

**We All Die Alone: A Practical Theological Exploration**

**By: Sonja B. Williams, M.Div.**

**August 1, 2018**

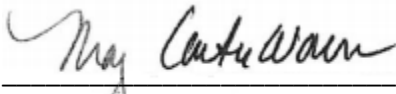
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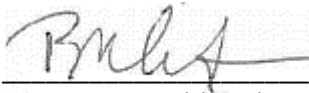
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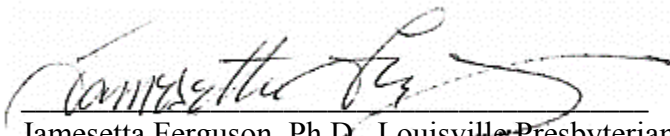
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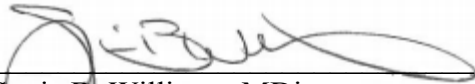
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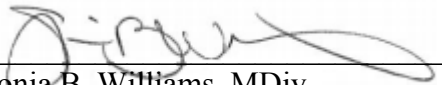
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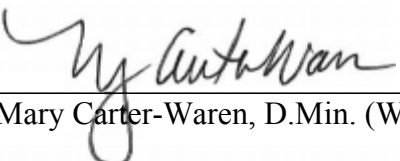
We All Die Alone: A Practical Theological Exploration

Sonja B. Williams

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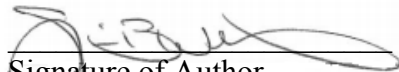
  
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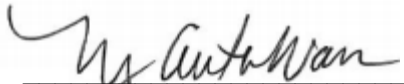
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## **Abstract**

Loneliness is usually perceived as a problem, and it consumes those who face the reality of death's call. Everyday loneliness runs rampant in the dying process, and the root cause of their loneliness persists. Hospice chaplains are required to assess patients by identifying spiritual symptoms and rating levels of concern.

Living in an oppressive state of loneliness and its misunderstood solitude requires more attention from the academy, the church and society. Consequently, few understand this oppression, of a new individual and communal identity. Furthermore, loneliness may very well be a prophecy or path reuniting one with the divine. The intentional and unintended formation of loneliness's ghettos are results from the isolation of an entire population. The inroads and cultural understandings of death and loneliness separate and ghettoize the misunderstood solitude of loneliness's demand.

Using the method of Theological Reflection upon case studies this work attempts to demonstrate the meaning and role of loneliness nearing the end of life. This work through an informed understanding of loneliness suggests a new spiritual understanding and need of compassion, community and improved education amongst academia, church and society.

## Acknowledgments

Dissertation writing is tedious yet rewarding, eventually. The highlights of this process are the individuals and communities that encouraged and added depth to this work. This work is beholden to the God of Many Names, and the hands and brilliant minds derived from such a Creator. The community that surrounded me with love and prayers I will be forever grateful. To every patient who have now met God on the horizon of loneliness's shore and felt comfortable enough that I could be your community, thank you.

Specifically I want to thank my Chair and friend, Mary Carter-Waren. You have spoken to my heart with your words and actions. My ministry and academic curiosity have all been touched by your humility and love. A special thank you is extended to my committee members, Bryan Froehle, and Jamesetta Ferguson for your distinguished presence and expertise on my committee. Bryan thank you for teaching me the rules for theological deliberation so that I may more effectively explain the shortcomings of the rules in a language understood by the opposing party. Jamesetta, thank you for introducing me to the United Church of Christ denomination through a more hands-on assessment of religiosity. You allowed room for me to faithfully practice a renewed and justice filled interpretation of Jesus Christ for those at the foot of the cross. Each of you continues to inspire and be exemplary Christian and academic models for myself and so many others.

I want to extend a special thank you to Rev. Misti Johnson-Arce who teaches the art and ministry of *being with* and listening. This dissertation is improved because of the skills you imparted to me to become a chaplain that listens beyond the words of those



who are living and dying. Thank you for your humble service to work with ministers who need ministers.

To my mother whose love and prayers have carried me this far, I love you and thank you. Your persistence and willingness to look into the future has helped me to complete this work for the good of society. Therefore this work is as much yours as it is mine. To my dad who never allowed me to call him father, because there is only One God, thank you for wanting me to have more. Dad, your desire has never left me; it has grown into my own. My Sister, Felicia Williams-Young, you rock; you have been a continual rock and a place of inspiration. I'm grateful for my first teachers; thank you.

## **Dedication**

*To my patients and family who allowed me to journey with them at the end of life's  
journey.*

*“If one is lucky, a solitary fantasy can totally transform one million realities.”*

– Maya Angelou

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## CHAPTER ONE: LEFT UNATTENDED

### Introduction

I love every moment of teaching and providing pastoral care as a hospice chaplain. It is my goal to seek out voices longing for someone to hear them. Seeking and attending to unheard voices is an important goal in pastoral care. It is challenging to care for those seemingly full of life, but it is even more challenging to provide this care for those dying. Caring for the dying is a mysterious and anguishing experience. It is the hard work of the practical theologian to inform, listen, and advocate for the healthy and the dying.

Hospice chaplains have a duty to help a patient explore his or her *situatedness* within life and death, particularly the issue of loneliness. As a psychosocial term on a diagnostic check sheet, the term loneliness is not adequate to describe the complicated nature of loneliness. It fails to describe the multiple ways loneliness plays out for patients at the end of life. Numerous times, I have heard patients express a state of extreme loneliness even when surrounded by family and friends. While loneliness includes a state of being alone without others, I suggest that it more accurately describes a path toward death. This path, even when accompanied by loved ones, is a difficult journey. The problem is to expand the idea of loneliness.

Psychological author Gendler J. Ruther writes, “loneliness lives in a large house in the middle of a large forest...She rarely speaks, and when she does no one listens or cares...There are no telephones in her house, and her doors and windows are always locked...No animal lives in her forest, not a one. Many people venture into her forest, but they never see each other. Some do not leave because they are lost and don’t know the



way out. Others stay because if they leave, they will have to deal with life.”<sup>1</sup> This life could very well be an unfamiliar life and uncomfortable to explore uncharted territory.

Gendler explains, how she come to personify the very nature of loneliness. She explains,

In *The Book of Qualities*, I personified 76 emotional and abstract human qualities ranging from Grief and Loneliness to Beauty, Harmony, and Wisdom. In December 1984, at the request of a junior high school English teacher, I talked to a class of 35 eighth graders about the qualities I had discussed in my book and about my approach to personifying human emotions... While discussing qualities in the classroom, the idea is to encourage students to take an inner feeling that is confused and tangled up with other feelings and put it outside themselves, where it can be observed with more clarity and detachment. This way, the quality becomes less personal. It is not just my loneliness, but the loneliness of being human. It is not simply my grief, but the grief of ancestors and friends and strangers. Discovering and rediscovering that we all experience these emotions in different ways is an invaluable experience.<sup>2</sup>

This loneliness looks like patients I attend daily in my hospice ministry. For example, the patient who lives in his spacious high-rise condominium, away from society and who lacks a family because she outlived them all.<sup>3</sup> She only has a hired caregiver tends to her thirst, and no one calls her other than Walgreens pharmacy. Access to the outside world seems miles away because she is unable to walk. Her residence, a 55 and over

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<sup>1</sup> J. Ruth Gendler, "Inner Voices: Learning about Human Qualities through Writing," *Mothering* 53 (Fall 1989): 82.

<sup>2</sup> Ruth, "Inner Voices," 82.

<sup>3</sup> The case studies used throughout this work are examples and patients cannot be identified, unless specifically noted with permission. All other studies use fictitious names to maintain privacy.

community, does not allow pets. Consequently, television is her only companion. My patient has not driven in years, and now there is nowhere to go even if driving was a possibility. She shares that the world beyond her window does not include her.

Sometimes when my patients trust me, I will learn of the visitors that come and pass high above their bed. They come but never stay. I ask if she is ever scared, and she assures me that she is not. She states that, “it’s kind of lonely when they do not come.” Sadly, almost ashamedly, she asks, “Is that normal? Is it something wrong with me?”<sup>4</sup> This study will investigate the answer and attend to the growing need of an improved understanding of loneliness.

### **Left Unattended: Loneliness as a Problem**

All of humanity faces trials at some juncture, but the communities engulfed with loneliness contend with the violent struggles, sickness, and silence. This is a violence of aloneness and misunderstood solitude. Consequently, few understand this oppression, of individual and communal identity, as a prophecy or path reuniting one with the divine the Whiteheads write in their book *Method and Ministry*, “whatever the challenge a faith community faces, its spiritual discernment begins in paying close attention to what the religious heritage, the surrounding culture, and the members’ experience have to say.”<sup>5</sup> In what ways is the church blindfolding opportunities to see and hear Jesus and others through the dying process? The formation of a ghetto results from the isolation of an entire population. Do the inroads toward death separate and ghettoize the misunderstood solitude of loneliness’s demand?

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<sup>4</sup> This makes me think of children and their imaginary friends.

<sup>5</sup> James D. Whitehead and Evelyn Eaton Whitehead, *Method in Ministry: Theological Reflection and Christian Ministry* (London: Sheed & Ward, 1995). 67.

Ghettos are groups forced to isolate, usually not by choice. Consider the definition from a dictionary, “a situation that resembles a ghetto especially in conferring inferior status or limiting opportunity.”<sup>6</sup> Society often views the dying as those requiring cradling and care with a dying non-liberated spirit. The ghettos of the 16<sup>th</sup> and 17<sup>th</sup> Centuries forcibly segregated Jews, as scholar Domonoske explains, “often walling them off and submitting them to onerous restrictions.”<sup>7</sup> From nursing homes to hospitals, the sick and the vulnerable are cast out of society’s sight. Rarely will one find homes that display the lonely in common areas. Instead, society hides and restricts the lonely. By the 19<sup>th</sup> Century, ghettos were everywhere, Nazi Germany became the most infamous example, isolating and controlling the resources of those they would later commit genocide upon.<sup>8</sup> What if we still have it all wrong in the 21<sup>st</sup> century? Within the ghetto of loneliness may reside society’s greatest resource. Loneliness carries much more than aloneness and separation from others.

Loneliness is a problem, and it consumes those who face the reality of death’s call. As hospice chaplains, our duties require us to assess patients and their families by identifying and rating levels of concern with spiritual symptoms. Everyday loneliness runs rampant in the dying process, yet the lonely never find fulfillment, and the root cause of their loneliness persists. Why does loneliness continue?

Patients retreat from such topics because they cannot find adequate depictions of themselves in the sources most important and assessable to their culture (people),

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<sup>6</sup> “Ghetto,” *Merriam Webster*, last modified March 5, 2018, para. 3, <https://www.merriam-webster.com/dictionary/ghetto>.

<sup>7</sup> Camila Domonoske, “Segregated from its History, How 'Ghetto' Lost its Meaning,” *NPR*, April 27, 2014, para. 4, <https://www.npr.org/sections/codeswitch/2014/04/27/306829915/segregated-from-its-history-how-ghetto-lost-its-meaning>.

<sup>8</sup> Domonoske, “Segregated from its History.”

experience, or church. Theologian, Robert Schreiter, whose interest greatly falls into faith and culture, asserts in his contextual model that, “urbanization and youthful population indicate[s] that much of that traditional religion and culture is being forgotten or not even learned.”<sup>9</sup> In particular, those who are the most marginalized, like the dying, tend to find self-identity through images, memories, and teachings that lacks a faithful introduction on *how to die*. The end of a person’s life is still a part of life, a very spiritual part of life. If the church and the academy fail to analyze their teachings of the end of life, a disservice to the whole community and the universal church has been committed.

### **Purpose**

This research uses the lenses of Practical Theology to look at end of life loneliness as primarily a theological and spiritual issue. It offers a number of insights and suggestions for practical theological and pastoral responses to this loneliness. This studies’ recommendation is for clergy, theologians in the academy, and the wider society in the United States who all need to hear the discourse of the dying. One of the common initial assessments asked of hospice chaplains to make about a patient is to explore his or her situatedness within life and death, particularly the issue of loneliness-experienced in-between the two. This psychosocial term on a diagnostic check sheet is not adequate to describe the complicated ways in which loneliness functions, or the multiple ways it plays out for patients at the end of life. Numerous times patients express a state of extreme existential loneliness despite the presence of family and friends. While loneliness includes a state of being physically alone, more accurately the description of loneliness is

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<sup>9</sup> Robert J. Schreiter, *Constructing Local Theologies* (Maryknoll: Orbis, 1985), 13.

to include the path towards death for those dying of a terminal illness. Moreover, this path exists even when accompanied by those who care deeply.

### **Using Practical Theology Lens: Seeking an Understanding of Loneliness**

Theologian and social scientist, Don Browning, made certain to include other disciplines and ways of thinking in hopes of providing better pastoral care and training.<sup>10</sup> There are four fields of a fundamental Practical Theology: descriptive theology, historical theology, systematic theology, and strategic practical.<sup>11</sup> All four fields relate to Practical Theology, particularly through their subfields, but one should not reduce Practical Theology to a subfield. Practical Theology dialogues with all of society and requires a practitioner. Moreover, Practical Theology is useful for making cross-confessional and ecumenical claims that bring all voices of religious tradition to the table. Within the field of Practical Theology, the practitioner adds value to the canvas through a word, phrase, story, or dialogue. When considering the task and direction of Practical Theology, it is, as Browning suggests, “arguably one of the most fascinating aspects of contemporary theology and is currently one of the fastest growing areas of theological study.”<sup>12</sup> Practical Theology has the ability to be accessible to others, beyond the theologian and used for the public good. Theologians Willows and Swinton in their introduction of *Spiritual Dimensions of Pastoral Care*, explain that Practical Theology gives ministers:

A way of applying theology to their daily encounters for academics, a way of looking at theology that acknowledges the significance of practice in the process

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<sup>10</sup> Herbert Anderson, “Memorandum for Don S. Browning,” *Reflective Practice: Formation and Supervision in Ministry* 31 (2011): 285-287.

<sup>11</sup> Don S. Browning, *A Fundamental Practical Theology: Descriptive and Strategic Proposals*. (Minneapolis: Fortress Press, 1991), ix.

<sup>12</sup> David Willows and John Swinton, “Introduction,” in *Spiritual Dimensions of Pastoral Care: Practical Theology in A Multidisciplinary Context*, ed. John Swinton and David Willows (London: Jessica Kingsley Publisher, 2000), 11.

of theological reflection; for the counselor, Practical Theology works itself out as a critical dialogue partner within the ongoing conversation with contemporary psychological theories; for the politically aware, Practical Theology provides a method and a perspective within which the need for social change can be highlighted and initiated; whilst for others, Practical Theology has to do with telling stories that create meaningful human existence.<sup>13</sup>

Practical Theology is seemingly a holistic approach to analyze and assess the needs of those dying, and a way to more appropriately address the contemporary state of emergency of loneliness. John Swinton and Harriet Mowat, authors of *Practical Theology and Qualitative Research*, make certain that “Practical Theology takes human experience seriously. One of the things that marks Practical Theology out as distinct from the other theological disciplines is its beginning point within human experience...Practical Theology acknowledges and seeks to explore the implications of the proposition that faith is a performative and embodied act; that the gospel is not simply something to be believed, but also something to be lived. Human experience is a ‘place’ where the gospel is grounded, embodied, interpreted and lived out.”<sup>14</sup> Practical Theology must be lived out for the world and the common good of all people.

Moreover as Swinton and Willows explain, “Practical Theology takes seriously and incorporates fully the diversity of human experiences (regarding them, not simply as illustrative material, but as unique ‘moments’ in the drama of divine revelation), the practical theological task therefore appears to be diverse.”<sup>15</sup> As such, Practical Theology

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<sup>13</sup> Swinton and Willows, “Introduction,” 11-12.

<sup>14</sup> John Swinton and Harriet Mowat, *Practical Theology and Qualitative Research* (London: SCM Press, 2006), 5-6.

<sup>15</sup> Swinton and Willows, “Introduction,” 12.

has the ability to honor diversity weaving together mysteries and experiences. The conviction to be relevant, as Swinton and Willows argue, allowing that “diversity is the strength and the beauty of a discipline that, in various ways, is committed to the possibility of encountering God within the diversity of human experience.”<sup>16</sup> As God speaks, Practical Theology hopes to reveal the still small voice of God in the dry places, in the lonely places and wherever God calls even unto death.

