Chaplaincy: A Gift from Heaven

Barbara Robertson and Kathy Winings December 19, 2021



Since March 2020, so many in our communities and families have come face-to-face with tragedy, death or a personal crisis of some type. Whether the crisis was due to the loss of a loved one from COVID-19, personal illness, loss of a job, hunger for human contact, or any number of issues, people have turned either to professional counseling, spiritual guidance or to a chaplain.

In particular, over the past year, we have seen a dramatic rise in the number of hospitalizations --

especially with long-term stays. What has made this more difficult for both family members and patients has been the hospitals' "no visitation" policy or the allowance of just one visitor for the general medical floors.

Added to this has been the stress on the medical staff of long hours, increased patient loads and number of patients who did not survive. This context has increased the importance and value of the work of chaplains -- most particularly hospital chaplains. This article presents the role and value of chaplains from a very personal and direct perspective.



Barbara Robertson and Kathy Winings

One year ago, Dr. Winings began a new journey that started with a medical crisis resulting in a very long recovery period. While the outcome has been good, the journey itself could have been much worse if it had not been for the co-author: a professional chaplain. Even though Dr. Winings encouraged her UTS students to complete at least one unit of <u>Clinical Pastoral Education</u> (<u>CPE</u>), she had never been on the receiving end of chaplaincy. That changed this year.

Based on Kathy's experience, she now realizes what a gift chaplaincy is and how much a chaplain contributes to

someone's life. Pastor Barbara Robertson begins their story, sharing what a chaplain is, does and how they are trained. As a professional chaplain, Barbara has impacted so many people through her work at Vassar Brothers Medical Center, 85 miles north of New York City overlooking the Hudson River.

Barbara Robertson: What does it mean to be a chaplain? People often ask, "What is a chaplain?" My usual response is: we are like a minister without an agenda. Our role as chaplains is to meet you where you are, and help you identify your own inner resources that you can use to get through the crisis you are facing. We are not there to preach, convert or proselytize.

Thirteen years ago, while studying for my Master of Divinity degree at UTS, I was offered the opportunity to do an internship as a chaplain at Vassar Brothers Medical Center. With that first unit of CPE, I was hooked. Chaplaincy training is based on the model of "act, reflect, act." What an amazing experience and what an amazing life lesson to always take time to reflect and then shift as needed.

I often joke that becoming a certified chaplain is like trying to become the Pope. It requires a Master of Divinity degree, four units of CPE, endorsement from a recognized faith group, and demonstrating and presenting competency in front of a review board after logging 2,000 paid hours of chaplain visits.

Fortunately for me, you can begin work as a chaplain after one unit of CPE, which consists of 400 hours of training in a facility. Most official CPE agencies work with set hospitals and elder care and hospice facilities. My CPE training consists of visiting patients, writing those visits up, and reflecting on them both individually and as a group.

Each CPE group is limited in size to allow for substantial reflection as a group and to learn from the supervisors. A single unit of CPE costs between \$450 and \$800 depending on area and takes between four and nine months to complete. Some agencies have begun to offer more intensive sessions in metropolitan areas. Though the one unit system is more common, there are year-long residencies as well. The experience is worth all the time you invest and every penny you spend.

Having worked as a chaplain for over 12 years, I have had many precious experiences of being there for

people in their most vulnerable moments. It is an honor to come alongside another in their suffering -- to buoy or comfort or just be a witness. Here are three examples:

- Once after listening to a patient share her life story, she started to cry. When I asked her why she was crying, she said she felt heard, that she could tell I had really been listening. She said it had been such a long time since she had felt heard.
- Sometimes burdens are easier when you share them with others. Several times I had patients share things with me that they had never told another living soul. One time a patient hinted that this really awful thing had happened to her. It was a grave secret. I gave her permission to keep her secret, but also made it safe for her to share. She got her secret off her chest that day. She seemed visibly lighter when I left.
- As I walked down the hospital corridor one day, there were family members in the hallway. Not knowing which room they were with, I entered a dying patient's room. They swooped in after me, wanting to know who I was. When I said I was the chaplain, they dismissed me with "We're atheists." "Even atheists feel grief," I said. Down went their defenses and out came the stories of the beautiful life the patient had lived and what she had meant to those in attendance during the last moments of her life. Since then, I have offered to many of my non-believing brethren: "Would you like a non-religious prayer?" Most have accepted. After all, it's not about me, but about meeting my patient wherever they are.

I've learned important life lessons, such as it's more important to listen than to speak. People can feel when you're really listening and it matters to them in a profound way. Also I've learned that everyone has a story, and everyone suffers. But that suffering makes us deeper, wiser, more compassionate people -- if we let it.

What more beautiful thing is there to say than you were there for someone when they needed you. That is the essence of chaplaincy.

Kathy Winings: I have always been a supporter of chaplaincy and CPE training. I have had several students who went on to take CPE units and became chaplains. Together with Dr. Jacob David, the UTS faculty member who was responsible for Field Education and CPE training, we have encouraged students and graduates to complete a unit of CPE because of the valuable skills they will gain through the experience. I remember hearing the testimony of a student one summer who had just completed his first unit of CPE in New Jersey. Through that experience, he had found his calling. For those students who did not choose to become chaplains, CPE gave them skills that would support them as pastors, regardless of their chosen ministry.

