Far as the Curse is Found: Evangelical Protestants and the Affordable Care Act

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FAR AS THE CURSE IS FOUND: EVANGELICAL PROTESTANTS AND THE AFFORDABLE CARE ACT

By

Berkeley Franz

A DISSERTATION

Submitted to the Faculty of the University of Miami in partial fulfillment of the requirements for the degree of Doctor of Philosophy

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the requirements for the degree of
Doctor of Philosophy

FAR AS THE CURSE IS FOUND: EVANGELICAL PROTESTANTS AND THE
AFFORDABLE CARE ACT

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This project considers evangelical interpretations of the Affordable Care Act. Particularly important is that this research engages relevant literature on evangelical social and political particularities. Additionally, a theoretical question is raised whether the evangelical worldview, emphasized as a distinguishing mark of this group, is thought to be compatible with government intervention into the organization of health care. Particularly, how health and illness are interpreted, whether social change is possible, how social change could unfold, and whether contemporary policies are appropriate were key research questions guiding this analysis. A qualitative approach was taken, largely influenced by grounded theory methodology, and twenty-nine Evangelical Protestants participated in in-depth, semi-structured interviews. The findings suggest that Evangelicals are interested significantly in caring for others and health care is no exception. However, complexities exist regarding the importance of personal accountability, religious freedom, and original sin. Most importantly, a variety of perspectives on the Affordable Care Act exist. Recommendations are made that connect evangelical perspectives to community-based health approaches and frame policies to gain evangelical support.
Acknowledgement

No man is an island entire of itself; every man is a piece of the continent, a part of the main; if a clod be washed away by the sea, Europe is the less, as well as if a promontory were, as well as any manner of thy friends or of thine own were; any man's death diminishes me, because I am involved in mankind. And therefore never send to know for whom the bell tolls; it tolls for thee. –John Donne

I would like to acknowledge the many individuals who contributed to this research. Without this support, this project could not have been successful. First, the Sociology faculty at the University of Miami should be thanked for their dedication to the graduate students and for encouraging us to think sociologically about human life. Further, the emphasis on connecting academic study to the need for social change encouraged me to take on a project addressing the possibility of change within the American health care system.

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Chapter One: Introduction

Contemporary debates over the nature and delivery of health care in the United States have become increasingly relevant with recent changes in health care laws enacted by the Obama Administration in 2010 and upheld by the Supreme Court in 2012 (Harrington 2010). Disagreement over what health care services should be covered and whether government intervention on such matters is necessary at all continues among the general population. Although some religious groups have initially been quite vocal in criticizing these changes, there has been a spectrum of responses among these groups. Preliminary evidence suggests that evangelical Protestants, a sizeable and politically influential sect of Protestantism, have been opposed significantly to all parts of health care reform, as compared to mainline Protestants, Black Protestants, and Catholics (Grant 2012). Further, this opposition is considerably greater than that found among the general American population (Brodie et al. 2013).

Although Evangelical Protestants have been assessed thoroughly with regard to their particular beliefs about government intervention in addressing persistent socioeconomic stratification and racial discrimination (Emerson and Smith 2000; Hunt 2002; Hinojosa and Park 2004; Edgell and Tranby 2007), very little research has been devoted to the relationship between evangelical religious doctrine and views toward health care reform. Further, past research has not linked substantive theological beliefs among evangelicals to political beliefs and behavior. This study involved the use of qualitative methods to investigate evangelical beliefs about non-Evangelicals more
generally and the nature of community, in order to understand how these religious individuals interpret the meaning of health and illness and possible reform in the organization of health care.

*Conservative Protestant Theology and Social Responsibility*

In order to establish why Evangelicals might be unique with regard to thinking about health care reform, key aspects of evangelical faith must be distinguished from other variants of Conservative Protestantism. Such distinctions are especially necessary given the historical confusion regarding Conservative Protestants and the tendency to combine many different groups under the heading of “fundamentalist” or “evangelical” (Woodberry and Smith 1998). Although most Conservative Protestants share specific beliefs about the authority of the Bible and the relationship between the individual and God, there are important differences with regard to thinking about responsibility toward others and involvement in the secular world. Such differences among religious groups in considering how best to integrate religious beliefs with social involvement have been a concern recently of both sociologists and religious scholars. How religious ideologies might legitimate specific duties, and the relative significance of this life or the next, have been key concerns in this literature (Putnam 2001; Smith 1998; Wuthnow & Lawson 1994; Wuthnow 1999; Lindsay 2007; Hunter 2010).

Within this body of work, however, relatively little consideration has been given to the theoretical connections between various Conservative Protestant theologies and their explanations for persistent social inequality and the possibility of social change, particularly within the context of health care organization. The question remains therefore whether there might be an Evangelical-specific strategy for thinking about social change,
and whether this approach could be tied to notions of religious individualism. Such individualism has been linked theoretically to thinking about important questions of human nature, ethical responsibility toward others, and the notion of community (Slater 1976; Bellah e. al. 1985; Dussel 1993; Putnam 2001).

Specifically, this project involved asking whether individualism is a key aspect of evangelical theology, and whether such thinking is compatible with the collective strategies necessary to address the health care needs of the general population and growing health inequalities (Robert and House 2000). Although many critics have argued that there has been a historical relationship between evangelicalism and individualism (Bellah et al. 1985; Smith 1998; Hervieu-Leger 2003), very little qualitative research has sought to understand how individuals negotiate these beliefs. One recent ethnographic study concluded that evangelicals cannot be uniformly reduced to individualism because social relationships are so highly emphasized in these communities (Elisha 2011).

Because evangelicals believe that caring for others is a key ethical commandment, they maintain a concerted effort to be involved personally in the lives of those around them. However, what is not clear is whether such responsibility to others is understood to occur on primarily a personal level, and to whom more generally this responsibility pertains. One interpretation is that such ethical duties refer to personal acts of charity and require that individuals form lasting relationships with those in need. If so, such strategies might be understood as fundamentally incompatible with the government intervention involved in contemporary health care reform.

A safe assumption, based on past polls, is that evangelicals will reject the versions of health care reform currently being implemented (Grant 2012), but less clear is how
these political beliefs are interpreted within the context of evangelical theology.

Ultimately, whether evangelicals agree or disagree with this specific policy change is not as important as understanding why. Because evangelicals have been consistently more likely to oppose policies aimed at redressing various forms of social inequality (Emerson and Smith 2000; Hunt 2002; Hinojosa and Park 2004; Edgell and Tranby 2007; Brown 2008b; Tranby and Hartmann 2008), attention should be directed to how core evangelical theological beliefs might be related to thinking about the nature of both ethics and community.

Further, there is important evidence that contemporary health inequalities, to which contemporary health care reforms are aimed, relate to more persistent problems of inequality and lack of resources in American society (Link and Phelan 1995; Roberts and House 2000; Ross and Mirowsky 2000; McKinlay 2005). Thus this analysis does not assume that health care reform alone will be able to eradicate such disparities. Evangelical views are particularly important on this matter, however, because this interpretation provides a specific example of thinking about the nature of social involvement and responsibility toward others. Although such beliefs on health care reform are important, the more basic question will address whether evangelical theology is understood by individuals as being compatible with more general social interventions that address inequality. Because evangelical Protestants represent at least a quarter of the American population (Chaves 2011) and are one of the few religious subgroups that are not declining, they have the potential to be politically influential. Indeed, Evangelicals
have been involved increasingly in many public debates over the nature of social responsibility and subsequent interventions (Hunter 1992), and thus their perspectives on such policies are important to consider.

**Evangelical Distinctiveness**

In order to understand the relevance of mainstream evangelical beliefs in thinking about health care reform, mainline Evangelicals must be differentiated from other groups, most importantly fundamentalists and Black Protestants. Further, mainline evangelicals can be distinguished from the more politically progressive branch of evangelicalism, often referred to as the evangelical left. Although these groups share many of the same theological beliefs, they conceptualize the nature of community and ethics quite differently. Such differences are likely to influence how individuals think about being involved in the secular world and how their religious beliefs inform such responsibilities.

The first distinction that must be made is between Evangelicals and Protestant Fundamentalists. Although both groups share a common history that stems from the broader evangelical movement of the eighteenth and nineteenth centuries, in the early twentieth century the terms “fundamentalist” and “neo-evangelical” came to be applied to those who would not abandon specific Protestant beliefs (Marsden 1991). During this time they were forced to confront the rise of liberal theology, a framework that encouraged a more positive outlook on human contributions to knowledge and was characterized by an attempt to understand the Bible as a historical rather than a timeless, inerrant document (Cox 1984). Further, certain liberal theologians attempted to ground the truth of religion solely in human experience or psychology (Otto 1950;
Schleiermacher 1988). Such theology was problematic for conservative groups because a historicized interpretation took precedence over universal religious truths.

As a rejection of such theology, conservatives began to leave mainline denominations and form separate groups, earning them the name “fundamentalist” in the 1920’s because of their refusal to discard key aspects of their interpretation of Christian faith (Marsden 2006). Fundamentalists came to be defined by their often rigid and divisive reaction to liberal theology in the form of specific beliefs and cultural practices that tended toward separatism (Marty 1988). In this regard, rejection of the secular world has been defined as a key feature of fundamentalism (Riesebrodt 1990). Because of this rejection, fundamentalists would not likely see much use in intervening in secular life, despite disagreeing with many social practices. The larger evangelical group, however, is harder to categorize due to increased diversity within this group with respect to beliefs, rules, and denominational membership. Although fundamentalists largely left mainline denominations, not all evangelicals did (Marsden 1991). “Evangelical,” according to Marsden, is a label simply referring to those who maintained certain beliefs about the authority of the bible, the truth of God’s work in the Bible, salvation through Christ alone, the call to evangelism, and the importance of a regenerated life (Marsden 1991: 5). Evangelicals, in this sense, focus on the importance of developing a personal relationship with God, while at the same time remaining engaged with both other Christians and the secular world.

Although both groups share the declining importance of denominational authority in relation to the power of churches and the right of the individual to address God directly, differences can be located in how persons are supposed to relate to the secular
world. At this juncture, Martin Marty’s distinction between the political and public aspects of religion is instructive (1987). He argues that though fundamentalists are political, that is, they take stands on many issues and are thus engaged at least ideologically with the world, evangelicals engage in a more public form of religion whereby dialogue is fostered with both secular culture and members of other religions. In other words, there is a conscious attempt to remain engaged in the world of others and a conviction that human reason can be instrumental in such a process.

In addition, others have argued that fundamentalists place significant emphasis on eschatological specifics and thus potentially engage in a type of fatalism with regard to the possible improvement of a sinful world. Harvey Cox argues this point in stating, “The Christ-is-coming-soon eschatology not only discourages any kind of work for constructive change, it can also produce a kind of overheated fatalism: if the big bang is going to come, then let it happen soon” (1984; 65). Although Evangelicals are not shy about identifying problems in the world, they have been characterized as seeing such evils as signaling the need for more involvement in the world, rather than less (Smith 1998).

Additional distinctions are necessary between mainstream Evangelicals, the Evangelical left, and Black Protestants. Although these groups share the commitment to engage the secular world ideologically, politically, and personally, important differences exist. Mainline evangelicals are more likely to oppose certain types of government involvement in favor of individual-level strategies. These differences have been most striking in survey research that has compared beliefs about the causes of and solutions to poverty identified by mainline Protestants, Black Protestants, and white Evangelicals. For
example, mainstream white Evangelicals are more likely to explain poverty to be the result of individual failings rather than structural factors such as educational inequality or racial discrimination (Emerson and Smith 2000; Hinojosa and Park 2004; Edgell and Tranby 2007; Tranby and Hartmann 2008). Further, white mainstream Evangelicals are more likely to recommend individual-level solutions, such as congregational ministries that provide food and thrift as opposed to job training or voter registration (Brown 2008a; Brown 2009b).

Although less systematic research has been done on the Evangelical left, they have been involved in linking evangelical theology to the need for radical interventions to address social inequality (Sider 1999; Wallis 2008; Keller 2010; Pally 2011). This distinguishes them significantly from mainstream Evangelicals, in addition to the fact that they have not enjoyed much political influence. Although these groups share many important similarities with regard to theology and social involvement, the important question is why a shared theology leads to very different interpretations of ethical responsibilities. This dissertation project will involve the examination of whether individualism is particular to evangelical theology and might relate to interpretations of the nature of community and social responsibility.

*Individualism in Evangelical Theology and Secular Ideology*

Although the question of individualism in evangelical theology and ethics will be taken up at length in Chapter 2, a brief discussion at this juncture might be helpful with respect to how this issue influences social engagement. Further, this individualism should be located within the history of the evangelical tradition to gain insight into the specific evangelical lifeworld (Schutz 1962) and the theme of collective health care interventions.
Particularly important is that the focus of any change will likely be the individual, most probably involving personal responsibility, rather than changes directed to the larger social system. Any interventions by Evangelicals, accordingly, might be directed at the individual rather than institutions.

Individualism in evangelical theology is both a legacy of Reformation theology and a product of a market-based ideology. Many scholars point to the Reformation as solidifying a personal relationship between the individual and God, which no institutional authority could compromise (Smith 1998). This relationship emphasizes the individual and correspondingly deemphasizes worldly authority. Thus individual interpretations of the Bible are essential to understanding even earthly and material matters. Following from an emphasis on personal transformation and radical conversion, individual choice comes to be an important factor in both morality and salvation. Perhaps these sentiments can be understood as influencing contemporary beliefs on individual responsibility (Emerson and Smith 2000; Elisha 2011). If morality is understood to reflect personal decisions, then individuals might be expected to respond responsibly to their respective conditions and make good choices. Thus individualism in such theology might convey the notion that ethical responsibilities are personal in nature, and Evangelicals may therefore be more likely to focus on personal choices rather than interventions on a broader level.

Despite this important influence from evangelical theology, evangelical beliefs often developed in tandem with individualistic themes from secular ideologies. Although the period since the 1960’s should not be characterized simply as a movement toward individualism, there are key features of the baby-boomer generation associated with such
a transition (Elliot and Lemert 2009). Bellah and colleagues note this trend in their now famous work, *Habits of the Heart*. They argue that devotion to a career and personal expression largely characterize American individualism, and though coming from a much longer transition, reinforced these themes (1985). Additionally, the growth of humanistic psychology during the latter half of the century emphasized the importance of constructing personal identities and reaching self-actualization, both highly individualistic operations (Prilleltensky 1994; Frank, Meyer, and Miyahara 1995; Murphy 2012b). Such themes have been criticized as discouraging institutional change by emphasizing the importance of personal development. Thus individualism in this context might potentially be related to thinking about social problems as an aggregation of personal issues.

In the meeting of evangelical theology and Western individualism, personal development seems to be compatible with the conversion experience and the need to look inward as an important source of change. Such an emphasis on making good religious choices in the religious marketplace (Iannaccone 1998; Putnam 2012) further suggests that important cultural commitments ultimately unfold on an individual level. Due to this alignment between certain theological and cultural themes from secular modernity, such as the freedom to make personal decisions and the desire to improve oneself, Evangelicals will likely emphasize personal strategies when thinking about social change (Smith 1998; Emerson and Smith 2000; Hunter 2010). Collective interventions, such as contemporary health policy initiatives, might therefore be understood to violate the individual’s ability to make decisions about ethical responsibility and individual behavior.
Although individualism is important for thinking about health care reform and social change more generally, this emphasis will also likely influence how Evangelicals think about ethics and the nature of community (Slater 1976; Bellah et al 1985; Putnam 2001). If ethics and sin are interpreted on an individual level, then this viewpoint downplays the importance of social responsibility. If sin is understood as a private affair between an individual and God, individuals may have no social responsibilities beyond helping others become good Christians. Thus material needs may be radically downplayed in favor of more enduring spiritual well-being.

Such individualism potentially also might relate to thinking about the nature of community. Because Evangelicals make important distinctions between authentic Christians and others, usually in terms of being regenerated or “born-again,” will ethical responsibilities be directed to strangers or merely personal acquaintances? A broad social initiative, such as health care reform, may be anathema to a theological perspective that is not very inclusive. Furthermore, whether a common foundation is necessary in order to unite persons within a community might suggest that social change cannot occur without shared perspectives. If individuals must be tied together through an external source, an inclusive community might be interpreted as utopian. While connecting with others is certainly an ideal, imagining a widespread community might occur only in the distant future. In this sense, interventions that address broad responsibilities toward others might violate a definition of community that is predicated on shared religious beliefs rather than a fundamental condition of human existence.

As mentioned previously, the important issue is the nature of the individual that is proposed in Evangelicalism. The key argument in this proposal is that evangelical
theology incorporates individualism in a unique way that correspondingly uplifts the person in relating to God yet remains profoundly committed to being active in the secular world and in the lives of others, but on predominantly a personal level. In past work, Evangelicals have been criticized often as politically ineffective because of the emphasis on personal relationships, in contrast to addressing key institutions (Smith 1998; Hunter 2010). Although some research has suggested that Evangelicals are integrated into elite institutions and thus cognizant of important power structures in society, most evangelical involvement has fallen into the area of moral issues such as abortion and homosexuality, and away from addressing persistent inequalities, such as in health care (Lindsay 2007). Thus a key concern of this research will be to understand how evangelicals negotiate theological beliefs and different strategies for social change, specifically in terms of the organization of health care. The title of this project, “As Far as the Curse is Found,” comes from the Christmas carol “Joy to the World.” This phrase was brought up during an interview and captured the complexity around sin in the world and whether God, humans, or both can address this condition.

Although the specifics of Evangelical theology will be discussed along with potential implications for thinking about social change in Chapter Two, Chapter Three will introduce an alternative worldview in order to underscore differences. In an attempt to emphasize the importance of individualism within evangelical theology, this chapter will consider the relevance of defining community life in particular ways. Most importantly, this chapter will demonstrate the importance of theoretical frameworks for suggesting certain images of social life.
**Evangelical Conceptualization of Health and Illness**

Because this research will consider the specific example of contemporary health care reform, a subtheme of this project will be the particular conceptualizations of health and illness within Evangelicalism. Although a main goal of this research is to understand how Evangelicals think about social responsibility and strategies for social change, additional themes will be explored in order to give meaning to specific interpretations of the organization of health care. Thus theoretical work from the field of Medical Sociology will prove instructive in considering the context of health inequality. Understanding how Evangelicals think about the importance of health and illness will likely influence whether health inequalities are thought to be an important problem. In addition, whether illness is understood to be primarily spiritual or physical will be related to thinking about appropriate strategies for care.

Although there has been relatively little qualitative research in the area of religion and health, important questions have been raised about whether Conservative Protestant theology is consistent with western biomedical ideology (Comaroff 1982) and treatment (Csordas 1994; Mansfield, Mitchell, and King 2002; Wade et al. 2008). There is evidence that religious beliefs are influential in thinking about health and illness both among patients (Zborowski 1952; Zola 1966; Freidson 1970; Burdette, Hill, and Moulton 2005; Moulton, Hill, and Burdette 2006) and practitioners (Sprung et al. 2007). However, though there is a body of quantitative research that links religious affiliation to a variety of health outcomes (for reviews see Koenig, McCullough, and Larson 2001; Hill and Cobb 2011), there is considerably less known about how religious persons, including
Evangelicals, think about the physical body (Anderson 2011) and particular health behaviors (Benjamins 2006a; Franklin et al. 2007; Kerley et al. 2008) and more generally appraise physical suffering (Vaux 1982; Marty 1983).

Based on this gap in the literature, a subtheme of this project will be to consider how Evangelicals think about health and illness in terms of Western healthcare utilization, and whether alternative, religious sources of healing might be significant in the lives of these persons. Although Evangelicals have been found to use more preventive health care services than religiously unaffiliated persons (Benjamins 2006a) and to have significant levels of trust in physicians (Mansfield, Mitchell, and King 2002; Benjamins 2006b), additional research is warranted on how religious beliefs on health and illness relate to questions of health care organization. Therefore this project will consider evangelical views on health and illness in order to understand whether national health inequalities are an important concern and how Evangelicals might respond if they found this issue compelling.

Because of the issues raised here between evangelical theology and thinking about health care reform, research into these questions is needed. The goal of this project is not to suggest that evangelical theology will be related inherently to thinking about social change in particular ways but rather seeks to understand how evangelicals think about issues related to health care reform in light of their religious beliefs. Although individuals always interpret the meanings available in a particular context, this project will consider how important religious beliefs are felt to inform the meaning of government interventions in the form of health care policy.
Methods

Chapter Four addresses methodological issues related to this dissertation project. The specific approach used was qualitative, largely guided by the Grounded Theory tradition (Glaser and Strauss 1967; Charmaz 2006). Accordingly, an inductive approach to data collection and analysis will be used. This method is contrasted with deductive research, often associated with quantitative data analysis, which aims to test existing theory. Grounded Theory begins with guiding research questions instead of hypotheses. Thus theory is thought to be constructed from the data throughout the analysis.

The process of data analysis in Grounded Theory research involves a constant comparison of qualitative data. Unlike in other methods, data collection and analysis are conducted simultaneously. Instead of beginning a project with a fixed sample of participants, interviews are first conducted in order to develop preliminary codes. The process of theoretical sampling involves conducting subsequent interviews until the categories that emerge are thoroughly fleshed out. The final process is to draw overall connections or themes from the research. This method is intentionally flexible and allows for changes to be made throughout the research process. In this sense, guiding research questions that inspire the project may change once data collection and analysis begin. The key understanding is that theory is generated from the data, and thus researchers must be open to moving beyond existing research agendas and theories.

Though Grounded Theory has become a respected qualitative research method, there is still disagreement over whether this approach is scientific and unbiased, or replete with interpretations and values (Charmaz 2006). Kathy Charmaz distinguishes between these two types of approaches by referring to them as either “Objectivist” or
“Constructivist” respectively (Charmaz 2006: 130). Objectivist approaches carry on the neo-positivist tradition and maintain that researchers can remain neutral in the research process and discover theories produced by the data. Thus specific techniques are utilized in an attempt to maintain value-neutrality in such a process.

By contrast, constructivist approaches do not assume that knowledge or facts can be apprehended simply through certain methodological techniques but are always related to processes of construction and interpretation located within human interaction. In other words, a key goal of constructivist approaches is to understand how and why meanings are constructed in a particular context (Charmaz 2006). This outlook emphasizes the importance of individual interpretations and further suggests that theory is constructed from the interpretations of both the researchers and participants. Therefore theory is never value-free or able to reflect universal knowledge. Distinguishing between these two approaches is necessary, since both are considered to be within the Grounded Theory tradition. The methodology of this dissertation project will be influenced by the Constructivist tradition, in an attempt to emphasize that knowledge is created within social interaction rather than is simply discovered.

In addition to influences from Grounded Theory, this project also draws from the Phenomenological tradition. Because Grounded Theory is compatible with other strategies (Charmaz 2006), this overlap is appropriate. Phenomenological approaches to qualitative research place individual experience above universal questions. In other words, researchers focus on knowledge that is fully mediated by human experience. Such experience takes on particular importance within a context or lifeworld (Schutz 1962). The particular situation within which meanings are constructed must be considered when
seeking to interpret individual experiences. One of the key goals of phenomenological research is thus to gain entrée into the lifeworld of participants (Schwandt 2001).

The phenomenological approach has been suggested as being particularly important in the study of religion (Berger 1980). This inductive approach purposefully brackets ultimate questions about whether religious truths are real, in any metaphysical sense, in favor of what can be understood from religious experience. In his work *The Heretical Imperative*, Peter Berger suggests that the study of religion must move toward both understanding individual experiences and locating them within a particular historical tradition.

In this sense, the lived experiences of mainline Evangelical Protestants, specifically within the historical and theological context of this religious tradition will be a key concern of this dissertation project. These methods are appropriate for this study because they relate to the overall issue of how meaning is constructed within Evangelical Protestantism. Although past research has noted larger trends in evangelical civic and political behavior, these methods allow for a much deeper understanding of how individuals negotiate religious beliefs and duties. If Evangelicals have particular views on health care reform and responsibility toward others, how these meanings are constructed within this religious tradition is an important issue.

The specific methodology of this project follows from the general traditions of Grounded Theory and Phenomenology outlined above. Following approval of the IRB at the University of Miami, this project involved interviewing Evangelical Protestants who attend mainline evangelical churches. In order to get connected with participants, three churches gave permission to speak with congregants. Because of the qualitative nature of
this project, the goal was not to develop a random or representative sample but rather involved continued interviewing until the theoretical categories developed through data analysis are fully saturated. Overall, the total number of interviews conducted was twenty-nine, which is within the recommended range for these methodological approaches (Creswell 2006).

In-depth, semi-structured interviewing was the primary technique of data collection. This strategy involved developing an interview guide with a variety of questions related to evangelical views on health and illness and social responsibility. Ultimately, the goal was to lead up to more specific questions on how health care reform is understood in light of ethical commitments to others. Because the interviews were semi-structured in nature, not all questions were asked in each instance. Instead, participants were allowed to talk freely and follow-up questions and probes were used to advance the discussion and delve more deeply into issues of interest. Throughout the process, interviews were transcribed and preliminary codes were used to develop categories of further interest in the research. Finally, the goal was to develop overall themes about evangelical views on health care reform that arise from these interviews.

In the spirit of Grounded Theory’s emphasis on inductive research, there are several guiding questions of this research rather than hypotheses. The first question is: how is evangelical theology connected to views about social responsibility? The second question is: how do Evangelicals think about health and illness in the context of their religious beliefs? The third question is: How are contemporary policies that address the organization of health care interpreted within an evangelical worldview?
Data Analysis and Discussion

Chapter Five focuses on data analysis and findings. Specifically, this involves presenting the major themes that arose from data collection and analysis.

Policy Implications

Chapter Six provides a discussion of these findings, specifically with regard to particular implications of this research. In any project, describing the practical consequences of research is important. Ultimately, this dissertation will make a positive contribution by highlighting the ethical particularities of Evangelicals who, while varied, make up the largest religious subgroup in the United States (Chaves 2011). This group has also been politically and culturally prominent in the last thirty years, and according to some has been significant in offering a conservative position in the ongoing discussion in the United States that has often been characterized as a “culture war” (Hunter 1992). An analysis that considers the importance of ethics in these communities, and the subsequent moral vision for America, will be an important contribution to the ongoing debate over whether American Evangelicals are politically and religiously distinctive.

Further, because Evangelicals have been influential in many recent debates regarding social responsibility and the role of the government in providing care to others, understanding their perspectives is important. Locating their particular political beliefs and civic behaviors within the specific context of evangelical theology and communities will help others gain insight into why certain policies and outcomes are of importance to these individuals. Put more simply, if future policy decisions will likely be influenced by evangelical groups, knowledge of how they make decisions on these matters might be helpful.
Additionally, research on evangelical interpretations of health and illness are virtually missing from the sociological literature. Although survey research has produced many generalizable outcomes with regard to health behaviors and outcomes, very little is known about how Evangelicals connect theological particulars to beliefs about the nature of health and illness. Given the growing concern to improve cultural competence in health care settings, and to facilitate better communication between patients and doctors and effectiveness of care (Williams 2007), insight into evangelical health beliefs might contribute to greater cultural competence in providing medical care to these individuals (Hodge 2004).

Finally, uncovering American religious views on health inequalities will come at an extremely relevant time. American health inequalities across various demographics, including both morbidity and mortality outcomes, have been demonstrated consistently and place the United States well behind comparable industrialized nations (Robert and House 2000). Many possible solutions have been advanced in recent years, including the politically controversial Patient Protection and Affordable Care Act written into law in 2010. Within the context of this dialogue of how best to ensure that Americans receive appropriate access to quality health care, this research will provide a more detailed analysis of how individuals understand personal and structural initiatives toward this end within the context of their evangelical faith. Ultimately, improved understanding of various positions in these debates may move these discussions beyond political gridlock.
Chapter Two: Evangelical Theology and Social Responsibility

While Chapter One argued for the particular relevance of studying mainline evangelical responses to health care reform due to the growing interest of Evangelical social engagement and political prominence, this chapter will consider the core tenets of evangelical theology that inform views on social responsibility. The fundamental aspects of Evangelical theology that will be addressed are the Bible as a source of knowledge, fallen human nature, grace and accountability, the importance of Christian community, and the call to moral living. These five elements of Evangelical theology correspond largely with historian David Bebbington’s well-known quadrilateral of evangelical convictions. He describes these main aspects as Biblicism, Crucicentrism, Conversionism, and Activism (Bebbington 1989). Regardless of the specific formulation, these basic tenets of evangelical theology are important to consider in detail, both because of the unification of this religious movement around these beliefs and their implications for thinking about social life.