Theologians find themselves faced with problems that cause them to question the world around them. With differing contexts and faith traditions, these theologians understand that there is no one-way of *doing* or understanding the entire theological enterprise. Yet, certain the work of theology is to benefit competing cultures, collective and individual faith journeys, and better orient the world for imminent needs. Clergy and academics alike may find that as Swinton and Willows write that “Practical Theology has emerged as a vibrant and challenging mode of theology that not only applies, but also constructs and clarifies theological understandings, including our understanding of spiritual dimensions of pastoral care.”<sup>17</sup> Practical Theology is a way of transforming the world.

The *situatedness* of Practical Theology, as Malpas points out, works “to put the point more generally, and in more basic ontological terms, if we are to understand anything at all, we must already find ourselves ‘in’ the world ‘along with’ that which is to be understood. All understanding that is directed at the grasp of some particular subject matter is thus based in a prior ‘ontological’ understanding—a prior hermeneutical

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<sup>16</sup> Swinton and Willows, “Introduction,” 12.

<sup>17</sup> Swinton and Willows, “Introduction,” 13.

situatedness.”<sup>18</sup> Practical Theology therefore is a way to examine the *situatedness* of the contemporary world and cast vision for the way the world could be. Looking at the world in past tense, as *the way it was*, assumes that we have entered a new world and the past is no longer relevant. Practical theologians, cannot limit themselves from imagining a world *as it can be*. Practical Theology realizes, as Browning writes that “our past concerns shape the way we interpret the past. The reverse is also true. Solving our present ethical problems involves appropriating and reconstructing the past. These philosophical currents emphasize the importance of situation and how the situations of our inquiries inevitably color not only our practical thinking but all pursuit of knowledge and understanding.”<sup>19</sup> Therefore, Practical Theology integrates the past with today in hopes of transforming the future for all creation. Practical Theology aims not to oppress but to invite conversation and dialogue with all of society.

Browning suggests that *Descriptive Theology*, a strategy of Practical Theology, “helps implement love and positive regard.”<sup>20</sup> If Practical Theology can isolate any particular problem, the hope is to restore what was once positive. Browning writes, “the very act of doing descriptive theology is restorative. Understanding is important to both individuals and groups. If we have learned anything from the confluence of hermeneutic theory and psychotherapy, we have learned that understanding is a deep hunger of the human spirit. It gets to the heart of the universal human tendency to maintain a workable sense of self-esteem and self-cohesion.”<sup>21</sup> This would suggest that Practical Theology is

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<sup>18</sup> Jeff Malpas, "Hans-Georg Gadamer," in *The Stanford Encyclopedia of Philosophy*, ed. Edward N. Zalta, last modified September 21, 2016, chap. 2, sec. 2, <https://plato.stanford.edu/archives/win2016/entries/gadamer/>.

<sup>19</sup> Browning, *A Fundamental Practical Theology*, 198.

<sup>20</sup> Browning, *A Fundamental Practical Theology*, 284.

<sup>21</sup> Browning, *A Fundamental Practical Theology*, 284.



not about right or wrong, but at the basic level, the desire to be understood as a part of the bigger picture. Moreover, as Browning explains “it is difficult to maintain either an individual or group identity if people feel deeply misunderstood...our self or identity depends heavily on the attitudes of others toward us.”<sup>22</sup>

Practical Theology moves beyond intellectual concern alone, as theologian Chris Schlauch notes, “to a *praxis* of experiencing, understanding, and responding to everyday events in a way that express the joint heritage of Christian traditions and the human and social sciences.”<sup>23</sup> This allows access to the theologian and all of society, even to those reflecting at the end of life to enter into a praxis. Willows and Swinton write, “implicit in this emphasis upon the art of theological reflection is the conviction that Practical Theology is a praxis-based discipline. The word praxis essentially means ‘action.’”<sup>24</sup>

The hope is as Willow and Swinton explain that “a kind of transformation or change...[an] outcome that may come from the practical theological process are different ways of thinking about and understanding phenomena or situations. These may be expressed in the form of written or spoken words such as book, articles, or speeches. It may also be hoped and expected that the practical theological process will lead to people changing their attitudes and beliefs in practice so that they actually begin to behave differently.”<sup>25</sup>

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<sup>22</sup> Browning, *A Fundamental Practical Theology*, 284.

<sup>23</sup> Chris Schlauch, “Sketching the Contours of a Pastoral Theological Perspective: Suffering, Healing, and Reconstructing Experiencing,” in *The Blackwell Reader in Pastoral and Practical Theology*, ed. James Patton, James Woodward, and Stephen Pattison (Oxford: Blackwell, 2000), 207.

<sup>24</sup> Willow and Swinton, “Introduction,” 14.

<sup>25</sup> Stephen Pattinson and James Woodward, “An Introduction to Pastoral and Practical Theology,” in *The Blackwell Reader in Pastoral and Practical Theology*, eds. James Woodward and Stephen Pattison (Malden: Blackwell, 2000), 10.

However, properly understood, “Practical Theology refers to a particular form of action that one should not directly equate with the word ‘practice’; “for whereas practice implies the simple non-reflective performance of a task in a dispassionate, value-free manner, praxis denotes a form of action, which is valued-directed, value-laden and profoundly saturated with meaning. In short, praxis thus refers to a practical form of knowledge that generates actions through which the church community lives out its beliefs.”<sup>26</sup> Thus, the action after learning of something new or gaining a better understanding would be to do better.

Humanity should help create the world the *Ultimate* intended and that world requires persons giving themselves for others. Practical Theology is a vital domain to review and pursue loneliness in hopes to transform the world for good. Everything lends itself to the possibility of change through an understanding of reality and one’s personal truth. Reality consists of one’s understanding of self, memory, and the relationship to the other. The responsibility of creating a world free of loneliness falls on people consumed with *their* own truths and the memories of human texts—remembering, as Hans-Georg Gadamer points out, “a text is not to be understood as an expression of life but with respect to what it says.”<sup>27</sup>

Presbyterian minister and Princeton Theological Seminary professor, Richard Osmer, writes, “Practical Theology often provides help by offering models of practice and rules of art.”<sup>28</sup> For Osmer, Practical Theology expands the width and breath of the world, into the public, political, and social sciences and effective work comes from

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<sup>26</sup> Willow and Swinton, “Introduction,” 14.

<sup>27</sup> Hans-Georg Gadamer, *Truth and Method* (New York: Seabury Press, 1975), 394.

<sup>28</sup> Richard R. Osmer, *Practical Theology: An Introduction* (Grand Rapids: Eerdmans, 2008), 176.

“‘interconnectedness of memory’ which would be more adequate to retains own voice [and cultural significance].”<sup>29</sup> Retaining one’s own voice, as Osmer suggests gives a sense of ownership and celebrated diversity. Is it not a humanistic goal seeking ownership and one’s place in the world? This world and the next are often correlated through human experience.

Paul Tillich, a German American and 20<sup>th</sup> Century existentialist theologian and philosopher, created the method of correlation.<sup>30</sup> Ordained as a Lutheran, his method of correlation brought together two entities together to find an answer. Tillich’s aim “sought to correlate existential questions that were drawn from Human experience with theological answers offered by the Christian tradition.”<sup>31</sup> Tillich’s hope was that Christian symbols, along with scripture are truth, would provide answers for people in their unique situations. Though he brings an anthropological approach to this method, it does not leave truth to derive from the person alone. Truth for Tillich comes from correlating two divergences together such as human and Scripture or culture and Christianity. Thus, the answer arises in God’s revelation.

### **Methodology**

Practical Theology is a way to create an improved journey that connects congregations with the dying. The goal is to articulate practical theological concerns within loneliness near the end of life. This research will reflect on culture, church history, and experience. Furthermore, these reflections serve as a resource and challenge for

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<sup>29</sup> Osmer, *Practical Theology*, 241.

<sup>30</sup> Donna Mertens, *Research and Evaluation in Education and Psychology: Integrating Diversity With Quantitative, Qualitative, and Mixed Methods*, 2nd ed. (Los Angeles: Sage, 2000), 77.

<sup>31</sup> Mertens, *Research and Evaluation in Education and Psychology*, 77.

congregations and clergy to listen to marginalized persons. This study can be an aid in soliciting missing voices and a study for creating pastoral and ethical responses to the lonely.

To accomplish this goal, this dissertation uses Practical Theology to consider loneliness as a theological and spiritual issue at the end of life. In addition, the lens of practical theological will suggest responses to this loneliness, for use within academia, church and society the conclusion is both clergy and the academy need to listen to the discourse of the dying. Hospice chaplains must frequently make assessments about a patient's *situatedness* within life and death, particularly the issue of loneliness between the two.

Loneliness nearing the time of death is the period of reflection where hope diminishes in search for purpose and approval. The space and time between diagnosis and death live in often-surreal conditions and can include a time of inner reflection and judgment that sets the stage toward a season of loneliness.<sup>32</sup> There remain missed opportunities for accompanying the dying in the direction of peace, resulting in failure to connect and reconnect spiritually to their ultimate concern. Tillich states, “ [humankind], like every living being, is concerned about many things, above all about those which condition his very existence...If [a situation or concern] claims ultimacy it demands the total surrender of him who accepts this claim...it demands that all other concerns...be sacrificed.”<sup>33</sup> In this study, the following questions are examples of what will be explored: In what ways does loneliness represent the ultimate concern that can only be

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<sup>32</sup> Paul Tillich, *Dynamics of Faith* (New York: Harper Collins, 1957), 2.

<sup>32</sup> James D. Whitehead and Evelyn Eaton Whitehead, *Method in Ministry: Theological Reflection and Christian Ministry* (London: Sheed & Ward, 1995), 13.

<sup>33</sup> Tillich, *Dynamics of Faith*, 2.

answered in a solitary manner at the end of life? How are we to distinguish the concepts of loneliness, aloneness, solitude, and isolation in the dying process? Finally, how does the Christian church speak to these concepts?

This study engages the three stages of theological reflection presented by James and Evelyn Whitehead. Evelyn Whitehead, a developmental psychologist, and James Whitehead, a pastoral theologian, suggests a three-stage method that I will use to bring theological reflection on loneliness following a terminal diagnosis. The most full-bodied and reflective approach is the “method of theological reflection describes how the conversation about our religious heritage, our experience, and our cultural life proceeds. This dynamic moves from listening to assertion to pastoral response.”<sup>34</sup> The first task of *attending* sets the stage of my pastoral concern through gathering literature on loneliness using the Christian tradition, social sciences, personal experiences as a chaplain, and relevant cultural resources. Culture is not always a choice but rather a place in time where multiple voices prompt a particular and unoriginal response. The goal is to demonstrate and, as the Whiteheads explain, “actively engage this information by bring the different perspectives into assertive dialogue. These movements of listening and assertion require skill: not only textual and hermeneutical abilities—the theological skills of attending, but interpersonal abilities—the skills to listen well to other people’s experience and insight.”<sup>35</sup> The dying have so much experience to glean from and be present.

The second task *allows* each discipline to challenge, share, and banter in full discussion with mutual respect. The assertion process, as the Whiteheads describe it, “requires a similar breadth, as pastoral reflection sustains the tension of differing

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<sup>34</sup> Whitehead and Whitehead, *Method in Ministry*, 5.

<sup>35</sup> Whitehead and Whitehead, *Method in Ministry*, 5.

interpretations not only among participants but in Scripture and tradition as well. Traditions vary through the centuries, various families and ultimately the interpretations. These traditions include the interpretation of written text, such as Scripture and the human response, including sadness and becoming withdrawn. It is out of “such assertively maintained tensions, theological insight and pastoral decisions begin to emerge.”<sup>36</sup> The practical theologian responsibility it be faithful and just in the listening and honoring of such sacred information to being about a more informed understanding.

The third task is the *pastoral response*, “discerning how to respond; planning what to do,” and offering examples for a praxis for those experiencing and ministering to those who live with loneliness.<sup>37</sup> The goal of finding a pastoral response is to ensure an answer to the question, is loneliness to be jettisoned, or eradicated before one dies? The answer is meshed in the insights found in this study. The author of this model affirms, “sometimes the fruit of pastoral reflection is change, even significant transformation. Sometimes an established policy or familiar practice is re-affirmed, now at a deeper level of commitment.”<sup>38</sup> The commitment and response are for those who are dying for those experiencing loneliness.

Taking seriously, the information learned from the patient or person who is at the end of life, the wisdom learned requires serious attention. The Whiteheads state, In the light of the previous discussion it is important to observe one thing which is often overlooked in discussion around the nature of Practical Theology. While we have suggested that the starting point for Practical Theology is human experience,

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<sup>36</sup> Whitehead and Whitehead, *Method in Ministry*, 5.

<sup>37</sup> Whitehead and Whitehead, *Method in Ministry*, 13.

<sup>38</sup> Whitehead and Whitehead, *Method in Ministry*, 16.

in fact this is not strictly the case. God and the revelation that God has given to human beings in Christ is the true starting point for all Practical Theology. The discipline of Practical Theology emerges as a response to and recognition of the redemptive action of God-in-the-world and the human experience which emerges in response to those actions. It is in taking seriously those responses that Practical Theology finds its vital initial reflective position and carves out an important position within the wider theological enterprise.<sup>39</sup>

Furthermore, theological reflection through Practical Theology will best serve my research.

This research is focused on loneliness after receiving a terminal diagnosis. While not all persons participate in hospice, the research is a hospice chaplain, and witness loneliness daily. Sometimes I witness persons in their private home, sometimes I spend time in in-patient units in local hospitals. These patients are either waiting discharge to return home after getting a symptom under control or awaiting a heavenly discharge. In hospice, the terminal diagnosis is what allows us to begin administering end of life care. End of life care or hospice is “considered to be the model for quality, compassionate care for people facing a life-limiting illness or injury, hospice care involves a team-oriented approach to expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient’s needs and wishes.”<sup>40</sup> Moreover, as their chaplain, the task to journey along with is sacred, in high moments of reflective joy and even in the valleys of loneliness.

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<sup>39</sup> Swinton and Mowat, *Practical Theology and Qualitative Research*, 11.

<sup>40</sup> “Hospice Care” *National Hospice and Palliative Care Organization*, last modified April 30, 2017, para. 1, <https://www.nhpco.org/about/hospice-care>.

Ettema, Derksen, and van Leeuwen writes that loneliness or “existential loneliness is mostly experienced in life-threatening situations because it is in the confrontation with death that one is most aware of one’s own fundamental aloneness. This loneliness can be nullified neither by the presence of others nor by an adequate dealing with feelings—isolation of having to die alone remains.”<sup>41</sup> It is in the process of dying, the journeying to the end of life that seems so be a place where both the practitioner and the dying lack a viable understanding of loneliness. Ettema, Derksen, and Leeuwen conclude, “loneliness of the dying refers to at least three different conditions...social loneliness, which is the feeling of sadness and longing that results from a lack of an engaging network.”<sup>42</sup> People can be around but the sense of connection to others seemingly decreases. This extends into “social loneliness often occurs in dying due to a decline in health, a decreased network, loss of social roles, and loss of partner and family.”<sup>43</sup> Maybe the patient is no longer able to weekly BINGO or have an awareness that their skills are pushed aside or no longer needed. Secondly, “loneliness of dying may refer to emotional loneliness, which is the feeling of utter aloneness even in the presence of others and which results ultimately from a lack of an attachment figure. Emotional loneliness relates to dying as people may have great difficulties in understanding and expressing their emotions concerning their approaching death.”<sup>44</sup> Thirdly, they explain that “loneliness of dying may refer to existential loneliness (EL). EL is understood as an intolerable emptiness, sadness, and longing, that results from the

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<sup>41</sup> Eric J. Ettema, Louise D. Derksen, and Evert van Leeuwe, “Existential Loneliness and End-Of-Life Care: A Systematic Review,” *Theoretical Medicine Bioethics* 31, no. 2 (April 2010): 142, doi: 10.1007/s11017-010-9141-1.

