

“Bedside Blessings”

September 2011, Neighborhood Church

Part 1: On Dying

Reading

*Some thoughts on death. First from Heraclitus:
Out of life comes death
and out of death life,
out of the young, the old,
and out of the old, the young,
Out of the waking, sleep
and out of the sleep, waking
The stream of creation and dissolution never stops*

*and this from Kahalil Gibran:
If you would indeed behold the spirit of death
Open your heart wide
unto the body of life
For life and death are one
even as the river and sea are one*

During the summer, each of us Chaplain Interns were scheduled for three on-call shifts at the Westwood Campus hospital. A Level one trauma center with several ICU's and 800+ beds. My very first on-call shift I was paged to the Pediatric Intensive Care Unit (known as the PICU). After I had received the page and called the nurse to assess the situation I got in the elevator. I remember taking several deep breaths and chanting to myself, you can do this Sara. The pt was a 2 month old baby girl who was born with a rare, terminal disease. She was actively dying. She was hooked up to a ventilator and the nurse told me she was on such high levels of epinephrine just to keep her heart beating.

Her mother was young and spoke almost exclusively Spanish. She was with her mother-in-law who spoke some English. They were catholic. The hospital employs a full-time Catholic priest and another one who speaks Spanish often comes in on the weekends. The Baby had already been baptized, but I called him anyway, thinking one last visit might bring the family some small moment of comfort. On my way out of the office, I had grabbed a Catholic liturgy and prayer book and I offered the family a prayer. I stood over the bed, put my hands on the blankets covering baby girl and read a prayer from the book specifically for those who are dying, then added a few phrases of my own and closed with the obligatory Catholic in the name of the father, the son and the Holy Spirit. Amen, while making the sign of the cross on the baby's forehead. That was the moment I cried. And I let the tears come, rolling gently down my cheeks, grateful for the Kleenex on at the bedside.

Later that morning I joined the family and doctors in a family meeting. The Doctors wanted to talk with mom about signing a DNR. Intellectually this sounds very reasonable to many of us. This baby was not going to recover, they had tried to prolong her life, done every medical intervention possible, but now her kidneys were failing and there was little left to do. Everyone knew this day would come and with the help of a translator they team did their best to explain all of this to mom. They were calm and gave their best medical explanations. Mom was quietly tearful and her agony was palpable. Finally after a while of talk mixed with silence I looked at mom and said, “No matter what you choose, you are a good mother.”

I had other pages to respond to so I left the bedside. But as they day moved on I kept checking back. I felt drawn to be there. They didn't need me, they had not asked me to come back—they had been here for two months and seen several Chaplains. But the mother in me took over--I wanted them to know they mattered, that this baby mattered even in her short life and that this time, this moment of her death was as sacred as her birth. By late afternoon Mom could see the rapid deterioration and decided to withdraw the medication that was keeping her heart beating. The team assured her they would continue the pain medication and keep her comfortable.

During the time I was in the room I said very little. I just stood there, sometimes I would close my eyes and meditate and just direct my energy toward the baby and her family and other times I would do nothing—there was nothing to do. While they positioned the baby so mom could hold her, they stopped the medication. We watched the monitor as her heart rate slowly dropped. I said one last prayer and the baby's heart quietly stopped. We all cried. It was extraordinary moment of grace. And because there was nothing I could do, I came to this internal understanding that my presence was enough. I felt it was enough precisely because when a child dies, nothing is enough.

Part 2: On Praying

Reading

This Reading is titled “We Can Never Know” and is from Linda Gonder-Frederick and the Rev. Wayne Arnason

How can we begin to understand what hope and healing mean in the face of a deadly illness with no known cure? We have many sources of hope and healing in our lives—singing, praying, thinking, communicating, acting, giving, and remembering.

Dr. Richard Cabot tells the story of a young theological student in Clinical Pastoral Education who was encountering for the first time in his life a patient whose illness was so severe that the doctors told the student that this woman had slim chance of survival.

The woman asked the young man to pray for her, and in this first encounter with such a request, the student minister was overwhelmed with feelings of inadequacy and despair. He turned away from the bedside and buried his face in his hands. He fought back the tears and tried to regain control of his emotions. Finally, he got himself together and stood up. Embarrassed and ashamed, he took the woman's hand, offered a simple blessing and goodbye, and fled from the room.

