



A five week course to look at the basics of pastoral care.
The aim is to enable you to begin to develop skills in confidence
and understanding and listening.

- ❖ What is Pastoral care?
- ❖ Visiting and Listening
 - ❖ Making Contact
 - ❖ Dealing with loss
 - ❖ Getting organised

Introduction

Welcome to *Care and Share*. This course has been designed to help train and support those involved in caring. It can be used with pastoral visitors and with any who want to understand and deepen their caring.

Our Christian faith is founded on love; the love of God for creation and the love of God revealed through the actions and parables of Jesus. Jesus, who reveals God as a loving healing presence whose strength and grace are always available for us. God who values and delights in each one of us despite our inadequacies and failings.

The church is the body of Christ, so we are all involved in the health of that body. The quality of our caring is a sign of God's love and a witness to others that we as Christians have something special to offer a broken world that needs healing and reconciliation.

'We love because he first loved us' 1John 4:19.

God alone is the source of our caring skills, abilities and gifts. We are called to discover, affirm and develop the gifts he has given us so that we learn to give and receive care in all our relationships, whether in the church or in the community where we live and work.

Aims of this course

- To show pastoral visitors that they are valued. It is one way of indicating that the role which carers play is appreciated by the church. Carers need caring for too. Showing that carers are valued will encourage them and give them more confidence.
- To enable people to pick up ideas and insights by sharing experiences with others.
- To help people deepen their understanding of pastoral care.
- To allow people to reflect on their role and see how this might be developed.

Using this resource

This is devised as a five week course of 2 hour sessions. With some adaptation it could be used as a two day course. It works best with a small group where people are committed to attending all the sessions. Group trust will build up more easily in a group where commitment is high.

The exercises are designed to help people think for themselves - many people have experience and knowledge which they do not recognize. When there is an exercise involving reflection, ask people to have a go themselves before offering 'the answers'.

Specific timings are not mentioned as each group will develop at its own pace.

There is space for a tea/coffee break, again at the group leaders discretion.

However you are using the course encourage participants to plan ahead in order to commit to the course.

Good pastoral care depends on time management - use the course to model good timekeeping.

Reinforce the importance for everyone (tutor/s and students) to listen to God.

Emphasise acceptance of differences and learning from them.

Listening to others - includes acceptance and respect, acknowledging that this may be a risk for some students, can include vulnerability.

Emphasise importance of confidentiality - people will be able to share more if they are confident that whatever is said will remain within the group.

Emphasise to students they need only share what they are comfortable with.

Listen to self - this may be a new concept for some students, encourage them to notice what their responses are to the course material and their interaction with others.

As a participant on the course I agree to:-

- ✚ Commit to the course
- ✚ Be responsible to keep to times
- ✚ Listen to God and be open to all He is seeking to do through the course
- ✚ Contribute to a safe and supportive learning environment
- ✚ Respect others and not judge their views
- ✚ Listen to others
- ✚ Actively participate and interact
- ✚ Maintain confidentiality of other's personal stories - either during or after the course
- ✚ Listen to self - thoughts, feelings and reactions
- ✚ Be open to change and personal growth
- ✚ Be willing to offer challenge and support as appropriate

Name.....

Church.....

Phone.....

Email.....

Care and Share Course

Please fill in the response form as this will help continued development of the course

We are running/plan to run this course in our parish.

Please add any comments you wish.

Return the form to:-

Pastoral Assistants Training Administrator

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Session 1 What is Pastoral Care?

Aim: To explore what is meant by 'Pastoral Care'.

Pastoral care is in essence surprisingly simple. It has one fundamental aim:- to help people know love, both to receive and to give.

Group exercise

The group mingles and everyone has to introduce themselves to everyone else by saying their name and two things about themselves. This should be done briefly with no additional conversation. The exercise is then repeated but this time everyone has to recite the name and information about the people they met back to them.

Pastoral care is at the centre of the church's mission and ministry. We love because God first loved us. (1 John 4:19). It is our response to God's unconditional love. And people are interesting, have relationships and all have a story to tell.

We follow Jesus' command to 'love one another as I have loved you'.

How did Jesus love?

Brainstorm thoughts in small group

Healed, listened, prayed, spent time with God, shared fellowship, washed their feet, spoke out against injustice, gave them something to eat, calmed fears.....

In Plenary group feedback from small group and summarise the following points:-

A good deal of pastoral care is awareness of another's life and concerns.

- ❖ a friendly interest in someone's children or aged relative is a simple signal that you are interested in them and what makes up their life.
- ❖ recognising that a bereaved person may find an anniversary or birthday date particularly difficult and phoning may convey much care.
- ❖ asking about a person's interest in 'jazz' and listening to their enthusiasm may be as much part of caring as listening to their troubles and counselling them.

Understanding one's own experience is central to caring for others.

- ❖ Remembering how we felt when we were teenagers, when someone we loved died or left us, when our children cried at night, when we failed an exam, may be a point of contact with someone at a similar moment in their lives and may help us empathise.

In small group

List the practical ways in which your congregation cares for its members and the community in general.

Feedback in plenary group.

These are some of the pastoral care questions.

How do we nurture the children and young people?

How do we effectively care for single people, young and old?

How do we support families?

How do we care for those going through times of difficulty and crisis?

How do we care for those in leadership roles?

How do we care for those who no longer attend our church?

We need to encourage and be encouraged to fulfil our caring ministry.

Group exercise

Ask people to think for a moment about what helped them through difficult times in their lives in the past. Were there any particular individuals involved? What was it about the individuals that made them most helpful?

Were there any unhelpful responses from people?

After a period divide into pairs to share the experiences.

Ask each pair to make a list of qualities that make for good carers.

Then in 4's provide a list to feedback to the main group.

Make a master list on the flipchart and then compare with the following list which is taken from 'Called to Care', by Ann Bird

God's gift of caring involves the ability to:-

listen

accept

be available

be patient

keep confidences

learn from one's own experiences

be sensitive to another's experiences

be non-judgemental

be able to offer words of hope and encouragement

Remember we are not expected to share in Christ's ministry in our own strength but always we go with the power of his Spirit.

Jesus is our model. He shows us:-

The unique value of each individual (Lost sheep)

Offering ourselves in service to others (foot washing)

Share in mutual ministry of caring (love one another)

Care for all (love your enemies; Sheep and goats)

Pastoral care is natural friendship. And needs nurturing
This is nothing new. This course is an opportunity to develop these skills.

Final reflection

Think of a colour that expresses the nature of your local community. Share it with your group (giving a reason for your choice). If time you might like to compare this with the colour they give to their church community.

At Home

Look at handout - **Definitions of Pastoral Care** - Which definition helps you?

Try and write your own.

Definitions of Pastoral Care

- ♣ 'Helping acts, done by representative Christian persons, directed towards the healing, sustaining, guiding and reconciling of troubled persons whose troubles arise in the context of ultimate meanings and concerns'.
(Clebsch and Jackle 1983)
- ♣ Pastoral care is that activity, undertaken especially by representative Christian persons, directed towards the elimination and relief of sin and sorrow and the presentation to all people complete in Christ to God.
(S Pattinson, *A Critique of Pastoral Care* 1988)
- ♣ Pastoral Care is considered to be any form of personal ministry to individuals and to family and community relationships by representative religious persons (ordained and lay) and by their communities of faith, who understand and guide their caring efforts out of a theological perspective rooted in the tradition of faith.
(R. Hunter et al, *Dictionary of Pastoral Care and Counselling*, 1990)
- ♣ Pastoral care aims to help people to know love, both as something to be received and as something to give. The motivation for pastoral care in Christians is to reflect God's unconditional love to others.
(Frank Wright, *Pastoral care Revisited* 1996)
- ♣ The purpose of pastoral care is to assist men and women, boys and girls to live as disciples of Jesus. The purpose is sought by trying to achieve the four aims of pastoral care:
 1. to encourage people to make their own sense of their experience;
 2. to disclose Christian meaning in life;
 3. to stimulate men and women to engage in their own conversation with the Christian tradition;
 4. to encourage holiness.
(David Deeks, *Pastoral Theology - an Inquiry* 1987)

Questions of care

Measures of quality and effectiveness in Christian caring should not be a question of 'what have I done for this person?' More helpful questions that need to be asked include:

- What is the quality of relationship that we share?
- Who in our church, neighbourhood and community feels uncared for or excluded?
- Have I really listened to this person and allowed their agenda to be more important than my own? What is my agenda if I have one?
- How much is my caring role an expression of my Christian discipleship?
- What makes a visit/pastoral encounter on behalf of the church any different from that offered by a friend or another caring agency?
- How are the stories and needs of people beyond our church members heard and responded to?
- Do we create dependence and exercise control through the care we offer, or are we part of God's plan to liberate people?
- If our pastoral visits highlight a need for social action, (e.g. poor housing, lack of play resources) how is this fed back to the church? How does the church become active in supporting social change?

Session 2 Visiting and Listening

Aim: To explore the nature of visiting

Invite feedback on the sheet - 'Definitions of Pastoral care'.

In pairs

Think of a positive and a negative experience of visiting or of being visited.

In group

From these discussions decide what makes a good visit and what makes a poor one.

Look at the following guidelines.

Guidelines for visiting an institution

- Be sensitive to staff and other residents
- Wear a form of identification
- Accept the rules of the institution. e.g. fill in the signing-in-book
- Identify the staff member in charge and introduce yourself
- Ask if a visit is convenient - a pre-visit phone call may help
- Work with other professionals: e.g. in hospital, always give way to medical attention
- If possible create a private place for the person you are visiting. There may be a quiet room you can use
- Acknowledge other patients or residents, particularly those who appear lonely
- Affirm the hard worked staff

Guidelines for general visiting

- Be clear why you are visiting
- Be a good listener
- Carry some form of identification
- If visiting an elderly person, check that you are expected
- Don't visit at a busy or inconvenient time
- Don't outstay your welcome

Bible Study

Look at the story of the encounter of Jesus and Zaccheus in Luke 19:1-10.