<sup>42</sup> Ettema, Derksen, and van Leeuwe, “Existential loneliness and End-of-Life Care,” 142.

<sup>43</sup> Ettema, Derksen, and van Leeuwe, “Existential loneliness and End-of-Life Care,” 142.

<sup>44</sup> Ettema, Derksen, and van Leeuwe, “Existential loneliness and End-of-Life Care,” 142.



awareness of one's fundamental separateness as a human being."<sup>45</sup> When humanity is no longer enough to satisfy the desires and longings of the heart. For the sake of this research, all aspects of loneliness are existential loneliness. Therefore, I use loneliness and existential loneliness interchangeably. Loneliness is an experience that, as Natale explains, "serve a positive function of drawing attention to a deficit" an emptiness at the end of life.<sup>46</sup> Browning notes that Practical Theology "attempts this deep understanding of others, their situations, and their identities,"<sup>47</sup> the very attempt of trying to understand the loneliness of those who are dying may communicate an affirmation in their journey of loneliness towards death. This cannot be done apart from life and identity of the one who is dying.

Practical theologians find themselves faced with problem(s) that causes them to question what is happening around them. This enables them to exercise their understandings of the theological field. Because of differing contexts, foregrounding and faith traditions, these theologians find themselves working in areas most applicable to their fields of work and community need. Therefore, there is no one way of *doing* or understanding the entire theological enterprise, yet *I'm* certain it is to benefit ones' faith journey and better orient ministerial reflections for imminent needs.

Practical Theology is a way of transforming the world. It is a highway of various methods, strategies with no method and methodologies for achieving such a goal. Practical Theology is called to look at the *situatedness* of the world today and vision for the way the world could be. To simply look at the world in past tense as *the way it was*,

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<sup>45</sup> Ettema, Derksen, and van Leeuwe, "Existential loneliness and End-of-Life Care," 142.

<sup>46</sup> Samuel M. Natale, *Loneliness and Spiritual Growth* (Birmingham: Religious Education Press, 1986), 31.

<sup>47</sup> Browning, *A Fundamental Practical Theology*, 284.

would assume that we have entered into a new world and the past is no longer relevant or of concern. Practical theologians cannot limit themselves nor all of humanity from imagining a world *as it can be*. Therefore, Practical Theology often integrates the past with today in hopes of transforming the future for all creation. Practical Theology aims are not to oppress, rather they are to invite conversation and dialogue with all of society. Practical Theology moves beyond intellectual concern alone to a praxis or action.

Often persons seek to find and make manifested the perfect utopia. As a practical theologian one is looking for God and finds themselves in relation to God to help bring about a world the Ultimate intended. The spiritually inspired Bible written by humans, embedded theologies, symbols, and signs has great value and cannot be undermined or rejected. Practical Theology is the domain in which those things can be critiqued and questions to transform the world for good.

Practical Theology is everything that lends itself to change through an understanding of reality. In addition, reality is someone's understanding and in which that understanding does not belong to the interpreter alone. The empirical work of Practical Theology is clarifying the experiences and data of a given society. It is descriptive, quantitative, and anthropologic, while correlating the *other* with the subject of God and self for the function of action.

## CHAPTER TWO: LONELINESS STATE OF EMERGENCY

### Background of Loneliness

Through a theological lens, this chapter provides a literature review on the concept of loneliness to develop a foundation for this theological study of loneliness. This research on loneliness will consider psychological and sociological sources as well as providing an in-depth look at hospice and the aging process in light of loneliness. The use of sociology gives a scientific perspective. Bharat Kumar believes sociology is important because, “before the emergence of sociology, there was no systematic and scientific attempt to study human society with all its complexities.”<sup>48</sup> In addition, psychology adds the scientific dimensions of an individual’s behavior and mental processes. This chapter will also interweave personal insights and culture observations into the scholarly sources to provide a holistic, theological understanding of loneliness.

From a professional standpoint, hospice workers are dedicated to working holistically with those who are at the end of life; therefore, hospice workers have the most experiences of human loneliness within society. This review will explore background information about loneliness, a definition of loneliness, spiritual factors of loneliness, cultural factors of loneliness, multicultural factors of loneliness, loneliness in culture and consumer culture, the age and dying culture in light of loneliness, and last conversations and insights into loneliness.

It is vital for any theological study of loneliness to begin by examining loneliness in light of the aging process. The world’s population is rapidly aging. The World Health

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<sup>48</sup> Bharat Kumar, “What is the Importance of Studying Sociology?,” *Preserve Articles*, accessed July 12, 2018, para. 3, <http://www.preservearticles.com/201102214067/what-is-the-importance-of-studying-sociology.html>.

Organization predicts that, “between 2000 and 2050, the proportion of the world’s population over 60 years will double from about 11% to 22%. The number of people aged 60 years and over is expected to increase from 605 million to 2 billion over the same period,”<sup>49</sup> all with the potential to experience loneliness before death. The Nilewide Marketing Review finds that, “there are increasing numbers of people living in single person households and elder people (one in six over 65) who often or always experience loneliness. Dealing with loneliness may be a key societal task in the years to come.”<sup>50</sup> Medical doctor Sanja Gupta discussed in a CNN segment, “Science of Loneliness,” he believes that loneliness contributes to upward of 45 percent of the causes of an early death and additional ailments.<sup>51</sup> As such, loneliness must be combated. Still, the long-standing method and response to those dying in loneliness is presence and exploring Kubler Ross’s Five Stages of Death: denial, anger, bargaining, depression, and acceptance.<sup>52</sup> This brings up a fundamental question about loneliness: When society has been taught to live, how does one accept death or even the plight towards death? It is the one who is experiencing “the dying” that becomes the teacher of such stages and the loneliness.

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<sup>49</sup> “Facts about Aging,” *World Health Organization*, September 30, 2014, para. 1, <http://www.who.int/ageing/about/facts/en/>.

<sup>50</sup> “The Risks of loneliness,” *Nilewide Marketing Review*, October 3, 2004, para. 1, *General One File*.

<sup>51</sup> Sanjay Gupta, “The Science of Loneliness,” *CNN*, posted February 20, 2014, <http://www.cnn.com/videos/bestoftv/2014/02/20/pmt-dr-sanjay-gupta-gayle-king-science-of-loneliness.cnn>.

<sup>52</sup> Elisabeth Kubler-Ross, *On Death and Dying: What the Dying Have to Teach Doctors, Nurses, Clergy and Their Own Families* (New York: Scribner, 1997).

<sup>53</sup> Jamie Chamberlain, “Friendlier Ties to Good Health: Our Social Environment Isn't Always Good Medicine,” *American Psychological Association*, accessed February 23, 2015, <http://www.apa.org/monitor/oct04/goodhealth.aspx>.

Research suggests additional research is needed to develop appropriate responses and interventions for those in challenging environments such as loneliness and isolation.<sup>53</sup> People experiencing loneliness can be found at homes surrounded by family. And they can also be found in other challenging environments such as nursing homes, assisted living facilities, and even bedrooms that have become ghettos not of our own choosing.

The research on loneliness will consider psychology, sociology, and an in-depth look at hospice and the aging. The use of sociology gives a scientific perspective. Sociology is important because, as Kumar argues, “before the emergence of sociology, there was no systematic and scientific attempt to study human society with all its complexities.”<sup>54</sup> In addition, psychology adds the scientific dimensions of an individual’s behavior and mental processes.<sup>55</sup> Cronin-Marthaler explains that the hospice program “affords palliative and supportive care to meet the special needs arising out of the physical, emotional, spiritual, social, and economic stresses that are experienced during the final stages of illness, and during dying and bereavement. An interdisciplinary team, under the direction of an autonomous hospice administration, provides the care.”<sup>56</sup> Directions are conveyed from the hospice administration. Cronin-Marthaler, hospice researcher states:

Care is provided by a physician-directed team that invariably includes a nurse and several if not all the following: a social worker, a pastoral counselor, a dietician,

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<sup>54</sup> Kumar, “What is the Importance of Studying,” sec. 1.

<sup>55</sup> “Glossary of Psychological Terms,” *American Psychological Association*, accessed May 11, 2015, <http://www.apa.org/research/action/glossary.aspx?tab=16>.

<sup>56</sup> M. Cronin-Marthaler, “Hospice Movement,” in *New Catholic Encyclopedia*, ed. Reverend Berard Marthaler, 2nd ed., vol. 7, 117-118, (Detroit: Gale, 2003), 117-118.

and volunteers to assist the patient and family with personal care and the chores of daily living. Despite the recognized need for a more humane and sensitive approach to palliative care, the hospice movement in the U.S. has not become more widespread because of financial, organizational, legal, and psychological obstacles. Major strides have been made in funding, with 95 percent of the daily sum covered by health care, the remaining five percent being obtained by volunteer hours.<sup>57</sup>

The legacy of hospice is growing. As Cronin-Marthaler explains, “the National Hospice Organization (NHO), established in 1978, has as its primary functions the promotion of hospice care, research, consultation, education and the advocacy of patients’ interests, as well as those of their family and care givers. Presently, there are more than 3,000 organizations providing hospice interests.”<sup>58</sup> Practitioners are seeing the increase need for intentional care.

Unfortunately, people rarely receive discussion or teaching tools about death, dying, and loneliness before the need for hospice arises. Frequently, I have had patients and families share how the dying process is more complex than they imagined, especially when compared to how death is portrayed on television. *Grey’s Anatomy*, a popular primetime television show, is an excellent teacher about death and dying, or not.<sup>59</sup>

In Season Eleven, Episode 16, a patient with Alzheimer’s disease enters the emergency room following an accident. During the accident, the Alzheimer’s patient severely injured a pregnant woman and her unborn child. The doctors fear the man was

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<sup>57</sup> Cronin-Marthaler, “Hospice Movement,” 117-118.

<sup>58</sup> Cronin-Marthaler, “Hospice Movement,” 117-118.

<sup>59</sup> Andy Reaser, “Don’t Dream It’s Over,” *Grey’s Anatomy*, season 11, episode 16, directed by Susan Vaill, aired March 19, 2015 (New York, NY: ABC Studios, 2015), DVD.

driving drunk until his wife informs the staff of his disease. The hospital staff saves the baby, but the mother dies unexpectedly from a massive intracranial bleed. The staff discovers that the protagonist does not have Alzheimer's disease but a treatable condition. However, the doctors must move quickly with the patient's permission. The patient refuses treatment after learning of the harm he caused to others and dies. In a one-hour segment of *Grey's*, several lives are forever changed, and deaths occur.<sup>60</sup> There were no extensive overnight stays, and no one was transferred to the nursing home or referred to hospice care placement in the home. Death came quickly without mention of the many implications that accompany dying at the end of life. Yet, the main character experienced a loss of control, and the predicaments that loss caused was too much for him to handle.

According to the American Psychological Association, "an older adult may also sense a loss of control over his or her life due to failing eyesight, hearing loss and other physical changes, as well as external pressures such as limited financial resources. These and other issues often give rise to negative emotions such as sadness, anxiety, loneliness and lowered self-esteem, which in turn lead to social withdrawal and apathy."<sup>61</sup> This misunderstood solitude of loneliness demands a new assessment and course of resolve. While medication is used to reduce pain, often a greater sense of presence is used to reduce loneliness. But will the presence of others reduce or even take away the loneliness and is that the goal?

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<sup>60</sup> Reaser, "Don't Dream it's Over."

<sup>61</sup> "Aging and Depression," *American Psychological Association*, accessed February 23, 2015, para. 3, <http://www.apa.org/helpcenter/aging-depression.aspx>.

## Definitions of Loneliness

Bill is a friend from seminary who I watch closely through the means of Facebook now, due to the great physical distance between us. For some time now, I see how he maneuvers through life differently. After his terminal diagnosis, he posted on his Facebook page the following on July 18, 2017:

Thinking about yesterday. Below is an excerpt from my book in progress. This is from "When Faith and Cancer Collide" So, how do I feel? At times I want to say that it is ridiculous and unfair that one person should have an early diagnosis of four primary cancers and walk away almost unscathed while a myriad of cancer sufferers struggle to stay alive or succumb to the onslaught of malignancy. I have no way of knowing how long multiple myeloma had been smoldering away in my body nor would knowing make a great deal of difference now as there is no cure. So, what can I say? I am rarely speechless, but the last few years I have had no adequate words.

Resisting any temptation to claim a special blessing or dispensation from God. I linger in the shadow of uncertainty cast by cancer. Meanwhile I am filled with awe and gratitude. How can this be? I don't know. It just is. Amen.<sup>62</sup>

To understand loneliness from a theological perspective, it is important to define what loneliness is and what it is not. Bill Holmes describes loneliness as a new reality. He further writes on his Facebook page:

Living in a new reality. All it takes is one minute, one brief event, or one spoken word, and your reality is changed forever. It takes a while to learn to live with

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<sup>62</sup> Bill Holmes, "New Reality," *Facebook*, July 18, 2017, <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf>.



whatever, even while we are exhorted to pray for a ‘miracle.’ I say “learn” but living in a new reality comes as a gift, not by way of some magical formula, some great plan. It is an “Aha!” moment that seems to arise out of nowhere, perhaps amid our own feeble attempts to make sense of it all. And therein lies the ‘miracle.’<sup>63</sup>

Bill certainly understands there is something different about life, about himself, and seems to measure carefully next steps, thoughts and even request as noted above. As he “linger in the shadow of uncertainty” he speaks of himself lurking to find the words to describe how he feels. Cancer put him there; the awareness of his terminal diagnosis threw him into this new reality. The multiple myeloma smolders in his body and he is seemingly cast into shadows yet filled with awe. What do practitioners know about this awe Bill notes? This awe does not sound pensive, but rather seemingly a possible place of peace. A place that even surprises the writer as he tries to balance this new position in life and understanding the feelings and emotions connected to it.

Samuel Natale, author of *Loneliness and Spiritual Growth*, explores the problem of loneliness. He explains “balances his attention on the cognitive, behavioral, and affective dimensions of loneliness.”<sup>64</sup> To find the definition of loneliness, one has “to analyze experiences of it, to measure it. Surprisingly, for so global a phenomenon, relatively scant attention has been given to loneliness.”<sup>65</sup> According to Natale, “a corollary thought is based on an unspoken assumption that if persons are lonely, it is their task to find a solution as if the loneliness is due to an remedied solely by their personal

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<sup>63</sup> Bill Holmes, "New Reality," *Facebook*, November 28, 2016, <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf> .

<sup>64</sup> Samuel M. Natale, *Loneliness and Spiritual Growth* (Birmingham: Religious Education Press., 1986), 7.

<sup>65</sup> Natale, *Loneliness and Spiritual Growth*, 7.

initiative...or perhaps [they are] not really trying.”<sup>66</sup> This becomes a “person-centered affliction which the person must control by some willed effort...[and] met with advice on how to eliminate the condition. Often the advice takes the form of “get out and meet people.”<sup>67</sup> For my friend Bill, in his note, he did not articulate the need to get out or even the desire to meet others. He did express a want to better understand to even explain how he feels. He simply states, there are *no adequate words* for this moment.

Olga Szucs, who was a professor at the Institute of Slavic Studies of the University of Debrecen (Hungary) through a philosophical interpretation states, “loneliness is a primarily contextual alienation from the ongoing real processes, and as such, it is characterized by the absence of freedom as in ontological, so in epistemological and psychological senses. It is a principle that freedom for humanity is always closely associated with conceptuality.”<sup>68</sup> To be alienated, is to be pushed aside, ghettoized from the desired real world. This freedom of pre-loneliness becomes dissolved with the knowledge of knowing, and the awareness of the altered process of living. Szucs enlisted a thought, if this is true, the use of all of one’s senses would become altered. And it may be this change, this greater awareness of the fragility of life that ostracizes the lonely. Therefore, practitioners must distinguish between solitude and seclusion; as Boris Markov argues “the former is advantageous as it is required for both self-knowledge and spiritual activities; the latter is not favorable, as it compromises the social matter

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<sup>66</sup> Natale, *Loneliness and Spiritual Growth*, 7.

<sup>67</sup> Natale, *Loneliness and Spiritual Growth*, 7.

