

# **Spiritual and Social Trends and Patterns in the Christian Reformed Church in North America**

*A report on the  
CRCNA 150<sup>th</sup> Anniversary Survey, 2007-2008*

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## Executive Summary

The Christian Reformed Church in North America (CRCNA or just CRC) is a bi-national body of believers with over 1,000 congregations and over 250,000 participating believers in the United States and Canada.<sup>1</sup> The church's headquarters are found in Grand Rapids, Michigan, and the denomination has an unusually influential array of agencies and institutions. More information is available at [www.crcna.org](http://www.crcna.org).

The 2007 CRCNA Congregant Survey (publicly dubbed the "CRC 150<sup>th</sup> Anniversary Survey," given the timing) sought data from individuals at 120 randomly-selected Christian Reformed churches during the period from November 2007 to July 2008. The survey's stated purpose was "to help inform decision making at all levels of the CRC—congregations, classes, agencies, ministries, institutions, etc.—in the following ways:

1. by gathering data that adds to our understanding of past trends and anticipates future priorities;
2. by providing representative evidence of the collective character and voice of Christian Reformed congregation members and attenders;
3. by providing baseline data on key measures of spiritual health and commitment of congregation members and attenders which can be replicated in the future.

The 2007 survey continued a series of surveys conducted by the Calvin College Center for Social Research every five years since 1987. However, we introduced several new features in 2007:

- a **focus on local congregational health** and much less about denominational agencies *per se*;
- **church-based sampling and data-collection method** that allowed churches to recruit anonymous responses that were aggregated and returned to churches custom reports;
- economical, **all-online response collection** that tripled responses over prior surveys;
- available **Spanish and Korean translations**.

After extended, personal data collection efforts, the survey concluded with 1,434 responses from 67 unique churches; 38 churches provided at least 10 responses, and 21 provided the 30 responses necessary to receive a special report. The response rate is difficult to calculate due to the list creation method, but based on Yearbook membership numbers, about 6.1% of the 67 participating churches' members participated (see **Table 2** on page 9).

### **CRC trends, 1987-2007**

Our first set of results builds on the previous four surveys to provide a twenty-year portrait of social and spiritual trends in the denomination. We report the following key trends:

- **Aging population:** Median age<sup>2</sup> continued to increase, from 44 years old in 1987 and 50 in 2002 to 52 years old in 2007. Mean age fell slightly, but that may be an artifact of the Internet-only response mode. See **Figure 1** on page 10.
- **Fewer children and fewer children in Christian schools:** as a concomitant effect of aging, households with children fell from 47% in 1987 to 35% in 2007, while the proportion of households with children in Christian school fell from 41% in 1978 to 19% in 2007. See **Figure 3** on page 12.
- **Rising socioeconomic status:** relative to national averages, CRC respondents have been becoming steadily more educated and higher-income on average; see **Figure 4** and **Figure 5** beginning on page 13.

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<sup>1</sup> For an excellent, brief overview of CRC history and beliefs, please see the booklet "What Does it Mean to Be Reformed?", available online at [http://www.crcna.org/site/uploads/uploads/resources/identitystatement\\_eng.pdf](http://www.crcna.org/site/uploads/uploads/resources/identitystatement_eng.pdf) (also see bibliography reference for Christian Reformed Church in North America 2002)

<sup>2</sup> The median age is the age of the person exactly halfway between the ends of a line of all respondents sorted by age; the median is much less sensitive to a few large or small values than the mean, which adds up all ages and divides by the number of people.

- **Declining loyalty to denomination and local churches:** after a major uptick from 1992 to 1997, the denomination has seen a decline in the proportion of respondents who are “very loyal” to the denomination, falling from 63% in 1997 to 53% in 2007. Strong loyalty to the local congregation fell from 70% to 65% over the same period. See **Figure 6** on page 14.
- **Weekly evening worship attendance plummeting:** though weekly morning attendance was steady around 90%, the proportion attending evening worship services every week fell from 51% in 1987 to 24% in 2007. See **Figure 8** on page 15.
- **Declining frequency of devotional activities:** **Figure 9** on page 16 shows that four daily devotional practices (private prayer, Bible reading, family devotions and personal devotions) have all fallen since 1987 and since 2002.

These trends are partly a reflection of broad, continent-wide generational trends, especially the relative size of the postwar Baby Boom generation and chronic distaste for institutionalized systems among Boomers and “Generation Xers.”

### ***Measuring and explaining perceptions of congregational health***

The 2007 survey broke new ground by adopting and adapting another CRC denominational initiative, the Healthy Churches focus and its related Healthy Churches survey instrument. The denomination has identified 11 areas or “rubrics” in which healthy churches should be honoring God’s will and doing God’s work. We selected 2 to 3 indicators from each area for congregational health (24 total) as well as for individual health (22 total). We found:

- **Centrality of the Bible tops, Disciple-making not:** the rubric with highest health ratings for local churches was “Centrality of the Bible” (83% said their church was “very healthy”), while “Disciple-making” was last (just 21% very healthy). See **Figure 10** on page 17.
- **Leadership contact with congregants needs attention:** of all the 24 specific indicators, an indicator of “Servant leadership” came in last. Over a quarter of respondents reported it was “definitely untrue” that “In the past 6 months, someone in leadership has talked with me about my spiritual life.” The denomination’s churches should pay greater systematic attention to keeping in touch with souls, in the manner of the traditional household visit. See **Figure 11** on page 19.
- **Opinions vary widely within churches:** using a scale from 1 to 5 averaging the 24 healthy church indicators, we rank churches with at least 20 respondents and find fairly weak internal consensus in most churches on this scale. The healthiest church has some who might dissent, while even the least healthy on average has some who regard it very highly. We have to live together with those who see church differently than we do. See **Figure 13** on page 22
- **Figure 13** on page 22 also suggests that **Canadian respondents give systematically less positive ratings** of their churches, probably not because of real differences between nations but due to cultural differences in what is perceived as an appropriate or “honest” survey response.

A major component of this section and focus of this report is a statistical model of congregational health that tests six hypotheses generated by the survey team and its advisors. The model’s chief virtue is that the relationships we detect are less likely to be accidental artifacts of other relationships. We present the model beginning on page 23, and the discussion centers around coefficients<sup>3</sup> displayed in **Figure 14** on page 25. The model yields the following key results:

- **The oldest and youngest respondents perceive healthier churches than the middle-aged:** Respondents 18 to 29 and respondents 70 to 79 gave statistically greater average health ratings to their congregations than those 30 to 69. There is hopeful evidence that the youngest among us are still encouraged about what they see—though this means they disproportionately attend healthier churches!

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<sup>3</sup> A coefficient is the effect of a one-unit change in a variable (“X”, say, a scale for the frequency of personal devotions) on the congregational health score when all other variables (region, church size, income, etc.) are as similar as possible.

- **More frequent use of “contemporary learning modes” strongly predicts higher congregational health scores:** “contemporary” worship tools like pastoral storytelling, audiovisual presentations, personal testimonies, children’s participation and discussion groups are strongly associated with measurably higher perceptions of congregational health. Traditional one-way didactic methods are notoriously ineffective in today’s classroom, so perhaps it is not surprising to see that today’s worshippers respond more positively to inductive, participatory worship practices as well. While some respondents dismiss these practices as unworshipful gimmicks, when they become a part of regular practice they seem to engage the congregation in a way that supports all 11 healthy church rubrics. Discussion begins on page 27.
- **Congregational health measures are complex and sometimes counterintuitive:** we found that some hypotheses were confirmed only in part, and the contrary effect should lend caution to quick-fix approaches to improving perceptions of congregational health. For example, we expected to find that personal spiritual health is associated with congregational health. It is, when personal health is measured by a broad scale including 22 indicators of the 11 healthy church rubrics. But the narrower measure of the frequency of devotional practices is *negatively* related to perceptions of congregational health. Likewise, doctrinal and pietistic Reformed worldviews are positively associated with congregational health, but the Kuyperian “cultural transformationalist” perspective is again *negatively* associated with perceptions of health. Greater personal spiritual discipline and greater commitment to renewing God’s world are both changes that may increase dissatisfaction with the church, and short-term success inculcating these desirable behaviors and beliefs may produce short-term *decreases* in congregational health measures. Relevant discussions are found on pages 26 and 29.

### ***Stewardship: factors related to generous giving***

The survey, benefitting from author Rice’s work with the Barnabas Foundation, asked for the first time about total household income, total gifts to the church and a battery of stewardship-related questions. We found the following:

- **The median percentage of household income given to church is 6.1%;** just 21.9% of respondents report giving 10% or more of their income to the local church (though 49.8% are estimated to give 10% or more to all charities combined). See **Figure 15** on page 30.
- **Older respondents give greater percentages; wealthier respondents give smaller percentages.** See **Figure 16** and **Figure 17** on page 31.
- **Spiritual nourishment is strongly associated with generosity:** “malnourished” respondents (those who pray, read the Bible and have personal devotions less than weekly or never) give a median 4.2% of income to the local church. “Daily nourished” Christians give a median of 7.0%. See **Figure 21** on page 34.

Generosity is thus strongly associated with personal spiritual health.

### ***A summary of survey respondents’ comments***

Respondents were offered two opportunities to give their open-ended comments, once on how CRC agencies could better support the local church’s health, and again for general feedback on the survey itself and its topics. Our co-author Christina Vanden Bosch, with support from several Calvin undergraduates, coded themes in these comments (424 about agency support and 304 general comments). We found:

- **Respondents recommend more personally-delivered, persuasive information** from ministry and agency representatives: 15.5% of comments about agency contributions touched on this theme. See **Figure 23** on page 37.
- Respondents are also concerned that **ministries and agencies should promote orthodox and biblical teachings**. 12.4% of comments concerned this theme.
- In general comments, respondents combined **praise for the denomination** (21.4% of comments) with **concern about doctrine and Reformed identity** (17.1% of comments) as the leading themes.

You can read more of the respondents’ voices beginning on page 37.

### ***Concluding remarks: five keys to the future***

In conclusion, we suggest five practices as the “glue” for the future CRC, whose traditional ethnic and cultural base is dissolving:

1. spiritual development,
2. stewardship education,
3. disciple-making,
4. leadership training and
5. keeping in touch.

See page 42 for commentary surrounding these suggestions.

The authors and the CRCNA leadership welcome your comments, critiques and suggestions. For the authors, write to [csr@calvin.edu](mailto:csr@calvin.edu); for the CRCNA leadership, contact [executive-director@crcna.org](mailto:executive-director@crcna.org). Or include both addresses in a general message.





## Foreword

*The Christian Reformed Church—a diverse family of healthy congregations, assemblies, and ministries expressing the good news of God’s kingdom that transforms lives and communities worldwide.*

These words, the vision of the Christian Reformed Church, paint a word picture of the hopes and dreams of the church. It is our dream that one day God will shape us into a family of his children from many different cultures and communities into vibrant, Christ-following local congregations who together make up what has come to be the Christian Reformed Church in North America.

By the power of the Holy Spirit lives are transformed and the kingdom of God is advanced. Jesus taught us to pray, “your kingdom come, your will be done on earth as it is in heaven.” Not only do we regularly pray these words, but we seek to make them a part of our daily lives by advancing his kingdom and doing his will.

The Christian Reformed Church is on a journey toward that vision—that future. It is a challenging journey but one which the church welcomes with joy and anticipation. This survey, taken by representative CRC congregations from across North America, portrays a picture of where the church is today. It reveals our strengths and our weaknesses. It reminds us of where we are as well as where we have been and where we are going.

It is not the only picture of the church and, like all such pictures, paints but one perspective. Yet it is a very helpful tool for the church as it reflects on the past and plans for the future. The quantity of data is immense and we want to express our thanks to the Calvin College Center for Social Research for their excellent work in gathering and interpreting the data.

It is my hope that you will find the information contained in this report helpful as a member and leader of the CRC. I encourage you to use it with wisdom and discretion as together we travel the journey to which Christ has called us.

Gerard L. Dykstra  
Executive Director of the CRCNA

## I. An introduction to the survey

### ***Survey purpose: trends, voice and health***

At the request of the Christian Reformed Church in North America (CRCNA), and with kind cooperation of CRCNA leadership and the pastors, staff and laypeople at dozens of local congregations, the Calvin College Center for Social Research (CSR) fielded the 2007 CRCNA Congregant Survey (publicly named the “CRC 150<sup>th</sup> Anniversary Survey”) from November 2007 to July 2008. As agreed by a task force of CRCNA leaders, the survey’s stated purpose was “to help inform decision making at all levels of the CRC—congregations, classes, agencies, ministries, institutions, etc.—in the following ways:

1. by gathering data that adds to our understanding of past trends and anticipates future priorities;
2. by providing representative evidence of the collective character and voice of Christian Reformed congregation members and attenders;
3. by providing baseline data on key measures of spiritual health and commitment of congregation members and attenders which can be replicated in the future.

Before we write another word, let us be clear: God is the only true judge of whether a congregation is healthy or not, and we know it. Survey data is merely a helpful source of information of what God’s people believe, or are willing to say they believe, about their churches. The reader’s prayerful wisdom and judgment is crucial. Churches should not strive to improve their scores on these variables—but churches may certainly find that these distilled opinions offer insight into their real strengths and weaknesses.

### ***Questionnaire: a new focus on local congregational health***

Surveys of CRC members have been conducted by CSR under the direction of one of us (Rice) every five years since 1987, so the 2007 survey marks the fifth such benchmark. As for any longitudinal study, a top priority for this survey design was to repeat questions from previous years so as to monitor trends. However, the denominational task force was also particularly concerned with a competing priority, to communicate and establish the new survey as a tool to emphasize and serve the denomination’s growing focus on healthy local congregations. The final questionnaire retained a limited set of trend items from previous years, focused primarily on the demographics and spiritual practices of congregants. The questionnaire dropped a large number of agency-oriented questions from previous surveys to make room for the new focus on congregational health.

A team of denominational leaders has been developing a CRC-specific survey on healthy congregations, adapted with permission from an instrument developed by the Evangelical Free Church of America (EFCA). The survey introduces 11 categories or rubrics for measuring congregational health and offers a battery of questions about each. Our 2007 design selected four indicators in each of these 11 areas, two referring to the health of the congregation and two referring to the health of the individual.

The survey advisory group also developed a set of eight research hypotheses to be tested by the survey; whenever possible, we incorporated questions designed to test these hypotheses.

The resulting questionnaire required 20 to 45 minutes to complete, with the following sections:

1. Welcome and congregation selection
2. Healthy congregations (11 rubrics) and congregational life cycle
3. Components of worship and worship styles
4. Attributes of successful pastors
5. Personal spiritual health (11 rubrics)
6. Reformed worldviews
7. Personal participation in worship, activities, devotions and congregational decision-making
8. Stewardship and financial contributions
9. Belonging, loyalty, membership, baptism, profession of faith, CRC ties and Christian schooling
10. Contribution of CRCNA ministries and agencies to congregational health
11. Personal demographics
12. Closing comment

In the fall of 2007, while English-language data collection proceeded, Spanish- and Korean-language translations of the survey were created. The survey team is much indebted to Ms. Nancy Ayala of Back to God Ministries and Rev. Joseph Chun of *The Voice of the Reformed* (the Korean-language version of *The Banner*) for their work on translation. These translations were deployed in the winter of 2008 and received a few responses in each language.<sup>4</sup>

The survey instrument is reproduced in English print in **Appendix A** on page 26, along with a preview link to the online survey.

### ***Sampling method: congregation-based recruitment of online responses***

The past membership surveys have been invaluable, but we wanted to attempt to improve the 2007 survey's inclusiveness, usefulness and cost-effectiveness. First, the 1987, 1992, 1997 and 2002 surveys were mailed to samples drawn from a master list of households supplied by central denominational records. Such records are unavoidably biased toward people with relatively stronger connections to the denomination; in 2007, we wanted to make a concerted effort to hear from members and non-members who may not have been known to the central offices. Second, the earlier surveys did not record which church the respondent attended, making it impossible to serve particular churches with information about their congregants; in keeping with our focus on congregational health, we wanted to be able to provide individual congregations with data about their respondents. Finally, the earlier surveys incurred significant expenses for printing, mailing and re-mailing questionnaires to over 1,200 people, while returning just 500 responses. We decided to experiment with Internet-only responses, to reduce costs and to increase the availability of the survey to church members and attenders.<sup>5</sup>

Reflecting these ideas, the 2007 survey applied the following methods: 150 churches were randomly sampled from the entire list of congregations active in September 2007; the list was found to be statistically representative of the entire CRC in terms of congregation size, geographic region and primary ethnicity. The first 120 of these churches, in random order, were contacted by email and asked to participate by appointing an in-house "survey coordinator"; 30 were held in reserve. Two churches had closed and were replaced from the first two randomly-ordered cases from the reserve list. Five additional supplementary churches with Korean and Spanish majorities were added to the list to provide greater representation of ethnic congregations. In the end, 69 churches agreed to participate out of 125 invited to participate.