Discuss

- What is said?
- What is unsaid yet communicated by people's actions in the encounter?
- How did Jesus listen to Zacchaeus with his ears, and his inner ear, and how did he respond?
- What did Jesus' visit initiate in Zacchaeus?

Listening

Brainstorm the ways we get to know a person. Here are some ideas to start with:

facial expression

things they have around

Listening skills

'We were given two ears but only one mouth.

This is because God knew that listening was twice as hard as talking'.

In group read through this and try to find personal examples to illustrate each element.

We need to practise and acquire skills to be good listeners, because we cannot just have information thrown at us it has to be received and understood by an active listener.

Good listeners listen with their faces.

Picture the child coming home from school, bursting to tell Dad what has happened that day. Unfortunately, Dad has the paper in front of his face and even when he lowers the paper, it is visibly apparent that he is not really listening.

We spend much of our modern lives trying to tune out excess information.

We have to tune our faces to be reflectors rather than deflectors.

Look at the person, so that your eyes can 'listen' as well as your ears. You need to be able to pick up non-verbal signals. Appropriate eye contact helps to complete the communication circuit between speaker and listener.

React to the speaker by using your face to send out appropriate non-verbal responses. Your face must move and give a range of emotions that show you are following the speaker.

A good listener will stop talking and use 'receptive' language instead. Use *'I see; go on'*; Sometimes called empathic responses - *'you sound angry; it feels as if.....'*

Words that follow the speakers train of thought, to help you react to what they are saying and not to the person. You can then move to asking questions, instead of giving your opinion.

Silence is important and an effective part of listening.

Concentrate on what the speaker is saying. You are not listening if your mind is judging or searching for answers. Even if you know for sure they are wrong, your task is to listen.

Things to remember

- If you are really listening intently, you should feel tired when the speaker has finished. Listening is an active and not a passive task.
- When you find yourself drifting away during a session, change your body position and concentrate on one of the above skills. Once one of the skills is being used, the other active skills will come into play as well.

Being listened to

In pairs

1. *Sit back to back and take turns to talk to each other for two minutes about your holiday, family or work. In the plenary group discuss how it felt to talk without seeing each other. What does this tell us about listening.*
2. *Take turns to talk for one minute without interruption about 'My hopes and fears'. Discuss how it felt to be really listened to.*

Barriers to careful listening

- Constantly comparing yourself to the speaker. (I've been there)
- Trying to guess what they really mean. (He probably thinks I'm stupid for saying that)
- Planning what to say next
- Filtering so that you only hear certain topics and not critical remarks
- Judging a statement before it is completed
- Daydreaming
- Remembering your own experiences
- Drafting your advice before they have finished
- Considering every conversation an intellectual debate which you must win!
- Changing the topic or laughing it off when it gets tough
- Placating the speaker by automatically agreeing

Because of these barriers we typically retain for a few minutes only 65% of what is said to us.

A good listener will use only clarifying questions when things aren't clear.
A good listener will constantly check what they hear against their knowledge of the situation and human nature:- How is the speaker thinking or feeling about himself? How does he/she see the world?

A good listener looks the speaker in the eye, nods and leans towards the speaker, encourages them with smiles and murmurs. Carefully avoids distractions, remains earnestly interested in understanding the talker and freely shares their own experiences when it is their turn to talk.

Here are some unhelpful reactions

- 'Others are worse off'
- 'Tell me about it!'
- 'It isn't that bad'
- 'Tomorrow is another day'
- 'At least you still have 2 children'

Here are some helpful questions to ask after a pastoral visit.

- How attentive was I?
- What internal and external distractions kept me from listening?
- Did I allow the focus to shift to me?
- Was I forming in my mind what I would say before the speaker had finished?
- What feelings did they express?
- What feelings do I now identify in myself?
- Who did most of the talking?

As you go around this week, begin to notice how you and others around you listen. Practice in the shop, at the office, with your family.

Session 3 Making Contact

Aim: To explore initial contacts and difficult questions when visiting

Invite feedback on the Listening task from last time

It is likely that everyone has been irritated at some time by a 'cold caller'; usually trying to sell you something.

Share 'cold call' experiences within the group. What did you notice about them?

- the warmth of the voice of the caller
- the personal nature of the call - e.g. your name used
- offering of a product or free sample

Reflecting back on this discussion discuss pointers for making a good visit

Notes of points to bring out in discussion

To be welcomed in to a home is a privilege

Whom do you like in your home?

Open and friendly

know when it's convenient to come

Don't overstay

Share interesting news together

Know they would help out

Relax and be yourself

We go in name of church

Not alone if prayed out

Introduce from church

Best time

Elderly may like a winter visit but not open door to unexpected visitor

Not at bedtime

Eastenders!

Time – 20 minutes Your time watch the other person for clues

Notebook of important dates. Card phone after hosp appt. Build up friendship and guide to prayer but ask first

Parish mag, pews news. Tape of service

Seeking their opinions on church issues. Asking them to pray – valued part of community.

Confidence

Criticism – loyalty – encourage to address their concern to the appropriate person

Part of team share responsibility

Defend your own time

As a visitor you might have to 'cold call'. Brainstorm some openers in these situations:

- ❖ a family making a baptism request
- ❖ a bereavement visit
- ❖ newcomers to the area
- ❖ a home communion

Most people are reticent when making a 'cold call'. The recipient is probably just as nervous! However you are the person representing Christ and the Kingdom and you are not going in your own strength.

Here are some guidelines which may help:

- Explain clearly who you are and the purpose of the visit
- Ask if it is convenient
- Take something with you to give, e.g. a parish or community magazine; cards of welcome or sorrow; a visiting card to leave if they are out.
- Invite the person to tell you something about themselves
- Comment on photographs of families or pets - without being intrusive

Which of the points above do you think is most important? Would you add any points?



Below is an outline of the different stages you should take into account when planning a visit.

1. Making sure of the details
2. The telephone call
3. On the doorstep - a prayer
4. Introduction
5. Setting out what you have come to do
6. Forming a relationship
7. Collecting information
8. Listening
9. As you leave, future dates
10. How did it go?
11. Who supports the carer
12. Reporting procedures

Difficult questions

During a visit you may find that people open up and ask significant questions or imply them during conversation.

Some questions that often crop up are:

- unanswered prayer
- the church and hypocrisy
- remarriage after divorce

What other issues may be raised?

It is important to be clear what the question is...

A child asked his Mum where he came from. She launched into 'the facts of life'. Then she asked him why he wanted to know. He replied, "Well there's someone in my class who comes from Kenya!"
...and to be honest yourself in answering.

In the group discuss how you might respond to if the above issues were raised by someone you were visiting.

Building relationships

Exercise

Without any explanation ask people to share with their neighbour the following

Favourite flavour ice cream - (give them 10 seconds) - *trivia*

The layout of their bedroom - 20 seconds - *sharing information*

Muslim - Christian relationships - 40 seconds - *opinions*

How they are feeling now - 50 seconds - *feelings*

What I like about myself - 60 seconds. - *intimacy*

At the conclusion explain that this is an example of the different levels of communication and go through the handout.

This is crucial to pastoral care. John Powell (in his book *Why am I afraid to tell you who I am?*) states that the quality of a relationship depends on the quality of communication. He identifies five levels of communication.

				Peak: Meaningful experience	1
			Feelings	2	
		Ideas and opinions	3		
	Facts / Other people	4			
Facts/ Cliche	5				

Level Five communication can be about the weather, the garden, holidays. It is a 'nodding' acquaintance. If asked 'How are you?' the level five answer would be 'Fine!'

Level Four communication is about facts and other people. The facts shared can be about the church, the news, T.V. programme, the other person's job or family.

Level Three communication is about sharing your own and the other person's ideas and opinions. This is more risky because it involves sharing more of your self. Honesty, criticism or rejection might result from sharing at this level.

Level Two communication is about sharing feelings with each other. This involves a degree of vulnerability which is not easy for some people. 'Why am I afraid to tell you who I am, because you might not like who I am.' (Socrates).

Level One is perfect communication. It involves complete openness and honesty, is usually fleeting and often without words. You just know that you have communicated at the highest possible level.

Consider the five levels of communication. Can you identify one person from your network of relationships for each level?

Read the poem '10 types of hospital visitor' by Charles Causley - discuss reactions to the poem.

Responding to difficult questions

Some possible responses to reflect on

Unanswered prayer

- ❖ Sometimes God says 'no'
- ❖ God intends us to be part of the answer to our own prayers: e.g. if we are praying for a particular person we could ring them up or visit them
- ❖ Prayers may be answered in unexpected ways that we do not recognise
- ❖ Prayer is about change in the pray-er, not changes in God
- ❖ Prayer is a mystery of God

The Church and hypocrisy

- ❖ It is a human institution, though shot through by God's Spirit
- ❖ Christians do make mistakes - the Church is made up of fallible, weak human beings Christians are on a journey / pilgrimage of faith
- ❖ Don't look at Christians, rather look at Christ
- ❖ Not all Christians agree on moral issues such as IVF, AIDS, abortion etc
- ❖ There are no easy answers in a complex world
- ❖ Doubt is an important emotion and can lead to faith

Second marriages

- ❖ The Church believes that faithful marriages are the best places for the growth of two individuals and the bringing up of children
- ❖ The Church supports faithfulness
- ❖ The Church works to support couples as they begin marriage by preparing them and by offering counselling and growth groups
- ❖ Christianity is a faith which recognises human failure and frailty and works towards forgiveness and healing
- ❖ New beginnings are possible if endings of previous relationships have been made with care, and the children are a priority
- ❖ It may be possible to marry in church after a divorce
- ❖ A civil wedding can be blessed in church

Be honest with the person

It is O.K. to say that you are unsure

Speak sensitively from your own experience

Try to find out how the issue has arisen for the questioner and what they think - this may give a clue to their level of understanding and help you to shape the right answer

TEN TYPES OF HOSPITAL VISITOR

by Charles Causley

I

The first enters wearing the neon armour
Of virtue.
Ceaselessly firing all-purpose smiles
At everyone present.
She destroys hope
In the breast of the sick,
Who realise instantly
That they are incapable of surmounting
Her ferocious goodwill.