<sup>68</sup> Olga Szucs, “Theoretical and Practical Aspects of the Phenomenon of Loneliness in a Culture: Hygienic Context,” in *The Phenomenon of Loneliness: Actual Questions of Hygiene of Culture: Collective Monograph*, eds. M. V. Biryukova, A. V. Lyashko, and A. A. Nikonova (St. Petersburg: Russian Christian Academy for the Humanities, 2014), 14.

and leads to degradation of powerful bonds between people.”<sup>69</sup> The state of being different or more aware does not seem to promote those experiencing loneliness but rather leave them on the margins of indifference and different.

One major type of loneliness that researchers have defined is transient loneliness. Transient loneliness, as Natale, describes it “is not often the center of research among psychologist, sociologist, or anthropologist. Each of these disciplines deals with more extreme forms of loneliness. The psychologist treats experiences of anomie or depression; the sociologist writes of alienation; the anthropologist compares the solitude experiences of diverse cultures.”<sup>70</sup> Practical theology provokes similar questions as Natale points out when he asks, “is loneliness depression or alienation or anomie? Who then deals with loneliness? Any or all of the above?”<sup>71</sup> All clinicians involved in the care of people ought to be immersed in the matter of loneliness. The preacher/chaplain and the academic too, must seek those dying with loneliness to become learners for the sake of teaching.

Because the experience of loneliness can be unpleasant, Natale suggests, “there is an implicit notion that loneliness is unpleasant and therefore must be alleviated if not eliminated completely.”<sup>72</sup> Moreover, there are some, “who see loneliness in a more positive light, who while not advocating loneliness approach it as a desirable and even necessary experience.”<sup>73</sup> Even from the margins of life and loneliness, there is light to be seen and experienced. Likewise, loneliness found on the margins possess a light to guide

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<sup>69</sup> Boris Markov, "Solitude and Alienation," in *The Phenomenon of Loneliness: Actual Questions of Hygiene of Culture: Collective Monograph*, eds. M. V. Biryukova, A. V. Lyashko, and A. A. Nikonova (St. Petersburg: Russian Christian Academy for the Humanities, 2014), 19.

<sup>70</sup> Natale, *Loneliness and Spiritual Growth*, 7.

<sup>71</sup> Natale, *Loneliness and Spiritual Growth*, 7.

<sup>72</sup> Natale, *Loneliness and Spiritual Growth*, 18.

<sup>73</sup> Natale, *Loneliness and Spiritual Growth*, 18.

the way forward. In addition, he writes that “loneliness is being explored as a unique experience, other similar experiences continue to be linked to it. Their connection with loneliness in either leading to it or as a result of it causes some confusion as to the merit of or liability of loneliness. These experiences are depression, aloneness, and solitude.”<sup>74</sup> These distinctive characteristics of loneliness have not yet determined by practical theology to be completely positive or negative.

The differences must be articulated to better understand loneliness. Natale writes that the “existentialist views loneliness as a given. It is a basic condition of life...loneliness, then, serves as a precondition for companionship. By itself it is valueless; it has no positive or negative value until it is confronted by its opposite—an opportunity for community.”<sup>75</sup> J. P. Flanders, explains that “loneliness should not be eliminated. Rather it should be controlled because it is a valuable feedback mechanism with important survival value to both the individual and the nation.”<sup>76</sup> An existentialist might say that people do not “think or feel we are alone all the time and at every moment; I think we really are, but we are not always aware of it”<sup>77</sup> While Szucs believes such transcendent loneliness, when contextualized and “applied to the problem of loneliness has a fundamentally different character. It considers the human loneliness as universal loneliness, a transcendent character; the loneliness of a [human] separated from God.”<sup>78</sup> In terms of ontology, she goes on to offer that the phenomenon of loneliness holds

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<sup>74</sup> Natale, *Loneliness and Spiritual Growth*, 18.

<sup>75</sup> Natale, *Loneliness and Spiritual Growth*, 18.

<sup>76</sup> Natale, *Loneliness and Spiritual Growth*, 19.

<sup>77</sup> Natale, *Loneliness and Spiritual Growth*, 19.

<sup>78</sup> Szucs, "Theoretical and Practical Aspects," 13.

the closest link to the psychological mind and to a person's self-image, to their way of being alive.<sup>79</sup>

Whereas Moustakas, Sadler, and Johnson “agree with this basic positive stance regarding loneliness, but they draw back from the strict existentialist view that individuals are “utterly and forever alone.”<sup>80</sup> They qualify their position by positing individuals' personal world as complex, and so while loneliness is an important “signal” from the network it is neither the most important nor the most authentic one.<sup>81</sup>

Natale's research discovered multiple dimensions to loneliness. He explains, “when people are affected by only one dimension of loneliness they seem well able to cope with the distress. When, however, they face loneliness on more than one dimension, the ensuing stress, where it comes from and how to ‘divide and conquer,’ is sometimes difficult to manage.”<sup>82</sup> Barlow, Lui, and Wrosch suggest, “that baseline levels of chronic illness were associated with increases in older adults' loneliness. Whereas participants with high level of chronic illness experienced a steep increase, feelings of loneliness remained relatively stable among their counterparts who experienced relatively low levels of chronic illness.”<sup>83</sup> They continue by observing that:

This study examined whether levels of chronic illness predict enhanced feelings of loneliness in older adulthood. In addition, it investigated whether engagement in health-related self-protection (e.g., positive reappraisals), but not in health engagement control strategies (e.g., investment of time and effort), would buffer

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<sup>79</sup> Szucs, "Theoretical and Practical Aspects," 13.

<sup>80</sup> A. Rokach, “Coping with loneliness among the terminally ill,” *Social Indicators Research* 83, no. 3 (2007): 490, doi:10.1007/s11205-006-9047-5.

<sup>81</sup> Natale, *Loneliness and Spiritual Growth*, 19.

<sup>82</sup> Natale, *Loneliness and Spiritual Growth*, 20.

<sup>83</sup> Lui Barlow and C. Wrosch, "Chronic Illness and Loneliness in Older Adulthood: The Role of Self-Protective Control Strategies," *Health Psychology* 34, no. 8 (2015): 870-879, doi:10.1037/hea0000182.

the adverse effect of chronic illness on older adults' feelings of loneliness.

Method: Loneliness was examined repeatedly in 2-year intervals over 8 years in a longitudinal study of 121 community-dwelling older adults (Time 1 age 64 to 83 years). In addition, levels of chronic illness, health-related control strategies, and sociodemographic variables were assessed at baseline. Results: Growth-curve models showed that loneliness linearly increased over time and that this effect was observed only among participants who reported high, but not low, baseline levels of chronic illness. In addition, health-related self-protection, but not health engagement control strategies, buffered the adverse effect of chronic illness on increases in loneliness. Conclusions: Loneliness increases in older adulthood as a function of chronic illness. Older adults who engage in self-protective strategies to cope with their health threats might be protected from experiencing this adverse effect.”<sup>84</sup>

Most often as patients aged and became more ill, their encounter with loneliness had greater chances of surfacing and proving to be chronic; almost inescapable. Natale states that “this intense stress may lead to anomie. It is our contention that anomie, at least in many instances, is a consequence of severe unresolved loneliness encountered on two or more dimensions within a person’s world.”<sup>85</sup> So therefore, if a person was already lonely after an unfavorable diagnosis, the loneliness may become severe.

### **Loneliness and Depression**

Depression and loneliness are often interchangeable. Natale explains that, “depression, a negative manifestation of loneliness, might be found within this context of

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<sup>84</sup> Barlow and Wrosch, "Chronic Illness and Loneliness in Older Adulthood," 870-879.

<sup>85</sup> Natale, *Loneliness and Spiritual Growth*, 20.

more than one dimension of loneliness.”<sup>86</sup> Other developments, according to Natale, “contend that depression and loneliness are not coextensive. That is, those who are depressed may also be lonely and those who are lonely may become depressed”<sup>87</sup> Therefore, a personal response to loneliness can manifest “with depression or some other emotion.”<sup>88</sup> Loneliness alone, seems to be difficult to navigate, loneliness and other stressors, makes the situation severe. When depression is added, the growing unresolved loneliness can become deadly.

A. D. Weisman completed a study of cancer patients after learning their diagnosis. Weisman proposes, “four psychological stages that cancer patients experience.” These stages include:

(a) the *existential plight* stage – a period of about 100 days beginning with the diagnosis and extending through primary treatment; (b) the *migration and accommodation* stage – when the patients’ behavior is the psychosocial equivalent of having the disease, even during remission; (c) the *decline and deterioration* stage; and (d) the *pre-terminality and terminality* stage. Feelings of hopelessness, helplessness, and fear of death are present in the minds of patients during each stage, and patients typically lack the social and emotional support they desperately need which may lead to feelings of loneliness”<sup>89</sup>

Researchers have studied multiple sclerosis in a similar way. Multiple sclerosis (MS) is a chronic disease of the central nervous system, as Rokach explains, “it is a progressive, demyelinating disease of the central nervous system. Its etiology is still unknown, and

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<sup>86</sup> Natale, *Loneliness and Spiritual Growth*, 20.

<sup>87</sup> Natale, *Loneliness and Spiritual Growth*, 20

<sup>88</sup> Natale, *Loneliness and Spiritual Growth*, 20

<sup>89</sup> Rokach, “Coping with loneliness among the terminally ill,” 490.

there is no cure or predictably effective treatment”<sup>90</sup> Thus, “common symptoms of MS include fatigue, visual abnormalities, bladder and bowel dysfunction, reduced mobility, cognitive impairment, and emotional disturbance. Rokach notes that, “loneliness is a universal phenomenon, and its pain is intensified by a diagnosis of a terminal illness. The present study is an investigation of the strategies used by patients with Multiple sclerosis (MS), by individuals diagnosed with cancer, and by the general population to cope with loneliness. Three hundred and twenty-nine MS patients, 315 cancer patients, and 391 participants from the general population answered a 34-item questionnaire.

Results indicated that with the exception of Reflection and Acceptance, Distancing and Denial, and Increased Activity, the three groups cope with loneliness significantly differently. “With those wide-ranging symptoms, and since MS usually strikes during the productive years of life, issues related to employment, and to connection to one’s family and social support network, are often prominent. Emotional difficulties, commonly depression, may follow.”<sup>91</sup> While specifics of loneliness are not available for MS patients, clinical psychologist, Ami Rokach states, “it has been observed that ‘illness’ is something, which affects the smooth working of our lives. It stops our work pattern, interferes with our relationships, allows pain or distress to invade us, and stops us from pursuing our dreams.”<sup>92</sup> Rokach contends, “ultimately one is alone with the diagnosis, with the need to receive treatment, and with the reality of one’s life being threatened. Nothing another contributes, no matter how valuable, can change this.”

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<sup>90</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.

<sup>91</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.

<sup>92</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.



Loneliness has been shown to be an integral part of ill health, whereas connectedness could significantly improve our overall health.<sup>93</sup>

Patients in these studies demonstrate, as Rokach shows, “that no one is self-sufficient, and one could not exist without the society in which one lives. In the present study, [Rokach] investigated the manner in which those with terminal illnesses cope with the loneliness that accompanies life threatening and socially feared diseases. Results demonstrated that those with MS and cancer cope with loneliness significantly differently from individuals in the general population.”<sup>94</sup> The diagnosis is feared, the loneliness propels and cast the journey into the ghettos of society, and on to the margins of unfamiliarity.

As Rokach looked towards coping strategies, he finds:

The most salient coping strategy – and the factor that accounted for the highest variance in their study – was reflection and acceptance, loneliness as including a feeling of inner void, a detachment from one’s self, and an alienation from one’s core identity. As such, Reflection and acceptance highlights the inability to deal effectively with loneliness without having an encounter with one’s self that involves the direct straightforward facing of one’s loneliness. Such an encounter requires a willingness to experience fear, anger, agony, and disillusionment. In light of the present findings, it appears that regardless of one’s health, turning loneliness into solitude is experienced as highly beneficial across samples.<sup>95</sup>

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<sup>93</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.

<sup>94</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.

<sup>95</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 496.

According to psychologist, Clark Moustakas, such a joy precipitates “a joyous experience of self-discovery, a real meeting of self-to-self... it includes a sense of harmony and well-being... [and a way] of advancing life and coming alive in a relatively dead or stagnant world.”<sup>96</sup> The study shows reflection and acceptance becomes an important means towards coping, and a seemingly more vital belief, is “that their illness is not a death sentence.”<sup>97</sup> Similarly, Atwood and Weinstein suggest adopting this belief as not a death sentence “but an opportunity to deepen their lives, to bring new meaning to their relationships, to increase their religious affiliation or to take control and be strong.”<sup>98</sup> Yet to deny oneself of the truth of the fragility of life, would be to create a world of meaning that only the self would truly understand. If all those around you know that your life may end sooner due to one’s illness, to deny that seem contrary to coping practices.

### **Loneliness and Chronic Illness**

Joan Atwood, who specializes in Educational Research in Psychology, recently argues “there has been an increased recognition of the importance of collaboration between the “Family Medical and Family Therapy fields. In many cases, Family Therapists and Family Physicians are part of the same treatment team. However, this innovative treatment approach is still relatively rare and much more collaboration is needed. It is the purpose of this paper to familiarize Family Physicians with some of the issues and problems that couples and families with a chronically ill member may experience, taking life cycle issues into consideration. A distinction is made between the

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<sup>96</sup> Clark Edward Moustakas, *Loneliness and Love* (Hemel Hempstead: Prentice-Hall, 1972), 21.

<sup>97</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 496.

<sup>98</sup> J.D. Atwood and E. Weinstein, E. “Family Practice, Family Therapy: A Collaboration of Dialogue,” *Family Practice and Family Therapy*, <http://www.priory.com/psych/family.htm>.

illness experience and the illness behavior. To this we add, the illness meaning, the social and psychological definitions given to the illness and the resultant scripts taken by the ill member, the couple and by other family members. Therapeutic issues are considered throughout with the intent of beginning a collaboration of dialogue between the two disciplines.”<sup>99</sup> A communal approach to understanding loneliness seems most helpful in order to know what to expect as a person’s illness progresses.

Atwood suggests several expectations, “If there is the belief that cancer is not *treatable* or *beatable*, and is physiologically devastating, then, compensations often begin before the manifestation of any severe symptoms. The person may develop a *sick* role by the diagnosis alone. Here people tend to surrender their responsibilities to others.”<sup>100</sup> There is a stark difference between coping, surrendering, and forced isolation. Loneliness can be any of the aforementioned. Loneliness manifests particularly at the end of life with or without being forced into isolation and abandonment.

### **Spiritual Factors of Loneliness**

In addition to the psychological and sociological aspects of loneliness, there are also several important spiritual factors of loneliness that need to be explored. Richard Gilbert, a Unitarian minister, believes there are four outcomes of a spiritual assessment. He states that “a spiritual assessment should be to understand a person’s beliefs about involvement with God and religious practices, to determine the extent to which a person’s religious practices and spiritual understandings serve as a resource for faith and life, to assess whether a person’s resources for hope and strength are founded on reality, and to

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<sup>99</sup> Atwood and Weinstein, “Family Practice, Family Therapy.”

<sup>100</sup> Atwood and Weinstein, “Family Practice, Family Therapy.”

give a person an opportunity to accept spiritual support.”<sup>101</sup> According to The National Council for Palliative Care, “it’s not just good enough to give physical care. The spiritual dimension is often neglected.”<sup>102</sup> And in Practical Theology, “ought” needs to be considered.

Simon Robinson has four reasons for the necessity of spiritual assessments. He concludes that, “spirituality affects the prognosis of an illness and is a variable that may help to predict how patients will cope with illness. He views spirituality as an important part of patients’ lived experience and believes that they will need to work through the impact of their illness on their belief systems to discover meaning.”<sup>103</sup> Robinson continues stating “that spiritual functioning is dynamic and, therefore, monitoring spiritual reflections shows how patients are progressing and adjusting to their illness.”<sup>104</sup> Finally, he maintains that spirituality can give indications about suitable interventions to treat problems.<sup>105</sup> And when spirituality is the problem, that too, can be assessed.

