

*Random thoughts on what chaplains or pastoral care givers do daily when they walk into a hospital room and listen to the spiritual distress of the ill or dying.*

## **Thought for the Week: Random Thoughts on Pastoral Care**

By Rabbi Harry D Rothstein D Min BCC

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# THOUGHT FOR THE WEEK

Random Thoughts on Pastoral Care

A tribute to the men and women who daily address the spiritual distress of patients facing illness, loss of meaning of their lives and their mortality.

Rabbi Harry D. Rothstein DMin BCC

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Dear Colleagues,

Though for the week: "What do chaplains do?"

I have considered this commentary on Ecclesiastes (*Kohelet*) 3:1-8 for a long time.

I use the *Tanakh: The Holy Scriptures* JPS translation (1985). The **bold** font is the text of Ecclesiastes.

**"A season is set for everything, a time for every experience under heaven:**

We givers of pastoral care have seen it all. We have seen birth, death, love, hate, indifference, fear, hope, dignity, indignity and more in the lives of our patients. We always stand present to them and to their loved ones in all circumstances.

**A time for being born and a time for dying;**

We are present during the hope of new life and during the passing of life to death. With consideration and planning, a dying patient can convey new hope and the continuation of love and of care to the next generation.

**A time for planting and a time for uprooting the planted;**

When we encourage our patients to address the distress in their lives, using whatever spiritual resources they may have, they may "plant" new plans or "uproot" old ways of thinking and believing. In this, we spiritual caregivers, we encourage them and stand by them.

**A time for slaying and a time for healing;**

Our medical counterparts use whatever is in their medical armory to "slay" viruses and bacteria and so allow the body to heal, or they work hard to rebuild and heal the patient's body after trauma. This is their work.

Our work is to encourage our patients to see this work as hopeful, healing, and meaningful in their own lives.

**A time for tearing down and a time for building up;**

When our patients experience the distress of illness or of trauma, they will sometimes "tear down" previous ways of belief or discard

their previous faith. Our work is not to judge but to encourage the patient to discover new curiosity in living, new ideas in old faiths and new hope in themselves, in their lives and to rediscover trust of their world. In this work, we stand by our patients and loved ones.

**A time for weeping and at time for laughing;**

We have all seen people laugh during grief and weep with relief and gratitude in the face of recovery. We affirm both and all.

**A time for wailing and a time for dancing;**

We pastoral care givers offer condolences in the face of tearing grief and rejoice when patient and family "dance" in the face of recovery and the renewal of life.

**A time for throwing stones and a time for gathering stones;**

It is natural for family and friends of a patient to express despair and anger upon losing a loved one. They even sometimes "throw stones," or throw chairs or punch holes in hospital room walls. It happens. Not often, but it happens. We stand with them in their grief. And sometimes, loved ones "gather stones" when they express regret for past misdeeds or unfortunate words said. This is an opportunity for reconciliation. Here too, we stand with them and watch the work of a divine presence.

**A time for embracing and a time for shunning embraces;**

In a world with greater sensitivity to personal touch, we sometimes need to know when to offer an embrace to our patients and when to keep our hands to ourselves.

**At time for seeking and a time for losing;**

Our patients have the right to seek treatment or to decline treatment. Whatever our own moral concerns, we will walk with them as they journey through their time of decision.

**A time for keeping and a time for discarding;**

Before, during or after illness or trauma, our patients may choose to keep a healing personal or family relationship. Sometimes they decide to throw away, as it were, a relationship that was harmful. Here too we walk with them and with other caregivers, as they help our patients consider what heals and what hurts.

**A time for ripping and a time for sewing;**

Our medical caregiver counterparts teach us that "ripping and sewing" can be of service in surgery and therapy. We walk with our patients as they consider the costs and benefits of serious medical care.

**A time for silence and a time for speaking;**

Many of us are ordained clergy who can sometimes slip into "preacher's disease," the need to speak over our patients and to "fix" them. Our silence can teach us humility in the face of their distress and may offer us an opportunity to learn more about what spiritually ails our patients.

**A time for loving and a time for hating;**

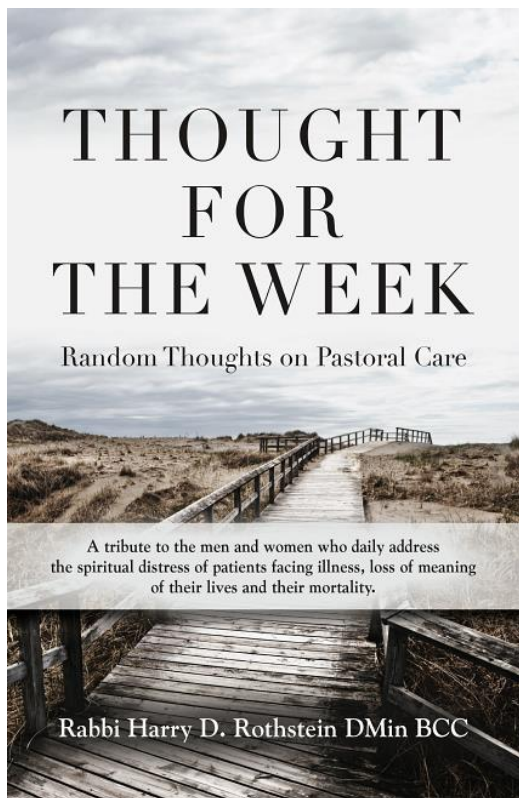
We caregivers can both love and hate our work and need to be self-caring, to find another with whom to "spill" our own traumas and fears.

**A time for war and a time for peace."**

We do the holy work of spiritual care when we walk with our patients as they consider the losses and benefits of "beating" or 'going to war" against a serious disease, or to simply live their lives as they see fit.

Peace,

Harry



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