Survey coordinators were provided with handouts, announcement scripts and other materials to facilitate promotion of the survey within their congregations over the course of several weeks; coordinators also received a regular email report on how many responses were received at CSR to date. Author Rice also made many personal telephone calls to church leaders to encourage participation. In some cases, participation was delayed as Council approval to participate was sought.

The 2007 sampling method is thus a combination of random selection of churches with "convenience samples" of willing participants in congregations. The results are not, therefore, a strictly statistically random sample of the CRCNA population, and may suffer from a variety of biases, given the disposition of the church to participate, the extent of the church's response-recruitment efforts, and the relative availability of survey participants. However, we believe the results are highly defensible and useful, on a number of grounds. First and most important, we find that the actual demographic and attitudinal distributions among respondents are consistent with distributions and trends established in previous surveys. We received responses across demographic categories in patterns that closely reflect the denomination's self-portrait from other sources, including the Yearbook. Second, given that we lack a central denominational database of all congregational members and attenders, the church-based recruitment method is arguably more inclusive and representative than past surveys. Third, any form of

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<sup>4</sup> A Vietnamese translation was also prepared by Mr. Chanh Bui, but the Inquisite survey tool proved unable to present the Vietnamese language online. Future surveys may take advantage of Mr. Bui's work.

<sup>5</sup> Some offsetting exclusivity results from the online-only design, since Internet access is lacking in certain areas and among lower-income populations. However, response recruitment was done both on paper and in person, and survey materials encouraged respondents to get help from friends, church personnel, libraries and so forth. Many respondents did so.

sampling suffers from the problem of self-selection; by definition, we never receive responses from those unwilling to complete surveys, so similar “convenience samples” necessarily exist even within statistically random samples. Given a choice between the traditional method and this year’s strategy, we’d do it again.<sup>6</sup>

### **Responses and response rates**

At the conclusion of the data collection period in July 2008, at least one response had been received from 67 churches. At least 10 responses were received from 38 churches; at least 30 responses (the minimum for a church to receive a customized report from CSR) were received from 21 churches, up to a maximum of 91 responses from a single church. Overall, 1,434 responses were received; 70 percent of these (1,002 cases) came from the top 21 responding churches. This result compares to previous surveys as shown in **Table 1**.

**Table 1** Survey history with response counts by year

<b>Survey Year</b>	<b>Method</b>	<b>Sample Units</b>	<b>Total Respondents</b>	<b>Response Rate</b>
1987	Mail	Members	555	N/A
1992	Mail	Members	617	N/A
1997	Mail	Members	488	44.4%
2002	Mail	Members	553	34.5%
2007-8	Internet	Churches	1,434	N/A

Lacking a master list of potential respondents, we cannot calculate response rates in the traditional fashion. However, if we take the total CRC Yearbook membership counts,<sup>7</sup> we can estimate response rates as percentages of congregational populations. These rate approximations range from 4 to 9 percent, as shown in **Table 2**. The best estimate is probably 6.1%, for the congregations that agreed to participate only; but this rate assumes that all members were invited to participate; some churches may not have distributed invitations so thoroughly.

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<sup>6</sup> However, it would be greatly preferable to both past methods for the denomination to develop a robust denomination-wide master list of all churches’ members and attenders, with suitable protections for individual and congregational control of privacy and communication channels. We considered asking each congregation for a copy of their membership directories, but this would have been expensive to manage and could have been perceived as invasive. The present method is low-cost both for the denomination and for congregations, while remaining fully anonymous for individual respondents.

<sup>7</sup> A side note on CRC Yearbook counts: Yearbook figures were often contradicted on a church-by-church basis in direct demographic reports from survey coordinators. We collected informal demographic reports to assist us in estimating our response rates. These reports were more up-to-date than Yearbook data at the time of response; for the sake of discussion, permit us to assume they are more accurate than the Yearbook. For 46 congregations reporting complete demographics (including members and nonmembers), the Yearbook *over*-counted by 37 members on average, with errors ranging from an over-count of 245 members to an undercount of 206 members. If reported non-members are included in the total as if they were members (as some churches appear to do in their Yearbook reports—one church with over 150 Yearbook members reported 0 members and over 150 non-members), then the figures are a much closer match; the average error is a Yearbook over-count of just 4 people, though the range of errors is still large. The standard deviation of the errors (the average absolute error, ignoring positive or negative values) is about 77 persons in each case, a sizeable variation. This finding implies that Yearbook figures may obscure a trend away from formal membership standards in a significant number of churches. On the other hand, churches that omit non-members from Yearbook counts may be inadvertently concealing further growth. We would encourage the denomination to adopt reporting methods that separate normative standards (official membership is an ecclesiological principle that should be implemented in a disciplined way) from empirical counts (non-members should still be counted separately in order to understand denominational demographics more fully).

**Table 2** Response rate estimates

<b>Group</b>	<b>Responses</b>	<b>2007 Yearbook Members</b>	<b>Rate</b>
All 125 invited congregations	1,434	35,779	4.0%
All 67 participating congregations	1,434	23,562	6.1%
All 38 congregations with 10+ respondents	1,326	17,183	7.7%
All 21 congregations with 30+ respondents	1,002	11,005	9.1%

### **Weights**

For the analyses in this report, the survey data have been weighted to approximate a representative sample of the CRCNA by region and church size. That is, responses from smaller churches and from under-represented regions count more in calculating averages than those from less-represented regions and larger churches. As shown in **Table 3**, the least-represented churches (and therefore the most heavily weighted to compensate) are small churches in Eastern Canada (weight = 1.82), while enthusiastic participation around Toronto means large churches in Eastern Canada are the most over-represented (weight = 0.50).

**Table 3** Weight matrix

<b>Weights</b> <b>Church's region</b>	<b>Church size (2008 yearbook)</b>	
	<b>300 or fewer</b>	<b>301 or more</b>
US Midwest	1.43	1.23
US East, South and West	0.83	1.40
Canada - East	1.82	0.50
Canada - West	1.03	0.98

Despite the apparent power of weights (a small church representative in Eastern Canada counts as much as 3.6 large church representatives in the same region!), the effect of their application is usually insubstantial. For example, weighting may shift the estimated percentage, strongly affirming a particular congregational health measure by a few percentage points, but it does not alter the overall relative pattern of affirmation or disaffirmation.

## II. CRC trends, 1987-2007

In this section, we shall report on a number of trends experienced by the CRC over approximately the past 20 years. A trend is a general movement over the course of time of some measureable change. The available measurement points in this report are the five surveys of the CRC taken every five years since 1987. The trends reviewed here are divided into two parts:

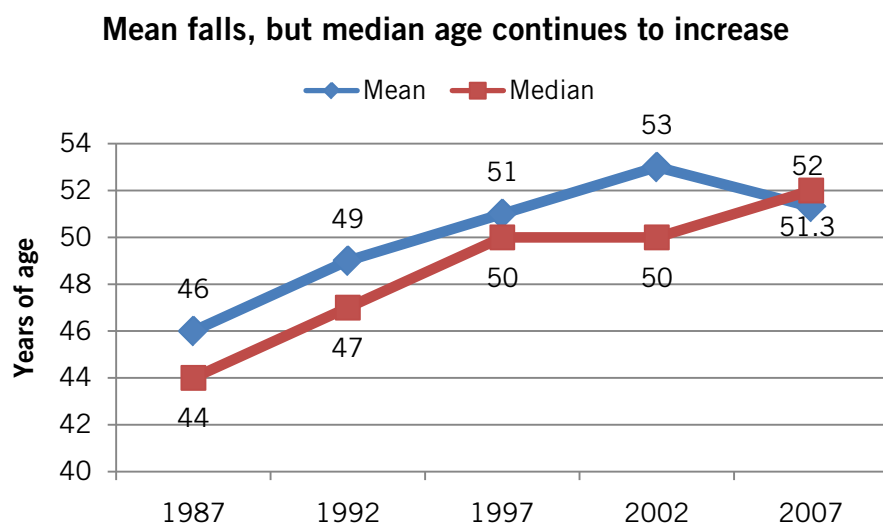
1. demographics; and
2. church-related characteristics.

### *Demographic trends*

#### **Aging of the constituency**

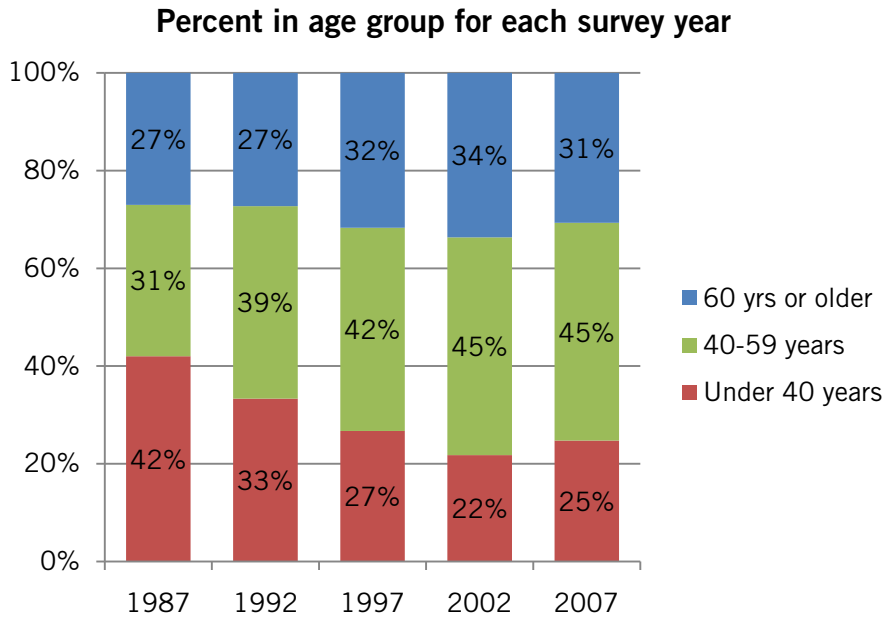
As shown in **Figure 1**, the mean age of survey respondents declined for the first time since 1987, dropping from a high of 53 years in 2002 to 51.3 in 2007. These averages are not of the entire CRC population but only of those 18 or older, since respondents were limited to adults. When measured as median—that is, the age at which half of all respondents are older and half younger—average age shows an increase over the last survey, from 50 in 2002 to 52 in 2007. Given this evidence, is the aging of the CRC tapering off? What has contributed to this change?

**Figure 1** Aging population



**Figure 2** shows, for each survey year, a breakdown of respondents into three broad age categories: under 40, 40-59, and 60 or older. In 1987, Baby Boomers, the extraordinarily large cohort of babies born approximately between 1946 and 1965, would have been between the ages of 22 and 40. Boomers constituted a big part of the 42% of respondents under 40 in 1987. As Baby Boomers have aged, they have contributed to the expansion of the age group 40-59. By 2007, this relatively large “bulge” in the population had reached the ages between 42 and 60. A contributor to the aging of the CRC, then, has been this progressively advancing age cohort called Baby Boomers. They are the primary reason for the median increase of the last 20 years.

**Figure 2** Age categories by survey year

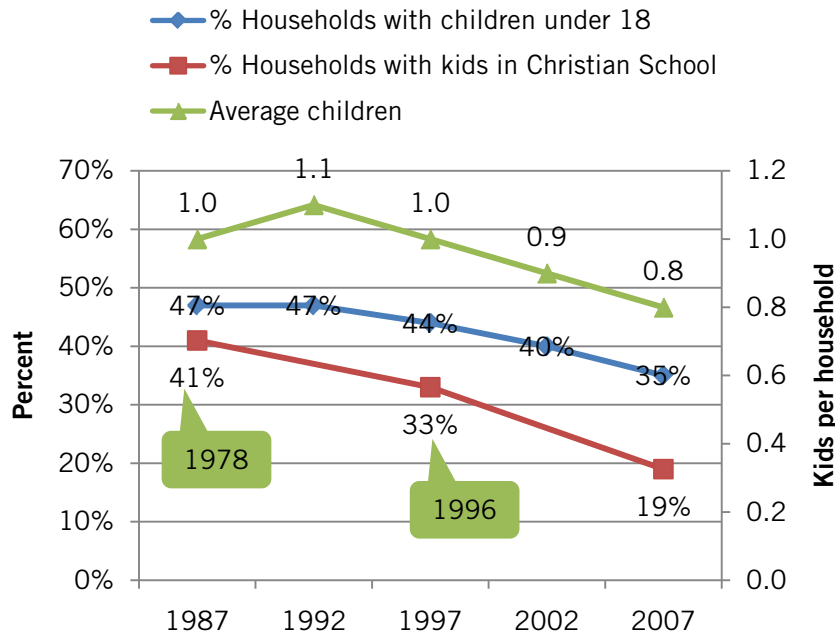


The decline in mean age, however, suggests something else is happening. We note the slight increase in those under 40 between 2002 and 2007, from 22% to 25%. We don't believe this is evidence of another baby boom (an “echo” effect?). Rather, the cause may be due to the use of the Internet mode for the entire 2007 survey. It may have resulted in a slight over-representation of younger adults in the survey respondents. Hence the mean decline we found in the data.

### Declining households with children and with children in Christian schools

**Figure 3** shows a clear decline of households with children under 18, from 47% of all households in 1987 to 35% in 2007. The mean average number of children within all households has dropped from 1.1 in 1992 to 0.8 in 2007. It isn't that the average number of children in households that have children has dropped, since that average has stayed relatively the same, around two children per household (not shown in the figure). The real change is simply that the percentage of households with dependent children is decreasing, so that today close to one of every three CRC households has the presence of young children or teens.

**Figure 3** Average children; households with children; and households with children in Christian School



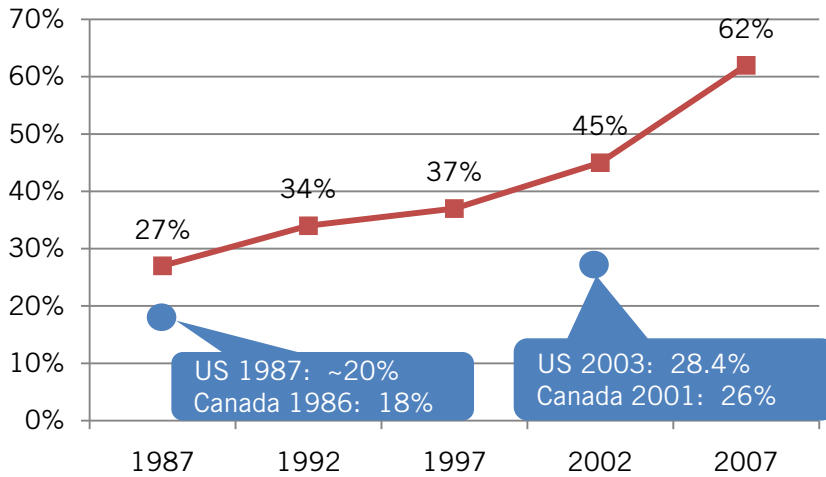
**Figure 3** also shows a trend line for percentage of households with children under 18 attending Christian school. The question whether children in the household attended Christian school was not asked in previous surveys of this series. To estimate the trend, we borrow measurement points from two other denomination-wide surveys: a 1978 survey sponsored by the CRWRC and a 1996 survey sponsored by Barnabas Foundation. Using these three measurement points, we observe that the percentage of CRC households with children in Christian school has fallen from 41% in 1978 to 19% in 2007. Today only one in every five households has children under 18 who are attending Christian school.



### Increasing proportion of CRC constituency with college education

Figure 4 shows a rather sharp increase of CRC adults who are at least college graduates. Though the late spike may possibly be due to the Internet-only response format, the trend is consistent with previous paper-only versions. Twenty years ago in 1987, 27% of the survey respondents said they were college graduates; by 2007, this number had increased to 62%. The callout bubbles in this figure report official government estimates of national averages for the U.S. and Canada. The increase in college education over the last 20 years has been markedly steeper for the CRC relative to national averages.