The National Institute for Health and Care Excellence (NICE) instructs that “death and dying are frightening and isolating concepts that people may have difficulty in understanding. When faced with terminal illness, patients and their families and carers will need support to deal with the often conflicting emotions...and the profound questions that can arise, such as: ‘What will happen to me?’, ‘How will I cope?’, ‘Why is this happening?’ and ‘Who am I?’”<sup>106</sup> Many end of life organizations tend to keep the

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<sup>101</sup> Bryan Kinzbrunner, "Psychosocial and Spiritual Assessments," *End-of-Life Care: A Practical Guide*, eds. Barry Kinzbrunner and Joel S. Policzer (New York : McGraw Hill, 2011), 402.

<sup>102</sup> L. Wynne, “Spiritual Care at the End of Life.” *Nursing Standard* 28, no. 2, (2013): 41-45, doi:10.7748/ns2013.09.28.2.41.e7977.

<sup>103</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 402.

<sup>104</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 402.

<sup>105</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 402.

<sup>106</sup> Wynne, “Spiritual Care at the End of Life,” 41-45.

<sup>107</sup> Wynne, “Spiritual Care at the End of Life,” 41-45.

questions concise and the tools simple. These organizations use open ended questions, “because spirituality is difficult to define, and therefore easy to neglect.”<sup>107</sup> Therefore, it is necessary to have spiritual assessments to guide, and understand, and produce better ways to help the patient. According to Wynne, assessments, care plans, “and competency frameworks are not new or particularly innovative, their implementation reflects the commitment of healthcare professionals to improve practice.”<sup>108</sup> The practice of paying attention to the afflicted.

According to George Fitchett, there are nine characteristic approaches to spiritual assessment. These nine are: implicit, inspired, intuitive, idiosyncratic, based on traditional pastoral acts, based on normative pastoral stances, global, psychological, and explicit spiritual assessments.<sup>109</sup> The chaplain’s checklist, within the hospice assessment, is motivated by Paul Pruyer’s work, *Minister as Diagnostician*. Pruyer provides the “Guidelines for Pastoral Diagnosis.”<sup>110</sup> As the chaplain seeks how the patient understands the holy, “the first goal is to characterize what specific transcendental relationships, if any, that a patient possesses proved meaning, irrespective of how one relates to them...he [or she] also includes the question of whether the patient’s relationship or ‘sense of the sacred is “potentially misguided.””<sup>111</sup> For example, the diagnostician may ask, “Does the person recognize anything in life as sacred? Does the person imbue aspects of life with transcendent meaning?”<sup>112</sup> The hope is to find what motivates or stops communication. What lens guides one’s life decisions?

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<sup>108</sup> Wynne, “Spiritual Care at the End of Life,” 41-45.

<sup>109</sup> G. Fitchett G. *Assessing Spiritual Needs: A Guide for Caregivers* (Lima, Ohio: Academic Renewal Press. 2002).

<sup>110</sup> Fitchett, *Assessing Spiritual Needs: A Guide for Caregivers*, 405.

<sup>111</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 405.

<sup>112</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 405.

The lens called *providence* determines the role God has for the patient.<sup>113</sup> In the 1990s, George Fitchett developed the *functional approach* for the chaplain “to be concerned both with meaning and purpose in life as well as the more general behavioral and emotional issues a person experiences.”<sup>114</sup> This approach requires the chaplain to divide the assessment into areas, “a holistic set of dimensions and a spiritual set of dimensions.”<sup>115</sup> Holistic areas to consider are: medical, psychological, family systems, psychosocial, ethnic and cultural, and societal issues and spirituality. Kinzbrunner suggests, “for patients near the end of life, their physical health is often apparent and known to the spiritual care giver at the time of the spiritual assessment, although the presence or absence of acute physical symptoms can significantly impact the potential effectiveness of the spiritual evaluation.”<sup>116</sup> Kinzbrunner also states that when “dealing with terminally ill patients, there is often a resistance to discussing the terminal nature of the illness,” all aspects.<sup>117</sup>

Psychologically, it is important that previous psychological problems are discovered and addressed. Psychological factors can influence one’s spirituality.<sup>118</sup> Kinzbrunner believes in family systems, “assessing the family dynamic, both past and present, can sometimes provide the spiritual care giver with important clues as to the nature of a patient’s present psycho-spiritual problems.”<sup>119</sup> A person’s life and experiences gives a broader psychosocial assessment,<sup>120</sup> Fitchett makes a claim that this

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<sup>113</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 405.

<sup>114</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 407.

<sup>115</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 407.

<sup>116</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>117</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>118</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>119</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>120</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

work is the expertise of the social worker, yet “important for a spiritual care provider to gather relevant factual data about a patient to better understand the personal dynamics of the person.”<sup>121</sup> The professional understands the lives lived shapes the dynamics of a person.

Kinzbrunner asserts each person is a member of and their behaviors influenced by their race, ethnicity, and culture.<sup>122</sup> Societal issues is recognizing “distress can result from dysfunctional social and cultural systems...often due to ‘power disadvantages.’”<sup>123</sup> Society effects how the person’s illness is perceived. Fitchett states regarding the societal dimension, “we include the societal issues perspective in our holistic assessment as a way to get the fullest possible picture of the person and his or her situation and to avoid creating a diagnostic perspective that forces us into individual-level explanation for social and cultural problems”<sup>124</sup>

Spirituality completes Fitchett’s holistic assessment model, yet he believes that the spiritual dimension comprises belief and meaning, vocation and consequences, experiences and emotion, courage and growth, ritual and practices, community and authority, and guidance.<sup>125</sup> The question for belief and meaning becomes, “does a person’s belief provide meaning in life? What is the person’s belief system and how does it get expressed in his life?”<sup>126</sup> Fitchett asks, “what is the language being used when talking about his purpose in life...is the person energetic, uplifted, or neutral when talking...and [importantly] how significant the patient’s beliefs are can often be derived

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<sup>121</sup> Fitchett, *Assessing Spiritual Needs: A Guide for Caregivers*, 408.

<sup>122</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>123</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 408.

<sup>124</sup> Fitchett, *Assessing Spiritual Needs*, 409.

<sup>125</sup> Fitchett, *Assessing Spiritual Needs*, 410.

<sup>126</sup> Fitchett, *Assessing Spiritual Needs*, 409.

not just from what is said, but by how the information is conveyed.”<sup>127</sup> Body language and unspoken cues, the slight sigh or eye roll, all provide information the professional must watch for.

Narratives and language convey beliefs and meanings. Fitchett suggests that the question is “whether the patient’s illness is serving as a spiritual atonement, leading the person to possibly believe that it is a duty to experience pain and suffering in order to receive a greater reward upon death.”<sup>128</sup> In addition, he argues that “a further subdivision of the area of vocation is how one’s faith tradition prescribes and prohibits behaviors and in what ways the permitted and the forbidden affect the individual.”<sup>129</sup> There are patients who feel intimidated to discuss their fears and concerns, if their doctrines teach faith over fear. And even, the faith traditions that welcomes the meeting of their savior (through death), leaves little room to explore the understanding one must die to meet this savior. And then this individual is found isolated and in a place of loneliness trying to figure out what to expect next.

The emotional expectations regarding the meaning of life are evaluated by any direct experiences “divine or demonic” one had with the sacred.<sup>130</sup> Furthermore, Kinzbrunner notes that “despite the profound impact that the event had, the patient is reluctant to discuss the spiritual encounter for fear of being judged.”<sup>131</sup> It is the emotional reaction that intersects with “Belief and Meaning” dimension “asking questions such as what emotions or moods are associated with his contacts with the sacred and how does it

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<sup>127</sup> Fitchett, *Assessing Spiritual Needs*, 409.

<sup>128</sup> Fitchett, *Assessing Spiritual Needs*, 409.

<sup>129</sup> Fitchett, *Assessing Spiritual Needs*, 409.

<sup>130</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 409.

<sup>131</sup> Kinzbrunner, “Psychosocial and Spiritual Assessments,” 409.



relate to his general outlook in life?<sup>132</sup> The courage and growth dimension helps the spiritual care provider learn how new experiences challenge a person's current worldview.<sup>133</sup> In end-of-life situations, the meaningful rituals of the patient express meaning, thus one must ask if these rituals will change or be maintained?<sup>134</sup> In this context, Kinzbrunner concludes community "can include one's faith institution, veteran's associations or local senior groups, social or political clubs, any organization that brings people together, or simply a group of friends who share a common focus... might be able to help provide support to the patient and family in times of crisis."<sup>135</sup> Recently an atheist patient was surrounded by her writers club—who shared similar beliefs. While her family could not identify with her world views, she found her friends with similar collective ideologies most comforting. This would also be considered her chosen family- family not from a bloodline, rather a group of people found to be more loyal and comforting.

Authority and guidance are other aspects to evaluate, consider "how well the patient and family will be able to submit to the guidance of the spiritual care provider?" Moreover, where is authority found? For some, Kinzbrunner writes, "their particular faith's sacred texts or members of their faith's clergy; others will find it within themselves, while for many, there is a middle ground between religious text and ritual and one's own interpretation of the specific belief system."<sup>136</sup> For some, authority seemed to be found in the ability to execute and make her own rules and living out her own belief system. The Whitehead in their conversation on Culture state, such "evocative images

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<sup>132</sup> Kinzbrunner, "Psychosocial and Spiritual Assessments," 409.

<sup>133</sup> Kinzbrunner, "Psychosocial and Spiritual Assessments," 409.

<sup>134</sup> Kinzbrunner, "Psychosocial and Spiritual Assessments," 410.

<sup>135</sup> Kinzbrunner, "Psychosocial and Spiritual Assessments," 410.

<sup>136</sup> Kinzbrunner, "Psychosocial and Spiritual Assessments," 410.

challenge the community of faith to strengthen its dialogue with the culture in which it lives.”<sup>137</sup> Within faith communities, culture has as much authority as any sense of spirituality does seemingly.

### **Cultural Factors of Loneliness**

Around World War I, there became a cultural awareness of, as psychologist Lawrence Samuel points out, “a turning point in the cultural history of death in the United States, when the millions of people who died in World War 1 and the 1918 flu epidemic caused Americans to think about death as they never had before.”<sup>138</sup> This was the era of books, and Samuel writes that “books about life after death became a literary genre. Interest in spirituality increased along with interest in séances. Dreams and hypnotism were believed to offer insights about death and life after death.”<sup>139</sup> At the same time, Samuel believed to maintain a sense of hope, “doctors were disinclined to tell a patient that he or she was dying...many patients who did know they were dying kept it a secret. These practices made it difficult to achieve closure with family, friends, and colleagues.”<sup>140</sup> During this time, many began to wonder if death was inevitable. Indeed, many decreed that death was unacceptable. New questions arose about the nature of death among scientists and the wider society.<sup>141</sup>

Throughout the 1920s, death mostly occurred in the home. By the 1930s, Samuel notes that “professionals had taken over tasks surrounding death that, in the past, had been handled by the family. For example, most deaths now took place in hospitals rather

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<sup>137</sup> Whitehead and Whitehead. *Method in Ministry*, 54.

<sup>138</sup> Lawrence R. Samuel, *Death, American Style: A Cultural History of Dying in America*. (Maryland: Rowman & Littlefield, 2013), 151.

<sup>139</sup> Samuel, *Death, American Style*, 151.

<sup>140</sup> Samuel, *Death, American Style*, 151.

<sup>141</sup> Samuel, *Death, American Style*, 151.

than at home.”<sup>142</sup> As a result, the living became disconnected with the dying and with death; this according to Samuel, “increased the difficulties Americans faced when a loved one died. As death became unfamiliar, Americans began to see death as unnatural.”<sup>143</sup> And that which is unnatural is feared, and at best avoided. But death is unavoidable.

In the 1940s, The War Department provided a public “death list” of all the soldiers who had died.<sup>144</sup> In some cases the slain soldiers were considered heroic, and other times, the magnitude of deaths “became euphemized.”<sup>145</sup> Golbert writes:

Over the objection of some religious leaders, beautifying bodies for funerals became more common. Undertakers were by now called morticians, no longer invoking the image of the body being lowered into the ground. Graveyards became cemeteries. Coffins became caskets. Caskets not only become more attractive but were being made of metals, as though ...to give the appearance that the body would not decay.<sup>146</sup>

During the 1950s and 1960s, Samuel states that “science was dedicated to extending life even further. Millions of dollars were allocated to research to eliminate diseases. Progress was made in organ transplants. The first heart transplant occurred in 1967...because some organs had to be harvested after brain death but while the heart continued to beat, the progress in organ transplants invigorated the debate over the definition of death.”<sup>147</sup> So then, medical science contributed to the increase in human longevity.<sup>148</sup> Samuel alleges so much so that “one doctor, writing in *Better Homes and*

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<sup>142</sup> Samuel, *Death, American Style*, 151.

<sup>143</sup> Samuel, *Death, American Style*, 152.

<sup>144</sup> Samuel, *Death, American Style*, 152.

<sup>145</sup> Samuel, *Death, American Style*, 152.

<sup>146</sup> Samuel, *Death, American Style*, 152.

<sup>147</sup> Samuel, *Death, American Style*, 152.

<sup>148</sup> Samuel, *Death, American Style*, 152.

Gardens in 1958, contemplated whether medical science would someday allow people to live to 150 years of age and beyond. Cryobiology or cryonics—which involves freezing the body and storing it until medical science discovers a cure for the cause of death—emerged as a field of study.”<sup>149</sup> The avoidance of death continued.

Longevity gave momentum to the right to die movement. Medical professionals were more intentional and provided a sense of dignity with space to consider the realistic needs of the one dying. In the 1960s, doctors started to break from standard practice by advising terminally ill patients that were dying.<sup>150</sup> Seemingly, “while “the right to know” is emphasized in bioethics, in some cultural contexts, health professionals fear communicating bad news.<sup>151</sup> According to the *Journal of Medical Ethics*, dying patients should be told the truth only after knowing what their wishes are, knowing if the truth is what the patient wants.<sup>152</sup> The conditions for truth telling varies among professionals.<sup>153</sup> But ethically it was decided patients had the right to know, as to say it was a violation to the right otherwise

Wanting to know you fate was directly tied into the cultural understanding of death. The continued avoidance of death and the unwillingness to create a language suitable to discuss impending death left many in a place of loneliness, at least left persons inept to discuss their feelings about death, dying and loneliness. Seemingly spirituality, and culture, and life’s experience had never been separated in the conversation on death.

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<sup>149</sup> Samuel, *Death, American Style*, 152.

<sup>150</sup> Farzaneh Zahedi, “The Challenge of Truth Telling Across Cultures: A Case Study,” *Journal of Medical Ethics and History of Medicine* 4, no. 11 (2011), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3713926/>.

<sup>151</sup> Zahedi, “The Challenge of Truth Telling Across Cultures.”

<sup>152</sup> Zahedi, “The Challenge of Truth Telling Across Cultures.”

<sup>153</sup> Daniel Sokol, “How the Doctor's Nose Has Shortened Over Time: A Historical Overview of the Truth-Telling Debate in the Doctor-Patient Relationship,” *Journal of the Royal Society of Medicine* 96, no. 12 (2006): 632-636, doi:10.1258/jrsm.99.12.632.

The Whitehead's would suggest, if one looks, they write "closely at the components [they] can expand our awareness of the critical elements in the process. So the tri-polar model attempts to clarify the process of ...this deeper dynamic in...tradition, experience, culture."<sup>154</sup> Culture speaks loudly in the lives of everyday people, yet it must be attended to intentionally to better understand humanity as a whole.

Culturally, death was depicted more frequently and violently in film and television than found in the real world.<sup>155</sup> Critics contemplated why popular culture reflected this new interest in death. Some critics concluded that, in an increasingly individualist society, confronting one's own mortality took on special significance...others cited the struggle to obtain closure on the Vietnam War... The individualism of the period, combined with increased openness about death and continued improvements in medical science, resulted in important developments regarding death and dignity.

In 1972, the U.S. Senate convened the Special Committee on Aging to study the issue. In 1973, the American Medical Association (AMA) passed a death with dignity resolution, allowing the terminally ill to be removed from life-sustaining treatment if they signed a statement expressing such a desire. Large numbers of Americans started to sign living wills.<sup>156</sup> Signing wills seemed easier than discussing the worries and loneliness associated with dying.

