Attentive to God: Thinking Theologically in Ministry
Charles M. Wood and Ellen Blue
softcover

Charles M. Wood and Ellen Blue bring solid academic credentials to their works. Wood is professor of Christian doctrine at Perkins School of Theology, Southern Methodist University, Dallas, TX, and Blue is assistant professor of Christian history and United Methodist studies at Phillips Theological Seminary, Tulsa, OK. In this collaboration, they suggest that the development of pastoral identity and pastoral practice are mutually formative. They believe that the capacity to reflect theologically on a pastoral encounter increases effective leadership in ministry.

The book is divided into four parts: an introduction, which serves as the cornerstone; a brief orientation to Christian theology, which draws on historical and sacramental theological concepts that may be restrictive and noninclusive of other theological perspectives; nineteen fictitious case studies for consideration in ministry, each with a universal flavor that should resonate with most clergy professionals regardless of faith orientation; and notes on selected cases.

Among the case studies are the following: dealing with a homeless person who takes up residence under the church’s steps, attempting a reconciliation following sexual misconduct, using inclusive theological language for a child’s baptism, addressing a newly appointed pastor’s need to challenge another minister’s differing theological perspective, responding to a parishioner’s request to spend time at the parsonage while the pastor is away on vacation, understanding a child’s bereavement process and attempting multiethnic ministries in the face of opposition from one of the powerful members of the congregation.

The notes on selected cases represents the authors’ collaborative effort to present brief background interpretations and suggestions with the intention of highlighting resources and considerations that may be more broadly applicable to the theological reading of human interactions. They assert that separating these case study reviews from the rest of the text is a strength. Readers have the opportunity to digest the facts of a pastoral encounter or ministerial predicament and to form their own theological assessments and responses prior to reading what an “expert” would have done.

Appropriately, various professional chaplains and clinical pastoral education (CPE) supervisors may find this volume helpful in their specific settings. The CPE supervisor may use it for curriculum development or suggested reading for enhancing theological reflection. A supervisor-in-training with limited congregational or pastoral experience may find the case studies universal in nature and thus informative and instructive. The professional chaplain may find this approach strengthens or renews his/her skills in theological reflection.

The essential approach for reflection may be distilled into six formative reflection questions. What is going on in the case study? How is God involved in what is going on? What is the fitting response to what is going on? What is going on with you as you consider this case? How is God involved in what is going on with you in this process? How might you respond to what is going on with you? The interpersonal reflective process of the first three questions may be defined as story, reflection or pastoral response-action. Questions four, five and six balance the scales, by encouraging the reader toward

If you wish to suggest books for review or if you are interested in serving as a reviewer for CT, please contact Paul Buche MA MS, CT book review editor.

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intrapersonal theological reflection. As the writers explained their reflections on the specific ministerial predicaments included in the “notes” section, I would have preferred more of their intrapersonal theological reflection.

The professional chaplain—whether in a healthcare institution, prison, long-term care or industry setting—may find this volume valuable for use in volunteer training programs as well as chaplain associates’ continuing education events and/or training programs.

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Despite its “punny” title, which reminds me of Granger Westburg’s Good Grief, this is a serious book. In a sense, it parallels the concept of a good death for the patient, offering the survivor(s) a “good” mourning.

Central to the author’s thesis is the concept of bereavement, grief and mourning as distinct, though related, entities. Bereavement is defined as the occurrence of loss, and grief as the immediate response. “Mourning proceeds from an experience of grief. … [It] describes the manner of getting through loss over time. … [and] also involves learning how to live with a lasting void created by what we have lost.” (p. xvii)

The first half of the book focuses on loss: what makes it difficult, its effect on the individual’s thoughts and feelings and what helps an individual to cope. Cole maintains that in order to mourn well, one must prepare. Much of this preparation centers on initial coping, which is essentially coming to terms with loss in the immediate aftermath. He writes that as the farmer cultivates the ground for planting, one must cultivate the “ground of being” for mourning.

The strategies put forth by Cole focus on acknowledgment of the loss sustained. They include facing reminders, both verbal and visual, through the process of a funeral/memorial service as well as talking with family, friends, clergy and/or counselor. Feelings are to be accepted and articulated rather than denied or minimized. Tears should be welcomed. At the same time, one also should seek enjoyment and comfort in people and activities enjoyed prior to the loss. Other coping tools in the grief stage include physical activity and forgiveness/reconciliation.