In thinking about these theological formulations, the crucial issue is why such theology is important to this religious group. Some critics have advanced that contemporary evangelicals espouse increasingly specific beliefs that unite persons within the larger evangelical movement (Wuthnow and Lawson 1998). This great restructuring of American religion has been described as a movement away from identifying with specific churches and denominations toward associating with larger religious movements that focus on particular theological beliefs or moral issues (Marsden 1987; Wuthnow 1988). Further, this alliance with certain theological beliefs not only unites individuals
within Evangelicalism but allows distinctions to be made from other Protestant groups. Additional features of this process of reconfiguring American religion include increasing variation within churches and denominations and the growing divide between liberals and conservatives Protestants (Wuthnow 1988). Whereas historical Protestant denominations differed from one another based on various beliefs, such as baptism, eschatology, and communion practices, and were therefore often labeled as either conservative or liberal, contemporary Protestant denominations are marked by great internal diversity in theological beliefs. Thus contemporary churches are likely to have a vast spectrum of conservative and liberal views, and important religious identities come from interpretations of these beliefs rather than denominational affiliation. Related to this change, the conservative evangelical movement transcends denominations and unites persons based on shared beliefs. While sociological labels of these groups have changed over time, the historical distinction between liberal and conservative Protestants today corresponds with differences noted between mainline Protestants and Evangelicals respectively, both found within many denominations.

The historical transformation of Protestantism in the second half of the twentieth century is also notable for how different Protestant groups thought about social life. Although these groups were divided initially over whether Protestants should be socially engaged in major events, such as the Civil Rights movement and Vietnam War protests, strategies toward such engagement have changed over the years. Originally, conservative Protestants were more likely to emphasize spiritual issues related to individuals, while liberals embraced a more positive outlook on the church’s potential for improving the world. However, starting in the late 1970’s and intensifying in the 1980’s, conservative
Protestants, mainly Evangelicals, have been concerned greatly with remaining engaged in the lives of others (Smith 1998; Cnaan 2002; Wuthnow 2006), and have become more politically influential than even mainline Protestants (Wuthnow and Lawson 1988).

Many scholars cite improvements in Christian higher education and the use of technology and mass media among these groups as key factors in their growing public presence (Wuthnow and Lawson 1988; Carpenter 1997). Because theological themes have been influential in distinguishing Evangelicals from other Protestants, in addition to legitimating interest in the world, they will be important to consider. An important aspect of this chapter accordingly will include linking major theological themes that have united this developing movement to how Evangelicals have and continue to embrace duties related to social responsibility.

In addition to outlining the basic structure of evangelical theology, this theoretical exploration will address how certain theological themes might be related to thinking about the nature of ethics and community in potentially individualistic ways. This assumption is not to suggest that all Evangelicals will interpret and apply these theologies in uniform ways, but that within specific historical contexts they can be related to thinking about strategies of social engagement. As noted in Chapter One, there is a particular affinity between mainstream Evangelical emphases on the moral person and the image of the individual found in secular market economics.

Although most Evangelicals are not likely versed in the particularities of Christian theology and apologetics, these major themes are often cited by Evangelicals as central to their faith (Smith 1998; 2000) and have potential implications for thinking about social life. The point is that these basic theological tenets contribute to a specifically
Evangelical worldview through which contemporary social problems might be interpreted. How Evangelicals conceptualize human relationships and ethical requirements might be important theoretically when considering attitudes toward various forms of social interventions. While additional interpretations of evangelical theology are certainly available, namely from the Evangelical left and far right, mainline evangelical interpretations are crucial to consider because they represent the center of this religious movement (Gushee 2008).

Following an analysis of the importance of evangelical theology for thinking about social engagement, important findings on evangelical outreach behavior in the sociological literature will be reviewed. Specifically, this section will focus on white evangelical particularities, as compared to more politically liberal religious groups such as mainline Protestants, Catholics, and Black Protestants. Although there has been relatively little research on how Evangelicals think about health inequalities and approaches toward addressing population health, a significant body of work exists that considers more general views on various forms of inequality and how Evangelicals have been active in improving the lives of others.

Finally, evangelical theology will be discussed within the particular context of thinking about contemporary health care reform. How such themes might apply to interpretations of health and illness will be explored. In addition, whether evangelical concerns about health care disparities and other forms of inequality might be related similarly to evangelical theology must be considered. Ultimately, this theoretical chapter
will provide the theological background that unites the growing Evangelical movement and suggests the potential of core theological beliefs for rethinking social issues such as contemporary health care reform.

*Five Themes of Evangelical Theology:*

1. *The Authority of the Bible*

   The first theme serves as the foundation for the entire evangelical worldview and growing social movement. The belief that the Bible is the word of God is cited often as the identifying mark of Evangelicalism (Wells and Woodbridge 1975; Krapohl and Lippy 1999). Though there are varying opinions about how the Bible came to humans, there is agreement that this book is the inspired word of God. This belief is sometimes described by terms such as infallibility and inerrancy, which suggest the trustworthiness of the Bible as a source of knowledge. Although not all Evangelicals agree on the specifics of the Bible, the confidence in the Bible as a valid source of knowledge is a distinctive mark of Evangelicalism. Such knowledge is treated as foundational because this information serves as a reference point for all truth (Noll 2001). The Bible is thus a source of information about God and God’s work throughout human history and a prescription for Christian living.

   This universal source of knowledge is important because human truths are thought to be risky. Because the Bible suggests that humans have fallen and exist in an imperfect state, having an objective framework to understand the world is thought to be important (Krapohl and Lippy 1999). Alternative sources of knowledge, such as religious tradition, churches, and human experience, must be subservient to the knowledge found in the Bible (Bloesch 1987). In this regard, reliance on the Bible as the core of
evangelical belief can be understood as unifying this movement throughout its history. From the Reformation insistence on “sola scriptura” (Dillenberger 1962) to the 20\textsuperscript{th} century debates over liberal theology (Cox 1984), a strong reliance on the Bible has been a deciding factor in distinguishing among specific Christian groups. Today this belief remains central to the evangelical movement and informs both evangelical theology and behavior. In the end, this belief in the authority of the Bible externalizes knowledge to reflect God’s immutable character, instead of grounding truth in fallen human nature.

2. \textit{Human Nature}

Evangelical views on human nature are influenced by natural law theories that suggest humans share some universal qualities. Natural law theorists claim that because these laws are prior to human experience, they affect all humans and cannot be altered by human action. In evangelical theology, human nature is thought to be fallen and every human act permeated with the stain of original sin. In this context, original sin refers to the Christian notion that human nature is inherently sinful and is shaped from the sin of Adam that initiated the fall from a perfect state created by God (Wells and Woodbridge 1975; Spiegel 2004).

After this moment in Christian history, all humans are thought to carry this mark. In the cautionary words of Martin Luther, “if we believe that original sin has ruined us to such an extent that even in the godly, who are led by the Spirit, it causes abundance of trouble by striving against good, it is clear that in man, who lacks the Spirit nothing is left that can turn itself to good, but only to evil” (1962: 203). Because in evangelical theology humans cannot escape this condition, they cannot rely simply on human reason
or experience to guide decisions and actions (Allsopp 2003). As a result, the Bible is necessary to provide a moral framework that is not subject to human contingencies (Wells and Woodbridge 1975).

If original sin is thought to be a pervasive aspect of human nature, potential implications exist for thinking about social responsibility. For example, sin is primarily an offense against God. While this conclusion does not preclude alternative interpretations, notably those central to liberation theology that emphasize sin between persons (Dussel 1993; Berryman 1987), Evangelicals have often interpreted this condition in individualistic ways. Although original sin is shared throughout humanity, the most important ethical relationship for persons is with God. Although certainly Evangelicals are concerned with the welfare of others, this responsibility always remains secondary to their loyalty to and dependence on God.

If individual capacities are diminished by the presence of original sin, this situation might dampen optimism about social change. More specifically, this outcome could lead to the problem that social outreach, when not grounded in the Bible, will be unsuccessful. That is, since humans are not able to do good on their own, they are unlikely able to collaborate effectively. Correspondingly, this theology implies the need of moral uniformity and constraints to provide order and social cohesion (Durkheim [1912] 2001). The potential consequences of this morality, in the specific context of evangelical social engagement, could include the preference for outreach programs that are Biblically-based and pessimism about interventions that are secular and require human cooperation.
3. *Grace and Accountability*

The need for salvation follows directly from the fallen situation of humanity. Because humans are separated from God through their sinful nature, they are in need of divine grace (Noll 2001). Again, these truths are revealed in the Bible and tell the story of human redemption through the death of the son of God. This narrative describes God as sending his only son, wholly God and wholly man, to die for the sins of humanity. The result is that humans can have eternal life and be saved from this imperfect state where death and suffering abound.

This promise of salvation is considered to be a gift of grace, and not a product of human achievement. In other words, Evangelicals do not think that persons can earn salvation through good work; rather, they must be offered this free gift from a generous God. Although individuals can never make up for this sacrificial atonement, they are instructed in the Bible to become changed persons. This transformation involves typically making a commitment to live a new or regenerated life, and thus Evangelicalism is often accompanied by a conversion or being “born-again” (Smith 1998). Individuals who have undergone this spiritual change are considered to be thoroughly regenerated (Smith 1998). Now they can maintain a personal relationship with God, and are thought to have the gift of the Holy Spirit that strengthens their faith and work (Noll 2001). Evangelicals are expected to display signs of living a changed life and are personally accountable to God’s prescriptions for a Christian life. And though Evangelicals cannot earn their own salvation through good works, living a moral life and sharing God’s love is an important response to the gift of grace.
Again, important implications for social life exist in the theology of grace and accountability. Indeed, if individuals cannot bring forth the renewal of humanity through their own hard work, this fact might contribute to pessimism about human action. While Evangelicals emphasize the importance of individual duties, human work is not capable of changing the fallen state of the world. Therefore, until God returns to change the present circumstances, human involvement could be interpreted as a stopgap measure. Though Evangelicals are required to love others, as a reflection of God’s sacrificial love, such actions could be understood to consist primarily of comforting measures, rather than rethinking radically about how to improve social life. If human strategies are ultimately futile, perhaps Evangelicals can be most effective at helping individuals cope with the realities of a fallen world.

Another implication for the doctrine of grace and accountability is that individuals are thought to be responsible for their own circumstances in life. That the world is in bad shape is understood to be a reflection of poor individual choices, resulting initially from the sin of the first man. This story could imply that individuals deserve the fate that befalls them, and that they are personally responsible for creating a better outcome. While Evangelicals do not believe that individuals can fix their overall sinful nature, they do emphasize that persons must respond to God’s love and behave in responsible ways.

Clearly, this theology could be applied to thinking about contemporary social ills. Specifically, individual sins could be viewed as causing important social problems such as poverty and racism, and solutions could correspondingly emphasize the failures of individuals. Several sociological studies have emphasized the distinctions Evangelicals make between the deserving and undeserving poor (Greenhouse 1989; Wuthnow 1994;
Clydesdale 1999). In this example, individual shortcomings such as laziness and poor morals are cited as explanations for poverty, while individuals are responsible for helping themselves. In other situations, where suffering is thought to be undeserved, persons did not make poor choices and engage in risky behavior. In both accounts, the solutions emphasize the hard work of individuals either in improving their own lives or the lives of others.

In addition, when this theology of accountability is interpreted within the larger American narrative of personal responsibility, other facets of culture might be affected. Some scholars have often highlighted the secular, market ideology that elevates personal responsibility over depending on others (Harvey 2005; Elisha 2008b). The individualism found in evangelical theology might thus be strengthened by this economic outlook. Additionally, the potential exists for Evangelicals to think about general social problems as an aggregation of personal facts rather than a product of problematic social arrangements (Mills 1959). Furthermore, if individuals must help themselves, Evangelicals might best love others through personal relationships that can ensure accountability, rather than supporting government programs that provide aid indiscriminately. Though Evangelicals are called to love others, an important point is how these relationships are envisioned.

4. Evangelical Community

A significant aspect of the Christian church has involved the development of community. Evangelicals believe specifically that part of living a regenerated life involves joining together with others to worship God and spread the good news of his redeeming love. Therefore a sense of community is encouraged that represents the
gathering of Christian persons in order to witness God’s love. The renowned neo-orthodox theologian Karl Barth, for example, writes that “community represents the secondary witnesses, the society of men called to believe in, and simultaneously to testify to, the Word in the world” (Barth 1963: 37). A community thus consists of believers devoted to a Christian life. Particularly important is the evangelical desire to follow God’s commandment by joining together with others and sharing the story of his action in the world through loving others. Although specifics about what this community is supposed to look like are often missing, or variable between churches, there is an emphasis on developing relationships.

The first implication of the evangelical account of community is that individuals are tied together through their shared faith. In fact, Barth’s definition of Evangelical community is predicated on the notion that Christians have something in common (1963). These individuals are able, because of certain shared beliefs, to come together in positive ways. What is less clear, however, is whether individuals are able to exist in community without this shared religious foundation. For example, are individuals antagonistic to or without a Christian worldview able to join? The extent to which original sin might damage human relationships is also important to consider.

The emphasis on spiritual regeneration might suggest that without God’s intervention, an authentic community might not be possible. This difficulty could contribute potentially to a type of individualism that results from persons being accountable to God before others. In this sense, individuals are thought to be connected to others only through a shared relationship with God. Some scholars have described this as a vertical version of religion, in contrast to a lateral rendition that emphasizes the human
element (Davidson 1972). While personal relationships might certainly be emphasized, because community is a prescribed aspect of Christian living, such associations might be seen as primarily indirect. Moreover, some writers have suggested that focusing on individual or personal needs within religious communities tends to reinforce the status quo by providing comfort, rather than the prophetic side of religion (Yinger 1970).

A second implication is that a Christian community might not be seen as entirely inclusive. If relationships depend on religious commitments, individuals who are not similar in this way might be discounted. Although Evangelicals emphasize the importance of loving others unconditionally, whether individuals who are not within the Christian community can be fully trusted might have impact on the quality of relationships. Some authors have highlighted this divide between the Christian community and outsiders as helping Evangelicalism thrive. For example, Christian Smith’s subcultural identity theory (1998) suggests that distinguishing between those who are born-again and those who are not allows these select groups to market something distinctive.

Although this exclusivity might be an effective recruitment strategy in contemporary economic theories of religion (Iannaccone 1998, Stark and Finke 2000), there may be particular implications for caring for others. If Evangelicals emphasize the Christian foundation of community, this focus might suggest that humans are not tied together on any fundamental level. If Evangelicals are called to help others outside of this community, these individuals may have to adjust to evangelical norms in order to receive any aid. This logic could indicate potentially the need for social programs to go hand in hand with religious transformation. Additionally, evangelical views of community might
influence beliefs about the types of social change that are considered possible and ideal. Contemporary social initiatives that attempt to improve community life more broadly, for example may violate evangelical perspectives on how a community develops.

5. *A Moral Life*

The final major theme from evangelical theology is the call to live an ethical life. Although humans are free to make choices, there is a clear standard that is set out for Christians in the Bible. Though various renditions of Christian ethics exist (Grenz 1997; Geisler 2010), the specifically evangelical approach emphasizes that morality stems from God’s revelation rather than human experience or cultural norms (Bloesch 1987; Allsopp 2003). Yet even within Evangelicalism there are different perspectives on how the Bible serves as a source of morality. For some believers, the Bible provides absolute guidelines that must be interpreted literally. This strategy is often referred to as legalism, a pejorative label. (Bloesch 1987). Other readings suggest that the Bible provides wisdom for navigating particular ethical issues that might not have been addressed specifically in Scripture. This casuistic approach, often referred to as contextual absolutism, has been common in evangelical theology on issues such as war, homosexuality, and abortion (Davies 1985; Geisler 2010).

What these evangelical approaches to ethics share is the desire to locate ethics within Biblical authority and avoid moral relativism. A key concern is that ethics must have an absolute foundation beyond human influence. Otherwise, from this perspective, the potential exists for moral standards to lack legitimacy. As already discussed, this outcome is particularly problematic in the evangelical worldview because humans are
predisposed to act in selfish ways. If persons are not capable of doing good on their own, the only hope is to locate ethical standards within the unchanging nature of a benevolent God (Bloesch 1987).

Although ethical guidelines emanate from God’s revelation in this context, what does ethical behavior entail for individuals? Because God has provided a sacrificial gift to humans, Evangelicals are expected to be thankful by avoiding sin and loving others. But the concepts of sin and love have important implications in the evangelical worldview. Sin, in this context, refers to “wounding the heart of God” (Bloesch 1987; 82) associated with a separation from God. Particularly important is that sin is a spiritual condition that exists between an individual and God. Although Evangelicals speak of corporate sin as well, this idea refers generally to the collective alienation from God. If the most significant ethical bond exists between an individual and God, implied is that relationships with others are always secondary and rooted in a shared ethical relationship to this divine base.

Although part of the ethical life is to love others, a priority might be given to love others in the form of evangelism. In this sense, sharing God’s love with others might fulfill such ethical obligations. One evangelical theologian argues that “the highest service the church can give to the world is the conversion of souls” (Bloesch 1987; 154). Though certainly Evangelicals care for others in more than just spiritual ways, meeting physical needs might be merely an important tactic to facilitate the trusting relationships that make evangelism possible (Elisha 2008b).

Because evangelical ethics emphasize the importance of personal spiritual relationships both directly with God and indirectly between persons, social outreach
might also follow this pattern. If spiritual change is desired in addition to addressing physical needs, social programs might facilitate these implied personal relationships. Such involvement enables individuals to be ethically accountable while also emphasizing the importance of relationships found in evangelical community. In other words, if ethical guidelines emanate from religious sources, there may be implications for thinking about solutions to contemporary social problems.

Though this section on evangelical theology is not meant to suggest that Evangelicals will interpret social life only in specific ways, this religious worldview is an important source of meaning. Of course, evangelical beliefs on these matters are always negotiated by individuals in everyday life. Although certainly non-theological sources contribute to this worldview, theological tenets remain an important focus of this movement and are relevant to understanding how Evangelicals might view social change.

Most important, this analysis moves beyond past work on Protestantism that distinguishes mainly between fundamentalist and liberal social behavior. Often, Christian theologies have been compared on whether they emphasize personal salvation or social reform (Krapohl and Lippy 1999). But both are a part of evangelical theology. Although caring for others is a priority, there is a concern that this theology incorporates individualism in such a way that certain strategies toward social change, such as government intervention, may be incompatible with the evangelical worldview. Such a discussion of evangelical theology might illuminate why certain strategies are thought to be more important than others. Following this theoretical outline, key findings on evangelical social involvement have a particular rationale.
Findings

Although very little sociological research has assessed evangelical involvement in supporting health related programs, particularly various forms of health care, there is a well-documented literature on evangelical approaches to social inequality. For this review, the findings will be separated into two main areas. The first will consider evangelical attitudes on the causes of and solutions to various forms of inequality. The second section will cover evangelical involvement in various forms of social outreach aimed at remedying this situation.

A relatively recent focus in the sociological literature has been to document the views of Evangelicals on various forms of inequality, such as poverty, unemployment, and racial stratification. This research is undertaken usually by using surveys that measure either individualist or structural explanations for inequality. This line of study stems from the more general area of stratification, which suggests that there is a dominant cultural narrative for understanding social mobility in America, usually described as the meritocracy thesis (Kluegel and Smith 1986). Although there seems to be a dominant viewpoint when thinking about inequality, some studies propose that the nature of inequality might change, based on the explanations that are invoked (Wilson 1996). Nonetheless, important findings indicate that whites are more likely to employ individualist explanations, as compared to structural factors cited more often by African Americans (Kluegel and Smith 1986). In the religious literature specifically, these general findings hold up among white Protestants, with Evangelicals specifically more likely to describe inequality in individualistic ways than African American Protestants (Taylor and Merino 2011).
Beliefs about Racial Inequality

One of the most comprehensive works in this area, *Divided by Faith*, advances a thesis on why white Evangelicals are likely to favor disproportionately individualistic explanations and solutions for racial inequality. Michael Emerson and Christian Smith argue that Evangelical theology is consistent with “freewill accountable individualism,” which emphasizes the importance of making good personal decisions and the openness of the American opportunity structure (2000). Because Evangelicalism stresses the importance of personal choices in spiritual matters, these believers argue that individual-level explanations should be invoked when describing life outcomes. Key findings in the sociological literature include that Evangelicals are more likely to cite black culture and/or lack of motivation as explanations of socioeconomic inequality, as opposed to discrimination, history, education, or housing practices (Hunt 2002; Hinojosa and Park 2004; Brown 2008b). And with respect to remedies, Evangelicals are more likely to prescribe making interracial friendships and treating those you know fairly, rather than rethinking problematic social arrangements (Emerson and Smith 2000).

Beliefs about Socioeconomic Inequality

In terms of more general forms of economic inequality, both religious and racial differences surface. Again, African Americans are significantly less likely than Whites to describe poverty as an individual failure and are more likely to cite structural factors (Hunt 2002). In addition, mainstream Protestants are more likely than those in minority religions to espouse individualistic beliefs about poverty and are less likely than Catholics to invoke structural explanations (Hunt 2002). Additional research suggests that among Whites, Protestants are the most likely to engage in “just-world thinking”
(Hunt 2000). This type of belief emphasizes that life is generally fair and that people get what they deserve. This viewpoint has certain implications for thinking about social policy, since interventions such as providing a social safety net may only encourage risky behavior that leads to poverty.

Additional studies have considered whether specific religious beliefs are related to policy preferences. One recent study suggests that white conservative Protestants are most likely to disapprove of policies to redress racial inequality, such as affirmative action, and to reject the idea that the government should be responsible for helping or spending money on Blacks (Taylor and Merino 2011). Further, these persons are the most likely to endorse antistructuralist beliefs, which are often linked with opposition to government intervention as a social policy. Although research in this area is limited, the findings suggest that white conservative Protestants, including Evangelicals, might be more resistant to certain policy changes despite being concerned for the social welfare of others.

_More than Just Theology?_

While theological beliefs are a crucial aspect of evangelical views on stratification (Smith 2000), this spiritual dimension cannot explain fully differences between white and black conservative Protestants. Robert Putnam, in his recent book on American religious involvement, argues that African American Protestants are even more conservative and “Evangelical” in their theology than White Evangelicals yet remain profoundly committed to structural solutions to inequality (2012). These findings have been consistent in the sociological literature and have contributed to new theories on how theology and social location must be considered in tandem (Edgell and Tranby 2007).
Examples of how certain religious groups are structurally located include having a history of discrimination and racial dominance, which contributes to various interpretations of religious theology and the need for social involvement. Some critics have described this issue in terms of the “underdog thesis” (Robinson 1978) that has been applied to religion more recently (Hunt 2002). This thesis suggests that historically disadvantaged groups are more likely to hold beliefs that challenge the status quo, because they have the most to gain from doing so.

This line of thinking has been advanced further by recent work in the area of color-blind racism (Bobo 1997; Bonila-Silva 2006), which has been applied to thinking about individualistic beliefs associated with Evangelicalism as a covert attempt to maintain white privilege (Tranby and Hartmann 2007). By ignoring that structural inequality exists through the use of individualist rhetoric, evangelical stratification beliefs might further institutional-level discrimination by discouraging certain policy changes. In other words, because white Evangelicals exist in a relatively privileged social location, there may be little incentive for them to challenge current social arrangements.

*Evangelical Civic Engagement*

Although the preceding findings covered evangelical attitudes toward inequality, this section reviews research on evangelical patterns of civic engagement. Whether Evangelicals are involved significantly and prefer certain forms of social outreach more than others will lend insight into how Evangelicals conceptualize social responsibility. These findings will help clarify whether such civic behavior is compatible with the individualism found in Evangelical theology.
One of the most basic questions in recent sociological research on Evangelicals is whether members are significantly involved in social outreach. The unanimous answer, at least in the last twenty-five years, has been yes. In fact, Evangelicals are more likely than other Protestants to give money to the poor and volunteer in religious organizations that provide aid to the needy (Regnerus, Smith, and Sikkink 1998; Wuthnow 1998). Additionally, Evangelicals are the most likely to give to secular organizations and volunteer for secular causes (Putnam 2012). Some commentators have suggested that giving to others is an important cultural norm in evangelical communities. This behavior has been described as indicative of “moral ambition” that reflects a strong commitment to various forms of social outreach (Elisha 2011). Indeed, newer theories have been developed that emphasize the important social networks that are opened through church attendance and contribute to increased social service activity (Cnaan 2002; Bartkowski and Regis 2003; Putnam 2012). Although Evangelicals are acting on religious convictions to love others, research suggests that particular strategies for social outreach follow from this belief.

Although the previous findings suggest that Evangelicals engage in social outreach, others illustrate that there are certain activities that are less preferred by Evangelicals. These findings have most often been found when comparing the outreach behavior of Black Protestants to Evangelicals. For example, Black Protestants are more likely to be active in providing meals, promoting civil rights, fostering community development, and educating the public on disease. By contrast, Evangelicals are more likely to provide recreation programs for youth and to promote right to life activities (Chaves and Higgins 1992). In addition, Evangelicals are less likely to be involved in
voter registration efforts (Brown 2009b) and more long-term social services such as education, tutoring, or job training (Wuthnow 2006; Brown 2008a). These findings suggest that Evangelicals might prefer certain types of outreach over others.

These outreach behaviors have taken on increasing importance in the last two decades because of changing legislation in the distribution of social services. Religious groups have been at the forefront of welfare reform that has allowed churches to be more significantly involved in caring for others. The reduction in federal spending on public assistance in 1996, coupled with “Charitable choice” legislation that allows religious groups to compete for funding to provide aid, changed radically the role of churches in providing certain types of services (Bartkowski and Regis 2003; Wuthnow 2006; Elisha 2008b). Although in the past religious groups were limited to smaller projects and charity work, this government collaboration acknowledged the interest and potential of religious groups in community development.

Evangelical social outreach can be analyzed further from within the context of charitable choice. Some research has shown that Evangelicals are considerably less likely than Black Protestants to take advantage of charitable choice and apply for government grants (Chaves 1999), although other research finds that they are as likely as mainline Protestants to do so (Cnaan 2002). Furthermore, other writers have suggested that Evangelicals may be suspicious of charitable choice partnerships because this funding mechanism requires government intervention into community life and limits the potential for religious expression (Greenberg 2000; Elisha 2008b). Though some research has
found anti-government sentiments among Evangelicals, other authors have suggested that evangelical social outreach is not understood to be an alternative to government services but an ally in providing care (Chaves and Tsitsos 2001).

Other interpretations have suggested that Evangelicals prefer government collaboration on some matters (health care is one example), but think that such intervention is not very effective in treating addiction, feeding the homeless, or providing counseling (Wuthnow 2006). Unfortunately, there are no qualitative findings presented to clarify why certain types of interventions are appropriate in each case. The possibility exists, for example, that government assistance to the poor and elderly in the form of health care programs such as Medicare and Medicaid may be acceptable, but government intervention into health care for all Americans may be seen as inappropriate. Future research should consider evangelical views on the organization of health care both generally and for specific groups.

One final area of research has considered whether evangelical views of community might lead these individuals to be less trusting of others. More generally, trust in others might be understood to underlie collaboration with government programs or other secular organizations. Early research in this area suggests that conservative theology is related to reduced trust in others, yet church attendance removed this effect (Schoenfeld 1978). More recent research indicates that Evangelicals tend to be quite trusting of most people, with the exception of Pentecostals, homosexuals, and atheists (Smith 2000; Welch et al. 2004; Putnam 2012). However, this generalized trust is
reduced by theological conservatism (Hempel, Bartkowski, and Matthews 2012). These findings have led some critics to argue that religion might be beneficial to both trusting and caring for others, due to the social capital that is gained.

Although the loss of civic engagement is often mourned (Putnam 2001), some authors have suggested that increased religious vitality among conservative denominations might fill this gap. For example, Ram Cnaan argues against Putnam’s original thesis that civic engagement is dying in America. He contends that this activism has been revived in contemporary religious congregations (2002). Other researchers have supported this emphasis on social capital and maintain that evangelical religiosity is particularly effective at building community life because of the emphasis placed on personal relationships (Bartkowski and Regis; Putnam 2012). However, some critics have suggested that this social capital more often takes the form of “bonding” rather than the “bridging” that encourages connections between different groups (Portes and Landolt 1996; Lichterman 2005). Nonetheless, these social capital theories suggest implicitly that individuals need religion in order to be tied together, and that more relationships are always better, regardless of quality.

One caveat in thinking about evangelical civic behavior is that past trends do not necessarily predict future developments. There is a compelling line of research that suggests a large generational gap exists between older and younger evangelical adults. For instance, Evangelicals under the age of 30 are much more likely to hold liberal views on homosexuality and same-sex marriage, and approve of having an expanded government with more social service provisions (Faith and Public Life Poll 2008; Pew Forum 2010). Interestingly, there is no significant generational gap in thinking about
abortion or affirming absolute standards for morality (Faith and Public Life Poll 2008; Pew Forum 2010). Several recent studies have also highlighted the changing religious composition of young adults. The Millennial generation, those born after 1981, has the highest rate of religiously non-affiliated individuals (Smith 2009; Pew Forum 2012), that is, upwards to one-third of the American young adult population. While all generations tend to become more religious as they age (Pew Forum 2012), the current cohort of young adults is starting off as remarkably less religious. These trends suggest that Evangelicalism might be changing with regard to political beliefs and behavior, and that the past emphasis on evangelical political influence may be overshadowed in the future by groups such as the religiously unaffiliated.

