

## Diocese of Monmouth · Esgobaeth Mynwy

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# **Pastoral Assistant**

Session 4 – Solo Course

Material adapted from 'Living and Learning: Pastoral Visiting' published by St Padarn's Institute.

# Session 4: What might we encounter?

## Introductory Reading

When we make a visit on behalf of the church it is likely that we will encounter people who are experiencing difficulties in one way or another. It is possible that the person we are visiting may be elderly, or sick, or housebound or recently bereaved, or they may feel lonely and isolated. It is important for the visitor to understand the issues that are facing the person and to be sympathetic to their needs.

Some people that you will be asked to visit will be elderly and it is possible that they may be struggling with disabilities that are a consequence of age. They may have suffered a change in their physical, social or personal circumstances as they have gotten older and they may be experiencing a sense of loss and isolation. They may fear for a future in which they will be incapable of independent living. For many older people the familiar ways in which they have practised their faith may no longer be physically possible.

It is common for the elderly to experience a loss of hearing which may drastically reduce their ability to communicate effectively. Faced with deafness of people of any age there is a tendency for the visitor to raise their voice and over-exaggerate each word. However, this is rarely helpful. Rather, there are a number of simple but useful ways in which to make communication with the hard of hearing a little easier. This might include:

- making sure the person knows you are about to speak by signalling your intention or lightly touching their arm;
- letting your face be expressive and use your face, rather than the tone of your voice, to aid the conversation;
- making the subject of your conversation clear;
- using short, straightforward sentences;
- repeating what you have said without changing the words you have used;
- using hand gestures if appropriate;
- resorting to a paper and pencil if necessary.

It is also common for elderly people to be forgetful, and for a growing number this may signal the onset of dementia. The Alzheimer's Society predicts that there will be a steady increase in the number of elderly people suffering from dementia and that this may reach 1.7 million by 2050. Dementia is of course a degenerative condition with the symptoms becoming more severe over time. Typically, symptoms will



include a loss of memory and mood changes. Some may experience problems in communicating which may lead to a decline in the ability to talk, read and write.

Not all people who are confused will be suffering from dementia but it is as well to recognise that communication with confused people will be easier if you make sure that you:

- identify yourself clearly giving your name and where you are from;
- sit on the same level as the person you visit, preferably with the light on your face:
- understand that the confused can be very sensitive to body language;
- use short and simple sentences that are easy to follow;
- use names all the time (pronouns like 'I, they, she, him 'may be difficult to follow);
- be aware of the background environment (the TV can make concentration difficult);
- avoid asking questions that can create anxieties.

Some that you are asked to visit will at some time or another have been bereaved. This may have been the death of a partner or parent or child. It may have happened quite recently or several years ago. And although there are experiences common to all bereavements, each grief will also be unique. Therefore, although we can show sympathy and empathy, it is impossible to know how any bereaved person actually feels. Visitors will encounter those who have cared for a loved one through terminal illness and others who have been faced with a sudden death. They may therefore visit a person who is grieving in the first few weeks after a death and another who is still trying to come to terms with a death that happened months or years previously.

CS Lewis began his own personal account of grief and loss after the death of his wife Joy in his book, 'A Grief Observed' with the words,

No one ever told me that grief felt so like fear. I am not afraid, but the sensation is like being afraid. The same fluttering in the stomach, the same restlessness, the yawning. I keep on swallowing...There is a sort of invisible blanket between the world and me. I find it hard to take in what everyone says. Or perhaps, hard to want to take it in. It is so uninteresting. Yet I want the others to be around me. I dread the moments when the house is empty.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> https://www.goodreads.com/quotes/649744-no-one-ever-told-me/.



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It is tempting to refer to textbooks on bereavement and to 'stage models' of grief as set down by authors such as Elizabeth Kubler-Ross. In her book, 'On Death and Dying' she identified six stages of grief: denial and isolation, anger, bargaining, depression, acceptance and hope.<sup>2</sup> However, there is a recognition today that people are individuals who do not always behave like textbooks. There is therefore less emphasis given to 'stages' of grief and more emphasis placed on the broad 'process' of grief. Indeed, it is generally recognised that there is no single way to grieve. Everybody is different and each person grieves in his or her own way.