The second half of the book is devoted to the mourning process, beginning with what Cole terms the “requirements.” All of these are related to the loss which has been experienced: receiving, enduring, adapting, relocating and returning to sojourn with as necessary.

Coles both honors and validates all of the griever’s thoughts and feelings. At the same time, he provides a process for working through these to achieve a “good” mourning.

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Society’s approach to aging and death is generally one of avoidance. In fact, the authors compare receiving a terminal diagnosis to stepping into a raft on a river with class four rapids. “Things abruptly begin moving too fast; people describe feeling unsteady, never fully in control. They are aware that unseen dangers may await them at every turn. People who are seriously ill—and those caring for someone who is ill—urgently need a guide who has run rivers like this before.” (p. vii) The physician and the psychology professor who authored this book certainly fill this role.

In the first half of the book, the authors help the reader to navigate the bewildering array of medical personnel and information. They point out the differences between attending physicians, residents and specialists. Further, they provide helpful suggestions regarding planning for meetings with physicians as well as for other family members. One chapter provides a summary of the most common terminal illnesses. Another addresses the pain and suffering that may accompany them. A look at the where, how and when of death rounds out this section.

The second half of the book looks at the nonmedical issues of death and dying, which may be equally perplexing. “Most people have no idea what emotions are normal to experience when a loved one is dying. How could they? Most of us grew up in families where death was not talked about. Most parents explain ‘the birds and the bees’ to their children but wouldn’t touch ‘the cycle of life’ with a ten-foot pole.” (p. 93) The authors discuss common feelings, and they make the important point that distorted—and often overly self-critical—thinking also is common and may be voiced as the following: I’m being a wimp; I should be stronger; I’m being selfish.

One helpful chapter is titled, “What Should I Be Saying? Learning to Talk with Someone Who Is Dying.” The authors point out that talking openly helps to “de-toxify” death. They provide helpful exercises and good questions. There also are examples of rituals for saying goodbye and rituals for grieving.

This book is intended for people who have little or no experience in the healthcare maze. Though chaplains and others in healthcare won’t find much that’s new, this book may be a helpful resource for patients and/or families who need a navigator to accompany them on the journey toward the end of life.

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Encountering Other Faiths
Maria Hornung
Mahwah, NJ: Paulist, 2007
112 pages/softcover

The basic premise of this book is that in some ways all religions are true; they are different because they arose in different geographical areas, with different languages and meet the needs of different people by providing diverse rituals. Alongside this are the beliefs that all religions may lead to spiritual enlightenment; that particularism/exclusivity—the notion that there is one right way, and that all others are in some way deficient, and wrong—is destructive and dangerous; and that through mutual respectful encounters, people may move closer to world peace. Within these parameters, the author offers suggestions as to how women and men of goodwill may engage each other in order to learn and to appreciate their respective faith traditions.

Hornung begins with a short overview of interreligious dialogue in both global and American society. The second chapter explores the meaning of that term and then considers ground rules and modalities of such a dialogue. In a major chapter devoted to the “theoretical underpinnings” of interreligious dialogue, Hornung highlights in particular the thinking of Milton Bennett and James Fowler.

The book concludes with a practical nine-step program for encountering other faiths. Hornung readily notes that this is not one-size-fits-all. She is clear that this model “lends itself to adjustments in accord with an assessment of each group’s skills and needs” (p. 78).

As professional chaplains, many of us encounter people of other faith traditions on a daily basis. By increasing our knowledge about, and experience of, these traditions, we may become more effective in our caring. In my mind, a limitation of this book is that it appears to repeat some of the basic theses, but it may be...
that the author simply reframes those ideas in different ways.

Readers who find this work of interest and relevance will be pleased with the bibliography at the book’s conclusion. Hornung studied interreligious dialogue with Professor Leonard Swidler at Temple University in Philadelphia. Swidler, along with Paul Mojzes of Rosemont College, edits the Journal of Ecumenical Studies. Articles in that journal likewise would be of interest to someone who wants to engage in this kind of interreligious dialogue.

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**Reflections on Psalm 23 for People with Cancer**
Ken Curtis
DVD

No one could accuse the producer of this DVD of speaking from an ivory tower. Dr. Ken Curtis, president of Vision Video, has been diagnosed with stage 3-B lung cancer. He opted for a combination of traditional and alternative treatment, and he has done much better than originally expected. The Twenty-third Psalm was a key part of the spiritual component of his treatment plan, and in these thirteen meditations he does a nice job of applying the message of this psalm to living with cancer. He ably demonstrates that Psalm 23 is more than “just a spiritual sedative to give at funerals!”