Finally, while much of the research in this area has been quite optimistic about the potential for Evangelicalism to renew civic engagement, other accounts have been more mixed. Especially noteworthy is that sociological critiques do not downplay the potential for evangelical outreach to improve the lives of others, particularly through personal contact. However, when attempting to redress various forms of social inequality, voluntarism might not be very effective (Wuthnow 2006). Because various forms of injustice are increasingly located in institutional arrangements such as residential segregation, hiring and housing practices, concentrated joblessness, and increasing economic inequality (Massey and Denton 1993; Williams and Collins 1995; Wilson 1997; Ross and Mirowsky 2001; Pager 2003), there is concern that any effective intervention must be directed to this level.

These findings suggest that Evangelicals are indeed concerned with social life and act on religious convictions to be responsible for others. However, such strategies could
be interpreted as being consistent with the individualism found in evangelical theology. Because many of these strategies emphasize personal relationships, they may be able to ensure accountability among those who receive help. Additionally, this body of research may be relevant to thinking about how individuals might interpret the organization of health care. Although very little research has considered explicitly evangelical views and behavior on this subject, there are certainly implications about how Evangelicals might respond to the problem of contemporary health inequality in the United States.

**Implications for Health Care Reform**

Although findings on conservative Protestantism and the organization of health have been scarce, there are a few patterns worthy of discussion. Following in the same general pattern as the findings in the preceding section, African American churches tend to be more likely to provide long-term social services including health care and education (Brown & Adamczyk 2009). On the other hand, Evangelicals are less likely to offer these services than mainline Protestants (Brown & Adamczyk 2009). However, all congregations provide far fewer services that address health care needs as compared to food, shelter, or clothing (Chaves and Tsitsos 2001). Among the mostly African American church programs that do target general health, there is a tendency to provide health education on important risk factors, predominately targeting individuals within the congregation but occasionally extending this service to the surrounding community (Ransdell and Rehling 1996). One explanation for the increased emphasis on health promotion within the African American community has been that these communities suffer a disproportionate amount of health problems, with high blood pressure primarily cited (Ransdell and Rehling 1996).
Although additional research suggests that lower-class churches provide more aid than affluent churches (Chaves and Tsitsos 2001), there has been relatively little discussion of why evangelical churches have been less likely to supply health care. That certain health conditions might not be on the radar, because they disproportionately afflict poor and minority communities, could be one possibility. Additional explanations could include that providing long-term health care might not be as important as meeting immediate needs. Future research on how health care programs are specifically interpreted within these communities is certainly indicated. Additionally, whether the focus on individualism in evangelical theology is related at all to thinking about the organization of health care should be considered.

In terms of this commitment to individualism, the economic views of evangelical Christians might have particular implications for thinking about the organization of health care. Whether Evangelicals are unique when thinking about the economy may have implications for how interventions such as the Affordable Care Act are interpreted. Although Evangelicalism is not related inherently to conservative economic views, such as an emphasis on the free market and lack of government intervention, some writers have suggested that the two are related, based on the shared focus on the individual and the need for sound personal decision-making (Barker and Carman 2000). Other writers have sought to underscore the wide variation in economic views among conservative Protestants, especially between the Religious Right and the Evangelical Left (Hart 1992; Iannaccone 1993. More recent surveys, however, have connected specific doctrinal beliefs to conservative views on the economy. Specifically, evangelical theological beliefs are related to desiring lower taxes, reduced government spending, and curtailed
government intervention in providing social services (Barker and Carman 2000). Although Evangelicals are probably not likely to support unrestrained capitalism, without a strong moral foundation (Hart 1992; Steensland and Schrank 2011) and limits on materialism (Elisha 2011), government intervention into the economic lives of Americans may downplay personal accountability and thus underscore the need for Christian voluntarism as a suitable alternative.

**Conclusion**

Based on the outline of evangelical theology in this chapter, speculation can be advanced on how the importance of individualism in Evangelical beliefs might influence discussions on the overall organization of health care. Because of the emphasis on personal responsibility, Evangelicals might link solutions to health inequalities to individual decision-making that may be ineffective for improving population health. Although Evangelicals have not yet been significantly involved in offering alternative policies in health care organization, current legislation might inspire Evangelical involvement in rethinking these issues. Hence the question remains whether the individualism found in evangelical theology might be related to preferring certain strategies, and what effect these preferences might have on eradicating persistent health disparities.

Although health promotion has been found to be more likely in African American churches (Ransdell and Rehling 1996), Evangelicals might also adopt this strategy should they become more significantly involved in improving population health. In some ways, these programs are consistent with the evangelical emphasis on improving personal accountability. However, health promotion, often aligned with the field of public
health, has been criticized lately as being ineffective because of the focus on individual risk factors (Becker 1993). Campaigns to reduce smoking rates, increase exercise, eliminate stress, and improve diets have been critiqued for ignoring larger social factors that determine why individuals engage in health-damaging behaviors in the first place (McKinlay 2005). Examples include powerful corporate advertising campaigns that target certain groups (McKinlay 2005), the prevalence of junk foods that obscure healthy alternatives (Morland et al. 2002), the predominance of liquor stores in poor neighborhoods (LaVeist and Wallace 2002), chronic stressors associated with discrimination (Krieger and Sidney 1996; Clark et al. 2002), and proximity of toxic waste sites to minority neighborhoods (Bullard 2002). Because social status is so significantly related to the distribution of health and illness, contemporary sociological theories suggest that there are in fact “fundamental” causes of disease that result from societal inequality, and that unless these underlying reasons are addressed directly, overall health disparities will remain (Link and Phelan 1995).

Because of the increased evangelical presence in American politics, and early reports that Evangelicals might have unique views when thinking about health care reform, research that evaluates the source and impact of these beliefs is indicated. If Evangelicals incorporate individualism into strategies for thinking about the organization of health care, important implications might exist for policies that target health inequalities. Though Evangelicals may take alternative positions on these policy matters, potentially unrelated to individualism in evangelical theology, their perspectives are important to consider. Indeed, if future policy discussions are to move beyond the gridlock of polarized political views, an increased number of alternative views would be
helpful. Instead of making generalizations about the role of religion in either legitimating social involvement or not, more nuanced descriptions of evangelical beliefs are necessary to understand how Evangelicals navigate both moral and spiritual issues while remaining committed to the care of others.
Chapter Three: Theoretical Implications of Theological Paradigms

The previous chapter outlined the major tenets of evangelical theology and considered the potential implications that exist when locating knowledge within an external source, such as the Bible, and describing human relationships indirectly through spiritual connections. This chapter will highlight the importance of such definitions for thinking about social life. Specifically, alternative imaginations of these core theological themes will be considered in order to question the implications of different theoretical stances. Such exploration is beneficial because often philosophical positions suggest very different interpretations of human potential and responsibility. Further, individualism will take on additional importance because these frameworks have unique implications for how persons are related to one another. Ultimately, drawing a contrast between different views will illustrate that evangelical theology is related to thinking about interventions into social life, such as health care reform.

In order to facilitate a comparison, this analysis will consider the existential notion of the freedom of modern persons. More specifically, Erich Fromm’s distinction made between positive and negative aspects of freedom will be used to distinguish between the theoretical frameworks of evangelical theology and a more grounded thesis (Fromm 1941). In this case, Existentialism provides a helpful contrast because this paradigm locates both knowledge and meaning within human experience. This claim is markedly different from the evangelical emphasis on the authority of the Bible as a source of knowledge and human meaning and salvation that emanates from God, which is thought to be outside of human influence. Most important, these two worldviews assess
the notion of human freedom quite differently. This analysis will attempt to explore whether positive and negative conceptions of human freedom might have different implications for thinking about social life. According to many writers, the idea of human freedom took on new meaning after the economic and societal transition from medieval to modern life (Durkheim [1893] 1947). Although individuals were once tied to communities of origin and religious authorities, modern life was marked by economic expansion and the growing emphasis on individual accomplishments. The main consequence of these changes is that humans were no longer secure in their economic and social relationships, and were free to think and act critically. Although this freedom afforded new possibilities, the onset of this condition produced a type of loneliness and anxiety (Fromm 1941; Tillich 1952).

This anxiety is “not fear, being afraid of this or that definite object, but the uncanny feeling of being afraid of nothing at all. It is precisely this Nothingness that makes itself present and felt as the object of our dread” (Barrett [1958] 1990: 226). Erich Fromm (1941) argues that this freedom was cemented by Reformation theology that provided ultimate meaning for the individual, outside of institutional securities such as the Catholic Church, and relieved the potential anxiety associated with such freedom. He writes, “Protestantism was the answer to the human needs of the frightened, uprooted, and isolated individual who had to orient and relate himself to a new world” (Fromm 1941: 101). What Protestantism did was to bring God close to daily life and everyday experience.

More important, this approach to freedom has implications for thinking about individualism. Both the Protestant approach to freedom and the economic liberty of
capitalism have important similarities for thinking about the relationship of the individual to others. Although the attraction of capitalist ideology to Reformation theology has been described most famously by Max Weber (Weber [1905] 2002), Fromm argues that the two are both reactions to the prospect of freedom and imply a certain amount of individualism. Though in Protestantism individuals are left to face God directly, in capitalism they are forced to compete with others and ultimately are accountable to the abstract forces of the market. Both presuppose that individuals must be constrained by something greater than themselves and provide different explanations for the problem of human freedom. In Protestantism human isolation and anxiety are satisfied in a relationship with God, while economic success is thought to assuage such fears in capitalism. By aligning individuals with something greater, both of these approaches address the negative consequences that accompany the freedom of modern life.

Each of these attempts to deal with human freedom has implications for thinking about human relationships. If individuals no longer have direct importance to one another but rather have indirect ties, human relationships are maintained only instrumentally. Whether through economic or spiritual advancement, individual relationships exist, at best, as secondary to individual success, or worse they impede personal achievement. The point is that this attempt to evade freedom might have negative consequences for social life. Although Fromm speculated that this type of theorizing might lead to fascism because of the willingness to submit to authority and ignore human relatedness, additional consequences might stem from a particular way of thinking about community and ethics, along with social responsibility (Fromm 1941). Specifically, if authority is
valued over human freedom, and human relationships are overshadowed by individual attainment, improving social life on a general level might not be a key concern.

Despite the anxiety that develops as a result of being free from societal structures in modern life, Fromm and others have argued that these negative consequences are not the only result of freedom (Fromm 1941). In addition to this liberation from traditional ties, modern persons have a new creative potential, the freedom to be and create. This emphasis on the positive aspects of freedom has been at the core of existentialist philosophy, which has sought to rethink knowledge, meaning, and ethics from the vantage point of human experience.

This ability to act positively, associated with freedom, is related potentially to thinking about social life in novel ways. If individuals share this potential and are responsible to maintain the freedom of others, human relationships might take on a new kind of importance. Further, if individuals are allowed to be truly authentic and express themselves through creative action, the notion of community might be rethought to include human relationships that are not predicated on some type of sameness but allow individuals to be unique, yet fundamentally related and responsible for one another. In order to explore how this philosophy might have important implications for thinking about social life, each of the fundamental themes in evangelical theology will be rethought from this existential framework.

Knowledge

Like evangelical theology, existential theories about the nature of knowledge provide a framework for thinking about both individuals and social life. However, each theory takes a decidedly different stance on the human ability to contribute to knowledge.
This discourse, as Erich Fromm describes, relates to alternative evaluations of freedom (Fromm 1941). Because Evangelicals emphasize the need for external authority, they locate valid knowledge in an absolute God. The dualism that is involved, which separates human action from an objective foundation, has been described as a type of foundationalism (Fish 1989). Foundationalism refers to “any attempt to ground inquiry and communication in something more firm and stable than mere belief or unexamined practice” (Fish 1989: 342). Evangelicals, in this sense, locate knowledge in the unchanging nature of God and thus are able to confront a stable and objective source of knowledge. In this worldview, human freedom is downplayed because this element would lead to contingent rather than absolute truth.

Existentialists, by contrast, assume that individuals can use this freedom in potentially positive ways. Instead of looking for a foundation for knowledge in an external source, existentialists direct their search inward and focus on human experience. Thus knowledge is understood to be negotiated through human interaction, rather than merely discovered in universal sources. This shift has led many contemporary thinkers to eschew any source of knowledge that transcends collective human experience, often labeled “metanarratives” (Lyotard 1984). Though this emphasis on subjectivity is at times interpreted by critics as a type of relativism, many writers have sought to emphasize how human experience can generate meaningful knowledge. This step is particularly important for understanding social life. That is, if relativism were the inevitable result of focusing on human experience, any concern for ethics could not transcend personal preferences.
This focus on human experience has led some existentialists to focus on ontology, rather than on individual consciousness as a source of knowledge (Barrett [1958] 1990; Heidegger 1962). This stress on ontology is appropriate because these thinkers affirm that humans cannot step outside of their own experience to grasp knowledge. Nonetheless the fundamental condition of persons allows them to advance truth. Because of the fact that persons exist prior to any reflection, their existence is never really in question. Contrary to the Cartesian tradition, for example, their basic existence is not in doubt and serves as the source of meaning, including creative work. Thus knowledge is not only possible but relies ultimately on human action. Although Heidegger and others recognized the potential for angst that accompanies this freedom to create knowledge, this sentiment refers largely to the importance of human contingency rather than the lack of a concrete epistemological foundation (Barrett [1958] 1990). Despite their concern for individuals, Heidegger and other existentialists reflected on the miracle of order—that is, even in the midst of contingency people continue to make and share meaning with others.

In a more explicitly religious context, others have used such ontological analysis to bring forth specific religious truths. The well-known theologian Paul Tillich argued that the three concepts of love, power, and justice were ontologically valid because of their ability to make reality understandable (Tillich 1954). For example, love can be understood as the moving force of life, and with this desire all individuals can act and make their lives meaningful. Power, in this sense, is related to the courage necessary to quell the uncertainty that may result from this freedom. And finally, justice refers to the relationship of every person in the world with others. Because individuals exist in the world together and may construct their lives very differently, justice makes possible the
understanding that they should address one another with concern, so that uncertainty does not result in conflict. As should be noted, each of these religious truths results from the experience of being in the world with others. Because these elements stem from this existential condition, rather than an external basis, they allow for knowledge to exist that is consistent with the intersubjective condition of human existence.

This theory of knowledge, additionally, has implications for thinking about social life. If truth is to be found within human experience, this belief puts considerable weight on individuals to act in creative ways to order life. If individuals exist in the world with others, they must reflect on this responsibility to care for others. Furthermore, this focus on human potential and relatedness to others has particular relevance for thinking about what human communities should look like and how ethics might be conceptualized. Indeed, such an analysis assumes the ability to act in meaningful ways and to improve social life. This conclusion is in contrast to the evangelical doctrine of original sin, which assumes a specific human nature that detracts from human potential.

Human Nature

Although Evangelicals assert that there is a basic human nature, inherited from the first human sin, existentialists maintain that human potential is not limited in such ways. Because there is no escape from human experience, individuals cannot produce universal truths such as those related to an essential human nature. Instead there is no fundamental truth regarding humanity except that persons exist in the company of others. Humans are thus free to act in spontaneous or novel ways. This ability does not signal
that persons are never constrained in their actions, but that such barriers vary across time and space and are a result of constructed social arrangements rather than metaphysical truths.

If there is anything essential about human nature, such as the will to survive or the need for social interaction, these considerations emanate from within human experience (Gehlen 1980). Further, such fundamental experiences are open to human interpretation and take on endless forms in various contexts. For example, the need to stay alive can be accomplished in a variety of ways, while norms for social interaction vary across cultures (Fromm 1941). The point is that from within human experience, one cannot locate a universal human nature. Instead humans are thought to be open and capable of acting in unanticipated ways (Gehlen 1980).

This new approach to thinking about human nature has important implications for social life. If individuals are not motivated by a fixed nature, various forms of collaboration are possible. For example, criticisms that certain ideas are utopian or unrealistic lose coherence if persons are not limited a priori by abstract forces. In this regard, if individuals are not thought to be inherently selfish, they might be able to communicate effectively and acknowledge the needs of others. This outcome could lead to alternative models of caring for others that require a type of cooperation once thought to be impossible. Finally, current institutional arrangements that fail to meet the needs of certain groups can be criticized in unforeseen ways. If such arrangements are not rooted in universal laws of how humans must interact and are not necessary to constrain selfishness and antagonism, they cease to be beyond critique. Such thinking might
suggest that humans are capable of addressing the unmet needs of a society, such as universal health care, and that these programs could radically differ from those available in the past.

**Meaning and Transcendence**

With respect to human nature, Evangelicalism suggests that humans are incapable of doing good on their own and are in need of redemption from an outside source. While some traditions accept that positive changes can be accomplished, such as in the doctrine of common grace, this potential ultimately emanates from God, rather than humans (Berkhof 1949). Hence any human hope of transcendence comes from the intervention of God in history. The outcome of this scenario is that individuals can shun their human form someday and exist in communion with God. This narrative implies the need for supernatural assistance, and most commonly that transcendence will occur when individuals are reborn and released from the suffering and evil of the physical world. Once again, this transcendence assumes a basic dualism between the physical and spiritual world and that humans are part of a narrative that is not entirely their own. Going further, this dualism suggests the prospect of eternity that exists outside of human experience, usually in the form of absolute or unlimited time. God is thought to exist outside of time and thus is able to intervene in the physical world and provide the justification for transcendence.

Thinkers affected by existentialism have also considered what transcendence might mean, especially as interpreted from within human experience. As has already been stated, in traditional Christianity eternity refers usually to endless time and assumes that humans are in time but sometime later will be released from this situation. In
existentialism, this type of thinking is reversed. According to Heidegger, instead of thinking that persons are in time, which is controlled by something external to time, humans should be viewed as basically temporal (Heidegger 1962; Husserl 1964). In fact, according to Heidegger, time exists only as the experience of time. Only because persons are mortal, in other words, can time be conceived at all. Thus time is a human creation that can be (re)constructed to meet social needs.

Related to this more experiential view of time, the idea of history and the future must change. Unlike in traditional Christian time, where temporality is derived from a specific religious past and is going steadily toward a fixed telos, humans are in charge of their own destiny. Paul Tillich uses the words chronos and kairos to distinguish between these two interpretations of time (1967). Whereas chronos refers to traditional clock time, kairos recognizes that time is open to human action. “Kairos is not the quantitative time of the clock, but the qualitative time of the occasion, the right time” (Tillich 1967: 1). Thus time in this sense can be said to extend everywhere; time is not linear, as is usually thought to be the case, but is open for any possibility.

This viewpoint opens up the opportunity to think of eternity in entirely different ways. The very possibility of bringing things forth out of nothing, on a daily basis, could be talked about in terms of transcendence and eternity. Therefore, instead of the evangelical emphasis on meaning emanating from God, existentialists suggest that meaning comes forth out of human contingency. Humans exist in the world prior to any fixed meaning and therefore are “condemned to be free” (Sartre [1945] 2007, 29). They are thus free and responsible to produce meaning, because this sentiment does not exist
without humans constructing and reproducing their lives. Walter Benjamin, for example, refers to this daily practice as “profane illumination” (Benjamin [1966] 1978, 179).

Others have talked about how transcendence might be found within human relationships. Because in human experience persons are always situated with others, personal subjectivity can be transcended to engage others. Religious transcendence could thus be found in between individuals, rather than within individuals alone or between individuals and God. Martin Buber spoke of the primacy of this relationship in his work I and Thou but left this discussion somewhat vague (1970). Emmanuel Levinas has taken this concept of transcendence much farther in his work on alterity ([1962] 1996).

For Levinas, individuals do not relate to each other easily because they are all alike but are able to transcend their uniqueness and address others ([1962] 1996). In fact, this very difference of the other makes such relationships profound, because often they are not at all the same. Transcendence for Levinas is thus the love for the other as other. Indeed, he locates the infinite in the inescapable responsibility for others that is part of real human relationships. According to Levinas, religion does not consist of a sacred being, or a metaphysical essence, but rather what he calls “illeity” or true transcendence between individuals (Levinas [1974] 1996). Thus this “rupture of essence is ethical” (Levinas [1974] 1996: 120). That is, this overcoming of the individual, without any abstract intermediary, is the basis of ethics. Such thinking about religious transcendence suggests that even within the confines of human experience, eternity and transcendence can still be conceptualized in ways that make them profound and more than just the sum of an individual’s experience. Transcendence is achieved, writes Levinas, “through a
search for the human or interhuman intrigue as the fabric of ultimate intelligibility. And perhaps it is also the way for the wisdom of heaven to return to earth.” (Levinas [1984] 1996: 158).

The rethinking of transcendence and meaning has important implications for thinking about human relationships. If history no longer has a fixed trajectory, this finding gives significant weight to human action. Humans are free to cooperate and take history in novel directions. Without an ethereal telos, history comes to represent the collected record of human involvement in the world. Events are therefore never simply evolving but are open to negotiation. If individuals cannot rely on some external source to provide meaning, as Sartre declares, they must be responsible for bringing meaning into the world (Sartre [1945] 2007). Of course, individuals do not do this alone, or outside of an existing context, but rely on nothing but the creative work of humans to realize change in the world (Marx 1852). Imagining alternative social arrangements is thus not only possible but a key responsibility of human life. Instead of waiting for history to unfold, individuals should be viewed as always acting. Even inaction has an effect, such as maintaining the status quo and reproducing current conditions. If humans take this potential to imply a certain responsibility, they may emphasize the importance of acting in ways that improve social life.

Although this framework could be interpreted to suggest that humans ultimately act alone or in ways to improve personal success, this outcome is not necessarily the case. Particularly important is that a new paradigm for human relationships is suggested (Dussel 1993). If individuals are able to connect to others, even in spite of their differences, the implication is that humans can and must work together to bring forth
meaning in the world. Without others, the transcendence of subjectivity ceases to be possible in this rendering of social life. If humans are able to work together in productive and creative ways, there is the potential that caring for others can become a basic tenet of existence. And because this transcendence is predicated on difference rather than sameness, a radically new version of community is possible than has been offered in the past. Such a theory might suggest that certain interventions aimed at improving social life, such as those related to the organization of health care, might be practical and responsible responses to living with others.

Community

Evangelical conceptualizations of community emphasize the need for individuals to be tied together. This proposal is discussed usually within the context of shared religious identities, such as being “born-again.” Sharing this religious mark came to distinguish those within the religious community from those who belong to the more general human community. This description of community implied that individuals need to become similar in order to work together, likely because sin inhibited authentic relations between persons. But because individuals are related only indirectly through a shared responsibility to God, the resulting community is not entirely rooted in the basic conditions of human existence.

The evangelical notion of community thus emphasizes individual spiritual relationships with God and secondarily a relationship to others. As mentioned previously, this type of thinking has been strengthened by American individualism that emphasizes personal rights and liberties above responsibility to others. In this version of community, individual rights must be protected because others might threaten them. Various
interpretations have thus suggested that individuals must be constrained by a strong government or religious authority, so that some type of bond is instilled. In either case, individuals are not thought to be able to work together without some external influence. The automobile has been suggested as a metaphor for this way of living with others (Slater 1976). Instead of being able to coordinate their actions with others, persons drive alone and others merely stand in the way of their destination. Communication is thus not emphasized, unless absolutely necessary, while aggression is tolerated as part of self-protection. The ultimate implication of this way of life is thus that persons forget that they even exist with others, except in inconvenient ways.

A vision of community that extends from human experience would likely look quite different if individuals have direct connections to others based on a shared humanity. This outlook would require that any notion of community be entirely inclusive and not assume that individuals must be tied together through some external source, such as a religious or national or familial identity. This version of community also would require new imagery for thinking about human relationships. Instead of standing side by side, due to a shared connection with something else, individuals now stand face-to-face in relation to one another (Levinas [1951] 1996; Dussel 1993). Indeed, the formation of community is not something that will occur in the future, because individuals already exist in unmediated relationships with others in the present. Although this framework does not ensure that individuals recognize this bond in the face of others, they have the potential to care for others in meaningful ways without intervention from a supernatural or government authority.
This rendition of community differs from traditional versions, since the assumption is not made that individuals must be similar in order to exist together. Though in the past a community was often predicated on the need for shared norms or beliefs, in this framework togetherness can be negotiated out of diversity (Luhmann 1982). Instead of supposing that persons must abandon certain traits and assimilate to the group, individual differences are not understood to threaten group stability. Contemporary writers have considered the violent potential of traditional notions of community, which assumed that some authority must constrain individuals and provide a universal narrative (Lyotard 1984). For example, emphasizing consensus often undermines certain viewpoints, because a particular perspective is elevated over all others. In this respect, existentialists suggest that communities must be open to change and allow for all individuals to be involved in organizing group life. For this reason, Canclini contends that “hybridity” should be viewed to characterize communities (1995).

In this framework, group involvement is more expansive than is customary in traditional varieties of democracy. Some writers have suggested that societies are currently experiencing a “thin democracy” whereby individuals are able to contribute to group life in relatively superficial ways, such as voting for a slate of political candidates (Barber 1984). By contrast, the development of a “strong democracy” would move beyond an emphasis on the individual right to speak one’s mind and consider how listening to others and collaboration should be a fundamental part of human life (Barber 1984). If individuals recognize that such relationships are a basic aspect of human
existence, community life might emphasize the need for shared responsibility, while rethinking the traditional democratic structures that are rooted in authority rather than cooperation (Dussel 1993).

This new version of community would likely have important implications for thinking about social responsibility. If individuals always exist with others, explanations that try to convince persons that improving social life is important might not be needed. Therefore interventions that address inequalities between persons and allow them to act meaningfully might be seen as important and necessary. The fact that serious inequalities exist might not signal the need for a fatalistic resignation to human nature, but suggest that persons rethink social arrangements in creative ways. If individuals have the capacity to share responsibility with others, social interventions may not be seen as utopian but rather authentic attempts to reimagine social life.

**Ethics**

Evangelical ethics stress the need for individuals to act toward others in the ways that God intended. Individuals have little of this potential on their own, due to their fallen nature, but must rely on God in order to know what is good. Thus ethics relate to what is known through God’s intervention in inspiring the Bible. Although individuals do have a responsibility to care for others, this interaction is instructed by God and is secondary to the individual relationship that persons have with God (Bloesch 1987). The implications are, therefore, that ethics are primarily individual and that they reflect not a core feature of human existence but rather an external commandment from God.

From the existential perspective, ethics are located within human experience and relate to human freedom (Beauvoir 1948). Because individuals are destined to make
meaning, and cannot help but act, the question becomes how individuals will make use of this potential and whether they will recognize their relation to others. Though some critics have been concerned that an ethics that emanates from human experience would result in little more than relativism, others have explained how human experience can simultaneously suggest a very concrete notion of ethics and a sound morality (Dussel 1993). In fact, in the existential sense, ethics are absolute because persons have a universal responsibility toward others with whom they share the world. However, because humans make meaning in various ways, love for the other can assume various forms. In a manner of speaking, moral imperatives are not necessary when persons exist face-to-face, share the world, and are implicated in each other’s actions. Nothing, in this sense, must be imposed.

Many writers have suggested that there are various ways to describe how universal responsibility toward the other might look. But ethical frameworks can maintain ambiguity and be open to multiple applications without losing meaning altogether or becoming absurd (Beauvoir 1948). Although meaning is never fixed in an existentialist framework, this condition does not preclude the possibility of making meaning together. Thus, the freedom of humanity to create such meaning serves as a basis for ethics, in that humans must be able to realize this existential potential. Although universal ethical recipes cannot be formulated because individuals are always located in concrete situations, humans are always responsible for ensuring the freedom of others to make themselves in the world. This standard can thus be used to judge whether an act is good or bad. Ethics are not just individual, and thus judgments are possible about the nature of interaction.
Ethics no longer need to be revealed, as is often believed, because humans already exist in ethical relationships with others (Levinas [1974] 1996). In other words, individuals no longer need to be convinced of why they should act in certain ways, because proper behavior is already implied in their existence. Clearly, humans can downplay or ignore these relationships and the ethical messages, but this possibility does not change the fact that they exist. Because persons become humans only through their existence in the face of others, this association serves as a moral maxim. Additionally, as discussed in the context of community, the fact that persons are different does not preclude their treatment as others. The transcendence of subjectivity toward others is the most fundamental existential position, and therefore ethical responsibility for the other is primary to everything else. In this sense, ethics must not be understood as foreign to human nature. As Fromm writes, “to love one’s neighbor is not a phenomenon transcending man; it is something inherent in and radiating from him. Love is not a higher power which descends upon man nor a duty which is imposed upon him; it is his own power by which he relates himself to the world and makes it truly his” (Fromm 1947).