Much to the surprise of the clinicians, the woman underwent an unexpected recovery. When Dr. Cabot was talking with her later about how she was able to rally and respond so well, she replied:

"I think it all began with that young theological student who was so intense in his prayers for me."

We can never be sure how our companionship and service in the company of those living with serious illness will be an agent of hope and healing. Sometimes the things that we least expect to be helpful will be the things most remembered. So ends the reading.

Oh how I identify with that young theological student! The feelings of inadequacy and fear. So I knew when we were asked to write goals, prayer would have to be one of them. My first goal was to explore the use of prayer. I would accomplish this by praying with more patients and by writing my own prayers weekly including a basic template which I could use as a guide during my visits.

I was afraid of prayer. We UU's are not known for our spontaneous prayer—I mean many of us need to be prodded to even ask another human being for help let along some ambiguous entity we're not sure even exists. I knew I would be challenged in this area. Now, I was plenty challenged this summer, but strangely, I was not challenged by prayer. Much to my surprise, I found that I loved it! Where I thought I would struggle with being authentic I found that authenticity came in my being able to hold someone else's faith as sacred (if not more so) than my own; that to fully embrace my Unitarian Universalist faith, dedicated to pluralism and embracing the worth of every person, meant that I could pray to whomever the patient requested. I could call on God, Jesus, mother/father, the spirit of Life, the energy of the universe because the words I used were what made the prayer accessible and meaningful to the people with whom I prayed.

And tapping into that meaning was where I found the authenticity—not in the words. I think that moment came when I was praying over the baby girl in the PICU, freely invoking the Catholic trinity and making the sign of the cross. I never once felt inauthentic because I felt like I was honoring that family with what *they* needed, in the most scared way possible. Often, my commitment to explore using prayer with patients meant that also gave me vehicle to tell them things they simply could not hear otherwise.

Take Dion for example. Oh Dion. He is a 30 year-old hemophiliac admitted for an infected knee replacement which they had to remove. When I left, Dion had been in the hospital 8 weeks. During my time with him over the weeks he had shared that as a child he was bounced around foster homes eventually ending up in a group home. He emancipated himself from the state when he was 17, he had lived on the streets and was in jail for 5 years on drug charges. He had lived with hemophilia all his life with no support. When he finally had an opportunity to meet his biological mother, she was killed in a car accident just a few weeks later.

His life was a tragedy—one after the other and Dion could no longer tread water. Somewhere along the way Dion had found Jesus. I'm not sure how or when, but it didn't matter because every time we began to talk about God and we would pray, he would lighten just a little. His face would brighten and he would sit tall and breathe and for those few minutes I could see in his eyes he had something to believe in. And Dion needed something to believe in.

During one particularly tough visit when he was deep in grief about the purpose of his life and how he felt abandoned and punished I saw a spiral of depression setting in. I listened and validated his feelings but he had checked out. So before I left I suggested we pray. During the prayer I asked God to help Dion see his purpose in life, to know God had a plan and that he would walk with him and give him strength and courage when needed it. When we finished our collective Amen, Dion's face was changed. Tears were streaming down his cheeks and he just looked up at me and said, "Thank you." I knew in that small moment he saw hope and possibility and love. Our weekly prayers became highlights for both of us, and when I went to say goodbye, we both cried.

French philosopher Simone Weil says prayer is, "Absolute unmixed attention." Now there is a definition UU's can wrap their heads around. By this definition, prayer can be found the biologist isolating stem cells, in the auto-mechanic replacing the spark plug, in my five year old transfixed by his trains, in cooking the dinner and in doing the dishes, in creating art. By this definition, you've all had a few moments of prayer already this morning (I hope). This definition reinforces the idea that to whom we pray, which pronouns we use, the words we use, are secondary—it is our attention that is the prayer itself.

On Being

Rev. Kusala, a Buddhist monk, came to speak with us about ministering to Buddhist patients. During his talk he shared that many Buddhists understand our quest in this life is to learn how to be human *beings* as opposed to human *doings*. I have learned this is no easy task and I have, by no means, figured it out. I am a doer. I like outcomes and goals and projects, outlines and timeliness and schedules. All of these things produce results that are tangible and visible and will either confirm or deny that I am *doing a good job*.

