomination; and some churches pride themselves in being liberal, boldly flying mottos about being a liberal community with the goal of freeing the mind in order to change the world through reading sacred literature from all faiths. The greater Grand Rapids area is also home to the nationally acclaimed Mars Hill Church, founded by Rob Bell, author of *Velvet Elvis*, *Sex-God*, and the controversial *Love Wins*.

The Grand Rapids, Grandville, Wyoming, and Walker areas also possess a major collection of Muslims, Hindus, Buddhists, and a very active and assertive atheist coalition founded by Richard Dawkins. Despite the enormous religious plurality, almost 48 percent of the people are not affiliated with any religious organization of any kind in the Grand Rapids area.\(^3\) As a result of the rising religious apathy, there appears to be a

\(^1\)Superpages, “Churches in Grand Rapids, Michigan,” accessed June 1, 2010, http://www.superpages.com/ yellowpages/C-Churches/S-MI/T-Grand+Rapids. This number includes only established churches. Church plants and house churches not associated with “Yellow Pages” are not included in this statistic.


\(^3\)City-Data.com, “Grand Rapids, Michigan,” accessed June 1, 2010, http://www.city-data.com/city/Grand-Rapids-Michigan.html. After several personal interviews with some progressive pastors and local seminary professors, one of the new rising movements in Christianity is the desire to not affiliate with Christianity as a religion. Instead, people are declaring themselves followers of Christ, but not followers
potentially large mission field waiting for the impact of the gospel of Jesus Christ. This is the field Anchor Baptist Church has been called to serve.

**Analysis of Anchor Baptist Church**

Ethnocentric is not necessarily a desirable word. Nonetheless, Anchor Baptist is 99.9 percent Caucasian. With the age range favoring both young adults aged 19 to 40 and senior adults aged over 40, each forming 40 percent of the congregation, the church is on par with the Walker community at large which also favors the same age ranges. According to the North American Mission Board’s Statistical Analysis of the community, youth, aged 12 to 17, and those aged 85 and up are the smallest groups. With the youth and senior adults each making up 5 percent of the congregation, Anchor’s attendance roster concurs with an identical pattern.

If an economic label were to be assigned to the average family of Anchor Baptist, it would be a blend of lower economic status with lower-middle status, with an average annual household income of around $30,000. This is well below the state norm annual income of around $46,600.4 As a result, the church faces tight financial situations—sadly, a problem not unique to Anchor Baptist. With expenses being higher than income, finances often become a significant factor in business meetings, event planning, and ministry structuring. Often the questions, “can we afford that?” and “how long do we have until we have to close?” are uttered with a nervous chill in the air.

West Michigan contains a percentage higher than the national average when it comes to education, according to the NAMB statistical analysis. However, Anchor Baptist stands at about half of the state average: 17 percent of the congregation has completed a four-year college degree or higher, where the state average is 30.2 percent; of a religion. As a result, these statistics may be off.

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and 8 percent of the congregation is either currently enrolled or have completed a four-year college degree, compared to the 25.5 percent of Michigan who have a four-year degree or higher.\footnote{United States Census Bureau, “State and County Quick Facts: Michigan,” accessed July 14, 2011, http://quickfacts.census.gov/qfd/states/26000.html.} Despite the lower than average education status, the congregation still reports a preference for exegetical and expository Bible studies versus strictly topical preaching. One can safely conclude that the level of desire for learning cannot be assessed solely upon neither current nor previous formal education.

Over the past six years, a slight growth pattern has been developing at Anchor Baptist. Despite existing over fifty years,\footnote{Anchor Baptist Church, formerly known as Immanuel Baptist Church, was founded in 1956.} the church appears to be on the verge of a fresh sigmoid curve.\footnote{Aubrey Malphurs, \textit{Advanced Strategic Planning: A New Model for Church and Ministry Leaders}, 2nd ed. (Grand Rapids: Baker, 2005), 10.} By the end of 2013, attendance numbers reached a weekly average of seventy. The attendance increase shows the growth pattern is not only continuing, but is potentially increasing in momentum.

Anchor Baptist experienced 2013 as a year of change, renewal, and excitement as their attendance and monthly tithes were on the rise. In 2010, a tithing dip took place when the congregation saw approximately 25 percent of its members become unemployed. As of June 2013, almost all the unemployed members were employed, giving Anchor a 4 percent unemployment rate.\footnote{Anchor has 3 members currently unemployed out of 62 regular attendees, as of June 2013.} Throughout the year of 2012, tithes have been increasing approximately two hundred dollars each month. If this growth rate continues throughout 2013, church income should surpass church expenses by the year’s end.

\textbf{History of Anchor Baptist Church}

History has not been a friendly ally for Anchor Baptist. Over the past fifty
years, the church has had four official splits resulting in the loss of 50 percent or more of the congregation each time. After a year of struggling, reinventing, reorganizing, and reassessing the ministry of the church, the pastor began leading the congregation in the process of selling their building and temporarily relocating to a college campus for worship services. Back in 2007, the church purchased a pre-existing building, and relocated into Walker, a suburb of Grand Rapids, Michigan. Upon purchasing the new building, the church changed their name from Immanuel Baptist Church to Anchor Baptist Church, created new mission, vision, and purpose statements, developed a new constitution, rewrote their bylaws, and found themselves debt free for the first time in over twenty-five years.

In an attempt to unite the church and refocus the congregation to doing ministry rather than doing “church,” the pastor took an inventory of the congregation. This inventory not only examined spiritual health and socioeconomic factors, but also hobbies and dietary concerns, as well as personal goals and struggles. Once the analysis was completed, there was a discovery that approximately 25 percent of the congregation reported being on a gluten-free diet. One of the ladies in the church had the desire to raise awareness of Celiac Disease by assembling a food fair. With full pastoral support, the first annual gluten-free food fair was assembled in 2008, and over five hundred people attended. For the first time in decades, the people of the church felt like they were reaching the community at large, and had the potential for true kingdom impact. This little church was no longer viewed as a building drifting lost at sea; there was a sense of purpose and direction.

As of May 2013, Anchor Baptist is ministering to over 2,500 people through the gluten-free ministry. May 17, 2014, marked the date for Anchor’s eighth annual gluten-free food fair, and over 1500 attended. Simultaneously with the food fair, the church also launched its new gluten-free ministry called “Bread 4 Life Ministry.” Anchor Baptist Church has also become the unofficial West Michigan experts on eating
gluten free, as several members are sought out for food and menu consultation by local companies such as Meijer, Family Fare, a wide array of restaurants, and the Whitecaps—the minor league baseball team in Grand Rapids as well as the training camp for the Detroit Tigers. In 2011, 2012, and 2013, this small church was interviewed by local television stations, radio stations, and the Grand Rapids Press. Suddenly, in just a few years, a small congregation is primed for making a major impact for the gospel. Anchor Baptist has once again become proof that God is not limited by church numbers; God can still take something small and do great things.

**Rationale**

Being medically told to go on a gluten-free diet can leave one feeling helpless, broken, and alone. Where does one start? How does one deal with eating out? Often, families become fractured due to some members of the household going on the diet while others choose not to participate. In such scenarios, the kitchen becomes divided into his cupboards and her cupboards; his plates and her plates; his pans and her pans, as every attempt is made to avoid cross contamination. This division is where the feelings of isolation begin. Homes with Celiac Disease have unique struggles with finances due to the higher cost of gluten-free food; struggles with communication, due to Celiac-induced mental limitations, irritable bowel syndrome, as well as other various health and social dysfunctions/complications.

Gluten is a protein found in wheat, rye, barley and oats. When these proteins

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9James Braly, *Dangerous Grains: Why Gluten Cereal Grains May Be Hazardous to Your Health* (New York: Avery, 2002), 144-69. Additional details are available in chap. 3 regarding how an individual with Celiac Disease who also eats gluten can have symptoms similar to attention deficit disorder, as well as disrupted memory recall, space-out moments, and increased irritability.

10Oats are added to the list as a result of high cross-contamination during harvesting.
damage and inflame the villi, the intestine becomes unable to absorb water and nutrients such as vitamins, folic acid, iron and calcium. Celiac Disease is a hereditary autoimmune disease that damages the villi of the small intestine and interferes with absorption of nutrients from food. Essentially “the body is attacking itself every time a person with Celiac consumes gluten.”

It is estimated that 1 in 133 people have Celiac Disease in the United States. In other words, over two million people in the United States are diagnosed. The University of Chicago statistically estimates the 2 million diagnosed cases are but a mere drop in a bucket, stating 97 percent of individuals who have Celiac Disease are currently undiagnosed.

In 2011, Anchor Baptist Church held its fifth annual gluten-free food fair, where over 1500 people attended. In a city with an area population of fewer than 300,000, 1500 is an impressive number, especially for a church with the average weekly Sunday attendance of 60. Within the membership ofAnchor Baptist Church, approximately 35 percent of the congregation are currently on a gluten-free diet, and 10 percent have been officially diagnosed with Celiac Disease.


15 University of Chicago Celiac Disease Center, accessed February 4, 2012, http://www.cureCeliacdisease.org. The number of Americans with Celiac Disease would fill 936 cruise ships, and the passengers on 908 of the ships would not know they have it.


17 This number is difficult to compute, as children are often not diagnosed. In
The need for this project is simple: though the food fair reaches over a thousand people, none of them are being engaged with the gospel. This lack is the result of two general issues: (1) 50 to 60 people trying to minister to 1500 is very challenging, especially during a single afternoon while the food fair is taking place; and (2) the food fair is simply an event; it is not a ministry. Since the project was developed, the food fair has become part of a larger, fully functional ministry. Awareness is already high, the need is very present, and Anchor Baptist seems to be in a prime position to make disciples within the Celiac community.

**Definitions, Limitations, and Delimitations**

There are various terms necessary for clear understanding for the implementation and interpretation of the project.

*Gluten.* Gluten is a protein found in wheat, rye, and barley. Thus, a gluten-free diet omits gluten.

*Celiac Disease.* Celiac Disease is a hereditary autoimmune disease that ultimately damages the lining of the small intestine. When referring to the “Celiac community,” reference is to those individuals in an area who are diagnosed with Celiac Disease or who are eating a gluten-free diet as a result of being gluten intolerant.

One of the functions of the project is to develop at least two nine-week support groups. To assist in determining the effectiveness of the groups, three surveys were administered: intake, exit, and a follow-up survey given six weeks after the completion of addition, several children have parents who are diagnosed with Celiac Disease, making the children carriers of the gene for the disease. These same children are currently on a gluten-free diet, making diagnosing them more difficult. As a result, 10 percent is a lower number than what is actually present within the congregation.


the support groups. These surveys were limitations for the project due to participant honesty, transparency, life experience, and their ability for self-reflection. The follow-up surveys were limited based upon not only the integrity of the survey taker, but also upon the individual’s proficiency at completing the survey.

The two project support groups consisted of adults who are gluten-intolerant or diagnosed with Celiac Disease, who are neither members nor regular attendees of Anchor Baptist Church, and are not currently members of any currently existing Celiac support groups. Attendees of the two project support groups were selected via a variety of methods: (1) a sign-up sheet at the fifth annual gluten-free bake-off, held at Anchor Baptist Church in December 2013, (2) signing-up on the website for Anchor Baptist Church, (3) various flyers handed out at strategic health food stores throughout the greater Grand Rapids area, and (4) email invitation were sent out, gathered from the food fair held in 2014.

Methodology

During the gluten-free food fair held on May 18, 2013, over 1,200 people who registered for the event desired to know more about Anchor Baptist Church’s Celiac ministry when it became available. After project approval and ethics committee clearance, emails were sent to those who registered at the previously held food fair. A support group consisting of five people formed, meeting for nine weeks. After the workshops/sessions were completed, the group continued to interact online via group pages on Facebook. Consisting of links to video podcasts, articles, and online video-based devotionals, members continued to learn, grow, and encourage each other beyond the initial workshops.

During the beginning of the first support group meeting, members were given

21 After project completion, additional support groups formed, which were open to both members/attendees of Anchor Baptist Church as well as those who are involved in any pre-existing Celiac support groups.
an entrance survey which measured on a six-point scale various religious beliefs, basic understanding of gluten-free living, and the nature of their perceived domestic health and support. Two exit surveys were completed following the last session of the workshop/support group meetings: the first exit survey was identical to the entrance survey, and analysis via t-testing was done to determine any statistical differences. The second survey was given six weeks after support group completion to determine both long-term benefits and effectiveness of the continued online support. The six week follow-up survey also included an open-ended section allowing for members to indicate topics they appreciated, found helpful, as well as topics that were either not helpful or were missing and could be added for future groups.

In order to develop a Celiac ministry, a proper biblical foundation for a food-related ministry must be established. This foundation should be based on an understanding of both the calling of the church as well as how food and eating points to the gospel itself.
CHAPTER 2
BUILDING A BIBLICAL FOUNDATION
FOR A CELIAC MINISTRY

In order for Anchor Baptist Church to engage the Celiac community with the gospel of Jesus Christ, a solid biblical foundation must be developed for the ministry. Upon establishing a philosophy of ministry, the structure for forming a food-related ministry could be created, based on an understanding of both the calling of the church and how food—as well as eating—points to the gospel itself. In so doing, Anchor avoids having just a diet program, mislabeling it as ministry. As the philosophy was developed, Anchor discovered how serving and volunteering in the local church is to include all Christians, and therefore a Celiac ministry can be served by anyone within the church, whether or not they have Celiac Disease, are gluten-intolerant, and/or eat gluten free. Finally, Anchor realized how food and eating theologically point to the gospel, making both a necessity within any ministry. After considering the role of food in the life of the church body in regard to fellowship, communion, and community; it was discovered how food was involved in the spiritual development of a Christian—even to the extent of eating being a spiritual discipline.

A goal such as “engaging the Celiac Community with the Gospel” involves a specific cultural target with an intentional aim. An accurate map is necessary to guide the process from the point of origin to the desired destination. Does Scripture offer any guidance regarding witnessing to and developing a ministry for the gluten-free community? The words “Celiac” and “gluten” do not appear anywhere in Scripture. The closest a verse comes to even referring to such a concept is where Paul and company throw all their wheat overboard during a violent, prolonged storm (Acts 27:38). Contextually, however, this passage has nothing to do with dietary concerns as the wheat
was jettisoned after a hearty meal. As a result of Scriptures’ lack of specificity, one must turn to theological constructs from the overall narrative—the meta-narrative—of Scripture. God’s Word offers great detail regarding foundations for ministry as a whole, the involvement of God’s people regarding ministry, and that one can view fallen human conditions—be it mental, social, physical, and the like—through the lens of creation, fall, redemption, and the consummation.

When developing a ministry designed specifically for reaching the Celiac community, one must start with the biblical foundation for ministry itself, followed by a scriptural understanding of the body of Christ serving as extensions of the hands and feet of Jesus, and conclude with a theological construct looking at the spiritual role food plays in the life of people. God created humanity to eat before the Fall, therefore, one can begin to assess what redemption and the consummation looks like regarding humanity’s dietary concerns by thinking theologically about food—without over-spiritualizing food—by asking questions like “Why did God create a world in which every living creature must eat?”

Biblical Foundation for Ministry

Before developing a ministry program/structure, one should step back and recollect what Scripture declares as the purposes of the church itself. The church is not to be a spiritualized form of Reader’s Digest meets the movies, where people sit together as a crowd watching something they hope will not be boring, and in the end feel good about themselves and believe their time has not been wasted. The church should be so much more than a mere social club.

Five Functions and Purposes of Ministry

The basic functions and purposes of the church can be assessed in five categories or callings.² The first category can be called the Call to Prayer. The body of Christ should gather, seeking the face of their Lord and Savior, Jesus Christ. The church should put their trust/faith in God by beginning with prayer; hence the reference to the temple as a “house of prayer” (Mark 11:22-25). Though the Temple building is no more, the body of the Christian is called the temple where the Holy Spirit resides (1 Cor 6:12-20). Therefore, prayer must—on a theological note—be one of top priority for the Christian. One can never pray too much, although for a fast-paced American society, prayer can be viewed as an inconvenience due to needing to take time in order to pray. Nevertheless, the church is to be a house of prayer, and the people must make prayer a primary function within any ministry (Eph 5:19-20, 6:18; Ps 33:1), because “a prayerless church is a powerless church.”³

A second function/purpose of the church can be labeled as the Call to Mission. Jesus Himself spoke on the necessity for the people of the church to go into all the world and make disciples, baptizing them in the name of the Father, the Son, and the Holy Spirit (Matt 28:19). Given the purpose of the Great Commission—to preach the gospel, make disciples in the name of Christ, baptize disciples, and teach them the commands of Jesus—evangelism must be the center of any ministry of the church. If evangelizing in the name of Jesus is not the center, then an event is just a social program, not a ministry. Granted the event may be very beneficial for people and may be very socially helpful, but it would be nothing more than a fancy, albeit culturally productive, club or gathering if Jesus is not the center. Paul makes it clear that evangelizing in the name of Jesus is to be

²“Church Ministry Structure and Organization,” accessed February 12, 2012, http://church-ministry.tripod.com. The first four steps are adapted, and a fifth step—food/eating—has been added for this project.

the center: “We are ambassadors for Christ, certain that God is appealing through us. We plead of Christ’s behalf, ‘be reconciled to God’” (2 Cor 5:20). A church must intentionally be evangelistic; it must be a priority, for “no church will be evangelistic by accident.”

Thirdly, the church has the Call to Teach. Going into all the nations was only part of the Great Commission. Jesus continued by charging Christians with the teaching of everything He taught and commanded (Matt 28:20). The Bible cannot be more unmistakable regarding the role of teaching than when Paul writes to Timothy: “Proclaim the message; persist in it whether convenient or not; rebuke, correct, and encourage with great patience and teaching” (2 Tim 4:2). Clearly the church is to gather together and be involved in encouraging each other through the ministry of teaching. A great church is one where the Scriptures are expounded upon. If teaching from Scripture is not present, then the church is not engaged in ministry.

The fourth category can be stated as the Call to Fellowship. “This community component of a healthy church is expressed in the desire and God-given longing for authentic relationships.” The pastor at Anchor Baptist has heard people repeatedly questioning the necessity of attending worship services, Sunday School/small groups, and other related church functions/programs. Time and time again, the pastor replies with a verse from the book of Hebrews: “Let us be concerned for one another in order to promote love and good works, not staying away from our worship meetings, as some habitually do, but encouraging each other” (Heb 10:24-25a). Can Scripture be any more obvious about the necessity of the call to fellowship? If people gather together, but the

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4Ibid., 50.
5Ibid., 120.
6Ibid., 122.
7Occasionally I encourage people with the use of a metaphor: Christians are like bricks, and bricks are designed with a building in mind.
focus is not on encouraging one another, then fellowship has not taken place. If the people are not correcting each other and helping each other grow closer to Christ (2 Tim 4:2), then fellowship has not taken place. Meeting together for the sole purpose of eating is a dinner social, and is also not fellowship. Fellowship occurs in the healthy church that “encourages believers to grow in their walks with God and with one another in the context of a safe, affirming environment.”

The Call to Eat is the fifth and final category. At the climax of creation, God created Adam followed by his help mate Eve. Together, the first two humans existed on a pre-fallen Earth and worked in the garden in Eden. God made these humans not only with the ability to eat, but with a calling of what to and not to eat (Gen 2:17). Life in Eden was one without the curse of death, therefore, eating was not an action of necessity for sustaining life, it was a calling to enjoy creation and worship the Creator through the community building event of eating.