Such courage she displays
in the face of human disaster!

Fortunately, she does not stay long,
After a speedy trip round the ward
In the manner of a nineteen-thirties destroyer
Showing the flat in the Mediterranean,
She returns home for a week
-With luck, longer-
Scorched by the heat of her own worthiness.

II

The second appears, a melancholy splurge
Of theological colours;
Taps heavily about like a healthy vulture
Distributing deep-frozen hope.

The patients gaze at him cautiously.
Most of them, as yet uncertain of the realities
Of heaven, hell-fire, or eternal emptiness
Play for safety
By accepting his attentions
With just-concealed apathy,
Except one old man, who cries
With newly sharpened hatred,
"Shove off! Shove off!
"Shove...shove...shove...shove
Off"
"Just you
shove!"

III

The third skilfully deflates his weakly smiling
victim
By telling him
How the lobelias are doing,
How many kittens the cat had,
How the slate came off the scullery roof,
And how no one has visited the patient for a
fortnight
Because everybody
Had colds and feared to bring the jumpy germ
Into hospital.

The patient's eyes
Ice over.
He is uninterested
In lobelias, the cat, the slate, the germ.
Flat on his back, drip-fed, his face
The shade of a newly dug-up Pharaoh,
Wearing his skeleton outside his skin,
Yet his wits as bright as a lighted candle,
He is concerned only with the here, and now,
And requires to speak
Of nothing but his present predicament.

It is not permitted.

IV

The fourth attempts to cheer
His aged mother with light jokes menacing as
shell-splinters.
"They'll soon have you jumping round
Like a gazelle" he says.
"Playing in the football team",
Quite undeterred by the sight of kilos
Of plaster, chains, lifting gear,
A pair of lethally designed crutches,
"You'll be leap-frogging soon", he says
"Swimming ten lengths of the baths."
At these unlikely prophecies
The old lady stares fearfully
At her sick, sick offspring
Thinking he has lost his reason-

Which, alas, seems to be the case.

V

The fifth, a giant from the fields
With suit smelling of milk and hay,
Shifts uneasily from one bullock foot
To the other, as though to avoid
Settling permanently in the antiseptic
landscape.
Occasionally he looses a scared glance
Sideways, as though fearful of what intimacy
He may blunder on, or that the walls
Might suddenly close in on him.

He carries flowers, held lightly in fingers
The size and shape of plantains,
Tenderly kisses his wife's cheek
-The brush of a child's lips-
Then balances, motionless, for thirty minutes
on the thin chair.

At the end of visiting time

He emerges breathless,
Blinking with relief, into the safe light.

He does not appear to notice
The dusk.

VI

The sixth visitor says little,
Breathes reassurance,
Smiles securely.
Carries no black passport of grapes
And visa of chocolate.
Has a clutch
Of clean washing.
Unobtrusively stows it
In the locker; searches out more.
Talks quietly to the Sister
Out of sight, out of earshot, of the patient.
Arrives punctually as a tide.
Does not stay a whole hour.
Even when she has gone
The patient seems to sense her there:
An upholding
Presence.

VII

The seventh visitor
Smells of bar-room after-shave.
Often finds his friend
Sound asleep: whether real or feigned
Is never determined.

He does not mind; prowls the ward
In search of second-class, lost-face patients
With no visitors
And who are pretending to doze
Or read paperbacks.

He probes relentlessly the nature
Of each complaint, and is swift with such
Dilutions of confidence, as,
"Ah! You'll be worse
Before you're better."

Five minutes before the bell punctuates
Visiting time, his friend opens an alarm-clock
eye.
The visitor checks his watch.
Market day. The Duck and Pheasant will still
be open.
Courage must be refuelled.

VIII

The eight visitor looks infinitely
More decayed, ill and infirm than any patient
His face is an expensive grey.

He peers about with antediluvian eyes
As though from the other end
Of time.

He appears to have risen from the grave
To make his appearance.
There is a whiff of white flowers about him;
The crumpled look of a slightly used shroud.
Slowly he passes the patient. A bag of bullet-
proof Home-made biscuits,
A strong death-dealing cake-
"To have with your tea",
Or a bowl of fruit so weighty
It threatens to break
His glass fingers.

The patient, encouraged beyond measure,
Thanks him with enthusiasm, not for
The oranges, the biscuits, the cake,
But for the healing sight
Of someone patently worse
Than himself. He rounds the crisis-corner;
Begins a recovery.

IX

The ninth visitor is life

X

The tenth visitor
Is not usually named

Session 4 Dealing with loss

Aim: To examine bereavement and pastoral responses to it

Introduction

Remember that loss refers to any significant event when you have gone through a grieving process, e.g. someone's death, redundancy, child leaving home. Facing our own losses - being able to look openly and honestly at our own losses - can help us enter into other people's experience of grief and loss. The Chinese character for loss has two symbols, one means danger, the other opportunity.

In pairs, describe a personal experience of loss of an object.
Write up these feelings on a chart.
In pairs again share experiences of more personal loss.
Write up these feelings on a chart.
Notice any similarities and differences.

Stages of grief

1. Numbness and shock
2. Denial
3. Yearning
4. Searching
5. Guilt
6. Depression
7. Acceptance
8. Reinvestment

In plenary group discuss how these stages might be recognised, either by what people say or how they might behave.

Grief can last for 2-5 years. People will go in and out of each stage.

Everyone experiences bereavement in different ways, but we all need the caring love and encouragement of other people.

In pairs

list five things that would help a bereaved friend.
list five things that would not help your friend.
Share thoughts in plenary session and refer to handout 'Guidelines for stages of grief'.

The Visitor's role

Read out the scenario in the handout

Discuss the following areas of pastoral care in relation to the visit

1. Accountability as a representative of the church
2. Communication
3. Confidentiality

Conclusion

Most people who have experienced grief come to a point where they can reach out to help others in their losses. They have grown from their experience and have much to offer in return. These 'wounded healers' have learnt that 'Love is not changed by death and nothing is lost and all in the end is Harvest'. (Edith Sitwell). We need to listen to people's stories. They need to be able to keep telling them in order to make sense of what is happening to them.

Even when we feel we have nothing to offer, we must remember that simply by being with someone we can help them.

Read passage on handout from *The Go-Between God* by John V Taylor p 243



For the Leader

Some extra thoughts on Caring for the Bereaved

Have courage and confidence that you can help

Never underestimate your ability to help

The smallest gesture of concern and care are of infinite value.

Listen, share and hang in there longer than others.

Grief is a healing process.

- Don't be afraid of remaining in silence
- Don't be embarrassed by tears
- Listen with attention
- Accept thoughts and feelings
- There are no 'ought' to's
- Be sensitive at anniversaries
- Remember church family celebrations
- Encourage conversations about the dead person
- Remember all the different sorts of bereavement

The Visitors Role

Joan is the parish visitor for St Saviour's Church. She has been given the name of a newly widowed lady to go and visit three weeks after the funeral of her husband. As Joan approaches the front door she observes that the garden has been neglected for a while. The front door is opened by Shirley Smith who looks unkempt and weary.

"Good afternoon," says Joan briskly, "I am Joan Jordon from St Saviour's Church. The Vicar gave me your name and said that you might be in need of a visitor. Can I come in?" Shirley Smith seems a little taken aback but eventually invites Joan in for a cup of tea.

"What can I do for you?" asks Shirley. "It is what I can do for you replies Joan, "It is about three weeks since your husband died and I expect you are beginning to feel some quite alarming emotions - you are possibly feeling guilty and I suspect you have moments of anger."

"Oh not at all," says the widow quietly, "I still feel a little numb." "Oh you should be over that by now! And you really should be getting back into the domestic run of things. I couldn't help noticing that you have not tended the garden for a while and you should be looking after your appearance again by now."

Shirley gets up and makes it quite clear that she is showing Joan the door. "Well, thank you for coming but I can manage much better without people interfering," she says quietly.

"Well, well," muses Joan, "she really is not coping. I must talk to the vicar about her. Perhaps I should warn her GP that she is in a very delicate state of mind. I wonder whether my friend Maud has any views on the subject."

GUIDELINES FOR STAGES OF GRIEF

Shock

Mention the name of the deceased assertively in conversation. Do not be afraid to say directly the words 'dead' and 'has died' in association with the name of the deceased. Avoid euphemisms. (e.g. *'passed away'* and *'gone to sleep.'*)

Denial

Encourage the bereaved to talk about what has happened. (e.g. *'Tell me how it happened.'*) It may be helpful to encourage the bereaved to visit the body of the deceased in the chapel of rest at the funeral parlour.

Anger

This may be directed at the pastor as the person associated with the crisis. Illogical questions can be asked in anger. (e.g. *'Why me?'* *'Why didn't the doctor do more?'*) It is best not to try and find any answers and it is important to discourage the bereaved from entering into rash and hurried action such as litigation against the doctor..

Guilt

As with anger, the pastor may be required to do little more than to listen sensitively while the bereaved works out the answers (or that there are no answers) by talking out loud. Reassure the bereaved that such a reaction is not abnormal but legitimate at such a time.

Sadness

It is important to allow the bereaved to express these feelings and to know that they are not 'letting the side down' but that they are facing up to the reality of living with loss and that sadness is 'allowed.'

Crying

It may be appropriate for the pastor to 'give permission' for the bereaved to cry. Many English people feel that crying in front of others is a sign of weakness. Encourage the bereaved that this is a very normal reaction - and that it can be healing to let go.

Emptiness

There may be moments when the pastor can do little more than be a silent presence. Much of ministry relies on the minister simply 'being there.'

Loss of control

Reassure the bereaved that any sort of reaction to the death of a loved one is normal. Sudden outbursts on the bus or frequently bursting into tears at inappropriate moments are not signs that the person is going demented.