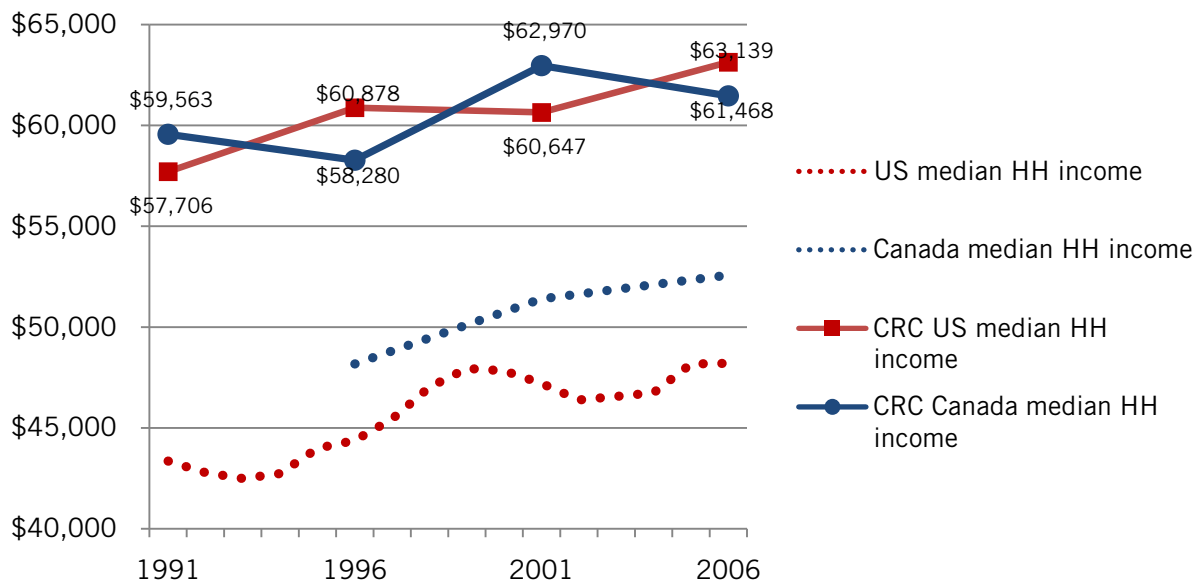
Figure 4 College-educated proportion is rising



### Household income trend mixed

In Figure 5, annual household income (pre-taxes) medians have been adjusted to reflect inflation. For CRC households in both the United States and Canada, from 1991 through 2006, average incomes significantly exceed the national averages. But average income shows a mixed pattern for CRC US and CRC Canada, with adjusted median income at times increasing and other times decreasing. Nevertheless, in the case of both, for the 15-year period 1991-2006, median annual household income adjusted for inflation has slightly increased. For CRC US, the 15-year increase was 9.4%, and for CRC Canada, 3.2%.

Figure 5 Real (inflation-adjusted) household income trend is mixed but increasing overall

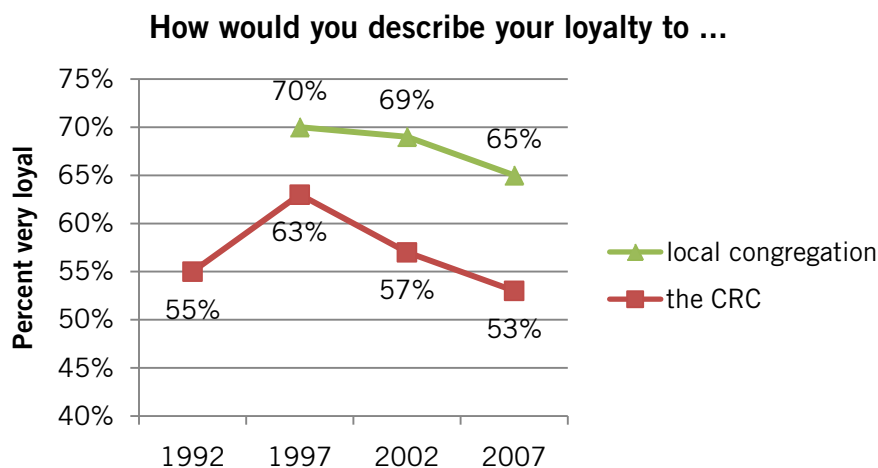


## Church-related characteristics

### Declining loyalty to CRC and local church

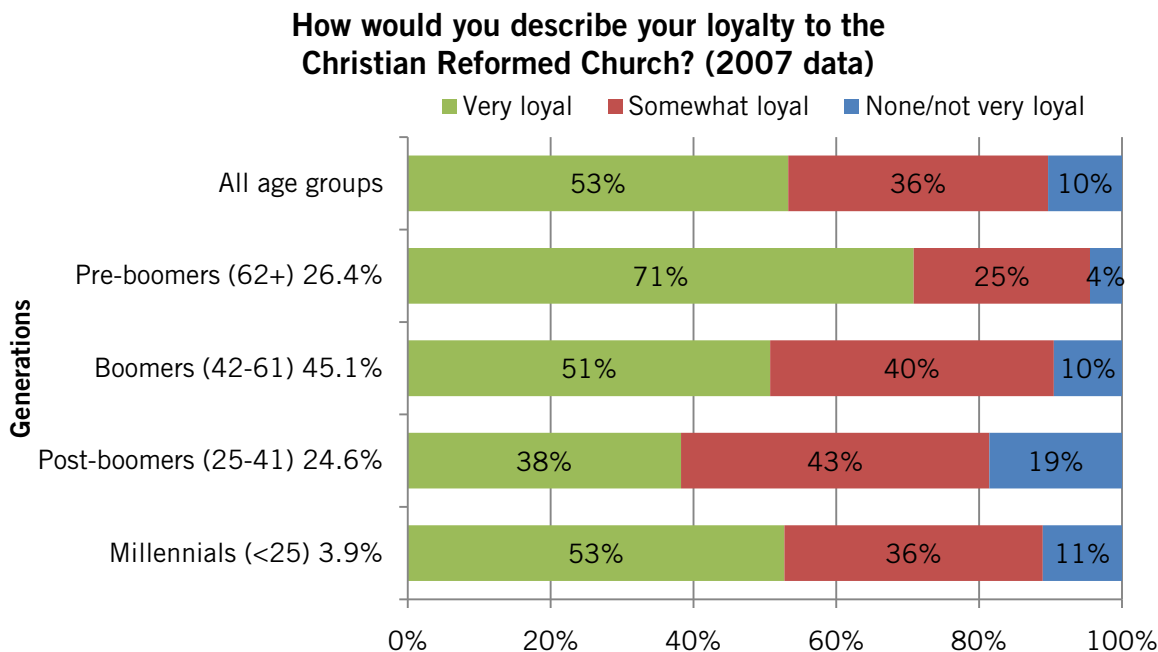
Since the 1997 survey, we have asked respondents to describe their level of loyalty to their local church. Four levels of loyalty are provided: very, somewhat, not very and none. As shown in **Figure 6**, those saying very loyal to their local church dipped slightly from 70% to 65% between 1997 and 2007.

Figure 6 Loyalty falling since 1997



We began asking the loyalty-to-the-CRC question in 1992. Expressed level of loyalty to the denomination as a whole appears a bit weaker than to one's local church. And, since 1997, the percentage saying very loyal to the CRC declined from 63% in 1997 to 53% in 2007. The evidence here suggests a weakening of loyalty to both local church and denomination over the last 10 years.

Figure 7 Loyalty varies by generation



But loyalty's meaning varies from generation to generation. In **Figure 7**, loyalty to the CRC in the 2007 survey is viewed across four different generations: Pre-boomers, sometimes referred to as Traditionalists

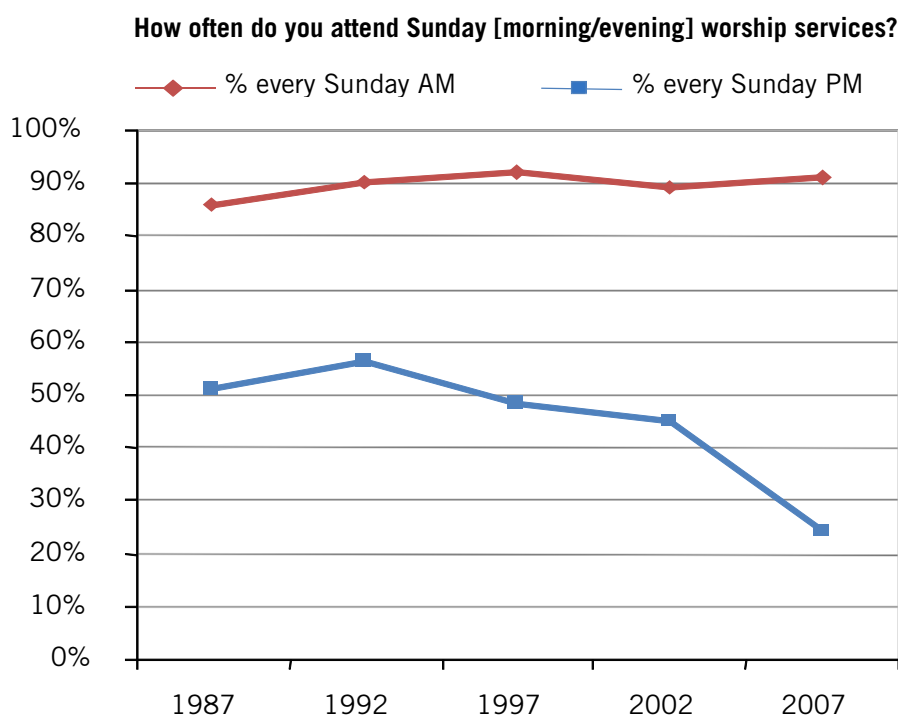
(ages 62 and older); Boomers or Baby Boomers (ages 42-61); Post-boomers, often referred to as Generation X (ages 25-41); and Millennials, often called Generation Y (25 and younger).

Generation researchers say suspicion of institutions, such as the church, is characteristic of the younger generations beginning with the Baby Boomers. Institutional suspicion weakens institutional loyalty (Lancaster and Stillman 2002). Of the oldest generation in the CRC, 71% say they are very loyal to it, but 51% of the Baby Boomers and only 38% of the Generation Xers are willing to say they are very loyal. As these younger generations have become a larger proportion of the denomination, a natural consequence of their aging, overall loyalty to the CRC has weakened. A bit of a surprise in the figure above is that the fourth generation, the Millennials or Generation Yers, exhibit a reversal of the declining loyalty trend; 53% describe themselves as very loyal to the CRC.<sup>8</sup> Generation researchers have found this next generation to be more positive about institutions, hence a stronger expressed loyalty, which begs the question: How will this new generation shape the church?

### Declining evening worship attendance

In **Figure 8**, we see that the percentage of respondents who say they attend morning worship services every Sunday has remained rather steady over the past 20 years. This percentage hovers around 90%. Not so with evening worship service attendance. Since 1992, those attending every Sunday have fallen from 56% to 24% in 2007. The ratio of morning to evening attendees in 1992 was 2 to 5, compared to only 1 to 4 in 2007. Evidence seems to suggest that evening service attendance has become optional.

**Figure 8** Attendance steady in the morning, declining in the evening

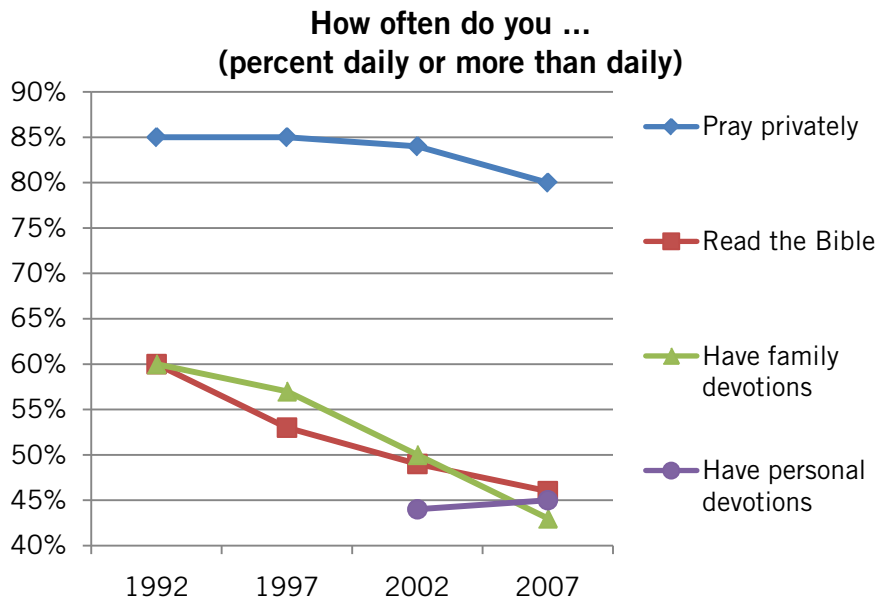


<sup>8</sup> One caution: as shown in the chart labels, the Millennials group is small, just 3.9% of respondents, or about 56 individuals.

## Declining frequency of devotional activities

**Figure 9** displays how often CRC people say they engage in certain devotional practices. There are four: praying privately, reading the Bible, having personal devotions and having family devotions. We are showing only the percentage of those who engage in these practices daily or more often. In three of the practices, evidence points to a declining trend. From 1992 through 2007, the percentage praying privately on a daily basis slipped from 85% to 80%, the percentage reading the Bible dropped from 60% to 46%, and the percentage having family devotions declined from 60% to 43%.

**Figure 9** Devotional practices decline



In the case of personal devotions, the question has been asked in only the last two surveys, giving us two measurement points over five years, making it difficult to discern its trend. Furthermore, the wording of the question differed slightly between 2002 and 2007. While we cannot substantiate a trend in the frequency of having daily personal devotions, the level of this devotional practice, around 45%, is in the vicinity of the frequency of reading the Bible and having family devotions. We conclude from the results shown in this figure that there has been a serious erosion of the frequency of devotional practices or, as often labeled, the practice of spiritual disciplines among the CRC constituency.

## Trends summary

Our review of selected CRC demographic trends shows a denomination with an aging constituency (enhanced by aging Baby Boomers), fewer households with dependent children and with children attending Christian school, increasing numbers of college graduates, and gradually increasing household incomes. Trends of church-related characteristics include declining loyalty to denomination and local church (effected largely by Baby Boomers and Generation Xers), declining evening worship attendance, and declining frequency of certain devotional practices (spiritual disciplines).

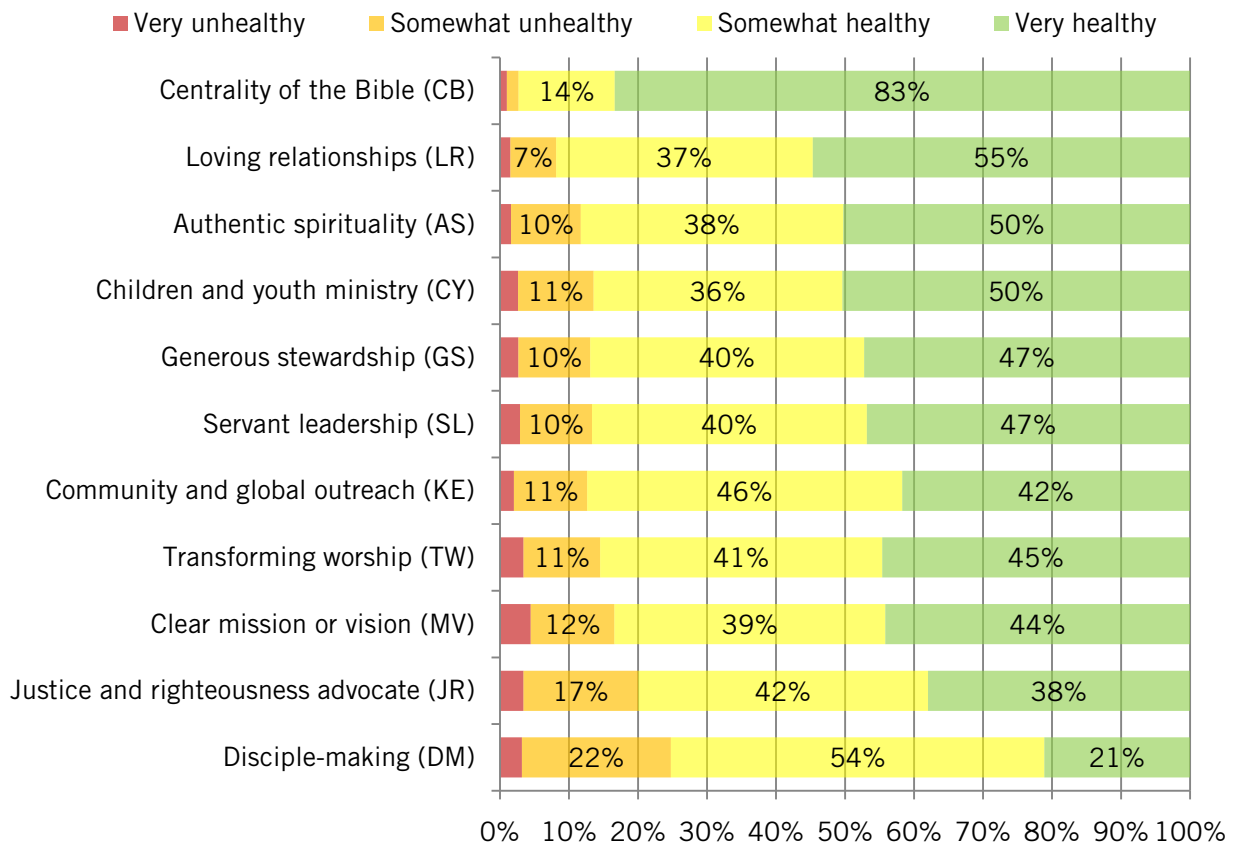
Given these trends, we should ask ourselves what future implications or ramifications might these have for such areas as congregation health and generous giving (stewardship). For example, financial giving to local church and denomination should increase with growing numbers of seniors, who typically are the most generous givers in the local church. But how might this trend impact the health of congregations? What about the decline of CRC and local church loyalty or the frequency of devotional practices? How might these trends affect the health of congregations and stewardship?

