

Cabinet Address – 2007 Annual Conference

In 2004 the United Methodist General Conference directed the General Board of Pension and Health Benefits to study how to best provide a health insurance plan for our denomination. The Board recently published its report. It states, “In order for the Church to strengthen its ministry, health is an issue we must address now because it will impact us all.”

Some times, I personally don’t feel very healthy. I’m tired, stressed, and spiritually depleted. It’s those times when I feel like a leader on the Titanic—all I’m doing is rearranging the deck chairs on a ship that is going down. I’m not sure anything I do is making a difference to encourage new faith development or to make a difference in the world or to stop our membership loss

There are other times, though, when I have given priority to prayer and devotion, to exercise and self-care, I feel more hopeful. Keeping with the boat image, I feel as though I’m on the Mayflower. Credit for that image goes to Diane Butler Bass who has done research on vital congregations. While we know the people on the Mayflower and their descendents failed to understand and respect those already living in this country, I still find it a useful image. This boat is headed for a new place, sailing in waters unfamiliar to us, with the promise and hope of new life and renewal ahead. Our ship is intact. Our leaders keep calm, spend time in prayer, and provide focus, vision, and direction while navigating the choppy, deep sea.

Yes, health is important—even our institutional health—because it affects our resolve and ability to **live, give, and love . . . beyond all**

expectation. This annual cabinet address is our opportunity to share with you the health of our Conference from our perspective.

When we look at the uncharted waters of our circuit ministry plan, we see many signs of good health. We see signs of increasing support and accountability among clergy in the circuits. Clergy care for each other, help each other, and share with one another. Many circuits are finding a focus. For instance, some have begun new faith efforts, including one that is exploring the possibility of starting a new faith community in the location of a congregation that voted to close. One is developing a circuit-wide internet web page. Some are providing lay speakers and supervision to small churches that are without a pastor. In many circuits lay people give leadership to and participation in the ministry of the circuit. Although Extension Ministry clergy were not originally expected to participate in their circuit, some have requested that they be included. As a result, they are now invited to participate in circuit gatherings and explore how, together, they can compliment each other in ministry. All of this is to help circuits **live, give, and love . . . beyond all expectation.**

A second sign of institutional health is our financial giving. Given our conference budget challenges of this year, how can the cabinet say that? Well, for the 18th straight year, we have paid 100% of our General Church apportionments! We continue to be the only Annual Conference that pays 1/12 of our apportionments each month. 2006 marked the highest amount we have ever paid toward Special Sunday Offerings. 75% of our congregations paid 100% of their apportionments in full and 3%, that is, 13 churches, paid

more than 100%. We are **living, giving, and loving. . . beyond all expectation.**

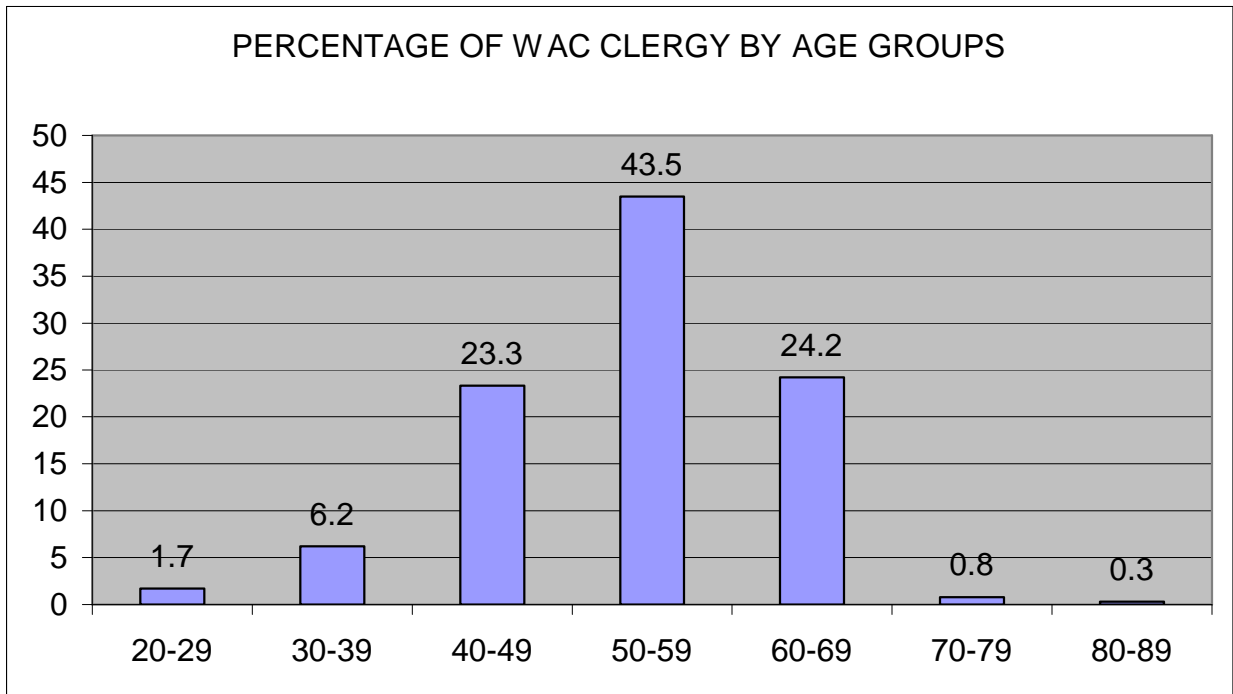
A third sign of institutional health is our efforts to continually improve our work as a conference. One very significant example of that is our relationship with our Wisconsin health and welfare ministries. Over the years, these have been strained or broken or become almost non-existent. This year Bishop Lee and other Conference leaders had a meeting with administrators of several of our Health and Welfare ministries. As a result, we will be exploring ways to renew our historic United Methodist roots with those ministries and to work with them to enhance our congregational ministries so that, together, we can **live, give, and love. . . beyond all expectation.**