Apathy

This too is a normal reaction. Do not allow the bereaved to become anxious about 'things to be done.' Continue to explore the story of the deceased and the relationship of the bereaved to the deceased. (e.g. 'How did you meet?')

Activity

This may be a way for the bereaved to try and put their grief out of the forefront of their mind. Maintain conversations in which the existence of the deceased and the fact of his or her death is acknowledged.

Facing the loss

This may come and go in phases as do all the different stages of grief. Part of facing the loss may include some musing. (e.g. 'if only we could have...')

Acceptance

It is common for carers to back away once the bereaved seems to accept the loss. Do not be tempted to do this. The loss may have been acknowledged but there is still a void in the life of the bereaved where the loved one used to be.

Visiting the Bereaved

- ❖ The minister will be in touch with the family and will no doubt inform you of any special needs.
- ❖ If the bereaved person is facing bereavement alone then the visitor will want to help in any practical way that suggests itself. If the family or visitors are present, then a short visit is all that is called for initially. Listening is most important at such a time. Avoid easy comfort and religious clichés. Silent sympathy may be more helpful much of the time.
- ❖ The time after the funeral is a time of real loneliness. Call then perhaps with flowers from the church. It will often be a strange experience for the bereaved person to come to church alone. Try to help them over this period.
- ❖ It may be helpful to pray with them. Prayer is recognition of our own helplessness. But only pray if you feel it would be welcome. It should never be a formality.
- ❖ Drop in from time to time. You will find that when you have shared bereavement with someone a closer link will be formed between you. This is part of the meaning of sharing one another's burdens.
- ❖ Don't be afraid to talk about the person who is dead - this is usually welcomed by the one who is bereaved. And don't avoid contact with the recently bereaved person: just 'being there' when we are needed is all-important.

A colleague has recently described to me an occasion when a West Indian woman in a London flat was told of her husband's death in a street accident. The shock of grief stunned her like a blow, she sank into a corner of the sofa and sat there rigid and unhearing. For a long time her terrible tranced look continued to embarrass the family, friends and officials who came and went.

Then the schoolteacher of one of her children, an Englishwoman called by and, seeing how things were, went and sat beside her. Without a word she threw an arm around the tight shoulders, clasping them with her full strength. The white cheek was thrust hard against the brown. Then as the unrelenting pain seeped through to her, the newcomer's tears began to flow, falling on their two hands linked in the woman's lap.

For a long time that is all that was happening. And then at last the West Indian woman started to sob. Still not a word was spoken and after a little while the visitor got up and went, leaving her contribution to help the family meet its immediate needs.

That is the embrace of God, his kiss of life. That is the embrace of his mission, and of our intercession. And the Holy Spirit is the force in the straining muscles of an arm, the film of sweat between pressed cheeks, the mingled wetness on the backs of clasped hands. He is as close and as unobtrusive as that, and as irresistible strong.

(from *The Go-Between God* by John V Taylor)

Session 5 Getting Organised

Aim:- To understand confidentiality and explore ideas for organising pastoral care

Contract, Confidentiality, Collaboration

Talk through the handout the Three C's, stressing the importance of confidentiality.

Organising Pastoral Care

- Discuss why there is a need for structure in pastoral care.

Research tells us that people are attracted to the Church, not because they are convicted of sin, but because they experience hospitality, a place of welcome and fellowship.

Care of the individual, because each is created in God's image and loved by God, is the heart of Pastoral Care.

Split into small groups to discuss the following questions. If possible get each group to look at one of the questions and then come back and discuss in plenary.

Consider these questions in relation to your parish.

Who undertakes Pastoral care?

- Clergy alone
- Or groups (geographically or specifically)
- All purpose team
- Every Church member

Who receives Pastoral Care?

- Congregation members
- The local community
- People who are sick and in trouble
- Everyone

What is the purpose of Pastoral care?

- Who decides? How?

What if anything is distinctive about Pastoral Care?

- What is the relationship between Pastoral Care and other types of care

Practicalities – discuss as a whole group

Organisation

Who organises visits?

Who keeps a list of people needing visits?

Confidentiality

What information is kept? How is it used?

Situations to pass on

Are there any such situations?

How do we know when we are out of our depth and the situation needs specialist or professional help.

Identity

Do Pastoral visitors wear a visible badge of office, carry an identity card.

Are names and contact details advertised.

Responsibility

To whom are Pastoral Visitors responsible

Support and supervision

Who does this for the team and how.

Do you meet as a group or as individuals to share experience and develop skills.

The following appendix may be useful if you have time in session 3, 4 or 5

Appendix 1

Prayer

- Prayer is the glue which holds our faith, life, practice and ministry together
- Avoid prayer as the quick fix
- Prayer is a focus for commitment to change
- Prayer is a source of creative insight

Questions

- In groups share occasions when someone has prayed with you, how you felt about it and whether it was helpful.
- How might you share prayer on a pastoral visit?
- How can you fit praying for everyone into our busy lives?
- What sort of prayer might be inappropriate or manipulative?
- What helps or hinders your prayers for others?

Prayers before you visit

- Allow time for prayer before visiting
- Pray for yourself and those you are to visit
- Collect up simple prayers for use

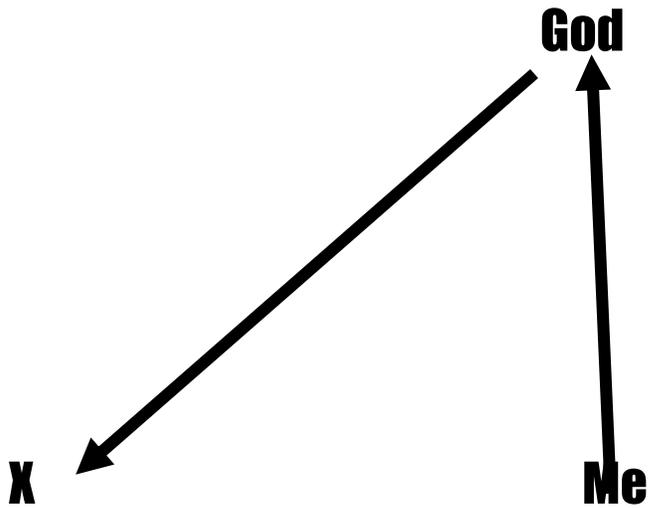
Prayers with people

- Don't have a fixed rule - be sensitive and open to the Spirit
- Pray brief prayers
- Use a written prayer if you feel more comfortable with that.
- If you use informal prayer keep it short. Focus on what you have shared together. Pray for the person's loved ones and concerns. Offer thanks for their joys

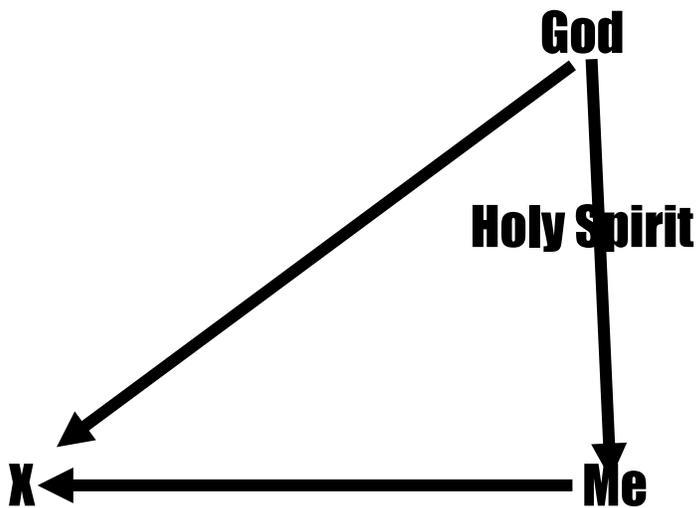
Prayers after a visit

- By yourself later. Remember before God the conversation, the feelings and concerns
- In a prayer meeting. Pray for the people you visit and their needs.
Remember confidentiality
- Ask for them to be remembered in intercessory prayer in the church.
Do ask permission first

Triangle of Prayer



Me trying to make *God* do the right thing?



Open to *God*.

Holy Spirit is able to flow through my word and action

We are open to be his channel

Caring Ministry**Sarah A. Butler****Continuum**

This is based on a training programme developed in Denver, Colorado. Although American it has lots of useful dialogues and each chapter ends with a spiritual application. The approach is different to many other programmes in that it is based on a contemplative approach to pastoral care. It explores links between the 'centering prayer' and caring. In developing our ability to listen to God, we are better able to listen to others.

God's Touch**Bruce G. Epperly****Westminster John Knox Press**

Another American approach to the reading of the gospel narratives. Through it the author reveals the centrality of whole person healing within Jesus' mission as teacher and social reformer.

Other resources**Beta Course***Being Christian**Becoming whole**Building community*

Similar format to Alpha and based on building relationships.

www.beta-course.org

Promoting Mental Health – A resource for spiritual and pastoral care.

It provides 'information on mental health and its promotion and protection within congregations and the wider community'.

85 pages but it has useful resources and contacts.

www.mentality.org.uk/ParishResource.pdf

**Prepared to Care
House**

Pastoral Care and Visiting.

Excellent 9 week course for use in the parish. In A4 ring binder. Some of which we have used in Module 1

Methodist Publishing

Course for Carers

Dealing with trauma**Gordon Wilson**

Guidelines for clergy and pastoral workers in understanding and caring for people with traumatic experiences. As well as useful reading and contacts it has information on the process of dealing with sudden death.

Available from Methodist Church web site

www.methodist.org.uk/pastoral

Bible Readings for special times BRF 1.99

Each booklet offers 24 undated reflections linking scripture to real life experiences, especially for those times when we want to hear God's word but may not know where to start looking.

e.g. Bereavement; Marriage; Ill Health; Retirement

THE THREE C's

Contract

If you are caring for someone, particularly in an 'official' way, for example as a visitor for the church, it is important for you and that person to understand what you can and can't do. If you are able to pop in to see a family or housebound person to chat once a month for half-an-hour, that may be accepted as a friendly act.