### III. Measuring and explaining perceptions of congregational health

The 150<sup>th</sup> Anniversary Survey broke new ground by adopting the CRCNA's focus on Healthy Congregations. The questionnaire asked respondents about 11 areas of congregational health, taken from a longer "Healthy Congregations" survey instrument that is being prepared and tested by the denomination. The areas reflect the Christian Reformed Church's commitment to a broad, orthodox understanding of Christian discipleship. We asked respondents to rate their church overall in these 11 areas. Then, for each of the 11 areas, we asked them 2 to 3 more specific questions about their church (as well as 2 to 3 about themselves as individuals). We consider the individual items and explanation of a scale combining all 24 indicators.

#### Indicators of congregational health

Figure 10 Healthy congregations (11 areas or rubrics)



Source: 2007 CRC 150th Anniversary Survey

Respondents were asked, "Tell us how healthy you believe [your congregation] is in each of the following areas," with four answer options ranging from "very healthy" to "very unhealthy." Figure 10 shows the weighted results, sorted by the average score. In every area, at least 75 percent of the respondents believed their congregation was "very healthy" or "somewhat healthy." Respondents were most sanguine about their congregation's health in the area of "Centrality of the Bible" (97 percent "very" or "somewhat healthy") and least confident of health in "Disciple-making" (75 percent, but just 21 percent "very healthy"). "Loving relationships" takes a distant second to "Centrality of the Bible" at the high end, while "Justice and righteousness advocate" is second-to-last at the bottom of the list.

The next section asked each person to evaluate his or her church on 24 items, two to three in each of the 11 categories. Respondents were asked, "For each statement about [your congregation] below, indicate

how true you think it is.” Five answer categories ranged from “Definitely untrue” to “Definitely true.” The questions were worded as shown in **Table 4**:

**Table 4** Question wording of healthy congregation indicators

**Centrality of the Bible**

- CB1 Our church encourages us to apply the Bible to every area of our lives.
- CB2 The people of our church have an in-depth knowledge of the Bible.

**Community and Global Outreach [now renamed “Kingdom Extension”]**

- KE1 Our church encourages us to support denominational ministries.
- KE2 In the past 12 months, un-churched people have joined our church.

**Loving Relationships**

- LR1 Our church provides a variety of small groups to foster community and accountability.
- LR2 Our church promotes loving relationships that cross racial, social, economic and political lines.

**Authentic Spirituality**

- AS1 Our church encourages the practice of spiritual disciplines such as prayer, Bible reading, silence and solitude.
- AS2 Our church teaches me how to forgive people who have hurt me deeply.

**Transforming Worship**

- TW1 Our church’s worship services intentionally engage both Christians and non-Christians.
- TW2 People from diverse age groups participate in the leadership of our church’s worship services.

**Servant Leadership**

- SL1 Specific individuals in our church are being intentionally trained to become church or ministry leaders.
- SL2 In the past 6 months, someone in leadership has talked with me about my spiritual life.

**Generous Stewardship**

- GS1 Our church encourages people to give generously.
- GS2 Our church makes effective use of financial resources to meet priorities.

**Disciple-making**

- DM1 When people join our church, there is a clear expectation that they will engage in a lifelong process of following Jesus.
- DM2 Our church encourages its people to talk openly about their faith.
- DM3 Our church meaningfully includes single adults.

**Clear Mission and Vision**

- MV1 Our church has a clear vision of where God is leading us.
- MV2 People at our church know what our mission and vision are.

**Justice and Righteousness Advocate**

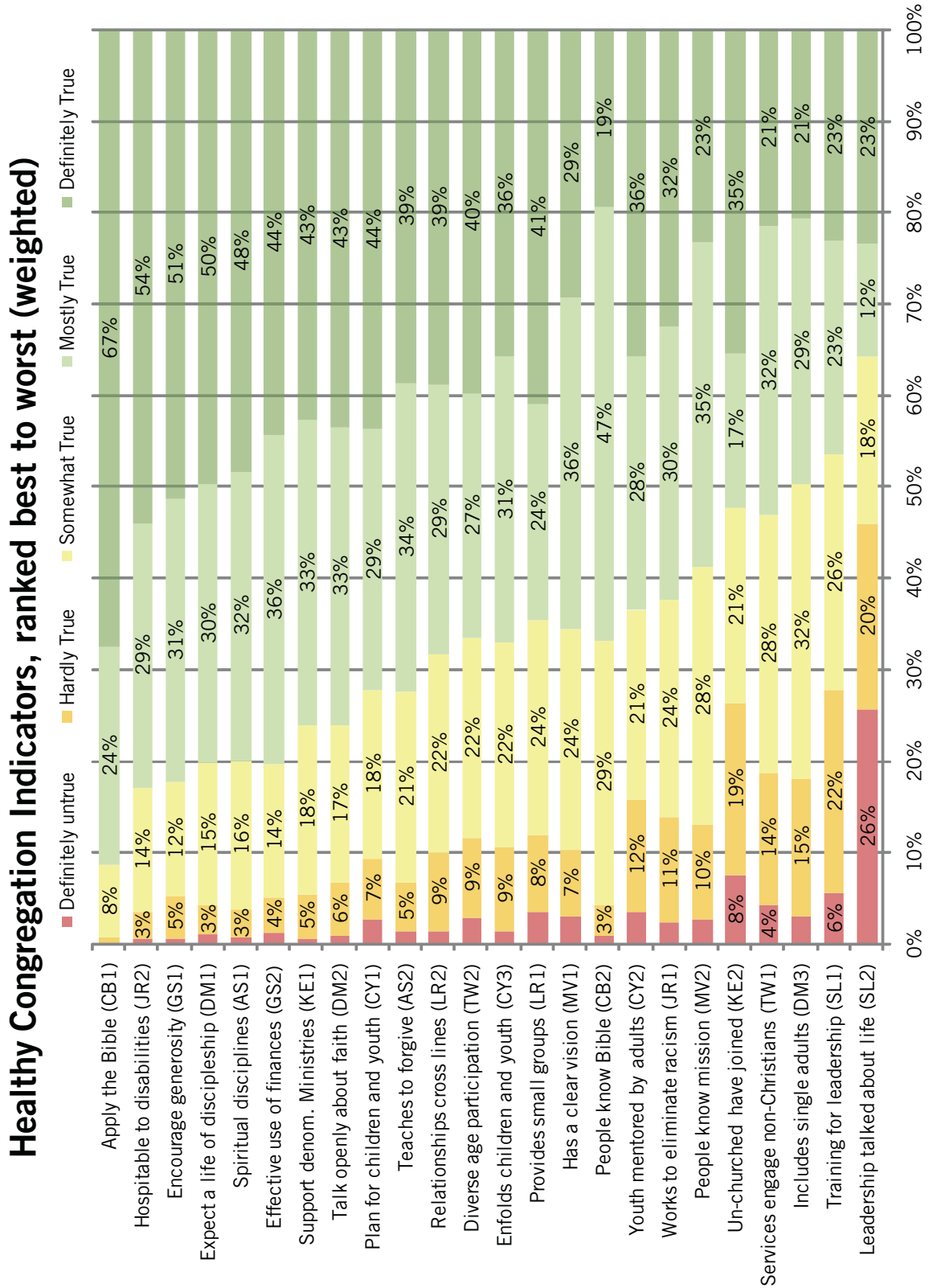
- JR1 Our church works toward eliminating racism in church and society.
- JR2 Our church is hospitable to people with physical and cognitive disabilities.

**Children and Youth Ministry**

- CY1 Our church has developed an overall plan for its ministry with children and youth.
- CY2 The youth of our church are intentionally mentored by seasoned Christians in addition to their parents.
- CY3 Our church is good at enfolding its children and youth into the life of our congregation.

**Figure 11** on the following page documents the weighted percentages for responses to each item, sorted by average score (ranging from 1 to 5).

Figure 11 Healthy congregation indicators (24 items)



As shown in **Figure 11**, the most strongly affirmed item was CB1 (the first “Centrality of the Bible” indicator), worded “Our church encourages us to apply the Bible to every area of our lives.” Two-thirds of respondents said this was “definitely true.” However, CB2 (“The people of our church have an in-depth knowledge of the Bible”) did not fare so well, with just 19 percent saying “definitely true,” though 47 percent said “mostly true,” giving CB2 an average score well above the least affirmed item, SL2.

That least-affirmed item, SL2 (from the “Servant Leadership” set), reads “In the past 6 months, someone in leadership has talked with me about my spiritual life.” Over a quarter of respondents said this was “definitely untrue,” and another 20 percent thought it was “hardly true.” This finding suggests a prominent initial focus for denominational and local efforts to improve congregational health. As a denomination with a strong historical tradition of the elders’ household visit, we can do much better! While the traditional visit may have brought overtones of authoritarian or legalistic supervision that are no longer consistent with our contemporary culture, we should work hard to convert the old tradition into a new and powerful engine for discipleship and growth.

Personal care from concerned people is a strong correlate of other important indicators of staying power with the local church. For example, see **Table 5**:

**Table 5** Key variables associated with recent leadership talk about personal spiritual life

**SL2 Talked with church leadership about spiritual life in the past six months**

	<b>Definitely true (23%)</b>	<b>Definitely untrue (26%)</b>
Strong sense of belonging that is increasing	51.8%	12.5%
Very loyal to local congregation	79.3%	44.2%
Spiritual life and faith has grown “significantly” in the last 12 months	39.5%	14.6%
Sure someone will listen to me when I have concerns (percent “definitely true”).	77.0%	29.3%

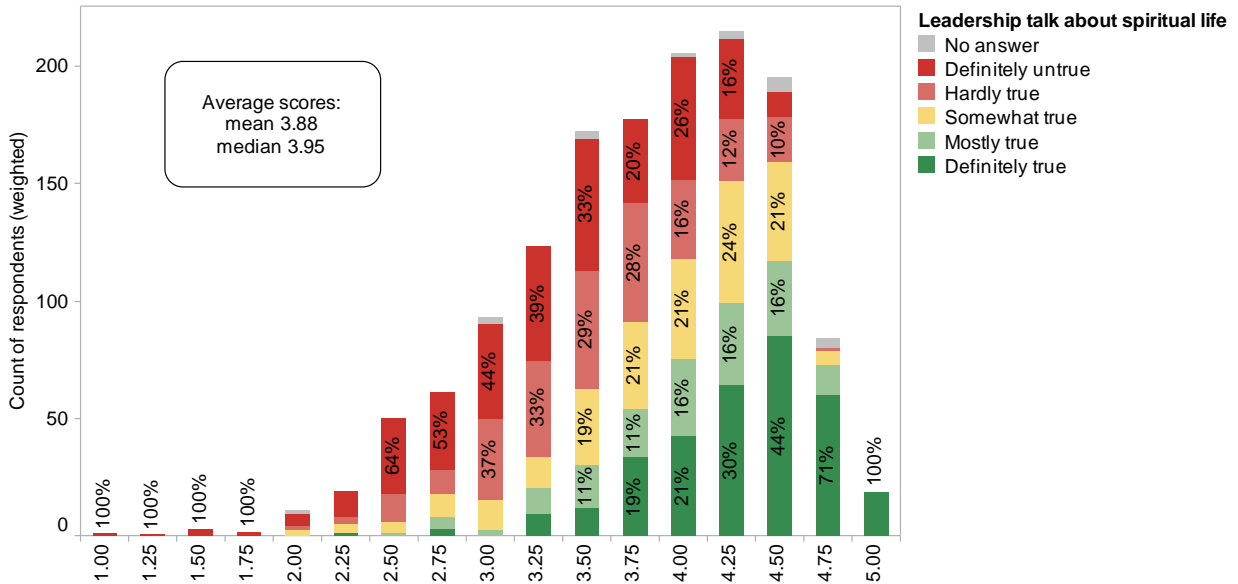
Those who said SL2 was “definitely true” were more than four times likelier than those who said “definitely untrue” to report a “strong sense of belonging that is growing” (52 percent versus 12 percent, respectively). The “definitely true” cases were also much likelier to report very strong loyalty to the local congregation (79 percent versus 44 percent), significant personal spiritual growth (39 percent versus 15 percent), and strong confidence that leadership will listen to concerns (77 percent versus 29 percent).



## Congregational health scale

To simplify analysis, we combined the 24 five-point-scale indicators from **Table 4** and **Figure 11** into a single averaged scale, ranging from 1 to 5, where a score of 5 indicates that the respondent answered “definitely true” to all 24 items.<sup>9</sup> **Figure 12** shows a histogram of this variable, which shows with vertical bars how many respondents gave an answer in small ranges of the scale. For example, we can see that over 200 respondents fell into the ranges around 4.0 and around 4.25, but fewer than 100 had scores in the range around 4.75. The average (mean) score was 3.88, and the average distance from the average (the standard deviation) was 0.66.<sup>10</sup>

**Figure 12** Histogram of congregational health scale, shaded by answers to SL2



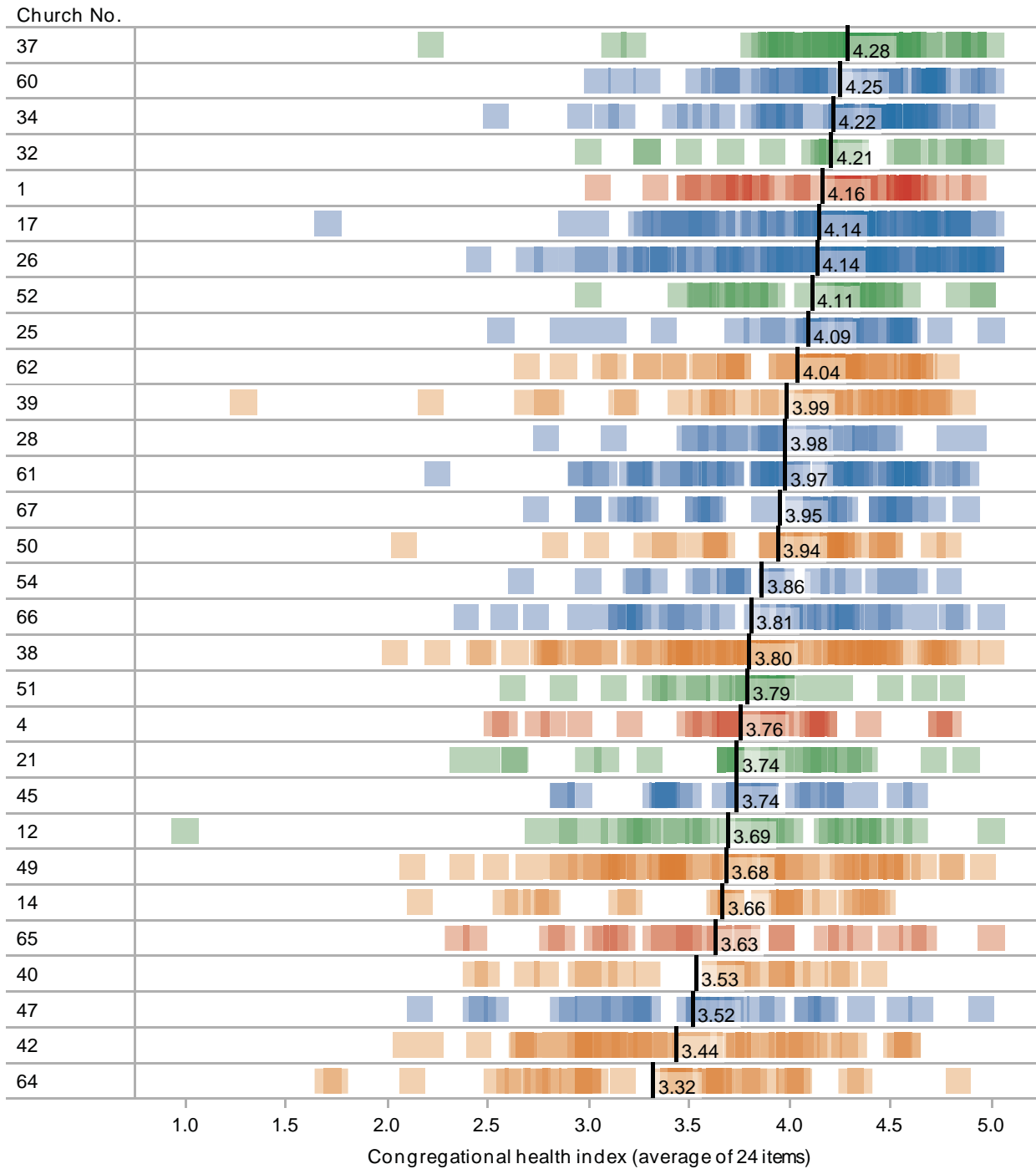
To reinforce the relationship between the Health score and the individual items it averages, **Figure 12** is colored by how the respondents in each bar answered the SL2 item (“leadership talked with me about my spiritual life”) discussed in the previous section. The item’s correlation with the scale is readily visible, since very few individuals giving their church’s health high scores also answered “Definitely untrue” or “Hardly true” (red values), while the majority of those with low scores answered that way.