However, I personally had never been on the receiving end of chaplaincy. That is, not until December 5, 2020

I was standing in my kitchen late that afternoon when I realized I had a terrible headache. But what really concerned me was hearing what sounded like water rushing in both ears. I sat down for a few minutes thinking that would take care of the problem. But while I was sitting there, a little voice told me to call EMS and go to the local emergency room. I made the call. The last thing I remember was hearing a siren in the distance. After that, I have no memory at all of what happened. The long and short of it is that the local emergency room sent me to Vassar Brothers Medical Center in Poughkeepsie as soon as they could because a cerebral aneurysm ruptured causing a stroke and Vassar was the closest hospital with a neurosurgical suite with the latest equipment and digital resources.



My first memory a few days later was seeing Pastor Barbara Robertson standing there -- who turned out to be my official chaplain at Vassar. When you wake up in the Intensive Care Unit (ICU), not knowing what has happened and with no memory of how you got there, it is so important to see a friendly face. Fortunately, while no family or friends were allowed to visit patients because of the pandemic, official chaplains did have access. And Barbara was there every day she worked at Vassar.

I don't know if we talked a lot during these visits since I will never recover any memories about those long weeks in the ICU, but that did not matter. What mattered is she was a comforting presence. I knew that I was not alone. Even when I was babbling about nothing because I was in an "altered mental state" (as the hospital called it) much of the time because of the damage caused by the aneurysm, she patiently listened. If I needed something from my home, she would get it and bring it the next time she visited.

This is the strength of CPE training. One learns what it means to be a "presence" for someone. It isn't about talking all the time or about giving spiritual guidance. As Barbara noted above, it is about being there. When one is in the hospital, especially in the ICU, patients have no control over what is happening to them and are at the mercy of medical staff who are telling them what to do/not to do and conducting non-stop tests. That is why having someone there just as a presence speaks volumes for the patient.

And Barbara was patience and presence to the max. In a sense, she became my lifeline, someone who, by her very presence, told me that things were going to be fine. What made this especially helpful for me was I knew Barbara, which is not usually the case with many chaplains. They more often than not serve patients they do not know initially. But for me, it was particularly valuable that I actually knew her.

When I returned home about ten weeks later, Barbara continued to be a vital presence. She worked with another member of the community to organize meals for a couple of weeks. She also found someone to stay with me for the first few nights in case I needed something. Barbara even helped with unlocking my devices that Apple had locked because I input the wrong password too many times while in the hospital.

Barbara's role as a chaplain was life-saving to me because my experience was so frightening. I could not take an active part in the healing process and was not always sure as to where I was for several weeks. So this meant that I could not behave or act as I normally would. Having someone there who was not judgmental or focused on "preaching" to me was a critical part of the healing process. That by itself is healing.

This is why a chaplain plays such a critical role in supporting not just the emotional and spiritual aspect of those they minister to but are a part of the recovery and healing process. Thinking about the last year and the thousands of people who found themselves in the hospital, and even the ICU, for weeks at a time due to the COVID pandemic, cut off from family and friends, healing becomes a challenge because those who are patients need the support, encouragement and love of those they trust to support their healing process. So I was fortunate to have the spiritual, emotional and loving support of a chaplain throughout this process.

Since that time, I have been thinking about chaplaincy and its value as well as about my own personal experience with a specific chaplain. As a result of this reflection, I had a powerful "ah-ha" moment: Chaplaincy training is one of the most profound experiences for a seminary student and for those in ministry. On a practical level, chaplaincy means jobs. Hospitals, police departments and elder care facilities hire chaplains. Plus the new trend of assisted living facilities and senior apartment complexes offer potential placements for chaplains, especially with the large numbers of baby boomers now making use of these facilities. In speaking with a director of such a facility in Maryland, I learned she was working with the board of the facility to allocate funding for such a hire.

More importantly though, as human beings, we need people who know how to be a presence to others, how to listen, and how to authentically be there for a stranger. What has been encouraging is each time I return to Vassar Brothers Medical Center for tests and in conversation with nurses, we often talk about helpful staff. I mention I know a chaplain and someone often asks if I know Barbara. So it is clear she impacts a wide range of people and her authentic work gets around the hospital. To me, that is being a natural and authentic witness.

CPE helps one learn how to do this. CPE and chaplaincy, in the past, was a course and a requirement that intellectually I knew to be valuable. Now however, I have "seen the light," as they say. Barbara is a chaplain who represents an extremely valuable role in our community. Because she was there at one of the most challenging and difficult times in my life and stayed with me throughout the experience, she is no longer just a former student or someone who completed CPE. Barbara has been *my chaplain*, someone I can never forget and someone I will value for a very long time.

For those who may feel they have a possible calling to be a chaplain, I strongly encourage them to pursue CPE. Even if one does not formally become a chaplain, the skills and personal insights they gain from CPE are life-changing and worth the time and investment. All I can say is I am so grateful to Chaplain Barbara Robertson. She has been a gift from my Heavenly Parent!

Dr. Kathy Winings is Professor of Religious Education and an educational consultant. She is former Director, Maryland Instructional Site, and former Director, Doctor of Ministry Program at UTS. She received her Ed.D. from Teachers College, Columbia University.

Barbara Robertson is Associate Chaplain at Vassar Brothers Medical Center in Poughkeepsie, NY, and Co-Pastor of the Mid-Hudson Valley Family Church in Barrytown, NY. She earned her Bachelor's degree in Fine and Studio Arts at the University of California, Los Angeles, and expects to complete her Master of Divinity degree from UTS in 2022.