In the opening segment, “The Lord is my Shepherd,” Curtis points out that “we are not in charge.” He talks about the sense of powerlessness that accompanies being diagnosed with cancer. “Cancer is a defining experience,” he says, “but it can be a good defining experience.”

As the film shows a shepherd and flock in Israel, Curtis talks about the phrase, “Your rod and your staff comfort me.” He does quote from Hebrews 12 about God’s discipline, but he is quick to add that he is not saying that God sends cancer. Curtis’s approach is one that I frequently hear from cancer patients. While they would not have chosen a cancer diagnosis, they are astounded at the good that has come to their lives.

“Reflections” is composed of thirteen 8-minute segments. Some listeners may find Curtis’s voice annoying, but the scenery on the DVD is beautiful, and the background music is both pleasant and peaceful.

While the focus of this DVD is people with cancer, people with other serious illnesses also may find it meaningful. With its biblical and religious connections, it probably would be more appropriate for use in a church-based cancer support program than in one that is hospital or community based.

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**Teilhard de Chardin – The Divine Milieu Explained: A Spirituality for the 21st Century**
Louis M. Savary

Having read The Phenomenon of Man and The Divine Milieu, I was excited to learn that Louis M. Savary had written a book that focused on how Teilhard’s spirituality may be relevant to the practice of ministry. One of the challenges in chaplaincy is to offer ministry from a well thought-out theology. As a Jesuit priest and scientist, Teilhard took seriously the need to integrate religion and science into a practical Christian spirituality. I’ve long felt that Teilhard’s work provides such a theology and welcomed the assistance that Savary seeks to provide.

There are many who may identify with Savary’s reason for writing: “I have always felt attuned to Teilhard’s mind. So at the urging of friends eager to explore—and even practice—Teilhard’s spirituality, I have tried in these pages to simplify without distorting The Divine Milieu for the Teilhardian beginner and to turn it into a spirituality that any person can actually practice.” (p. xvi)

The French word *milieu* “encompasses our English words ‘atmosphere’ and ‘environment,’ yet for Teilhard it connotes still something more that he tries to capture in the image of light, inner luminosity, or fire” (p.18) According to Teilhard, the divine milieu is always in a state of evolving, developing and progressing towards the Omega point, the Cosmic Christ.

The choices we make daily may promote activities for growth and diminishments that shape our lives and the Body of Christ. There are activities that come from an outside source and activities we choose. For example, you may choose to go for a drive in the country, but you have no control over the drunk driver who slams into your car and leaves you paralyzed. Both are part of one’s personal development and that of the Body of Christ.
The strength of this book is the exercises it provides to guide readers into experiencing their part in developing the Body of Christ. The following exercise is a good example: “Just as you might come home after work and tell your spouse or your family what you accomplished at work today, in a similar manner you may begin to tell God in prayer what you accomplished today that furthered the work of the Christ Body.” (p. 79)

The exercise concerning our diminishments provides an especially helpful perspective: “Not only are you struggling for life against the diminishments that befall you, but so is the Christ Body struggling with you and through you against the diminishments that befall it. Thank God for the strength that comes to you through the divine milieu” (p.108)

Chaplains may see as helpful Savary’s explanations for Teilhard’s three ways that the divine milieu may transfer evil—which he sees as a diminishment—into good. For example, “While I was in the hospital with my broken leg, I met the person I was going to marry.” (p. 112) “First, the diminishment diverts our attention and activity toward a framework that will turn out to be more beneficial than what we were doing before the diminish-ment.” (p. 112)

“Second, and perhaps more often, our loss or affliction will force us to turn for satisfaction to less material purposes. Lives of many saints experienced this form of transformation. ‘My child was killed by a drunk driver; now I dedicate my energies to finding ways to prevent inebriated people from driving.’” (p. 112)

“Third, the more we deepen our attachment to the fulfillment of the Christ Body, the less we need to set limits to the ‘tearing up of our roots.’ This describes a shift of primary attachment from self to the Christ Body, where to serve God is all we wish to do.” (p. 113) This may help persons to deal with suffering due to accidents, unexplained premature deaths or permanent damage to the physical body.