These are individuals’ scores for their respective churches. How did the churches score when all their respondents are aggregated? **Figure 13** on the following page shows the same distribution of responses grouped by church, for all churches with at least 20 respondents. The “Church No.” in the left margin is a fictitious substitute for the Yearbook number. The short, vertical black lines on each row indicate the average (mean) score for each church, while the colored squares show the value of each individual’s response; the squares are transparent, so darker colors indicate lots of overlapping responses around that score. The highest-scoring church (green to indicate it’s located in the U.S., but outside the Midwest) has an average score of 4.28, while the lowest-scoring church (orange for location in Eastern Canada) has a mean of 3.32.

<sup>9</sup> For statistical cognoscenti, the Cronbach’s alpha for this 24-item scale is a very strong 0.93; in other words, the scale is very “reliable” and does not depend heavily on the inclusion of any particular question.

<sup>10</sup> To make these numbers comprehensible, suppose you were a guest on a quiz show where you had to guess respondents’ scores. The average (or “mean”) of 3.9 is the best guess you can make if you know nothing else about a respondent. But your guess would be wrong by an average of 0.66 points for each respondent if you guessed a score of 3.9 for all 1,432, since some scored higher and some lower.

**Figure 13** Congregational health index scores grouped by church (at least 20 respondents per church)



One of the first observations to make from **Figure 13** is that even the church with the highest score has a wide distribution, with at least a few respondents who don't think things are so good, while the lowest-scoring church also has responses from a wide range. The top and bottom churches do differ fairly dramatically (and significantly, in statistical terms), but the wide within-church variation means that churches that neighbor each other in the figure are often statistically indistinguishable. We all have to learn to live and grow together with others whose view of church differs from our own.

Another observation to be drawn from **Figure 13** is that Canadian churches score lower on average. It is certainly possible that our participating Canadian churches are objectively less healthy than their U.S. counterparts on average. However, we find this hard to believe, given the vibrant nature of some of the participating congregations. Though we have not found a study directly comparing Americans and Canadians, we do have some evidence that Americans' general "survey response style" is unusually upbeat and tends toward greater acquiescence (agreement or positive responses) and less "disacquiescence" (disagreement or negative responses) to survey questions than does the response style citizens of the United Kingdom; the same may hold true of Canadians (Harzing 2006). This cultural difference may explain the national differences, so that it may be important to compare Canadian churches to each other rather than drawing strong conclusions about national differences.

### ***Explaining Individuals' Ratings of Congregational Health***

Now we would like to know what kinds of characteristics and attributes are associated with higher or lower scores for congregational health. Who gives their church a high score?

The survey advisory team developed eight hypotheses or "hunches" about what factors would be associated with higher ratings of congregational health, six of which we endeavored to test in the survey data.<sup>11</sup> The hypotheses expected higher values for the following measures to be associated with reports of healthier congregations:

1. **Personal spiritual health:** measures of personal health in the 11 areas and in personal devotions.
2. **Membership conception of church:** indicators of belonging to a body, as opposed to simply consuming or producing ministry.
3. **Contemporary learning modes:** more frequent exposure to "contemporary" inductive learning modes (such as storytelling, drama, group discussion, missionary testimonies, audiovisual material, etc.).
4. **Cultural identity:** identification with the CRC's Dutch ethnic and linguistic heritage. (No direction was stated for this hypothesis; we were simply interested in knowing whether the old cultural base perceives greater or lesser health in a time of diversification).
5. **Reformed worldview:** endorsement of the three streams of Reformed thought (doctrinal, pietistic and cultural/Kuyperian).
6. **Healthy perceptions of organization:** seeing the local church as a trustworthy organization with responsive leadership.

Due to constraints on the length of the survey, we do not have as much information about these hypotheses as we might like. However, we do have a number of indicators that provide insight into these hypotheses.

To discern patterns in the congregational health variable, including these hypotheses, we created a multivariate statistical model, a regression, that explains each individual's congregational health score as a function of a number of other variables. The power of the statistical model is that it compares small green apples to small green apples, "holding constant" all the other attributes to find out how much difference one particular variable makes. For example, when we compare older people to younger people, we are comparing people who differ only in age—they are as similar as possible on every other variable in the

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<sup>11</sup> Two additional hypotheses, "denominational involvement" and "covenantal commitment," were too difficult to measure while yet preserving the survey's strong focus on congregational health, as opposed to the older surveys' denomination-centric themes. They are also built, in a number of ways, into the congregational health measure itself.

model. We often use the words “all else equal” (Latin *ceteris paribus*, or *c.p.*) to indicate that we are looking at just one dimension and comparing apples to apples on every other dimension.

The model results are shown in **Figure 14** on the next page.<sup>12</sup> The bars in the figure illustrate the size and direction of the model coefficients, relative to a hypothetical “baseline” respondent who is average on the scale variables like personal health and in a selected category for categorical variables like region. Coefficients answer the question, “for each additional unit in the variable in that row, how many more (or fewer) units of congregational health do we observe?” If the answer is “0,” that means that congregational health ratings are not associated with the variable in question—more or less of it makes no difference. But the answer is often around “0.10 points.” A tenth of a point may not seem like much, but there are only 40 tenths of a point separating the scale minimum of 1 from the maximum of 5, and the healthiest church in **Figure 13** averaged only 1 point (10 tenths) more than the least healthy church, so a coefficient of 0.10 is not a trivial difference.

### Demographic differences

To begin at the beginning, consider the categorical variable **Region** at the top of **Figure 14**. The baseline category is the US Midwest. Below it, we see that respondents from the other three regions all gave their churches significantly lower congregational health scores, on average, even when comparing respondents from the same size church and of the same age, personal health, Reformed worldviews and so forth. The average score for a U.S. respondent outside the Midwest was 0.11 points lower, for an eastern Canadian 0.21 points lower, and for a western Canadian 0.17 points lower. Interestingly, the U.S. outside the Midwest is not statistically distinguishable from western Canada (-0.11 and -0.17 are close enough together that they may not be different). So the “two countries, two cultures” story about response styles may not be accurate after all. Again, we are not sure that this means Midwestern churches are healthier—Midwestern survey respondents may just have a rosier view, and including region helps us compensate for this.

When it comes to **Church Size**, the relationship is intuitive: on average, respondents from larger churches give their churches higher scores—0.21 points higher for respondents from churches with over 600 members. However, these large churches do not differ significantly from the churches with 151 to 300 or with 301 to 600 members (0.14 and 0.21 are statistically too close to distinguish).

Looking at **Age** groups, we find a curious pattern; when we take 30- to 39-year-old respondents as the baseline, other ages do not differ significantly, except those aged 18 to 29 and 70 to 79, with both young and old perceiving healthier congregations than do the middle-aged.

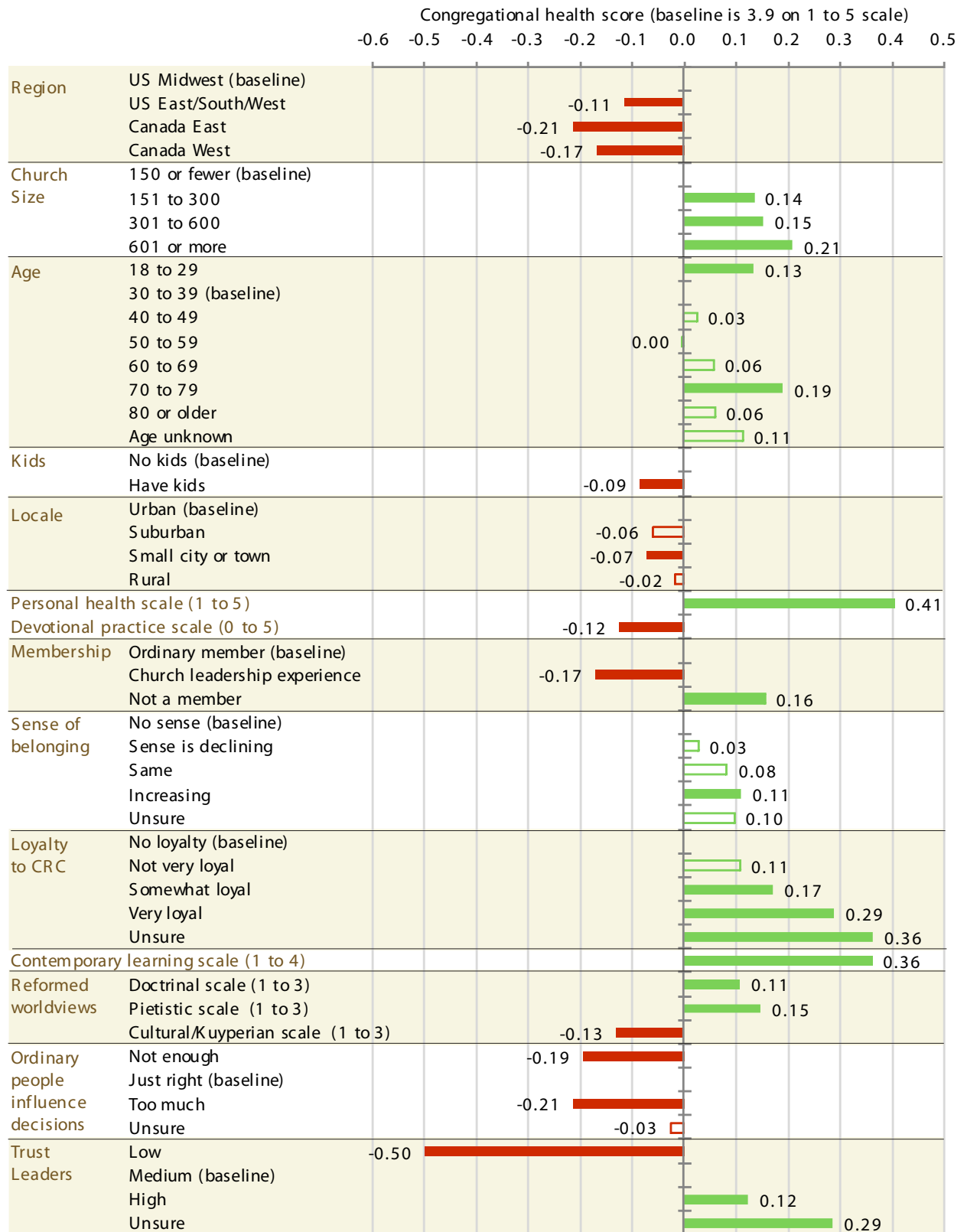
One of the more disappointing findings in this survey is that respondents who **Have Kids** under 18 living with them perceive less congregational health than those who do not have kids. The difference is just 0.09 points, on average, but one would hope that there would be no difference or even greater enthusiasm for the church among parents. When we dig deeper, we find that parents of children differ most from those without kids on the statement, “Our church has developed an overall plan for its ministry with children and youth” (CY1 in **Table 4**). Just 36 percent of respondents living with kids said this statement was “definitely true,” compared to over 48 percent of respondents without kids. Whom should we suppose has the more accurate perspective?<sup>13</sup>

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<sup>12</sup> For statistically-minded readers, the model is weighted by church size and region, is based on an *N* of 1,414 respondents, and has an *R*<sup>2</sup> value of 0.595. That is, the variables in the model explain about 60 percent of the individual differences in the congregational health scores; the rest of the differences are explained by variables we did not include in the model, by errors in measurement, or by random noise (mood fluctuations, idiosyncratic recent events, and so on).

<sup>13</sup> On a brighter note, the one item on which respondents with kids gave their churches a higher health rating than did those without kids was “In the past 12 months, un-churched people have joined our church” (Kingdom Expansion item KE2).

**Figure 14** Effects of multiple variables on individual congregational health scores



Note: outlined bars indicate insignificant coefficients that do not differ statistically from the baseline.

For the **Locale** variable, we asked respondents what kind of place they lived in on a scale with nine options ranging from big city to farm; collapsing these into four categories, we typed respondents as Urban, Suburban, Small City/Town, or Rural. Respondents from suburban areas and small cities or towns gave lower ratings of congregational health on average, though only the small town respondents differed statistically from the big city baseline (0.07 points lower on average).

## Variables from Hypotheses

Now we come to the rows and bars in **Figure 14** that provide some evidence regarding the hypotheses presented above on page 23.

### Hypothesis 1: Personal health (conclusion: mixed)

First, we have two measures of the individual respondents' **Personal spiritual health**, which our first hypothesis expects to be associated with congregational health. The "Personal health scale" is an average of 22 items from the 11 areas documented in **Figure 10**, but these items ask about the individual's health rather than the congregation's.<sup>14</sup> It is thus a broad measure of many aspects of spirituality, and ranges from 1 to 5, where 1 is "definitely untrue" and 5 is "definitely true." The "Devotional practice scale" is more narrowly focused on just three personal spiritual practices, the frequency with which individuals report reading the Bible, having personal devotions, and praying privately.<sup>15</sup> It ranges from 0 to 5, where 0 indicates "never" and 5 indicates "more than daily."

These two scales return **mixed results for our first hypothesis**; one scale has a positive association, one negative. On one hand, the personal health scale is strongly associated with the congregational health score; for every additional point of personal health, the congregational health rating is predicted to increase by 0.41 points. That is, people scoring just 1 point above the average of 3.75 on the personal health scale have, on average, a congregational health score 0.41 points above the average of 3.9; going from a very low score of 1 to a high score of 5 predicts a relatively huge average increase of 1.64 points in the congregational health score. This strong association reflects both the similar broad focus of the two scales on the 11 areas of health and the identical answer scales. Clearly, individuals who perceive themselves as healthy in these 11 areas find their congregations to be healthy, too.

On the other hand, as seen in the red bar in **Figure 14** next to the **Devotional practices** scale, those who report more frequent time in Bible reading, devotions and prayer are less likely to perceive health in their congregations, on average. Every point increase on the scale predicts a *decrease* of 0.12 points in the congregational health score; moving all the way from "never" on all three to "more than daily" on all three is associated with an average decrease of 0.60 in the congregational health score. Clearly, those who practice these disciplines regularly are not quite as sanguine about their churches' health as those who do not.

What does this apparent contradiction mean? The two scales (personal health and devotional practices) are themselves positively correlated (that is, those who score higher on one score higher on the other).<sup>16</sup> The solution to the apparent paradox is that we are considering the effects on congregational health of both scales simultaneously. For any two highly similar people with the same score on the personal health scale, the one who does more frequent devotional practices will give her church a lower score than the one with less frequent devotionals. But for any two people with the same frequency of devotionals, the one with a higher score on the broader personal health scale will give his church a higher health rating.

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<sup>14</sup> The Personal Health Scale has a Cronbach's alpha reliability coefficient of 0.89, which is quite good. The 22 items can be found in Appendix B on page 43.