However, the person may need a good deal more and expect you do it. Maybe weekly shopping help is wanted, or a baby-sitting service. If you are not able to help in that way, it is better to say so and make clear what you are 'offering' without being offensive, rather than get into a situation you resent and have to withdraw from later.

It is also equally important for the person to have a chance to say whether your interest and friendship are welcome or not. If you are asked to be a pastoral visitor to a family new to the church or area, make sure they understand about the nature of your visit. You might say, at the appropriate moment, 'Our church likes to keep in contact through our monthly newsletter, I have been asked to deliver yours. Do you mind if I call in with it?' If they do not want this kind of attention it gives them an opportunity to say so, and that should be respected.

Confidentiality

If someone shares something personal with you, it is often a sign that they trust you. You have their confidence, and to trust a listener may be part of that person's growth towards wholeness. This is a precious gift however and one that can easily be destroyed. Conversations which repeat the family problem or painful memory to another may find their way back to the original sharer and undermine your relationship. Even if that does not happen it may affect the way a person is thought of by others and thus harm their integrity. You guard the person's dignity in the way you handle anything shared with you. There are two exceptions to this; the first is if they specifically give permission to share something they have said with another person. Secondly, if the person says something that leads you to think they or another person are at risk you have a duty of care to pass this on to

the appropriate person or agency. See the latest church policies on 'Safeguarding Children' and Safeguarding Vulnerable Adults.

Collaboration

Pastoral care is one of those rare areas of life where everybody needs it and all are able to give it at some time.

It is sometimes assumed that pastoral care works on a pyramid model. That is, the ordained minister cares for visitors, or house-group leaders, and they in turn care for those who are assigned to them. But who cares for the ordained minister? The Bishop?! The Archdeacon?! And who cares for them? To think in this way is to assume that someone somewhere at the top of the pyramid can cope without care. Of course this is not so and it can be a very destructive idea.

Pastoral care is better understood as a circle or as a community in which care is exercised by all and received by all. The minister, the house-group leader and even the archbishop sometimes need the care of someone else. The Church community consists of colleagues doing the work of caring together and for each other. Make sure that those in 'official' positions are included.

You may occasionally feel the person you are caring for needs the experience or skills of someone else, maybe even the specialised help of some other agency, be that meals on wheels, social services or professional counseling, such as the Samaritans. This is part of collaboration too. Needs are often met by the combination of resources.

It is valuable to have a list of all such local agencies. This may be available from Social Services, Volunteer Bureau, or Citizens Advice Bureau. If not, one valuable task a church group could do is to compile one.

Care and Share

Evaluation Sheet

Why did I join the course? Have my original hopes for the course been realised?

What have I most valued on the course?

What has stimulated me?

Challenged me?

Been practically helpful?

Any other comments.



A five week course to look at the basics of pastoral care.
The aim is to enable you to begin to develop skills in confidence
and understanding and listening.

- ❖ What is Pastoral care?
- ❖ Visiting and Listening
 - ❖ Making Contact
 - ❖ Dealing with loss
 - ❖ Getting organised

As a participant on the course I agree to:-

- ✚ Commit to the course
- ✚ Be responsible to keep to times
- ✚ Listen to God and be open to all He is seeking to do through the course
- ✚ Contribute to a safe and supportive learning environment
- ✚ Respect others and not judge their views
- ✚ Listen to others
- ✚ Actively participate and interact
- ✚ Maintain confidentiality of other's personal stories - either during or after the course
- ✚ Listen to self - thoughts, feelings and reactions
- ✚ Be open to change and personal growth
- ✚ Be willing to offer challenge and support as appropriate

What is Pastoral Care?

Aim: To explore what is meant by 'Pastoral Care'.

Pastoral care is in essence surprisingly simple. It has one fundamental aim:- to help people know love, both to receive and to give.

Pastoral care is at the centre of the church's mission and ministry. We love because God first loved us. (1 John 4:19). It is our response to God's unconditional love. And people are interesting, have relationships and all have a story to tell.

We follow Jesus' command to 'love one another as I have loved you'.

A good deal of pastoral care is awareness of another's life and concerns.

- ❖ a friendly interest in someone's children or aged relative is a simple signal that you are interested in them and what makes up their life.
- ❖ recognising that a bereaved person may find an anniversary or birthday date particularly difficult and phoning may convey much care.
- ❖ asking about a person's interest in 'jazz' and listening to their enthusiasm may be as much part of caring as listening to their troubles and counselling them.

Understanding one's own experience is central to caring for others.

- ❖ Remembering how we felt when we were teenagers, when someone we loved died or left us, when our children cried at night, when we failed an exam, may be a point of contact with someone at a similar moment in their lives and may help us empathise.

These are some of the pastoral care questions.

How do we nurture the children and young people?

How do we effectively care for single people, young and old?

How do we support families?

How do we care for those going through times of difficulty and crisis?

How do we care for those in leadership roles?

How do we care for those who no longer attend our church?

We need to encourage and be encouraged to fulfil our caring ministry.

God's gift of caring involves the ability to:-

listen

accept

be available

be patient

keep confidences

learn from one's own experiences

be sensitive to another's experiences

be non-judgemental

be able to offer words of hope and encouragement

Remember we are not expected to share in Christ's ministry in our own strength but always we go with the power of his Spirit.

Look at handout - **Definitions of Pastoral Care** - Which definition helps you?

Try and write your own.

Definitions of Pastoral Care

- ♣ 'Helping acts, done by representative Christian persons, directed towards the healing, sustaining, guiding and reconciling of troubled persons whose troubles arise in the context of ultimate meanings and concerns'. (Clebsch and Jackle 1983)
- ♣ Pastoral care is that activity, undertaken especially by representative Christian persons, directed towards the elimination and relief of sin and sorrow and the presentation to all people complete in Christ to God. (S Pattinson, *A Critique of Pastoral Care* 1988)
- ♣ Pastoral Care is considered to be any form of personal ministry to individuals and to family and community relationships by representative religious persons (ordained and lay) and by their communities of faith, who understand and guide their caring efforts out of a theological perspective rooted in the tradition of faith. (R. Hunter et al, *Dictionary of Pastoral Care and Counselling*, 1990)
- ♣ Pastoral care aims to help people to know love, both as something to be received and as something to give. The motivation for pastoral care in Christians is to reflect God's unconditional love to others. (Frank Wright, *Pastoral care Revisited* 1996)
- ♣ The purpose of pastoral care is to assist men and women, boys and girls to live as disciples of Jesus. The purpose is sought by trying to achieve the four aims of pastoral care:
 5. to encourage people to make their own sense of their experience;
 6. to disclose Christian meaning in life;
 7. to stimulate men and women to engage in their own conversation with the Christian tradition;
 8. to encourage holiness.(David Deeks, *Pastoral Theology - an Inquiry* 1987)

Questions of care

Measures of quality and effectiveness in Christian caring should not be a question of 'what have I done for this person?' More helpful questions that need to be asked include:

- What is the quality of relationship that we share?
- Who in our church, neighbourhood and community feels uncared for or excluded?
- Have I really listened to this person and allowed their agenda to be more important than my own? What is my agenda if I have one?
- How much is my caring role an expression of my Christian discipleship?
- What makes a visit/pastoral encounter on behalf of the church any different from that offered by a friend or another caring agency?
- How are the stories and needs of people beyond our church members heard and responded to?
- Do we create dependence and exercise control through the care we offer, or are we part of God's plan to liberate people?
- If our pastoral visits highlight a need for social action, (e.g. poor housing, lack of play resources) how is this fed back to the church? How does the church become active in supporting social change?

Visiting and Listening

Aim: To explore the nature of visiting

Guidelines for visiting an institution

- Be sensitive to staff and other residents
- Wear a form of identification
- Accept the rules of the institution. e.g. fill in the signing-in-book
- Identify the staff member in charge and introduce yourself
- Ask if a visit is convenient - a pre-visit phone call may help
- Work with other professionals: e.g. in hospital, always give way to medical attention
- If possible create a private place for the person you are visiting. There may be a quiet room you can use
- Acknowledge other patients or residents, particularly those who appear lonely
- Affirm the hard worked staff

Guidelines for general visiting

- Be clear why you are visiting
- Be a good listener
- Carry some form of identification
- If visiting an elderly person, check that you are expected
- Don't visit at a busy or inconvenient time
- Don't outstay your welcome

Bible Study

Look at the story of the encounter of Jesus and Zaccheus in Luke 19:1-10.

Discuss

- What is said?
- What is unsaid yet communicated by people's actions in the encounter?
- How did Jesus listen to Zacchaeus with his ears, and his inner ear, and how did he respond?
- What did Jesus' visit initiate in Zacchaeus?

Luke 19

Zacchaeus the Tax Collector

¹Jesus entered Jericho and was passing through. ²A man was there by the name of Zacchaeus; he was a chief tax collector and was wealthy. ³He wanted to see who Jesus was, but being a short man he could not, because of the crowd. ⁴So he ran ahead and climbed a sycamore-fig tree to see him, since Jesus was coming that way.

⁵When Jesus reached the spot, he looked up and said to him, "Zacchaeus, come down immediately. I must stay at your house today." ⁶So he came down at once and welcomed him gladly.

⁷All the people saw this and began to mutter, "He has gone to be the guest of a 'sinner.' "

⁸But Zacchaeus stood up and said to the Lord, "Look, Lord! Here and now I give half of my possessions to the poor, and if I have cheated anybody out of anything, I will pay back four times the amount."

⁹Jesus said to him, "Today salvation has come to this house, because this man, too, is a son of Abraham. ¹⁰For the Son of Man came to seek and to save what was lost."

Listening skills

'We were given two ears but only one mouth.

This is because God knew that listening was twice as hard as talking'.

We need to practise and acquire skills to be good listeners, because we cannot just have information thrown at us it has to be received and understood by an active listener.

Good listeners listen with their faces.

Picture the child coming home from school, bursting to tell Dad what has happened that day. Unfortunately, Dad has the paper in front of his face and even when he lowers the paper, it is visibly apparent that he is not really listening.