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<sup>154</sup> Whitehead and Whitehead, *Method in Ministry*, 55.

<sup>155</sup> Kenneth Dowler, "Media Consumption and Public Attitudes towards Crime and Justice." *Journal of Criminal Justice and Popular Culture* 10, no.2 (2003): 109-126, <https://www.albany.edu/scj/jcipc/vol10is2/dowler.html>.

<sup>156</sup> Samuel, *Death, American Style*, 153.

According to Samuel during the 1980s and 1990s, “studies explored whether people could choose, consciously or unconsciously a particular time to die...historian, Dr. Lawrence Samuel asserted Dr. Kevorkian made assisted suicide a popular subject in the media.”<sup>157</sup> Furthermore, American’s healthcare spending contributed and signaled to the phobia surrounding death. So much so, “the two biggest killers, heart disease and cancer, received the largest share of federal funding while quality-of-life issues such as arthritis and mental health received relatively little.”<sup>158</sup> The authorities chose to highlight conversations that helped to avoid death. Ultimately, the possibility of death, signaled for increase efforts to live longer.

The entry into the 20<sup>th</sup> Century introduced the world to new truths such as the “obsession with longevity [that] distracts us from our duty to live well.”<sup>159</sup> Such a distraction leads to feelings of disconnect and dissatisfaction in life. Do not get tied up in scandal, live right, and do right. For example, former President Richard Nixon, world leader, resigned from office. There was economic depression and life’s goal was seemingly to survive.

### **Multicultural Factors of Loneliness**

In addition to cultural factor of loneliness, researchers have also explored a number of multicultural factors of loneliness, which are important for this theological study. Historically the “melting pot” was the expectation of immigrants as they made the United States their new home. The expectation was that, as Kinzbrunner and Policzer explain it, “over time, shed their historic identities and acculturate themselves within

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<sup>157</sup> Samuel, *Death, American Style*, 154.

<sup>158</sup> Samuel, *Death, American Style*, 154.

<sup>159</sup> George F. Will, *The Leveling Wind: Politics, the Culture, and Other News, 1990-1994* (London: Penguin Books, 1995), 262.

American society. In other words, the immigrants would assimilate and culturally become ‘American.’”<sup>160</sup> Joel Policzer, board certified internist believes that many Americans began to reject the melting pot “in favor of multiculturalism, in which individuals would continue to identify with their own culture of origin.”<sup>161</sup>

Hospice had to consider the various barriers that caused hospice to be underutilized in the 1980s and 1990s; realizing the “mistrust of the health care system” some, felt a “mandate to preserve life at all cost, ... informing someone that they are terminally ill may hasten death.”<sup>162</sup> The “proscription to the concept of “giving up” was found to be deeply rooted in the ethnic, cultural, or religious beliefs of many patients and families who were in need end-of-life care and choosing not to access hospice services to provide that care.”<sup>163</sup> Even today, in 2018, hospice companies have specific cultural sensitive admission liaisons trained to help specific ethnic groups.

Religion and context can both play a major role, positively or negatively, in the one’s life choices. Religion is particularly important in one’s decision to accept palliative or hospice care. A report “Coping with Cancer” was an NCI- and NIMH-funded study of terminally ill cancer patients and their informal caregivers. The report considered psychosocial factors within the scope of their illness and adjustment. The study demonstrated that although 80% of white patients had participated in advance care planning, this was true of only 47% of black patients and the same percentage of

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<sup>160</sup> Barry M. Kinzbrunner and Joel S. Policzer, *End-of-Life Care* (New York : McGraw-Hill, 2011), 718.

<sup>161</sup> Kinzbrunner and Policzer, *End-of-Life Care*, 718.

<sup>162</sup> Kinzbrunner and Policzer, *End-of-Life Care*, 718.

<sup>163</sup> Kinzbrunner and Policzer, *End-of-Life Care*, 718.

<sup>164</sup> Alexa A. Wright et al., “Associations between end-of-life discussions, patient mental health, medical care near death, and caregiver bereavement adjustment,” *JAMA* 300, no. 14 (2008):1665-1673, doi:10.1001/jama.300.14.1665

Hispanic patients. Black (45%) and Hispanic (34%) patients were much more likely to request life prolonging care in the last few days of life than white (14%) patients, and also considered religion to be much important (black patients 88%; Hispanic patients 73%) than their white counterparts (44%).<sup>164</sup> Kinzbrunner continues to explain that although one learns from each of the aforementioned groups, “one cannot take that knowledge and apply or impose it on any specific patient and family who identifies with any specific group...learn what aspects, if any, of a group’s practices are relevant...and then tailor the care to meet those individual needs.”<sup>165</sup> Any group is more likely to believe their own lived experiences or at least the experiences specific to their own heritage.

Furthermore, specialist on culture hygiene, Boris Markov states, “any culture is firm as long as the moral and spiritual connections between its people have not been lost; and thus there ought to be developed not only the forms of social integration, but also the forms of spiritual solidarity. The facts that an individual thought represents a personal inward experience hidden and inaccessible for others, that individual knowledge and ideas belong exclusively to their originator: all these facts are acknowledged significant now but they would scarcely be of any concern in the past.”<sup>166</sup> In the past, he argues that the human being “was considered now an aide to God and then a social being.”<sup>167</sup> Being able to enjoy art and discover what life was about and what it had to offer, made them social beings. Today, because of the day-to-day grind and dependence

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<sup>165</sup> Kinzbrunner and Policzer, *End-of-Life Care*, 718.

<sup>166</sup> Markov, "Solitude and Alienation," 18.

<sup>167</sup> Markov, "Solitude and Alienation," 18.



on materials, humans are more like to reveal “himself as something monstrous”<sup>168</sup> Olga Szucs adds to this discussion when she writes:

Philosophy, floating in complete independence from reality and challenges, facing humanity, becomes non-functional, so to say, flows into full contradiction with its own essence. Perhaps the death of any phenomenon is associated with the emergence of contradictions with its own entity. Culture perishes when it becomes a part in the system of a monetary mechanism and is forced to pursue tasks, alien to it, for the sake of making profit; philosophy dies when it becomes non-functional; art dies when personality gets destroyed; a man dies, when loses his human essence; the society dyes when a person becomes means, but not an aim. And death is the most profound loneliness, brought to its logical extreme. As it is presented, the concept of the hygienic society and the reality in the sense of an adequate perception of the world of a man and the concept of loneliness are deeply connected with each other in the common system of concepts.<sup>169</sup>

North American culture, as Rokach notes, “fear the process of death and dying. Consequently, as the patient comes closer to death, one endures the ultimate aloneness; neither mortal nor faith in God can save the patient from death. This experience is common to both cancer and MS patients, let alone to all individuals with terminal disease in their final stages of illness.”<sup>170</sup> From family to friends, to television, persons are being taught to flee from death. Culture is the teacher, and experiences and lack of experience, are the guides.

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<sup>168</sup> Markov, "Solitude and Alienation," 18.

<sup>169</sup> Szucs, "Theoretical and Practical Aspects," 16.

<sup>170</sup> Rokach, “Coping with Loneliness Among the Terminally Ill,” 490.

Culture and religion both speak exponentially about loneliness and death. So much so that as theologian Mark Taylor explains:

In the quintessentially ‘modern’ societies of Western Europe and North America, culture is envisaged as a vehicle at its best, for the most profound and essential thoughts and attitudes underlying religion. The assumption here is that, in a society such as “ours,” something like the general essence of religion, which is perforce less tangible and more universal than any particular religion (and is nowadays often referred to as spirituality), *used to be* embodied in religious institutions but now has been partially liberated from those traditional institutional confinements and can find more personal, ‘freer’ expressions through a variety of cultural venues. This deinstitutionalization takes place, supposedly, as society becomes ‘modernized’ and ‘secularized.’<sup>171</sup>

The Internet also serves as a vehicle for culture. Modes like Facebook and WhatsApp allows for instant notification of deaths. Society has access to imminent death and death notices more easily than ever before. Carnegie Mellon Professor Randy Pausch’s “Last Lecture” has received millions of hits on YouTube.<sup>172</sup> Websites such as *Good-Grief.org* help people deal with the death of loved ones.<sup>173</sup> Neither the terminally ill nor their loved ones seem skilled in how to die. American cultural historian, Lawrence Samuel states, “Americans are remarkably unprepared to deal with it [death]. Despite some improvements in attitudes, death is still viewed as un-American in our culture,

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<sup>171</sup> Mark C. Taylor, *Critical Terms for Religious Studies* (Chicago: University of Chicago, 1998), 71.

<sup>172</sup> Carnegie Mellon University, “Randy Pausch Last Lecture: Achieving Your Childhood Dreams,” *YouTube Video*, 1:16:26, posted December 20, 2007, [https://www.youtube.com/watch?v=ji5\\_MqicxSo](https://www.youtube.com/watch?v=ji5_MqicxSo).

<sup>173</sup> “Compassion. Support. Community,” *Good-Grief*, accessed June 27, 2018, <http://www.good-grief.org/>.

which is obsessed with youth, beauty, and achievement.”<sup>174</sup> This place of death and loneliness must be faced, particularly now, seeing that the young, beautiful and well achieved are die too.

Yet Randy Pausch, who presented his final lecture called the *Last Lecture*, and who was aware of his own terminal diagnosis stated, writes that the “recurrent themes is that doctors are often committed to preserving life at any cost and view a patient’s death as a failure. Randy Pausch criticizes the medical profession for being inadequately trained in the area of death and in helping patients deal with death and grief.<sup>175</sup> Hospice care has the means and knowledge to educate on death and grief. But is it too late to begin this teaching, human’s whole lives are etching towards death.

### **Culture and Consumer Culture**

Communications expert Thomas Genecarelli suggests that, “broadcast media, including over-the-air radio and television, have been the primary drivers of consumer culture in the United States, and, increasingly, since the latter part of the twentieth century, across much of the world.<sup>176</sup> There are three reasons why television has served particularly as the “most powerful vehicle” driving consumer culture as Genecarellis states:

First, among all mass media, broadcast television reaches and is used by the greatest number of people. It can in fact be argued to be the most “massive” of all mass media. Second, one of the factors that accounts for this widespread use is ease of use. We are able to watch television (and listen to radio) on a continuum

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<sup>174</sup> Samuel, *Death, American Style*, 154.

<sup>175</sup> Carnegie Mellon University, “Randy Pausch Last Lecture.”

<sup>176</sup> Thomas Genecarelli, "Broadcast Media," in *Encyclopedia of Consumer Culture*, ed. Dale Southerton (Manchester: Sage, 2011), 124-127.

from absolute passivity to absolute engagement, but always take in some measure of information as long as our eyes are open and because our ears cannot be closed. Third, the commercial model of broadcasting took hold from early on in the United States and, despite efforts and sympathies against this and in favor of the social or public broadcasting model, is increasingly becoming the preferred standard across the globe.<sup>177</sup>

Increasingly, the media seeks to purchase or provide programming for each consumer. According to Gencarelli, “the attention of listeners and viewers is paramount; this is the commodity the broadcasting industry buys and sells. As a result, the nature of broadcast programming is shaped and determined, first and foremost, by decisions about what will best attract and hold audiences’ attention.”<sup>178</sup> The media then helps to produce goods for consumption. Gencarelli states, “however, we sometimes also produce more goods than there is demand for them. This leads to a situation in which we need to create demand for the excess goods. And this creating or ensuring of demand becomes one of the main entry points to what is called mass culture.”<sup>179</sup> The demand for death and loneliness education seemingly doesn’t exist, because society has hidden death and the implications of loneliness. This peculiar institution of loneliness has been hidden and ostracized and is in need of help.

### **Aging and Dying Culture**

Additional research is needed to develop responses and appropriate interventions for those in challenging environments such as loneliness and isolation. As noted in the

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<sup>177</sup> Gencarelli, "Broadcast Media," 124-127.

<sup>178</sup> Gencarelli, "Broadcast Media," 124-127.

<sup>179</sup> Gencarelli, "Broadcast Mdia," 124-127.

*New Catholic Encyclopedia*, within hospice, this becomes the responsibility of a program that “affords palliative and supportive care to meet the special needs arising out of the physical, emotional, spiritual, social, and economic stresses that are experienced during the final stages of illness, and during dying and bereavement. An interdisciplinary team, under the direction of an autonomous hospice administration, provides the care.”<sup>180</sup>

Directions are conveyed from the hospice administration and as Cronin-Marthaler notes:

Care is provided by a physician-directed team that invariably includes a nurse and several if not all the following: a social worker, a pastoral counselor, a dietician, and volunteers to assist the patient and family with personal care and the chores of daily living. Despite the recognized need for a more humane and sensitive approach to palliative care, the hospice movement in the U.S. has not become more widespread because of financial, organizational, legal, and psychological obstacles. Major strides have been made in funding, with 95 percent of the daily sum covered by health care, the remaining five percent being obtained by volunteer hours.<sup>181</sup>

According to Cronin-Marthaler, the legacy of hospice is growing, as she explains “the National Hospice Organization (NHO), established in 1978, has as its primary functions the promotion of hospice care, research, consultation, education and the advocacy of patients’ interests, as well as those of their family and care givers. Presently, there are more than 3,000 organizations providing hospice interests.”<sup>182</sup> These

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<sup>180</sup> Cronin-Marthaler, "Hospice Movement," 117-118.

<sup>181</sup> Cronin-Marthaler, "Hospice Movement," 117-118.

<sup>182</sup> Cronin-Marthaler, "Hospice Movement," 117-118.

organizations deliver a sense of holistic care to those terminally diagnosed with an expectation of six months or less to live.

### **Last Conversations**

Professor Katie Roiphe studied writers who were in their final days of life and came to believe “that while nearly everyone has a fantasy of a ‘last conversation’ with someone they love, very few people actually have it. While the dying person is trying to reach a place of acceptance of their death, they seem to reach a fantasy world. It is the fantasy of resolving all conflicts, of emotional catharsis, that rarely ever comes to pass, because the habits of reticence or resentment that were there the whole time are still there, because the proximity of death does not transform personalities, or compel us to cut through to the heart of things, however much we want it to.”<sup>183</sup> Roiphe finds that, “even in a drawn-out death, when there is technically plenty of time, the last conversation usually materializes only in parodic form.”<sup>184</sup> All this time she speaks of a desire to be accepted. This part of the life’s journey thoughts can become jumbled and muddled, in hopes of piecing life back together again- or even discovering how to move forward. The dictionary’s definition of muddled is “to behave, proceed, or think in a confused or aimless fashion or with an air of improvisation.”<sup>185</sup> Roiphe also suggests the end of life is a secular event not necessarily religious or spiritual in nature. She determines this through the lives of the dying writers, “the promise of forgiveness, of explanation, of a few words that will repair or redeem or transform the past mostly eludes us. In a way, this is a secular last rite that we are imagining; confession and absolution, the admission of

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<sup>183</sup> Katie Roiphe, "Dying, With Nothing to Say." *New York Times*, March 19, 2016, para. 4, <http://www.nytimes.com/2016/03/20/opinion/sunday/dying-with-nothing-to-say.html>.

<sup>184</sup> Roiphe, "Dying, With Nothing to Say," para. 5.

<sup>185</sup> "Muddle," *Dictionary.com*, accessed May 4, 2012, sec. 7, <https://www.dictionary.com/browse/muddle>.

wrongs and forgiveness, church mingling with therapy to make a proper ending out of pointless loss.”<sup>186</sup> It is that statement of “pointless loss” that culture and lack of understanding seems to create.

There seems to be a belief that end of life conversations should be meaningful and not pointless. Typically, Roiphe writes, when “we have an idea that when someone is dying, a new, honest, generous space opens up; that in the harrowing awfulness of dying there is a directness, an expansiveness, a loosening of inhibitions, the potential for things to be said that could not be said before.”<sup>187</sup> Possibly, because the dying have never died before, they are indeed in a new place in life. Roiphe poses a fundamental question, “but if one does actually manage to pull off a last conversation, what can it be but a few words in a lifetime of talk? How can it be enough?”<sup>188</sup> Roiphe suggests:

Even the writers I was researching — people who lived in structure, plots, and words—mostly did not find their way to conversations that offered a satisfying ending. They left things messy, unresolved, dangling. Part of the problem is that some silences are too wide to narrate. Words, even if the right ones miraculously presented themselves, would not be enough. The confession and forgiveness we want to fill the room do not spring up more naturally in extremis, under duress. It may be the last chance for the dying person to clarify, but clarity doesn’t necessarily come. In this way, death is a lot like life.<sup>189</sup>

Death may be like life, yet loneliness experienced before death is still life. Bill Holmes who has been diagnosed with four types of cancer, and who is also a chaplain,

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<sup>186</sup> Roiphe, "Dying, With Nothing to Say," para. 8.