<sup>15</sup> The Devotional Practice Scale has a Cronbach's alpha of 0.69, good but not great. That is, the scale may be somewhat sensitive to the addition or omission of specific questions. A list of the items is found in Appendix B

<sup>16</sup> In statistics talk, Pearson's  $r$  for the two scales is 0.35. In fact, we could add the three devotional items to the personal health scale's 22 without harming its reliability at all; but a principal-components analysis (not shown) does suggest they are separable dimensions, since the devotional items alone load more strongly on a second dimension.

### **Hypothesis 2: Membership conception of church (conclusion: mixed)**

We brainstormed a large number of possible measures of this hypothesis, but in the end we were constrained to use a few simple, multipurpose measures: the respondent's Membership status, the respondent's Sense of belonging in the congregation, and the respondent's loyalty to the CRC.

As shown in the **Membership** section of **Figure 14**, the basic fact of membership status goes against our hypothesis that membership is associated with congregational health. Non-members actually had significantly *higher* perceptions of church health (0.16 points more than members), while those with leadership experience (pastors, council members and teachers, for example) perceived significantly *lower* congregational health (0.17 points less than members). Apparently, the “sausage factory” phenomenon of greater familiarity with a congregation's inner workings leads to lower perceptions of health, perhaps more realistic than those of newcomers.

In the **Sense of belonging** section of **Figure 14**, we see that only those members whose sense of belonging is increasing give their congregation a significantly higher score than those who have no sense of belonging at all. The personal sense of trend is clearly important: Those with a strong but declining sense of belonging hardly differ in perceptions of health from those with no sense at all. This set of items, at least, suggests some confirmation of the hypothesis that a membership conception of church contributes to church health.

Finally, in the **Loyalty to the CRC** section of **Figure 14**, we find an interesting pattern that is partly supportive of our hypothesis: those with greater loyalty to the denomination do indeed perceive a healthier congregation, on average, with those who are “very loyal” scoring their congregations fully 0.29 points higher than those with no loyalty. But the odd finding is that those who are “unsure” of their loyalty (a group that is disproportionately new members, but far from majority) have the highest perceptions of congregational health, fully 0.36 points higher than those with no loyalty. These respondents might be said to be giving the CRC the “benefit of the doubt” without professing loyalty; they believe they attend particularly healthy CRC churches.

Overall, hypothesis 2 receives very mixed results, and our expectation that membership is important to health remains in question.

### **Hypothesis 3: Contemporary learning modes (conclusion: strongly supported)**

Among all the hypotheses posed by the survey advisory group, this one is perhaps the most powerful and useful. We asked respondents to rate how often their congregation engages in nine “components of worship” (our “**Contemporary learning modes**” in **Figure 14**), on a four-point scale from “never” to “often.” The nine modes were:

1. audiovisual presentation (such as a movie or slide show);
2. children's message or participation;
3. drama or dramatic reading;
4. group discussion or deliberation;
5. missionary or service team report;
6. personal testimonies;
7. story telling by a pastor;
8. story telling by others;
9. question-and-answer time with a preacher or presenter.

We describe these as “contemporary learning modes” because of the contrast with a “traditional” (though Jesus' parables would not be “traditional”), one-way, doctrine-before-narrative model of worship and proclamation. “Question-and-answer time” and “group discussion or deliberation” were the least frequently experienced, while “drama or dramatic reading” and “story-telling by a pastor” were the most frequently cited.



We combined these nine items into a scale from 1 to 4,<sup>17</sup> which averages 2.65 and exhibits wide variation from person to person and church to church. As **Figure 14** shows, every additional point on the contemporary learning mode frequency scale is associated with an increase of 0.36 in the congregational health score, so that moving from the minimum of 1 (“never” to all nine items) to the maximum of 4 (“often” to all nine items) is associated with a full point increase in congregational health. After the personal health scale, employing contemporary learning modes more frequently is by far the most powerful lever churches can pull.

A little further investigation reveals that congregations that employ these nine modes more often also value them more highly as components of worship. We also find that younger people (under 40) are substantially more likely to perceive the worship value of these modes; since our statistical model controls for age, we know that age differences are not the only reason for our finding, but the relationship between age and valuing contemporary learning modes suggests that the health effect of these modes could be even more pronounced than our findings suggest when they are used to recruit younger members to the church.

#### **Hypothesis 4: Cultural identity (conclusion: unsupported)**

The advisory team did not have a clear sense of direction, but was concerned with detecting whether the **traditional CRC cultural base** (both in terms of a Dutch Reformed cultural heritage and in terms of long personal history with the denomination) differed significantly in its perceptions of health from others in the denomination. Some of us expected people from the historical base population to have more positive views of congregational health than others in the denomination (due to longstanding comfort with the denomination), others expected less positive impressions (possibly due to discomfort with change).

In previous trials of the statistical model presented in **Figure 14**, we tested variables for 1) those whose reported ethnicity included “Dutch” or “Friesian” in some form and 2) the number of generations of ancestors affiliated with the CRC. Neither of these was associated with any difference in perceptions of congregational health, so to save space, they have been omitted entirely from the model presented here. There does not appear to be any difference between the traditional base and newer arrivals in their assessments of congregational health, once region, age, and so on are accounted for.

That’s not to say there aren’t differences between groups. Self-identified Dutch or Friesian respondents were much more likely to report they were “very loyal” to the CRC (64.7%) than non-Dutch or Friesian respondents (44.3%). Likewise, those whose parents, grandparents or some previous generation were also CRC were much more likely to say “very loyal” (61.8%) than those with no forebears in the denomination (31.8%).

#### **Hypothesis 5: Reformed worldview (conclusion: mixed)**

The 2007 survey repeated a series of questions introduced in the 2002 survey (Rice and Annis 2004, 45-8) about the three **Reformed worldviews** or “minds” identified by scholars and denominational publications: the doctrinal, the pietistic, and the Kuyperian (or cultural transformationalist) perspectives (Bratt 1984; Christian Reformed Church in North America 2002, 2006; Wolterstorff 1974). Each of the three Reformed perspectives is represented by a scale based on five questions (the list of questions is found in Appendix B on page 43).<sup>18</sup> Each question allows answers of “least important,” “somewhat important,” and “most important.” The pietistic items were the most likely to receive strong priority, while doctrinal and cultural items were slightly but equally less likely to be seen as a high priority. For each scale, most survey respondents give top priority to most of the items, but there is significant variation on each, and the scales are positively correlated, but not strongly.<sup>19</sup>

For example, one indicator of the pietistic worldview was “Having a personal relationship with Jesus.” 93.5% said this was “most important,” 5.7% said “somewhat important,” and 0.8% said “least important.” An indicator of the doctrinal worldview was “Accepting the 5 points of Calvinism (TULIP).”

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<sup>17</sup> Cronbach’s alpha for these nine items is a tolerable 0.70.

<sup>18</sup> Cronbach’s alphas for these three scales are only fair: doctrinal, 0.69; pietist, 0.64; Kuyperian/cultural, 0.60.

<sup>19</sup> The largest Pearson’s *r* is 0.46, between doctrinal and pietistic scales; the other two pairs are correlated at about 0.35.



39.4% of respondents thought TULIP was in the “most important” category; 17.4% thought it was “least important,” and 43.2% thought it was “somewhat important.” An indicator of the cultural transformationalist worldview was “being a change agent in restoring the Kingdom of God.” 74.2% thought this was “most important,” 24.7% said “somewhat important,” and 1.1% said “least important.”

As shown in **Figure 14**, a 1-point increase in the Doctrinal scale is associated with a 0.11 higher score for congregational health, while 1 point on the Pietistic scale goes with 0.15 higher on congregational health. But as the red bar shows, an additional point of Kuyperian “cultural transformationalism” is connected with 0.13 point *lower* impressions of congregational health.

What can we conclude? Our hypothesis meets mixed evidence: stronger personal adherence to the Reformed mind in doctrine and piety is indeed connected with better evaluations of congregational health, but stronger adherence to the Kuyperian mind is connected with slightly worse evaluations on average. Referring back to our health evaluations in **Figure 10** (page 17), we see that the “Justice and Righteousness advocate” is the second lowest-rated of the 11 health rubrics. Perhaps Kuyperians’ concern about appropriate congregational emphasis on such things explains some of the difference.

#### **Hypothesis 6: Healthy perceptions of organization (conclusion: supported)**

The final hypothesis to consider from **Figure 14** is evidence about respondents’ perceptions of their congregation as an organization. We have represented this concept here with two indicators. The first of these was an assessment of the **influence of ordinary people on decisions**. We asked respondents, “How much influence do you feel that ordinary people have on the decision-making at your church?” Compared with those who said influence was “just right” (58.3% of the respondents), those who perceived “not enough” influence (25.7% of the respondents) gave their congregation health scores lower by 0.19 points on average. The small group (2.6% of respondents) who thought ordinary people had “too much” influence also gave lower marks, 0.21 points lower on average. Thirteen percent were “unsure”; their marks were 0.03 lower on average, but the difference is not significant.

The second measure is an assessment of **trust in the congregation’s leadership**. We asked, “How much do you trust the leaders of your church?” Compared to those with a “medium level of trust” (25.8% of the respondents), those with a “high level of trust” (68.1%, the vast majority) gave higher health scores by 0.12 percent. The ultimate lesson here is the frightening blow to congregational health perceptions suffered by those with a “low level of trust” (5.0%), whose assessment of health was a full half-point (0.50) lower on average. It is clearly important for healthy congregations to maintain appropriate levels of input from ordinary people and to build and maintain trust between leaders and the rest.

### ***Final remarks on congregational health***

The indicators and statistical model results presented in this section are just evidentiary hints, and these are usually reinforcements of what we already know or suspect to be true about healthy churches. However, there are a couple important surprises with practical implications.

The first big story is the very strong effect on perceptions of health from the contemporary learning modes. This is a powerful, uncomplicated association that suggests there is a real lever here that churches can pull, through careful introduction of other ways of interacting. Of course, like the respondent quoted below on page 41, some may perceive these modes as “non-worship activities” that interfere with rightful adoration of God, especially initially—frequency, not the perceived “value for worship” of these modes, is the best predictor of stronger health perceptions. Noisy videos and barely-relevant dramas will not help, but a judicious, regular use of these tools in worship may be very helpful.

Secondly and finally, we should take note of the complex implications of any conception of congregational health that is an aggregate of individual opinions. Such aggregate opinion remains about the best evaluation resource we have in the context of human depravity (those who imagine themselves “expert” in whether a church pleases God or not should perhaps reconsider Christ’s words to the Pharisees). However, we should not expect, for example, short-run increases in devotional practices or in attention to Kuyperian theology to produce short-run improvements in congregational health measures—these factors drive down scores, possibly because they produce more critical thinking about what a church is supposed to be.

## IV. Stewardship: Factors related to generous giving

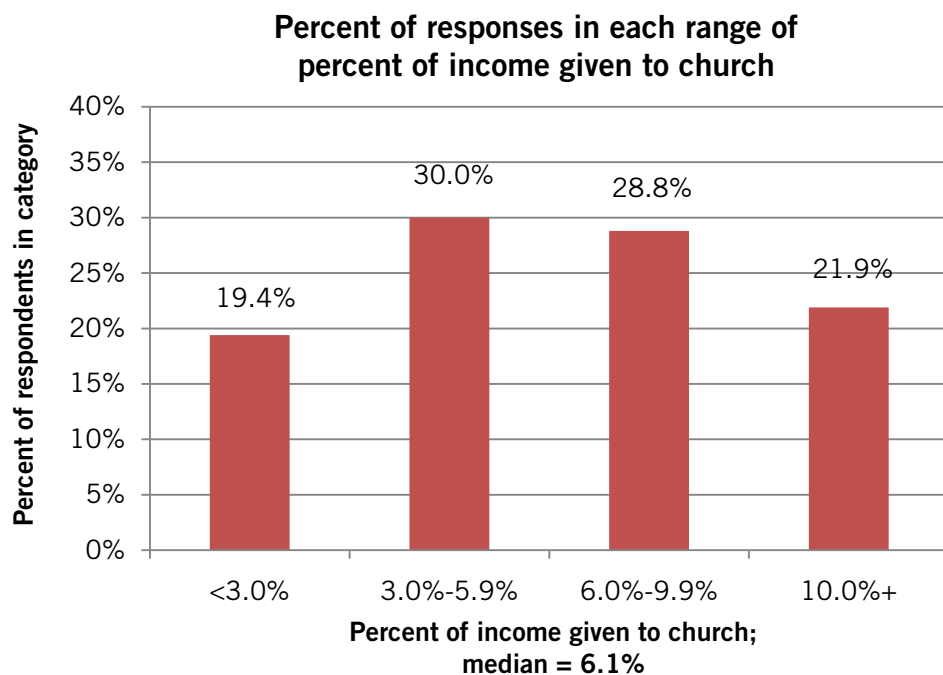
One of the 11 areas of congregational health considered in the preceding section of this report is generous stewardship. While stewardship should be broadly understood as relating to how we manage all gifts God has given us, here we shall focus on financial giving to one's local church. It can be demonstrated, even with results from our survey, that financial giving to the local church is positively correlated with generosity of gifts generally, including volunteering time and talents. Put another way, generosity is an attitude spilling out into many areas of one's life.

### *Percent of income given to church*

For the first time in the survey series, we asked how much households contributed to their church in the previous year (excluding Christian education tuition but including regular giving, special fundraisers, and material goods). The amount contributed to all other charitable causes was also asked but is not the focus of analysis here. Because previous year's household income was also asked, it is possible to calculate—for everyone who reported an estimated amount for church contribution and for household income—the percentage of household income given to the local church. Percentage giving, as opposed to dollar amount given, takes into account income level and therefore is a fairer measure of generous giving.

The distribution among survey respondents of the calculated values of percent of income given to church is shown in **Figure 15**. The least generous, those who gave less than 3% of their incomes, are not quite a fifth (19.4%) of the respondents. The most generous, those who gave 10% or more (appropriately called tithers), are just over a fifth (21.9%), with all others giving between 3.0% and 9.9%. Median average for all respondents is 6.1%.<sup>20</sup>

Figure 15 Percent of income given to church categories



<sup>20</sup> If we include all donations to any charity, 49.8% of respondents report giving 10% of household income to church or any other charity. This estimate shows CRC survey respondents in a very favorable light, relative to a 1998 estimate that 23% of American Protestants who attend church regularly give 10% or more to charity (Smith *et al.* 2008, 39).

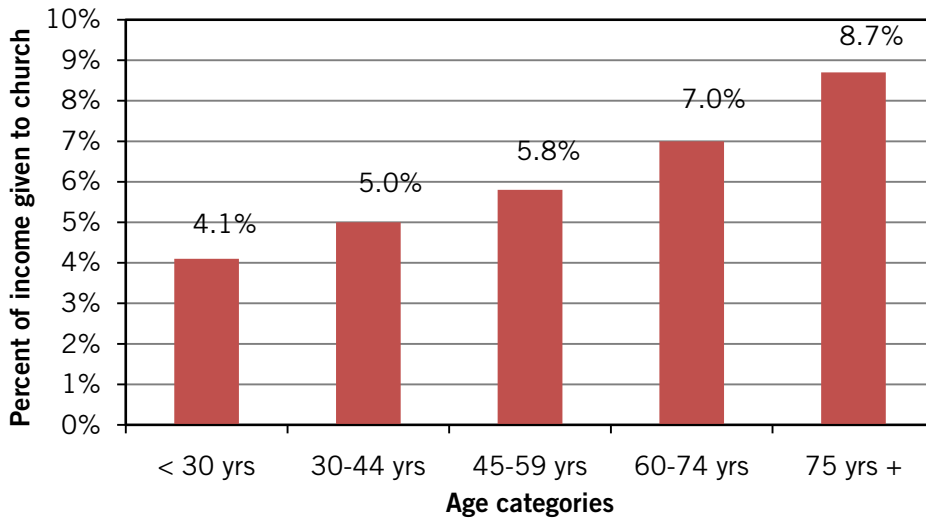
## Factors associated with generosity

Who are the generous church givers and who are the not-so-generous church givers? What factors or characteristics are associated with generosity when measured as percentage giving?

### Age of respondent

In **Figure 16**, the observed pattern for how age relates to percentage giving is quite regular. Percentage giving advances with age. The age group 75 and older has a median average percentage more than double the youngest age group, those under 30. Keep in mind, though, that this doesn't mean there are no generous givers under 30. Some, indeed, are tithers, but not enough to offset those under 30 who give a low percentage of income.