In addition, the work of Liberation Theologians suggests the need to rethink the notion of sin to reflect the connections between persons. If individuals no longer stand in personal relationships only with God, sin takes on new meaning. Sin therefore no longer constitutes a separation from God, but perhaps a schism between persons. For example, Enrique Dussel (1993) suggests that sin is destructive only in the context of harming others. In addition, the concept of institutional sin can be used to convey how institutions can be guilty of harming people through encouraging competition and the separation of
individuals from one another. This reinterpretation of ethics suggests that social change might be elevated above personal change. Ethical action thus reminds individuals of their responsibility toward others rather than simply the importance of personal choices.

One final aspect of this ethical framework is that ethical decisions no longer reflect merely good individuals. This individualistic emphasis in traditional virtue ethics suggests that persons act in nice ways because of benevolence, either on their own or inspired by some external source (Aristotle 2000; Spiegel 2004). This traditional perspective suggests that ethics involve a choice; that is, individuals can decide whether to relate to others and act on this conviction. Nonetheless, no one can truly make this decision, because this relationship with others is the primary feature of human existence. There is thus no choosing whether to be with others, since personal freedom already presupposes the existence of the other. In short, as Levinas writes, “[the other] has chosen me before I have chosen it. No one is good voluntarily” (Levinas [1974] 1996: 117).

Even if individuals cannot will themselves to be ethical on their own by virtue of their primary relationship with others, they must recognize and respond to this responsibility. In other words, human freedom allows for persons to ignore these relationships, although not to escape them (Fromm 1941). This leads Erich Fromm to emphasize the art of living, whereby individuals recognize their responsibility to others and act on this principle. He writes, “man can relate himself to others in various ways; he can love or hate, he can compete or cooperate; he can build a social system based on equality or authority, liberty or oppression; but he must be related in some fashion and the particular form of relatedness is expressive of his character” (Fromm 1947). Character here refers not to the sole importance of the individual in choosing to relate to
others, but in recognizing that human life is ultimately for others. This alternative
approach to ethics is important for Fromm, specifically because of the implication for
how humans will respond to existential freedom. If such freedom does not imply that
individuals exist absolutely alone in the world, how must persons organize themselves to
reflect the importance of human relationships?

This new ethical outlook suggests potentially that individuals must respond to
their responsibility for the other and organize social life in ways that are consistent with
this existential freedom. If ultimately humans make meaning in the world with others,
social arrangements that limit this potential for certain persons must be understood to be
unethical. Further, ideologies that support absolute freedom and the importance of
personal over social responsibility undermine the potential to care for others.
Contemporary inequalities can thus be interpreted as hindering individuals from
contributing to social life and potentially damaging relationships between persons
(Dussel 1993). Therefore, social interventions could serve as a reminder of shared
responsibility and allow for authentic cooperation between persons without threatening
individual well-being.

_Social Theory and Implications for Health Care Organization_

This exercise in social theory is important for what is suggested about human
relationships. Whether they are primary or secondary matters a great deal for thinking
about how persons relate to others and organize social life. Furthermore, the notion of
existential freedom has been interpreted in different ways that emphasize either the need
for authority or individual spontaneity (Fromm 1941). Whether a framework emphasizes
the precarious nature of human life, when individuals are free from constraining
institutions or gods, or instead focuses on the freedom to recognize and act on creative potential will likely affect how social relationships are appraised. If such relationships are thought to exist only as a result of some shared foundation, rather than as a basic feature of human existence, collaboration with others might be undermined by individual differences (Dussel 1993). The potential is thus that certain renditions of community that are predicated on sameness and the need for authority will downplay the importance of human creativity and cooperation in organizing social life. In the end, such visions of community and ethics are important to understand how social interventions are interpreted. Whether or not cooperation is thought to be consistent with such theologically inspired worldviews might be related to supporting these programs and/or offering alternatives.

This chapter is not meant to suggest that either evangelical or existentialist paradigms of social life will be uniformly related to thinking about social interventions in particular ways, but that they offer different images of human relationships. Evangelical Christians have a strong history of caring for others and emphasizing the need for personal relationships, yet they have historically not been in favor of radically altering social arrangements in favor of racial or economic equality (Emerson and Smith 2000; Hinojosa and Park 2004; Taylor and Merino 2011). This comparison of two theoretical frameworks perhaps sheds light on why Evangelicals might be wary of individual and collective potential, without social life being rooted in the shared foundation of Christian truth. In this sense, social interventions might be misguided without being a part of this ethereal bond.
In the specific context of contemporary health care reform, new policies have been implemented that may take on particular importance in the evangelical context. Whether such policies assume that radically different notions of community can be accomplished in this life might be considered utopian or contrary to the Christian notion of history. Additionally, policies that do not take into account human nature might be thought to cause inadvertently more problems if care is provided indiscriminately without the potential for personal accountability. Finally, responsibility toward others might not be understood as a basic human duty, and individuals may be wary of policies that are not rooted in religious commandments. If individuals do not share the same basis for thinking about ethics, there may be little potential in this context for good to be done in the world. Although preliminary, these speculations underscore the potential importance of religious theology in thinking about contemporary aspects of health care reform. They may further emphasize the particularities of Evangelicals who care deeply about others yet maintain resistance to particular collective interventions into the organization of social life.
Chapter Four: Research Methods

In this chapter, I will explain the specific methodology used for this dissertation project. In order to answer the guiding research questions, a methodology has been chosen that is appropriate for the task and consistent with my philosophical assumptions as a researcher. These guiding research questions are:

1. How is evangelical theology connected to views about social responsibility?
2. How do Evangelicals think about health and illness in the context of their religious beliefs?
3. How are contemporary policies that address the organization of health care interpreted within an evangelical worldview?

Because these questions seek to understand what evangelical beliefs mean to individuals, methodological strategies that facilitate understanding in contrast to uncovering large patterns or structures are most suitable (Pearlin 1992).

For this project, the qualitative methodologies of phenomenology and grounded theory will be important guiding frameworks. These are appropriate because they give considerable weight to human experience and interpretation. This viewpoint is in contrast to methods that seek to minimize the human element and seek objectivity. In this particular study of religion, emphasis is placed on religious beliefs and experiences rather than abstract theories about the function or veracity of religion. Furthermore, the methods of phenomenology and grounded theory emphasize that the role of the researcher is not problematic. Since knowledge is thought to be mediated fully by human experience, the goal of research is to understand the construction of knowledge rather than simply to
produce data. In order to provide evidence of the appropriateness of these methodological strategies, outlining the philosophical assumptions made in this research is helpful (Moustakas 1994; Creswell 2007).

**Philosophical Assumptions**

The main epistemological assumption made in this research is that dualism is no longer appropriate for explaining knowledge. Classic theories of knowledge emphasized an objective foundation that individuals could access only through appropriate techniques, such as religious revelation or the scientific method (Callinicos 2007). The goal of research from this perspective is to limit bias associated with individual subjectivity and discover facts as they exist in reality. Most important, according to this paradigm, is that individuals can at times transcend their own subjectivity to reach knowledge that is universal and external to human influence.

Contemporary theories, by contrast, have been influenced by the “linguistic turn.” This maneuver refers to the important relationship between language and knowledge. Although classic theories of knowledge suggest that language is simply a tool used to mimic reality, language is now thought to be central to the creation of knowledge (Murphy 2012b). Reality is thus interpreted to exist, and named and classified in specific ways. Furthermore, after this change knowledge can no longer be separated from the human form. This claim has led many contemporary thinkers to emphasize “the flesh” in order to ground knowledge fully within human experience (Merleau-Ponty [1964] 2004).

If reality is thought to arise from language and is always constructed and negotiated within social interaction (Berger and Luckmann 1966), talking about
objectivity is no longer appropriate. Instead, attention must be given to the particular meanings produced within local contexts. Different narratives are thus possible because knowledge is never automatically universal but arises from particular “interpretive communities” (Fish 1980). Knowledge is therefore intersubjective and transcends the experience of isolated individuals, yet it is always tied to individual interpretation (Schutz 1964).

If objectivity is no longer possible because knowledge is fully mediated by human experience, the usual strategy for achieving understanding must change. Although the epistemological realism of classic theories is consistent with positivist strategies aimed at uncovering “pure” knowledge, contemporary theorists imagine alternative types of research. A key feature of the scientific method is to eliminate human subjectivity and study social life in an unbiased manner. However, if knowledge is produced through social interaction, research should strive to uncover how certain experiences come to be regarded as authentic, instead of producing generalizable explanations. Facts, in this sense, are understood to be “accomplishments” rather than “things,” because they come to be accepted through negotiation (Garfinkel 1967). This perspective has led some researchers to elevate in importance the biography of how such information comes to be interpreted as legitimate in particular settings.

If a history of knowledge can be elaborated, understanding the specific context in which meaning exists might be important. This context is often referred to as a *lebenswelt* (lifeworld) or a “culturally transmitted and linguistically organized stock of interpretive patterns” (Habermas 1987, 124). Thus spheres of meaning are important influences on
how reality is understood. Each context may have different styles of communications, or language games (Wittgenstein [1953] 1972), that shape all accounts of reality. Humans, therefore do not act or communicate in fixed ways but always respond to meaning that is interpreted within specific contexts (Blumer 1969). Accordingly, to understand the meaning of local knowledge, researchers must become familiar with the reality within which meaning is constructed. This task involves communicating with and imagining the perspectives of individuals for whom this knowledge is “taken for granted” (Blumer 1969).

Based on these philosophical assumptions, methodological strategies that allow the researcher to communicate with individuals are important. In the context of this dissertation project, the lifeworld of Evangelical Christians is particularly important to understand. Important religious beliefs, language, and experiences contribute to what certain concepts mean to these individuals. In order to facilitate the type of contact necessary to share meaning, qualitative methodologies are most appropriate. Additionally, strategies that take an inductive approach to producing theory are consistent with understanding the local production of knowledge.

If meaning is constructed differently in particular contexts, deducing from grand theory to specific instances will likely overshadow the reality of different interpretations. Because researchers must engage individuals to understand their experiences, research that relies on generalizable findings might overlook the various perspectives that exist and contribute to the development of what is considered to be valid knowledge. Therefore inductive strategies that are important for multiple perspectives to be influential, both
those of the researcher and of study participants, allow for shared understanding to
develop that is not limited by previous theoretical findings. Since philosophical
assumptions relate to the selection of methodological strategies (Gouldner 1970), this
dissertation project is guided by the theoretically compatible frameworks of grounded
theory and phenomenology.

*Grounded Theory Research Methods*

The grounded theory method was developed originally by Barney Glaser and
Anselm Strauss in their work on dying (1965). Later this viewpoint was explicated as a
constant comparative method of qualitative research (Glaser and Strauss 1967). The core
idea of this method is that theory should emerge from the data, and thus research should
not be guided by fixed hypotheses. Further, data collection and analysis are done
simultaneously and continue until the theory is thought to be fully saturated or
comprehensive (Glaser and Strauss 1967). The data analysis process involves beginning
with open or preliminary codes (Charmaz 2006) and progressing to axial codes that seek
to order categories and organize relationships. Throughout this process, memos are
created that allow the researcher to express ideas that emerge through comparing data
from different interviews or observations. The final steps include sorting the categories to
elaborate major themes and writing the theory with relevant literature woven into the
overall product.

The original variant of grounded theory is a highly structured version of
qualitative research. The emphasis on specificity in elaborating causal relationships and
recreating social processes, as they actually exist, is heavily influenced by positivist
methodologies in the natural sciences (Charmaz 2006). As in positivism, the researcher must follow a strict procedure in order to eliminate bias and produce objective theory. This emphasis on developing “pure” theory has led some researchers to develop contrasting grounded theory approaches that emphasize the social construction of knowledge and the interpretive role of the researcher (Charmaz 2006).

Kathy Charmaz, a leading grounded theory researcher, has advanced a methodology known as “constructivist grounded theory” (2006). This method emphasizes that researchers cannot help but filter their findings through their own perspectives. Meaning therefore is never stable but located in particular contexts. The role of the researcher is thus to negotiate how meaning is constructed within particular situations. Indeed, multiple meanings may arise from research that can contradict one another. Because social relationships are complex, this strategy allows different perspectives to coexist. Furthermore, this complexity is useful in considering how meaning is constructed in the context of power. For example, which interpretations will be officially accepted and how they are negotiated and challenged through social interaction can be assessed within the confines of grounded theory (Charmaz 2006).

Although this version of grounded theory is influenced by the inductive approach of positivist grounded theory, there is less emphasis on a rigorous set of procedures. Though this approach also emphasizes the constant-comparative method, constructivist grounded theory does not focus on elaborating causal structures but the production of meaning through particular processes. This process begins with open coding that involves going through data line by line and encourages the use of action words to describe
participant experiences (Charmaz 2006). “In vivo” codes are also used that emphasize “taken for granted” knowledge and the specific language used in a particular context (Charmaz 2006). Once multiple interviews or observations are completed, comparing data becomes possible through the creation of memos. These documents allow the researcher to begin to develop categories that link the experiences of multiple individuals.

Once major categories are elaborated, the researcher can then consider whether these concepts have been fully “fleshed out” by the data. In the case that some categories are still relatively underdeveloped, repeat interviewing or interviewing additional participants may be necessary to address these areas of interest. This sampling for data constitutes theoretical sampling. Finally, a draft of the research can be written that develops a theory. What is important in this methodology, however, is that theory takes on different meaning. While in the original grounded theory tradition theory referred to something generalizable and objective, here theory refers to communicating meaning that is constructed within the context that is studied. As Charmaz explains, “Interpretive theory calls for the imaginative understanding of the studied phenomenon. This type of theory assumes emergent, multiple realities; indeterminacy; facts and values as linked; truth as provisional; and social life as processual” (Charmaz 2006, 126). Therefore, the result of constructivist grounded theory is not grand theory but rather an attempt to elaborate one particular narrative among others.

Phenomenological Research Methods

Phenomenological research shares several important objectives with grounded theory research. These include focusing on experience and meaning, developing detailed
descriptions of experience through observation and interviews, and recognizing that
research is fundamentally interpretive (Moustakas 1994). In addition, both methods
emphasize the suitability of qualitative research methods to address how meaning is
constructed and experienced. Although the specific procedures vary according to each
tradition, these methods are compatible approaches for undertaking qualitative research
projects (Charmaz 2006). The particular contribution of phenomenology is an emphasis
on grounding knowledge within human experience and elaborating the importance of the
lifeworld where facts take on particular meanings (Schutz 1962).

Like the constructivist variant of grounded theory, phenomenology takes issue
with positivist approaches that emphasize the discovery of objective knowledge that
exists in a pure or unbiased form. Instead, phenomenologists suggest that this “fictional,
non-existing world” of objectivity has been constructed in terms of the scientific
worldview (Schutz, 1964, 8). A more reasonable approach must ground knowledge in
human experience, because this information can never exist independent of human
perception and interpretation. For Schutz, this means that subjectivity must be
reintroduced into the social sciences (Schutz 1964).

More specifically, this strategy involves investigating the “taken-for granted”
nature of knowledge that exists within specific contexts (Garfinkel 1967). These systems
of meaning are significant lenses through which reality is interpreted. Furthermore,
phenomenological strategies emphasize the need to consider the particular frameworks
that researchers use to understand the world. This acknowledgement of personal
experience problematizes the nature of knowledge and makes necessary an examination of the variegated lifeworlds where knowledge may reside. As Alfred Schutz explains,

In putting our questions thus we no longer naively accept the social world and the current idealizations and formalizations as ready-made and meaningful beyond all question, but we undertake to study the process of idealizing and formalizing as such, the genesis of the meaning which social phenomena have for us as well as for the actors, the mechanism of the activity by which human beings understand one another and themselves (1964, 7).

Because reality is always tied to human experience in phenomenology, understanding the process of meaning construction takes precedence over simply discovering knowledge.

In order to understand the experience of a certain phenomenon, phenomenologists adopt certain techniques for research. The initial step is to determine if a research question is best answered by phenomenological methods (Moustakas 1994). If the goal is to understand the shared experience of multiple persons, then these methods are thought to be appropriate. Next, the researcher must recognize and describe the philosophical underpinnings of phenomenology (Creswell 2007). In this regard, data collection follows and involves asking open-ended questions about the personal experience of a phenomenon (Creswell 2007)

Hence data analysis involves finding connections between experiences and drawing major themes from the data (Creswell 2007). The final write-up provides a detailed description of the phenomena that are experienced. This outcome also includes integrating the experiences of the researcher, or at least acknowledging the perspective of the researcher in the methods section. Because the researcher is never neutral or
unbiased, this disclosure of personal feelings and interests is necessary to convey that the findings of the project are tied directly to the intentionality of the researcher (Moustakas 1994).

Dissertation Requirements

The dissertation committee was formed in January of 2013 and consists of four full-time graduate faculty members. A petition requesting an alternative composition of the committee was approved by the Dean of the Graduate School on January 15, 2013. This exception allows two members to be full-time faculty in Sociology and the remaining two to come from outside the Sociology Department. The co-chairs of the committee are Drs. John Murphy and David Kling from the Sociology and Religious Studies Departments respectively. The additional members are Dr. Linda Belgrave from the Department of Sociology and Dr. Stephen Sapp from the Department of Religious Studies. I was admitted to candidacy on April 25, 2013, following the completion of all departmental requirements prior to dissertation work. The dissertation proposal was defended on May 1, 2013. The entire dissertation was defended successfully on December 6, 2013.

Institutional Review Board

This project qualified for expedited review because it involves social/behavioral research with minimal risk to research participants. The original date of submittal was March 17, 2013. Initial changes were requested by the Review Board on March 29, 2013, and all corrections were made by April 1, 2013. Final approval of the protocol was
received on April 12, 2013. The Principal Faculty Investigator on the project was Dr. John Murphy, and the sole student investigator and interviewer was Berkeley Franz.

As is customary in research with human subjects, informed consent was received at the beginning of each interview. This agreement allowed the participants to decline to answer any question or end the interview at any point. Further, this signed document assured full confidentiality of the research participants. Because this signed agreement contains the original names of participants, these documents were stored separately from all data files after pseudonyms were assigned. In order to allow for the possibility of repeat interviews, a key linking these pseudonyms to data files was created and stored separately in a secure location. Only the Principal Faculty Investigator and I had access to the identifying information of participants. A copy of the informed consent agreement can be found in Appendix A.

Theoretical Sampling

Unlike in quantitative research, qualitative approaches do not aim for a random or statistically representative sample but instead use sampling techniques that are purposive and appropriate to answer the research questions (Creswell 2007). In grounded theory, this takes on the form of “theoretical sampling” whereby individuals are chosen or topics addressed in order to best elaborate a theory (Charmaz 2006). Individuals with varied experiences are sought in order to saturate fully a theory and allow for complexity in the data. Instead of generalizing to a larger population, such sampling strategies seek to describe in detail something particular (Creswell 2007).
Based on this notion of theoretical sampling, a total number of 25-50 participants was targeted (Creswell 2007). In order to increase diversity within the sample, these participants were selected from three different evangelical churches. Including multiple churches within this sample was important in order to include a spectrum of evangelical beliefs that are not particular to specific churches. These churches are located in urban and suburban areas of the Midwestern region of the United States and were chosen based on recommendations from personal contacts. Each church was specifically selected based on meeting key conditions. These criteria included whether the institution identifies explicitly as Evangelical and affirms publicly key theological beliefs of this religious movement (Noll 2001). As requested by the Institutional Review Board at the University of Miami, each church submitted a formal letter of agreement to participate in this project. Of the five churches contacted initially by the researcher, three agreed to be a part of this research.

In addition to purposive sampling of the churches involved, snowball techniques were used to select participants within churches. Once I made personal contacts with individuals in each church, participants were suggested by church members for the researcher to contact. I then approached these individuals through e-mail or over the phone and an interview was scheduled if they agreed to participate. Subsequent interviews were gained from additional contacts within the church or from recommendations from research participants. A total number of 29 participants were interviewed across the three churches. The data collection process continued until the theoretical categories were thought to be fully saturated.
Interviews

Each participant was asked to take part in an in-depth semi-structured interview. These interviews lasted between thirty minutes and three hours, and were conducted at locations of the participants’ choosing. The overall structure of the interviews involved my asking open-ended questions and audio-recording the responses. I also manually recorded notes throughout the interview. Follow-up questions were asked to encourage deeper reflection on particular subjects. An interview guide was used and loosely followed throughout these interviews. Participants helped guide the direction of the interview and were also encouraged to provide additional information that they thought to be important.

The interview guide organized questions according to several main themes. Each interview began with general or opening questions that asked about participant religious identity and involvement with their present church. Next, details were sought about the meaning of being an Evangelical and the theological beliefs that are associated with this commitment. The following section included questions on health and illness. These questions considered the importance of both physical and mental health and addressed strategies for caring for the health of oneself and others.

Following these preliminary areas of inquiry, the interview next moved into the question of social responsibility. These questions involved the possibility of trusting and caring for others. This section further addressed the importance of personal responsibility and the limits of care. From these general questions on social responsibility, the interview moved to the specific application of health care reform. Individual interpretations of such
policies and imaginations of alternative solutions were considered at this point. The interviews concluded with an opportunity for participants to add anything that they felt was important or had been left out. A copy of the interview guide can be found in Appendix B.

Discussion of Religious Beliefs

Because these interviews focused on questions related to evangelical beliefs, a brief discussion of these issues is important. Although religious beliefs can be sensitive to discuss, most participants seemed comfortable sharing their religious experiences with me. Yet some questioned what the goal of the study was. Many participants asked me why I was interested in studying Evangelicals and wondered if I too was an Evangelical. Although I am not an Evangelical, I attended an evangelical university as an undergraduate and thus had something in common with many participants. Because of the importance of disclosing the subjective experience of the researcher, I have written a short explanation of my experience with Evangelicalism in Appendix C.

For the most part participants did not seem distressed when I told them I was not an Evangelical. Although I did not offer this information up front, I shared this when asked. Only one participant, a minister, seemed concerned that I was not an Evangelical. Specifically, he seemed uncomfortable making claims about the exclusiveness of Christianity if I did not share these views. Although I assured him that I was not personally offended, but just wanted to understand his beliefs, he mentioned my beliefs several times throughout the interview and even invited me back to talk about religion in the future if I was interested. Additionally, a few participants were curious about what my
specific hypotheses might be and how I would portray Evangelicals. Although I
explained that grounded theory methodology does not begin with hypotheses but rather
seeks to understand participants, some participants seemed concerned that I might portray
Evangelicals negatively. For the most part, however, participants seemed very open to
discussing all aspects of their religious beliefs and were happy to help out with a research
project. Many persons expressed interest in the overall research questions and asked to
have a copy when the research was done.

Data Analysis

I began data analysis immediately following the initial interview, as is suggested
in the constant-comparative method of grounded theory research (Glaser and Strauss
1967). Following each interview, I gathered immediately notes from the interview and
recorded additional impressions from the experience. After the interviews, either I or a
professional transcriptionist transcribed fully the audio-recording of the interview. Once a
written version became available, I began the coding process.

To code, I initially went through the transcript of the interview line-by-line and
assigned short names or descriptions that summarized sections of data. The constant
comparative method began at this point with identifying data within a single interview
and later included comparing data between interviews (Charmaz 2006). This coding also
involved selecting important language that was used by participants and specific to a
particular context. Religious language is an important example of “in vivo” coding that
allowed me to analyze important meanings within the evangelical context (Charmaz
2006). Following this initial stage of coding, I moved on to focused coding. Here, I
organized the line-by-line codes into more significant codes that encompassed larger
sections of data. These codes conveyed important categories that were constructed from
the data.

Once I completed focused coding, I drew connections between categories using
memos. (Charmaz 2006). I used these documents to express initial thoughts on how
categories might be related to one another. Additionally, I used these memos to ask
important questions left open by the data that could be addressed in subsequent
interviews. This process is a key example of theoretical sampling. Because data
collection and analysis were conducted simultaneously, preliminary observations could
guide additional interviews in order to saturate fully initial categories. In the final stage of
memo-writing, I linked the data to the write-up of the research. I used these “advanced
memos” (Charmaz 2006) to organize the codes and draw major themes from the data. I
used additional exercises related to memo-writing, such as visually representing
relationships between categories, free-writing, and cross-coding (Charmaz 2006) to gain
insight into how overall themes could be best presented in the final written document.

Only after the theoretical categories were constructed from the data were
saturated fully could I proceed to the final phase of data analysis. This final aspect of
theoretical sampling involved ensuring that there was significant variation within the
categories and that additional interview data ceased to produce new ideas. When no new
aspects of these categories could be found in the data, I assumed that the data collection
on these questions had been thorough.
The final phase of data analysis involved developing a theory that emerged from the experiences of participants. This theory did not constitute knowledge in a grand or universal sense but included important meanings created within a particular context. This process was systematic in the sense of assessing carefully this reality from multiple perspectives, yet I never assumed that rigorous techniques could produce knowledge that was generalizable to a large population. The goal was to understand the experiences of these individuals in detail and produce a written account of meaning from this standpoint.

During the preliminary stage of the write-up, I presented the major themes that emerged from the data analysis process. This process included elaborating major narratives on health, illness, and social responsibility. Additionally, less common perspectives on these themes were included to suggest the diversity in opinion on these matters. These major and all other findings are presented in Chapter Five.

Chapter Six included the next stage of the write-up. This phase required that I draw connections between major themes and discuss their possible significance. This activity involved a discussion of what these themes mean in the particular context of Evangelicalism and how they came to be regarded as authentic or legitimate experiences. Additionally, attention was given to how individuals negotiate theological beliefs with practical concerns of daily living. How participants manage potential conflicts between dominant evangelical narratives and personal beliefs was also explored. Finally, the analysis considered whether the experiences of these participants were consistent with previous literature on Evangelicalism. How these findings contribute to the literature on evangelical civic engagement was further discussed.
The final phase of the write-up involved considering the practical implications of this research. Particularly, I gave attention to how these findings might contribute to scholarly knowledge on Evangelicals and inform practical issues such as health policy decisions aimed at reducing health inequalities in the United States. Most important, this final section included a consideration of how social change is envisioned in particular contexts. If changes in the organization of society involve human effort, sociological research could lend insight into how ideologies, such as theology, provide a framework whereby social change is interpreted. Ultimately, whether religious worldviews suggest the possibility of rethinking important social institutions, and how this reflection might affect future opportunities for social change, was considered to be a practical contribution of this research.
Chapter Five: Findings

Introductory Remarks

This chapter provides a description of how Evangelicals think about important themes related to community and social responsibility, while the following chapter will provide an analysis of important findings specifically within the context of the Affordable Care Act. These conceptual themes suggest a framework for understanding how Evangelicals interpret social responsibility and think about both the solutions to contemporary health inequalities and limitations of the pre-Affordable Care Act American health care system. These findings emerged throughout the data collection and analysis process as a result of theoretical sorting, preliminary coding, advanced coding, and memo-writing. Although all Evangelicals did not think uniformly about most issues related to healthcare reform, these themes help to organize important factors in understanding evangelical perspectives on health care reform.

This framework further allows for considerable complexity in thinking about social responsibility and change in the American health care system. Because this analysis assumes the existence of interpretation and the importance of participant lifeworlds, there is no expectation that participant responses will be identical or follow the same trajectory. Rather, this organization of conceptual themes allows for a presentation of important issues related to health care reform and leaves room for alternative perspectives within each topic.

In thinking about health care reform, Evangelical perspectives on community and personal relationships must be appreciated. The importance of Evangelical voluntarism,
in combination with personal responsibility, also suggests specific approaches for meeting the healthcare needs of a community. Within this framework of social activism and personal relationships, health care reform at the governmental level takes on particular importance. Finally, the possibility of change at an individual or collective level is an important concern and relates to human ingenuity and cooperation. Based on the interviews that were conducted, six themes make up the conceptual framework for understanding evangelical perspectives on health care reform: Evangelical Identity, Community, Social Involvement, Praxis, Personal Accountability, and Health Care Organization. A visual representation of this thematic structure is provided below. Figure 5.1
Additionally, to further contextualize this framework, Evangelical interpretations of health and illness must be established. As mentioned in Chapter One, there is some evidence that Evangelicals think about health and illness in particular ways. For example, if Evangelicals interpreted illness as edifying or Western health care as problematic, views on health care reform could reflect an underlying perspective on health and illness. The findings of this research, however, support previous quantitative studies that suggest that Evangelicals are significantly concerned with taking care of both physical and mental health (Mansfield, Mitchell, and King 2002; Benjamins, 2006a; Benjamins 2006b).

Participants in this study often described this duty as “stewardship” of the body that God has given as an important religious commandment. Christine, a female respondent, described this duty to take care of physical health:

Well I think that we were told that our body was a temple and that it’s to be respected and cared for…and I feel that we’ve been given an intelligence and a curiosity to learn about these things that most affect us positively…and I think that to not incorporate the knowledge that we’ve been able to obtain…no matter how small…would be something that would be…contrary to what he would want us to do.