Theological Role of Food in Ministry

It is interesting to note the first sin on Earth was an action involving eating. Satan used eating as a means for the temptation for Adam and Eve to question the goodness of God. When God punished Satan and humanity after the sinful rebellion of Adam and Eve, God not only cursed humanity with death, but also cursed the ground from which the food came. Not only will women labor on the ninth month with childbirth, men will labor every day when they work the ground to gather food to sustain both himself and his family. Eating, which was once an act of worshiping the Creator, became a daily reminder of the mortality which now plagued human existence.

Throughout the rest of the Bible is the repetition of the call to eat: from the Passover meal in the Old Testament to communion in the New Testament, culminating in

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8Stephen A. Macchia, Becoming a Healthy Church: Ten Traits of a Vital Ministry (Grand Rapids: Baker, 2003), 77.
both Jesus calling Himself the “Bread of Life” (John 6:35) along with an invitation for people to partake Him, and the glorious “Wedding Supper of the Lamb” after the second return of Jesus (Rev 19:6-9). One could even look at the Bible as having five meals that forever change history: the first actual meal is the eating of the forbidden fruit (Gen 3:6). Though Adam and Eve were instructed with the freedom to eat of any tree in the garden, Scripture is oddly silent regarding their obedience of God’s given freedom. Instead, the first actual meal recorded in Scripture is focused on the disobedience of God’s command. The second meal is the Passover, meal three is the Last Supper, meal four is communion, and the fifth meal is the wedding supper of the Lamb.9 Could it be God intentionally signposted the entire biblical storyline with eating? Could eating really be so important regarding a lifestyle of worship?

Of all the events recorded in the Gospels, only two miracles are found in all four Gospels: Jesus’ resurrection and the feeding of over 5,000.10 This intentional effort to make sure the miraculous feedings by Jesus are not missed by readers indicates a high level of importance God has placed upon eating. After all, dining is a major part of interpersonal interaction and building relational intimacy. Jesus’ ministry greatly involved eating when He dined at Matthew’s house (Matt 9:10), and especially when He twice fed the multitudes (Matt 14:13-21), which having a reminiscence of manna, this miraculous feeding by Jesus also anticipates the eschatological messianic banquet alluded to in Matthew 8:11 and 26:29.11

When dealing with building a biblical foundation for a diet-based ministry, it is important to note that dietary intervention is not an issue the Bible is silent on. Though


11Ibid., 203.
God wanted Israel’s separation from the rest of the nations to be manifested in a dietary fashion, the mere existence of dietary intervention shows diet as an issue God is concerned about. When God cancelled/nullified the dietary laws of the Old Testament, God Himself revealed the role and connection diets can play in interpersonal relationships.

Of all the five callings of a church to be incorporated into ministry, it would be wise to place the calling to mission on the forefront. Because small churches are limited in their personnel, “evangelistic programs are often neglected.” As events take place, a plethora of people are needed to deal with crowd control, registration, security personnel, as well as workers for various activities such as face painting and operating inflatable slides/obstacle courses. With so many people involved in these elbow-grease activities, few are left who can focus on sharing Christ with those in attendance—the workers also tend to have their minds so focused on the job at hand, like face painting, that evangelism either becomes forgotten all together, or is pushed aside due to time constraints. To counteract this tendency, the church must be intentional in making evangelism a high priority. Especially with the small church—and still a wise option for larger churches as well—evangelism should be kept with the focus on “social interaction rather than

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14 David Williams, *Acts*, New International Biblical Commentary, vol. 5 (Peabody, MA: Hendrickson, 1990), 188. Though Williams describes how the adherence to the dietary laws profoundly affected Jewish-Gentile relations, he also goes on to point out how there was more to the Jewish antipathy toward Gentiles than simply concern over food, as the Gentiles were themselves considered unclean.

15 Glenn Daman, *Shepherding the Small Church* (Grand Rapids: Kregel, 2002), 156.
evangelistic preaching.”

Such an approach would mean presenting the gospel in the context of building relationships, not via lecturing with a sermon. After all, if all the fun games are put on pause for a person to give a lecture, the children could end up wishing for the man to stop talking so the fun and games could continue, potentially resulting in resentment; the opposite of the desired impact/effect.

A ministry of the church should involve all five areas of calling: praying, mission, teaching, fellowship, and the call to eat. Smaller churches, as previously noted, would be wise to place an emphasis on Mission—preaching and proclaiming of the gospel of Jesus Christ—to make sure it does not become overlooked or placed on a back burner. Smaller churches would also be wise to focus upon faithfulness rather than results (Isa 6:9-13), as one cannot control how people will respond to the gospel. Such a response to the Spirit’s conviction is up to the individual and the moving of the Holy Spirit (Acts 9:31). Since the “results of evangelistic efforts is the responsibility of God, the focus of the church and the individual believer should be upon faithfulness in proclaiming the Gospel to a lost world.”

**Serving in a Celiac Ministry**

Can just anyone in the church serve in any ministry position? Does one need to be a member of the church to volunteer? Does one need to be a Christian? Is there room for service by church prospects? For a Celiac ministry, does one need to be on a gluten-free diet in order to serve? It would behoove a church to rediscover the doctrine of volunteerism, to rekindle the passion for service, and to once again take up the sacrificial cross of Christ, embracing the priesthood of all believers, and following Christ

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16 Daman, *Shepherding the Small Church*, 159.

17 It is the Holy Spirit who is central to growth. The role of the people is to be faithful and not distracted from the preaching of the gospel (as demonstrated throughout the book, Acts 6:1-7, 9:23-31, and 15:36-16:4).

18 Daman, *Shepherding the Small Church*. 160.
with uncompromised devotion.

The book of Acts is fertile ground, pregnant with potential for theological application regarding the issue of serving/volunteering in the church, especially within a Celiac ministry. At the same time, hermeneutically, one must remain appropriately in context. Acts has many stories, and these stories are descriptive, not prescriptive: the text describes situations, complications, and various issues as well as how individuals responded to such difficulties. These responses are not labeled as commands, and are not *thou-shalt-nots* of the New Testament, yet all Scripture is inspired by God and profitable for correction, teaching, rebuking, and training in righteousness (2 Tim 3:16). Therefore, through the descriptive nature of the text, one can make theological constructs from which application principles can be derived. Such an interpretive process can be viewed as an “inductive analysis of significant [Biblical] passages.”\(^{19}\)

Studying the book of Acts can be a challenge, especially when trying to identify the structure of the book itself. The most common/popular observed structure for Acts is by mission.\(^{20}\) However, it is interesting to note the potential structural analysis geographically,\(^{21}\) biographically,\(^{22}\) and through speeches.\(^{23}\) Interestingly, there is another approach possible for the structure of Acts, which deals with the critical issue of expansion.\(^{24}\) This structure is found by the repeated phrase, “the word of God continued


\(^{21}\)Acts is divided into three geographical sections found in 1:8-7; 8-10; and 11-28.

\(^{22}\)Chaps. 1-13 are about Peter and 13-28 about Paul.

\(^{23}\)Chap. 2, Pentecost; chap. 7, Stephen; chaps. 13, 17, 20, and 28 are Paul’s speeches.

to grow and to be multiplied." The expansion structure is about growth and spreading of the Word of God, and is usually surrounded by an additional phrase which deals with the growth of the local church body/Christian community. Acts 6:7 is an expansion occurrence usually associated as being the basis/origin of deacons within the church. However, verses 1-6 are so much more than mere deacon origins. There was a problem and concern over how the problem would be handled. There was a chance for distraction for the apostles; something may prevent the Word of God from being spread. To prevent the problem from being a distraction, the task was delegated, allowing the Word of God to continue. Then, verse 7 states the Word of God spread and the number of disciples increased. Who were the people to whom the task was delegated? Volunteers. They were godly men with characters of integrity. They were not pastors, apostles, or full-time paid staff. They were average, godly people of the church of Christ who took care of the needs of widows; a good and noble task that oddly enough would distract from the spreading and teaching of Scripture had it been left to the head leadership only.

Another great example of volunteerism pregnant with potential for application is found in Paul’s letter to the Philippians. It appears the church heard of Paul being imprisoned, gathered up a love offering/gift, and sent it with a man named Epaphroditus (Phil 2:25-30). Little is known about Epaphroditus, other than he was neither the pastor nor an elder; hence Paul’s concern to make sure Epaphroditus received the honor he deserved for his priestly service. Epaphroditus appears to be a volunteer, a normal guy who was willing to do the job of a Fed-Ex delivery person for the church. Along the way

25 This phrase is found four times in Acts: 6:7, 9:31, 12:24, and 16:5.
to see Paul, Epaphroditus got deathly ill. After recovering, he did not quit and did not go home because the job was too tough.\textsuperscript{28} Instead, being a perseverant man who was dependable, he continued onward and successfully delivered the church’s gift to Paul—and subsequently delivered Paul’s letter back to the church at Philippi. Paul considered this volunteer a brother, coworker, and fellow soldier for Christ. An average guy, a volunteer, getting praised by the apostle Paul and forever remembered in the pages of Scripture for doing a simple delivery job: an inconvenient job that was not done by the pastor, not done by the elders, and not done by the deacons. The job was fulfilled by a man who appears to be an average guy; a volunteer.

Though the Bible is full of places to discover and unpack examples of volunteerism,\textsuperscript{29} a final passage to explore which often goes ignored and deserves considerable attention is Nehemiah 3. Nehemiah is a book about the chief cupbearer of the Persian king who became very passionate to rebuild the walls of Jerusalem. The book is the memoirs or journal/diary of Nehemiah, allowing the reader to get a glimpse into the thoughts and passions of the author. Chapter 3 contains information the average American may find boring, gratuitous, and even unnecessary. Similar to the book of Leviticus, the content of Nehemiah could throw a monkey wrench into many a plan to read through the Bible in a year. Within Nehemiah 3 is a list of names of people who rebuilt each part of the wall, as well as each gate restored by which family. Despite being a boring list of names, the text is also full of amazing principles to glean from concerning building a theological foundation for volunteerism within the local church.


\textsuperscript{29} One could consider the calling of the 70 by Jesus, the calling of Pentecost, the analogy of every Christian being part of the body of Christ, the job of the pastor to equip the saints for every good work in the letter to the Hebrews, the delegation of judges and workers by Moses, as well as the plethora of women who serve Christ throughout the Bible (Abigail—Nabal’s wife, Phoebe, Priscilla, etc.).

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First, Nehemiah wrote down the names of everyone and prayed for them. Second, these workers are mentioned in the Bible just because they worked with wood and stones. The list of people begins with the High Priest Eliashib in verse 1. How exciting it is to see the leaders of the community setting the example by working well. The leaders were truly examples of serving by example; doing what they expected to be done. Third, verse 8 shares that a perfumer was helping with the building of the wall. Masonry work is definitely out of the realm of expertise for a perfumer, yet Hananiah worked anyway. Fourthly, verse 12 shows a man contracting his daughters to help with the rebuilding of the walls. Shallum made the work a family affair and not just something he did on his own. Fifth, the people in verses 23, and 28 through 30 made the work very personal by serving from and around their homes. These people were not pastors, paid staff, and not on some sort of executive board. The individuals in chapter 3 were normal, everyday, average people. They were volunteers doing a God-ordained task; they were volunteers for ministry.

When discerning the biblical foundation for volunteerism, one also needs to examine closely the biblical call for the priesthood of all believers. Paul wrote that God reconciled people “to Himself through Christ and gave us the ministry of reconciliation” (2 Cor 5:18). He went on to say that “we are ambassadors for Christ . . . we plead on Christ’s behalf” (2 Cor 5:20). Scripture cannot be more clear than when Peter wrote, “You yourselves, as living stones, are being built into a spiritual house for a holy priesthood to offer spiritual sacrifices acceptable to God through Christ Jesus” (1 Pet

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32 This statement is with the exception of the High Priest and the priests of v. 1.

2:5). “But you are a chosen generation, a royal priesthood, a holy nation, a people for His possession so that you may proclaim the praises of the One who called you out of darkness” (1 Pet 2:9). As a result, the work of the ministry is not limited to the full-time staff and/or the pastor of the church. The ministry is to be the work of all who are redeemed by the grace of the Triune God.

Due to every believer being part of the priesthood, a holy generation called to serve Christ, everyone is therefore also gifted for ministry. After all, gifts and ministry are directly related (Rom 17:6-8). Since everyone is called to a holy priesthood, everyone is likewise gifted to serve in such a manner. Every believer can do ministry in some way “regardless of gender, age, or education.” It would be inconceivable for God to call people and not equip them for the work. However, when one understands their giftedness, they must spend time doing serious study and equipping before undertaking a ministry.

Should a leader of a Celiac ministry be someone who has been diagnosed with Celiac Disease? Just as doctors are able to treat diseases without themselves possessing the disease, so too can people without Celiac Disease help those who are diagnosed. When someone without Celiac Disease works with those who are diagnosed, one must be careful to avoid segregating themselves from the group. A leader/group facilitator can identify with the members of the group by avoiding their freedom in not having to deal with gluten-free issues.

Knowing the Bible is not only descriptive about volunteerism, but also prescriptive with the priesthood of all believers, there are still two questions worth asking concerning volunteerism: (1) does one need to be a member of the local church in order

34 Marlene Wilson, *Creating a Volunteer-Friendly Church Culture* (Loveland, CO: Group, 2004), 1:12.

35 Ibid.

to volunteer at said church? (2) is there any room for non-Christians to volunteer for/in the local church? Answers to these two questions guided Anchor Baptist Church in their new Celiac ministry recruiting strategy.

Today’s younger generation, born after 1990, can be described as “impatient multi-taskers.” This digital and tolerant generation is not about long-term commitments and strict schedules. Instead, they want to be very influential but on their own time schedule; impactful over the short-term versus the long-term. Christians in this new generation have a desire to serve, but may not view it necessary to commit to local church membership. After all, they are part of the body of Christ—the universal Church—so why join a local church if in the end they are all serving the same Jesus. While a pastor may argue the theology of such a claim, and discuss sacraments and ordinances, membership being similar to baptism and the Lord’s Supper, etc., the question to wrestle with is, can they serve without church membership? As with the majority of theological constructs which are derived from an inductive scriptural hermeneutic, thoughts and conclusions vary based upon presuppositions, preferences, and personal theological dispositions.

When trying to avoid being distracted from spreading the gospel of Christ the disciples in Acts 6:1-6 offered specific advice regarding who should help the widows. The apostles offered, “Select from among you seven men of good reputation, full of the Spirit and wisdom, whom we can appoint to this duty” (Acts 6:4). The men were to be known people from among the group, and were to have “manifested a special degree of allowing the Spirit to work in them . . . they were to be known for their wisdom, probably


38 Ibid., 17-24.

referring to the kind of practical know-how necessary for the proper management of the charitable funds.”

From this passage, one can develop a general principle: volunteering at a church for any type of management/leadership/overseeing level should require membership to the local church. It takes time to discern if a person is full of the Spirit and wisdom versus being temporarily filled; it takes time to discover a person’s dependability and their ownership of responsibility with follow-through. As a person becomes part of a local body, their commitment becomes evident through their behavior and willingness to join a local church as an outward, physical expression of an inward, spiritual truth/reality.

On the other hand, just because someone is not a member of the currently attended local church does not mean they cannot serve. After all, Jesus told a man not to follow Him where He was going, but to “go back home to your own people, and report to them how much the Lord has done for you and how He has had mercy on you” (Mark 5:19). Granted, this moment in history was before Jesus began forming the church. At the same time, Jesus did not include this man as part of the disciples, instead, Jesus put the man on mission right away in his own hometown.

Practically speaking, it seems fitting for some people to serve on a smaller scale before joining a church. Such service can allow both the individual and the church to discover if God is calling such a person to that particular church body for worship and service. If such methods and intentions were really the focus, a church would be so blessed to have a true servant-hearted individual attending—whether a member on the roster or not. Taking these elements into consideration greatly assisted Anchor in their recruitment strategies for their Celiac ministry. First, as Anchor developed Celiac

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41 Williams, Acts, 118.
support groups, the support group leaders needed to be leader-qualified members of the church. Support group leaders were different than mere group discussion facilitators; therefore spiritual maturity and training were variables to take into consideration. Non-church members could still serve, albeit service manifests itself in a smaller manner. Non-member volunteers could be utilized in set-up, tear-down, and clean-up, providing elbow-grease for marketing and mailings, website updates, etc.

A more controversial, and potentially complicated issue concerns the second question of discussion: is there room for non-Christians to volunteer in the local church? Throughout Scripture, God has used the non-Christian in a variety of ways: from Pharaoh’s stubbornness revealing the power of God, to Satan being used to declare the possibility of disinterested devotion to the one true Lord through the life of Job. A study could even be made in Genesis 20 regarding Abraham and king Abimelech. After the destruction of Sodom, Abraham continued in his habitual sin deceiving people regarding the status of his wife. King Abimelech heard that Sarah was Abraham’s sister rather than his wife, and the king abducted her to be his own wife. This “Abrahamic sin” of deception was committed every time he and his company traveled into a new area. Abraham was unrepentant and seemed to be oblivious to the potential harm that could be done to Sarah, who was his wife as well as his half-sister. God visited Abimelech in a dream, and used the pagan king to rebuke and correct Abraham, the prophet of God. Though the king was not a God-follower, his rebukes were not worthless. Sometimes non-Christians are more moral than the Christians, and God can—and does—use them for rebuke and correction of the Christian. However, such stories tend to be more about God using non-Christians for His own purposes, not about the role—if any—of a non-Christian in a church

Support group strategies, content, and technique are discussed in detail in chap. 4.

environment. For such a discussion, a good place to turn would be the book of Hebrews:

It is impossible for those who have once been enlightened, who have tasted the heavenly gift, who have shared in the Holy Spirit, who have tasted the goodness of the word of God and the powers of the coming age, if they fall away, to be brought back to repentance, because to their loss they are crucifying the Son of God all over again and subjecting Him to public disgrace. (Heb 6:4-6)

This passage talks about some people in the church who have been enlightened. The meaning is given in verse 4: they have tasted the heavenly gift, but have neither eaten nor digested, they just tasted/sampled. They attend with Christians in the church, and may even themselves be members of the local church, but church membership neither equals nor guarantees salvation. These people’s hearts are hard toward the idea of Christ and salvation (Heb 3:12-14). These non-Christians in the church are being warned not to fall away. They have heard the truth about sin, Jesus, and redemption, and they have been a companion/partaker of the Spirit, but if they decide they do not want the truth (Heb 10:29) then they have trampled the Son of God and insulted the Spirit of grace. These people have not been transformed by the Spirit; they were close, so close to even be a companion much like Judas was with Jesus. Yet they, like Judas, have not jumped into the waters of redemption with both feet; they are merely testing the waters to see if they want to swim or not.

To hear the truth and reject it is synonymous to declaring Jesus’ death was a deserved punishment of a blasphemer. Without Jesus there is no sacrifice for their sins (Heb 10:26). It appears that if a person who tastes the Spirit then rejects Him is no longer called by God to redemption. However, on this issue one needs humility. From an outside point of view, it is hard to tell the difference between Peter’s betrayal and Judas’. Therefore, it is not up to individuals in the church to declare whom God is still calling and is no longer calling. First John 2 tells of many antichrists coming from the body, but they were not really of the body, only in it. If they were of the body, they would have

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44 Dennis E. Johnson, *The Epistle to the Hebrews* (Grand Rapids: Institute of Theological Studies, Outreach, 1999), 80-83.
remained in the body.