A second example of our improved work is our new Conference Response Team. Lay and clergy have been trained to respond to and walk with a congregation that has experienced clergy misconduct. Studies have shown that significant and very long lasting affects—even years—occur in congregations after clergy misconduct. Our experience affirms that finding and the reality that congregations need help in recovering from the impact of the broken trust of the pastor so that they can find the healing God intends and God's calling for them to **live, give, and love. . . beyond all expectation.**

Another example of our efforts to improve our work as a conference involves our cross cultural/cross racial appointments. We recognize that although we have made many such appointments for years, we had not

provided help to the congregation or pastor for building a solid relationship. This year, we contracted with a counseling center in Milwaukee and together developed a program we are calling *Starting Strong, Staying Strong*. Clergy and their families, Staff-Parish Relations Committees, and Congregations meet for training and discussion about the unique challenges of these appointments so that together we can **live, give, and love. . . beyond all expectation.**

We are sailing in unfamiliar waters that are bringing us significant challenges as a Conference. One of those is the age of our clergy. As part of our preparation for the appointment season, in January we looked at the current age profile of our clergy. Are you ready for this?



Each bar represents a decade of clergy ages. Starting from the left, we see that of our total 356 active local church pastors, 1.7% are in their 20's;

6.2% are in their 30's; 23.3% in their 40's; 43.5% in their 50's, in part due to many second career pastors who entered ministry in their 50's; 24.2% in their 60's, .8% in their 70's and .3% over 80.

In the past, most clergy started as young seminary grads and served for many years. If that were still true, we'd expect the bars on our left to be the tallest and gradually get shorter with each decade. By 1985 a national study of our UM pastors already showed that only 15% of Elders were under 35 years of age. 20 years later, in 2005, that dropped to only 5%. Today in Wisconsin, that percentage is 4.7%. So when a Staff-Parish committee asked the DS for a young, married pastor with 2.2 children, this year, we had to tell many of them that all 17 pastors under age 35 had already been appointed!

Currently, 8 of our Elders serving congregations are already retired and could choose to stop serving at the end of any appointment year. At the end of this month, 18 of our present local church clergy will retire. Among our continuing clergy, 55, that is, 15%, will be at or above retirement age and could retire next June. Pray with us that not all 55 will retire next year!!!

We thank God for clergy from other conferences, and other denominations, who want to serve in Wisconsin. Cabinet has talked with the Board of Ordained Ministry about improving our recruitment efforts; others are addressing the high cost of seminary. Lovett Weems, a UM seminary professor, in his study on clergy recruitment, said "the church's overall health is the most important factor determining who comes into ordained ministry." Remember, friends, clergy are called forth from our local

congregations. The process of becoming clergy starts with you. That means your congregation's health is important!

Another challenge facing us in deep waters is health insurance costs. The United Methodist Health Task Force reported that the biggest factor contributing to the high cost of a unified health insurance plan is the ill health of clergy and lay employees. A United Methodist physician, quoted in a 2006 Time magazine article, said that "50 years ago, Methodist clergy were in the top five healthiest professions in America, and now they are in the bottom five least healthy. We cannot have a healthy church if we don't have healthy leadership." Fortunately, this is being addressed and is beginning to change in our conference. Thank you, Bishop Lee, for teaching about and modeling Sabbath and self-care. You have helped us in the cabinet honor the covenant we made three years ago to hold each other accountable for Sabbath and self-care. We've learned it's not easy to do, but it can be done! Thanks to the Board of Ordained Ministry and the Board of Pension for stressing self-care and health. We are working together to help our clergy lead with vitality and joy so that we can **live, give, and love. . . beyond all expectation** and lead others to do likewise.

We are at a critical time—an urgent time—in the life of our conference. That has led our Bishop to ask Dan Dick from the General Board of Discipleship to lead a representative group through strategic planning. We have started our work; you'll hear more about that as it evolves.

Every moment holds limits and challenges that affect us. Every moment also holds God and God's potential for good. When I was going through my

cancer treatment several years ago, a clergy friend reminded me of the final blessings Moses gave the people of Israel. Moses said, “I have set before you life and death, blessings and curses. Choose life so that you and your descendants may live.” (Deuteronomy 30:19b). That helped me reaffirm my decision to choose life in the moments I am given.

As leaders in our church, we each make decisions every moment. We can choose today and each day whether we will be Titanic people or Mayflower people. Our commitment to you—and we pray you’ll join us—is to choose to lead with a spirit of adventure and hope, centered on Christ and filled with grace. “Choose this day whom you will serve, as for me, I will choose the Lord.”