Further, these participants did not hesitate to go to the doctor for physical health concerns, and though prayer for healing was often used, this intervention was in every case adjunctive to utilizing allopathic, Western medicine. Finally, these participants were very concerned with the scientific legitimacy of biomedicine and often expressed the belief that God works through medicine and doctors. One male participant, Dan, described the compatibility of Evangelical spiritual beliefs and modern medicine when deciding how to respond to a physical health issue:
Definitely pray about it…would definitely sort of seek particularly prayers for healing…not just praying in general …very particular…and uh but would definitely also seek medical care believing that sort of…I’d say in a fairly Reformed way that all truth is God’s truth, and so the wisdom…granted that there are certainly flaws in it…but the wisdom of modern medicine is not evil wisdom…that if it is truly wisdom…that it is God’s wisdom.

These findings suggest that Evangelical perspectives on health care reform are not a reflection of a religious opposition to Western medicine.

*Interview Characteristics and Study Demographics*

In all, twenty-nine interviews were conducted with participants from three evangelical churches. All interviews were audio-recorded and field notes were taken by the researcher. The interview length varied between thirty minutes and three hours. All but one of the study participants self-identified as an Evangelical Protestant. Table 5.2 contains the demographic information on these participants. The ages of these persons ranged from 29-65 and included 19 females and 10 males. The racial and ethnic characteristics of the sample were White (n=26), Black (n=1), and Asian (n=2). The participants that worked as health care providers numbered 10, while 17 were employed in other sectors, and 2 worked at home as primary caregivers to children. All names of individuals, churches, and cities are pseudonyms. A table of participants and which church they attend can be found in Appendix D.
Table 5.2

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of Participants</th>
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<tbody>
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<td>Gender</td>
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<tr>
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<td>10</td>
</tr>
<tr>
<td>Female</td>
<td>19</td>
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Themes on Evangelicals, Social Responsibility, and Health Care Reform:

1. Problematizing Evangelical Identity

Although all but one participant in the study self-identified as Evangelical, many expressed hesitance in identifying themselves in this way and provided several definitions of the meaning of Evangelical Protestantism. Although Evangelicals are often
grouped together based on shared characteristics, such as maintaining the authority of the Bible and sharing the gospel (Marsden 1987; Bebbington 1989; Wuthnow and Lawson 1988; Smith 1998; Noll 2001), considerable personal, political, and theological differences were found among study participants. Though the label of Evangelical has been useful in the academic literature on conservative Protestants, the use of this term among Evangelicals is highly contested. Understanding participants’ interpretations of “Evangelical” is critical for presenting a framework that emphasizes Evangelical activism and subsequently views on health care reform.

\textit{a. Public Perception of Evangelicals}

When participants were asked whether they considered themselves to be an Evangelical, many eventually said yes but showed considerable hesitation. When queried about this reluctance to identify in this way, many expressed concern that there is a particular secular or cultural meaning that associates Evangelicals with conservative religious beliefs, far-right wing politics, and intolerance. One male participant responded to the question of being an Evangelical in this way:

Probably. But it puts me in a camp that I’m not really comfortable being a part of. I tell people that I’m orthodox in my theology...and Evangelical from the standpoint...in the purest sense. But not in the social framework of...you know it’s become the right-wing tea party name and my skin crawls.

Leah distinguished between what the label Evangelical means to her and current connotations:
Um…I guess I would say I’m Evangelical…I’m sure there’s some official definition but I think of it as God as real and the Bible is true and we’re saved by grace through faith…not our own works. Um…but I also think about you know sort of wanting to distance myself from the news media, the crazy people who maybe you know who are really discriminatory or yell at other…you know really persecute…really persecuting other people. That is just not what I’m about at all…

Another participant distinguished between being Evangelical in one’s faith rather than being an Evangelical and additionally expressed concern that many religious figures in the news who have identified in this way have brought a lot of negative attention to a very diverse religious group:

Yeah I think by nature Christians are called to be evangelical…um but I wouldn’t…when I talk to someone I don’t actively describe myself as an Evangelical Christian…Yeah I think that…I think that a lot of times they are the very loudest and they can…I think they can be misguided in their attempts to spread the faith. I think you have to recognize that we’re all sinners and to view people who are not of the faith as people who you know are to be loved and cared as Christ did and to reach them where they are and not scream and yell at them about sin and so I think that so many people lump all Christians in with this group of people and that’s just frustrating and disappointing for us, all the people we’ve known who are just wonderful. So I think that term has become more associated with the more extreme and obnoxious wing of the faith.

Although several participants shied away from identifying with popular stereotypes related to Evangelicalism and political affiliations, the importance of being Evangelical for these individuals has various meanings, such as maintaining orthodox Christian beliefs or sharing the gospel.

b. Conservative Protestant Interpretation of Evangelicalism

For most participants, being Evangelical was important personally because of the importance of the Great Commission (Klauber 2008). These instructions, expressed by Jesus in the New Testament, were cited by almost every participant when they defined
the meaning of Evangelical. Sharing the gospel, as most participants stated, is an important responsibility that includes spreading the message of salvation through Jesus Christ, both through words and actions. This desire to be active in the world is crucial for understanding evangelical responses to health care reform, because this outlook establishes a particular way of thinking about responsibility to other people and the importance of moving beyond the Christian community.

One female participant, Shelly, describes the significance of sharing the faith as an Evangelical:

I think just that it’s our job as Scripture tells us, go into all the world and preach the gospel. And so you know…you know I feel like that is the…it’s a blessing and a burden in a way. That I always feel like that you know I ask God to just give me the words and place opportunities on my path and don’t let me pass them up. I can talk about him and tell about him and hopefully plant seeds or bring others closer to him.

Others said that persons should live a changed life, once a personal relationship with Christ is established. In this sense, sharing the gospel should be accompanied by setting an example by living ethically or by performing acts of service. One female respondent described being an Evangelical in this way:

What it means to me is number one proclaiming the gospel, who Jesus is, that he came, and why he died for us, what he’s done for us as far as our salvation. And then, just following that…Having that strong belief and faith and knowing there is hope you know number one that we are just passing through here, hands and feet, and living that out in a real way so that people can see it, not just in what you say but in what you do as well.

Although most participants expressed the importance of sharing the gospel with others, several participants seemed concerned that being an Evangelical in this sense could be offensive. Because the message of salvation through Christ alone is exclusive,
some participants feared being perceived as arrogant. For example, Jane spoke specifically of a family member who she knew would disapprove of her desire to share her faith with others:

To me, it means that I want other people to believe. And I want other people to know what I know and what I believe to be true and I want to bring them over to my side...my stepson would be so upset hearing me say that...I know to him and I know to a lot of other people it means that I think I’m right in everything that I do and say and that I think everybody else is wrong.

Another participant spoke to the exclusivity of Christianity implied in the desire to share the gospel with others:

I think you’ve got to settle with that term. I think you have to realize that it does mean...and here’s where I get a little hesitant. But it really does mean to evangelize. Which means that I have a better way. Which is a little scary...

Although the term Evangelical was associated almost exclusively with the responsibility to evangelize and share the gospel, some participants found this position challenging.

In addition to sharing the gospel, many participants also mentioned that being an Evangelical meant having a personal relationship with Jesus and believing in the authority of Scripture. One female participant described Evangelicalism as: “I would say the more of a movement of people who have a relationship with Jesus.” Other participants emphasized the true meaning of Evangelical as related to Scripture and the work of Christ. The term Evangelical, according to Chris, has only recently become politically charged with the proliferation of the Religious Right:

And so Evangelical has been removed from you know importance of the Scripture, importance of Christ and his work upon the cross and it becomes more associated with like what we would label as far right, or even just right political movement...so growing up in the 80’s, under Ronald Reagan, and seeing the right get strongly developed...
c. *Evangelicals and other Christians*

A few participants also used the word Evangelical to distinguish a group of Christian believers who maintain orthodox beliefs and make a personal relationship with Jesus and sharing the gospel a part of their everyday lives. Many contrasted this type of life-changing Christianity to religious groups that function largely as social clubs rather than encouraging personal transformation. For example, Karen described the book *Not a Fan: Becoming a Completely Committed Follower of Jesus* (Idleman 2011) as making an important distinction between individuals who are simply fans of Jesus and those who make the choice to follow him:

I think there’s been…at least for me there’s been more recognition especially because of some of the sermons that we’ve had at Crossroads. I read a book too. Not a Fan. There are fans of Jesus and there are followers of Jesus and I’ve just become really aware of that because I don’t want to be just a fan, I really want to be the follower. It’s I don’t…I think that some Evangelicals intentionally make that judgment, but I do think that even there are churches that describe themselves as less…they’re more a social gathering than seen as a commission.

Another participant describes a distinction often made between Evangelical and other Christian churches:

Um, I mean we tend to at the end of the day say… you know if it’s a Bible-believing, gospel-inspired church then I guess we would basically consider that evangelical, as part of the club.

While several persons thought of Evangelicalism as marking a distinction between Christian believers, others found such distinctions to be too divisive and desired more collaboration between Christian churches, in order to realize, as some participants described, the body of Christ.
d. Collaboration across Christianity

Because sharing the gospel is such an important part of Evangelical beliefs, many participants believed that churches could be more effective at accomplishing this aim if there were more cooperation, rather than internal disagreement. Instead of maintaining boundaries between churches, based on doctrinal differences, several participants suggested that Christians could work together to fulfill what is believed to be a key religious duty. One participant, Shelia, works in a church as part of an outreach program and is optimistic that growing collaboration between churches will allow Christians to share the love of Christ with other people around them. She has worked personally toward this end and has seen churches collaborate across an entire city to find ways to share the gospel both through word and actions aimed at improving community life:

I would love to see our churches really just come together. One of the things…and it’s unfortunate…and I’ll share this with you. One of the things as a minister on staff here and working with other churches. It’s kind of hard for our churches to come together and start. We’re seeing more of it now but I’d say especially 5-10 years ago. Our churches are entities and so everybody’s kind of doing their own thing. Just us coming together…the impact that we could have if more churches came together with their resources. I would love…before I leave here…I would love to see more of that versus we’re doing our own little thing over here and just doing this thing in another church. Just kingdom collaboration. That would be great and I think we could do it.

In this regard, Katie suggested that Christian churches are called specifically to be unified in the service of God. Church dissension, therefore, must be interpreted as a failure in the original Christian mission: "I think if we were more unified as a church absolutely. Because I think that’s what Jesus was calling us for and we’re not completely obedient to that.” While many participants drew clear distinctions between Evangelicals and other types of Christians, doing so presented a particular problem for some of these persons. If
Evangelicals are supposed to work together to bring forth the message of the gospel, cooperation between churches is more important than focusing on their differences.

\textit{e. Evangelical Identity and Health Care Reform}

Because reaching out to others through God’s love is a key component of Evangelical identity, there are specific implications for thinking about social outreach and, subsequently, collective interventions into the organization of health care. Specifically, Evangelicals are extremely concerned with being a part of secular life and are driven to belong to a community. Chris, a minister, describes his work of dividing the city into parishes and working to make sure that community needs are met:

We’re working toward having like a widow’s roster. So that sounds really biblical and it is. We’re caring for widows not only who are part of our church, but gasp are just part of the community. Right and so…so working with neighborhood associations, maybe even being the neighborhood association in the sense of how are we caring for our businesses…so it is a grander view of just making sure that our members are being accounted for, but it’s looking at the whole neighborhood and then in one sense empowering, I’m using a trendy term, empowering the neighborhoods to really care for one another within the neighborhood. So we’re seeing community probably in a way different way than a church typically does.

Further, being sensitive to public perceptions of Evangelicals is important for many participants, because negative stereotypes might damage their credibility and the possibility of playing a positive role in the public sphere. Therefore, understanding the use of the word Evangelical is especially important for grasping how Evangelicals think about the nature of community and the ways in which social responsibilities can be enacted.

\textit{2. Describing Community}

Based on the importance of sharing the gospel, a notion of community
should be developed in order to understand how a concern for others might play out. Specifically, who Evangelicals feel connected to and responsible for are crucial components of this definition. How Evangelicals describe a community is important for understanding social responsibility within an evangelical worldview. Finally, the importance of developing inclusive communities for Evangelicals has particular implications for thinking about improvements in the organization of healthcare. Whether Evangelicals are concerned with the health of others might be related to how community is conceptualized and whether caring for others is a high priority.

a. Importance of Community

Evangelical participants reiterated consistently the importance of community and caring for other people. Many persons also lamented how far community has strayed from the ideal. Because the Bible is explicit about the responsibility to care for others, through both the example of Jesus and the Great Commission, Evangelicals described sharing their lives with others as an absolute duty rather than a choice. This charge must then be elevated above all other concerns. One respondent, Lynn, describes how Christians have received the duty to give to others:

The standard and the bar is extremely high and we fall short of that continually with each other and with one another. And so…um so it’s um…you know just the mandate to love one another. Oh my goodness that bar is set so high isn’t it? And so when I see, think of community I think of that. We serve one another and there’s sacrifice involved for the greater good. And so what you lose is just that you know I look out for me, me first. You know I’ll climb on top of you to get what I want. But there’s thinking of something bigger that would benefit by all working together. So that’s how I see community.

When caring and sharing their lives with others, who is a part of this community, according to Evangelicals, must be grasped. Whether this community extends beyond
Christians might be important for thinking about how far this responsibility extends and whether certain strategies aimed at improving the lives of others are deemed appropriate.

b. Being a Part of the World

Evangelical Protestants are often distinguished from Protestant fundamentalists based on their desire to remain a part of secular life and care for others (Smith 1998). These participants responded similarly and stated that extending community beyond the church is an important part of being obedient to the commandment to love and care for others. Some participants, like Dave, thought a community must be inclusive, because sharing the gospel with others might be an opportunity to bring additional persons into the Christian fold:

I think it’s a Christian’s obligation not to be part of the holy huddle and only of the church…but in the community in general. And that by being in the community generally, you can hopefully lead people to Christ in the community. And if not…at least foster possibilities for future. Because again, you don’t necessarily bring them all in. But you might be doing the planting and getting people focused on it so that later they could accept Christ.

Other participants defined community as inclusive, because Evangelicals have a broad responsibility toward others. Instead of moving to the suburbs and sending their children to private schools, for example, participants at one urban church have moved back into the city and are attempting to develop a sense of community by establishing connections within neighborhoods and improving schools, along with other local services. Ultimately, most respondents stressed the importance of community extending beyond the Christian church and including significant social, cultural, and economic diversity.
c. **Diversity in Community**

Many Evangelical participants expressed that racial diversity is extremely important in any community. For example, a female participant described community in this way:

> And there would be no question of judgment or of class or anything of that sort. It would just be that everyone would accept everyone for where they are, who they are, and it wouldn’t matter…we wouldn’t have these subclasses and these type of things and to me that would be a beautiful diversity that I would love to see. So we would see people of all different ages, and races, and status, and everything…and it didn’t matter what you are, it didn’t matter your title, it didn’t matter anything. It would just be open and active and smiling and just a beautiful diversity.

With regard to socioeconomic diversity, the responses were mixed. Although no one favored large gaps between persons in a healthy community, some respondents desire to have more heterogeneous communities instead of neighborhoods and communities stratified largely by socioeconomic status. Shelly described a planned community near her church that she thought embodied a healthy amount of socioeconomic diversity:

> So they have some really big homes, and they have apartments, and they have condos, and so they are trying to attract young people and elderly people and baby boomers and people raising kids…and I love that.

Other participants thought that, ideally, communities should be much more equitable and share economic resources. Katie described community in this way:

> So to me the ideal community is when everyone’s living together and helping each other. You have…you know be it…you describe like a neighborhood, and people in that neighborhood who are doctors, and people in the neighborhood that weren’t, and they were the ones cleaning the hospitals, and they all kind of lived together and helped each other. So the people cleaning the hospitals weren’t living in the street or on the lawn and all the doctors were living in a mansion with eighteen bedrooms and only using two of them. So I just…I don’t think that’s what Jesus has called us to do. I think we’re meant to live kind of in uniformity together and to help each other.
Despite differences in the specifics of economic diversity, Evangelical participants were outspoken about the failure to incorporate many types of diversity into current communities and were adamant that healthy communities were inclusive and heterogeneous.

\textit{d. Community and Religious Diversity}

Although Evangelicals maintain the importance of developing a community outside of the church, some participants were hesitant to say that such a group should include religious diversity. Although many respondents were very comfortable with sharing their lives with members of other faiths, some remained hopeful that offering the gospel to others might lead eventually to more individuals becoming Christians. Several persons thought that religious diversity was consistent with the Christian mission to care for everyone. For example, one woman described how her minister began church services with an explicit welcome to everyone, including non-Christians:

When they start the service at Resurrection, Paul will often say, not every week, but... “This is a place where you’re safe to be, even if you don’t believe like us.” He’s very inclusive that way. So you don’t have to believe like us to come to our church. Be a part of us, to be with us. I mean obviously you’re not going to be the pastor or in a leadership position if you don’t believe that way, but you do not have to look like us, believe like us, to be with us.

Elaine, another Evangelical, discussed the importance of religious diversity and being open to others:

Yeah. Because I think...because again we know that it (religious diversity) exists. So we wouldn’t want to hide it or we wouldn’t want to seclude ourselves from that. We would want to do the influence and the things that we can do...what we feel is part of our Christian beliefs and there’s other people that are going to have theirs as well. But I think our obligation is to continue to shine and share what we know and how we feel and being open to those beliefs.
Although no respondents were opposed explicitly to religious diversity within the community, some, like Jane, expressed the desire for all individuals to become Christians:

Um, well I’d still want them all to be a Christian. I think that that’s (religious diversity) fine. Yeah. And we still all love each other. Absolutely, all kinds of diversity, you still love everyone.

Chris, a minister involved with planning community engagement, described the importance for caring for everyone within a community, yet at the same time he hoped that eventually everyone would become Christians:

Well yeah, because there is religious diversity within the city and the community. So we’re not going to neglect… But yeah I think there’s certainly what we call tolerance and ecumenicalism. Because again you can’t come along and say…we’re only going to help the Christian…you’re out sorry. You know that’s not historically how Christianity has worked…So I’m all for diversity, I’m just trying to think you know…I want everyone to be Christian because I believe that Christianity, Christ is the one that brings them true life and I am unapologetic about that because I’ve personally lived on the other side of that life. And I work with that other side of the life and I’m convinced that Christ brings true life.

Though the idea of a community for most Evangelicals in this sample included a large degree of diversity, another core facet is getting to know others deeply through personal relationships.

\textit{e. Intimacy in Community}

Developing relationships with others is very important for these Evangelicals, because individuals can truly care for others by knowing their needs and being close by for support. When describing a true community, some participants expressed that personal relationships promote spiritual development. Marybeth, for example, thought
that a community should include close relationships, because they provide the
opportunity for support in maintaining spiritual health:

    Being fully known and fully loved. So a place where people know…like the sin
patterns I struggle with that I’m always going to struggle with my whole life.
They know me and still love me. That’s the ideal community.

Other respondents emphasized getting to know others as a way to appreciate their needs
and better care for these persons. Kevin described the importance of relationships in this
way:

    I think we see a lot of community in the way that he (Jesus) interacted with his
disciples. I think the Jews as a whole had a high value on community and what
that meant and I think that’s an important aspect of building a healthy community
is you know that you know the people around you, that you interact, that you help
the people around you, that you…you know challenge the people around you.

Another female participant claimed that supportive relationships contribute to the health
of a community. She shared her experience of growing up in a community where
relationships were maintained to a greater extent than they are today:

    Our community…number one we knew each other. And the assets that were in
that community. For instance I could walk maybe two blocks and there was a
store there and a member of our community owned it. Not somebody that lived in
Westfield Park and then came over. Where I grew up the man that owned it lived
there…probably right next door to the store. You know our teachers lived in the
community. Our pastors lived in the community. So that’s what I see as
community. I mean whatever your business, your cleaners, your
Laundromat….you live there and so you know the fabric of your community.

For Shelia, knowing the members of a community encourages individuals to help others
with specific needs and allows community members to work together to ensure that all of
the necessary resources are available to everyone. In the end, getting to know others is
important for these participants, because caring for persons can be accomplished only
within a framework of intimate relationships.
The definition of community adhered to by Evangelicals has particular implications for thinking about social responsibility. Because Evangelicals stress the importance of caring for others, ideally on a broad level, this commitment might contribute to a version of social responsibility that favors widespread improvements to social life. Within the organization of health care specifically, this notion of community suggests that meeting the health care needs of all Americans should be important. However, within an evangelical context, caring for the health needs of others might be accomplished in a variety of ways. How Evangelicals should be socially engaged, whether widespread social change is possible, and how individual decisions factor into personal outcomes, must be considered in order to understand how contemporary social policies, such as the Affordable Care Act, are interpreted.

3. Evangelical Social Engagement

The third theme in this framework considers how evangelical Christians think about caring for other people through social engagement. Because Evangelicals feel a strong sense of responsibility for those around them, being active in improving social life is a primary concern. Because sharing the gospel has a high priority for Evangelicals, getting involved in local, national, and international communities is a way to fulfill the responsibility to love others. Understanding the importance of social engagement for Evangelicals is especially helpful in the context of health care reform. Though Evangelicals are concerned seriously about improving the outcomes of a very broad community, they are likely to prefer being able to play a personal role in caring for
others, due to the emphasis on social engagement. Further, understanding possible limits
to social engagement and caring for others might have implications for thinking about
different kinds of interventions to improve health care.

a. A Strong Record of Social Engagement

Recent research on the patterns of evangelical social research suggests that
Evangelicals not only spend a lot of time volunteering in religious organizations but do so
with secular organizations as well (Putnam 2012). Several participants mentioned the
impressive history of Christian social engagement, including the predominance of faith-
based hospitals, and the importance of voluntarism in Christian communities (Wuthnow
1991; Risse 1999). And almost all respondents not only stressed the importance of caring
for others through social engagement but also described specific ways in which they were
doing this in their own lives. For these persons, caring for others represents the work of
Jesus. This responsibility is not merely talked about but put into action in various ways.
For example, participants at Crossroads Christian Church described social engagement as
being the “hands and feet” of Jesus:

I don’t think it’s an option. I think it should be of utmost importance. I think that
again, we are the hands and feet of Jesus, whether we are medically trained or
whether we are not. We are to care or to serve, whether that means someone who
is ill or if that means someone who is struggling with a non-diseased based
illness. Whatever that is…it’s our duty to serve. So I think it’s extremely critical
and that’s what we need to bring to society, both in our society…all over the
world.

For Evangelicals, being involved in improving the lives of others is critical
because this belief includes ways of thinking about social change. Further, whether there
are certain limits to social responsibility, and how Evangelicals help others, are important for understanding how specific problems in the current American health care system might be interpreted.

b. Limits in Caring

Related to the idea of community, whereby most Evangelical participants stressed responsibility for all members of society, the possible limits of social engagement should be considered. Most participants, when asked whether there are limits on who they should help in life, believed that ideally they would like to help anyone in need. For example, Shelia describes that the Christian message of caring for others is explicitly inclusive:

If we’re following the principles of God’s word…he didn’t say just the folks in Jerusalem or the Pharisees. He said whoever…whomever you did this to. So that’s any and everybody.

Although caring for others in a very broad sense can present particular challenges, with regard to time, energy, or personal feelings, many Evangelical participants described the importance of loving everyone, even an enemy. Several persons shared stories of how they or someone they knew had confronted the enormous challenge of forgiving individuals who had harmed them and chose to care for them anyway. One woman shared her own experience of forgiveness. One of her close friends and her husband had been murdered by their child and she described how she came to forgive this individual and even correspond with him in prison through letters:
I have letters from him this thick, you know a pile like that, and my first letter I was so scared and wrote to him and I said I don’t know if you remember me but… you know I just want you to know that I think about you and, well, first I checked and he’s never going to get out of there, he got sixty years for one, sixty years for the other, and thirty years for the armed robbery so if he ever gets out he will be ninety-six…I’ll be dead… and I started writing to him and he wrote to me back and he said you’re the first letter I’ve had in fifteen years and I’m going to be here the rest of my life. I never ever thought I would have ever any more ties from the outside world and we’ve had the best relationship through letters and I really feel… My first thought was… I can’t write to this kid. I think God said yes you can… nobody else is going to do it. And he’s gonna die someday and not have anybody… so yeah… you have to keep doing it.

Examples of extreme forgiveness were thus extolled by many participants as examples of true care.

While this ideal model implies that Evangelicals should not exclude anyone from receiving care, some participants described limits as necessary in order to avoid wasting resources and making sure that help is effective. Leah described times when allocating care is necessary:

Yes…I mean I think that who I should care for has…it changes over time because if I tried to care for everyone I would be ineffective at all of it. So drawing those boundaries I don’t always you know…especially thinking of family and church community and then broader initiatives…just I try to choose wisely what I commit to because there is a limit to what I-one person can do.

Others described situations where establishing limits seemed to make sense.

Because these participants placed a high value on personal relationships, some persons preferred to care for those whom they already knew. Though they still felt responsible to a much broader group, some respondents described caring for those they knew and loved as much easier than strangers. One participant compared the ideal of caring for everyone with what happens in practice:
The definite answer is no, but of course what actually practically happens…I think the definite answer is yes we should be helping and caring for the needs of all those…believer, non-believer, whether friend or enemy. I think it’s easier to help care for those that you love and know…And to spend the energy doing that.

Jake’s view that caring for those you know is easier was echoed by many other participants, who described the challenge of trying to meet the needs of different people within the context of busy lives and having sometimes to perform uncomfortable tasks. One minister gave a specific example of the work of Jesus that did not involve helping everyone. Specifically, Chris found comfort in the fact that God understood that sometimes limitations are necessary:

And I think God is very gracious in that sense. He doesn’t say you have to care for everyone. I think about the Lord Jesus, but Jesus did he heal every infirmity? There were certain infirmities that were just purposely left unhealed. So like at the pool of Siloam, not everyone was healed. And that’s for me…that’s actually very encouraging in one sense…it’s not up to me, Chris, to save the whole world.

Though limits were acceptable because they were sometimes practical, a couple of participants expressed that these parameters might give priority to other Christians.

Although this view was espoused by a few participants, some persons advocated targeting the needs of the Christian community before moving into the broader society.

For example, one expressed a responsibility to care for other Christians first:

Technically, Christians are supposed to take care of other Christians first. And then secondly…everyone else. And that’s a little bit of a twist from how I grew up thinking to help everybody and that Christians can kind of take care of themselves. And I think we’ve kind of come to believe that actually Christians should help Christians first…Then in the process try to help others.

In addition to the preference for helping other Christians first, another limitation is important to mention. Because the emphasis on personal responsibility was emphasized considerably in this discussion of social engagement, the idea of accountability is critical
and will be taken up at length in section five. Important, however, is that some participants felt that social engagement and care might best be extended to those who are willing to help themselves. For example, John described a personal reservation when asked if he should care for others:

Yes, yes. No question. I and here’s where I get a little conservative. I have a tough time with people who don’t want to be taken care of...you know? Who are just kind of flinging their...but how do you define that? I don’t know. I think of C.S. Lewis’ quote “God doesn’t take you kicking and screaming into heaven.” Which I kind of like. You know it’s something to think about.

Although evangelical participants described unanimously the importance of social engagement, ideally on a broad level, there were some caveats proposed in caring for others. Despite varying opinions on the inclusiveness of social engagement, the respondents emphasized the importance of caring for others and how this mission could be carried out in various ways.

c. *Varieties of Social Engagement*

When asked about how best to care for others and improve social solidarity, respondents gave many different possibilities for social engagement. These options included personal acts of kindness, donating money, participating in church programs, volunteering for secular non-profit organizations, political involvement, and prayer. Most described personal acts of service that they had received themselves or had offered to others. Participating in organizational outreach, though still common, was emphasized less than caring for others personally.
Overall, there was a common theme that giving of personal resources is an important responsibility, because these assets come from God. For example, Lynn described how Christians should not hold on to material possessions too tightly:

I think what we have, and what we have been given, we really need to know that it’s not ours. That I think everything is from God and so it’s his anyway. So you know, I have had people come to me and say we don’t have a car, can I borrow your car? And so we have let them have our car, for sometimes for a couple of years, and so because we had an extra one, and so I think that goes to how tight is your grasp on what you have. If you think it’s all yours, then your grasp will be really tight. If you think it’s all from God, then you will be much freer to make it available to other people, and I think that we’re stewards, and part of being a steward is giving and not just tithing, certainly we have that responsibility, but giving beyond that.

Other participants described how persons could give personal time and resources to others by mowing a neighbor’s lawn, bringing meals to family friends, or offering free childcare. In addition to performing acts of service for others, many participants emphasized the importance of giving money to others and offering prayers. Katie described these ways of being responsible for others:

I think we can give our money…is huge…so many people live without it and here particularly we have an abundance of it. And so I think the giving of our money and probably more through Christian organizations like the church, or nonprofit organizations…that’s one way to give of your time…to go into those places to love on people and even if it’s just right down the street, if it’s in another country. I think praying for people…to be very specific in your prayers, to not be selfish in your prayers…to pray for others, for different countries, for whatever needs to be prayed for, better government, more food, rain in some areas.