Though this passage has a lot to say about salvation security—especially when in the context of chapters 3 and 10—another element is also very clear: non-Christians were serving with the body of Christ. Though they were in the church, they were not of the church. A similar situation occurred when John wrote about heretics who removed themselves from fellowship because they “never really believed the gospel and their true inward devotion was to the world.”45 They served alongside Christians and were even labeled as partakers of the Spirit, tasting/sampling the things of Christ. Testing/sampling is not merely a cognitive function, it includes action and service. Though the issue of non-Christians serving with the church in Hebrews 6 is descriptive and not prescriptive, it is clear they were serving. It would be horribly unwise for a church to place a non-Christian in a position of management, teaching, or of any other sort of authority, as Acts 6 clearly shows the need for Godliness and being full of the Spirit and wisdom, not just nibbling on the Spirit like an appetizer. Yet, they can be given a place to try out Jesus before accepting Jesus as Savior.

Perhaps, by working with the church, a person can see the love of Christ being displayed through the body of Christ. Then, in recognizing the love of Jesus and the depth of sin, they may repent and turn their lives to Jesus completely. If only the churches properly displayed true, uncompromised devotion to Christ. If only the churches of America were to be proper reflections of the love of Christ; maybe more would serve and more would humbly fall at Jesus’ feet in surrendered submission.

Having laid the foundation for ministry, and having looked at who should be the workers who are building and serving within the ministry, attention can now be shifted to constructing a theological framework regarding ministering to those within the Celiac community. What is the theological approach toward a Celiac-targeted, food/diet-

45Daniel Akin, 1, 2, 3 John, The New American Commentary, vol. 38 (Nashville: Broadman & Holman, 2001), 116. This is in reference to 1 John 2:19.
based ministry? What directions and implications does Scripture provide for such a specifically targeted ministry? Developing from these insights is a provocative strategy for engaging the Celiac community with the gospel.

**Thinking Theologically about Food**

Since Celiac Disease is a gluten-based disease, it is maintained through diet management. It can be easy for a church to develop a so called ministry based on food, but how can that ministry be about the gospel? How can this ministry be more than merely talking about food with a little Jesus thrown in here and there? For some churches, even the very mention of “food” can lead some towards rejecting the notion of such a ministry altogether. After all, is not food just something one eats, is a part of fellowship, and really has nothing to do with the gospel whatsoever? Or, is food very relevant to the gospel, with churches doing a disservice by not thinking theologically about food?

It is interesting to note that toward the beginning of the biblical narrative is Adam and Eve, before the fall, created with the ability and command to eat (Gen 2:16); and Scripture ends with a great feast/supper of the Lamb (Rev 19:9). It is interesting to note how the serpent came into the Garden of Eden tempting Eve with the notion of eating and rebelling against God with food—making the first sinful activity recorded in Scripture an act of eating (Gen 3:1-5). Israel’s covenant with God was manifested in part by observing dietary laws (Lev 11:1-47), as well as observing Passover (Exod 12:42-51), Sabbath meals (Exod 23:10-12), and national feasts (Exod 23:14-19). In the New Testament, Jesus Christ—who comes from the town of Bethlehem, meaning “House of Bread”46—calls Himself the “Bread of Life” (John 6:35). When Jesus instituted the new covenant, it too had a meal involved (Luke 22:14-20). As one can clearly see, throughout the biblical narrative of creation, fall, redemption, and consummation, food is present.

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playing a major role. Food is not the gospel, but food is in the gospel and appears to be somehow pointing to the gospel. Could it be the Baptist potlucks have something very right after all?

Why did God create a world in which every living creature must eat?47 God is all-powerful, all-knowing, and yet chose intentionally to make a world in which eating is a necessity. Eating is not a product of the fall and is not a result of the corruption of sin upon creation, which means God has a purpose for eating; a purpose which, along with working, is distorted and corrupted from sin and in need of redemption.

Food is a holy and humbling mystery. Every time a creature eats it participates in God’s life-giving yet costly ways; ways that “simultaneously affirm creation as a delectable gift, and as a divinely ordered membership of interdependent need and suffering and help.”48 Eating proves humans are not self-sustaining, fully independent gods. Humanity is dependent: dependent upon animals, soil, bees, photosynthesis, gardeners, hunters, stores, butchers, friends, strangers, money, trucks, creation itself, and ultimately the Creator. People are, and always will be, dependent beings. Whether atheist or Christian, people are dependent and not independent. Eating reminds every person they are dependent and mortal, as life depends upon eating. Jesus referred to Himself as the “Bread of Life” because He sustains life beyond mere food. Jesus is the culmination of the prophets, the King of kings, Lord of lords, and the true sustainer of life. . . . He is the ultimate and true food of foods. Though cryptically stated, Jesus Himself declared, “My flesh is true food, and My blood is true drink. He who eats My flesh and drinks My blood abides in Me, and I in him” (John 6:55-56). Food and eating ultimately point to Jesus. Somehow, the very act of eating is to be an act that reminds the believer about Jesus on the cross, Jesus the sacrificial lamb, and Jesus yet to come. In a mysterious

47Wirzba, Food and Faith, 1.
48Ibid., 2.
manner, eating is a reflection of a relationship with Jesus. Yet, more mystery surrounding eating and food still needs to be explored: how has food and eating been corrupted by the fall? From this analysis comes a framework for assessing what redemption will look like for the body of Christ.

Though God made humanity in His image (Gen 1:27-28), humanity is also corrupt, twisted, and broken due to Adam and Eve’s quest for knowledge and discernment apart from God. Adam’s sin “did not just affect him but, like a stone tossed into a pond, rippled out until it had destroyed the entire world.” Humanity was created to have a relationship with God, with each other, and with creation—the world itself. Sin wreaked with near total devastation each of those relational levels: humanity is separated from God as seen by Adam and Eve’s expulsion from the Garden of Eden, humanity is separated from each other as seen in the killing of Abel by his own brother, and humanity’s relationship with creation is devastated with the curse upon the soil, resulting in an increase in both thorns and the labor involved in tilling the soil (Gen 2-4). God bestowed distinctively godlike capacities upon people “such as our higher intellect, free will, conscience, and ability for logic and language.” Sin has twisted nearly everything to the point that all of creation groans for redemption (Rom 8:22-23). Of all the aspects of humanity in need of redemption, one is eating.

Since sin twisted creation, eating contains one of many evidences of things not being right with the world one lives in. People have blood sugar issues like diabetes and hypoglycemia, some have difficulty digesting certain foods, like those who are lactose intolerant.

49 Michael Wittmer, Heaven Is a Place on Earth: Why Everything You Do Matters to God (Grand Rapids: Zondervan, 2004), 173.

50 Ibid., 80-81. Wittmer also admits that his analysis of the *imago Dei*, though generally accurate, not everything related to humanity’s divine image breaks neatly along ontological and ethical lines. For example, though people have the ability for logic and reason, one’s ability to think clearly has been damaged by sin: called by theologians as sin’s “noetic effects,” from the Greek term, *nous*, which means “mind.” Wittmer also points out cases of mental retardation or Alzheimer’s disease as further, more extreme, examples of minds being ravaged by the fall.
intolerant and have difficulty digesting dairy products; and some people have allergies to foods like nuts, strawberries, and gluten. Since food is part of creation, and eating existed before the fall and has been twisted as a result of the fall, then eating is one of the elements of creation groaning for redemption. To see how food and eating is to be redeemed, it is helpful to turn to the roles and purposes of eating, answering the initial question: why did God make a world in which there is eating?

Connection between Food and Community

Food is about the relationships that join people to the earth, fellow creatures, loved ones, guests, and ultimately the Triune God.

“Eating, like sexual life, is among the most intimate ways we know for relating to others.” Because eating was devastated by the fall, one of the methods God made for unity has been corrupted. When churches fail to recognize the impact food has upon relationships, they minimize the impact of relationships.

One of the major methods of promoting unity within the church body, for example, is with the observance of communion (1 Cor 11:18-21). If a church member is allergic to gluten, and the communion bread contains gluten, then the church member is unable to participate in the communion service. Various views can be taken in regard to Celiac Disease and the sacrament of communion. For churches who believe in transubstantiation, where the literal bread and literal wine become supernaturally converted by the Holy Spirit to become the literal body and blood of Jesus Christ, no substitution to the bread may be offered. Within West Michigan, some hold hyper-

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51 Wirzba, Food and Faith, 4.

52 Ibid., 156.

Calvinist views stating those who cannot eat of the bread proper are providentially hindered from partaking in communion. Some churches are more influenced by Huldrych Zwingli rather than Thomas Aquinas or Martin Luther concerning communion. Based on Kornelius Hoen, Zwingli argued the phrase “this is my body” (Matt 26:26) is about the bread signifying Jesus’ body. With symbolism being the main focus, some churches have no problem with the mode of communion being individually adjusted: like a member of the congregation bringing their own bread. However, even if that particular member of the congregation were to bring their own bread, and partake of the bread alone, communion still becomes an isolating event rather than a time of unity and connectedness. A unified and connected church is the result of both those who have “allowed themselves to be transformed from within by Christ and by His considerate and compassionate way of being in the world, [and is the result] of the sharing and fellowship that take place in the breaking of bread and drinking of wine together.”

Even outside of the church, eating is an activity of bonding and relationship edification. Many a man has taken a woman out to a restaurant to eat, allowing for the sharing of a meal together to enhance the conversation for the purpose of a heightened relational status.

As seen, food is an agent that not only points to Jesus as the ultimate food and sustainer, but also is central in the bonding of people with each other. Thinking

54 Similar views are found in churches regarding baptism: a woman who was in a car accident and wore a medical halo—a metal ring screwed into her skull to keep her neck straight—wanted to be baptized, but the church called her “providentially hindered from baptism” because she could not get her head wet, and therefore could not be fully immersed. These views and congregational struggles are common among churches in West Michigan, where Anchor Baptist Church resides.

55 McGrath, The Christian Theology Reader, 547.

56 Wirzba, Food and Faith, 153, emphasis added. More on the isolation tendency is thoroughly explored in chap. 3 concerning eating separately from others both in the home and in the church. For the purposes of this chap., the emphasis is on the correlation between eating, food, and relationships.
theologically about food is not “spiritualizing” food. Instead, this type of thinking enables one to perceive food within a context that stretches through the many ecological and social relationships of this world all the way to the divine Creator and Sustainer. What and how one eats reflects whether or not one needs to abide with others at all. To serve as an illustration, in the fast-food industry one eats alone and on the run. When going through the drive-through, there is no time or place for relationship building. On the other hand, when one eats with a commitment to the strengthening of relationships and when eating is an intentional act versus a reaction to hunger, then it becomes possible for eating to be an act of abiding with another.57

As Christians begin to think theologically about food, it will not take long to see eating no longer as a mundane activity, but as a spiritual discipline, and therefore an action which plays an influential role in one’s spiritual development. Simply put, spiritual disciplines are concrete steps where one might “redeem the time relentlessly flowing past and how by strenuous engagement one might be redeemed from fire by fire . . . the disciplines promise to give lives a form that would serve as a receptacle for the substance of the Christ-life in God’s present Kingdom.”58 In other words, the aim of eating as a spiritual discipline is to “develop in people the habits that will enable them to live a more ordered, measured, reflective, free, attentive, available, and responsible life.”59 Life lived Burger-King-style is a life lived “my way right away”; an unexamined life focused on self, pleasure, eating, drinking, and being merry. Jesus intended that the Christian should live an intentional and examined life, where one personally sacrifices to help others flourish. Eating should be a sacramental action, not a sacrilegious activity; one of many methods where an individual honors their Lord and Creator and actively plays a role in

57Wirzba, Food and Faith, 155-56.
59Wirzba, Food and Faith, 28.
their spiritual development.

Since food and eating are made intentionally by God as a reminder of dependence, as a reinforcing activity for edifying relationships, and for meditating, reflecting, and honoring God, churches would be wise to pay attention to eating and the role of food within their ministries. For Anchor Baptist Church, such an attitude is being taken in regards to the newly developing Celiac Ministry. People’s bodies are broken from sin, and as a result, many have an allergy towards gluten. Such a disease has the potential of fracturing relationships, isolating people in times of communion, and hindering spiritual growth. As Anchor developed the ministry, they needed to be re-focused upon the gospel of Jesus Christ: sin separated people from God, their relationship with God being shattered, and only Jesus can offer forgiveness for their sin and restore their relationship with their Creator. In the process, food and eating are to also be emphasized. Eating should not be a situation of isolation for those with Celiac Disease. Communion should not be a time of regret and loneliness. Steps should be taken to help people accept Jesus as their Savior, and also to become united with the Body of Christ, partaking in communion, pot-lucks, and other fellowship activities in an edifying, freeing, liberating manner. One day, when Jesus returns and gives His Bride their resurrected bodies, they will be able to once again enjoy the wheat, barley, and rye God Himself created. Until then, many must alter their diets, avoid gluten grains, and long for the day of total redemption.

Before moving on to developing the structure of the ministry to assist Anchor Baptist with engaging the Celiac community with the gospel, other variables and factors must first be assessed. One must develop a thorough understanding of Celiac Disease itself, the physical, psychological, and social impacts the disease has upon individuals, research the diagnosis and treatment of Celiac Disease, and the social implications the disease has upon the community and the church.
CHAPTER 3
UNDERSTANDING CELIAC DISEASE

Having assessed the theological implications regarding ministry, serving, food, and eating, it is appropriate to look at other variables before moving on to developing the structure of the ministry to assist Anchor Baptist Church in engaging the Celiac community with the gospel. It is important to develop a thorough understanding of Celiac Disease itself, including the physical, psychological, and social impacts the disease has upon individuals. One should explore and understand the research regarding diagnosing and treating Celiac Disease, and the social implications the disease has upon the community and the church.

Celiac Disease can be devastating to a person’s social, psychological, physical, and spiritual well-being, hindering discipleship as a result. Assessing and administering dietary-based treatment for Celiac Disease is necessary in order to effectively engage the Celiac community with the gospel. Therefore, if one is going to minister to the Celiac community, one must first have an understanding of Celiac Disease, be knowledgeable of the effects gluten has upon the Celiac-diagnosed and gluten-intolerant individual, and have competency regarding what treatments are available. Afterwards, one will be able to applicably assess the resulting social impact of Celiac Disease within the community, and how the intervention of the local church can change the lives of those in the Celiac community for the kingdom of Christ.

What is Celiac Disease?
As stated in chapter 1, Celiac Disease is a hereditary autoimmune disease that damages the villi of the small intestine and interferes with absorption of nutrients from
In order to grasp the complexities of Celiac Disease, it is best to start from the beginning, and explore the issues regarding gluten.

“Gluten” is the general name/term given to the formless storage proteins found in wheat, barley, rye, and oat grains, and is composed of smaller parts called peptides. These peptides are two types: first is water soluble peptides called glutenin, and the second is alcohol soluble peptides called prolamines. The prolamines are the “guilty agents” that trigger Celiac Disease reactions and various related health disorders in those who are either gluten intolerant or have Celiac Disease. In an unfortunate and peculiar turn of events, the prolamines found in wheat, rye, and barley frequently cause the immune system of susceptible individuals to react as if it is not a component of nourishing food. Instead, the immune system views the prolamines as an invading bug, or worse, as though it is indistinguishable from normal organ tissues found in the body. These proteins that make up one’s own tissues are viewed in genetically susceptible individuals as “invader” proteins by the immune system. When the “invader/foreign” proteins enter the bloodstream, their presence is sensed by the immune system. The immune system then interprets the healthy proteins as non-self and potentially harmful/toxic. Biologically, a warzone in the body results as the production of antibodies by the immune system are specifically tailored to identify and destroy these

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4Ibid. The names of the specific prolamines which cause reactions in susceptible individuals are gliaden in wheat, hordein in barley, secalin in rye, and avenin in oats.


6Ibid., 119.
“invaders.” These antibodies react just as they would to the foreign proteins of infectious agents such as bacteria and viruses. At the same time, the immune system also produces memory cells, which remember and recognize certain parts of the structure of this invader protein, should it ever enter the blood stream again. This entire process is called “molecular mimicry.” The result of this attack by the immune system is damage and inflammation of the villi, causing the intestine to become unable to absorb water and nutrients such as vitamins, folic acid, iron, and calcium.

Individuals whose genetic makeup is for their bodies to interpret wheat, barley, and rye prolamins as invading cells, and whose immune system attack said proteins causing damage to the small intestine, are individuals who have the autoimmune disease called Celiac Disease. “Autoimmunity” means that the immune system mistakes bodily tissues and cells for foreign ones. After all, “the function of the immune system is to attack and destroy substances that are not-self, which means that autoimmune diseases target one’s own living architecture.” Essentially, “the body is attacking itself every time a person with Celiac Disease consumes gluten.”

Patients with Celiac Disease have various immunologic mechanisms involving human leukocyte antigens. Two such antigens, HLA DQ2 and DQ8, play an important role in gluten intolerance/Celiac Disease. Understanding this bio-molecular role can be difficult and challenging. Here is how the bio-molecular role works,

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Ibid.


Alexander Shikhman, Gluten Nation (San Diego: Restorative Remedies, 2009), 25.


Each HLA is capable of recognizing and binding to a specific foreign protein. The HLA and the foreign protein come together to form what is known as a “complex.” The creation of this complex signals a specific type of white blood cell—called a T cell—to initiate an immune response. In people with Celiac Disease, HLA DQ2 specifically binds to a breakdown product of gluten and the resulting complex then triggers T cells residing in the small intestine, which leads to inflammation. Gluten intolerance represents the entire sequence of events that result from this HLA DQ2-gluten-T cell inflammatory interaction.\(^\text{12}\)

Surprisingly, gluten is composed of proteins that are not completely digestible by humans. Gluten contains a high proportion of a specific amino acid, proline, which makes gluten unable to be digested. Rather than breaking down into individual amino acids in the gastrointestinal tract, gluten is only partially digested into large fragments. In genetically susceptible individuals, these fragments provoke both an innate and an adaptive immunologic response.\(^\text{13}\) The function of innate immunity and adaptive immunity is to protect the host against invading microorganisms, tumor cells, and toxic foreign pathogens. However, concerning genetically-susceptible individuals, the immune system breaks down and begins to interpret certain host tissues as foreign. Shikhman writes,

In these cases, the immune systems start manufacturing antibodies against their own tissues. Antibodies that have the host’s own proteins as their specific targets are known as autoantibodies. If the autoantibodies attack joints, rheumatoid arthritis develops. If the autoantibodies attack the thyroid, Grave’s or Hashimoto disease develops; against the kidneys, lupus develops.\(^\text{14}\)

Likewise, if the auto autoantibodies attack the small intestine, Celiac Disease develops.

In early child development, an infant’s immune system learns to tolerate the food they eat. These proteins found in the food eaten contain proteins which though they are “foreign,” are also necessary and the developing immune system learns not to react to


\(^{13}\)Ibid., 111. The large fragments can persist in the small intestine, interacting with the epithelial cells and provoking an innate immunologic response in susceptible individuals. The fragments can also penetrate the lamina propria and provoke an adaptive immunologic response in susceptible individuals.