This work could be used to engage Christian chaplains to think through their ministry praxis, especially as it relates to the Body of Christ. Is ministry offered from a sense of being a part of the Body of Christ? In what way does Teilhard expand the Pauline view of the Body of Christ? How does Teilhard’s idea of evolution apply to the changes patients experience when they enter the hospital? Seasoned chaplains may want to evaluate some of their ministry practices through the lens of Teilhard’s divine milieu. It should be noted that Savary’s responses to Teilhard’s critics are insightful. However, it is the practical value of Teilhard’s work that is the intent of Savary’s book as well as this review.

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Let Them Go Free: A Guide to Withdrawing Life Support
Thomas A. Shannon and Charles N. Faso, OFM
61 pages/softcover

Let Them Go Free: A Guide to Withdrawing Life Support sends a gentle message to those family members and close friends who find themselves in the middle of the chaotic environment of the emergency room or intensive care unit without warning and with little time to prepare for major decision making. The book begins with a dialogue that describes the process of dying, the burdens as well as benefits inherent in modern technology. It recognizes limiting treatment as a sign of wisdom, even though the consequences may be difficult to accept. This thoughtful introduction comfortably moves the reader into the purpose of this well-written and informative book, which asks the question voiced by many family members: “what should I do?” The authors discuss openly, honestly and without judgment both sides of questions that often go unspoken and/or unanswered during this stressful time, many of which may manifest later as statements of anger or resentment.

Is it possible for family members to read thirty-four pages of text in a stressful atmosphere and receive insight to the point of being comfortable with their next decision? This reviewer answers with a resounding yes! The authors lay the groundwork for open consideration and discussion of family members’ individual viewpoints and permitting others to do the same without confrontation. Further, they present thoughtful questions for this personal and private family decision. Let Them Go Free creates the opportunity for open honest family dialogue in which appropriate decisions may be made for the patient, leaving the family with a path toward closure.

“The Family Prayer Service” found in the back of the book affirms belief in the living God and is based in the
Judeo-Christian tradition. Readings from Jewish and Christian Scriptures as well as a prayer of commendation are included in this section. Family members may be invited to choose those familiar passages that bring them peace and comfort. It is suggest this service be spoken just before artificial life support is withdrawn. This service provides a support tool for the family's personal reflection and a comforting walk through familiar rituals and prayers that may help individuals truly to let their loved ones go free.

Though the worship section is faith specific, Let Them Go Free: A Guide to Withdrawing Life Support is a valuable resource for chaplains ministering in end-of-life situations and a worthwhile addition to clinical pastoral education libraries.

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Pastoral Care of Depression: Helping Clients Heal Their Relationship with God
Glendon Moriarty
New York: The Haworth Pastoral Press, 2006
239 pages/softcover

My hope that this text would provide increased understanding of the impact depression has upon a person's religious/spiritual experience and how to respond or intervene as a chaplain was partially met. The author's goals are to "provide the reader with a strong understanding of depression and the God image ... [and] to furnish the reader with the therapeutic ability to change the God image." His decade-plus study of the God image led to founding an institute (www.godimage.com) dedicated "to helping people change their God image."

Moriarty is a psychologist who supervises doctoral level trainees and teaches psychodynamic therapy and psychology of religion. He lacks pastoral counseling credentials or formal theological training. To his credit, he addresses the ethics of therapists entering into a client's spiritual life. Grounded unambiguously in the Christian tradition, he writes primarily for therapy students and the counseling office setting.

Chapter 1 describes exogenous depression and its etiology—that which results "from personality development and situational circumstances." He does not explore the possibility that the biological imbalances of endogenous depression also may lead to unhealthy God images. After an explication of the distinction between head and heart expressions of religion, two case studies are introduced and intertwined throughout the remaining text.

Chapter 2 invites the reader into self-assessment—to identify one's own operational God image by completing several exercises. Interpretation of the assessment results is presented in the context of an extended discussion about how a God image develops. The author sees operational images of God as the result of childhood experiences with parents.

Chapter 3 leaves the reader with a tantalizing hypothesis not yet sufficiently tested. It has been demonstrated that the therapy journey may result in a revised image of God. Could a revision of one's image of God lead to healthier psychological functioning? How the person suffering from exogenous depression exhibits a damaged image of God is described in greater detail—what chaplains would term "unhealthy spirituality."