Being is another thing entirely. There are few visible results of our being and no objective measurements to determine if our being is good or bad, working or not working. It simply is. As a Chaplain, *being* is the goal, we do very little. We do not give medication or prescribe treatment. At our best we are just present, we listen, we affirm, we validate. We hold a sacred space for another's story. Standing at the bedside of more than 200 patients this summer forced me to embrace the beauty of just being—of the power of presence alone.

A common phrase used among our supervisors this summer, one Jim also often uses, is "non-anxious presence." It is that elusive ability to be fully present in the moment while remaining unattached to the problems and needs and emotions around you. Rather than responding to a situation with, "Let's do something!" it carries the essence of being, Very often I feel as though my ability to claim this way of being is a facade and I am walking around frantically chanting to myself, "non-anxious presence! Non-anxious presence!" Other times it comes with much more ease or I am offered a situation where the only choice I have is *being*.

Ramon was in his late 50's. He came to the hospital from a nursing home. He was non-verbal and had no record of family or friends. No-one to call. His kidneys were failing. Thanks to the work of two of our Chaplains, during a brief time of lucidity, they were able to get Ramon to communicate by blinking and confirmed he was a Spanish speaking, Catholic and indeed had no local family. They were all in Mexico. We knew Ramon was dying, but he'd have the days where he would rally and his stats would get a little better so we had no way of predicting his death. What we knew for sure was that he was alone. We also knew he did not have to be.

We talked with the medical team and put a note in his chart requesting that the chaplains be paged when death was imminent. He died the week before we wrapped up our program. My colleague Jesse (our Spanish speaker in the group) had been with him most of the day and Matt (the other Catholic) and I joined him in the evening. We prayed and talked, and although we said the Our Fathers and Hail Mary's and prayed the Catholic prayers of the dying, it was a reminder that death does not care what religious affiliation you are. We all felt that the meaning, the significance was not in our religious practice, but in our being there, for each other and for Ramon.

We held his hands, stroked his head and stood in silence. During a brief moment when we had paused our prayers and were chatting casually, he stopped breathing. It was as if he waited until the attention was no longer solely focused on him, until we had stopped *doing*. While we waited for the doctor to make the official pronouncement, we talked about our own thoughts on death and our wishes for our own deaths. Despite his dying, it was the least anxious moment of my summer. He was there and then he wasn't and we were with him all the way—just being. The moment was so casual and simple and peaceful and also so moving and powerful. Ramon was not alone.

My Chaplaincy experience forced me to embrace just being, to practice it every day, to examine it in my life and notice myself. I noticed this way of being meant bringing my full self to the moment, stripped of to-do lists and the worries of daily life. It meant letting go. Some days were more successful than others and I am certain this will be a lifelong practice. The beauty of it all is that in my practice of being fully present to complete strangers this summer, I found it radiating into my life. Maybe it was because I was gone so much that I craved my family and friends such that I could easily find that sense of presence, or maybe it was because I had a reprieve from schoolwork as a constant nagging distraction, but I hope it was more than my circumstances. I hope it was because I practiced *being*. And through that practice I began to understand that one of the greatest gifts I can give people is to just be with them, to be present to them, to allow them to feel that they are what matters most in this moment.

CPE is as much learning about patient care and the skills of Chaplaincy as it is learning about your deepest self and who you are in the world and in your ministry. One of the deepest learnings for me was really experiencing the human need to be valued. We all want to know our lives matter, that we mean something--to someone, to the world. And in a time of crisis & suffering, like being in the hospital, we begin to question our place in the world. So, to have someone, like a chaplain, come to you to talk, to listen, to hear your stories and fears, and to affirm your worth and value, can be a true blessing. And likewise, to be trusted with another's story, to be truly present to one's pain, suffering, fear, and joy is an even greater blessing.

It seems, in the end, we all want to know we are good, that we are loved and that we are not alone.

May it be so.

SONG I'll Stand By You

BENEDICTION

We are all on a journey together
To the center of the universe
Look deep
Into yourself, into another.
It is to a center which is everywhere
That is the holy journey
First you need only look
Notice and honor the radiance of everything about you
As we experience and accept
All that we really are
We grow in care
We begin to embrace others
As ourselves, and learn to live as one among many

Go in Peace