\(^{14}\)Ibid., 113-14.
these proteins. Though most people develop this immune tolerance to gluten proteins, “many never develop this tolerance and have a genetic susceptibility to launching an immune response to gluten. The immune response sets off a chain reaction than can become gluten intolerance and, in extreme cases, Celiac Disease can develop.”\textsuperscript{15}

Celiac Disease is a complex disorder. To help simplify the complexities, it can be helpful to view Celiac Disease as having six components.\textsuperscript{16} The first component is genetic. Celiac Disease is inherited, meaning it runs in families. People who have inherited genes for Celiac Disease have the potential to develop an autoimmune response triggered by gluten exposure.\textsuperscript{17} The second component is called chronic. Celiac Disease and gluten-intolerance never goes away, and intestinal damage worsens with continued gluten ingestion: “Receiving a diagnosis of an autoimmune disease is akin to receiving a life sentence. One is never cured, and will just have to make the best of it.”\textsuperscript{18}

Autoimmune is the third component of Celiac Disease, as has been discussed in detail previously regarding the immune system of the body attacking itself. The fourth component is digestive. When the digestive system is damaged, its ability to function is disrupted. Malabsorption is the fifth component. Since the digestive system is damaged, nutrients are not properly absorbed, leading to a plethora of health complications, illnesses, and abnormalities to be described in detail later. The sixth and final component of Celiac Disease is that it is multi-system.\textsuperscript{19} Multi-system meaning any part of the body can develop health problems due to the first five components.

\textsuperscript{15}Ibid., 114.

\textsuperscript{16}Libonati, \textit{Recognizing Celiac Disease}, 9-10.

\textsuperscript{17}Ibid., 9. “Potential” means there can be no response without first eating food that is made with wheat, barley, rye, or oats.

\textsuperscript{18}Shikhman, \textit{Gluten Nation}, 24.

\textsuperscript{19}Libonati, \textit{Recognizing Celiac Disease}, 9-10.
What Are the Symptoms and Effects of Celiac Disease?

When there is an unawareness of the underlying problem of gluten-intolerance and Celiac Disease, genetically susceptible individuals continue to consume gluten prolamins. Gluten, on a practical dietary level, is a thickening, glue-like agent. It is gluten that allows bread and bread-related products to hold together, and causes sauces and gravies to have a thick substance rather than being thin and runny. As a result, gluten is found in a wide variety of products in restaurants and grocery stores ranging from breads to soups to french fries. Some vitamins and mineral supplements add gluten for bonding purposes.

Daily intake of the triggering proteins causes an ongoing autoimmune and inflammatory response within susceptible individuals. The lining of the small intestine of an affected person becomes chronically inflamed and irritated, and the immune system gets revved up. Depending on other genetic and environmental factors, the immune system may begin to launch attacks against other organ systems. This attack can lead to a wide variety of symptomatic responses involving multiple systems of the body. What follows in this section are the most common symptoms, as well as a few specific symptoms of a more extreme nature. The extraordinary cases presented are selected due to their relevant nature for the potential ministry opportunity of Anchor Baptist Church. These isolated symptoms include, though are not limited to, autism, seizures, and psychological disturbances such as attention deficit disorder with hyperactivity, communication hindrances, and mental spacing which is often given the common vernacular name/term “brain fog.”

Common/General Symptoms of Celiac Disease.

While every person is unique and will likely produce differing symptoms,

many reactions are more common than others. It should be noted that the presence of common symptoms guarantees neither a Celiac Disease nor a gluten-intolerance diagnosis. A symptomatic individual would be wise to at least explore either diagnosis, or the option of experimenting with a gluten-free diet to see if discomfort is alleviated.

The basic and most common symptoms of both gluten-intolerance and Celiac Disease are diarrhea or intermittent diarrhea and constipation; lactose intolerance; indigestion/reflux—also known as heartburn; abdominal pain; bloating and gas; iron, folate, calcium, vitamin A, D, E, K, and/or B12 deficiency; chronic fatigue and weakness; bone/joint pain; mouth ulcers—also known as canker sores; menstrual irregularities, recurrent miscarriages, infertility—which can be found in both men and women; elevated liver enzymes; depression; concentration difficulties; irritability and behavioral changes; as well as dental enamel abnormalities and delayed puberty in children.21

Certain undigested peptides, called exorphins, adversely affect mental function due to their opioid effect, which can cause mental apathy, irritability, depression, anxiety, and other psychiatric disturbances.22

**Uncommon, though not rare, symptoms.** Though there are dozens upon dozens of uncommon, though not rare, symptoms and multi-system manifestations resulting from Celiac Disease and gluten-intolerance,23 for the sake of the best benefit for Anchor Baptist Church, only autism, attention deficit disorder with hyperactivity, and

21Case, *Gluten-Free Diet*, 16. Though not symptoms, Celiac Disease can occur frequently in a variety of other disorders such as type 1 diabetes, Down Syndrome, Turner Syndrome, osteoporosis, and other autoimmune disorders such as autoimmune thyroid disease, Addison’s disease, and alopecia areata.


23Ibid., 89-260. Health manifestations of Celiac Disease including signs, symptoms, associated disorders and complications of Celiac Disease are presented in chart form.
seizures will be briefly explored.\textsuperscript{24}

Over the past several decades, journal articles have periodically reported correlations between autism and Celiac Disease or resolution of attention-deficit disorder with hyperactivity symptoms after the initiation of a gluten-free diet.\textsuperscript{25} In 2004, the United States National Institute of Mental Health, often abbreviated as NIMH, launched a large-scale five-year trial titled “Diet and Behavior in Young Children with Autism.”\textsuperscript{26} This clinical trial investigated potential therapeutic benefits of a gluten-free and casein-free diet in children with autism. Here is a detailed description from the clinical trial:

Autism is a serious brain disorder that affects brain development and often causes social and educational problems. Studies suggest that a gluten and casein-free diet may have a therapeutic effect on children with autism. This study will examine the effects of such a diet in autistic children. Children in this study will be following a gluten free and casein free diet for 18 weeks. All subjects will have 6 weeks of baseline followed by 12 weeks of randomized, double-blind, placebo-controlled, challenge snacks with careful behavioral observation and evaluation. They also will be receiving uniform educational and behavioral services through their provider. Standard autism evaluation methods, weekly diet and sleep diaries and scheduled laboratory tests will be used to assess subjects. An end of study, follow-up assessment will be completed at 30 weeks after the start of the study.\textsuperscript{27}

Both gluten intolerance and Celiac Disease have been recorded as having a potential correlation with seizures. A seizure is a

\textsuperscript{24}Several members of Anchor Baptist Church either have reported these symptoms, or have symptomatic children, and have been told within the past year medically to go on a strict gluten-free diet. Rather than cutting wheat, barley, and rye 100 percent, they have so far refused to cut gluten from their desserts. They have been symptomatic for seizures as well as autism and ADHD tendencies, but all symptoms have been unexplained both medically and psychologically. Therefore, this research is designed to explore gluten as a potential culprit in the unexplained symptomatic manifestations.

\textsuperscript{25}Shikhman, \textit{Gluten Nation}, 44. Shikhman also records similar results having been reported in patients with schizophrenia as well.

\textsuperscript{26}University of Rochester, “Diet and Behavior in Young Children with Autism,” ClinicalTrials.gov, accessed December 30, 2013, http://clinicaltrials.gov/ct2/show/NCT00090428. The trial number is ID NCT00090428. No publications from the trial have been released as of December 2013. However, the NIMH’s trial shows the importance of the potential of such a correlation.

\textsuperscript{27}Shikhman, \textit{Gluten Nation}, 45.
transient abnormal electric circuit in the brain which can manifest in the form of altered consciousness, involuntary changes in body movement or function, convulsions, unusual sensations, déjà vu, etc. The association between seizures and gluten intolerance has been described in numerous scientific and clinical publications.28

There is a lot to be learned and researched concerning the molecular link between gluten and the initiation of seizures. Some research has revealed that antibodies against wheat protein gliadin can cross-react with molecules from the nerve synapse called synapsin 1, in turn causing neurological disturbances.29 Malabsorption of certain nutrients such as folic acid and carnitine, which are vital for normal brain functioning, is another mechanism of gluten-induced seizures.30 Gluten-free diet has been reported to be curative for patients affected by gluten-associated seizures, and even helped patients with seizures resistant to medicamentous therapy.31

**Diagnosing Celiac Disease**

Due to the wide range of symptoms varying from mild to severe or even non-symptomatic, diagnosing Celiac Disease and gluten intolerance can be very difficult. Some patients have been “misdiagnosed with irritable bowel syndrome, lactose intolerance, fibromyalgia, chronic fatigue syndrome, or ulcers.”32 Some members of Anchor Baptist Church suffered symptoms for over 15 years until a doctor suggested a gluten-free diet, which alleviated their symptoms and discomfort, and restored their health. As medical technology advances, so does the accuracy, efficiency, and methodology of diagnostics. Yet, even with the advancement of technology, there is still

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28 Ibid., 60.

29 Ibid.

30 Ibid., 61. The abnormal deposition of calcium in the brain tissue was described in patients with occipital lobe epilepsy as a result of active, symptomatic, Celiac Disease.

31 Ibid.

32 Case, *Gluten-Free Diet*, 16.
the possibility of a false negative test result. When a patient tests negatively for Celiac Disease, not only is there still the possibility of having Celiac Disease, the individual could be not Celiac but gluten-intolerant. Gluten-intolerance is not a genetic issue, therefore one will not produce a positive test result, and the individual will still need to be on a life-long gluten-free diet just as a lactose intolerant person avoids dairy products.

The most common diagnostic tests for Celiac Disease are specific blood tests, such as the IgA endomysial test, which is expensive due to requiring human interpretation, and the IgA tissue transglutaminase antibody test, which is computer analyzed and can be completed in children as young as 2 years old. Other blood tests include the anti-gliadin antibody test, which is less accurate in children, and the total serum IgA test, which determines IgA antibody deficiency.

Outside of blood tests, the most common form of Celiac diagnostics is by performing an endoscopy procedure with proximal intestine biopsy. This is the gold standard for diagnosing Celiac Disease as endoscopy “provides an opportunity to obtain tissue to diagnose Celiac Disease, thus a biopsy should be strongly considered whenever endoscopy is performed.” One can undergo an ultrasound procedure, which requires neither the use of needles nor anesthesia. There is also the option of genetic testing, which is the option the pastor of Anchor Baptist Church’s wife and in-laws chose to undergo through the University of California: “These tests are useful when patients have ambiguous biopsy results, started a gluten-free diet before diagnostic testing, and for relatives of diagnosed patients with Celiac Disease.”

33 Ibid.
34 Libonati, Recognizing Celiac Disease, 22.
35 Ibid., 23.
36 Ibid., 24. More than 97 percent of people with Celiac Disease share the same genetic HLA haplotype markers, HLA-DQ2 and HLA-DQ8.
On a significantly more expensive scale, yet also with a proportionate increase in accuracy, a patient can be diagnosed via the capsule endoscopy procedure. With the CEP test, the patient swallows a pill-sized camera in a capsule that contains miniature lights. The camera takes thousands of photographs of the inside of the entire digestive tract and transmits them to a computer that the patient wears throughout the day. As with the ultrasound procedure, CEP neither involves needles nor anesthesia.

The last option is not necessarily a diagnostic option, but has proven to be very useful when other diagnoses are not a possibility. Should one be unable to afford a test, lack medical insurance to cover the costs of a test, or suspect a false negative result from a test, an individual could also attempt a gluten-free diet trial. In the diet trial, one would strictly remove gluten from their diet, and then observe any decrease in symptoms over a one to two month period. Should a positive result occur, such as the removal of irritable bowel syndrome, then one would be wise to remain on the diet. However, should no benefit take place, the diet may not be necessary.

**How Big is the Celiac Community?**

Approximately 40 percent of individuals have the gene that leads to the construction of HLA DQ2. The Celiac Disease Foundation estimates 1 in 133 people have Celiac Disease in the United States. In other words, over 2 million people in the United States are diagnosed. Yet, only a small portion of people who are genetically susceptible to gluten intolerance display symptoms, leading to the questions, why do so few people display symptoms? And why is Celiac Disease not more common than it is? The University of Chicago estimates 97 percent of individuals who actually have Celiac

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37Ibid., 25.

38Shikhman, *Gluten Nation*, 32.

Disease are currently undiagnosed.\textsuperscript{40} Despite the large population of people with Celiac Disease in America, let alone the rest of the world, the ever-so-puzzling question of “why” still lingers. Why is it that approximately 1 percent of the 40 percent of genetically susceptible individuals have triggered Celiac Disease?

The key to understanding this difficult question is that genetics is not the only important factor. How the genetic sequence is expressed is a very important,\textsuperscript{41} but the environment of the individual is also a critical factor.\textsuperscript{42} Studies demonstrate that persons who have been introduced to dietary gluten in infancy, before the age of four months, have a significantly higher risk of developing gluten intolerance and Celiac Disease than other people. . . . Bacterial infection, viral infection, and high fevers could expose structures of the lamina propria in the small intestine to gluten proteins, setting off a cascade of immune responses that ultimately result in Celiac Disease. In certain circumstances, stress may be an important contributor in the development of this challenging disorder, due to ongoing stress provoking an extended inflammatory reaction, which may stimulate an immunological response involving the gastrointestinal tract.\textsuperscript{43}

In other words, a genetically susceptible individual having triggered Celiac Disease is more than mere genetics. Environmental variables such as infantile gluten exposure, illness, and injury can cause the disease to activate.

\textbf{Treatment Plans for Celiac Disease}

Treatment for individuals with Celiac Disease can be summarized in a single sentence: “follow a strict gluten-free diet for life.”\textsuperscript{44} Why is such a strict and extreme

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\textsuperscript{41} Shikhman, \textit{Gluten Nation}, 32. Person A and person B may both have a genetic sequence that codes for antigen-presenting DQ, but only person A will actually manufacture DQ and possibly develop gluten intolerance, because of the internal molecular development of person A. Two persons may share an identical genetic sequence for a certain characteristic but only one may show that characteristic. The expression of a genetic sequence depends on a highly complex set of molecular factors.
\textsuperscript{42} Ibid., 33.
\textsuperscript{43} Ibid., 126.
\textsuperscript{44} Case, \textit{Gluten-Free Diet}, 17.
\end{flushleft}
step necessary? Gluten intolerance and Celiac Disease are permanent conditions, and even the slightest amount of gluten will provoke an immune reaction.\textsuperscript{45} A concentration as low as twenty parts per million, 0.002 percent, can cause symptoms in a person who is gluten intolerant.\textsuperscript{46} Therefore, if an individual who has either Celiac Disease or gluten intolerance goes strictly gluten-free for a period of time, and then ingests gluten, symptomatic conditions will return. Celiac Disease and gluten intolerance are not chronic, but a life-long condition requiring permanent dietary change.

Restoring metabolic balance is a secondary step for Celiac Disease treatment. The degree of malabsorption varies depending on the extent of gastrointestinal inflammation, as vitamins and minerals are poorly absorbed, and various deficiencies may result.\textsuperscript{47} It is critically important to be sure than any vitamin/mineral supplements are gluten-free, as it is possible for gluten to be an ingredient in the manufacturing of pills, tablets, and capsules.\textsuperscript{48}

Cleo Libonati cleverly derived an anagram for the treatment and management of Celiac Disease, using the word \textit{Celiac}:

Consultation with a skilled dietician, Education about Celiac Disease, Lifelong adherence to a gluten-free diet, Identification and treatment of nutritional deficiencies and other manifestations, Access to an advocacy group, and Continuous long-term follow-up by a multidisciplinary team.\textsuperscript{49}

When going on a gluten-free diet, one has to be very conscientious regarding the ingredients labels found on most packaged food. On the label, those on a gluten-free diet are to avoid products with wheat, barley, and rye ingredients. The most obvious wheat ingredients are graham flour, hydrolyzed wheat protein, modified wheat starch,

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\item \textsuperscript{45}Shikhman, \textit{Gluten Nation}, 140.
\item \textsuperscript{46}Ibid., 141.
\item \textsuperscript{47}Ibid., 146.
\item \textsuperscript{48}Ibid.
\item \textsuperscript{49}Libonati, \textit{Recognizing Celiac Disease}, 29.
\end{itemize}
wheat germ, wheat flour, matzoh meal, and spelt. Concerning barley ingredients, one must look for barley flakes, barley flour, barley pearl, brewer’s yeast, malt, malt extract/syrup/flavoring, and malted milk. Due to the involvement of malt in ales and beers, many alcoholic beverages contain gluten. As for rye, ingredients include rye bread and rye flour: “Celiac organizations in Canada and the United States of America do not recommend consumption of commercially available oat products as they are often cross-contaminated with wheat and/or barley.”

Since gluten is the bonding substance that acts like glue, holding products together, many ingredients with gluten may be hidden and are less obvious and apparent. While the presence of gluten is evident in baked goods like breads, cookies, and pasta, it is less evident in such items as gravies, sauces, soups, salad dressings, prepared meats like hamburger patties and hot dogs, candy, flavored coffees and teas, as well as some medications and nutritional supplements. Many soy sauces and teriyaki sauces contain hydrolyzed wheat proteins, as well as scalloped potatoes, cereals, and a large variety of potato chips. It does not take long for the realization to become apparent regarding the complexities of a gluten-free diet. Fortunately, like with many new journeys in life, the gluten-free diet gets easier with practice and perseverance. Transforming gluten-free eating into a habit takes place when an individual moves from just being on a gluten-free diet to living a gluten-free lifestyle.

Beyond the Diet: The Gluten-Free Lifestyle

Sometimes systemic pain and autoimmune disease can be modulated with changes not only in diet, but also in lifestyle. The word diet “comes from the Greek word

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50 Case, Gluten-Free Diet, 20.

51 Ibid., 29.
diata, which literally means our manner of living.” As previously discussed, since Celiac Disease is a multi-system impacting disease, the lifestyle of a person is affected. When one goes on a gluten-free diet, and consequently the malabsorption of nutrients ceases, the body becomes healthier, cognition become clearer, and as a result, the lifestyle of the affected individual will also need to be adjusted.

Each human is given a set of genes called *genotype*. As discovered from the many research studies completed on identical twins, genetics are only part of the picture. Subsequent research finds that happy people get 65 percent fewer colds than unhappy people do. Therefore, the following equation could be considered: Genes + Environment = Health Status. The digestive system is web-like. While many people think of it as just something that digests food, there are many other, less obvious functions: “Most of the immune system lies in the digestive system; the enteric nervous system has more nerve endings than our spines and more neurotransmitters than our brains, and there is a direct gut-brain connection.”

Once the physical and any cognitive effects of Celiac Disease have been neutralized and the body is efficiently absorbing nutrients, one can begin rebuilding various lifestyle skills: communication, relationship building, managing finances, parenting techniques, as well as repairing and restoring marital intimacy. Such psychotherapeutic interventions would be most effective when guided in a support group by a trained counselor who also has sufficient understanding of Celiac Disease.