However, there is a process that many will experience. Feeling shock and being emotionally numb may be replaced by a deep yearning for the person who has died. The bereaved person may feel agitated or angry and find it difficult to relax and to sleep. There may also be feelings of guilt. These strong emotions often give way to bouts of intense sadness, sudden outbursts of tears and a withdrawal from family and friends. Over time, pain, sadness and depression lessens and life can be seen in a more positive light again. Finally the person may find a way of 'incorporating the loss' of the person who has died and move on to a new stage of life. It takes on average about two years to go through this process but for many it is never completed and many people repeat parts of the cycle or go through the stages in a different order.

Therefore, if you are visiting a bereaved person you may encounter strong emotions of anger, fear, guilt, self-pity, depression and denial, or hear of vivid dreams of the dead person and tales of seeing or hearing or sensing the dead person close to them in their grief.

Ian Morris, a chaplain in London, has suggested that the '5Ts' may help us when we visit bereaved people, especially in the very early stages of grief. They are:

- **Touch.** If a person has recently died it can help to touch or hold them.
- Talking. This can be very therapeutic as people go through grief.
- **Tears.** This helps the body to release chemical agents that induce calm and relaxation.
- **Tea.** This is good for shock and it can help to undertake an ordinary task.
- **Time.** Giving people time helps show them their worth and value.

Sometimes we will be asked to visit people who are themselves close to death. It is important to remember that such a person may be dealing with many conflicting and contradictory thoughts and emotions at this critical time.

<sup>&</sup>lt;sup>2</sup> Kubler-Ross, E. (1973), On Death and Dying, Taylor and Francis Ltd.



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It is also worth acknowledging that there will be no easy answers to the questions that the person may be asking and to which they must seek answers for themselves. In visiting such a person we may feel that we are called to a ministry of support, comfort, presence, and reassurance. It is important for the visitor to recognise that:

- helping people to explore their stories may help them to make sense of their lives;
- difficult and awkward questions may need to be explored rather than answered;
- there is a need to be comfortable with silence as concerns over what to say and how to act are common;
- touch may be important if that is acceptable to the person and appropriate;
- they need to be prepared to convey the Christian hope simply and without preaching;
- people who appear to be unconscious and on the point of death may well be able to hear what is being said around them though unable to respond.

Indeed, as a Pastoral Assistant, you are likely to encounter situations that you find challenging and difficult. Understanding how people with a range of difficulties and challenges might be feeling and how best to communicate with them will be important.

It is also vitally important to be aware of how their experiences may trigger reactions in yourself. For example their bereavement may bring back a bereavement that you have experienced in a fresh and surprising way, or their illness may remind you of a current concern you have for a loved one. In these situations it is possible that your insight will help you be open to what they are experiencing and will help you empathise.

However it is important to remember that everyone's experience is different. You should not project your experience on to them; assuming that you 'know what they are going through'. You should also be aware of the danger of telling them your experience, making the visit about your experience rather than theirs.

Nonetheless some people, at the appropriate moment, might find comfort in knowing they are not alone in their thoughts and feelings and that others have survived similar events. Finally, it is important to make time, before and after a visit, to deal with any personal emotional consequences the visit has had for you, and to find support if you need it.



#### Solo Reflection Questions

### 1. Beginning

Spend a few minutes in silence, offering any worries or concerns from everyday life to God, and acknowledging God's presence alongside you and within you as you prepare to reflect more deeply.

God of love,
passionate and strong,
tender and careful:
watch over us and hold us
all the days of our life;
through Jesus Christ our Lord.
Amen.

## 2. Reflecting

On a plain piece of paper, map out a 'river of life', which charts your own important life events from birth to now. Map out the different events, perhaps drawing in the times:

- when the river has flowed smoothly;
- when there have been unexpected twists and turns;
- when it has been flooded or dried out;
- when there have been obstacles across the stream.

Then come back and reflect on these questions.

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How might you these experiences have a negative impact in your pastoral visiting?
In light of all that we each carry in our own lives alongside our ministry to others, wha support might you need from your ministry area and/or others to sustain you in the role of Pastoral Assistant?



## 3. Exploring

Read Ruth 1:1-22.
Identify and explore the various losses and causes of grief for each character in the story. What are the consequences and responses to these losses and causes ogrief?
What different forms of loss and grief might you encounter as a Pastoral Assistant?



# 4. Responding and Concluding

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