We spend much of our modern lives trying to tune out excess information. We have to tune our faces to be reflectors rather than deflectors.

Look at the person, so that your eyes can 'listen' as well as your ears. You need to be able to pick up non-verbal signals. Appropriate eye contact helps to complete the communication circuit between speaker and listener.

React to the speaker by using your face to send out appropriate non-verbal responses. Your face must move and give a range of emotions that show you are following the speaker.

A good listener will stop talking and use 'receptive' language instead. Use *'I see; go on'*; Sometimes called empathic responses - *'you sound angry; it feels as if....'* Words that follow the speakers train of thought, to help you react to what they are saying and not to the person. You can then move to asking questions, instead of giving your opinion.

Silence is important and an effective part of listening.

Concentrate on what the speaker is saying. You are not listening if your mind is judging or searching for answers. Even if you know for sure they are wrong, your task is to listen.

Things to remember

- If you are really listening intently, you should feel tired when the speaker has finished. Listening is an active and not a passive task.
- When you find yourself drifting away during a session, change your body position and concentrate on one of the above skills. Once one of the skills is being used, the other active skills will come into play as well.

Barriers to careful listening

- Constantly comparing yourself to the speaker. (I've been there)
- Trying to guess what they really mean. (He probably thinks I'm stupid for saying that)
- Planning what to say next
- Filtering so that you only hear certain topics and not critical remarks
- Judging a statement before it is completed
- Daydreaming
- Remembering your own experiences
- Drafting your advice before they have finished
- Considering every conversation an intellectual debate which you must win!
- Changing the topic or laughing it off when it gets tough
- Placating the speaker by automatically agreeing

Because of these barriers we typically retain for a few minutes only 65% of what is said to us.

A good listener will use only clarifying questions when things aren't clear.

A good listener will constantly check what they hear against their knowledge of the situation and human nature:- How is the speaker thinking or feeling about himself? How does he/she see the world?

A good listener looks the speaker in the eye, nods and leans towards the speaker, encourages them with smiles and murmurs. Carefully avoids distractions, remains earnestly interested in understanding the talker and freely shares their own experiences when it is their turn to talk.

Here are some helpful questions to ask after a pastoral visit.

- How attentive was I?
- What internal and external distractions kept me from listening?
- Did I allow the focus to shift to me?
- Was I forming in my mind what I would say before the speaker had finished?
- What feelings did they express?
- What feelings do I now identify in myself?
- Who did most of the talking?

As you go around this week, begin to notice how you and others around you listen. Practice in the shop, at the office, with your family.

Making Contact

Aim: To explore initial contacts and difficult questions when visiting

It is likely that everyone has been irritated at some time by a 'cold caller'; usually trying to sell you something.

As a visitor you might have to 'cold call'.

Think about some of the 'openers' you might use in these situations

- ❖ a family making a baptism request
- ❖ a bereavement visit
- ❖ newcomers to the area
- ❖ a home communion

Most people are reticent when making a 'cold call'. The recipient is probably just as nervous! However you are the person representing Christ and the Kingdom and you are not going in your own strength.

Here are some guidelines which may help:

- Explain clearly who you are and the purpose of the visit
- Ask if it is convenient
- Take something with you to give, e.g. a parish or community magazine; cards of welcome or sorrow; a visiting card to leave if they are out.
- Invite the person to tell you something about themselves
- Comment on photographs of families or pets - without being intrusive

Which of the points above do you think is most important? Would you add any points?



Below is an outline of the different stages you should take into account when planning a visit.

13. Making sure of the details
14. A telephone call
15. On the doorstep - a prayer
16. Introduction
17. Setting out what you have come to do
18. Forming a relationship
19. Collecting information
20. Listening
21. As you leave, future dates
22. How did it go?
23. Who supports the carer
24. Reporting procedures

Difficult questions

During a visit you may find that people open up and ask significant questions or imply them during conversation.

Some questions that often crop up are:

- unanswered prayer
- the church and hypocrisy
- remarriage after divorce

What other issues may be raised?

It is important to be clear what the question is...

- A child asked his Mum where he came from. She launched into 'the facts of life'. Then she asked him why he wanted to know. He replied, "Well there's someone in my class who comes from Kenya"!

...and to be honest yourself in answering.

Building relationships

This is crucial to pastoral care. John Powell (in his book *Why am I afraid to tell you who I am?*) states that the quality of a relationship depends on the quality of communication. He identifies five levels of communication.

				Peak:
				Meaningful
				experience
			Feelings	2
		Ideas and	3	
		opinions		
	Facts /			
	Other	4		
	people			
Facts/	5			
Cliche				

Level Five communication can be about the weather, the garden, holidays. It is a 'nodding' acquaintance. If asked 'How are you?' the level five answer would be 'Fine'!

Level Four communication is about facts and other people. The facts shared can be about the church, the news, T.V. programme, the other person's job or family.

Level Three communication is about sharing your own and the other person's ideas and opinions. This is more risky because it involves sharing more of your self. Honesty, criticism or rejection might result from sharing at this level.

Level Two communication is about sharing feelings with each other. This involves a degree of vulnerability which is not easy for some people. 'Why am I afraid to tell you who I am, because you might not like who I am.' (Socrates).

Level One is perfect communication. It involves complete openness and honesty, is usually fleeting and often without words. You just know that you have communicated at the highest possible level.

Consider the five levels of communication. Can you identify one person from your network of relationships for each level?

Responding to difficult questions

Some possible responses to reflect on

Unanswered prayer

- ❖ Sometimes God says 'no'
- ❖ God intends us to be part of the answer to our own prayers: e.g. if we are praying for a particular person we could ring them up or visit them
- ❖ Prayers may be answered in unexpected ways that we do not recognise
- ❖ Prayer is about change in the pray-er, not changes in God
- ❖ Prayer is a mystery of God

The Church and hypocrisy

- ❖ It is a human institution, though shot through by God's Spirit
- ❖ Christians do make mistakes - the Church is made up of fallible, weak human beings Christians are on a journey / pilgrimage of faith
- ❖ Don't look at Christians, rather look at Christ
- ❖ Not all Christians agree on moral issues such as IVF, AIDS, abortion etc
- ❖ There are no easy answers in a complex world
- ❖ Doubt is an important emotion and can lead to faith

Second marriages

- ❖ The Church believes that faithful marriages are the best places for the growth of two individuals and the bringing up of children
- ❖ The Church supports faithfulness
- ❖ The Church works to support couples as they begin marriage by preparing them and by offering counselling and growth groups
- ❖ Christianity is a faith which recognises human failure and frailty and works towards forgiveness and healing
- ❖ New beginnings are possible if endings of previous relationships have been made with care, and the children are a priority
- ❖ It may be possible to marry in church after a divorce
- ❖ A civil wedding can be blessed in church

Be honest with the person

It is O.K. to say that you are unsure

Speak sensitively from your own experience

Try to find out how the issue has arisen for the questioner and what they think - this may give a clue to their level of understanding and help you to shape the right answer

TEN TYPES OF HOSPITAL VISITOR

by Charles Causley

I

The first enters wearing the neon armour
Of virtue.
Ceaselessly firing all-purpose smiles
At everyone present.
She destroys hope
In the breast of the sick,
Who realise instantly
That they are incapable of surmounting
Her ferocious goodwill.

Such courage she displays
in the face of human disaster!

Fortunately, she does not stay long,
After a speedy trip round the ward
In the manner of a nineteen-thirties destroyer
Showing the flat in the Mediterranean,
She returns home for a week
-With luck, longer-
Scorched by the heat of her own worthiness.

II

The second appears, a melancholy splurge
Of theological colours;
Taps heavily about like a healthy vulture
Distributing deep-frozen hope.

The patients gaze at him cautiously.
Most of them, as yet uncertain of the realities
Of heaven, hell-fire, or eternal emptiness
Play for safety
By accepting his attentions
With just-concealed apathy,
Except one old man, who cries
With newly sharpened hatred,
"Shove off! Shove off!
"Shove...shove...shove...shove
Off"
"Just you
shove!"

III

The third skilfully deflates his weakly smiling
victim
By telling him
How the lobelias are doing,
How many kittens the cat had,
How the slate came off the scullery roof,
And how no one has visited the patient for a
fortnight
Because everybody

Had colds and feared to bring the jumpy germ
Into hospital.

The patient's eyes
Ice over.
He is uninterested
In lobelias, the cat, the slate, the germ.
Flat on his back, drip-fed, his face
The shade of a newly dug-up Pharaoh,
Wearing his skeleton outside his skin,
Yet his wits as bright as a lighted candle,
He is concerned only with the here, and now,
And requires to speak
Of nothing but his present predicament.

It is not permitted.

IV

The fourth attempts to cheer
His aged mother with light jokes menacing as
shell-splinters.
"They'll soon have you jumping round
Like a gazelle" he says.
"Playing in the football team",
Quite undeterred by the sight of kilos
Of plaster, chains, lifting gear,
A pair of lethally designed crutches,
"You'll be leap-frogging soon", he says
"Swimming ten lengths of the baths."
At these unlikely prophecies
The old lady stares fearfully
At her sick, sick offspring
Thinking he has lost his reason-

Which, alas, seems to be the case.

V

The fifth, a giant from the fields
With suit smelling of milk and hay,
Shifts uneasily from one bullock foot
To the other, as though to avoid
Settling permanently in the antiseptic landscape.
Occasionally he looses a scared glance
Sideways, as though fearful of what intimacy
He may blunder on, or that the walls
Might suddenly close in on him.

He carries flowers, held lightly in fingers
The size and shape of plantains,
Tenderly kisses his wife's cheek
-The brush of a child's lips-

Then balances, motionless, for thirty minutes
on the thin chair.

At the end of visiting time
He emerges breathless,
Blinking with relief, into the safe light.

He does not appear to notice
The dusk.

VI

The sixth visitor says little,
Breathes reassurance,
Smiles securely.
Carries no black passport of grapes
And visa of chocolate.
Has a clutch
Of clean washing.
Unobtrusively stows it
In the locker; searches out more.
Talks quietly to the Sister
Out of sight, out of earshot, of the patient.
Arrives punctually as a tide.
Does not stay a whole hour.
Even when she has gone
The patient seems to sense her there:
An upholding
Presence.