In Chapter 5, the author presents a number of assessment tools. Some are his, others he reprints with permission. His own "God image assessment protocol" describes the use of traditional psychological assessment processes to develop a biopsychosocial/spiritual assessment (Level 1).

Level 2 uses additional tools to focus on the client's God image, including the author's God Image Drawing and God Image Sentence Blank Completion Test, God Image/Parent Grid (Robert McGee), God Image Questionnaire (William Gaultiere), God Image Inventory (Richard Lawrence) and Spiritual Assessment Inventory (Todd Hall and Keith Edwards). Some of these tools could be used in clinical pastoral education (CPE). Chaplains likely will find Gaultiere's description of fourteen "Unloving God Images" and the corresponding "Unlovable Self-Images" the most interesting of these.

Additional chapters outline psychodynamic and cognitive therapy approaches to assist clients in revising their God images. A final chapter arranges all this into a treatment plan and discusses how to secure the client's consent and investment in the journey. Overall the text is well written and has relevant charts and diagrams throughout. It also includes a good bibliography and index.

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Coming of Age: Exploing the Identity and Spirituality of Young Men
D. Martinson, David W. Anderson and Paul Hill
Augsburg/Fortress Press, 2006 214 pages

Coming of Age is the outgrowth of research—the Young Male Spirituality Project—which was a joint effort of Lutheran Men in Missions, the Evangelical Lutheran Church of America and the Luther Seminary Faith Factor Research Teams. The impetus for this project was the realization that “twenty-something guys are scarce in worship services and acts of ministry” as well as the concern that the “young adult postmodern generation seemed to possess a skepticism” for the institutional church, apparently side stepping it for a “more personal connection with God.”

The study included eighty-eight young men, aged 18 to 35 with differing faith experiences and encompassing four ethnic groups. The study protocol included one-hour interviews, which focused on “spirituality or faith with its particular practices.”

The chapters are organized to include observations of where the church is in relation to this cohort, trends and dynamics, observations from interviews and theological responses. The most helpful chapters provide anecdotal information from individual men, theological discussion and implications/guidelines for the church/ministry. The final chapter offers guidelines for transforming ministry to better reach this age group of men.

Coming of Age could be a valuable resource to anyone seeking to understand the spiritual expression of young men and ways to connect with them through their current lifestyles and identities. I heartily recommend this book for anyone who works regularly with young men.

Al Voorhis MDiv
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Sharon Lund
Lincoln, NE: iUniverse, 2006 127 pages/softcover

Sacred Living, Sacred Dying: A Guide to Embracing Life and Death is a wonderful treasure, truly something to savor. In this multipurpose and multiuse book, Sharon Lund acknowledges that “death is a chapter in life few people are comfortable talking about.” (p. 98)

In the introduction, the reader is greeted with the rollercoaster ride that is Lund’s life: her childhood experience of violent sexual abuse from a close relative; the loss of most of the people she has loved; giving birth to the joy of her life; being diagnosed with AIDS; her spiritual awakening in the midst of marriage, divorce and domestic abuse.

She concludes, “I have danced with life and death throughout my life, and each challenge seeded the gifts and wisdom I share with you. By facing all of my challenges and releasing them, they have become sacred—sacred because they have healed me, brought me to self-discovery, to wholeness and to living my life purpose.” (p. xxi) With this profound statement, she sets the tone for the rest of the book.

In chapter 1, titled “Legacy of Love,” Lund provides a series of topics and questions. This is more than a workbook for recording one’s life; it is a self-help book focused on learning to accept and celebrate one’s life experiences. She includes suggestions on how to begin a dialogue journal. Rather than merely being an end product, this journaling becomes a holy and spiritual journey. Lund encourages the reader to find a safe, quiet environment and to set aside a certain amount of time to write. She includes detailed instructions for “oral journaling” via audio or video recording, a means of life review that will provide a lasting legacy.

Chapter 2 is filled with information and resources for celebrating life through a memorial or funeral service. Readers are encouraged to “step out of the box” and to fashion an event truly reflective of their individual life journeys.

Chapters 3 and 4 review in great detail the decisions one must make in preparation for death. Having this information neatly compiled serves to relieve the anxiety of family and friends in making decisions during a final illness and after death has occurred. Lund cautions that each state has its own regulations and laws and that one should investigate their particular state’s regulations prior to making plans.