In addition to these ways of being socially engaged, other participants described working in church medical clinics to provide free urgent care services, offering furniture to families in need, developing a widows roster to assist individuals living alone, and providing food to community members. Often, churches in a city collaborated to meet the
needs of an urban community. In one church, secular activities also were important, such as working with the city school system to develop a college preparatory charter school in an area notorious for poor schools and opening an art center that provides studios to local artists and a gallery for the community. For example, Marybeth describes how she has been actively working to improve the general community:

And when I say little efforts...umm...so um...you know Resurrection started in our living room and it was ummm...my I mean long story but I’ve...I was at the beginning of Resurrection, I was at the beginning of the art center. I started Poplar high school, I’m still the board chair at the high school, we were the founding family of the Christian academy. So Poplar High School is one of the best schools in the country, one of top 5%...it’s only seven years old and it started in the basement of the art center...This high school is 50% minority, 50% majority...you know there’s Bridgeport kids and there’s wealthy kids in the same school. Umm...the Christian school the same thing. And so that’s kind of where we land. And then living in our neighborhood when we moved in...every different income range and so for us it’s if more middle class people would choose to live in neighborhoods that are poor...then you could have...rather than having this poor neighborhood and this neighborhood I just think that you then have role models...and there’s more opportunity for people to equalize.

Although political involvement, as a means to improve community, was rarely mentioned without prompting, many participants expressed the importance of being a part of the political process and the possibility to bring about systemic change through this involvement. Shelia describes the importance of political involvement to bring about important changes: “I do. Uh-huh. That’s how things get changed. How can we change things or take a stand on certain issues without being a part of that process.” Although there were some individuals who were mostly apolitical, political engagement, at least as far as voting, was valued among most participants and was thought to be beneficial for several different reasons. For example, some respondents thought that political participation is necessary simply because such involvement gives Evangelicals an
opportunity to contribute to public discussion about important issues. Additionally, one respondent described political involvement in this way:

I think it’s a responsibility to be involved. I think it’s yes…because I think we have the right to vote which again is a blessing. And that’s important. So I think it is important for us to be involved. To the degree…of involvement, I’m not sure. I think we need to be involved because I think we want a seat at the table.

In other words, if Evangelicals want to be involved in improving the future of American society, collaboration with others was thought to be helpful. Other participants were mixed about the purpose of political involvement, specifically whether such engagement is useful for pushing an explicitly Christian agenda or helping to promote social justice.

The former was emphasized by persons who thought that Christians had to stand up for certain Christian values in American society. For example, a city councilwoman described the importance of Christian political involvement in this way:

At this point in time I really wish that more Christians would get involved in Politics…because I think that our country has moved so far left into a very secular worldview that is really not consistent with our founding principles: life, liberty, and the pursuit of happiness.

Another participant, Nolan, lamented the moral backsliding of American culture evinced by recent changes in the law:

I think it’s important… because part of our social responsibility is to make known you know the name of Jesus Christ and one of the ways we do that is with our neighbors, and also with our representatives, and people who are voting on our behalf, which is what they are doing. So it’s important that we let them know where we land on issues like abortion and marriage and things like this.

Although political involvement for some is an opportunity to express an explicitly Christian worldview, others were more sensitive to the social stigma of Evangelicals in
politics, and wanted to work toward improving society rather than emphasize polarizing beliefs. Marybeth described political involvement in this way:

I think it’s important for Christians to be involved in all areas of life. But not as angry…I’m not interested in fighting culture wars. Um… and so being involved but being partners and working for um…I want to say fixing broken systems, working for justice…um not in the way we’ve seen it modeled in the last thirty years or so.

Ultimately, Evangelicals demonstrated very high levels of social engagement in various types of activities.

Because Evangelicals emphasize strongly social involvement, their particular patterns of engagement might be important for thinking about strategies aimed at improving the nation’s health care system. At the very least, Evangelicals are likely to give priority to improving health outcomes, while also working personally to bring about that end. However, whether or not Evangelicals think that widespread social change is possible, who might be capable of fostering positive change, and what the church’s role will be in this process are important factors for understanding particular responses to the Affordable Care Act.

4. Praxis and Social Change

Although social engagement is extremely important to Evangelical Protestants, less is known about how these individuals think about the potential effectiveness of this involvement and whether broad social transformation is possible. The theme of praxis is thus important to consider (Marx and Engels [1845] 2001), because certain perspectives on human ingenuity and cooperation may affect the possibility of changing the American health care system. Important aspects related to thinking about such changes include the
potential sinfulness of individuals who instigate change, whether the desire to care for others comes from religious motivation, how social change unfolds, and whether major alterations are actually possible in American society.

a. Depravity

A common theme related to praxis and social change emerged throughout the interviews. Most of the participants described certain facets of human nature that might interfere with any collaboration between persons and the desire to care for others. Some participants described an innate selfishness that is related to the sin that has been inherited from Adam. The potential for this quality to prevent persons from acting altruistically and bringing about social change from occurring was a common concern. Hannah described the extent of depravity in this way:

I guess I just assume the worst of most of us. That includes myself I guess you know. People are mostly, innately, pretty selfish...understanding that I think if it’s not for Christ, if it’s not for Jesus, we’re all completely, utterly selfish. I mean there are a lot of people in the world that are in Christ and there are a lot of people that aren’t and there are a lot of people that give for no reason. I don’t believe the thing that you hear on the news when people run in after a bomb goes off that people are innately good...I just don’t...I think some people do merciful and serve other people but I think that innately we all run and think about ourselves I guess.

Although the sentiment expressed by Hannah was shared by many participants, a few persons believed that individuals are not always selfish. Instead, some respondents, like Shelia, emphasized that humans were created in God’s image and therefore retain the potential for good:
So many events have taken place and tragedies…the Boston marathon, you know that was the perfect example…of people just coming together. I don’t know if half of those folks were Christians or not. But there’s still good people in the world. I mean, I don’t give up on that. It gets, just in our community…so looking at the you know shootings and crimes, homicides and things like that. But still when you look at big picture…people still…number one I believe God has created each and every one of us and there’s good in every person. It may be little and you may have to look hard…but because we were created in his image…there’s good in everybody and I just feel like when the rubber meets the road…and that part is challenged when somebody needs help…people run to that for the most part. I really do…so I believe there’s a lot of good people and good hearts.

Though the interpretation of human nature among Evangelicals may have particular implications for people working to improve society, whether selfishness can be overcome by religious motivations is additionally an important issue.

b. Trusting non-Christians

To what extent religious beliefs temper an innate tendency toward self-interest should be considered when thinking about Evangelical perspectives on social change. If altruistic motivations are found only among Christians, for example, these persons might prefer change strategies that utilize Christian organizations. Further, whether targeted changes are defined as being primarily physical or spiritual might affect whether improvements toward society can be undertaken on a broad, collective level or might best be accomplished through the church (Hunter 2010). The respondents in this sample were close to equally split about whether non-Christians could be effective in caring for other people. Some persons thought that Christians and non-Christians were equally capable of having moral values and acting compassionately. For example, one participant explained how non-Christians were equipped for this activity:
You know if somebody needs a hand...feeding their family or getting their car fixed or they need somebody to repair their roof or whatever I mean anybody can be just as effective. I mean I know a lot of good people who aren’t necessarily from a Christian belief, but they think...a lot of them think that’s important to be a good person. They don’t know why...you know, but they can’t quite put their finger on it, but they feel like they need to be good people. So they could be equally effective I think.

Participants coming from a Reformed perspective also shared the belief that non-Christians have this potential in a way that is consistent with a notion of human depravity. Although humans are inherently sinful, God bestows common grace on all humans that allows for benevolent acts to occur. Jake describes the difference between common and specific grace and how these gifts provide the ability for humans to act in selfless ways:

The good in those saved by Christ comes from Christ alone and the good that comes from those that are unsaved comes from common grace provided by God so we don’t massacre each other all day long. And I think that’s the common grace that’s seen in Oklahoma and Boston where you do see people doing extraordinary things to help and protect people even if it’s not based on their relationship with Christ.

Although many participants emphasized the potential of non-Christians to care for others, other respondents expressed concern that non-Christians could care for others long-term without experiencing burnout or would have the confidence to overlook their own needs without having a greater understanding of God’s mercy. For example, a minister distinguished between care and true care. Although anyone can care for others, only Christians have the eternal assurance that they can sacrifice their own lives for others, because they are confident in their future:
And so I want to be succinct in the sense that there’s that self-preservation, which I think Christianity moves a person outside of self-preservation…and you’re looking at healthcare in the sense of I want to care for the person for their care…and so one way to kind of think about Christian care is I’m going to walk in their pain. I’m going to embrace their joys. Their happiness is my happiness. That’s actually a definition of friendship. Christianity’s unique. It stands alone against all other worldviews and philosophies in the sense of I am going to spend myself on others completely…because I have been spent upon by God.

Other participants put less emphasis on Christian motivation and instead worried that although non-Christians could meet the physical needs of other persons, they were ill-equipped to help with spiritual problems. In this sense, they defined many societal problems as having both physical and spiritual dimensions, and therefore interventions that were holistic in nature were preferred. One female participant expressed the difference in this way:

I guess it depends on what your goal is…if it’s strictly the physical needs met of the person then yes of course. I guess a lot of Christ-centered…a lot of faith-based programs the goal is more I think conversion or that person knowing the love of Jesus and then their physical needs being met as well. But I guess the goal is different.

In addition to evangelical perspectives on the ability of non-Christians to participate in caring for others, whether widespread social change is possible at all is important to consider.

c. Praxis

How Evangelicals interpret contemporary social policies may be related to their optimism about whether individuals have the creative capacity to work together and create widespread changes. Like most other issues discussed, there was considerable complexity in Evangelical opinions on the prospect for social change. However, a striking finding is that many participants expressed extreme doubt about whether social
engagement is actually going to bring about changes in social life. Although there were a few exceptions, many persons could not imagine positive changes ever occurring through human efforts.

For some participants, this pessimism is related to the inability of humans to escape their depraved nature. Karen responded to this issue in the following way:

Uh-uh. I think that we can improve things and I think we can make them better…and we can make them more than just tolerable, but um…I just don’t…I just don’t see it happening. There’s too many…there’s sin. There’s just too much sin. And you know even when things start to look like they’re doing well…somebody comes in with something, and there’s too much selfishness, and that’s sadly, that’s our fleshly nature.

For other respondents, broad social change could not be realized, because this outcome would contradict directly Biblical claims that the problems of this world can be ameliorated only in the life to come. Katie describes why she is reluctant to believe that widespread change can happen:

I just…we know that evil’s always going to exist. We know that Jesus tells us in the Bible that the homeless will always be there, the hungry will always be there. We know that those things are going to continue until he returns and so it’s…I’m not going to be able to change it.

For a couple of participants, this belief that things will only get better after Jesus returns contributed to explicit fatalism. For Dave, things are only going to get worse, not better:

Who are we kidding? We’re the ones that are living in the joke. Your kids’ kids money is gone. So you better think if you’re an Evangelical… because it looks to me like it’s speeding up…the end I mean. It you know…and if you want to be doom and gloom…that’s what it looks like. But truthfully this is what’s anticipated. That we try to do the best we can until the end.

Although this pessimism about the possibility of social change was shared by many participants, others believed that their efforts at improving social life would pay off, and
in many cases respondents described ways in which the results of their actions are already tangible. In addition, some participants rejected explicitly the idea that the Bible suggests positive changes cannot occur in this life. For example, Dan contended that humans can respond to Jesus’ teachings in this life and make improvements:

Yeah, I think that clearly the promise of the gospel is not just an eternal-making things right, but it’s also a way of making things right now, or at least putting things on the path to rightness…Uh-and I think it really doesn’t make a lot of sense to read that and think somehow—though certainly people have done this, because this bar it raises is impossibly high. So it’s hard to know what to do with it. But I feel that like if we decide that this is what God calls us to, and he knows how impossible it is…that this is the direction I should always lean, always be asking to grow more in, always be seeking to be into…I think it’s ridiculous to think that that wouldn’t radically change our society.

In general, many participants expressed concern that social change is not possible in this life. Despite this pessimism, almost all the persons interviewed expressed a desire to improve social life, even if these actions might be fruitless. For this reason, a summary of Evangelical views on where efforts toward social change should be directed is helpful.

\[d. \text{ Targeting Social Change} \]

Evangelical respondents stated that social change could happen theoretically in a variety of different ways. These strategies include changing the lives of individuals, one at a time, through the power of church outreach programs, and through political or systemic changes. Many participants believed that because widespread social change is not likely to occur, the best individuals could do is try to make a difference in the lives of individuals. For example, Katie described this type of strategy:
I think we can only improve like lives for one person. I know that I’m not going to change the entire world. Bad things are still going to happen or governments are still going to be corrupt. People are still going to die of starvation…but I can certainly help improve the life of individuals. Maybe not the entire world…but definitely individuals.

Others thought that social change should come from the altruistic mission of the church.

For example, Chris concluded that the church bears the primary responsibility for improving the community, although transformations can occur through collaboration between individuals and with government organizations:

So…personally that’s why I believe that it’s the church that’s supposed to do it. So now you’re going to get political views out of me as well. It’s the church…but the church can work alongside with the state. And so there does not need to be enmity, I think there needs to be caution. And boundaries…there should be separation of church and state. That’s kind of a no-brainer. Even biblically…and so…when people…so if an Evangelical says “those damn liberals, they’re just ruining the country”, I just say no. They have nothing to do with ruining the country. It’s the church. The church has not spoken up, the church has not taken its charter seriously. The church has not spoken out strongly enough. The church has not been a prophetic voice.

A couple of individuals expressed a divergent opinion by suggesting that true social change would likely come from a more top-down political approach. Matt shared this sentiment in stating: “I guess I would say the larger systemic change would be the most effective.”

Although many participants thought that social change would be most effective at an individual, church, or political level, other participants thought that the need is so great that people should be working at every level to bring about needed changes. For Lynn, keeping options open at every level could only help to improve social life:
I think it’s (politics) one avenue. I think faith based things are another avenue. I think individual things are another avenue. I think there’s like I was saying earlier… the need is so great that I think we have to have to have to have lots of doors… and so whichever doors we can go through is a good idea.

Similarly, other participants praised multi-faceted approaches and expressed frustration that many Evangelical participants have blocked systemic or political change as a way to care for others. Dan describes how interventions are often needed at multiple levels:

I don’t feel like there’s any sphere that we probably shouldn’t be in. I feel like there’s certainly complexities with all of the potential spheres but the reality is that the top-down systemic change is unlikely to happen if there isn’t also political change. If there isn’t sort of reformation of laws, but at the same time the sort of immediate needs are probably not going to be spoken to if there isn’t sort of what often what we think of as individual voluntarism. Kind of the idea that…I had an older, wise person describe this to me once that like now I’m sure that he was not the originator of the idea, but the reality is that if society is like a road at a steep incline with a really hairpin turn at the bottom…and people are just constantly getting in car accidents and getting injured…you need two things…you need people to care for the people hurt and you need people to change the road. And it is insane really I think, very illogical to think that somehow you don’t need both. And sometimes in a very weird way you find sort of among conservative Evangelicals a weird sense of distrust of changing the road.

In fine, Evangelical perspectives on praxis and social change are complex and have potential implications for thinking about the organization of health care. If individuals are capable of caring for others without giving priority to their own interests, and without a religious foundation, collaboration between persons might be possible and collective strategies preferred. Conversely, if Evangelicals emphasize fatalism and the impossibility of change, social policies that stress broad changes to the existing health care system might be interpreted as utopian or idealistic. Further, the level of social change that should be targeted may have implications for preferring government intervention or either individuals or churches to address community health problems.
5. **Personal Accountability**

A complex issue for the participants in this study is discerning when to give help to others who were not thought to be making responsible choices in life. Although many persons believed that ideally the Christian duty to care for others extends to everyone, many respondents questioned whether specific individuals deserved help and giving too much help might enable poor choices. Questions of personal accountability took on particular importance when thinking about contemporary health care issues, because individual health behaviors were often cited as contributing to current health care problems. Further, for some participants, collective interventions such as the Affordable Care Act give care indiscriminately and thus discourage personal responsibility. In order to understand the importance of personal accountability for Evangelicals in addressing health care reform, whether life is fair, personal decisions affect how help is given, individual choices or systemic changes should be targeted, and class experience might be an important factor must be considered.

a. **Fairness in Life**

An important issue related to personal accountability is whether individuals have control over their circumstances in life. The extent to which life is considered fair, or people are thought to get what they deserve, contributes to an understanding of the importance of individual decisions (Lerner and Miller 1978; Lefcourt 1982). In this study, Evangelicals expressed three different perspectives on whether life is fair. The most common response suggested that life is not fair, since sometimes horrible things
happen to good people, while people who make bad decisions become prosperous. For example, Nolan explains the unfairness of life in this way:

> Because we’re all born into different circumstances…there’s so many things outside of control in life. It’s not fair that a six year old girl is dying at Lutheran Hospital of Leukemia right now. And I just see a lot of that. So I don’t think it’s fair in the context of suffering…in the context of who gets loving parents and who gets parents that disown them. People born with horrible mental illness…it’s hard to make sense out of it. I know God works all things out for a purpose and I do believe that the Lord is just and he’s fair but I don’t necessarily believe that life in general is fair, or expect it to be fair.

Others participants, like Dave, thought that life is not fair because of human depravity:

> Well God provides what you need ultimately but as far as life being fair when you’re dealing with other human beings….there’s nothing fair about it. And you don’t put your stock in the world…you look to heaven, so…

Though perspectives of unfairness were very common, other respondents expressed that life is ultimately fair because God was just and thus everything would work out at some point. For example, Shelia described God’s fairness in this way:

> As a Christian, I believe number one that God is faithful and that he is fair and just. So I can only answer that from my faith and believe that the things that happen, there’s a purpose for everything and there’s a reason. So whether it’s bad, as far as in my eyesight, or good…the good things happen, I believe, so that he can get glory from that.

A third category of fairness was adhered to by participants from a Reformed church. For these persons, life was not considered to be fair because, undoubtedly, humans deserve much worse. Within a narrative of extreme human depravity, humans are not thought to deserve anything good, but experience positive things only because of God’s mercy. Marybeth describes fairness in the following way:
I think that I have been given much more than I deserve and I think that it’s grace what we’re given and it’s even grace when we’re not given. I mean I don’t think… we don’t see the bigger picture. So the human definition of fair is really kind of irrelevant to me. And from a Christian perspective we all deserve damnation…and so if fair…you want what’s fair it would be a very unpleasant, unhappy life. That would be fair for everybody… from an orthodox Christian perspective.

Perspectives on fairness are important to consider because they set up a framework for thinking about personal decision-making. Although not all participants suggested that personal decisions are related directly to final outcomes in life, individual choices are important in deciding whether or not to help others.

b. Personal Responsibility as a Requirement for Help

Whether or not to care for others, despite bad decisions, was a difficult question for many participants. Most respondents described a difficult-decision making process that occurs especially when helping strangers, who might not in turn act in a responsible manner. For example, many participants, like Katie, described how ideally Christians should give help to persons who may act irresponsibly:

I have gotten a little better with not trying to let that leverage the help I give. I will admit that there are times I think about it. That I will sometimes not do it because I don’t think they’re going to be responsible with it. But then there have been many other times when I have just given freely…not worrying about it. And something I’ve thought with that is that I’m not always responsible with the blessings that God has given me. And yet he continues to give them and to bless them and that’s basically all I’m asked is to bless others, not to worry about what they’re going to do with it. So I’m trying to think of it as just being obedient as opposed to you need to be responsible with what I’m giving you. But it happens still.

Many other participants argued the idea that others had to deserve help is inconsistent with Biblical teachings. Lynn, for example, described a time when she gave a woman twenty dollars to buy gas:
Yeah, that’s a good one and that’s certainly is the debate isn’t it? When you look at Jesus, and we talked a little about this already, when you look at him, he cared for the sinners, the disenfranchised, those who were ill, prostitutes – because he wasn’t looking as man looks, he was looking at the heart. I know that is not shared by everyone and even in Christian circles. So I think that I try not to forget what God has done for me in my life and there have been many people who have helped me and so I don’t know where that person is on their journey, on their path, and so we don’t all have to jog at the same pace at the same time, and be at the same place at the same time, so I can be okay with wherever they are. Because again it’s clear in my mind what’s God work and what’s my work. My work in that moment was to be generous to this person that crossed my path. It wasn’t to make sure she believed in Jesus first before I would help her. That’s how I look at it. And if she used the $20 and say she went out and bought drugs or something, I don’t know, whatever she did with it, she probably bought gas and food, but whatever she did, that’s not on me.

Although most participants at least abstractly believed that help should be given despite perceived personal shortcomings of the recipients, a few suggested that personal accountability should leverage the help that is given. Jim described how personal accountability is important and alluded to a verse from the New Testament.

Some people deserve to be helped and some people don’t deserve it…Well I don’t give money to panhandlers. You know I’ve tried to help people through the Salvation Army and the Christian Missions and stuff like that because I feel like they’ve gone through a vetting process and these people really are down on their luck and they’re not just lazy on the slide…you know bumming money from other people because they don’t feel like going to work. So…there’s a vetting process that I think needs to happen. If they don’t work, they don’t eat. You know? It’s pretty harsh…

Other participants stressed the importance of personal accountability when thinking about government programs aimed at helping the poor. Ann, for example, thought more regulation is needed to ensure that individuals are encouraged to be responsible:
I do think that you know, especially the innocent people should be taken care of…I really believe that. I think in theory it’s really good. There’s just…there needs to be boundaries and there needs to be stipulations. If you’re not going to take care of yourself then we’re not going to give you free money. I think there needs to be accountability for it…just like people who get welfare. If you’re going to get welfare then you need to get your tubes tied after two kids or something like that. Like all these people who keep going out and having tons of children who they can’t afford but then those children are innocent so you want to take care of them…but like I think like ok if you’re going to keep getting welfare then you shouldn’t have more than two kids and agree to get your tubes tied. But that ethically…

Yet for others participants, there was a concern that truly caring for others meant helping to make individuals self-reliant instead of enabling poor behaviors. Related to this sentiment, many participants mentioned a book that had changed their thinking on these issues. *When Helping Hurts: How to Alleviate Poverty without Hurting the Poor or Yourself* (Corbett and Fikkert 2012) was written by Evangelicals to help contextualize many issues surrounding poverty. They offer a multi-faceted approach that emphasizes offering immediate relief when necessary, while working toward rehabilitation and the development of self-sufficiency. For many participants, like Chris, this model suggests the need to determine individualized solutions for specific problems that encourage personal accountability:

It’s case by case. I mean if a person’s on fire you put them out. You don’t sit there and say I shouldn’t do this again, what did you do to get yourself on fire? Um…I think the model of Christianity is feed the hungry, clothe the poor, shelter the homeless, and then let’s take some time and figure out so that they are doing it for their sake.

Overall, personal accountability is an important yet complex issue for many Evangelicals. Though most participants espoused the ideal of helping others regardless of personal choices, when thinking about particular social issues many of these persons
stressed the importance of considering individual qualities rather than the structural
context. For example, when describing social responsibility generally, one male
participant responded: “No, no, Jesus died for everyone, you know sinners and saints, so I
think you just have to love people in spite of the choices they make.” Yet when
discussing the Affordable Care Act, the same participant strongly emphasized the
importance of personal decisions:

The person with emphysema who’s on Medicaid because of their debilitating
disease who continues to smoke yet is…we’re not paying for their oxygen and for
them not to be working…that’s not fair. Um…the alcoholic who pickles their
liver from continued drinking and needs a 100,000 liver transplant
surgery…that’s not fair. So I don’t think that increasing access to care solves the
root problem which is diseases and habits that lead to disease…not exercising, not
eating right, not taking care of yourself. So I believe people should be rewarded
for having…plugging at the gym, for eating you know well, for keeping their
weight under control and that we should try to come alongside them and to try
and improve their health.

Clearly, these perspectives have particular implications for conceptualizing health care
reform which focuses on access to care rather than personal responsibility (Becker 1993;
Waitzkin 2000).

c. **Structural Context vs. Individual Behaviors**

Within the context of the current American health care system, perspectives on
the key factors responsible for poor health outcomes must be assessed. If Evangelicals,
for example, emphasize poor health behaviors, interventions might target individuals
rather than the organization of health care. For this reason, the opinions of Evangelicals
on the causes of current health problems are an important part of this framework. Again,
the findings from this section suggest that Evangelicals do not think homogeneously on
this issue. For some participants, like Ann, health care interventions should be directed at
personal behaviors, because these actions contribute to poor health:

I think with Obamacare it’s made me think more. I mean I’m all for everybody
being helped out but I think you need to have a personal responsibility about it
too. Like if you want free healthcare, then stop smoking…if you want free
healthcare, then quit drinking. If you want you know to be on welfare, and you
know get free food, then buy the right food. Not the junk food…like I think
people have to be accountable and do the right thing…diet, exercise, not drinking,
not smoking, and then I’m all for the government helping out the poor people who
need help.

Likewise, other respondents, like Nathan, claimed that a growing public health problem
like obesity can best be addressed by encouraging personal responsibility:

I mean if someone says I want my basic level of healthcare and your doctor says
that you’re too fat…like you’ve got to quit eating McDonald’s. I don’t know how
you could implement something like that…that has to be the way it is. You want
us to pitch in to make a better society, well you need to pitch in to a better society
too, by like not eating an extra large drink every five seconds. There’s some kind
of accountability. I’m not trying to sound mean but if everyone’s going to
contribute to this greater good…then the people that are benefitted by it need to as
well. And obesity is…and obesity is not like I woke up one day and had a bad
decision. That’s like a made a bad decision multiple times a day, every day of my
life.

Although many participants emphasized the importance of individual decisions, both in
explaining current public health problems and proposing solutions, others maintained that
many of these personal choices are couched within an existing framework of inequality.

Natalie described some of the systemic factors that are often related to health problems:

I do think the larger problem is the access. Whether it’s access to healthier, low-
cost foods, or access to safe outdoor playspaces for children, or access to
affordable fitness, access to education, access to just a whole range of things. So I
think that’s typically where individuals who are impacted…who are seen as not
having personal responsibility or control over…I think that’s where I see the
cause and effect.
Another participant shared a striking story that spoke to many of the systemic issues that affect health outcomes. This woman described how a particular experience with infant mortality, a pressing public health problem stratified largely by race (MacDorman and Matthews 2011), alerted her to the fact that many systemic factors affect health. This experience was compelling for her because recently her husband had cardiac arrest in church, received exceptional care, and against all odds ended up with an excellent outcome:

I recently went to a funeral for a baby who was born prematurely and it was going to be before being viable and it was a mixed racial situation. So at the funeral, our pastor was there and people from Resurrection were there but also there were people from an inner city church and our pastor got up and said wonderful things, very helpful things, but also said this was the first time he had ever experienced this and he had ever walked through this where the baby was actually born alive and moving, but unviable and did not survive more than a few minutes. Very sad. And the other pastor got up and said this was the fourth time this had happened in the last four or five months, that he has gotten up at a funeral… for a child that was born in this situation. I think to me it’s just amazing because this happened here in Shelbyville… and this is where my husband cardiac arrested. Where I’ve experienced that kind of health care and then I’m at a funeral where I’m hearing about this infant mortality within the exact same city and the same hospitals, it’s quite startling.

Despite where these participants landed on the importance of personal accountability for leveraging help and explaining current public health problems, these issues arose in nearly every interview. This pervasiveness suggests that questions of personal responsibility are important to consider when thinking about health care reform. Whether individuals are responsible for what happens to them, how helping others relates to personal choices, and whether interventions should be targeted at an individual or systemic level are relevant to how Evangelicals interpret contemporary health care within a narrative of social responsibility.
d. Importance of Class Experience

Within the discussion of whether current health outcomes are the result of personal shortcomings or structural barriers, many participants described the importance of their own class experience in coming to particular conclusions. Whether or not individuals had important experiences of their own or had relationships with others who had experienced disadvantage was described as being important for recognizing the importance of privilege. Specifically, several participants, such as Shelly, shared experiences of why certain experiences have influenced their perspectives:

I think part of the reason why I’m so outspoken on these issues is because my husband grew up in the inner city…So I’m thankful. I think I would have had a heart for it anyway, but because you know like I said we have such close connections with so many inner city people that um…we see. So it’s like and then we’re very involved here…and we know a lot of people here. And the angriest people here seem to be the ones that have had a good life and that don’t want anything to happen and they don’t want anything to change. And so…so here’s my judgment. To me, I feel like that’s a very selfish way to live. Yeah. It’s like well…the world has changed tremendously since…you know in your sixty, seventy years. And people even younger that I know are very outspoken, but I think they don’t want the world to change because they like where you know…what they have…they don’t want anybody dipping into that. And I think that breaks God’s heart.