**Avoiding cross-contamination.** Of the many primary goals, one is preventing

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53 Ibid., 5.
54 Ibid., 6.
55 Ibid., 10.
a relapse of the symptoms. Assuming an individual is carefully investigating the ingredients upon their grocery purchases, the next major area of concern is accidental gluten consumption via cross-contamination. While cross-contamination can take place at restaurants, the primary locus of control is in the domestic kitchen. Methods can range from the simple strategy of mentally keeping track of what utensils and baking equipment are used with and without gluten, to as severe/extreme as having functionally two kitchens with separate pots, pans, utensils, measuring cups, etc. in designated locations strictly reserved for gluten/gluten-free meal preparations. The goal is to prevent any gluten from one utensil getting mixed in with a gluten-free meal. Knives, forks, toaster ovens, etc. all can collect little crumbs and food particles/residue which can cross-contaminate into a gluten-free dish. Therefore, focused attention from the entire household concerning meal preparation is necessary to consistently remain gluten-free.

Non-Celiac members of the household need basic education regarding the gluten-free diet in order to assist in the prevention of gluten cross-contamination. A common error people can make is “confusing gluten-free with wheat-free.” As discussed in detail previously, gluten is a protein found in more than just wheat. Upon ingredient label examination, one must be on the look-out for not only wheat, but also barley, rye, and malt. Due to the ease of contact between foods within a kitchen, each member of the household must be aware of any potential gluten distribution. It can be very easy to take a butter knife, use it on gluten bread, and place the knife back on the butter dish, or use the knife more than once on the stick of butter. Such an activity leaves behind little bread crumbs that can be unknowingly spread upon a slice of gluten-free bread and cause cross-contamination. In such a situation, having either two sticks of butter available or using the knife once and washing it after use would be necessary.

The Increase of Celiac Awareness in Media

Society and media have a symbiotic relationship: an event or pattern occurs within society, media learns about said pattern, and implements the information into various mediums. Once the events and patterns are displayed by the media, society in turns views the patterns as either normal or at least common-place. Due to this symbiotic relationship, one can look upon trends within media as a glimpse of what is rising within society. Such is the case regarding both Celiac Disease and the gluten-free diet.

On July 31, 2010, Chelsea Clinton—daughter of former President of the United States of America Bill Clinton—got married. At her wedding reception, Chelsea had a gluten-free wedding cake.58 Chelsea’s mother, former First Lady and current Secretary of State Hilary Clinton, had a gluten-free birthday cake in honor of her sixty-fifth birthday.59 These two high-profile events made the news all across the country, raising not only the awareness of gluten-free eating, but also the desirability of such a diet. After all, Hilary and Chelsea Clinton are considered trendy, and they hold a considerable amount of social influence. If they can eat gluten-free, maybe others can too.

Averaging over 18 million live viewers each week, NCIS: Naval Criminal Investigation Service is the most watched television prime-time scripted programming in America.60 On October 7, 2008, in an episode titled “Capitol Offense,”61 Abby Sciuto—


the forensic technician played by Pauley Perrette—is given a chocolate cupcake by Ziva—NCIS agent played by Cote de Pablo. Abby is thrilled, but Tony—Ziva’s partner played by Michael Weatherly—asks her if this was the week she was going gluten-free. This gluten-free reference is repeated later in the program as Abby discovers that her cupcake has been stolen and uses all of the available forensic science at her disposal to identify the thief. The culprit was McGee—co-agent with Ziva and Tony, played by Sean Murray—who pleads how he was helping Abby go gluten-free by eating her gluten-filled snack.

Celiac Disease was again referenced on a later episode of NCIS in season 6 titled Dead Reckoning. An accountant is in interrogation and is about to take his pills and says that the doctors said he might have Celiac Disease and would have to cut gluten out of his system. He does not say that he has the disease, but the doctors think he is Celiac and that he is eating too much gluten. This part of the interrogation discussion ends with his declaration that he did not even know he was eating gluten.62

In the spring of 2013, NBC’s sitcom 1600 Penn, titled “Marry Me, Baby,” contains gluten-based humor. In the episode, there is speculation on whether or not the President of the United States and his wife were legally married due to not being able to locate their marriage license. After severe social outcry of the moral and ethical issues of this marriage debacle, Winslow, the public relations officer played by Rene Auberjonois, suggests having a presidential wedding ceremony. Winslow also suggests having the most un-offensive meal possible take place at the reception to avoid any further social backlash. Within the menu, the officer suggests the wedding cake should be gluten-free. Skip, the president’s son played by Josh Gad, asks if there could be gluten on the side so

that people could dip.$^{63}$

Gluten-free eating and/or Celiac Disease is also mentioned in episodes of CW’s *Supernatural* and *Gilmore Girls*, Nickelodeon’s *Victorious* and *iCarly*, Disney Channel’s *The Suite Life on Deck* and *Wizards of Waverly Place*, and even in Cartoon Network’s *Celebrity Manhunt’s Total Drama Action Reunion Special*. Each of the shows are aimed at either young adults or teenagers, giving ample evidence of the rise of gluten-free vocabulary in American culture.

**Social Isolation of People with Celiac Disease**

As awareness of Celiac Disease and the gluten-free diet increases, hopefully the social isolation, skepticism, and rejection will decrease—like a teeter-totter: as one side goes up, the corresponding side goes down. Until that unknown time of a hopeful future arrives, there is repeated skepticism regarding the gluten-free diet as well as social isolation of the genetically susceptible and diagnosed individual. Contributors for the social isolation of those with Celiac Disease are found in the main-stream medical field, media, as well as various churches.

**Contributions toward Isolation of the Celiac Diagnosed**

Though various elements of the media have raised awareness of the gluten-free diet, the converse is also taking place. Situations have occurred where individuals with celiac disease are mocked, ridiculed—due to thinking the disease is a fake diagnosis, and even rejected socially.

In October of 2012, actress Jennifer Esposito was fired from CBS’ production of *Blue Bloods*. Jennifer Esposito had an illness brought on by years of undiagnosed Celiac Disease. While on the set, she collapsed due to malnutrition. Upon return from

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her brief medical leave, CBS fired her in claims that her behavior was a stunt to get a raise. The actress tweeted, “CBS didn't listen to my doc and I collapsed on set. Which everyone saw! After a week off my doc said I could return to work but CBS . . . implied that I was not truly ill and this was a scheme to get a raise . . . absolutely shameful behavior.” Jennifer Esposito later appeared on the Dr. Drew show, where she hoped to raise more awareness for Celiac Disease. Dr. Drew rejected her diagnosis and attacked her on air regarding her illness by interrupting her, getting firm with her, demanding her to tell him what exact tests she had because “he was a doctor and she could tell him.” In the interview, the actress tried to talk about how being on a gluten-free diet did not fix everything because the damage to her gut was so severe. Dr. Drew stopped her testimony and told her that is not something people can relate to; what people can relate to is someone being on top of the world and then losing it all. Dr. Drew continuously called her disease a condition, and ended the interview with the statement, “The lesson learned is that excessive working can take a toll and in your case, for whatever reason, made you fall down at work.” Dr. Drew never referenced Celiac Disease as a legitimate disease and viewed her disease as a mere condition. Jennifer Esposito left the interview feeling isolated and attacked. However, she did not get too discouraged. After the interview, Esposito began working on developing a gluten-free bakery and hopes to develop the first gluten-free cooking broadcast.

Isolation of people with Celiac Disease by the church. Sadly, many

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66 Ibid.
churches respond to people with Celiac Disease in a similar manner to Dr. Drew and CBS. In some cases, hostility and direct rejection occurs. Those who are unable to eat wheat, barley, and rye products are often neglected and left out of church potlucks, picnics, Vacation Bible School snacks, special dinners, and especially communion.

Bread and/or wafers used in communion services contain wheat flour, making communion a sacrament/ordinance where the Celiac-diagnosed and gluten-intolerant individuals are unable to participate. What is meant to be a unifying event for the body of Christ becomes a moment of potential rejection and isolation. Even in churches where one could bring their own bread to the service, assuming one knows in advance that communion is going to be observed, there is potential cross-contamination regarding the drink. Some churches have a single chalice for dipping, causing gluten-filled bread crumbs to float in the liquid. Some churches use wine, and many red wines have a gluten base. Communion is a troubling issue for many fraught with tradition and church rules that seemingly cannot be broken.67

Various views can be taken in regard to Celiac Disease and the sacrament of communion. For churches who believe in transubstantiation, where the literal bread and literal wine become supernaturally converted by the Holy Spirit into the literal body and blood of Jesus Christ,68 no substitution to the bread/host can be offered. In some hyper-Calvinist views, those who cannot eat of the bread/drink proper are providentially hindered from partaking in communion.69 Meanwhile, other churches are more


69 Similar views are found in churches regarding baptism: a woman who was in a car accident and wore a medical halo—a metal ring screwed into her skull to keep her neck straight—wanted to be baptized, but the church called her “providentially hindered from baptism” because she could not get her head wet, and therefore could not be fully immersed. These views and congregational struggles are common among churches in West Michigan, where Anchor Baptist Church resides.
influenced by Huldrych Zwingli rather than Thomas Aquinas or Martin Luther concerning communion. Based on Kornelius Hoen, Zwingli argued the phrase “this is my body” (Matt 26:26) is about the bread signifying the body of Jesus. With symbolism being the main focus, some churches have no problem with the mode of communion being individually adjusted: like a member of the congregation bringing their own bread, or the church providing two trays, one tray offering regular bread and the other containing gluten-free bread.

In the situation where a particular member of the congregation were to bring their own bread and partake of the communion solo, communion still becomes an isolating event rather than a time of unity and connectedness. This member of the congregation is forced to bring their own bread rather than having it offered to them, which also begins to mess with the symbolism intended, and begins to travel down the dark path of communion being just another event Christians do rather than an ordinance with deep value and meaning. Some churches in the Grand Rapids, Michigan, area even go so far as to tell those with Celiac Disease to leave the sanctuary and partake communion either in the gym or foyer. In these instances, there is an intentional break in community on a physical level as well as social. Not only are they not taking communion with the body of Christ, they are not able to be in the same room with the body of Christ.

One of the best ways to handle communion conflicts is to sit down with the priest or minister and “decide what to do together.” Perhaps the minister would accept a trial-and-error approach. In such a method, one would provide the church with gluten-free bread for communion. Meanwhile, an announcement could be made either before the service, before the taking of communion, and/or a note or sign could be placed in the


church bulletin and/or website. Once a gluten-free option is available and advertised, the church will discover how many in their congregation are on the diet; it is possible the numbers may be more than expected. Anchor Baptist Church of Grand Rapids, Michigan, only uses gluten-free bread for communion. The logic goes as follows: since gluten-free bread is able to be eaten by anyone, and gluten bread is not, they decided to offer only gluten-free bread for the entire congregation. There is neither the chance for cross-contamination nor the chance for a member of the congregation to take the wrong piece from the wrong tray by accident. There is also the maximization of unity due to the entire congregation taking the same communion together.

During the process of talking with the minister, priest, and other individuals concerning the gluten-free diet, intentionally clear and concise communication habits are necessary. It is important not to make the gluten-free diet a burden upon anyone else, and to allow any discussion with others regarding Celiac Disease to be a positive versus a negative experience. Considering the communion service, one should avoid tones of accusation and also avoid guilt-inducing vocabulary. When a sincere desire for communion participation is expressed, and no blame is placed either upon a church or minister, there is a decrease in the likelihood of resistance as the parishioner and leader share a common goal. Because of genetics, no one is at fault regarding being either gluten-intolerant or having Celiac Disease; and there is one incontrovertible reality: the problem belongs with the gluten-intolerant and Celiac diagnosed, and “he or she will need to handle it the way his or her nature dictates.”

Conclusion

A thorough understanding of Celiac Disease including the physical, 

72 Ibid., 279. Jax Lowell offers several examples from a variety of church denominations cooperating and developing creative solutions in regard to managing the gluten-free diet and communion services.

73 Ibid., 313.
psychological, and social impacts the disease has upon individuals has been established. Based on the understanding of the research regarding diagnosing and treating Celiac Disease, and the social implications the disease has upon the community and the church, the foundation is set to develop a gluten-free ministry for the purpose of engaging the Celiac community with the Gospel.

The evidence is clear how Celiac Disease can be devastating to a person’s social, psychological, physical, and spiritual well-being, resulting in discipleship hindrance. Assessing and administering dietary-based treatment for Celiac Disease is necessary in order to effectively engage the Celiac community with the gospel. With this understanding of Celiac Disease, knowledge of the effects gluten has upon the Celiac-diagnosed and gluten-intolerant individual, and increased competency regarding available treatments, one is able to applicably assess how the intervention of the local church can change the lives of those in the Celiac community for the kingdom of Christ. It would be a great testimony if the body of Christ were to step up and lead the way toward the restoration and redemption of those with Celiac Disease.
CHAPTER 4
DEVELOPING A CELIAC MINISTRY

The first chapter evaluated the population of the Celiac community, the role Celiac Disease was playing in the life of Anchor Baptist Church, and looked at the unique opportunity of Anchor intentionally reaching out and impacting the Celiac community.

The second chapter explored the biblical call of ministry as well as the entirety of ministry itself. In so doing, awareness was given to the need for churches to reinvent and reassess the theology of food, why God made the world one which eats, how sin perverted and corrupted eating, and how churches of today are to be glimpses of redemption concerning both food and the eating process. If ministry is to be all it is called to be, it will involve the gospel, which also includes food/eating. The third chapter examined Celiac Disease on a biological/genetic and social level, diagnostics options, and treatment methods ranging from cross-contamination education to dietary adjustments. Clearly the foundation has been laid to develop a ministry to properly and effectively engage the Celiac community with the gospel.

Celiac Ministry Preparation

If Anchor was going to truly engage the Celiac community with the gospel, then the Celiac ministry must not be the traditional inviting of people to a program or class for which one signs up, gets a T-shirt, attends, sing some songs, and completes their assignments. Instead, the Celiac ministry was to be one where people were “invited into a relationship of mutual love, transparency, and accountability . . . [one where] the
relational dynamics are primary.”¹ Although there is still a place in community for individual counseling, groups let practitioners work with more clients and groups possess unique learning advantages.² Because groups (1) are more efficient, (2) offer more resources and viewpoints, create experiences of commonality—where one discovers they are not the only ones with certain thoughts, feelings, and struggles, (3) can provide a sense of belonging, (4) a chance to discover and practice new behaviors in a safe environment, (5) provide the opportunity for feedback, (6) provide vicarious learning through the opportunity to hear the concerns of others similar to their own, and (7) can provide positive pressure to maintain and uphold commitments.³ The format for the Celiac ministry of Anchor Baptist Church was designed to be a blend of education and support groups, taking place over six weeks rather than a one day workshop or sermon series.

Though the ministry contained curriculum for the groups to follow, the relationships formed allowed the people in the ministry to be more than a crowd of individuals gathered together for the obtaining and collection of knowledge. Instead, the crowd became a group, a group designed to (1) be universal—showing how each of the members are in the same boat, (2) instill hope—if one member can change, there is hope for the others, (3) where information is imparted to teach alternative methods to solve current problems, 4) contain altruism—where each member can both help others and receive help from others, 5) imitate behaviors—where one can see and learn how others handle their problems both ineffectively and effectively, (6) facilitate interpersonal

¹Greg Ogden, *Transforming Discipleship* (Downers Grove, IL: InterVarsity, 2003), 124.


learning so the members can learn how others see them, how to listen, and how to relate to other people, (7) allow catharsis—where each member is both accepted and free to appropriately express their feelings, and (8) reinforce existential factors—where members discover and embrace how they are responsible for their own life despite its circumstances.²

In order for a Celiac ministry to become a group versus a crowd and to be a ministry that engages people with the gospel and fulfill the Great Commission (Matt 28:18-20) where disciples make disciples, the structure of the ministry was to be about both ministering to people with Celiac Disease as well as equipping leaders to work the ministry as they in turn trained other leaders to continue the ministry. Though personalities do play a role in who becomes a leader and who does not, generally leaders are not born, they are trained.⁵ Therefore, members of the group have the potential to later become servants and even leaders within the Celiac ministry of Anchor Baptist Church in Grand Rapids, Michigan. In order to achieve such a goal, the structure of the Celiac ministry was intentionally focused upon recruiting attendees and leaders, equipping both parties, maintaining both sets of individuals to prevent people from falling away, and multiplying—where members and leaders recruit other members and leaders; disciples making disciples.

The Celiac ministry of Anchor was titled Bread 4 Life Ministry, and had the mission of restoring lives and restoring homes based on the power and grace of Jesus Christ. Being told to go on a gluten-free diet can leave one feeling helpless, broken, and alone. Bread 4 Life Ministry was a gluten-free ministry of hope and restoration: (1) restoring health through a gluten-free diet, (2) restoring homes struggling with conflicting

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diets, (3) restoring families; and, above all, (4) restoring their relationship with God through Jesus Christ. Using Scripture, various principles were implemented to help rebuild the relationships of the members with both God and their families. Bread 4 Life also examined various gluten-free diet options, recipes, and ingredients to help rebuild not only the health of one with either a Celiac diagnosis or gluten intolerance, but also to help restore their social freedoms regarding cooking, eating out, and other various social interactions.

In order to intentionally create a ministry with the potential of both follow-through as well as containing evaluative means to determine effectiveness, the ministry was structured with four sections/categories: recruiting, equipping, maintaining, and multiplying.

**Recruiting**

Being a multimedia church, it was fitting to have a multimedia approach towards recruitment. Bread 4 life has the ability to take advantage of massive multimedia exposure. In 2007, Anchor held their first gluten-free food fair. The event was expected to attract a couple hundred people, but over 500 attended. Since 2007, the church has put on the annual gluten-free food fair. In 2011, 2012, and in 2013, many radio stations, television stations, and newspapers interviewed church leaders, did stories about the food fair, all of which escalated awareness. Such exposure allowed for easier recruiting for both servants and attendees, especially with today’s younger generation. In 2013, 2,000 people attended the fair. Today’s new, younger generation—those born after 1990—can be described as impatient multi-taskers.  

on their own time schedule; impactful over the short-term versus the long-term. The Christians in this new generation have a desire to serve, but they want to serve in something that is both influential, and bigger than they are. With the food fair receiving such grand exposure, there is little effort in communicating and proving how the gluten-free ministry is bigger than any one person. Once the local NBC station interviewed the food fair team, it was clear this ministry was even bigger than what the congregation could have ever predicted.

Though awareness of the food fair is high, Anchor still had to work hard at creating exposure for their new gluten-free ministry, Bread 4 Life. Fortunately, by simply placing a table at the 2013 food fair dedicated to the details of the ministry created quick temporary exposure. However, the church could not rely on just the one time, six-hour event to launch a ministry into effectiveness. Having formed a core ministry leadership team of three individuals and the pastor, together they worked on additional exposure options/techniques. First, they made videos, which were uploaded onto both YouTube and the church’s website. The video was also able to be played on a portable DVD system at each succeeding food fair as well as at other various events where appropriate, including, before Anchor’s morning worship services via their video projection system, at the Baptist State Convention of Michigan’s annual meeting, at the local associational meetings, at already existing Celiac support groups, and shortened versions sent to other churches to play before their morning worship services.

Flyers were also posted at various local health food stores indicating when and where people could sign-up for Celiac work groups. A Facebook group page was assembled to allow for continued awareness, volunteer and training

7Ibid., 17-24.