<sup>187</sup> Roiphe, "Dying, With Nothing to Say," para. 10.

<sup>188</sup> Roiphe, "Dying, With Nothing to Say," para. 10.

<sup>189</sup> Roiphe, "Dying, With Nothing to Say," para. 13-14.

put it like this, “I intend ‘bedside’ to be a metaphor for that place where we are called to engage all that we are on behalf of the one who is in a place of disorientation, a place where things are not as they were and never again will be. It is there also that hope struggles to be re-defined.”<sup>190</sup> Bill continues:

What ultimately generated my desire to write this book was the emerging awareness of the intertwining of those lives with my own. Sharing in the suffering of others has given my life a deeper meaning than it might have otherwise attained. The nature of the suffering may vary by being a physical or medical condition such as cancer or disabilities, coping with loss, depression, social injustice, as well as living in isolation or in a void created out of collusion between humankind and technology.

Soon after I started my work as a hospital chaplain I stood at the bedside with the family of a “brain dead” man as he was removed from life support. It was a moment of epiphany as I began to see life and death from the other side of the reflex hammer where most of my fellow travelers stand. What happens at the bedside is often more than we initially see. What is needed is a different lens, a different way of looking at human suffering, so that which we have beheld as a clinical observer becomes a Divine encounter.<sup>191</sup>

The onus may not be on the dying as Roiphe suggest, to create and confess their wrongdoing in life, but rather a space for the dying and the Divine to create and move along.

Loneliness is spiritual; it has strong ties and long-standing associations with culture. Hospice hopes to comfort persons at the end of their journey, but how much

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<sup>190</sup> Bill Holmes, "New Reality," *Facebook*, July 13, 2017, <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf>

<sup>191</sup> Bill Holmes, "New Reality," *Facebook*, July 13, 2017, <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf>



better would a person be cared for holistically if practitioners or even the dying themselves understood loneliness. The world's population is aging rapidly, and more people are experiencing loneliness more than ever before. Even though surrounded by people, the dying still find themselves in challenging environments and pushed to the edges of society, perhaps unintentionally. Medical physicians find death to be a failure on their part, reducing opportunities for better understanding the dying process and the role of loneliness. Culture has dictated its thoughts on death and loneliness and seemingly have separated the two. So then theology must cast a vision and state its assessment on the separation or connection of loneliness and the dying. Theology must turn and look through the lens of the dying allowing missing voices to add to the conversation.

### **CHAPTER THREE: LONELINESS AS A THEOLOGICAL PROBLEM**

After the last chapter provided a review of the major issues involving loneliness, this chapter examines loneliness within both theological and biblical frameworks. This chapter offers insights from existentialist philosopher and Lutheran theologian, Paul Tillich, Anglican Priest and academic, Alan Billings, and sociologist Robin Gill to highlight theological understandings that surround death and loneliness. The Nilewide Marketing Review also helps to examine the risks associated with innovation and loneliness. Since the Old Testament is shared amongst both Christians and Judaism, Chris Schlauch emphasis is on Pastoral and Practical Theology whereas, Neil Gillman speaks directly to Torah approach to suffering and death. All major contributions to the in-depth look of loneliness as a theological problem.

#### **Loneliness and Theology**

Loneliness is a theological problem that traces back to the Old Testament. Both the traditions of the Old Testament and Christianity preach about living a good life and teach congregants to pray for health and healing. It is the church's understanding and theology of healing which dictates a theology of dying. One finds loneliness in a theology of dying. The body of the dying is contested and questioned. At times, the dying process is even abandoned. Patients have repeatedly told me they never or rarely think about death, until this moment in time. Today's culture and theology leads people toward a seemingly immortal life. Yet the body is human, it will die. In death, one's glory or redemption is knowing that this the dying living vessel holds a divine truth. For the church to progress, it must change or alter its' understanding of death and dying. This is especially true for those dying with loneliness.

Death and dying in the Western Judeo-Christian tradition considers death a “consequence of original sin.”<sup>192</sup> Theologian Duane H. Larson explains that death as a consequence of original sin “has, of course, not been a scientifically informed belief.”<sup>193</sup> And where theology has been in conversation with science on this point, or “when theology is indirectly informed by a growing ecological consciousness, natural death in and of itself is increasingly seen as a natural piece of the creation that God called good” Larson maintains.<sup>194</sup> Patients look for hope and goodness in the immediate future and beyond. One often asks what is the purpose of all this? Paul Tillich suggests that, “[humankind], like every living being, is concerned about many things, above all about those which condition his very existence...If [a situation or concern] claims ultimacy it demands the total surrender of him who accepts this claim...it demands that all other concerns...be sacrificed.”<sup>195</sup> Loneliness represents this concern for ultimacy, begging one to wonder if loneliness can be answered during life—or at the end of life. Christian scriptures offer a reprieve for loneliness, aloneness, solitude, and isolation. The history of Christianity has taught that “death is not so readily understood as an ‘evil.’ It is, rather, a ‘problem’ in Christianity because sin became attached to it. Sin constitutes alienation from God, and thus the experience of death most often is attended by fear, loneliness, and loss. Though biblical scholars still debate the meaning of the Apostle Paul’s assertions that the wages of sin are death (Rom. 5:12) and that the travails of the creation are

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<sup>192</sup> D. H. Larson, “Death,” in *Encyclopedia of Science and Religion*, ed. J. W. V. van Huyssteen (New York: Macmillan Reference, 2003), 203-205.

<sup>193</sup> Larson, “Death,” 203-205.

<sup>194</sup> Larson, “Death,” 203-205.

<sup>195</sup> Tillich, *Dynamics of Faith*, 2.

attributable to human sin”<sup>196</sup> The church is responsible to explain the wages of communal sin, individual sin, and the eschatological loneliness intrinsically attached to death.

### **The Theology of the Chaplain**

A practical theologian is to seriously assess and retrieve church traditions, practices, and scriptures that attend to loneliness. For some time, the front-line calls pastors and chaplains to face the agony of dying with the dying. Alan Billings, in his guide to pastoral ministry explains that pastors must “be able to recognize the spiritual anxieties which lie within and behind the emotional turmoil through which people in deep distress are passing...the Christian pastor will be someone who can draw fluently on the resources of the Christian tradition and relate them to the experiences of day-to-day living.”<sup>197</sup> Chaplains are able to retell the story of anguish and ultimate peace.

The story told often begins with the loneliness Jesus experienced while praying in the Garden of Gethsemane. The story begins:

Jesus went with them to a place called Gethsemane; and he said to his disciples, ‘Sit here while I go over there and pray.’ He took with him Peter and the two sons of Zebedee, and began to be grieved and agitated. Then he said to them, ‘I am deeply grieved, even to death; remain here, and stay awake with me.’ And going a little farther, he threw himself on the ground and prayed, ‘My Father, if it is possible, let this cup pass from me; yet not what I want but what you want.’ Then he came to the disciples and found them sleeping; and he said to Peter, ‘So, could you not stay awake with me one hour? Stay awake and pray that you may not

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<sup>196</sup> Larson, “Death,” 203.

<sup>197</sup> Alan Billings. *Dying and Grieving: A Guide to Pastoral Ministry* (London: Society for Promoting Christian Knowledge, 2002), 95.

come into the time of trial; the spirit indeed is willing, but the flesh is weak.’

Again he went away for the second time and prayed, ‘My Father, if this cannot pass unless I drink it, your will be done.’ Again he came and found them sleeping, for their eyes were heavy. So leaving them again, he went away and prayed for the third time, saying the same words. Then he came to the disciples and said to them, ‘Are you still sleeping and taking your rest? See, the hour is at hand, and the Son of Man is betrayed into the hands of sinners. Get up, let us be going. See, my betrayer is at hand.’<sup>198</sup>

Jesus’ experience of extreme loneliness seems to indicate that loneliness is part of the Christian plight towards death. Loneliness was a part of the journey and was not taken away.

The pastor and chaplain must bring the knowledge of scriptures and a sense of comforting wisdom to all who are in need. They offer the connection between the living, the dying, and those who have died and joined the cloud of witnesses. Particularly in the Reformed theology of The United Church of Christ, God calls the church to speak truth to power, liberate the oppressed, care for the poor and comfort the afflicted.<sup>199</sup> One could interpret comforting the afflicted as providing a sense of companionship until the affliction disperses. Alternatively, perhaps, in this moment, comforting means standing up with those who are lonely and expect a marvelous end, whatever that may be.

Other holy texts, such as Matthew 11:28-29, aims to comfort in statements such as, “Come to me, all who labor and are heavy laden, and I will give you rest. Take my

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<sup>198</sup> Matthew 26:36-46 (NRSV).

<sup>199</sup> “What We Believe,” *United Church of Christ*, accessed June 14, 2018, [http://www.ucc.org/about-us\\_what-we-believe](http://www.ucc.org/about-us_what-we-believe).

yoke upon you, and learn from me, for I am gentle and lowly in heart, and you will find rest for your souls.”<sup>200</sup> Matthew Henry’s Commentary explains, “It is the duty and interest of wary and heavy-laden sinners to come to Jesus Christ. Renouncing all those things which stand in opposition to him, or in competition with him, we must accept of him, as our Physician and Advocate, and give up ourselves to his conduct and government; freely willing to be saved by him, in his own way, and upon his own terms.”<sup>201</sup> Clergy members are to use scriptures to help relieve the burden of loneliness until the sensation passes.

To gain a better grasp of what to address, Billings suggests asking patients, “is there something specific you would like to talk about?”<sup>202</sup> Billings also argues that pastoral strategies often include attentive listening, the encouragement to verbalize needs, and “to give some emotional and intellectual reassurance.”<sup>203</sup> After a terminal diagnosis, a patient experiences a dynamic change in loneliness. Theologian, James Fowler suggests that people “associate dynamic with something volatile and changing. But the Greek root of the word ‘dynamic’ –*dynamis*—literally means ‘power.’ In its usual association with spirit, it connotes directional power, or power directed and structured purposefully. Therefore, to speak of the dynamics of change is to invite our attention to change as structured process and as powerful and transformative process.”<sup>204</sup> If this is true, then the dynamics of loneliness may not be a horizontal association problem at all, between

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<sup>200</sup> Matthew 11:28-29 (NRSV).

<sup>201</sup> Matthew Henry, *Commentary on the Whole Bible. Vol. V. Matthew to John* (McLean: Mac Donald, 1706). 161.

<sup>202</sup> Billings, *Dying and Grieving*, 98.

<sup>203</sup> Billings, *Dying and Grieving*, 98.

<sup>204</sup> James W. Fowler, *Faith Development and Pastoral Care* (Philadelphia: Fortress Press. 1987), 107.

caregiver and patient, but a vertical obsession that signifies a communicative agenda between the patient and God.

The patient's loneliness moves beyond being alone and into a space of wondering. Thoughts of life and thoughts of the afterlife suggests loneliness demonstrates the path toward the divine. This theological space is spiritually necessity, maybe even an essential part of the human condition. As Robin Gill explains, they "inevitably become a cognitive minority. In effect Christians become 'a group of people whose view of the world differs significantly from the one generally taken for granted in their society'. They become a group possessing a body of 'deviant knowledge': that is, a group which no longer shares many of the plausibility structures of society at large."<sup>205</sup> Plausibility according to Berger is,

One of the fundamental propositions of the sociology of knowledge is that the plausibility, in the sense of what people actually find credible, of views of reality depends upon the social support these receive. Put more simply, we obtain our notions about the world originally from other human beings, and these notions continue to be plausible to us in a very large measure because others continue to affirm them. It is, of course, possible to go against the social consensus that surrounds us, but there are powerful pressures (which manifest themselves as psychological pressures within our own consciousness) to conform to the view and beliefs of our fellow men.<sup>206</sup>

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<sup>205</sup> Robin Gill, *Theology in a Social Context: Sociological Theology*, vol. 2 (Canterbury: Ashgate. 2012), 80.

<sup>206</sup> Gill, *Theology in a Social Context*, 75.

In First Corinthians states “in fact, some of the parts that seem weakest and least important are really the most necessary.”<sup>207</sup> Congregations and leaders alike are better able to restore Christ’ body using the aforementioned text as a platform and starting place when caring for the whole person. Paul’s analogy, using parts of the body to reflect the importance of the whole, shatters inequality and lifts the weakest and most vulnerable as valuable. Therefore, as the article of *Risks of Loneliness* notes “the belief that older people can no longer contribute is erroneous and even damaging. Some consumer products and services make life difficult for older people, such as tiny coins, and others improve their wellbeing, such as large telephones. More innovations are needed to make a positive difference to the lives of older, housebound people, which demands that these people are involved in the innovation process.”<sup>208</sup>

This disruption of harmony creates a valley needing a high point of reconciliation with God and others. Such a disruption calls for multi-dialogical activity, including dialogue with history, culture, and authority. Brian Thomas Swimme and Mary Evelyn Tucker argue it is not until there is a “moment of radical emergence” that gives insight to communal responsibility; an “insight into what it means to be alive in the universe” that the weaker will become stronger.<sup>209</sup> All people are able to learn from violence, but according to Swimme and Tucker “though we are not able to eliminate violence from the earth or universe, there is the chance that we will learn to orient ourselves with its presence in a way that is creative, or in a way that does not make the destruction even

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<sup>207</sup> 1 Corinthians 12:22 (NLT).

<sup>208</sup> "The Risks of Loneliness," *Nilewide Marketing Review*, October 3, 2004, para. 3, *General OneFile*.

<sup>209</sup> Brian Thomas Swimme and Mary Evelyn Tucker, *Journey of the Universe* (New Haven: Yale University Press, 2011), 65.



worse.”<sup>210</sup> People are to encourage passionate healing to those dying thus regenerating the earth from the inside out.

Symbolic consciousness is the ability to view life through new eyes, dwelling in a space where one can concentrate and wonder of the depth of his or her feelings.<sup>211</sup> Through an insatiable reflection, this allows the dying to respond to the earth’s needs in a very distinctive way. Those who are experiencing loneliness must concentrate on deep desires of the past, while creating and celebrating where the earth and humanity can go.<sup>212</sup> The Divine must be met. Humanity must again feel that their power is equal to the power of the universe, because right now that same power is misguided and misused against the world. Furthermore, as Swimme and Tucker note:

The opportunities for improving the quality of life of older people are poorly met, because of the social stigma surrounding old age, and the lack of attention given to people over 35. Youth marketing still continues to be the norm, in spite of aging societies in the west, and the people we look up to want to be young. A change in mindset is needed, not to glorify old age, but to recognize that the contribution of older people is no less valuable as co-producers of products and services that truly meet their needs.<sup>213</sup>

Humanity is destroying the world by hijacking the beauty and prophecy of those dying in the Earth.

For some time, humanity has not had the opportunity to experience a real sense of empowerment or prophetic knowledge in the dying process. It is there, in that un-

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<sup>210</sup> Swimme and Tucker, *Journey of the Universe*, 69.

<sup>211</sup> Swimme and Tucker, *Journey of the Universe*, 86.

<sup>212</sup> Swimme and Tucker, *Journey of the Universe*, 88.