For some participants, attitudes about personal responsibility might relate to the desire to protect one’s current social position. Other individuals did not explicitly describe this connection, but emphasized their own privilege and correspondingly valued hard work and responsible decision-making. For example, Christine described her own experience in this way:

Uh…I think this is a sinful place and I think that I don’t understand really why I have been so blessed. I’ve been kept from experiencing myself a lot of problems that people have and I don’t know if I would have had the same life had I been born to somebody that lived on twenty-ninth street. And my parents were poor but they…they worked hard and I think they placed their time in good places.
Ultimately, the importance of social status was related to thinking about individual or systemic explanations of social problems for many participants.

6. The Organization of Health Care

When talking with the Evangelical Christians in this study about health care reform, several important ideas emerged related to how the Affordable Care Act is evaluated with respect to current health care crises. Further, how this policy is interpreted within the context of government intervention and socialized medicine was also discussed. Finally, alternatives to the Affordable Care Act were often cited as more appropriate for improving health care.

a. Problems in the American Health Care System

Whether problems are thought to exist currently is an important factor in understanding Evangelical reactions to health care reform. For some Evangelicals, allowing health inequalities to persist is incompatible with their Christian responsibility to care for others. One nurse responded in this way:

I don’t see how we can look at the life of Jesus and then not care about this. How can our hearts not be moved? You know if our hearts are not moved by that we need to take a serious look on why they’re not. Is it that we’re too far removed from it? Is it that we want to pretend that it’s not existing, we want to stay in denial? I don’t know…you know I would say if you’re not moved by that you really need to take an inventory. A deep look at yourself.

Others mentioned examples of health inequalities that they had witnessed in their own lives. A health care attorney described a story from his town where a man robbed a bank and waited outside to be arrested because he had heart problems and knew one way he
could get treatment without insurance was to go to prison. For some participants, such problems suggest a need for health care changes to be discussed:

Absolutely. And just so you know. I was one of the few of my close friends that I know of that are Evangelicals that would have said that Obamacare was good. And I said it was good for this reason. The system was so badly broken that whatever we did would be better to at least make some changes.

For other participants, the current health care system is considered to be satisfactory when placed within an international context. Because many Evangelicals have been exposed to the health care systems of developing countries, through many Christian organizations that emphasize international missions, some participants found America’s medical infrastructure to be quite impressive. For example, Tara described the American health care system:

I think that we are a country that has some of the best advances in medicine and healthcare. I think our doctors are some of the most capable in the world. I think we are lucky in that aspect to have needs and the resources to get the best care we need…I think we have the best advances in medical science. And the best procedures and the best doctors that you can find, but it just depends on I guess what your need is. Does the US have that? I think there’s a lot of options out there that people might not know about either.

Still other participants expressed disbelief that American health care outcomes were really that bad, when compared to comparable industrialized countries, given the amount of technology used and money spent. One married couple suggested that America’s health outcomes are poor only because most countries do not report statistics honestly:

Barbara: So…we count ours and the other countries fudge on theirs. So that twists our numbers.
Jim: It makes their socialized medicine look better.

Finally, several participants questioned whether inequalities in health care are always wrong. For some, health care should be provided at some minimum level, but the idea
that all people should have equal access is inappropriate in light of an economic system that allows for a variety of material outcomes. One male participant expressed that equal outcomes should not be expected:

I struggle with that to some extent. Do I believe that everybody should have access to healthcare? Yes. Do I believe that the access should be the same for a wealthy individual versus a poor individual, meaning the same quality of care...I don’t think that I do. I think that for example...I think that there are safer cars than other cars. I think that a Mercedes is a safer car than a 1988 Ford whatever...car you want to pick...Escort. Because the Mercedes has more airbags it has more safety features...more whatever. And so do we mandate that all people either drive a Mercedes or drive the standard of the safety equipment of the Mercedes? Well we don’t...aren’t we essentially guaranteeing that people who can’t afford safer cars will get injured more, potentially even die in a car accident? I mean, to some extent yes.

While Evangelicals have mixed opinions about whether significant problems exist in the current health care system, these different perspectives are important for thinking about whether changes are needed and how they might come about.

b. Compatibility of Evangelicalism and the Affordable Care Act

When evaluating the Affordable Care Act, Evangelicals in this sample had divergent views about whether this policy constitutes an appropriate remedy to improve health care. In considering whether this specific intervention is compatible with evangelical religious beliefs, most participants at least thought that providing access to care was consistent with Christian beliefs in theory; however, some questioned whether this approach is preferable. For example, one woman favored providing universal access to care on an abstract level but wondered if the government should be responsible for organizing health care:
Um… I think the intent is good. I think that government rarely is able to do things very well. I mean every time even in my job here. Anytime government gets involved it makes it much worse and just running an art center it’s crazy the things we have to do anytime you open the doors for government. So, just from that… so again the intent is good. I question whether that’s the best way to do it, but I don’t have a better solution.

Other participants expressed concern whether the Affordable Care Act, while good on an abstract level, would actually improve health outcomes. For some, this concern related to increased federal regulations that require doctors to complete more paperwork instead of spending time with patients. Yet, for others, decreased physician compensation with public insurance options might further stratify the quality of health care received. For example, Jake, a young surgeon, describes how health care reform might increase current health inequalities:

I think the inequality will be vastly enlarged. Because then you’re going to have people who have money that can see these doctors that don’t take insurance, but right now even you know… uh a low income impoverished 65 year old who has Medicare can pretty much see anybody in the city. Can see anybody, can see anybody he wants… because almost everybody takes Medicare. That’s what’s on the blocks right now. That would change huge. And now that 65 year old better be a pretty wealthy 65 year old to be able to afford insurance… maybe he’ll have Anthem on top of it or whatever it may be. Um and so I think inequality gaps will increase significantly.

For others, the Affordable Care Act is completely in line with evangelical beliefs.

Further, many participants expressed frustration that Evangelicals reject this policy. Dan described how he found this policy to be compatible with the Bible:
I think few things have driven my wife and I more crazy of late than the incredible outspoken backlash against the Affordable Healthcare Act from conservative Evangelicals. Which especially for my wife, I cannot think of a more unbiblical, ungodly attitude. Like, it doesn’t mean that there isn’t complexity to it, that it isn’t difficult…like you know certainly I think Anna and I would be the first to say that there are sort of flaws in the law. But like…but there’s flaws in everything we do as human beings… If anything, I feel like there is a ton about it that is very compatible with what I believe actually.

Although most participants believed the Affordable Care Act is positive at least on an abstract level, many complexities surrounding this specific policy were discussed.

\textit{c. Government Intervention}

One topic that was often discussed is whether the government should be involved with the organization of health care. For some participants, the government mandating health coverage is an intrusion into an otherwise individual decision. Thus these individuals objected to the Affordable Care Act as unconstitutional because this policy impinges on individual rights. Many other persons questioned whether the government is capable of running an effective business at all. Barbara describes a commonly expressed sentiment that the government, at best, is inefficient:

Well you would never do it by the government. They could never achieve that. They’re going to add more workers, their early retirement and their huge pensions. You know and most of these states can’t pay their pension obligations right now anyway so it would not be through the government, it would be through free market principles…

Finally, some respondents felt that the government must get involved because that is the only way important changes can be made. For example, Lynn described how government intervention is necessary in the particular case of American health care:
Politically I’m probably…I tend to be more opposed toward big government. I just say that’s probably my political orientation. But who is going to be the voice of these people. Who is going to be the advocate? And the system we have now…I don’t see them. We’ve had a chance, we’ve established this system that has deep roots, but the advocacy is obviously not there. And so someone has to be a voice for them. If you’re disenfranchised you don’t have power and so I don’t know how it will be accomplished outside of the government to be honest with you. It’s too big of a problem.

In addition to whether government intervention is appropriate in the organization of health care, many other respondents expressed concern about the potential impact that the Affordable Care Act would have on both doctors and businesses.

d. **Harm to Small Businesses and Doctors**

Many participants shared stories of how both small businesses and health care professionals who they know will be affected by the Affordable Care Act. Because businesses will be required to provide health insurance, small businesses were thought to be disproportionately threatened by these initiatives. Further, compensation for health care providers will be reduced. One woman described the potential impact that lower reimbursements might have:

I am concerned…I don’t know if this is the question or not…that because the reimbursement rates of the healthcare mandate are going to once again cut physicians…it’s that whole incentive thing. Why would a doctor go to school for three years of medical school…three years of residency and five years of internship and have all that debt when they come out, have huge malpractice insurance and go into a specialty? They’re not going to do it and not get paid? And we are going to lose our neurosurgeons and heart surgeons and our specialty physicians. And you talk about longer waits? And I do think…I’ll think they’ll be bad consequences because of that. Unintended consequences.

Although a majority of participants thought the Affordable Care Act would have
consequences for both doctors and businesses, this outcome was not always thought to be negative. Natalie suggested that both businesses and doctors would survive, even with these changes:

I think for medical providers there seems a loss in income and you know what? That’s ok. But I mean seriously why do we put so much emphasis on wealth and cost but...yeah this does not sound good at all for these businesses. But then I had a day to think about it and I realized there is...there should be a responsibility for employers to provide insurance so yes it’s going to cost them money.

Nonetheless, for some participants, health care providers and business owners shared a collective responsibility for the well-being of others.

e. Exemptions for Faith-Based Organizations

Another common concern with the Affordable Care Act is that this policy mandates religious organizations to provide funding for things that are contrary to certain religious beliefs. Examples given included apprehension about religious organizations and businesses having to provide insurance benefits that covered contraceptives, abortion-causing medications, facilities that provide abortions, and same-sex domestic partners. Many participants felt that this aspect made health care reform difficult to accept. For example, Shelly described how one guest speaker at her church spoke out about the potential problems when the government forces religious groups to act in ways that are inconsistent with important beliefs:
It’s actually trying to force Christians to not only…uh…not only accept, but to actually pay for things that we believe are directly against Scripture… And so he said those two things it’s kind of a slippery slope he feels those are two things where the church does need to stand up and say “these go against our religious beliefs and this is why and we have Scripture to say.” It doesn’t mean that we’re to pass judgment on those people and it doesn’t mean that we’re not to love those people…because I want them to love me. I sin too. So it’s not a judgment. But you know that really stuck with me when he said those are two things, that’s exactly how Hitler started. And that regime started. They started mandating that people pay for and tolerate things that are directly against the tenets of their faith…or basic human rights…so…that was very interesting to think about. I think there’s such a fine line.

Other individuals thought that the lack of religious exemptions explained the disapproval of the Affordable Care Act among many Evangelicals. Though faith-based exemptions, harm to doctors and businesses, and government intervention were discussed as shortcomings of this policy, additional alternatives to health care reform were cited to improve health care outcomes.

f. Potential Alternatives

Although responses to the Affordable Care Act revealed an array of opinions, many participants discussed alternatives to this policy, including permitting health care to operate like a business, moving to a single-payer or socialized system, and allowing the church to address health care needs. For some respondents, the only efficient way to control health care costs and improve outcomes is to let free market principles guide insurance companies and health care organizations. For example, Jim described a business model for health care:
The only real reforms that were going to work is to apply the market principles to it. Give people the incentive to stay healthy. Uh you know...give them the incentive to shop for their healthcare...introduce a competition into the system. Um...you know those are all the things that were wrong with it obviously...you know the government got involved in it and that’s what made the costs spiral out of control. Just like anything else the government gets involved in. People look at it as a gravy train. You have get the government out of it or it will destroy it...dismantle it down to uselessness just like everything else they get involved in...or completely take it over like they’re doing now.

Others, however, disagreed and thought that free market principles in health care would not address the problem of health inequalities. For example, one man described the free market in this way:

You see this in Jesus’ teachings too...this is not just contemporary socio-political understanding, this is like Biblical understanding. That when a society in general functions very hands off it’s not that that equally benefits everybody. It actually preferences the people who have more.

Participants described socialized medicine in both positive and negative ways. For some, a single-payer system is an alternative that should be avoided at all costs, because of the potential for a reduction in the quality of care. Many suggested that providing care for more people is just not possible at a satisfactory level, given the already-existing problems with health care costs. Going further, Ann described how the Affordable Care Act could potentially carry many of the negative consequences associated with socialized medicine:

It will be like that...I think that’s what the negative part of it will be. It’s going to turn in to long waits to get procedures done and you’re not going to be seeing a physician. Because there are not enough physicians to see all these people.

Others thought that the Affordable Care Act does not go far enough, and that a true single-payer system is a viable solution to meeting American health needs. Accordingly,
Jake describes how socialized medicine, though less beneficial to him, is in line with his Christian ethic to provide care to everyone:

If the goal is ultimately to provide the best healthcare for the most amount of people... I don’t see how you can get away from believing in a one-payer system as the way to go. Everyone’s going to make less money you know…the level of skill and physicians is going to decrease…That system um seems like the best answer even though I don’t think it’s beneficial to me. Financially, it’s not beneficial to me. But I think it’s for the pure course of taking care of the masses in the best way possible, it’s the solution.

Others agreed that socialized medicine is an appropriate alternative and suggested that Evangelicals in other countries are puzzled by the rejection of government health care among those Christians in the United States. Dan describes socialized medicine in this way:

And you know British…I’ve interacted with Evangelicals from all around the world…almost all of whom have socialized medicine, like single-payer system medicine…like way, way more socialized than what we have, or what we will have eventually with the Affordable Care Act I would say…and they feel that it’s one of the best things their society does to care for people. In a very sort of Biblical sort of way and it makes no sense to them that American Christians think that it’s actually bad or incompatible with their beliefs.

While socialized medicine is an alternative with both strengths and weaknesses for different participants, the potential for the church to be involved in meeting health care needs was also interpreted in positive and negative ways.

Some participants stated explicitly that the only long-term solution to American health problems is for the church to be more involved in providing care. Though this prospect involves creating various interventions for different groups, from public-private partnerships to church-run clinics that operate on a volunteer basis, many participants called for the church to address the health needs of Americans. For one minister, the
church’s mission to care for others could contribute to a health care system that would satisfy the health needs of Americans: “I firmly believe that it’s going to be Christ’s teachings and how that affects people, pushing forward a sustainable healthcare.” And other participants, like Shelia, described specifically how churches could be involved in providing services:

I believe that you have doctors and people in the medical field that want to do something and we just need to pool those resources together and come together in some way as the church and do what we’ve been called to do. Again like a First Christian Church, I mean why not partner several churches with First Christian Church and just expand that? And have the sliding scale and or make it more affordable. Just regular routine visits…

Although not all participants believed that the church should have a role in providing health care, many persons felt that this organization should be a part of the process, if not entirely responsible for improving health care outcomes.

Conclusion

Overall, the findings on evangelical identity, community, social engagement, praxis, personal accountability, and the organization of health care suggest that Evangelicals espouse a variety of different perspectives on how social responsibility should be enacted both generally and within the context of addressing national health concerns. Because of these data, there is evidence that Evangelicals do not constitute a monolithic group. Although Evangelicals, in the last thirty years, have been associated mostly with the religious right (Wilcox and Robison 2010), divergent views clearly exist and might be important in future debates on health care. The next chapter will discuss these findings in detail, especially with regard to how they might factor into the larger discussion of how Americans might respond to the Affordable Care Act.
Chapter Six: Discussion and Conclusion

This chapter includes a critical examination of the major findings noted in the previous chapter, followed by specific policy recommendations based on this research. Specifically, each finding is discussed with regard to evangelical perspectives on the Affordable Care Act and the future organization of health care. The point of this discussion is to contextualize this specific policy and address the practical consequences of this legislation in view of evangelical beliefs about health care. The specific topics that are assessed include the homogeneity of Evangelicals, personal accountability, significance of group position, conservative economic philosophies, and fatalism within narratives of human depravity.

Before beginning a discussion of these findings, important differences among churches should be noted. Appendix E contains descriptions of each church. Profiling individual churches is necessary because church size, theological paradigms, socioeconomic status of members, and location may be important factors in understanding the perspectives of these individuals. Because Evangelicals do not represent a monolithic group (Smith 2000), church particularities are crucial to consider.

1. False Homogeneity and Hidden Intellectualism

The first major finding is that significant diversity in perspectives existed across the sample. From views on utilizing health care to caring for others, evangelical participants expressed multiple standpoints. This finding was further evident in reactions to the Affordable Care Act. Perspectives ranged from passionate rejection to a whole-hearted embrace of this policy. Although many found this plan appealing in theory,
others questioned whether this strategy is the most practical option. This diversity within Evangelicalism suggests that on most issues, evangelical beliefs are related to a variety of different perspectives. Despite several criticisms of this policy echoed by Evangelicals, which will be discussed later in this chapter, they are not likely to uniformly rebuff the Affordable Care Act, as publicly feared (Grant 2012), but might be amenable to improving health care through such a national policy.

In addition to the plurality of positions taken by participants in this sample, many persons described explicitly evangelical stereotypes and how their personal views diverged from public descriptions of Evangelicals. These stereotypes included perceptions of Evangelicals as intolerant, politically conservative, separatist, and angry. Similar stereotypes have been described in the academic literature (Bivins 2008) yet have not been supported by empirical findings (Smith 2000). Further, many evangelical participants rejected these portrayals because they run counter to the expressed desire to be a redemptive force in public life. Again, because Evangelicals are not wed to a particular political party or solely interested in pursuing a Christian agenda (Smith 2000), these findings suggest the potential for social policies to gain support from them if important religious worldviews are understood and engaged. Because most participants give priority to caring for others, strategies that recognize this aim, along with additional aspects of evangelical social beliefs, might be supported.

Another popular stereotype relevant to this discussion is the widespread belief that Evangelicals are anti-intellectual (Noll 1994). Despite extremely high levels of educational attainment among Evangelicals (Beyerlein 2004), and recent research that
confirms evangelical trust in science (Evans 2013), the notion that members of this group do not evaluate critically important issues remains popular (Mooney 2005). The participants in this sample were highly educated generally (see Table 5.1) for a summary of occupational statuses) and spoke about the Affordable Care Act as an important issue. In fact, many persons lamented their lack of familiarity with this policy because of the importance placed on being educated about contemporary topics.

On issues related to general political orientation, however, most participants were able to elucidate clearly their perspectives. In this sense, these individuals exhibited what Christian Smith describes as “religious articulacy” in that they demonstrate the ability to speak confidently and intellectually about important themes (Smith 2009). This desire results from encouragement within the evangelical subculture to assess critically current events in light of important religious beliefs (Smith 2009). Despite contrary descriptions of Evangelicals, many participants seemed interested in discovering solutions to many social problems. This finding has led some authors to de-emphasize the inevitability of culture wars (Davis and Robinson 1996; Williams 1997; Wolfe 2005). By downplaying the radical separation of perspectives between Evangelicals and secular culture, future policy discussions might be successful by appealing to the more progressive perspectives held by some Evangelicals.

Finally, the false homogeneity of Evangelicals is further troubling given the growing public presence of the Evangelical Left (Sider 1999; Wallis 2008; Keller 2010; Pally 2011) and other emerging Evangelicals (Bielo 2011). Additionally, the possibility of a transition already occurring within the evangelical church has been documented
(Faith and Public Life Poll 2008; Pew Forum 2010). Evidence of this project suggests that certain churches have implemented strategies for thinking about social justice that address systemic inequality (Corbett and Fikkert 2012) and that many younger participants think differently about many social issues from their older evangelical counterparts. This heterogeneity within Evangelicalism is important to consider when questioning how best to frame policies in a country with a considerable religious presence.

2. Personal Accountability

Personal accountability is an important, yet contested issue among the Evangelicals in this study. This emphasis on individual responsibility is critical to the evangelical worldview in that persons are thought to be ultimately accountable for their decisions and are required to respond to the gift of grace through love and kindness. Because personal accountability is a key concern of Evangelicals (Elisha 2008a; 2011), several interpretations are important for understanding responses to the Affordable Care Act.

The first important finding related to personal responsibility is the apparent conflict between downplaying accountability on an abstract level while emphasizing this trait when providing help to others. For many participants, assistance should be given to others whether or not they are able to repay the help or make responsible decisions. This outlook was often described as related to the belief that because God gave freely to individuals who were not perfect, Christians should emulate this love by caring for others without requiring that those in need meet certain standards. One male participant
described the importance of looking past poor choices by saying: “No, no. Jesus died for everyone, you know sinners and saints, so I think you just have to love people in spite of the choices they make.”

Although this belief was common when speaking generally about providing help, participants often spoke differently when describing actual strategies. When talking about social programs, such as welfare or public medical coverage, many individuals were hesitant to support such practices because they did not require personal accountability. For this reason, some persons preferred helping others through personal relationships, because the possibility then exists for these individuals to become self-sufficient over time. Nonetheless, this emphasis on maintaining accountability through relationships might be understood as incompatible with national interventions. Despite the fact that many Evangelicals think that requiring standards in order to receive help is inappropriate, many emphasized strategies that encourage personal accountability. The Affordable Care Act, then, might be discredited because individuals can receive health insurance and utilize medical care while continuing to make poor health decisions.

Because personal accountability was often brought up, considering where Evangelicals locate problems with respect to health outcomes is important. If personal decisions are a high priority, the implication is that individuals are responsible for their own health, while downplaying systemic causes of poor health such as lack of access to healthy foods and safe spaces for exercise, social stress and discrimination, income inequality, and advertising of dangerous products (Link and Phelan 1995; Krieger and Sidney 1996; Bullard 2002; Clark, Clark, and Williams 2002; LaVeist and Wallace 2002;
Morland et al. 2002; McKinlay 2005). Although not all the participants in this study overlooked structural causes of morbidity and mortality, many lamented the poor decisions that are often observed such as excessive eating, alcohol and drug abuse, and lack of exercise. Further, even when individuals acknowledged structural constraints to achieving optimum health, interventions were still emphasized that helped persons learn healthful behaviors through personal relationships with others.

This seeming inconsistency between beliefs and interventions has been discussed in the general stratification literature (Kluegel and Smith 1986). These authors suggest that various perspectives on poverty are expressed by individuals and that such complexities depend on the practical situation. Though some participants did not oppose interventions that operate through national policies, these strategies should be accompanied by interventions that encourage individuals to improve their health. Because personal accountability is often related to thinking about individual health behaviors, the Affordable Care Act was not the only option mentioned and for some not a viable solution at all. Future policy efforts aimed at improving social problems should thus take into consideration the importance placed on individual behavior within Evangelicalism.

Another area where personal accountability was emphasized when thinking about the Affordable Care Act is the potential harm to small businesses and doctors. Because responsible decision-making is so highly valued among Evangelicals, many participants expressed concern that health care reform might punish individuals who are, from their perspective, making all the right decisions.
Additionally, some of these perspectives on personal accountability and helping others through personal relationships are consistent with what some scholars have called paternalism (Illich 1968; Jackman 1994; Bobo 1999). The key aspect here is that the emphasis on helping others become personally responsible focuses on individual or cultural shortcomings rather than the social, historical, and economic contexts where individual decisions are made (Wilson 1987). For some participants, helping others is important because some individuals just do not have the correct knowledge or proper values.

Examples such as the absence of dual-parent households and laziness were often cited as contributing to many social problems. Furthermore, these explanations were often tied to specific cultures, consistent with perspectives on a culture of poverty (Moynihan 1965; Lewis [1963] 1998; Murray 1984). Many Evangelicals identify certain groups that have become synonymous with poor values and decision-making. Critics of such approaches, however, have been instrumental in uncovering structural situations that contextualize seemingly individual or cultural decisions. For example, William Julius Wilson (1997) described the concentrated joblessness in many urban areas that has resulted from widespread deindustrialization in the United States. In this regard, a commonly cited example of poor cultural values in the African-American community—the proliferation of single mother households—is more than the result of bad morals. Instead, Wilson argues that a lack of employment opportunities for young African-Americans leads to a profound lack of “marriageable” men in the inner city (Wilson 1987). Nonetheless, Wilson’s paradigm does not downplay the role of individual
decisions but reveals their rationality within a particular social milieu. But because the emphasis on personal accountability is related to overlooking these structural constraints, paternalism is a potential consequence.

Personal relationships are viewed by Evangelicals as a primary mode of transmitting knowledge and values and improving individual circumstances. Though many Evangelicals are self-conscious about paternalism, especially in cross-cultural missionary situations, a heavy emphasis remains on personal responsibility. In fact, one recent publication, which criticizes the focus on individual decisions common in evangelical groups, addresses paternalism but fails to see the larger context of social problems. For these authors, the dangers of paternalism result from helping others when they are really capable of helping themselves (Corbett and Fikkert 2012). In other words, doing things for others may encourage dependence, rather than self-sufficiency. Although these critics acknowledge the possibility that structural factors contribute to poverty, they stress personal responsibility. In their words, “it is still important to consider the person’s own culpability in the situation, as allowing people to feel some of the pain resulting from any irresponsible behavior on their part can be part of the ‘tough love’ needed to facilitate the reconciliation of poverty alleviation. The point is not to punish the person for any mistakes or sins he has committed but to ensure that the appropriate lessons are being learned in the situation” (Corbett and Fikkert 2012: 102). These sentiments underscore the need to teach personal responsibility when providing help and correspondingly to downplay the existence of power differentials or other structural barriers.
Some sociologists have suggested that this type of paternalism maintains privilege by ignoring systemic inequality and emphasizing the need to care for the less fortunate only individually (Bobo1999). By locating problems within individuals and cultures, these strategies suggest that social barriers are rational, rather than a product of historical conflict. This schema further communicates that those who are successful should encourage others to follow a path of good decisions rather than call into question any structural reasons for inequality. In the end, this emphasis on personal responsibility could legitimize existing health inequalities by suggesting that they are the result of individual decisions. According to such a scenario, a broad strategy aimed at providing widespread access to health care, like the Affordable Care Act, may be unnecessary, since any problems are individual in nature.

3. The Importance of Class Experience

Related to the idea of personal accountability emphasized by Evangelicals is the importance of group position. Herbert Blumer described famously the relevance of thinking sociologically about individual opinions toward other groups (Blumer 1958). In the discussion of personal accountability, the stratification literature provides an interesting perspective on economic success. Some authors have argued that there is a dominant stratification ideology in America that emphasizes individual hard work and status mobility (Kluegel and Smith 1986), very much in line with the evangelical emphasis on personal accountability. The position that favors individualistic explanations about poverty has further been related to a variety of demographic factors. Groups that are more likely to adopt this ideology include dominant religious groups, including
Protestants and Catholics (Hunt 2000), white Americans (Robinson and Bell 1978; Hunt 2002), older populations (Hunt 1996), and those higher in SES (Kluegel and Smith 1986; Clydesdale 1999). Many of these authors describe this tendency as an attempt to protect certain social statuses from opposing groups (Robinson and Bell 1978; Kluegel and Smith 1986; Clydesdale 1999; Hunt 2000, 2002).

The importance of personal accountability found in this sample is thus compatible with this line of research, because most participants were white, Protestant adults with relatively high SES. Although a variety of positions on economic stratification were found both within this sample and in other qualitative studies (Hart 1992), the question of whether certain statuses and experiences might relate to such views remains an important concern. Additionally, the generation gap, which describes younger Evangelicals as having liberal views on economic justice (Faith and Public Life Poll 2008; Pew Forum 2010), was mentioned by some participants in this sample. Although the nature of qualitative research does not allow for generalizable evidence either to confirm or to negate this evidence, an important finding for understanding such research resulted from this project. Specifically, several participants described the importance of having been exposed to divergent experiences, usually through relationships with individuals from different status groups, or growing up in a family that had low SES.

These experiences, according to many participants, engendered a more empathic perspective that emphasizes the importance of social constraints in achieving economic success. The significance of these experiences has been well documented in the race relations literature (Allport [1954] 1979; Sigelman and Welch 1993; Pettigrew 1998;
Emerson, Kimbro, and Yancey 2002) and has been extended to include SES differences among other factors (Pettigrew and Tropp 2006). For this reason, contact with other groups might have particular importance for Evangelicals when thinking about personal accountability. Although personal decisions are still thought to be important, external circumstances rise in importance when persons develop relationships with those who often have experienced hard times.

Conversely, several others described clearly their experiences of privilege and, correspondingly, emphasized the importance of personal decisions and responsibility as contributing to prosperity, rather than external factors. Nonetheless, for many individuals in this sample, being exposed to individuals with radically different experiences seems to engender a measure of empathy and further relates to an emphasis on structural factors rather than personal accountability alone. For this reason, class experience among Evangelicals might lend some insight into particular interpretations of the Affordable Care Act.

Because personal accountability is such an important issue among Evangelicals, whether individuals have knowledge of social dynamics related to class, race, and gender might be important for understanding whether such responsibility is emphasized when thinking about health care coverage. Because the potential exists for health care inequalities to be attributed to poor decision-making if the focus is individual responsibility, an awareness of structural constraints might be related to favoring collective interventions, such as the Affordable Care Act. In other words, if important inequalities, such as those related to health outcomes and health care coverage, are tied to
particular practices within powerful institutions, remedies might address the social
distribution of resources that are related to good health. Conversely, if individual choices
are emphasized, remedies might instead facilitate relationships between persons to curb
damaging health behaviors.