8The average weekly attendance for morning worship at Anchor Baptist Church from June of 2012 through January of 2013 was 65. Assuming 100 percent of the body volunteering, 65 is a very insignificant amount of people to minister to nearly 2,000 people attending a single event.
information/schedules, as well as keeping communication open and up to date. A website dedicated to the Bread 4 Life ministry was constructed, which was directly attached to the church website. After the website was completed, business cards were printed containing the ministry logo, website, and contact information for both the ministry and the church itself. The business card allowed for more personal recruitment options and awareness, as the cards were distributed one-on-one.

Even with all the technology, multimedia flare, and digital video techniques, Anchor intentionally utilized the one-on-one/person-to-person recruitment system. This personal approach was instrumental for recruiting prime candidates for leadership within the ministry. Before the leadership team for Bread 4 Life was assembled, some individuals were taken out to a lunch/dinner and were directly approached with the option of serving on the leadership team. Conversations included statements like, “I’ve noticed you are really skilled at . . . and I’d like for you to serve by doing . . .” One of the members of the meal had served on several mission trips around the world. Due to employment changes, they were no longer able to travel as before, and were looking for a localized mission-based ministry. A theological metaphor was presented to show the evangelical potential of simply talking about gluten-free issues: as gluten destroys the body of those with the disease, so sin destroys one’s life and soul; as one makes changes in their diet to help the body become more healthy, so people must repent and turn to Jesus; as gluten-free becomes a lifestyle change, so is accepting Jesus as Savior; as one changes their eating habits to become more healthy, so do the changes in one’s lifestyle make their relationship with Jesus more healthy. This type of analogy allowed this individual to see how easy it was to teach the gospel using a diet-based metaphor, and that the Bread 4 Life ministry was not just about diets, recipes, and ingredients, it was about restoration, redemption, and reconciliation through Jesus.
After spending the meal together and allowing time for prayerful reflection, they accepted. Additional potential leaders were approached and recruited in a similar fashion.

**Equipping**

Though the gluten-free diet has gotten more popular over the past few years, even in mainstream media, very little is published regarding Celiac Disease or the development and training for a gluten-free ministry within churches. In order for Anchor Baptist Church to set up a gluten-free ministry, they had to start almost from scratch. Development was based upon preexisting ministry training materials, but Anchor created their own curriculum due to the unique specificity of the ministry.

First, volunteers recruited for leadership, training, and other teaching/leading positions were trained in doing the Great Commission: going into the world and making disciples in the name of the Father, Son, and Holy Spirit, commanding them to observe all that Jesus had commanded (Matt 28:18-20). Though “professionals such as counselors, psychologists, social workers, psychiatrists, ministers, managers, and teachers all use groups to enhance their work with people,” leading groups is something any lay leader in the church can effectively facilitate.

Two books served as the core curriculum regarding the group facilitating training of the leaders and teachers for the Great Commission work of the Bread 4 Life Ministry. The first book was *The Doctrine of the Laity*, written by Findley Edge. Edge, former professor of religious education at the Southern Baptist Theological Seminary, sees volunteerism as a dying element within the local church. The heart of the issue, for Edge, is the belief that too many have accepted the gift of salvation without making a

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9The issue of gluten-free in media was discussed in chap. 3.


commitment to be involved. People want to go to heaven, but they do not want to work
out their salvation by making their salvation visible as an outward expression of an
inward truth. If people were more devoted, then the church would have more workers.
Edge gets to this point by thoroughly understanding what salvation means, how one is
saved, and the essential role of belief as devotion to Christ rather than an agreement with
a set of doctrinal statements. After all, demons also believe correct doctrinal statements
and they shudder (Jas 2:19).

The second book implemented in the training of leaders for the Bread 4 Life
Ministry was *The Trellis and the Vine*. The heart of this book is about making training
more about lifestyle rather than mere education. “We are always an example to those
whom we are teaching and training,” Marshall writes. “[This is why ministry training]
looks a lot like parenthood . . . training is parenting.” This book not only helps an
individual in their growth and maturity in Christ, but also prepares them for training—
and parenting—others in their own growth and maturing journey in Christ. Between
these two books, volunteers in leadership roles had a well-rounded basic training for
Christian leadership, not only in their education, but also in regard to their developing
color and walk with Christ; they were not only knowledgeable leaders, they were
Godly leaders.

Second on the equipping agenda was the need for training regarding basic
education concerning Celiac Disease and gluten-intolerance issues: understanding what
gluten and gluten-free is, what Celiac Disease is, what—if any—differences exist
between having Celiac Disease and being gluten intolerant, how cross-contamination

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12 Ibid., 28-34.

13 Colin Marshall and Tony Payne, *The Trellis and the Vine* (Kingsford,
Australia: Matthias Media, 2009).

14 Ibid., 74-75.
works/take place, how one can identify gluten in the ingredients list upon grocery items, how one discerns placing orders at restaurants, etc. Fortunately, the website for Anchor Baptist Church has a plethora of links available for basic research, learning, and understanding. The links include the Welcome to the National Institutes of Health Celiac Disease Awareness Campaign, the National Foundation for Celiac Awareness, and many others. These sites offer a lot of information regarding the genetics behind the disease, diagnosis procedures, symptoms, dietary benefits, and a list of ingredients and cross-contamination issues with which ministry leaders need to become familiar. For ease of teaching and training leaders, this information was developed into an educative resource packet/kit along with a full copy of chapter 3.

Since the Gluten-Free Food Fair is the biggest and most public event, training regarding how to handle the fair was the third element. Though the food fair is a very large event which attracts around 2,000 people in a single morning/afternoon, its purpose is predominately pre-evangelistic. The food fair is meant to make the public aware of the gluten-free ministry at Anchor Baptist Church. People become aware not only of foods, restaurants, and public resources available, attendees also become aware of Anchor as a church, the support groups the church has for those who are gluten-free, and how the church has completely gluten-free Vacation Bible School, Communion services, and Sunday morning snacks. It is the goal of the ministry itself—especially the support groups—to do the evangelism and making disciples, not the food fair. Therefore, when volunteers were trained, though they all were trained on evangelism as “all must be prepared in and out of season to make a defense for hope that dwells within them” (2 Tim


4:2), they were mostly equipped on how to handle the fair as an event. Such equipping includes—but was not limited to—crowd control, parking management, controlling breaks for the workers/volunteers, break room location and sanitation, product necessities, where first aid is available, vendor arrangement, how to work at the church table, and how to smile and treat people with dignity even though one is absolutely exhausted at the end of the day.

The fourth, and most complicated area of training, dealt with work/support groups and engaging of the Celiac community with the gospel within the work groups. The adult work groups were structured around a nine-week schedule. Individuals were able to sign up for this temporary, closed group. Having a nine-week structure allowed a clean entrance and exit for the attendees, and prepared those attending for potential recruitment for leading additional work groups in the future. Attendance was limited to 15 for each group. In the future, should more than 15 desire to attend, an additional group would simultaneously form, assuming proper leadership was available. Should leadership be limited, the additional attendees would be able to attend the next group which would form at the completion of the current group.

The individual sessions were approximately one and a half hours in length, and consisted of the following structure: the first 10 minutes were social time, followed by a 10 minute period of gathering people together, opening prayer, and basic introductions facilitated by the group leader. The next 20 to 30 minutes were dedicated to covering the biblical discipleship topic for the day, followed by discussion. After discussions were completed, the scheduled sharing of recipes, ingredients, various cooking techniques, and restaurant awareness was taught. Each group meeting concluded with an ending prayer and additional social time.

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18A closed group is a group closed to people starting after the first session has begun. Those who desire to attend after the group has begun must sign up for the next available session/group.
With regard to the agenda for biblical discipleship, each of the nine weeks covered a different topic. Each week had a biblical counseling foundation, various theological principles for intense life application, and covered introductory elements/issues regarding eating, cooking, and living on a gluten-free diet. Since future leaders of the ministry would likely be lay leaders, and were neither a licensed counselor nor an ordained ministry professional, each successive work group had future group facilitator trainees receiving on-the-job training.

Week 1 was a presentation of the biblical worldview: creation, fall, redemption, and consummation/glorification.\(^{19}\) During this opening session, the gospel was clearly presented as all are created, all are fallen because of sin, and all need redemption through Jesus only, and those in Christ will one day spend redemptive eternity upon the new earth.\(^{20}\) An open invitation to accept Jesus as Savior was offered at the end of the gospel presentation. Because of living in a sin-twisted world, it was explained how human bodies have imperfections, disabilities, and diseases; with one such disease many deal with being Celiac Disease.

Once an understanding of the fall was developed, attention shifted toward mirror neurons in the brain. These neurons mimic what they experience, allowing one to learn based upon hearing, reading, and observing.\(^{21}\) Due to these mirror neurons repeating the past, a negative behavior can be learned and repeated over the course of a lifetime, and will remain prevalent unless an alternate behavior can be learned.

Week 1 concluded with a brief overview of Celiac Disease, the genetic nature

\(^{19}\)Michael Wittmer, *Heaven is a Place on Earth* (Grand Rapids: Zondervan, 2004), 196.

\(^{20}\)Gen 1-3, John 3, 1 Pet 2:9, Gal 6:10, Col 3:23-24, and 1 John 4:11 are some of the passages covered during the first session.

of the disease, and the difference between Celiac Disease and gluten intolerance.\textsuperscript{22}

Amongst the discussion, symptoms were also included to allow members to understand what may and may not be aided by the gluten-free diet.

The content of week 2 was based on biblical principles for communication. Attendees learned how to talk to others, particularly those who are not gluten-free, and how to talk with people, especially family members and friends, who may be resistant toward gluten-free diets. Due to many behavioral and mental issues being connected to Celiac Disease as discussed in chapter 3, married couples often have to rebuild communication habits and methods after starting a gluten-free diet. Based upon Matthew 12:34, and Ephesians 4:29 and 5:4, the group learned about six points of healthy and Godly communication: (1) communication in the home must be a standard activity, (2) speech must be sanctified, (3) it must serve the other person, (4) it is to be suitable, (5) one is to be quick to listen and slow to speak, and (6) one must also own and be sentient of their non-verbal communication. Afterwards, discussion shifted to understanding the size of the Celiac community, allowing the members to know they are not alone, and some time was devoted to describing the available diagnostic options as well as the validity of each process.

Conflict resolution was the primary topic for week 3. The group learned the difference between conflict as a result of sin and conflict as a result of individual preferences. Based primarily upon Philippians 2, James 4, and Matthew 7, members discussed basic and helpful guidelines for conflict resolution, how to truly confess, avoid the ‘who started it’ approach, and how to implement the P.A.U.S.E. approach for conflict of preferences: pray with each other, affirm the relationship, understand the interests of each party involved, search for creative solutions with each other, and evaluate the results to assess mutual satisfaction. For example, if a married couple desired to go out to eat

\textsuperscript{22}The information was based on the detailed research found chap. 3.
together, but he wanted to have pizza and she wanted to have Chinese, conflict could ensue. If the two could not find a manner of agreement upon their dining preference, they could employ the P.A.U.S.E. principle.²³ First they would pray together. Afterwards, they would affirm their relationship by stating how the aim is not what is being eaten, but it is with whom they are eating that is important. Discussion would then commence regarding each other’s interests; perhaps he had Chinese for lunch at work and did not want such a meal again. In their search for creative solutions, they may decide to get Chinese to go, get pizza to go, and eat together in a park as a picnic. Upon completion of the meal, they could then evaluate how the meal went, and the level of their enjoyment of the time spent together. This discussion would include what went well and what could have been improved for future endeavors.

Once the topic of conflict was completed, attention shifted towards the issue of cross contamination: what causes it, what can one do to prevent it, etc. Special attention was given concerning small details which could often go unnoticed: cross contamination from simply using toasters for both gluten and gluten-free bread, using scratched Teflon pots and pans as gluten can hide within the scratches, etc.

Eating gluten-free is significantly more expensive than ‘regular’ eating. Most restaurants raise their prices for ordering off of their gluten-free menus, and a single half-loaf of bread costs anywhere from $4.50 to $7.00 each. For those with severe forms of Celiac Disease, their skin cannot touch gluten, and therefore they need to purchase special soap, laundry detergent, shampoos, etc. With costs escalated way above and beyond normal product costs, week 4 was dedicated to discussing biblical principles regarding finances, budgeting, and applying those principles with direct examples in the

gluten-free diet. Basic principles were derived from the book of Proverbs,\textsuperscript{24} as well as using a financial planning chart for basic budget management.\textsuperscript{25} For future work groups, if either time allows or if additional material happens to be desired, various materials available through daveramsey.com may be accessed as well as additional biblical principles from Ecclesiastes.\textsuperscript{26}

In addition to biblical financial principles, practical application principles were discussed and assessed by the group regarding everyday shopping. Such guidelines included learning to be a planner—developing menus for two weeks and discerning where to buy which foods at which markets to catch the best sales and prices, and taking the best advantage of the freezer—investing in quart and gallon zip-lock bags allows one to freeze sauces, leftovers, prebaked meal items, and extra food purchased in bulk while on sale.\textsuperscript{27} These methods were extra important since the average American Family of Four wastes 25 percent of their food in the course of a year.\textsuperscript{28}

After the discussion on finances, week 4 concluded with exploring and understanding the ingredients found on shopping labels, recognizing gluten on labels, and learning how to discern either the presence of or the lack of gluten while cooking. A gluten and gluten-free mix of various canned goods and boxed dinners were pre-purchased and brought in for group members to practice identifying both gluten ingredients and gluten-free items. Understanding the implications of the phrases “processed in a facility which also manufactures wheat” and “made on equipment which

\begin{itemize}
  \item \textsuperscript{24}Prov 10:2; 11:1; 13:11; 14:23; 16:8, 16; 20:23; 28:8; and 29:19 and 27.
  \item \textsuperscript{26}Including, but not limited to, chaps. 3 and 9.
  \item \textsuperscript{27}Jennifer Fugo, \textit{The Savvy Gluten-Free Shopper} (Philadelphia: Ignite, 2014), 12-25.
  \item \textsuperscript{28}Ibid., ix.
\end{itemize}
also manufactures wheat” were also addressed.

Weeks 5 and 6 consisted of a two-week discussion on parenting. As previously mentioned and explored in chapter 3, homes with Celiac Disease and/or gluten-intolerance seem to have a higher rate of children with ADD (Attention Deficit Disorder), ADHD (Attention Deficit Hyperactive Disorder), various forms of Autism, especially Asperger’s Syndrome, and a variety of other disorders. These problems tend to influence self-control, self-motivation, and social appropriateness, as well as a plethora of discipline complications. Many children who have Celiac Disease require a structured, emotionally consistent, and stable environment. Parents need to learn patience, self-discipline, creative techniques for handling these higher maintenance children, as well as knowing how to teach them the ways of Christ, fixing the Word of God upon their hearts and minds (Deut 11:18). Biblical parenting principles were derived from various chapters in Genesis, Galatians, Philippians, 1 and 2 Timothy, as well as a quick glance at a few passages in Proverbs with the collection of “my son” poems. As the need arises in future work groups, some attention will be assigned for dealing with single-parent homes. Should a member not be a parent at all, the principles learned in weeks 5 and 6 could be used toward the individual assisting other people with parenting struggles, whether family or friends. Since the biblical principles were also about maturing one’s character, relevant application vestiges.

Beyond parenting issues, the groups also discussed how to locate, discern, and order gluten-free at restaurants—including restaurants without a dedicated gluten-free menu. How to manage various social situations was also amongst the discussions during weeks 5 and 6 regarding birthday parties, school dinners, work picnics, dinner invites, and the like. The goal was to help the members not make eating gluten-free an inconvenience for other people and to keep Celiac Disease the problem of the diagnosed

not the problem of everyone else. The more inconvenient the issue, the less cooperation, appreciation, and buy-in one will get from the non-diagnosed.

Week 7 was dedicated to learning how to keep Jesus in the center of one’s life amid a diverse domestic setting. Though some people in the household may be Christian, there is a possibility for all of them not to be Christ followers. These theologically social skills can apply into one’s dietary life as the possibility also exists for the whole household not to share in the gluten-free diet—which also adds additional tensions and complications. How does one stay true in their walk with Christ when others in the household do not share that passion? How does one handle, in a Jesus-honoring manner, domestically diverse dietary dedications? Biblical explorations revealed some helpful principles regarding navigating through these messes of life.30

Centrality of Jesus in life was followed by basic lessons on cooking. Such instructions were identifying and proper execution of usage concerning mixes, brands, and cooking instructions. For example, some gluten-free noodles create a yellow film upon boiling, requiring a thorough rinse before mixing into a sauce; gluten-free noodles take longer to boil, and if they are boiled too long they fall apart and become more mush than noodle; different brands of noodles are to be treated with different methods, and learning the different method will assist in cooking the desired meal with the highest possible satisfaction, quality, and enjoyment.

Weeks 8 and 9 were the concluding sessions. These last two weeks were spent covering time management, how to say “no” to avoid over-committing oneself, basic time stewardship, as well as briefly recapping the material covered in weeks 1 through 7. Ephesians 5:18-6:18, Acts 6, and Galatians 6:2-10 were the focal passages for grasping methods on how to be proper disciples of time management/stewardship. Particular attention was given to the lie that a good person does not say no to another person in

30Phil 4:2-9, Acts 10, and Gal 2-5 are some examples pregnant with potential for pondering.
need. This lie is based on a misunderstanding of Galatians 6:2 where Paul exhorts for people to bear the burdens of others. Though the Greek word used is from \( \beta\alpha\rho\omicron\varsigma \), meaning “an experience of something that is particularly oppressive,”\(^{31}\) the context is concerned with temptation. In other words, Christians are to help each other to avoid becoming apostate. Irony is present given how Paul, just a few verses later, states how “each person is to carry their own load” (Gal 6:5 HCSB) meaning each person is responsible for their own actions.

Time was also dedicated to developing a life map concerning the time commitments of each member of the group.\(^{32}\) Each item of commitment was then labeled on a scale of 1 to 4, from absolutely non-negotiable to clearly optional. Afterwards, a number of hours were assigned to each item. If the sum of hours was greater than the 672 divinely allotted hours in a given month, commitments were to be removed starting with items labeled as 4.

During the final session, time was spent evaluating the group sessions: were the sessions helpful? Were some discussions more insightful than others? What was missing that would possibly be helpful for future groups? Can Bread 4 Life Ministry send a follow-up survey several months later to assess helpfulness over a longer time period? The final question will be open-ended asking for any comments one would like to make regarding the Bread 4 Life Ministry, the support/work groups, and the leaders. Hopefully, these questions will allow for adequate reflection on the effectiveness of the ministry in the lives of those who participate as the ministry continues.

In regard to the gluten-free lifestyle, some time was allowed for more advanced cooking instructions, knowing which foods were naturally gluten-free; and how to

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maintain, organize, and arrange a gluten-free kitchen, especially in a mixed dietary environment.

Maintaining

Once volunteers/group facilitators/trainees were recruited, what could be done to help them stay encouraged, refreshed, and willing to continue providing their services without burning out? What could be done to maintain the influence and effectiveness of both the Christian and gluten-free lifestyle for those who attended the work groups? It is one thing to recruit workers and attendees and equip them with the skills to live a more productive, healthy, and God-honoring life. It is another thing to intentionally assist in the maintaining of those skills, preventing relapse and burnout, and to spur one another toward good works (Heb 10:24).