Finally in chapter 5, Lund returns to her own life as she invites the reader to travel with her as she recreates her near-death experience, a very powerful and emotional journey through life and death and finally life again. What might have been the end was really the beginning. As she embraced the negative events, the hurts and frustrations, the losses—all were
transformed into a passion for life. It is from this passion the Sacred Living, Sacred Dying springs. As Lund observes, “Sacred Living, Sacred Dying is a gift of tools which will allow you to ‘practice dying.’” (p. 107) As one practices dying, one is able to live more fully in the present moment.

Lund’s Web site describes Sacred Living, Sacred Dying as a book that “embraces all people, regardless of race, religion, or spiritual beliefs. It is truly a universal document with enormous potential.” Does it live up to that statement? Certainly some aspects, such as the suggestion in the section on cremation that the remains be scattered or mixed with pottery clay and made into items for distribution (p. 78), are not acceptable within some faith traditions. That being said, this book provides a plethora of ideas and information that does make it universal in many respects.

One further observation is that in developing what she terms a legacy of love, Lund focuses on the positive. As one intention in creating this document is that it become public—at least within one’s family—this is understandable. However, for those who wish to go deeper, as Lund did in her autobiographical introduction, questions such as the following that evoke negative experiences may prove helpful. What was the most terrifying event you’ve experienced? How did you feel? What did you do? How do you regard that experience now?

In reviewing Lund’s life journey, it becomes evident that she has found positive aspects in many of her negative experiences. Inclusion of the negative in preparing one’s legacy of love may result in a transformative experience for others as well.

For those who find Lund’s autobiography in this book much too short, she currently is working on Sacred Ashes, a fuller account of her journey toward self-discovery and wholeness. Additional information on her books and lectures is available on her Web site (www.sharonlund.com).

I consider Sacred Living, Sacred Dying to be a valuable resource for anyone who is involved with caring for others. First of all, one may use it to write one’s own story and to encourage others to tell their stories. It provides a manual to assist elderly patients in completing a life review. It also includes ample resources to assist patients, families and staff in creating a meaningful memorial service and dealing with the details that are the responsibility of those who survive.

Finally, this exceptional book demonstrates the personal impact each of us has on the lives of those we touch whether they are personal friends, patients or casual acquaintances. The many creative suggestions are a valuable resource and assist us in thinking outside the box of our day-to-day chaplaincy.

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Healing the Hidden Self

Barbara Sheldon Ryan Notre Dame, IN: Ave Maria Press, 1982 (reissued 2005) 126 pages/softcover

Is this book for you? I must admit that my initial response was mixed. I came to realize that my time with it was not going to be merely one of reading and reviewing, but rather a journey through my own landscape of buried trauma. The journey was worth the time spent. Although brief, Healing the Hidden Self is not a quick read. Rather, it is an invitation to journey through one’s own soul and to find healing.

Al Voorhis Park Ridge, NJ
“We shouldn’t lose sight of the main point, that it is not a matter of creating compassion, but a process of just allowing it to occur. Just like water is wet, or a flame is hot, our basic nature is inherently compassionate.”

In this book, Tibetan lama Chokyi Nyima Rinpoche explores and helps the reader to set an intention for the cultivation and use of compassion in a medical setting. Rinpoche and his coauthor, Dr. David Shlim, take the reader through basic Buddhist teachings about the nature of suffering and then into aspects of training to enhance the calm and compassionate mind. They also include practical advice on subjects such as dealing with difficult patients and being with people who are dying.

*Medicine and Compassion* is directed specifically to physicians, who are encouraged to develop their skills of compassion along with their medical training. This reviewer thinks that the ideas and tools for growing the compassionate nature will be helpful for anyone in the caring professions, especially chaplains. Though the writers address the issues from a Buddhist perspective, there also is a universal spiritual tone and usefulness. Chaplains likely will feel validated for their present compassionate work and will be inspired to continue the development, perhaps in new ways.

As healthcare institutions struggle with the “bottom line,” and the focus seems to be shifting to numbers of visits, census counts and outcomes, this book reminds chaplains of the importance of direct attention to patients and their families. While chaplains may be coaches and mentors to other professionals, they first must be committed to an ongoing expansion of their own compassion. Rinpoche talks about the barriers professionals may create for protection and how these interfere with good self-care or open service to patients. He writes about meditation, honest inquiry into the mind and training to broaden one’s capacity to act from an open, compassionate heart. Compassion comes out of the feeling of connection with other humans. By strengthening the connection or feeling of sameness, one reduces the perception of “me and other” which in turn strengthens one’s wisdom and compassion.