VII

The seventh visitor
Smells of bar-room after-shave.
Often finds his friend
Sound asleep: whether real or feigned
Is never determined.

He does not mind; prowls the ward
In search of second-class, lost-face patients
With no visitors
And who are pretending to doze
Or read paperbacks.

He probes relentlessly the nature
Of each complaint, and is swift with such
Dilutions of confidence, as,
"Ah! You'll be worse
Before you're better."

Five minutes before the bell punctuates
Visiting time, his friend opens an alarm-clock
eye.
The visitor checks his watch.
Market day. The Duck and Pheasant will still be
open.
Courage must be refuelled.

VIII

The eight visitor looks infinitely
More decayed, ill and infirm than any patient
His face is an expensive grey.

He peers about with antediluvian eyes
As though from the other end
Of time.
He appears to have risen from the grave
To make his appearance.
There is a whiff of white flowers about him;
The crumpled look of a slightly used shroud.
Slowly he passes the patient. A bag of bullet-
proof Home-made biscuits,
A strong death-dealing cake-
"To have with your tea",
Or a bowl of fruit so weighty
It threatens to break
His glass fingers.

The patient, encouraged beyond measure,
Thanks him with enthusiasm, not for
The oranges, the biscuits, the cake,
But for the healing sight
Of someone patently worse
Than himself. He rounds the crisis-corner;
Begins a recovery.

IX

The ninth visitor is life

X

The tenth visitor
Is not usually named

Dealing with loss

Aim: To examine bereavement and pastoral responses to it

Introduction

Remember that loss refers to any significant event when you have gone through a grieving process, e.g. someone's death, redundancy, child leaving home. Facing our own losses - being able to look openly and honestly at our own losses - can help us enter into other people's experience of grief and loss. The Chinese character for loss has two symbols, one means danger, the other opportunity.

Stages of grief

9. Numbness and shock
10. Denial
11. Yearning
12. Searching
13. Guilt
14. Depression
15. Acceptance
16. Reinvestment

Grief can last for 2-5 years. People will go in and out of each stage. Everyone experiences bereavement in different ways, but we all need the caring love and encouragement of other people.

The Visitor's role

Read out the scenario in the handout

Discuss the following areas of pastoral care in relation to the visit

4. Accountability as a representative of the church
5. Communication
6. Confidentiality

Conclusion

Most people who have experienced grief come to a point where they can reach out to help others in their losses. They have grown from their experience and have much to offer in return. These 'wounded healers' have learnt that 'Love is not changed by death and nothing is lost and all in the end is Harvest'. (Edith Sitwell).

We need to listen to people's stories. They need to be able to keep telling them in order to make sense of what is happening to them.

Even when we feel we have nothing to offer, we must remember that simply by being with someone we can help them.

Read passage on handout from *The Go-Between God* by John V Taylor p 243



The Visitors Role

Joan is the parish visitor for St Saviour's Church. She has been given the name of a newly widowed lady to go and visit three weeks after the funeral of her husband. As Joan approaches the front door she observes that the garden has been neglected for a while. The front door is opened by Shirley Smith who looks unkempt and weary.

"Good afternoon," says Joan briskly, "I am Joan Jordon from St Saviour's Church. The Vicar gave me your name and said that you might be in need of a visitor. Can I come in?"

Shirley Smith seems a little taken aback but eventually invites Joan in for a cup of tea.

"What can I do for you?" asks Shirley. "It is what I can do for you replies Joan, "It is about three weeks since your husband died and I expect you are beginning to feel some quite alarming emotions - you are possibly feeling guilty and I suspect you have moments of anger."

"Oh not at all," says the widow quietly, "I still feel a little numb." "Oh you should be over that by now! And you really should be getting back into the domestic run of things. I couldn't help noticing that you have not tended the garden for a while and you should be looking after your appearance again by now."

Shirley gets up and makes it quite clear that she is showing Joan the door. "Well, thank you for coming but I can manage much better without people interfering," she says quietly.

"Well, well," muses Joan, "she really is not coping. I must talk to the vicar about her. Perhaps I should warn her GP that she is in a very delicate state of mind. I wonder whether my friend Maud has any views on the subject."

A colleague has recently described to me an occasion when a West Indian woman in a London flat was told of her husband's death in a street accident. The shock of grief stunned her like a blow, she sank into a corner of the sofa and sat there rigid and unhearing. For a long time her terrible tranced look continued to embarrass the family, friends and officials who came and went.

Then the schoolteacher of one of her children, an Englishwoman called by and, seeing how things were, went and sat beside her. Without a word she threw an arm around the tight shoulders, clasping them with her full strength. The white cheek was thrust hard against the brown. Then as the unrelenting pain seeped through to her, the newcomer's tears began to flow, falling on their two hands linked in the woman's lap.

For a long time that is all that was happening. And then at last the West Indian woman started to sob. Still not a word was spoken and after a little while the visitor got up and went, leaving her contribution to help the family meet its immediate needs.

That is the embrace of God, his kiss of life. That is the embrace of his mission, and of our intercession. And the Holy Spirit is the force in the straining muscles of an arm, the film of sweat between pressed cheeks, the mingled wetness on the backs of clasped hands. He is as close and as unobtrusive as that, and as irresistible strong.

(from *The Go-Between God* by John V Taylor)

GUIDELINES FOR STAGES OF GRIEF

Shock

Mention the name of the deceased assertively in conversation. Do not be afraid to say directly the words 'dead' and 'has died' in association with the name of the deceased. Avoid euphemisms. (e.g. *'passed away'* and *'gone to sleep.'*)

Denial

Encourage the bereaved to talk about what has happened. (e.g. *'Tell me how it happened.'*) It may be helpful to encourage the bereaved to visit the body of the deceased in the chapel of rest at the funeral parlour.

Anger

This may be directed at the pastor as the person associated with the crisis. Illogical questions can be asked in anger. (e.g. *'Why me?'* *'Why didn't the doctor do more?'*) It is best not to try and find any answers and it is important to discourage the bereaved from entering into rash and hurried action such as litigation against the doctor..

Guilt

As with anger, the pastor may be required to do little more than to listen sensitively while the bereaved works out the answers (or that there are no answers) by talking out loud. Reassure the bereaved that such a reaction is not abnormal but legitimate at such a time.

Sadness

It is important to allow the bereaved to express these feelings and to know that they are not 'letting the side down' but that they are facing up to the reality of living with loss and that sadness is 'allowed.'

Crying

It may be appropriate for the pastor to 'give permission' for the bereaved to cry. Many English people feel that crying in front of others is a sign of weakness. Encourage the bereaved that this is a very normal reaction - and that it can be healing to let go.

Emptiness

There may be moments when the pastor can do little more than be a silent presence. Much of ministry relies on the minister simply 'being there.'

Loss of control

Reassure the bereaved that any sort of reaction to the death of a loved one is normal. Sudden outbursts on the bus or frequently bursting into tears at inappropriate moments are not signs that the person is going demented.

Apathy

This too is a normal reaction. Do not allow the bereaved to become anxious about 'things to be done.' Continue to explore the story of the deceased and the relationship of the bereaved to the deceased. (e.g. *'How did you meet?'*)

Activity

This may be a way for the bereaved to try and put their grief out of the forefront of their mind. Maintain conversations in which the existence of the deceased and the fact of his or her death is acknowledged.

Facing the loss

This may come and go in phases as do all the different stages of grief. Part of facing the loss may include some musing. (e.g. *'if only we could have...'*)

Acceptance

It is common for carers to back away once the bereaved seems to accept the loss. Do not be tempted to do this. The loss may have been acknowledged but there is still a void in the life of the bereaved where the loved one used to be.

Visiting the Bereaved

- ❖ The minister will be in touch with the family and will no doubt inform you of any special needs.
- ❖ If the bereaved person is facing bereavement alone then the visitor will want to help in any practical way that suggests itself. If the family or visitors are present, then a short visit is all that is called for initially. Listening is most important at such a time. Avoid easy comfort and religious clichés. Silent sympathy may be more helpful much of the time.
- ❖ The time after the funeral is a time of real loneliness. Call then perhaps with flowers from the church. It will often be a strange experience for the bereaved person to come to church alone. Try to help them over this period.
- ❖ It may be helpful to pray with them. Prayer is recognition of our own helplessness. But only pray if you feel it would be welcome. It should never be a formality.
- ❖ Drop in from time to time. You will find that when you have shared bereavement with someone a closer link will be formed between you. This is part of the meaning of sharing one another's burdens.
- ❖ Don't be afraid to talk about the person who is dead - this is usually welcomed by the one who is bereaved. And don't avoid contact with the recently bereaved person: just 'being there' when we are needed is all-important.

Getting Organised

Research tells us that people are attracted to the Church, not because they are convicted of sin, but because they experience hospitality, a place of welcome and fellowship.

Care of the individual, because each is created in God's image and loved by God, is the heart of Pastoral Care.

Organising Pastoral Care

Consider these questions in relation to your parish.

Who undertakes Pastoral care?

- Clergy alone
- Or groups (geographically or specifically)
- All purpose team
- Every Church member

Who receives Pastoral Care?

- Congregation members
- The local community
- People who are sick and in trouble
- Everyone

What is the purpose of Pastoral care?

- Who decides? How?

What if anything is distinctive about Pastoral Care?

- What is the relationship between Pastoral Care and other types of care

Practicalities

Organisation

Who organises visits?

Who keeps a list of people needing visits?

Confidentiality

What information is kept? How is it used?

Situations to pass on

Are there any such situations?

How do we know when we are out of our depth and the situation needs specialist or professional help.

Identity

Do Pastoral visitors wear a visible badge of office, carry an identity card.

Are names and contact details advertised.

Responsibility

To whom are Pastoral Visitors responsible

Support and supervision

Who does this for the team and how.