Burnout prevention is vital for volunteer administration. Good workers can become over worked and stressed out, resulting in lower job performance as well as diminished morale. To help prevent burnout, volunteers were asked to attend a “Burnout Prevention” seminar. During the seminar, volunteers were asked, what does success look like in the designated area of work/service? What results are desired? For example, if someone is a Sunday school teacher, what would success look like? Would success mean the members of the class are growing stronger in Christ? Would success mean the people in the class were personally taking God’s truth home for daily living, not just life on Sundays? If someone were a janitor, would success—a job well done—look like a clean and spotless place for people to enjoy or getting the area to the point where people no longer notice the problems? Volunteers wrote their answers out honestly, and were instructed to avoid vague words like “to be a good employee/worker.” After answering the question, the definition of burnout was given: “A state of fatigue or frustration resulting from devotion to a way of life or a relationship that has failed to produce the
expected reward.” Burnout comes when one becomes frustrated from not achieving their previously answered definition of success. If one can adjust their definition of success/a job well done, one could potentially cutoff burnout from the source. This does not mean one must lower their standards, but it does allow for one to reflect upon the calling of God for service, honoring God, and serving Christ as a primary definition of success. Performance failure then becomes a motivator for improvement rather than resulting in depression and exhaustion.

For better clarification, the example was given of a pastor who took on leading a church. The pastor could view success as (1) the church growing in size, (2) the church growing in its fire for Jesus, (3) the people growing spiritually from the teaching, and (4) people growing in their relationships with each other. What happens when none of these things take place? The church does not grow, the people’s passion for honoring God remains the same, spiritual growth remains the same, and people still back-bite, are dishonoring, and prideful? At first, the pastor may tell himself that in time things will change; it takes time for a bad situation to become good. However, how long will this thinking last? How long will the pastor have to wait? 2 months? 1 year? Eventually, the pastor may get to the point where he realizes the turn-around will not happen, and the church appears to be a hopeless cause. It is usually at this point that a lot of pastors leave their church and go to a different church; one that will be more responsive or have a better chance for success. The pastor may ask himself, why are these people not responding in a Godly manner, what am I doing wrong, what are they doing wrong, and what can I do to fix the problem? When all this fails, the pastor feels like quitting. It is an endless job, why bother? Frustration builds so high that he becomes physically and spiritually ill. Quitting seems like the only rational thing to do. Using principles derived

from Matthew 6 and Exodus 18, a better definition of success and a more proper focus can be achieved to help prevent burnout. Such definitions were written out by each individual to allow for a more personally owned and applied definition.

Public recognition is a great way to maintain volunteers, and to keep motivation high. People love to be praised and such recognition helps people sense the sacrifice they are providing is worth it. For each major event, those involved were publically recognized. The more passionate, excited, and enthusiastic the leaders were, the more excitement came from the volunteers. As volunteers completed their training, a certificate of completion with the volunteer’s name on it was given publically on Sunday during the pre-sermon announcements.

“The person most responsible for a ministry should actually do that ministry. Leaders . . . must give away ministry power in appropriate ways, at the right time.”34 If volunteers are going to feel adequate, significant, and be involved in something greater than themselves, and if they are going to adopt the vision of the ministry as their own, and sacrifice themselves to help the ministry flourish, then they must be allowed—and given the freedom and authority—to do the job.

Videos were made and uploaded to the church website, YouTube, Facebook, and Google+, as well as shown in the morning worship service. The videos allowed for additional impact and exposure outside of the church circles. As friends saw a video and shared it on their Facebook sites, other friends saw it and shared it as well, allowing exposure and impact to increase exponentially. Such exposure increased the perception of the size of the ministry, which in turned helped maintain workers as they knew they were part of something that was not only bigger than themselves, but they were also servants/soldiers for the kingdom of God impacting people with the gospel.

Maintaining the members of the work groups was the next challenge. To help

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the individuals of the work groups function outside of the group format, a Facebook group page was made specifically tailored to them. The page was private, where only members of the group had access to the posts made by group members. This Facebook page allowed members to share discoveries, struggles, success, and questions or concerns. The group facilitator also had access to the page to be available for further insight as well as to make sure conversations and posts were appropriate, constructive, and productive.

**Multiplying**

As people saw videos expressing the level of excitement and the effectiveness of the ministry, people began to reciprocate with the desire to also be involved with the ministry. As people continue developing the desire to be involved, there will be a continual intake of volunteers. The videos also created awareness for those who were either recently diagnosed and/or are struggling with the gluten-free lifestyle. The videos clearly and directly pointed people to the ministry website allowing for further information to be shared.

Each volunteer in the ministry was required to have a protégé with them; someone whom they are mentoring to take over as leader/facilitator. This required each volunteer to also be involved in the recruitment process to find their eventual replacement. When the person being mentored is ready to take over, the original volunteer will go to a different/new group as the new volunteer takes over and both will then get a new protégé to train. Some volunteers can come from those who complete the support group series as long as certain requirements are met: (1) they must become a member of Anchor Baptist Church, (2) show spiritual maturity and reliability, (3) undergo training for leadership, and (4) co-lead under the mentorship of an already trained leader for a nine-week session before leading a support group with a trainee. After positive evaluations post-support group, they will have a volunteer of their own to train.
Each volunteer will need to undergo additional training every year to make sure they understand the importance of learning, growing, and to assist in keeping the process fresh in the minds of the volunteers.

Lastly, the volunteer training is about making serving, evangelizing, and ministry itself a lifestyle, not just an event. Serving is an outcome of the discipleship that one goes through in the training process. Therefore, when someone is recruited, they are not recruited to serve in an event or program, but they are recruited in dedicating their lives to following Jesus and serving His kingdom with their lives. The ministry work becomes an expression of that commitment rather than a vehicle for commitment. Volunteering for ministry at Anchor Baptist Church is not about performing a task, it is about living the gospel as an agent of redemptive healing.

**Testing Methods**

In order to assess the effectiveness of the new Celiac ministry, a survey was given at the beginning of week 1. The same survey was given again at the conclusion of the week 9 work group meeting (see appendix 2). To ensure motivation to persevere through the nine weeks and to honestly and transparently fill out the surveys, all names of members who completed the work groups were placed into a drawing for a free Kindle Fire which also had several books of gluten-free recipes already purchased and downloaded.installed. Survey assessment and interpretation is given in chapter 5.
CHAPTER 5
RESULTS AND CONCLUSION

Having completed the workshop/support groups, attention now shifts toward evaluating the results: did the project fulfill the intended purpose and were the goals met? Strengths of the project are assessed in this chapter along with weaknesses, as well as an interpretation of the statistical data to determine if any changes were a result of the project itself versus mere chance. Possible changes are examined which could either have been made or perhaps should be made for future groups/research to not only increase effectiveness but also attempt to compensate for the weaknesses of the project. Finally, I give some reflections upon what was learned both theologically and personally from the development and implementation of the project.

**Evaluation of the Project’s Purpose**

The purpose of this project was to engage the celiac community with the gospel through diet education, biblical counseling, and discipleship practices. During the course of the project, the gospel was clearly presented, biblical counseling methods were implemented including Bible-centered communication habits, conflict resolution, parenting techniques, and time management. Discipleship practices were also implemented as well as practiced/performed by members of the group throughout the duration of the project. Diet education was also presented each week the group met with topics ranging from cooking methods, gluten identification within ingredient labels, maintaining the diet while both in a mixed-diet home and going out to either parties, events, and/or restaurants where cross contamination is a large concern. Therefore, all of the purposes of the project were met and executed appropriately.
Evaluation of the Project’s Goals

The first goal of the project was to engage the celiac community by offering celiac workshops/support groups designed to teach the gospel and its implications regarding the gluten-free lifestyle. The second goal of the project was to assist Anchor Baptist Church with incorporating the use of internet technology as a resource for continued ministry to the celiac community. Thirdly, Anchor was to conduct annual gluten-free food fairs to raise awareness of the ministry, and to focus the fair more toward the gospel than previous years.

Evaluation of the Effectiveness of the Workshops/Support Groups

Initially, 16 people signed up to participate with the workshop/support groups. After the signup was completed, 8 people dropped completely from the project prior to the first workshop, and 2 additional people communicated their unavailability to attend the first week due to a sudden change in their work schedule. After the first meeting had been completed, 1 additional person neither showed up nor communicated any desire to either continue in future weeks or to withdraw. During the second meeting, the 2 who missed the first workshop communicated an additional work schedule change conflicting with the meeting, resulting in their absence once again; however, they did state they did not want to withdraw from the project and were planning on attending the third workshop. The member who signed up but neither showed up nor communicated with a reason for their absence was once again absent and silent. During the third workshop, the two members who missed the first two groups yet again had a work conflict, and at that point decided to withdraw from the project; though they did communicate a desire to participate in any future groups that may form. The absent and silent member was viewed as having dropped by default. After the third session had been completed, 11 people had officially dropped from the project, leaving 5 members who persevered through the end.

Concerning the 5 remaining members of the project, 1 was neither diagnosed
with celiac disease nor was on a gluten-free diet, but knew many who were and wanted to be educated; 1 member was undiagnosed but had been on the gluten-free diet for about a year; 2 members were diagnosed with celiac disease, had been on the gluten-free diet for over 3 years, and were members of currently existing adult celiac support group; and 1 member was diagnosed with celiac disease over 13 years ago, had been on the gluten-free diet for over 13 years, and was a leader of a currently existing adult celiac support group. As can be observed, the group—though small—was very diverse in diagnosis, experience, and education/familiarity with both the gluten-free diet and gluten-free lifestyle. All 5 members stated they had accepted Jesus as their personal savior, all 5 members were currently members of a church, and 4 of the 5 participants were actively involved in their church regarding involvement outside of weekly Sunday morning worship services. All 5 members were female, married, between the ages of 35 and 65, and 4 of the 5 participants had children.

Each participant was given a survey prior to the first meeting, and took the same survey after the final meeting. Each question on the survey had 5 to 6 possible answers, and were quantitatively rated on a single point scale for each possible answer. For example, question 10 stated, “I am confident in my budgeting methods for gluten-free living.” If a respondent replied “strongly disagree,” it was rated as 1 point; conversely, if they replied “strongly agree,” the answer was assigned 6 points. The post-survey contained the same 18 questions with the identical point scale applied. The post-survey also contained 2 additional, open-ended, qualitative questions allowing members to communicate in essay form what issues covered in the project were helpful, what topics were unhelpful, and what topics—if any—were missing that could/should be added in future groups.

A t-test was performed using the data from both surveys to assess if there was
significant reported improvement in the lives of the participants. The null hypothesis used stated change, if any, was a result of chance and likely not the result of the study/project. Due to having 5 tested participants, the critical value of T with a margin of error of .05 was 2.015. The pre-test obtained a total of 398 points, while the post-test resulted in an increased total of 455. The obtained value of T from the T-Test came to 1.418. Since 1.418 does not exceed 2.015, meaning the obtained value is less than the critical value, there is no statistically increased difference; though there was a numerical difference. According to the quantitative data, the null hypothesis failed to be rejected. In other words, there was no statistical reason to indicate the workshops/support groups played an influential role regarding the increase in test results; any numeric increase was likely a result of chance, not the result of the project.

Upon examination of the qualitative data obtained from the open-ended questions on the post-survey, a different picture began to form. One member stated the relationship with her husband had never been better, and she attributed the massive improvement to the workshops. Three members stated the workshops were invaluable, and every newly diagnosed person should attend this new celiac ministry of Anchor Baptist Church. Three members shared how the topics of parenting and conflict resolution forever changed their family dynamics for the better, and 1 participant vocally confessed with tears in her eyes that she was able to talk with her husband for the first time in over 5 years without it ending in a fight containing unresolved conflict because of what was taught in this study/project. One member even reported viewing the Bible as more relevant to everyday life than previously thought.

Quantitatively, the statistics show the workshops were not effective;

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qualitatively, the data shows the opposite. Why the extreme difference in results? If the project was so valuable and influential in increasing the quality of life of everyone involved, why did the numeric data obtain a different conclusion? Which result carries the heavier weight and importance, and which result should be accepted at the expense of the other: quantitative or qualitative? Is there a way to allow one to be primarily accepted yet also informed by the other?

The most likely explanation for the discrepancies in the data falls on the effectiveness and accuracy of the surveys. Upon the initial answering of the questions, participants were asked to reflect upon and assess their current confidence and knowledge. If one were to either over exaggerate, or not fully grasp the epistemic limitations they possess, one would be apt to respond with high confidence and knowledge by answering “strongly agree.” However, once the workshops were completed, the same questions were asked not allowing for any signs of improvement beyond “strongly agree.” Thus, one who answered “strongly agree” initially would do so again even though their understanding and competence significantly increased. If true, this would result in a post-score being similar to—if not exactly equal to—the pre-score, possibly providing an inaccurate and premature T value.

When the data and conclusions—along with initial interpretation—was presented to the leadership team of Anchor Baptist Church, they unanimously accepted the qualitative results over the quantitative. Given the qualitative data, the leadership team decided it appeared many over-estimated their confidence and knowledge during the pre-test, allowing for growth to occur without statistically exceeding the critical value beyond a standard deviation. To use words closer to what they expressed, due to the written reports/essays at the end of the project, the workshop/support group ministry was considered effective, highly valuable, and worth both investing in and pursuing further.

**Evaluation of the Online Goals**

Members of the support group formed their own online group allowing the
continuation of encouragement, support, and growth after the initial support groups were completed. In addition, the website of Anchor Baptist Church was further developed to consist of helpful links, video-podcasts, and other online resources for continued discipleship, diet management, guidance, and support. Assessment of this secondary goal was both the completion of setting up and activating social network group accounts through Facebook, as well as having a functioning webpage for the celiac ministry.

**Evaluation of the Annual Food Fair**

The eighth annual gluten-free food fair was held in 2014, and Anchor Baptist Church rented out the Delta Plex Arena for the third straight year. In the first two years at the Delta Plex, Anchor rented out a single hall on the main floor and a large conference room on the second level. In 2014, two halls on the main floor were rented out. For the first time, an author was flown in from Pennsylvania to speak twice about budgeting and shopping methods and to give a cooking demonstration at a portable/mobile kitchen, which was also rented. The pastor of Anchor Baptist Church also gave a conference about the relevance of the Bible in the gluten-free lifestyle, how discipleship was gravely missing from most celiac treatment programs, and how Anchor is trying to fill that void. Over 1,500 people attended the fair, which was an astounding turnout considering, as a church, Anchor consists of only 50 people, meaning the church reached over 30 times their size. Hundreds of people heard the gospel presented and the fair itself began with prayer and praise to the Triune God of the Bible. Every effort was made to keep God at the center of the event, and to express loving God and loving people through the event.

Many people reacted with anger about the presence of a church at Anchor’s first food fair and they wanted nothing to do with talking to anyone from the church. In 2014, eight years later, the attendance of the event doubled, and people reported not only accepting that a church was doing the event, but even thanked the church for being compassionate enough to organize the event in the first place. It has taken eight years, but the community is beginning to warm up to a church ministering in the name of Jesus,
and it appears hearts are possibly beginning to soften. Great anticipation surrounds the food fair of 2015.

**Strengths of the Project**

After observing several celiac support groups and reading dozens of books regarding the gluten-free diet and lifestyle, there was a severe lack of attention given toward discipleship, behavior modification, and cognitive ownership/responsibility and renewing. Authors Anne Lee and Jennifer Fugo, in a personal interview done by the writer, stated their elevated concern in the lack of the engaging of the whole person within celiac treatment process. They also were excited to see the emphasis of this project being geared toward both changing behavior as well as engaging the spiritual lives of those with celiac disease. Therefore, the primary strength of this project was the intentional implementation of biblical counseling and discipleship methods within the support group dynamic and structure.

Paul writes in 2 Timothy 3:16-17, “All Scripture is inspired by God and is profitable for teaching, for rebuking, for correcting, for training in righteousness, so that the man of God may be complete, equipped for every good work.” It is a safe conclusion this verse rings with as much truth for those with celiac disease as it does for those without. The reality of 2 Timothy 3:16-17 being very important for both those with celiac disease and those with gluten intolerance was realized in chapter 2 of this project with the discussion on the theology of food. God made a world in which eating existed prior to the entrance of sin/death; and eating was viewed a primary source of communion, community, and unity for people with each other and their Creator. Since people are sinfully broken in a variety of ways both spiritually and physically, directly and intentionally engaging the celiac community with the Gospel is necessary and vital.

A second strength of this project was the diversity of the participant sample. The members of the group came from a diverse background ranging from having lived on the gluten-free diet for over 13 years to having been gluten-free for under 2 years, all the
way to having neither been diagnosed nor being on a gluten-free diet. This allowed for assessments and analysis to be done on different levels, and formed a direction for how to proceed more effectively in the future—which is discussed in the “What Could/Should Be Done Differently” section later in this chapter.

Since the congregation of Anchor Baptist consisted of approximately 50 people, holding an event that reached over 30 times their size was a feat that attracted a lot of attention. Media companies, as well as participants from many walks of faith, began asking questions concerning how a small group could hold and effectively execute such a large-scale event. These recurring questions allowed for the people of Anchor Baptist Church to boldly witness that God loves to take something small and do something big and amazing. Just as Jesus took five loaves of bread and a couple of fish to feed thousands of people (Matt 14:13-21), so God has taken this small five-loaves-and-two-fish-type of church to reach and feed over 1,500 people. Such a testimony of the greatness of God and a small church performing a New Testament level impact in the modern era is yet another major strength of this project.

**Weaknesses of the Project**

The first major weakness of the project had to do with workshop/support group attendance. The original structure called for meeting once a week for 9 weeks, and sessions lasting approximately an hour and half. Two members attended every session held and 3 did not; 1 member missed session 2, 1 member missed sessions 2 and 4, and the third member missed the final group meeting. People who did not attend every session had the possibility of tainting the post-survey results, as they both did not receive all of the material presented and were unable to take advantage of interacting with other members during discussions.

In a related, although different manner, the number of project dropouts was the second major weakness of the project. Over the course of the recruitment process as well as the start of the project, people withdrew/dropped out. Multiple people stated various
reasons to discontinue their participation, including changes in their work schedule conflicts to an unfortunate decrease in health. A few people thought the purpose of the project was to interview participants to gain their knowledge only, and when they discovered they were to participate in and practice new material, they were no longer interested. Another person started a new college class with a schedule conflict, and multiple people lived approximately 10 miles from the meeting location and chose to drop out due to travel distance/inconvenience. Sadly, 1 person never showed up and never replied to the emails inquiring his or her absence and desire to continue to participate. Since all 11 dropouts never attended a single course, it appeared safe to assume their discontinuing of participation was neither a result of nor the fault of the project itself. Nevertheless, having a group start with 16 participants and end with 5 had a negative impact on both the results of the project and the external validity of the project. While everyone in the group professed high praise of the material and saw the ministry as invaluable, due to the small sample size, statistical evidence of such value became not only limited, but difficult to assess. Even if there was a statistical deviation in favor of the project, analysis of 5 people is not an appropriate sample size to apply to a larger population outside of the group itself, thus decreasing—and potentially eliminating—any statistical external validity.