4. Government Intervention and Economic Philosophy

Another important area for Evangelicals when thinking about social engagement
is the role of government in regulating economic development and social services.
Specifically, whether government intervention is appropriate or effective is important for
understanding evangelical responses to the Affordable Care Act. Because this policy
involves federal interventions into the health care market, economic perspectives should
be analyzed.

Contemporary research on the economic philosophies of Evangelicals suggests
that, like most religious groups, a single orientation to the market cannot be located (Gay
1991; Hart 1992; Iannaccone 1993; Novak 1993; Lerner 2006). Rather, a variety of
positions have been described, ranging from a rejection of laissez-faire to an acceptance
of the free market as the only way to advance society (Gay 1991). For example, though
some Evangelicals favor conservative economics, an entirely unregulated market is not
usually emphasized.

Because materialism is considered to be a dangerous idol within contemporary
Evangelicalism (Witten 1995), many believers do not value a free market solely as an
instrument to increase wealth (Elisha 2011). Further, recent empirical analyses on
conservative Protestants suggest that regulation of the market may be needed to maintain
moral responsibility (Steensland and Schrank 2011). But freedom from the market is often preferred to emerge from personal voluntarism rather than government intervention (Steensland and Schrank 2011).

Similar to both qualitative and quantitative findings on evangelical economic perspectives, the participants in this sample espoused several different views on how often the government should intervene to solve pressing social problems. Although very few participants had an outright desire for or rejection of the government having a role in public life, many expressed reservations that the government could effectively tackle growing problems with the American health care system. These perspectives were commonly described when explaining that the Affordable Care Act was good in principle yet would likely not be carried out effectively through government programs. This hesitance about government involvement is tied to a variety of factors.

For some persons, the government cannot accomplish these goals because public organizations have a history of bureaucracy and inefficiency. Other participants foresaw ominous changes in health care with additional rules that would be imposed. Examples included mounting paperwork for physicians and patients, increased costs of an already overinflated industry, extensive waiting periods for medical procedures, and decreased time for doctor/patient interaction.

For some participants, government intervention is problematic not just because of ineffectiveness but because church programs aimed at improving community health can be stifled. When discussing potential solutions to health care problems, many individuals preferred that the government simply leave room for churches to do more community
outreach. The potential for public-private partnerships was contested, however. Though some respondents favored the opportunities for such collaboration, others expressed concern that church outreach, when linked to federal funds, would have to be entirely secular in nature. For many individuals, comprehensive outreach by definition encompassed meeting both physical and spiritual needs.

In addition to whether church outreach programs could work together with the government, a few persons questioned whether federal initiatives such as the Affordable Care Act could offer a truly holistic approach to contemporary health problems. Sociologists have expressed similar concern that simply providing access to care will not alleviate contemporary health inequalities (Link and Phelan 1995; Ross and Mirowsky 2000). Because health and illness are tied to many facets of social life, intervening after individuals get sick is unlikely to address the larger problem of why morbidity is unequally distributed. For this reason, many medical sociologists have advocated for more widespread community health and economic equality (Link and Phelan 1995; Ross and Mirowsky 2000). Many evangelical participants were concerned similarly that the Affordable Care Act is missing an opportunity to improve community health, particularly with regard to providing truly preventive care.

But contrary to popular stereotypes, Evangelicals do not seem to be tied to either conservative or liberal perspectives. Rather, various positions are taken with respect to different religious values. These include the viewpoints that health care be efficient and
reasonably priced, promotes social justice, respects religious expression, and is holistic. These different perspectives are critical for engaging and understanding properly Evangelicals’ various positions on health care.

5. Fatalism and Collective Efficacy

The final area is how fatalism influences Evangelicals’ assessment of the Affordable Care Act. Significant in this discussion is that a specific view of history is suggested by many participants that downplays the effectiveness of human action. Similarly, an emphasis on depraved human nature is related to pessimism about the possibility of significant social change. Though most individuals were very concerned with trying to improve social life, there was little confidence that these efforts would be fruitful. In this regard, interpretations of the Affordable Care Act are tied to the ability of humans to bring about radical changes in society without some external influence.

The notion of history is especially relevant in this discussion because multiple versions exist that suggest very different trajectories of human civilization. For the purpose of this discussion, dividing these views into those that emphasize external and internal causes is helpful. External views of history offer a vision of time that moves along toward a fixed telos or goal. One variation considers human civilization to be evolutionary and views increasing complexity and rationality as evidence that history is moving society forward. This line of thinking is consistent with both the Enlightenment and modern perspectives that describe cultures as going through stages of increasing sophistication (Comte 1988). External sources of history include generally some type of guiding force, consistent with Hegel’s view of spirit (Geist) (Hegel [1807] 1977) or the
Christian view of God that exists outside of time (Cushman 1953). Although many external perspectives on history emphasize the gradual improvement of society over time, de-evolution is also possible. This rendition is consistent with various Christian views of history that emphasize the worsening of society before God eventually intervenes (Erickson 1998).

An alternative view is offered in Utopian thinking that is critical of the lack of emphasis on human action in these traditional portrayals of history. This paradigm suggests that history is not fixed but is open to multiple possibilities. Many thinkers have described the importance of a philosophy of history that fosters social change (Jacoby 2005). Additionally, traditional accounts of time have been understood to be a covert attempt to undermine human action. For example, Marx extended his notion of alienation to include ideologies that describe temporary events in history as permanent or inevitable, thus limiting praxis. As he writes, “the philosophers have only interpreted the world, in various ways; the point is to change it.” (Marx and Engels [1845] 2001). The point is that human ability to make meaningful changes to society might be related to whether history is thought to be basically open or predetermined.

Additionally, research related to self-efficacy is relevant. Locus of control theory, first introduced by Julian Rotter (1954), describes two different approaches to how individual actions influence outcomes. Those who are internally controlled believe that they are capable of making changes. Conversely, emphasizing that events are largely outside of individual influence is a feature of individuals with high external control. This literature has further been extended to consider religious and theological orientations, and
empirical results suggest that conservative theology is related to external control, or the belief that God determines the future (Lupfer and Wald 1985). Specifically important, in collective behavior research locus of control has been tied to social activism. Believing in the efficacy of human action has been linked consistently to support for and involvement in social action (Gore and Rotter 1963; Watanabe and Milburn 1988). For this reason, the belief that humans are capable of bringing about change is important for understanding the likely impact of social policies such as the Affordable Care Act.

Participants in this study expressed doubt that humans could make the changes necessary to fix social problems, such as the organization of health care. In many ways, these concerns are related to an overall narrative of history getting worse before finally being redeemed by God. In this sense, humans may be able to make changes locally, but overall improvement is unlikely given the fatalism described in Christian eschatology. Specifically, something external would have to intervene in order for large scale changes to occur.

Other individuals thought change was unlikely because important values in American society seemed to be on the decline. Instead of viewing these values as temporary or open for change, most participants associated this decaying morality with an expected degeneration. Additional persons cited human nature as preventing important changes from happening. Because the basic depravity of individuals is beyond personal control, many participants cited this condition as a stumbling block to widespread social change. For many individuals, human nature, a condition outside of individual influence, rendered long-term positive change unlikely.
Fatalism associated with an external view of history thus has specific implications for thinking about the Affordable Care Act. Although not all participants adopted a pessimistic attitude about the effectiveness of such policies, the belief that such widespread changes might not be possible was striking. For some, the current state of health care was so administratively and financially complex that envisioning successful changes is difficult.

Others questioned whether the Affordable Care Act is the correct approach, given human depravity. Some participants thought that health care improvements should emphasize the fundamental trait of self-interest. For this reason, government programs that provide universal access to care might not be appropriate. Several respondents, instead, desired initiatives that provide incentives for individuals to act in beneficial ways. Examples included having individuals pay for their own care, so that services are not over-utilized and getting rewards for engaging in healthy behaviors. Additionally, human nature is a concern because this element might limit the ability of individuals to get along well enough to organize a widespread undertaking like the Affordable Care Act.

Several other participants expressed difficulty in seeing overall health outcomes being improved but thought that important health care changes could be made on the community level. Though not all participants were opposed completely to the need for policy changes to improve health outcomes on a broad level, community involvement was almost a universally important focus. For this reason, evangelical views on
community or local change are important for making policy recommendations that engage successfully conservative Protestants in improving American health outcomes.

**Conclusion and Recommendations**

After a discussion of important findings from this project, establishing the practical consequences of this research is important. Recently, scholars in the field of medical sociology have criticized sociologists for failing to provide pragmatic approaches to connect empirical findings to contemporary social problems (Gray and Phillips 1995; Pescosolido, McLeod, and Algeria 2000). In this sense, these thinkers adopt a pragmatic approach to sociology that emphasizes both theory and action (Mills 1964; Bloom 2002), particularly related to health policy. In this regard, future health care discussions might benefit from understanding evangelical opinions on many important issues related to health, community, and social change.

Overall, the findings from this study suggest that Evangelicals do not think uniformly on matters related to the Affordable Care Act. Contrary to popular stereotypes, conservative perspectives aligned with the religious right do not hold sway for all Evangelicals. Instead, considerable complexity exists in addition to a broad spectrum of opinions. Although many Evangelicals in this study rejected the Affordable Care Act, this decision was not universally the case, and most supported the abstract goal of providing health care on a broad level. Further, when this policy was criticized, a variety of practical concerns were described, rather than an outright dismissal of this intervention. Additionally, while traditional alternatives were offered by some participants, many other persons aligned themselves with the growing evangelical left, thereby suggesting that a
transition might be occurring within this group away from the conservative philosophies of the moral majority and religious right (Wilcox and Robinson 2009; Krattenmaker 2013). For this reason, the diversity of perspectives within Evangelicalism suggests that this group is not wed to a particular political orientation (Smith 2000) and might be amenable to policy changes.

Nonetheless, the fact that Evangelicals are individualistic and fatalistic is important for future policy discussions. Though the academic literature has described the desire of contemporary Evangelicals to be involved in improving public life (Smith 1998; 2000), questions have remained as to whether their religious worldview is incompatible with social change occurring on a broad level. The findings from this research suggest that Evangelicals do not view humans as basically atoms (Brockman 2013). Instead, community and social outreach are highly valued and considered a key facet of human life. For this reason, describing Evangelicals as purely individualistic is not appropriate (Elisha 2011).

Further, the significance of religious fatalism for social change is an important issue. Although the participants in this study were not optimistic about making widespread social improvements, they remained resolved to try and thus were not entirely paralyzed by a religious orientation that emphasizes human depravity. Accordingly, both individualism and fatalism might be important to formulating specific strategies that Evangelicals might support for addressing contemporary health care problems. An emphasis on developing personal relationships and social accountability might be rational, given the belief that large changes might be difficult.
Following from the findings from this study, what type of discussion might make future collaboration with Evangelicals possible? On a broad level, policy discussions that underscore the importance of social responsibility will likely be important to contemporary Evangelicals. Additionally, the emphasis on developing solidarity suggests that future health care interventions might be supported if they emphasize community involvement. This focus on the local setting could allow for Evangelicals to be involved significantly with planning and organizing care and potentially rally support for complementary systemic changes. In other words, because developing healthy communities is important for many Evangelicals, future policy debates might consider how a spirit of communalism could be developed through the organization of health care.

The findings from this research suggest that support for health policies might be taken seriously by Evangelicals if social responsibility and community are emphasized.

The stress placed by Evangelicals on personal relationships, individual accountability, social responsibility, and community is in many ways compatible with community-based approaches to health care (Minkler 2005). The emphasis on reaching underserved populations, understanding community problems that lead to illness, and establishing holistic treatment and prevention have been underscored by the community mental health movement since important policy changes were made in the 1960’s (Vega and Murphy 1990). Although evangelical participants in this study did not specifically invoke these approaches, their perspectives on improving health care shared many similarities. Additionally, recent evangelical books on social outreach stress the importance of community development and offering sustainable solutions to many social
problems (Corbett and Fikkert 2012). As a critique of previous missions strategies that emphasized short-term relief, recent methodologies underscore the need to invest fully in improving communities. For some Evangelicals this position has included moving into underserved neighborhoods and getting to know community members, in order to work cooperatively on shared problems (Gornik 2002; Claiborne 2006) Further, an emphasis on local knowledge of community problems is becoming popular among Evangelicals who are critical of past approaches that did not assess critically community particularities. Community-based interventions, accordingly, might be supported widely.

One aspect of these approaches that could be emphasized is the ability to provide holistic care. Because many Evangelicals in this study rejected the Affordable Care Act due to the singular focus on providing access to formal health care, approaches that include an additional community aspect may be supported. In this regard, many of the respondents highlighted the importance of providing truly preventive care, both because such strategies are less expensive and because many health problems stem from general community problems related to unemployment, housing, and access to important resources (Link and Phelan 1995; Ross and Mirowsky 2000). Further, community-based approaches may be favored because personal relationships can be developed.

The emphasis on getting to know those who receive help was reiterated by many participants in this project. One commonly cited benefit of such relationships is that appropriate help can be given to others when an intimate knowledge of problems exists. For this reason, many Evangelicals might support community-based approaches because they allow individuals to foster relationships with others and more accurately assess
needs. Additional ways that community interventions complement evangelical strategies relates to maintaining personal accountability. Because the importance of individual responsibility was mentioned by most Evangelicals in this study, collaborating with others to address community problems might encourage such accountability. In other words, collaborating to foster a sense of community responsibility appears to be consistent with maintaining personal accountability.

An additional aspect of community-based health approaches that is likely to appeal to Evangelicals is the ability of local churches to be involved in providing care. Though most Evangelicals did not want to live in religiously homogeneous communities, they expressed consistently the desire for the church to play a positive role in the surrounding area. Because such churches have been concerned historically with social outreach, many evangelical participants preferred that future strategies follow this process. Although many respondents discussed the complexities of public-private partnerships, many were hopeful that such cooperation could be possible and fruitful. For this reason, future policies aimed at systemic change could include opportunities for local community development. Because many Evangelicals emphasize the need for ground-level changes, policies that only offer top-down approaches may lack their support.

Additionally, community-based approaches to organizing health care might capitalize on the evangelical social ethic, while also encouraging the critical reflection necessary to move evangelical social-outreach away from paternalism, fatalism, and individualism. Although Evangelicals have been historically involved in community outreach, this activity has not necessarily led to more progressive attitudes when thinking
about communalism in social policy (Eyler 1999). In other words, despite the evangelical emphasis on developing community and helping others locally, this ethic has often not been extended to include economic, racial, or health inequalities. For this reason, general contact with underserved populations has not led Evangelicals to reframe issues in light of institutional or structural disadvantage. Therefore, recent research in the area of service-learning might be important to consider.

The service-learning literature contains important evidence that involvement in community-based projects will not necessarily instill a sense of communalism without critical examination (Hatcher and Bringle 1997; Eyler 2002; Carrington and Selva 2010). Reflection in this sense refers to the possibility of humans to critically consider many important issues. In philosophy, this ability has been significant in describing the mind as active in the creation of knowledge, rather than merely the recipient of sense impressions (Kant [1781] 2007). For this reason, knowledge is thought to be influenced by human action, rather than existing a priori. As a result of this theoretical development individuals are capable of critical self-interrogation and can reexamine past perspectives on many issues. The key point is that all knowledge is constructed interpersonally, laden with human action, and contingent. For Evangelicals, this finding might mean that the usual focus on individualism is not caused by theological paradigms but a product of interpretation and acceptance. This acknowledgment suggests the possibility for Evangelicals to think about social change in a variety of ways, given the ability to review critically important aspects of their faith and other facets of their lives.
Encouraging such reflection among Evangelicals throughout the development and administration of community-based projects may illustrate the importance of social context and human praxis. Exercises that promote such reflection are thus able to link service experiences with academic study so that social problems can be rethought and appropriate solutions imagined (Eyler 2002). Despite the belief that current health problems stem from poor individual decisions among Evangelicals in this study, critical reflection on community-based involvement could reveal how personal decisions are constrained by powerful institutions (Young 1990). More specifically, the relationship of social status to health outcomes could be acknowledged. Further, grounding social structures in a history of human action might undermine traditional realist approaches that take social systems for granted, thereby reducing the appeal of fatalism (Wrong 1961). In this sense, acknowledging the constructed nature of social constraints might open up a space to rethink existing relationships between persons. In the end, community-based approaches, coupled with critical reflection, might be capable of tying important evangelical social beliefs to the need for and possibility of social change.

Most important is that this research suggests that Evangelicals are not a monolithic group, either theologically or politically. Based on this finding, future policy debates could be framed in such a way to bring such persons into a meaningful discussion. Specifically, the shared importance of social responsibility and developing community could be emphasized, instead of differences that tend to polarize groups. For many evangelical participants, the damage of more outspoken and intolerant evangelicals is frustrating, yet it is hard to erase. Instead, most participants desired that Evangelicals
be a positive voice in public discussions and have the opportunity to share and compromise with various other groups. While Evangelicals take seriously many distinguishing religious beliefs, for the most part there is openness to other perspectives and a desire to collaborate on shared priorities. A particular limitation of the Affordable Care Act for many participants is that such legislation was passed without critical input from multiple vantage points. While Evangelicals have various perspectives on this policy, a shared concern was to be a part of this political process. For these reasons, the debate over how best to care for the health needs of the American population is an important opportunity for discussion and cooperation. Understanding evangelical particularities on establishing a sustainable solution to American health care problems might contribute to creating common ground and facilitating successful policy initiatives.
References


Fish, Stanley. 1980. Is There a Text in this Class? The Authority of Interpretive Communities. Cambridge, MA: Harvard University Press.


Sprung, Charles L., Paulo Maia, Hans-Henrik Bulow, Bara Ricou, Apostolos
Armanadis, Mario Baras, Elisabet Wennberg, Konrad Reinhardt, Simon L.
Fries, George Dietmar R. Nakos, Lambertius G. Thijs, and the Ethicus Study
Group, 2007. “The Importance of Religious Affiliation and Culture on
End-of-Life Decisions in European Intensive Care Units.” Intensive Care Medicine. 33:
1732-9.


Assessments of Market Society.” Review of Religious Research. 53: 257-277

Taylor, Marylee C. and Stephen M. Merino. 2011. “Race, Religion, and Beliefs about
Racial Inequality.” The Annals of the American Academy of Political and Social


Tillich, Paul. 1954. Love, Power, and Justice: Ontological Analyses and Ethical


Tranby, Eric and Douglas Hartmann. 2008. “Critical Whiteness Theories and the
Evangelical ‘Race Problem’: Extending Emerson and Smith’s Divided by Faith.”

in Health/Medicine and the Faith Traditions, edited by Martin E. Marty.

Vega, William A. and John W. Murphy. 1990. Culture and the Restructuring of

Wade, Christina, Maria Chao, Fredi Kroneberg, Linda Cushman, and Debra Kalmuss.

Lantham, MD: Rowman and Littlefield.


APPENDIX A

INFORMED CONSENT AGREEMENT

Consent for Participation in Interview Research
University of Miami, Department of Sociology

I am a doctoral candidate in Sociology at the University of Miami. I am conducting semi-structured face to face interviews as a part of my dissertation project about Evangelical Protestant views on health, illness, and community. It is likely that the results of these interviews will be published and/or used to further knowledge in the field of Sociology.

You are being asked about your religious beliefs and how they relate to thinking about health, illness, and community. The interview will take approximately 30 minutes to 2 hours. The entire interview will be audio-recorded and will later be transcribed by the interviewer or a professional transcription service. Approximately 25-50 persons will be interviewed for this project.

There are no risks or anticipated benefits for taking part in this study. If at any point in the interview, you feel uncomfortable answering a question then you may decline to do so or end the interview. If you would prefer that the interview not be audio-recorded, you may request that the interviewer take notes by hand instead.

Any identifiable information about you will not be reported along with the results from the interview. At the time of transcription pseudonyms will be used, including in the final write-up of the interview report. Once pseudonyms have been substituted, all identifiable information will be stored separately in a secure location.

Your participation is completely voluntary. If at any time you would like to discontinue participation you may do so. You will not be paid for my participation and there will be no penalty if you decline to participate.

If you have any questions about this project or your participation in it you can contact either Berkeley Franz at (317) 626-2218 or Dr. John Murphy at (305) 284-6157. If you have any questions about your rights as a research subject, you may contact the University of Miami Human Subjects Research Office at 305-243-3195.

You will be given a copy of this consent form to keep for your own personal records.
I have read and understand the above explanations of the research study and interview process. I have had an opportunity to ask questions and receive satisfactory answers. I voluntarily consent to participate in this interview.

______________________________  ________________________
Signature of Participant          Date

______________________________  ________________________
Printed name of Participant      Signature of Investigator
APPENDIX B

INTERVIEW GUIDE

General/Opening Questions:

1. How long have you been attending this church?
2. Would you describe yourself as an Evangelical Christian?
3. How did you come to be an Evangelical Christian?

Questions on Evangelical Beliefs:

1. What does it mean to you to be an Evangelical Christian?
2. Could you describe some of the most important beliefs associated with being an Evangelical?

Questions on Health and Illness:

1. Is physical health an important concern of yours?
   a. How would you describe your own physical health?
   b. How do you feel about physical health? Is it important to you?
   c. How do you feel about the physical body? Is it important to take care of?
2. What about mental health?
3. Have you ever cared for someone with poor health?
4. If you or someone you were responsible for were experiencing some type of illness, how would you take care of it?
   a. Would you ask a medical doctor for treatment, consult with someone in your church, or both?
5. How does your faith relate to thinking about health and illness?
   a. How important is it to maintain good physical health compared to spiritual health?
      i. How do you balance the two?

Questions on Social Responsibility:

1. How do you think Evangelicals should care for others?
   a. Is this important to you?
   b. Do you think you can trust other people to care others in life and do the right thing?
   c. Do you think Christians and non-Christians will both be effective at caring for others?
2. How important is it to take care of others?
   a. Should Evangelicals be concerned with the physical health of others?
   b. What about the spiritual health of others?
c. Does this include members of other communities, including strangers?

3. How important is it for individuals to help themselves and be responsible for their own well-being?
   a. Do you think that individuals have a responsibility to work hard in life?
   b. Do you think that life is generally fair? That people get what they deserve?

4. What types of ways should Evangelicals care for others?
   a. How are you personally involved with helping other people?
   b. What does this mean to you?

5. Are you personally interested or involved with Politics?
   a. How so?
   b. Do you think that this is an important duty for evangelicals?
   c. Can political involvement help improve the world?

Questions on Health Care Reform:

1. Should Evangelicals be responsible for addressing illness in the community and providing access to quality healthcare?

2. Are you aware that in America there are big differences in the physical health of different groups? Specifically that certain races and those not economically well off are sicker and die younger than the general population?
   a. How do you feel about this?
   b. Does this relate to evangelical beliefs about caring for others?

3. If Evangelicals should be involved in this, what might be the best way to improve the health of others?
   a. Should these strategies operate through Christian churches or might they be addressed on a more general level, such as through government policies and social programs?
      i. Would you trust non-Evangelicals to plan a way to take care of the nation’s health needs? Why?

4. Are you familiar with recent legislation aimed at providing access to healthcare for the entire American population?

5. How should Evangelicals think about such policies?
   a. What might better alternatives look like?
APPENDIX C

PERSONAL STATEMENT

I have chosen to include a personal statement in order to disclose relevant information about myself that likely influences many aspects of this research project. Because I believe that knowledge is fully mediated by the human presence, there is no possibility for research to be entirely objective or free of bias. Rather, I find it more helpful to honestly discuss relevant personal experiences that are related to a particular project. In the case of this dissertation project on Evangelical Protestants, my personal religious beliefs and experience with this specific group are important to consider.

Important in this context is that I do not identify as an Evangelical and am thus providing the perspective of an outsider. However, I have had significant exposure to Evangelical Protestants both in the past and currently. An important experience of mine that influenced my choice of dissertation topic was that I attended an Evangelical Christian undergraduate university. Because I was raised in a secular family and did not have many religious friends, going to school in this environment provided an opportunity to reflect on the importance of a religious subculture for thinking about many aspects of social life. My motivation for attending this school was not religious in nature, but rather was a practical decision made because I graduated high school early and this university offered admission immediately.

To my surprise, I found that evangelical universities were quite distinct from the secular schools with which I was familiar. Because I was not acquainted with the religious language used and the broader evangelical worldview, this transition was
initially uncomfortable. Further, because I had not shared many of the same experiences with my fellow classmates such as growing up in a church and attending religious clubs and camps, my dissimilarity was obvious.

However, because of the emphasis on community within Evangelicalism, students shared meals together, lived on campus for the duration of college, and got to know both professors and staff on campus. Because of this, I developed many friendships and relationships with professors that continue today. Further, I met my husband who comes from an evangelical family at this university. For this reason, I am still intimately connected to the evangelical church, despite not being an Evangelical myself. Ultimately, this experience was positive for me and despite being critical of certain aspects of the evangelical subculture; I have considerable respect for the individuals I know through the experience with this university.

Most important is that attending a religious school that incorporates important theological principles into all aspects of university life provided an opportunity to consider how such beliefs are related to thinking about social life. Because the experiences of the individuals I met were radically different than mine, I became interested in how divergent perspectives developed out of growing up in different contexts. More specifically, I found that often religious beliefs were tied to particular interpretations of the origin of knowledge, the foundation for ethics, and the possibility of social change.

Attending this university during the second presidential campaign and subsequent election of George W. Bush, provided an opportunity for campus reflection on the
relationship between Evangelicalism and politics. Although minority perspectives existed on campus, particularly in the Sociology department, I was struck at how strongly religious rhetoric was tied to contemporary social problems. An especially poignant experience for me was attending class the morning after George W. Bush had been reelected and having a professor announce to the class that America had done the right thing for God by reelecting him as president. The sentiment behind this remark was that if any positive change was to come about in this country, it would have to be religious in nature. This experience piqued my interest in how theological paradigms are applied to social issues and has influenced my academic work ever since.

This particular dissertation project is thus an extension of my larger interest in connecting the evangelical worldview to interpretations of social life. Because I am interested in both the construction of health and illness and narratives of social change, considering recent legislation such as the Affordable Care Act was a particularly fitting topic. For this reason, I chose to use qualitative research methods to understand how individual experiences with Evangelicalism were negotiated in the context of contemporary policy debates.

Although discussing religion with strangers could potentially be a sensitive topic, I found that most individuals were more than willing to talk openly about their perspectives. Further, because I had attended an evangelical university, when this came up in discussion many participants seemed relieved that I was not a complete outsider interested in studying them, but had something in common. Many individuals even brought this up when asking others they knew to participate in the study. For this reason,
my personal experiences seemed to work to my advantage in recruiting individuals for interviews. Further, having an intimate knowledge of important aspects of Evangelicalism allowed me to develop relevant questions and promoted mutual understanding throughout interviews. However, this prior exposure to Evangelicals might have also limited my research by contributing to a certain bias of who Evangelicals are. Grounded Theory methods were thus especially helpful because they encouraged me not to form hypotheses prior to research. Although I had been familiar with particularly conservative Evangelicals at the university I attended, I found considerable diversity within the evangelical sample that I was not expecting. Ultimately, my past experience is relevant to my selection of this topic and the execution of this project and I am hopeful that sharing it emphasizes the interpretive nature of social research.
# LIST OF PARTICIPANTS

<table>
<thead>
<tr>
<th>Participant name</th>
<th>Church attended</th>
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<tbody>
<tr>
<td>Ann</td>
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<td>Barbara</td>
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<td>Dan</td>
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<tr>
<td>Dave</td>
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<tr>
<td>Tara</td>
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</tbody>
</table>
APPENDIX E

CHURCH PROFILES

Below is a list of the three churches that participated in the project along with important characteristics. Church names are pseudonyms.

1. **Crossroads Christian Church**- This Midwestern Evangelical church has approximately 4,000 members and is located in the suburbs of a major city. The church identifies as non-denominational and identifies core values on their website such as biblical authority, developing personal relationships with others, and serving the community.

2. **Resurrection Christian Church**- This urban Evangelical church has approximately 600 members and is located in a large Midwestern city. This church is affiliated with the Presbyterian Church in America which historically has been a conservative evangelical and reformed Protestant sect. This denomination relies on the Westminster Confession of Faith, a document that outlines the authority of scripture, sovereignty of God, original sin, predestination, and salvation through grace alone. Publicly-affirmed values of Resurrection Christian Church include sharing the gospel, developing community, restoring the city, and working toward social justice.
3. **Westbrook Christian Church**- This suburban church has approximately 30,000 members and is one of the largest churches in the United States. Westbrook is located in a major city in the Southern region of the United States. Westbrook is a non-denominational Evangelical church. Important goals of Westbrook Christian church include engaging in biblical prayer, preaching, and worship, building strong families, strengthening personal relationships, reaching out to the community, and spreading the gospel.