Do you meet as a group or as individuals to share experience and develop skills.

Prayer

- Prayer is the glue which holds our faith, life, practice and ministry together
- Avoid prayer as the quick fix
- Prayer is a focus for commitment to change
- Prayer is a source of creative insight

Questions

- In groups share occasions when someone has prayed with you, how you felt about it and whether it was helpful.
- How might you share prayer on a pastoral visit?
- How can you fit praying for everyone into our busy lives?
- What sort of prayer might be inappropriate or manipulative?
- What helps or hinders your prayers for others?

Prayers before you visit

- Allow time for prayer before visiting
- Pray for yourself and those you are to visit
- Collect up simple prayers for use

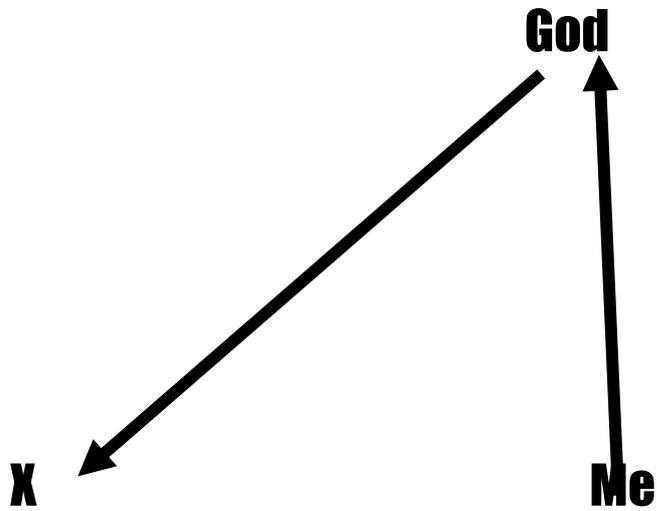
Prayers with people

- Don't have a fixed rule - be sensitive and open to the Spirit
- Pray brief prayers
- Use a written prayer if you feel more comfortable with that.
- If you use informal prayer keep it short. Focus on what you have shared together. Pray for the person's loved ones and concerns. Offer thanks for their joys

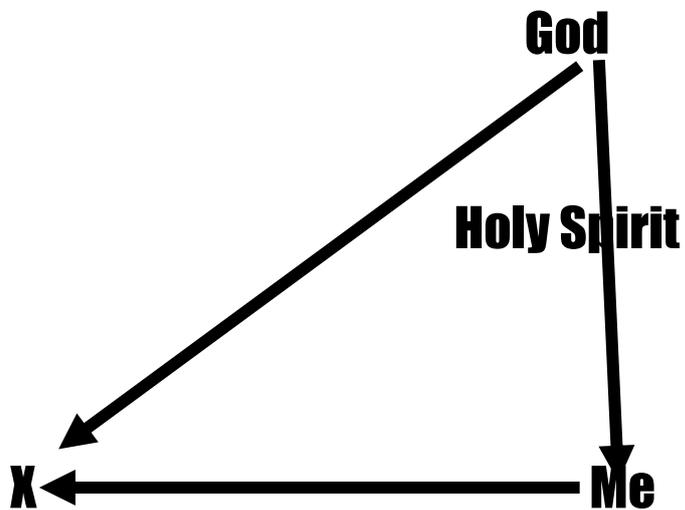
Prayers after a visit

- By yourself later. Remember before God the conversation, the feelings and concerns
- In a prayer meeting. Pray for the people you visit and their needs. *Remember confidentiality*
- Ask for them to be remembered in intercessory prayer in the church. *Do ask permission first*

Triangle of Prayer



Me trying to make *God* do the right thing?



Open to *God*.

Holy Spirit is able to flow through my word and action

We are open to be his channel

Useful Resources

**Room for God
Publishing**

Anne Evans

Church House

A practical book for all those who wish to bring God into our hectic daily lives. Prayers and suggestions for helping families to celebrate our faith together.

Called to Care

Ann Bird

Methodist Pub. House

An excellent handbook and training resource for use in the parish. Full of good suggestions and prayer resources.

Spirituality of Struggle

Andrew D. Mayes

SPCK

Drawing on insights of the great spiritual writers the author offers encouragement and hope as we struggle with change, stress, anger, suffering etc.

Praying for the Dawn

**Ruth Burgess
Kathy Galloway**

Wild Goose Pub

A superb resource book of prayers and meditations for use in healing. It reflects healing of communities and the environment as well as personal healing. It also gives a taste of the background, context and range of healing work

Jesus healing work and ours

Ian Cowie

Wild Goose Pub

A new and exciting look at all of Jesus' healing miracles. He retranslates the Greek of the New Testament and sheds new light on what the healing miracles were and more importantly offers thoughts for us to take into pastoral care today.

Prepared to care

Michael Jacobs

SPCK

A good basic book on the theory behind pastoral care.

Why do things go wrong

David Self

Lion

A good basic for bereavement

Like Spring without flowers

Janet Eldred

Methodist Homes

Based on her doctoral research the author takes us into the themes of community, connection and caring through the stories of older women in the church.

Matters of life and death

John Wyatt

IVP

'Today's healthcare dilemmas in the light of the Christian faith'. A relatively easy introduction into the moral and ethical challenges and opportunities that confront us today. It begins to give a Christian perspective on issues such as abortion and euthanasia. Each issue is based on a true life story and biblical perspective. I found it a useful book to help through the maze of ethical dilemmas.

Swift to Hear

Michael Jacobs

SPCK

Lots of ideas for developing listening and responding skills

Caring Ministry

Sarah A. Butler

Continuum

This is based on a training programme developed in Denver, Colorado. Although American it has lots of useful dialogues and each chapter ends with a spiritual application. The approach is different to many other programmes in that it is based on a contemplative approach to pastoral care. It explores links between the 'centering prayer' and caring. In developing our ability to listen to God, we are better able to listen to others.

God's Touch

Bruce G. Epperly Westminster John Knox Press

Another American approach to the reading of the gospel narratives. Through it the author reveals the centrality of whole person healing within Jesus' mission as teacher and social reformer.

Other resources

Beta Course

Being Christian
Becoming whole
Building community

Similar format to Alpha and based on building relationships.

www.beta-course.org

Promoting Mental Health – A resource for spiritual and pastoral care.

It provides 'information on mental health and its promotion and protection within congregations and the wider community'.

85 pages but it has useful resources and contacts.

www.mentality.org.uk/ParishResource.pdf

Prepared to Care

Encircled in Care

Methodist Publishing House

Two excellent courses for use in the parish. In A4 ring binder. Some of which we have used in Module 1

Dealing with trauma

Gordon Wilson

Guidelines for clergy and pastoral workers in understanding and caring for people with traumatic experiences. As well as useful reading and contacts it has information on the process of dealing with sudden death.

Available from Methodist Church web site

www.methodist.org.uk/pastoral

Bible Readings for special times BRF 1.99

Each booklet offers 24 undated reflections linking scripture to real life experiences, especially for those times when we want to hear God's word but may not know where to start looking.

e.g. Bereavement; Marriage; Ill Health; Retirement

THE THREE C's

Contract

If you are caring for someone, particularly in an 'official' way, for example as a visitor for the church, it is important for you and that person to understand what you can and can't do. If you are able to pop in to see a family or housebound person to chat once a month for half-an-hour, that may be accepted as a friendly act.

However, the person may need a good deal more and expect you do it. Maybe weekly shopping help is wanted, or a baby-sitting service. If you are not able to help in that way, it is better to say so and make clear what you are 'offering' without being offensive, rather than get into a situation you resent and have to withdraw from later.

It is also equally important for the person to have a chance to say whether your interest and friendship are welcome or not. If you are asked to be a pastoral visitor to a family new to the church or area, make sure they understand about the nature of your visit. You might say, at the appropriate moment, 'Our church likes to keep in contact through our monthly newsletter, I have been asked to deliver yours. Do you mind if I call in with it?' If they do not want this kind of attention it gives them an opportunity to say so, and that should be respected.

Confidentiality

If someone shares something personal with you, it is often a sign that they trust you. You have their confidence, and to trust a listener may be part of that person's growth towards wholeness. This is a precious gift however and one that can easily be destroyed. Conversations which repeat the family problem or painful memory to another may find their way back to the original sharer and undermine your relationship. Even if that does not happen it may affect the way a person is thought of by others and thus harm their integrity. You guard the person's dignity in the way you handle anything shared with you. There are two exceptions to this; the first is if they specifically give permission to share something they have said with another person. Secondly, if the person says something that leads you to think they or another person are at risk you have a duty of care to pass this on to

the appropriate person or agency. See the latest church policies on 'Safeguarding Children' and Safeguarding Vulnerable Adults.

Collaboration

Pastoral care is one of those rare areas of life where everybody needs it and all are able to give it at some time.

It is sometimes assumed that pastoral care works on a pyramid model. That is, the ordained minister cares for visitors, or house-group leaders, and they in turn care for those who are assigned to them. But who cares for the ordained minister? The Bishop?! The Archdeacon?! And who cares for them? To think in this way is to assume that someone somewhere at the top of the pyramid can cope without care. Of course this is not so and it can be a very destructive idea.

Pastoral care is better understood as a circle or as a community in which care is exercised by all and received by all. The minister, the house-group leader and even the archbishop sometimes need the care of someone else. The Church community consists of colleagues doing the work of caring together and for each other. Make sure that those in 'official' positions are included.

You may occasionally feel the person you are caring for needs the experience or skills of someone else, maybe even the specialised help of some other agency, be that meals on wheels, social services or professional counseling, such as the Samaritans. This is part of collaboration too. Needs are often met by the combination of resources.

It is valuable to have a list of all such local agencies. This may be available from Social Services, Volunteer Bureau, or Citizens Advice Bureau. If not, one valuable task a church group could do is to compile one.

Care and Share

Evaluation Sheet

Why did I join the course? Have my original hopes for the course been realised?

What have I most valued on the course?

What has stimulated me?

Challenged me?

Been practically helpful?

Any other comments.