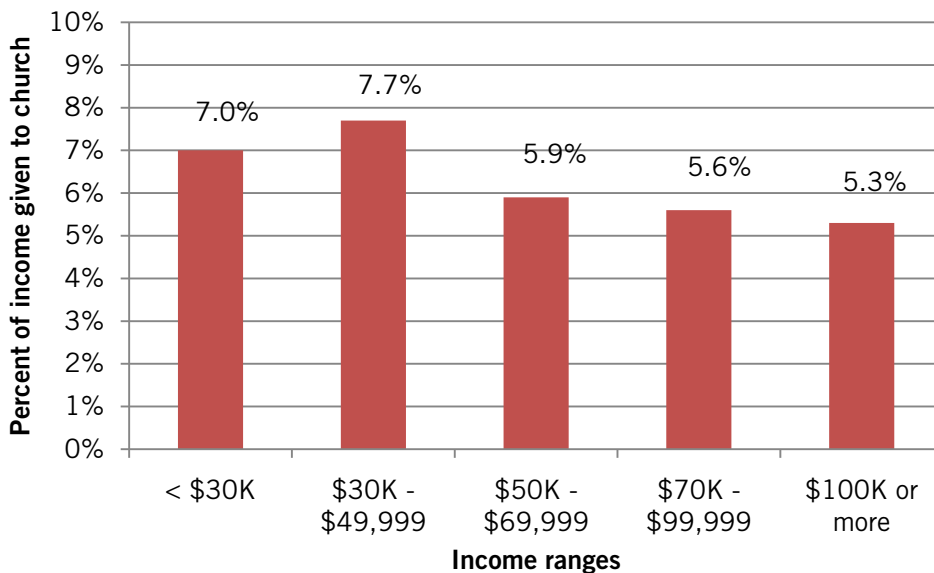
Figure 16 Percent income given to church by age categories



### Annual household income

While percent of income given to church increases with age, not so with household income. Instead, as can be seen in **Figure 17**, higher income levels are associated with *lower* giving rates. In fact, the lowest median percent of income given to church is reported by the highest income group, those with annual incomes of \$100,000 or more.

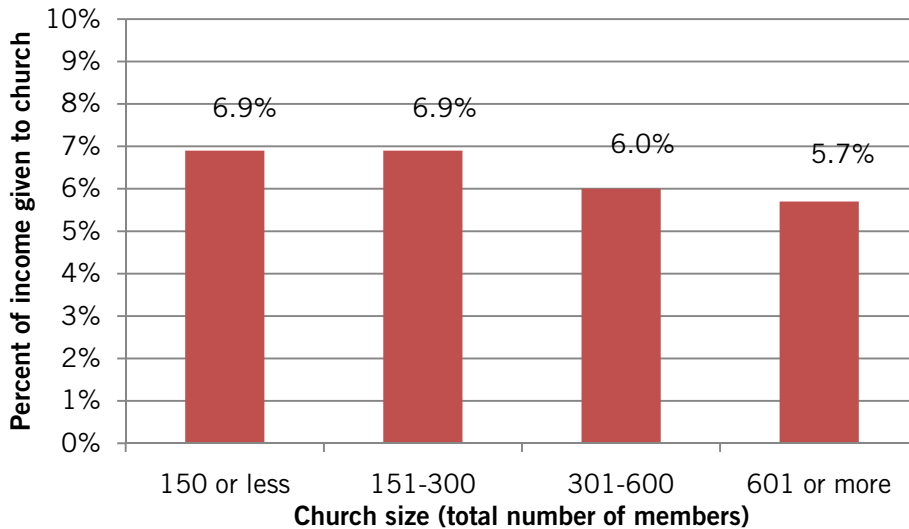
Figure 17 Percent of income given to church by household income ranges



## Church size

We often say smaller churches have fewer resources. What about resources in terms of the generosity of giving? **Figure 18** shows that, on average, participants in smaller churches tend to give a larger proportion of their income than those in larger churches. Congregations of 300 or fewer total members are blessed by an average of 6.9% of income given to the church. For the denomination's largest congregations, those with total membership exceeding 600, average percent of income given to the church drops to 5.7%. So percent of income given to one's church seems negatively associated with its size. On the other hand, larger churches may simply be more likely to retain loosely-associated members and attenders who contribute less and pull down the average.

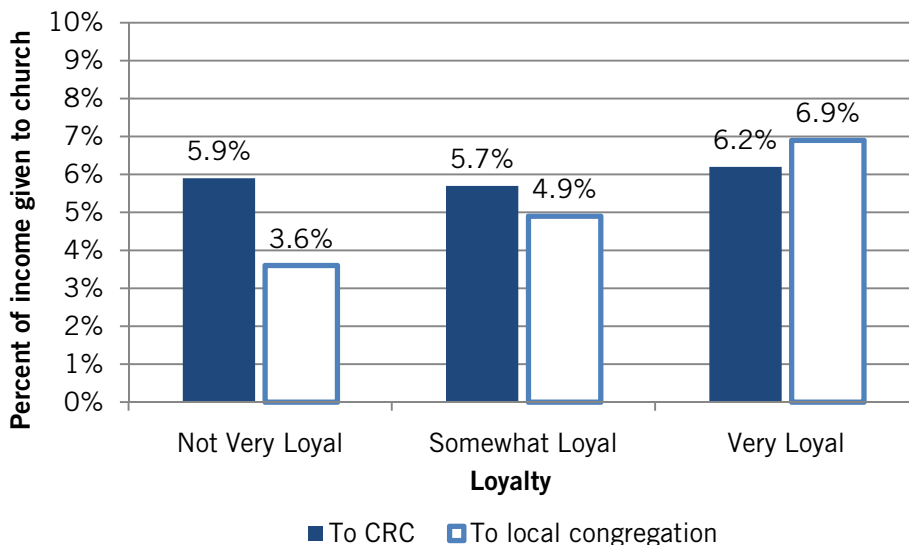
**Figure 18** Percent of income given to church by church size in members



## Loyalty to CRC and local church

Does loyalty to the church promote more generous giving? Not so at the level of the entire denomination. Level of loyalty felt toward the CRC has no effect on percent of income given to one's local church (see **Figure 19**). How loyal one feels toward one's own church, however, does impact giving to the church when percentage giving is the measure. The stronger people's expressed level of loyalty to one's church is, the larger the average percent of income they give to the local church.

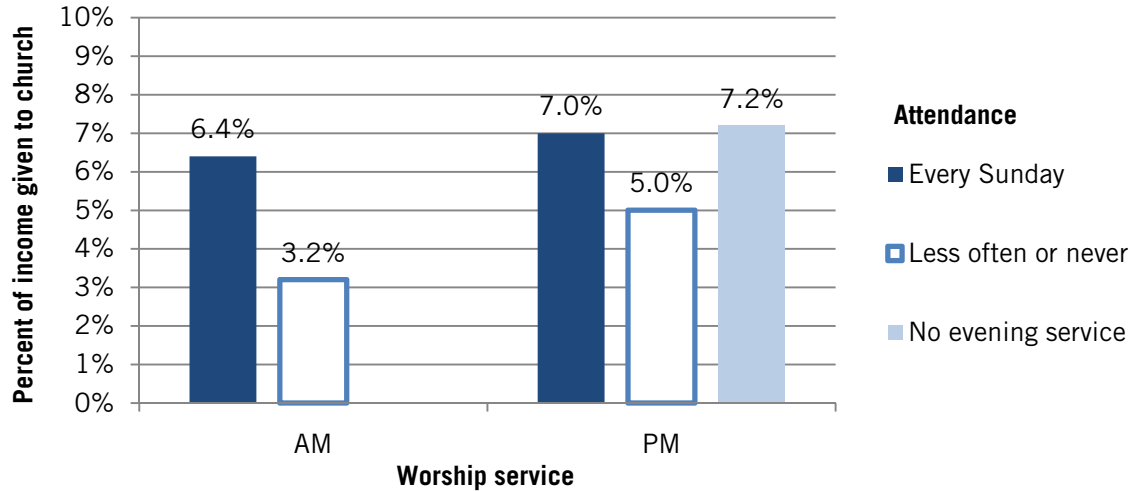
**Figure 19** Percent of income given to church by loyalty to CRC or local congregation



## Worship service attendance

Those who say they attend morning worship services every Sunday are much more likely to give a higher percent of income to their church than those who say they attend less often. As **Figure 20** shows, the median percent of income given to one's church for every-Sunday "AM" attendees is double that of all others (6.4% vs. 3.2%).

**Figure 20** Percent given to church by worship service attendance

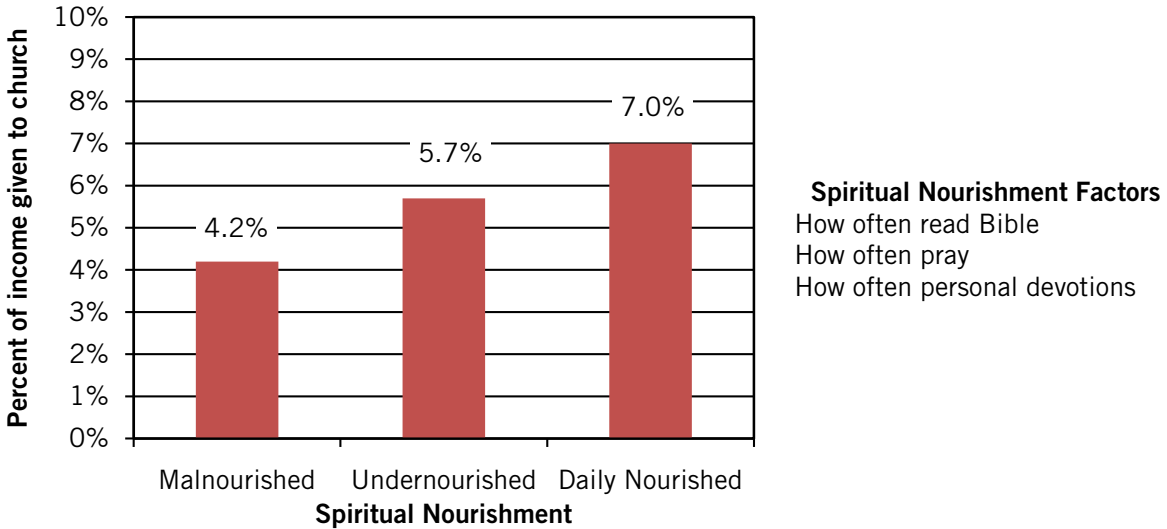


When frequency of attending evening worship services is considered ("PM" bars in **Figure 20**), we see a similar pattern, except that the gap is not as wide between regular and not-so-regular attendees (7.0% vs. 5.0%). Most striking is that those whose church offers no evening service are as generous as those who regularly attend evening worship services. Partially explaining this result is that 68% of the respondents whose church offered no evening service attended smaller churches of 300 total members or less. Recall when we observed the effect of church size (see **Figure 18** on page 32) that those attending smaller churches, on average, contributed larger portions of their incomes to their church.

## Spiritual nourishment

In **Figure 21**, three devotional practices—praying privately, reading the Bible, and having personal devotions—were combined to create a spiritual nourishment scale. Praying, Bible reading and having devotions are three primary ways by which faith is nourished. The greater a respondent's score, the more often he or she engaged in these practices. Maximum score was 12, minimum was 0. Those falling into the “daily nourished” category (scoring 9 to 12) tended to follow a daily routine of prayer, Bible reading and personal devotion. The “undernourished” scored between 5 and 8 and were likely to do these practices between weekly and several times a week. Those scoring 0 to 4 we called “malnourished” because they generally did these practices less than weekly or never.

**Figure 21** Percent of income given to church by spiritual nourishment categories

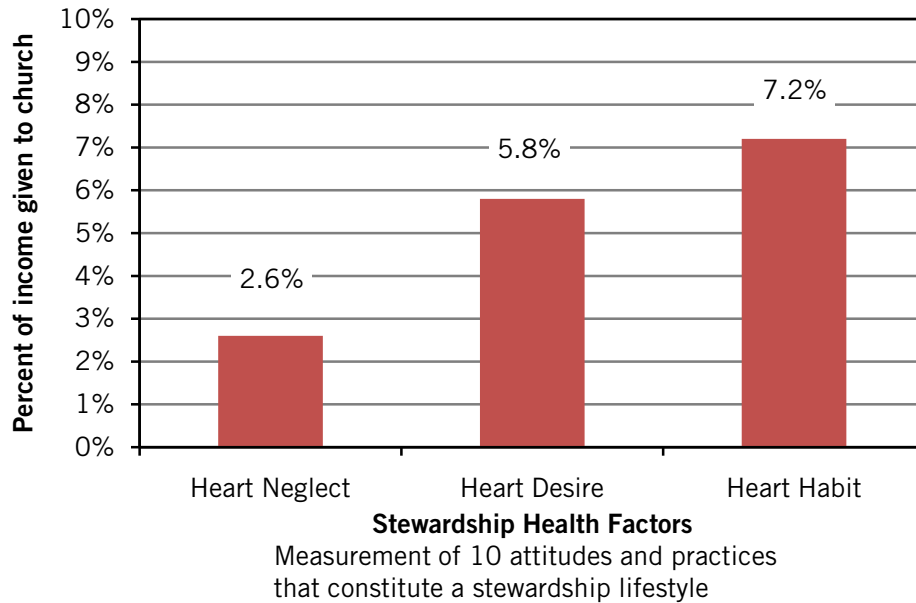


The results in the figure above give evidence of a strong, positive connection between spiritual nourishment and generous giving. On average, the daily nourished give 7.0% of their income to the church, compared to the undernourished, who average 5.7%, and the malnourished, who average 4.2%.

## Stewardship health

In **Figure 22**, again we are using a multi-item scale to classify respondents. To measure stewardship health, we combined responses to 10 stewardship lifestyle sets. These are based on the assumption that stewardship health is a matter of giving one's heart to God and developing healthy habits. Each set contained three statements, with one representing the healthiest lifestyle, another the least healthy lifestyle, and another something in between. These responses were weighted so that, as a result of adding the weights, the maximum score was 100 and minimum zero. "Heart and habit" stewards, we determined, would score between 80 and 100, "hearts desire" stewards between 60 and 79, and "heart neglect" stewards less than 60.

**Figure 22** Percent of income given to church by stewardship health factors



Our results show that stewardship health is rather predictive of generous giving. It shows stewardship health positively associated with percent of income given to church. Median percent of income given to church is highest for "heart and habit" stewards (7.2%), drops to 5.8% for "hearts desire" stewards, and to 2.6% among "heart neglect" stewards.

## Spiritual disciplines

Spiritual disciplines are practices that have been found to draw people closer to God, “into more effective cooperation with Christ and his Kingdom” (Dallas Willard, *The Spirit of the Disciplines*, 156). Those listed in **Table 6** are in no way a complete list, but they are some of the most frequently practiced: worship, prayer, fellowship, service, study, and tithing. In fact, their listing is in the order of the percentage of respondents practicing them, from highest to lowest, as shown in the second column.

Using these spiritual disciplines, we created a multi-item scale as follows. For each discipline, respondents received 1 if they practiced it and 0 if they did not. Adding these values for each respondent produced scores ranging from 0 (none of the disciplines practiced) to 6 (all of the disciplines practiced).

**Table 6** Percent of income given to church by spiritual disciplines

Spiritual Disciplines	% practicing	% income given to church
Weekly Worship Attendance	91%	3.0%
Daily Prayer	80%	4.5%
Fellowship at Church Events (3+ hrs/month)	62%	5.0%
Volunteer Service at Church (3+ hrs/month)	56%	6.1%
Daily Personal Devotions	45%	8.0%
Give 10% of Annual Income to Church (pre-tax)	22%	13.6%

What we found by looking at the connection between the spiritual disciplines scale and percent of income given to the church is a very strong, positive association. Respondents who practiced only one of the spiritual disciplines (typically weekly worship) gave to church an average of 3.0% of their income. Respondents who practiced two (typically weekly worship and daily prayer) averaged 4.5% of their income. Those who practiced all six disciplines were the most generous with their giving to church, giving an average of 13.6% each year. Indeed, our evidence supports the conclusion that practicing the spiritual disciplines nurtures generous hearts and generous giving to the church.<sup>21</sup>

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<sup>21</sup> Interestingly, we do not find easily available evidence that generosity is related to perceptions of congregational health—the correlation between percent of income given to church and the congregational health scale is essentially zero.



