Chapter 9 Reflections of Spiritual Narratives

ABSTRACT

This narrative illustrates the connections between spirituality, writing, and health. It does not promote a specific religion but demonstrates strength people gain from believing in a higher power. Prayers with hospital patients and the search for connections more than coincidences illustrate how people find and maintain hope and faith when presented with tragic events such as the recent pandemic. Each reader may find encouragement while reflecting on and following an individual spiritual path.

FAITH NARRATIVES

Spirituality enhances health. To preface this narrative, the stories shared do not advocate the following of specific religious beliefs. Some people find comfort in a religious community of worship. Other people find spirituality by taking walks in nature. I share my experiences through the lens of my spirituality, but encourage you to follow your own religious or spiritual beliefs to find strength during difficult times. Regardless of what you believe, may you find encouragement in the following examples.

In the coronavirus era, I want to keep my faith, both my spiritual faith and my faith in modern medicine. Medicine and spirituality converged for me when I spent time volunteering for the pastoral care team at my local hospital. In my roles as health coach and Stephen Minister, I observed the connections between spirituality, health, and healing. My past experiences give me faith in the present moment as medical teams race to control the coronavirus, and a future filled with hope.

I wrote the following narrative a couple years before the pandemic, when I could still walk the hospital hallways freely. The pandemic closed the hospital to all except the most essential workers, and I pray for the safety and health of all who cross the entryway to save lives. I planned to use my pastoral care narratives in a collection that the hospital, understandingly, never published due to the severity of the coronavirus. I hope the narratives illustrate the role prayer plays in healing, as people with loved ones still in hospitals use prayer to sustain them.

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I sling my lanyard with my badge around my neck and walk into the hospital. My first stop is the chapel, where I say a prayer for all the patients I will see today. I hope I can provide some comfort to them. During my rounds, I always thank the nurses, physical therapists, and occupational therapists for the work they do to help patients. I have no idea how to teach a patient exercises or give them medicine, and I appreciate the members of the hospital family who know how to save a life. The team members also thank me for my prayers. Prayers give patients hope, and a positive attitude can help patients heal.

I completed my health coach internship at the hospital and serve as a Stephen Minister for my church. With my full time job as a high school English teacher, I don't have as many hours to spend volunteering at the hospital as I would like. However, I have the goal of making a difference in the time I have with patients.

My training as both a Stephen Minister and a health coach reinforces the power of listening and learning patient's stories. In addition to my roles as high school English teacher and health coach, I serve as a Stephen Minister at my church. Haugk (2000) defines, "Stephen Ministers are lay Christians carefully recruited, selected, trained, commissioned, and supervised for lay caring ministry" (p. 17). With my role as a Stephen Minister, I use the same skills of reflective listening and partnering with people on their healing journeys as I do as a health coach. The difference with Stephen Ministry is that people may be experiencing a spiritual crisis instead of a health crisis, and I also have prayer as a resource. While I write about Stephen Ministry from the perspective of my experiences, the writing practices I describe are not meant to be seen only from the perspective of Christian faith.

Sometimes I only have five minutes with a patient, but I believe my path was meant to cross with the lives of the patients I meet. For most patients, I will not know the sequels to their stories or what happens to them after they leave the hospital hallways. I pick up my list of patients who will soon transform from names on a page to a mosaic of stories I feel blessed to be part of, even if only for a moment.

One of my favorite stories is when I prayed with two members of the same family who were at the hospital for two different reasons. The mother was recovering from a medical procedure on one floor of the hospital and felt concerned about her daughter, who was recovering from a different procedure on the floor above her. As soon as I left the mother's room, I went upstairs to pray with the daughter and relay a message from her mother. The daughter was comforted, and then I returned downstairs to tell the mother her daughter was okay. The mother felt comforted and finally slept.

Not every story is as heartwarming. One day I was called to the emergency room to comfort a family whose loved one collapsed suddenly from a heart condition and was rushed to the hospital. The patient was a wife, mother, and daughter, and I met her devastated family in the waiting room. I juggled cups of water for them and offered prayers. Every person in the family had a different coping strategy from screaming to crying to attempting to be stoic for the others and not show emotion. The doctors did the best they could, but I never found out if the patient, who was in critical condition when I left for the day, lived or died.

Another day a nurse asked me to stay with a patient who just learned her cancer was untreatable. The patient was remarkably optimistic although her family had to leave her room so they could cry. Her wish was to die quickly so she and her family wouldn't suffer, but I reminded her she still had time for more conversations with her loved ones.

One patient admitted she was bored and loved that I arrived when I did so she could tell me all about her children and her volunteer work. Another patient supervised a youth group at her church and we had a long conversation about God's plan for us. Yet another patient wanted to know what happens when we die, and we discussed books written by people who had near death experiences.

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