Rinpoche encourages the cultivation of positive traits, e.g., kindness, generosity, perseverance, empathy, compassion, until compassion becomes a driving force rather than just a concept. A traditional Buddhist metaphor sees compassion as that which a parent feels for a child—free of judgment or comparison. Part of the training is to become aware of one’s feelings of judgment and to examine them so that healing may occur and positive traits may be enhanced. “The spiritual practitioner is striving to see things as they really are, not as they seem.”

I recently loaned this book to our hospice medical director, who reported the book gave him much encouragement to balance medicine and compassion in a way he hadn’t understood before. I recommend this book as a further support to the work chaplains already do and as a resource to share with medical colleagues.

Chokyi Nyima Rinpoche ends the book with this final blessing: “I wish that you may be happy and healthy, and that your wisdom and loving-kindness may increase like the waxing moon. This is my wish and my prayer.”

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*Guide to Ministering to Alzheimer’s Patients and Their Families*  
Pat Otwell  
New York: Routledge, 2007  
195 pages, softcover

Early on, the author presents the statistic that “4.5 million people in the United States had Alzheimer’s disease in 2000. By 2050, the projected number … is expected to increase threefold.” (p. 22) Certainly this is reason enough for chaplains to become educated about the disease and, most importantly, how to minister to patients and families caught in what frequently is described as “the long goodbye.”

Otwell does a credible job of describing the disease itself and its process as well as dispelling myths that surround it. Speaking out of her twenty years of Alzheimer’s work, she maintains that ministry to these patients is not difficult, just different, and that much can be done for them spiritually. She has little patience with the excuse that the patient will not remem-
ber a visit: “You will know—family and friends might know. Far more important, God knows.” (p. 30) As for being at a loss for words, she reminds the chaplain/spiritual caregiver that it is the ministry of presence that matters most.

She emphasizes the value of nonverbal communication with Alzheimer’s patients and the necessity of validating their reality rather than imposing one’s own. As they suffer short-term memory loss, she stresses the importance of using the familiar and original, whether it is the person’s birth—rather than married—name or the faith tradition of childhood. “Traditional religious symbols that can be touched, seen, heard or smelled might trigger spiritual memories or associations. … Patients still may be able to recite familiar prayers and to sing well-known hymns. Ministry is in the ‘here and now’ because visits will likely not be remembered.” (p. 71)

Above all, she encourages frequent visitation to support both patient and family, especially as the disease progresses. A chapter devoted to spiritual care for families provides insight into the issues faced by those related to the patient, who also may be the primary caregivers, during the different stages of the disease.

Otwell advocates for clergy attendance and participation in support groups and seminars as a way of increasing their awareness and education about Alzheimer’s. Much of this book is directed at community clergy, and she recommends that faith communities sponsor workshops, displays and informal discussion groups to educate congregations as well. Such activities may help to lessen the isolation often experienced by family members as the patient’s behavior becomes more erratic.

Beyond education and communication, I found the sections on grief, guilt and ethical issues to be the most pertinent for chaplains. The progression of Alzheimer’s disease frequently spans years, resulting in anticipatory grief. As with other progressive diseases, e.g., ALS, there are the periodic losses, which also need to be grieved. Overlapping this is the guilt family members often experience when the patient can no longer be cared for safely at home. Ethical issues, such as defining when the patient’s getting behind the wheel of a car endangers others, have overtones of grief and guilt as well.

Clearly, Otwell writes with a Christian audience in mind. Two-thirds of the 15-page appendix titled “Strength from the Scriptures” is devoted to quotes from the New Testament; the remainder are primarily from Psalms. All of the worship services contained in the appendix “Sample Programs, Services and Forms” have a Christian focus.

Overall, I found the content uneven, ranging from the strengths mentioned above to portions that seem quite simplistic. Further, Otwell punctuates her prose with an overabundance of subheadings, which I found intrusive and unnecessary, especially as her chapters are short. She also frequently resorts to bullet-point lists, giving the impression that she assumes her readers have little or no training in pastoral care.

Despite these criticisms, I think this book does qualify as a basic guide to the multiple dimensions of Alzheimer’s disease. The 28-page resource section, which includes an extensive listing of organizations plus an annotated bibliography, makes it a worthwhile addition to the department library.

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