A third weakness of this study existed concerning 4 out of the 5 members who were actively involved in a previously existing celiac support group, 3 out of the 4 parents in the group also had their kids actively involved in a previously existing celiac kids support group, and all 5 members were Christians with 4 out of 5 being actively involved in their church beyond Sunday morning services. Participants who have been attending a support group for over 2 years entered into this study with a high level of knowledge, understanding, and grasp on the gluten-free lifestyle. Those with children attending support groups also have a support network in place regarding parenting ideas and social/emotional assistance/support. Since all members answered “agree” to question
6 of the survey which stated, “I am personally committed to Jesus Christ as my Savior,” no one accepted Jesus as their personal savior as a result of the project/ministry. While the lack of salvation acceptance does not indicate no one will accept Jesus in the future, it cannot be determined if this project will be effective in leading someone towards accepting Jesus Christ. Therefore, the sample itself becomes a weakness of the project.

The fourth and final weakness centered upon the survey itself. The pre-survey did not account for any over-estimation of the confidence and knowledge of the test takers. For example, the first question asked if the test taker felt overall confident regarding their gluten-free diet. In response to the question, 4 out of 5 stated a high level of confidence. However, after the completion of the project, people felt even more confident, yet the increase could not be shown quantitatively. Since there were only 6 options on the survey, and nothing higher than 6 points was available, 4 out of 5 started with 6 points, learned a lot, and ended with 6 points, indicating numerically there was no growth even though there was indeed significant growth.

In the qualitative section of the post-survey, one participant admitted surprise at the amount of information presented which they did not know, especially concerning the topics of cooking and financial budgeting. In other words, they had no idea how much they did not know, even though their test reported a very high level of confidence regarding cooking, shopping, and budgeting. Again, these questions were numerically equal between the pre and post-surveys, numerically indicating zero growth.

Numerically, there was a regular increase in biblical understanding, as well as an increase in viewing the Bible as more relevant in everyday modern living. However, on a simply statistical level, this increase was not enough to move the results beyond the standard deviation, resulting in a failure to reject the null hypothesis. When someone changed their response from “agree” to “strongly agree,” numerically the increase was 1 point. Yet, a 1 point increase did not adequately reflect the size and implications of the perspective shift which took place. In other words, the categories of “agree” and
“strongly agree” did not appropriately allow for adequate determination of growth, even though growth did indeed occur.

**What Could/Should Be Done Differently**

In order to address the first labeled weakness of the project concerning attendance of committed members, perhaps future programs could be shortened from 9 to either 6 or even 4 group meetings. In order to adequately present all relevant and pertinent information—as well as effectively engage those involved—the length of each meeting should be lengthened from 1.5 hours to either 2 or 2.5 hours. Meetings were originally scheduled to meet from 6:30pm to 8pm, which could easily be adjusted to run from 6:30pm to either 8:30pm or they could run from 6:00pm to 8:30pm. If a four-week format were to be implemented/attempted, perhaps doing a single Saturday workshop once a month for 4 months, running around 4 hours each could be effective. This being said, one could conceivably create a two-day weekend conference that meets for 2 hours Friday night and then 6 to 7 hours throughout Saturday morning and early afternoon—especially if the conference could also include breakout sessions, time for community worship, and even a chance for people to participate in gluten-free communion. The problem with abbreviated models would be the battle between intensity versus consistency. When running for 6 or 9 weeks, one develops patterns consistently over time, hopefully forming or becoming habitual. When learning consists of sessions spanning over 4 or less days, it becomes more about data sharing with a high level of intensity with low amounts of time for consistency/habits to develop. Yet, attendance could drastically increase regarding an intense abbreviated model versus a longer-term model of habit-forming discipleship. Yet, even Jesus spent several years training the disciples over a period of time, so one must be cautious upon choosing a fast/speedy model based upon convenience and public desire/opinion.

The second identified weakness dealt with the level of dropouts prior to the workshops/support groups starting. While dropouts are expected with any activity and
ministry, some dropouts could possibly be prevented with proper planning. Since some of the dropouts dealt with location and required travel, perhaps Anchor could prearrange a travel scholarship for gas/mileage reimbursement for some of the participants, especially those with limited income/financial means. Another option could involve a member of the church with a 7 to 9 passenger van who could arrange transportation for those with travel difficulties. A third option to intentionally engage the issue of travel could be to develop groups in multiple locations, for example a library or a different church facility of like faith, rather than occurring solely at the building Anchor rents for worship. Location availability and accessibility can greatly assist in ministry outreach. It is also possible to organize social media sites to allow groups to meet entirely online through Google Plus, Facebook, or other related sites and forums.

The third area of weakness involved 4 out of 5 members having been actively involved in a previously existing support group. In order to obtain a better sample size, consisting of those who are newly diagnosed, perhaps the church could begin working over the period of a year or two with hospitals, doctors, and gastro-intestinal clinics in order to build the type of rapport necessary to gain the confidence/trust of medical professionals. In so doing, the doctors and dieticians, when referring newly diagnosed patients to support groups, could also include the groups run by Anchor Baptist Church. Such cooperative participation from the medical community would allow for better effectiveness and assessment of the impact of the project/ministry.

The ministry could also be separated into multiple levels: level 1 would be a course for beginners/newly diagnosed, level 2 could be designed for those who have been living gluten-free for 1 year or more, and level 3 could be for families and friends of those with celiac disease but are not themselves on a gluten-free diet. This would allow people to join whatever group best fits their current situation/intent. By including the theology of food topic from chapter 2 in each of the 3 levels, the gospel would be presented clearly in all courses/levels.
The fourth area of weakness had to do with the surveys. Perhaps developing a better blend of qualitative and quantitative questions would allow for a more thorough and accurate analysis. An example could be to have a 1 to 10 scaled rating of confidence for the quantitative analysis. When using such a scale, “1” could mean one feels very ignorant concerning the issue, while a “10” could indicate one has complete/total understanding with little if anything left to learn. Each question could also be combined with a “why do you feel this way” type of follow-up section asking the test taker to defend their response. In the post-survey, one could also have a chance to recant their previous response by stating they thought their level was a 9, but after their involvement in the ministry, have since realized they were really at a 6. Recanting and re-responding would allow the test administrator to run two sets of statistics: one comparing the pre and post-surveys, and another set analyzing an adjusted pre-survey based on the recanted responses compared to the post-survey. Such a method could account for an over-exaggeration or too elevated self-estimation as well as any preexisting overconfidence. Measure the frequency and intensity of recanting could also indicate more than mere growth, but also indicate an increase in humility and development of a teachable spirit.

**Theological Reflections**

From the very start of the project, exploring what the Bible says regarding the issue of celiac disease was a long, difficult, and challenging road. Yet, the path taken was also rewarding beyond even the grandest of expectations. Beyond the growth as a minister and understanding of ministry itself from both this project and the seminars related to the project development—a topic covered in detail in the personal reflections section of this chapter—this project reshaped and filled in a lot of what it means to live in this world made by God, and what it means to purposefully exist, worship, and serve in His created world.
Why did God create a world in which every living creature must eat? God is all-powerful, all-knowing, and yet chose intentionally to make a world in which eating is a necessity. Eating is not a product of the fall and is not a result of the corruption of sin upon creation, which means God has a purpose for eating; a purpose which, along with working, is distorted and corrupted from sin and in need of redemption. Why was the first act of rebellion recorded in Scripture one involving eating? Why did God include meals in the Passover? When Jesus instituted the new covenant, why was it reflected with a communion meal? Why did Jesus call Himself “the bread of life” (John 6:35)? The Bible even ends with the marriage supper of the lamb (Rev 19:6-9). Why does food and eating pervade throughout Scripture, including the gospel itself? This quest was profoundly eye-opening, and forever changed the perception and purpose of eating. Food was discovered to be a holy and humbling mystery. Every time a creature eats it participates in God’s life-giving yet costly ways, ways that “simultaneously affirm creation as a delectable gift, and as a divinely ordered membership of interdependent need and suffering and help.” Eating proves humans are not self-sustaining, fully independent gods; humans are dependent.

It was discovered that food and eating were about the relationships that join people to the earth, fellow creatures, loved ones, guests, and ultimately the Triune God. One of the major methods of promoting unity within the church body, for example, is with the observance of Communion (1 Cor 11:18-21). If a church member is allergic to gluten, and the communion bread contains gluten, then said church member is unable to participate in the communion service, thus breaking unity and fellowship within the body. Food was discovered to be an agent that not only points to Jesus as the ultimate food and sustainer, but was also central in the bonding of people with each other—evidenced by

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4Ibid., 2.
the friendship and hospitality extended by inviting someone over for dinner.

Thinking theologically about food is not spiritualizing food. Instead, this type of thinking enables one to perceive food within a context that stretches through the many ecological and social relationships of this world all the way to the divine Creator and Sustainer. As Christians begin to think theologically about food, it will not take long for one to see eating no longer as a mundane activity, but as a spiritual discipline—one of the concrete steps where one might “redeem the time relentlessly flowing past and how by strenuous engagement one might be redeemed from fire by fire . . . the disciplines promise to give lives a form that would serve as a receptacle for the substance of the Christ-life in God’s present Kingdom”\(^5\) —and therefore an action which plays an influential role in one’s spiritual development.

One day, when Jesus returns and gives His Bride their resurrected bodies, they will be able to enjoy the wheat, barley, and rye God Himself created. Until then, many must alter their diets, avoid those gluten grains, and long for the day of total redemption.

**Personal Reflections**

What does it take to develop a ministry to intentionally engage the community? How can one develop such a ministry to be concerned about the gluten-free diet yet also engage people with the gospel? Many ministers have the opportunity to jump into ministry and work within pre-designed and pre-packaged ministries. As a result, they can serve for decades without ever fully developing a complete ministry from the bottom up. Paying attention to every detail in the recruiting process, equipping leaders and would-be disciples, maintaining them to persevere in the ministry through good and difficult times, and assisting in the groups multiplying as people mature into disciples making disciples thus fulfilling the Great Commission (Matt 28:16-20), is a

daunting task; a task few are adequately prepared for.

Due to the obvious fact small churches are limited in their personnel, “evangelistic programs are often neglected.”\(^6\) It is easy for ministers to get so busy with administrative activities they end up becoming more about paper, programs, and process rather than people. To organize an event, to assemble a ministry, then stop and ask how to engage people with the gospel can be very convicting. How easy it is to justify laziness by placing an evangelistic sermon in the middle of an event and declare oneself successful in sharing the gospel. Truly evangelism should be kept with the focus on social interaction rather than just evangelistic preaching.\(^7\) Such an approach meant presenting the gospel in the context of building relationships, not just lecturing with a sermon. This was a very convicting realization, filled with contrition, followed by the intense desire to change. A leader must not be content with relying upon just the pulpit for evangelism. The leadership of Anchor Baptist Church must no longer settle for the ways things have always been. It was time for ministry at Anchor to not just be about education; it was time for academia to combine with action. Ministry was no longer just to be informed by the gospel, it was to be the very active expression of it. Each and every member of the congregation can share the gospel, serve with the heart of the gospel, and be active citizens of the kingdom of God with full allegiance. If such a focal shift was going to happen at Anchor, the shift had to first start with and be exemplified by the leadership.

**Conclusion**

Much attention has been given to understanding Anchor Baptist Church and their community, followed by a thorough exploration of scriptural applications and

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\(^6\) Glenn Daman, *Shepherding the Small Church: A Leadership Guide for the Majority of Today’s Churches* (Grand Rapids: Kregel, 2002), 156.

\(^7\) Ibid., 159.
theological constructs to guide the people of Anchor toward better development of a ministry to engage the celiac community with the gospel. After a comprehensive analysis of celiac disease, including symptoms, diagnostic methods, and treatment options, a detailed outline was developed for forming workshops/support groups. The results were analyzed showing value in the ministry itself even though statistically there was no quantitative reason/evidence to reject the null hypothesis. On a qualitative level, people were indeed impacted with the gospel, and the overall quality of both their Christian lives and relationships did improve. The foundation is laid, and the barebones of the structure has been formed/assembled for a ministry pregnant with potential. Now for the church to continue on where this project has left off. It would be a great testimony if Anchor Baptist Church, as one part of the body of Christ, were to step up and lead the way toward the restoration and redemption of those with celiac disease for the glory of the kingdom of Jesus Christ.
APPENDIX 1
FINANCIAL PLANNING CHARTS

The 10-70-20 plan for budgeting divides each dollar into five parts.¹ Ten percent of one’s total income goes to God in tithe, a second portion goes to the government, then the remaining portion is working income that is divided three ways. Ten percent of this is saved, 70 percent is for living expenses, and 20 percent goes to pay past debts. When the debts are gone, the 20 percent can be used for making purchases on a cash basis, or toward a retirement fund. If one is able, they could lower living expenses to 60 percent, and put 10 percent toward retirement as well.

Figure A1. Financial planning chart

<table>
<thead>
<tr>
<th>ITEM</th>
<th>MONTHLY TOTAL</th>
<th>PAYOFF TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Giving/Tithe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Savings Account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Mortgage/Rent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second Mortgage (if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repairs/Maintenance Fee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electricity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cable/Internet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td></td>
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</tr>
<tr>
<td>Car #1 Payment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Car #2 Payment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>License &amp; License Plates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Gas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Oil, Repairs, &amp; Tires</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Car Insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Clothing</td>
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</tr>
<tr>
<td>Personal</td>
<td></td>
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</tr>
<tr>
<td>Medical</td>
<td></td>
<td></td>
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<tr>
<td>Prescriptions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability/Health Insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retirement (IRA, ROTH IRA, 401k, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hygiene Products (Soaps, toilet paper, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Entertainment (DVDs, music, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Misc.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### MONTHLY INCOME

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Job #1</td>
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<tr>
<td>Job #2</td>
<td></td>
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<tr>
<td>Job #3</td>
<td></td>
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<tr>
<td>Job #4</td>
<td></td>
</tr>
</tbody>
</table>

### Irregular Income

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<table>
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<tbody>
<tr>
<td>Income #1</td>
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<tr>
<td>Income #2</td>
<td></td>
</tr>
<tr>
<td>Income #3</td>
<td></td>
</tr>
<tr>
<td>Income #4</td>
<td></td>
</tr>
</tbody>
</table>

| TOTAL MONTHLY EXPENSES | 0           |
| TOTAL MONTHLY INCOME   | 0           |
| Excess/Debt per month  | 0           |

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Figure A2. Workable income budget
APPENDIX 2
PRE- AND POST-PROJECT SURVEY

PRINT NAME ____________________________________________

E-Mail Address

________________________________________________________________

Agreement to Participate

The research in which you are about to participate is designed to assist Anchor Baptist Church with developing a ministry to holistically engage the celiac community through diet education, Biblical counseling, and relationship-building practices. This research is being conducted by John Coin for purposes of doctoral research. In this research, you will attend each week of the work groups, participate in discussions, as well as honestly fill out surveys both before and after the research period. Any information you provide will be held strictly confidential, and at no time will your name be reported, or your name identified with your responses. Participation in this study is totally voluntary and you are free to withdraw from the study at any time.1

By your completion of this initial pre-workshop survey, and checking the appropriate box below, you are giving informed consent for the use of your responses in this research.

[ ] I agree to participate

[ ] I do not agree to participate

1Questions 3, 4, 9, 11, 12, and 15 of this survey are adapted from Brad J. Waggoner, The Shape of Faith to Come (Nashville: B & H, 2008).
Basic Information

Age ________   Male _____ Female ______

Marital Status: Single / Married / Divorced / Separated

Are you diagnosed with Celiac Disease? YES / NO

If you circled “YES,” how long ago? __________

How long have you been eating gluten-free? _____________________

Have you ever participated with a gluten-free/Celiac related support group? YES / NO

1. I feel overall confidence regarding my gluten-free diet.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

2. The idea of eating gluten-free is a stressor in my home.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

3. How often do you personally read the Bible (not including worship services/Bible studies)?
   O Everyday
   O A few times a week
   O Once a week
   O Few times a month
   O Once a month
   O Never

4. I believe God has a purpose for my life, and uses both good and bad events to mature me.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree
5. My life is rarely filled with anxiety and worry.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

6. I am personally committed to Jesus Christ as my Savior.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

7. Going out to eat is NOT an area of anxiety for me concerning my diet.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

8. How often do you set aside time for prayer?
   O Everyday
   O A few times a week
   O Once a week
   O Few times a month
   O Once a month
   O Never

9. When I become aware that I have wronged someone, I confess my wrong doing and attempt to correct the wrong.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

10. I am confident in my budgeting methods for gluten-free living.
    O Strongly Agree
    O Agree
    O Somewhat Agree
    O Somewhat Disagree
    O Disagree
    O Strongly Disagree
11. The Bible is the Word of God and is relevant to everyday modern living.
   O Strongly Agree
   O Somewhat Agree
   O Neither Agree nor Disagree
   O Somewhat Disagree
   O Strongly Disagree

12. When I am wronged by others, I DO NOT hold a grudge, and can easily forgive others.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

13. In my social network (family, friends, etc.), my gluten-free diet is
   O Shared
   O Supported
   O Tolerated
   O Allowed with resentment/resistance
   O Rejected
   O I am isolated and unable to mention “gluten/Celiac.”

14. I have a solid understanding of gluten-free shopping.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

15. The Bible is the source of truth and wisdom for my life.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree

16. The idea of living gluten-free is a source of anxiety for me.
   O Strongly Agree
   O Agree
   O Somewhat Agree
   O Somewhat Disagree
   O Disagree
   O Strongly Disagree
17. I have a comfortable level of understanding regarding cooking gluten-free.
   - O Strongly Agree
   - O Agree
   - O Somewhat Agree
   - O Somewhat Disagree
   - O Disagree
   - O Strongly Disagree

18. I am comfortable talking with my family about my struggles and concerns.
   - O Strongly Agree
   - O Agree
   - O Somewhat Agree
   - O Somewhat Disagree
   - O Disagree
   - O Strongly Disagree

A. What topic(s) did you find most beneficial/helpful? 

B. What topic(s) were either unhelpful or were missing and could be added for future groups?

2Questions A and B were added to the concluding survey given in the concluding session in week 9.
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TIME, May 23, 2011, 64.


ABSTRACT

ASSISTING ANCHOR BAPTIST CHURCH OF GRAND RAPIDS, MICHIGAN, WITH ENGAGING THE CELIAC COMMUNITY WITH THE GOSPEL

John Ross Coin, D.Ed.Min.
The Southern Baptist Theological Seminary, 2014
Faculty Supervisor: Dr. Troy W. Temple

This dissertation explores the need of ministry techniques tailored specifically to reach individuals with Celiac disease or gluten intolerance. Chapter 1 explores the demographic makeup of Anchor Baptist Church as a body, the nature of Celiac Disease and gluten intolerance, as well as identifying and understanding the unique dietary and social issues that may serve as barriers to properly engaging the Celiac community with the gospel.

Chapter 2 explores the biblical basis for ministry in general. Afterwards, a theological construct is made to better understand the role of food and eating within the gospel, and how to integrate dietary disease interventions with ministry.

Chapter 3 analyzes Celiac Disease itself: identifying what it is, what causes it, what the symptoms are, how the symptoms impact individuals psychologically, socially, and spiritually. Isolation and rejection of the Celiac diagnosed individual are also examined.

Chapter 4 sets up the structure of a Celiac Disease/gluten intolerance ministry. Attention is given to developing a support group, how to provide interventions into people’s lives both physically/dietary as well as spiritually. The aim is to allow the gospel to impact the entire life of those involved.

Chapter 5 examines the result of the test support group, determining if the designed interventions were indeed helpful.
VITA

John Ross Coin

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Diploma, Zeeland Public High School, Zeeland, Michigan, 1994
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