## V. A summary of survey respondents' comments

The survey respondents were given the opportunity to express their thoughts on congregational health in two open-ended comment sections within the survey, in order to provide a representative “character and voice of Christian Reformed congregation members.” Issues were raised in these sections that were not directly touched upon in the body of the survey, suggesting the value of elaboration. Survey respondents’ comments helped by shedding insight on the current state of CRC health and also assisted in looking toward future congregational health. People appreciated space to comment on topics that could not be adequately evaluated by the tick of a check box. The following quotation displays one member’s multi-faceted answer to one check box concerning a sense of belonging within a congregation:

*...I want you to understand that our pastors do a great job, it is the general congregation that make me sometimes question whether or not I belong or even if I am cared about...thank you for taking the time to do a survey - to ask and learn, to care about what we think and how we feel. Best wishes for your efforts and continued work on this project.*

This respondent was clarifying and highlighting specific areas which could be improved upon in his/her personal Christian Reformed Church experience. Agency-related and final comments seek to get at the core of members’ thoughts and feelings about the church and its practices. Below is a tour through the comment sections of the survey, highlighting thought-provoking comments from CRCNA members and attenders.

### **Improving denominational agency support for churches**

After being asked several questions about the health of existing CRC ministries and agencies, respondents were asked to comment in reference to this question: *In what way could CRC ministries and agencies strengthen your church?*

Quoted comments place additional emphasis on opinions already expressed through the survey’s multiple choice format. The responses were coded according to 18 categories identified by the research team. Proportions of comments in each of these categories are documented in **Figure 23**. Themes were not mutually exclusive, meaning that one comment could be coded with several themes.

**Figure 23** Themes of comments about denominational agency support for congregations

<b>Agency support themes (424 comments from 29% of respondents)</b>	<b>Percent mentioning theme</b>
Not sure/No comment	16.3%
Increase agency communication of activities	15.5%
Promote orthodox and Biblical teachings	12.4%
Enhance church leadership/training	11.7%
Increase agency involvement	11.4%
Miscellaneous	8.3%
Youth ministry improvement	6.3%
Help with pastor-church issues	5.6%
Support multicultural/urban ministries	5.6%
Extend local help & aid	4.6%
Address worship style/use of technology	4.1%
Ministries to reach neglected groups	3.9%
Denominational financial budget issues	3.6%
Listen to what churches say	3.2%
Banner-related issues	2.9%
More outreach to greater US CRC	2.2%
Address music issues	1.9%
Eliminate unnecessary agencies	1.9%

Respondents identified **a need for increased information** on how ministries and agencies were benefitting from their financial contributions to the denomination. One respondent lamented a lack of communication concerning distribution of donations:

*I feel like we use a lot of our money for ministry shares, but we don't see what those agencies are doing or how they are contributing to our church specifically. I know that newsletters are wonderful, but they don't seem to really pound it to us as to what they are doing. We never see people from Calvin here to give presentations or to talk to our youth or to sing or anything, and I would like to see more of that...*

Respondents suggested PowerPoint presentations, adult education classes and weekly updates from agency representatives as possible ways to inform congregants. This respondent jotted ideas for the passage of knowledge from pastors and agencies to churches in order to foster a relationship between giver and receiver:

*Continue to develop methods of communicating information to each church and pastor. Continue to keep us informed of the joys and the trials of each agency thru the Banner and fliers about specific ministries. Urge our pastors to highlight an agency a month or something to educate those not familiar with the agencies.*

As identified in **Figure 23**, the second most frequently mentioned theme in agency-related comments called for **the promotion of orthodox and biblical teachings through ministries and agencies**. This theme was touched on by this respondent, explaining:

*CRC ministries and agencies can strengthen our church by rediscovering the truths of the Bible as explained by our reformed doctrines...*

**Youth services** were also described as needing redirection toward biblical teachings. One respondent believed effective change could be made “by sending someone to give testimony to mainly youth regarding what Christ has done in their lives in the area of purity, drugs, relationships, practical Christianity.”

Several respondents recognized that **further training for both the pastor and congregants**, perhaps facilitated by agencies and ministries, could benefit individual churches and communities directly. One respondent asked for agencies to:

*provide trainers or training for youth workers and leaders and Sunday school teachers, discipleship training, mission trip partnerships and opportunities for youth and adults,*

Another respondent recognized a specific need in his/her own community for further training of pastors and congregants by suggesting that agencies and ministries “provide training to some of our members so that we can reach out to the Hispanic Community.”

Overall, these comments showed support for changes in distribution of information about agencies and ministries. Many seemed critical about how money is being spent and wondered about a more beneficial way to spend church money, often citing local beneficiaries. One commenter highlighted the sentiment of many respondents, calling for collaborative change throughout the denomination in regard to agencies and ministries. We close this section with just such a suggestion:

*CRC ministries might benefit from connecting more with other similar agencies from other denominations in a more combined and stronger presence. Especially in the world we live in presently, we need to band together and become more effective in our witness as the body of Christ. It is not healthy when we believe that our denomination cannot become involved or support other denominations due to the fact we may have some ecclesiastical differences with them [other denominations].*

## Respondents' final comments on the survey and general topics

After completing the survey, respondents were given the opportunity to write open-ended commentary on anything pertaining to the Christian Reformed Church or the present survey. Questions that respondents answered throughout the survey provided a bird's eye view of the health of congregations; however, it did not allow for personal narratives of congregational and denominational health. This final section highlights the areas which respondents deemed necessary to share observations and concerns. Respondents were presented with the following text:

*Thank you so much for your response. Your comments on the survey and on our life together as part of Christ's body are welcome. If you wish to remain anonymous, please do not use any names or other information that might reveal your identity.*

Themes differed slightly from the agency-support comment section. As illustrated in Figure 24, the research team identified 17 themes in the responses. Just as was the case in the agency-support section, themes are not mutually exclusive. For example, comments which reference the survey and CRC exclusiveness will be represented in both theme totals.

Figure 24 Themes detected in final comments

Final comment theme (304 comments from 21% of respondents)	Percent mentioning theme
Survey	40.8%
Praise for CRC or for individual church	21.4%
CRC doctrine (Reformed identity)	17.1%
Church as a serving agent: internal (within the congregation)	12.4%
Pastor or church leader	10.0%
CRC exclusiveness	9.7%
Church as a serving agent: external (community)	7.4%
Miscellaneous	7.0%
Call for biblical adherence	6.4%
Worship: too modern	4.7%
Do not support women in office	4.0%
Church growth	4.0%
Financial issues	4.0%
CRC governance	3.7%
Worship: too conservative	2.7%
Evangelism	2.3%
Support women in office	1.3%

After mentioning general comments about the survey, **praise for the denomination and individual churches** was most often mentioned in the final comments section. Many respondents wished to convey their love for the CRC tradition in conjunction with constructive criticism. The respondent quoted below exemplifies this theme:

*Doing this survey reminds me that the CRC has had a powerful influence for good on my life. However, I also recognize it has been too closely identified with the Dutch/American culture and I have sometimes felt an outsider to that. My current church is struggling with a small membership even while we hold a vital vision for our ministry. The small size of membership causes active members to feel overburdened at times and not always adequately nourished. It is hard to keep essential programs running well. At the same time the work of this ministry can be invigorating and the example of other believers is encouraging.*

Other people wanted to share enthusiasm about where they saw the Lord leading their own churches. Respondents expressed how no matter where the nuclear family goes the "CRC...has been our family here

for all major events.” In the following example, this congregant wished to highlight some positive assets unique to this congregation:

*Thank you for doing this survey! I really, really like my congregation! We have our weak areas, no doubt...but the people here are gracious, welcoming, and friendly. There are many beautiful and strong followers of Jesus here, and that serves as an encouragement to me in my own faith development. The worship is enthusiastic and inspiring. The sermons convict me almost every week. We describe ourselves as 'non-traditional,' and I consider that to be a strength. We are more interested in the heart than the clothes on Sunday morning, and we want to be a light to our community. I'm SO thankful for this congregation!*

CRCNA respondents provided depth to the major issues in the church with an overarching theme of how “to translate a reformed perspective to a changing culture.” Particular areas which will be outlined below are CRC exclusivity, women in office, music styles, pastoral leadership and biblical adherence. The following is a tour of the major points of the final comments section.

As mentioned above, many of the comments focused on **being more inclusive** and providing resources outside and inside the church for minority groups. This respondent noted his/her heartache with attempts to join a CRC church:

*I do not believe that there is room for singles in the CRC church. I have found it difficult to integrate myself into the CRC church. There are no programs or ministries to reach out to, bless and be blessed by singles. I have recently quit attending church on a weekly basis, due to the fact that I do not believe that my presence is either valued or important to [church name], or any other CRC for that matter. When I do occasionally attend, no one makes a comment that my presence has been missed. Does anyone really care?*

A handful of respondents felt **the issue of women in office** to be noteworthy, writing:

*I like the direction that the CRC is heading with the inclusion of women. It discourages me from wanting to be a part of a church that does not recognize the gifts of women and attempts to assign all of them to be Sunday school teachers.*

Several more respondents reported that they do *not* support women in office than those who reported support. A *Banner* reader reported written approval toward acceptance of women in office in *Banner* articles, making this commenter feel “as if those who are against women in office are spiritually less.” One side of the argument can be summed up in this comment, touching on women in office and sexual purity:

*I am afraid of the direction the CRC is taking in regard to social issues such as women in the offices of deacon, elder or pastor. Also the direction as to sexual promiscuity be it hetero or homosexual, being acceptable behavior. These issues are dealt with clearly in both the Old and New Testaments and for our denomination to compromise there is a trend that can only weaken our witness to all people as to the veracity of Scripture. We must not consider unity above Truth!*

Respondents felt it necessary to elaborate on **the role of music in a worship service** and touched on benefits and pitfalls of traditional and contemporary musical styles:

*When we first started to worship together, we had much more of a contemporary style worship but lately it has returned to more a blended but leaning heavily on traditional style. We have at least two liturgical readings per service which, in my humble opinion, leads to 'mechanical' responses. Both my spouse and I have considered leaving our church and going to a much more mission, community minded church (not CRC).*

One respondent called for a careful balance between worship music that is too conservative and too modern:

*It is critical to define the difference between Biblical mandates and cultural values and personal opinions. Strong Theology is needed, but the practice of it in the worship setting is often poorly*

*executed. Some congregations have dull, joy-less worship, others have insipid, artificially emotionally based 'Praise' events. Careful balance needs to be cultivated to assure theologically sound language for praise and liturgy, and tasteful expressions of joyfulness and gratitude.*

**Pastoral leadership** was also a major topic in the final comment section, with many mentioning a lack of in-depth preaching based in theology and an absence of congregational outreach by senior pastors. A CRC member offered frustrations in the hope for an answer:

*The number one issue facing the CRC or any denomination of the universal church is the faithful preaching of the Word. Preach and teach, and all the rest will follow. Preach and teach, and the Spirit will bless. If you are more concerned with form and appearances, with feelings and numbers, you are not the true church. I am a fifty four year old life-long member of the CRC and it pains me to say this - I think the denomination is dying. And the reason is there are so few preachers left. They want to tell stories, fill the worship service with non-worship activities, are worried about style over content, are taught to 'dummy it down' - after all, no one in the pew could ever learn from the Greek or Hebrew or Aramaic. I hunger and I must feed myself. Why?*

Related to pastoral leadership, there were several respondents who called for greater biblical adherence. One respondent wrote that changing creeds and doctrines to attract new members would be a “huge danger.” Below, another CRC member commented on worrisome trends in the CRC.

*I believe our church is following the denominational trends, however, I am completely discouraged about the liberal route the denomination has taken, and am planning on leaving the denomination in the future due to this. Our denomination has lost sight of the Bible and its teaching, choosing instead to become 'culture sensitive' instead of sticking to its Biblical and historical foundations. The CRC leadership has adopted Biblical interpretations of social issues not using the Bible, but preferring to look away and follow the crowd. I no longer feel I need to be CRC, since CRC is becoming to be like everybody else. I will go somewhere else to find a church that isn't afraid to be different than the crowd, and follow the Bible.*

Others also mentioned **a lack of practical member knowledge about the Christian Reformed Church**. One respondent explained it was difficult to describe his beliefs to one not familiar with the CRC, “finding that my traditional CRC upbringing did not equip me very well for the battle.” Another respondent mentioned that they “would like to see some statements...that explain our faith as juxtaposed with Islam, Hinduism, Atheism, Human secularism, etc as opposed to explaining our faith as juxtaposed to other denominations, esp. Catholicism.”

What better way to ‘take the pulse’ of a denomination than to listen to its heart beating? Again, the issues which seemed most prevalent throughout the final comment section revolved around CRC exclusivity, women in office, music styles, pastoral leadership and biblical adherence. Through these comment sections, respondents were able to have their say and provide insight into how best to interpret the statistical information from this study. The “character and voice” of these respondents is readily accessible through this wealth of responses.

## VI. Concluding remarks: five keys to the future

This 150th Anniversary Survey, including the entire survey series of which it is a segment, has generated a ton of information about the people of the CRC. There is much more to be learned from the data. And we will learn much more. Not all the possible results from this survey have been reported. What we have reported has been intentionally selected. Our focus here has been the same as the current focus of the denomination's leadership: creating and sustaining healthy congregations.

What have we learned from the results covered in this report about creating and sustaining healthy congregations? We think there are five keys to healthier congregations in the CRC's future. We need to develop ways to help churches effectively accomplish for all participants:

1. spiritual development,
2. stewardship education,
3. disciple-making,
4. leadership training and
5. keeping in touch.

In one of its sessions to plan this survey, the Advisory Group engaged in a lengthy discussion about the "glue" that would hold the denomination together in the future. The CRC is changing, so the reasoning went, and the old glue of common ethnic roots and culture is no longer working as effectively. Our challenge today is to find and apply different glue, one that holds onto the strengths that are still found alive and well within our many congregations. But a glue that takes into consideration new challenges that we face. After pondering the results of this report, our proposal is that we seriously consider adopting the five keys to healthier congregations listed above. These are not intended to replace the 11 areas of congregational health but to propose the means by which our congregations can grow healthier in all 11 areas. Toward this end, let us all pray to our Father for wisdom.

## Appendix A: Questionnaire text and other online resources

Interested readers can find the original web questionnaire, a Microsoft Word version of the questionnaire, copies of this report and other supporting materials at this Internet address:

<http://www.calvin.edu/weblogs/csr/crcsurvey2007>

To request print materials or other items not found on the above web page, contact us at [csr@calvin.edu](mailto:csr@calvin.edu) or 616 526-7799.

## Appendix B: Questions used to build scales

### *Personal health scale*

*5-point scale from "Definitely untrue" (1) to "Definitely true" (5)*

1. The Bible is my primary rule and guide for life.
2. I engage regularly in conversations about the Bible with others.
3. I intentionally build relationships with non-Christians.
4. I pray for specific people who do not know Jesus Christ.
5. I am connected with others in my church through a small group.
6. I trust that I will be cared for by people in my church when I am hurting.
7. In the past six months, I have talked with someone in my congregation about my spiritual life.
8. I ask for God's wisdom and guidance in making daily decisions.
9. I am inspired to act upon what I hear and learn in the preaching of the Word.
10. I approach the worship services of our church with anticipation that God will move my heart.
11. I am encouraged by leaders to share my faith story.
12. I am sure that someone in leadership will listen to me when I have concerns.
13. In the past 12 months, I made a change in my life because of the danger of greed and materialism.
14. In the past 12 months, I've taken specific actions that reflect my stewardship of God's creation.
15. In this congregation, I participate in opportunities to learn and grow.
16. Someone in this church shows concern about my development as a disciple of Jesus.
17. As a part of this congregation, I know what is expected of me.
18. I am needed to achieve our church's mission and vision.
19. I take specific actions (e.g. give time and/or money to causes, communicate to government officials) to promote justice and righteousness.
20. I have taken specific actions to simplify my lifestyle.
21. In the last year I have intentionally encouraged a child or young person in their spiritual life.
22. I have accepted changes in the church that have helped us be more responsive to children or youth.

## ***Reformed “mind” or worldview scales***

**3-point scales from “Least important” (1) to “Most important” (3)**

### **Doctrinal scale:**

- The Bible is my primary rule and guide for life.
- Holding to the historic creeds of the church
- Believing that Scripture is the Word of God
- Understanding life as sin, salvation, and service
- Accepting the 5 points of Calvinism (TULIP)

### **Pietistic scale:**

- Having a personal relationship with Jesus
- Daily reading the Bible
- Living a life obedient to the Lord Jesus
- Celebrating our new life in Christ
- Renewing life in the Holy Spirit

### **Kuyperian or cultural transformationalist scale:**

- Confessing that Jesus is Lord of all
- Developing a world-and-life view that relates Christ to culture
- Obedying the cultural mandate
- Pursuing social justice in society
- Being a change agent in restoring the Kingdom of God



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