<sup>213</sup> "The Risks of Loneliness," *Nilewide Marketing Review*, para. 4.

quantifiable reality, the hope and instructions available for an aging and hopeless society. Church, society, and culture seem inept or unwilling to create a new reality. Scholar Emilie Townes whose “expertise includes Christian Ethics, cultural theory and studies, post-modernizations and social post modernization”<sup>214</sup> and is the former president of the American Academy of Religion elaborates on indifference, destruction and the ability to choose. She suggests that those experiencing loneliness suffer from “destruction – that simply begets a passivity of in-action and, worse, one of indifference. This search to [end loneliness] demands a cold, hard, faith-filled stare at evil, rejects its inevitability, and chooses life over extinction.”<sup>215</sup>

Loneliness represents this concern for ultimacy and asks if one can heal loneliness at the end of life. Christian scriptures offer a reprieve for loneliness, aloneness, solitude, and isolation. Larson explains that the history of Christianity teaches, “death is not so readily understood as an ‘evil.’ It is, rather, a ‘problem’ in Christianity because sin became attached to it. Sin constitutes alienation from God, and thus the experience of death most often is attended by fear, loneliness, and loss. Biblical scholars still debate the meaning of the Apostle Paul’s assertions that “the wages of sin are death (Rom. 5:12) and that the travails of the creation are attributable to human sin.”<sup>216</sup> As Douglas explains, meaning making is a quest that spans the disciplines seeking significance in sociology, psychology, and religion as one approaches “death transcending beliefs, originating in this characteristic drive for meaning, have survival as their goal and express a wish for a

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<sup>214</sup> “Emilie M. Townes,” *Vanderbilt Divinity School*, accessed July 12, 2018, para. 2, <https://divinity.vanderbilt.edu/people/bio/emiliem-townes>.

<sup>215</sup> Emile M. Townes, “Black Faith and Public Talk,” in *Black Faith and Public Talk: Critical Essays*, ed. Dwight N. Hopkins (Waco: Baylor University Press, 2007), 109.

<sup>216</sup> Larson, “Death,” 203.

better life, unconstrained by the limitation of death.”<sup>217</sup> Death seems limiting because it has never been taught or explored personally. One’s awareness of his or her own death seems distant until it approaches and arrives directly within reach. What people know about death does not seem to apply when it is our own, and therefore causes a time of meaning making.

Many religious, according to Davis, often are “longing for some paradise or heaven in which evil is overcome and a union with the divine is achieved. The key emotional basis for pursuing such transcendence is that of hope, with acceptance of the beliefs that make it possible lying in the nature of faith and in belief in an ultimate embodied state or in a deity transcendent over all things.”<sup>218</sup> For some time, the agonizing front line of dying with the dying calls pastors and chaplains to lead and have a sense of direction. A guide to pastoral ministry explains that pastors must “be able to recognize the spiritual anxieties which lie within and behind the emotional turmoil through which people in deep distress are passing...the Christian pastor will be someone who can draw fluently on the resources of the Christian tradition and relate them to the experiences of day-to-day living.”<sup>219</sup> Chaplains are able to retell the story of anguish and ultimate peace when they adequate training and understanding of the dying process, in particular feelings and any needs associated with loneliness.

### **The Bible and Loneliness**

Patricia O’Connell Killen contends, “what a religious tradition teaches about the divine, the human, the created order, and their interrelationships—theology is the fruit of

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<sup>217</sup> Davies J. Douglas, "Transcending Death" in *Encyclopedia of Death and the Human Experience*, ed. Clifton D. Bryant and Dennis L. Peck (California: Sage, 2009), 968.

<sup>218</sup> Douglas, "Transcending Death," 968.

<sup>219</sup> Billings, *Dying and Grieving*, 95.

a reflective process.”<sup>220</sup> Scripture is not to be “understood readily in any time or place” but rather available to reflect up and help with meaning making “with particular questions arising from particular experiences in particular cultural situations who are members of particular communities of faith.”<sup>221</sup> Genesis 2:7 states, “the Lord God formed man from the dust of the ground, and breathed into his nostrils the breath of life; and the man became a living being.”<sup>222</sup> God then created the Garden of Eden, placed Adam among all that which was good, and by verse seventeen, death was introduced. Genesis reads, “you may freely eat of every tree of the garden but of the tree of the knowledge of good and evil you shall not eat, for in the day that you eat of it you shall die.”<sup>223</sup> While this was the first introduction of death in scripture, theologian David Tracy explains that each generation and community must translate its experience of tradition and the tradition for its life, if theology is to be life-giving at all.<sup>224</sup> What one reads. And how one reads the bible makes a difference in learning how to move and cope through life faithfully.

Rabbi Neil Gillman, author of *Believing and Its Tensions*, wanted to know how people tend to cope at the end of life. He wondered what the rituals were surrounding death. According to Gillman, “the first mention of death in all of our classical texts occurs in chapter 2 of the book of Genesis. There, death is presented as a threat. But in Chapter 3, where, after having eaten the forbidden fruit, Adam and Eve are informed that

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<sup>220</sup> Patricia O’Connell Killen, “Assisting Adults to Think Theologically,” in *Method in Ministry: Theological Reflection and Christian Ministry*, eds. James D. Whitehead and Evelyn Eaton Whitehead, (Lanham: Sheed & Ward, 1995), 106.

<sup>221</sup> Killen, “Assisting Adults to Think Theologically,” 106.

<sup>222</sup> Genesis 2:7 (NRSV).

<sup>223</sup> Genesis 2:16-17 (NRSV).

<sup>224</sup> David Tracy, *The Analogical Imagination: Christian Theology and the Culture of Pluralism* (New York: Crossroad, 1981), 99.

they will suffer certain punishments.”<sup>225</sup> Since the very first death, there has been a sense of threat, loneliness and estrangement. Adam’s will endure until he “returns to the ground” –ad shuvcha el ha adamah—because, as God reminds him, “for dust you are, and to dust you shall return” (Genesis 3:19).<sup>226</sup> Gillman states, “the presence of death in our world is a punishment for the sins of our ancestors.”<sup>227</sup>

The story told often begins with the loneliness Jesus experienced while praying in the Garden of Gethsemane. Jesus’ experience of extreme loneliness seems to be a part of the Christian plight towards death. The light shines in the darkness, and the darkness did not overcome it.”<sup>228</sup> Therefore, this *tool of affliction* leads back to the light.

Persons who are dying have different stories and backgrounds. As they approach death, they begin to lose friends, sometimes family and material possessions. The loss of these items is sometimes by choice as each individual realizes that he or she must travel lightly into the next world. Others have their possessions are taken by force, even when there has been no wrongdoing on the behalf of the patient. Chris Schlauch, asserts that examining experiences can help in the area of suffering and healing. Schlauch states that, “pastoral theology is a critical tool, a bridge; a praxis of experiencing, understanding, and responding to everyday events in a way that expresses the joint heritage of Christian

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<sup>225</sup> Neil Gillman, *Believing and Its Tensions: A Personal Conversation about God, Torah, Suffering and Death in Jewish Thought* (Woostock: Jewish Lights, 2013), 90.

<sup>226</sup> Gillman, *Believing and Its Tensions*, 90.

<sup>227</sup> Gillman, *Believing and Its Tensions*, 90; “This is the conventional interpretation of that passage in Genesis 3—certainly the canonical Christian interpretation, which has won widespread acceptance. Other scholarly and recent interpretations differ, suggesting that there is no mention of punishment in this text; the narrative, rather, is an attempt to account for humanity’s growing awareness of the choices involved in adulthood and the consequences of these choices,” Gillman, *Believing and Its Tensions*, 91.

<sup>228</sup> John 1: 4-5 (NRSV).

traditions and the human and social sciences.”<sup>229</sup> The tool of life’s experiences is critical in the process of healing.

Effective use of the tool of pastoral theology, speaking and listening to, varies. Schlauch proposes that pastoral theology “aims, penultimately, at enhancing meaningful participation in a community of faith and, ultimately, at love and service of God and neighbor, it opens with a consideration of confessional, more specifically scriptural contributions.”<sup>230</sup> To find such a scripture with a tool of affliction, we return to the book of Job. Job was a wealthy and upright man, holy in his ways, loved God and was loved by God. In one day, Job lost everything,

One day when his sons and daughters were eating and drinking wine in the eldest brother’s house, a messenger came to Job and said, ‘The oxen were plowing and the donkeys were feeding beside them, and the Sabeans fell on them and carried them off, and killed the servants with the edge of the sword; I alone have escaped to tell you.’ While he was still speaking, another came and said, ‘The fire of God fell from heaven and burned up the sheep and the servants and consumed them; I alone have escaped to tell you.’ While he was still speaking, another came and said, “The Chaldeans formed three columns, made a raid on the camels and carried them off, and killed the servants with the edge of the sword; I alone have escaped to tell you.’ While he was still speaking, another came and said, ‘Your sons and daughters were eating and drinking wine in their eldest

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<sup>229</sup> Chris Schlauch, “Sketching the Contours of a Pastoral Theological Perspective: Suffering, Healing, and Reconstructing Experiencing,” in *The Blackwell Reader In Pastoral and Practical Theology*, eds. James Woodward and Stephen Pattison (Malden: Blackwell Publishing, 2010), 207.

<sup>230</sup> Schlauch, "Sketching the Contours of a Pastoral Theological Perspective," 207.

brother's house, and suddenly a great wind came across the desert, struck the four corners of the house, and it fell on the young people, and they are dead; I alone have escaped to tell you.' Then Job arose, tore his robe, shaved his head, and fell on the ground and worshiped.<sup>231</sup>

Christianity, as Schlauch eludes "within this context, the healing which pastoral theology seeks to promote has to do with formation in faith, understood as a change in nature, more particularly and concretely, as changes in seeing, hearing, and understanding."<sup>232</sup> The author seems to explain, one must experience it or go through it to better see, hear and understand. In the "going through" one can begin to construct and reconstruct the "experiencing" of a time or event. In the above scripture, Job encountered devastating news, repeatedly. Satan and God discuss Job, and both are wagering they know him best. God allows Job to lose everything within this wager.

A messenger meets Job and makes him aware he has loss his oxen, donkeys, and servants. Then next fire consumed sheep and more servants. Finally, a great wind came struck down the house of his eldest son, where all of his children were having dinner. All of his family died. Repeatedly, Job experienced the dreadful news. In Chapter Two, God offers Job unto Satan, the man who is "blameless and upright [a] man who fears God and turns from evil."<sup>233</sup> Satan is convinced that Job will curse God if his physical body is stricken with illness and sores. God demands that Job's life must be spared. The second verse of chapter

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<sup>231</sup> Job 1:13-22 (NRSV).

<sup>232</sup> Schlauch, "Sketching the Contours of a Pastoral Theological Perspective," 207.

<sup>233</sup> Job 2:3 (NRSV).

two reads, “so Satan, went out from the presence of the Lord, and inflicted loathsome sores on Job from the sole of his foot to the crown of his head. Job took a potsherd with which to scrape himself and sat among the ashes. Then his wife said to him, “Do you still persist in your integrity? Curse God and die.”<sup>234</sup> There is a profound depth of loneliness and sense of abandonment in this moment. Job’s wife, his only living relative, tells him to curse his only remaining hope, God. Surprisingly, Job had not given up on life. He did not throw in the towel. Satan’s action did not hinder Job’s faith in God. Despite the devastating blows, Job looked within, even assessed his community, the world has she saw it his season of loneliness and imagined, what is God saying in this right now moment.

According to Schlauch, the process of constructing and reconstructing a transformative theology “is possible for the individual to acquire a way of being, an attitude which orientates a person to critical attention to their own or another’s experiencing and to be engaged with others in pastoral theologizing.”<sup>235</sup> This process happens in and out of the biblical narratives. In the story, Job’s friends visit him after hearing about all the terrible things that had happened to Job. Scripture states, “When they saw him from a distance, they did not recognize him, and they raised their voices and wept aloud; they tore their robes and threw dust in the air upon their heads. They sat with him on the ground seven days and seven nights, and no one spoke a word to him, for they saw that his suffering was very great.”<sup>236</sup> Job’s friends showed up, which was important. They provided the

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<sup>234</sup> Job 2:9 (NRSV).

<sup>235</sup> Schlauch, "Sketching the Contours of a Pastoral Theological Perspective," 208.

<sup>236</sup> Job 2:12-13 (NRSV).



ministry of presence. Remember, at this point, he had lost both his property and possessions, which meant the loss of his status in his cultural context. His children were dead. Furthermore, his wife, which the story neglects to even name, is also dead. His loneliness is real, and his friends lack the words to adequately describe or reassure Job in his loneliness. His friends are inept and lack the ability to provide relief to this loneliness of being alone. Job is alone even when surrounded by people.

Everything seemed okay as long as his friends remained silent. Many are comforted to know that God is always present and omniscient... As a source of humanistic comfort, the Bible extends a promise to all. The writer of Hebrews declares, “Keep your lives free from the love of money, and be content with what you have; for he has said, *“I will never leave you or forsake you.”*”<sup>237</sup> There is comfort in the promise that no matter our situation or station in life, God will be there as our provider. Therefore, when Job’s friends extend this ministry of presence, it is a reminder that Job is not alone during the worse time of his life.

Encountering disaster, disease, and death, would be enough to force anyone to consider giving up on God. Eliphaz, Bildad, and Zophar, wanted to better understand the situation. Thus, they ask, “How could this be?” Imagine going to the hospital to meet a loved one in the hospital who has had a stroke that leaves him or her with a left-brain hemorrhage and paralysis to the right side. People would have questions. People would want comforting and reassuring words from a friend. After a time of silence, Job’s friends began to talk. Instead of

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<sup>237</sup> Hebrews 13:5 (NRSV). Italics added for emphasis.

comforting Job with words of assurance and God's presence, Job's friends accused him of being a sinner. In the third chapter, Job has already begun his inter-questioning with God. Job asks, "Why is this happening?" Eliphaz answers by saying:

"If one ventures a word with you, will you be offended?

But who can keep from speaking?

See, you have instructed many;

you have strengthened the weak hands.

Your words have supported those who were stumbling,

and you have made firm the feeble knees.

*But now it has come to you, and you are impatient;*

*it touches you, and you are dismayed.*

Is not your fear of God your confidence,

and the integrity of your ways your hope?

*"Think now, who that was innocent ever perished?"*

Or where were the upright cut off?

*As I have seen, those who plow iniquity*

*and sow trouble reap the same.*

*By the breath of God they perish,*

*and by the blast of his anger they are consumed.*<sup>238</sup>

As mentioned previously by Pastor Larson, death and dying in the Western Judeo-Christian tradition understands death as a

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<sup>238</sup> Job 4:2-9 (NRSV). Italics added for emphasis.

“consequence of original sin. This has, of course, not been a scientifically informed belief. And where theology has been in conversation with science on this point, or when theology is indirectly informed by a growing ecological consciousness, natural death in and of itself is increasingly seen as a natural piece of the creation that God called good.”<sup>239</sup> Like Job, patients seem to look for hope and goodness in the present and the future. Right now, Job sees the interconnectedness of life’s tragedies connected to sin he did not commit. Within loneliness, Job experiences offense and hurt. In his time of need, his friends laid insults and disregarded Job’s proven record of living a life of integrity and of principles. In Chapter Five, Eliphaz pleads with Job to repent saying:

“Call now; is there anyone who will answer you? To which of the holy ones will you turn? Surely vexation kills the fool, and jealousy slays the simple. <sup>3</sup>I have seen fools taking root, but suddenly I cursed their dwelling. Their children are far from safety, they are crushed in the gate, and there is no one to deliver them. The hungry eat their harvest, and they take it even out of the thorns; and the thirsty pant after their wealth. For misery does not come from the earth, nor does trouble sprout from the ground; but human beings are born to trouble just as sparks fly upward. “As for me, I would seek God, and to God I would commit my cause.

He does great things and unsearchable, marvelous things without number.

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<sup>239</sup> Larson, “Death,” 204.

He gives rain on the earth and sends waters on the fields; he sets on high those who are lowly, and those who mourn are lifted to safety.<sup>240</sup>

Look Job, God is so gracious and giving. God is the supplier of all good things. Admit your wrong doings so that you can have the protection of God over your life again. This saga continues for all of chapter five. Eliphaz claims that all this darkness and punishment will cease after Job repents. Eliphaz tells Job, “How happy is the one whom God reproves; therefore do not despise the discipline of the Almighty. For he wounds, but he binds up; he strikes, but his hands heal. He will deliver you from six troubles; in seven no harm shall touch you. In famine he will redeem you from death, and in war from the power of the sword. You shall be hidden from the scourge of the tongue, and shall not fear destruction when it comes. At destruction and famine you shall laugh, and shall not fear the wild animals of the earth. For you shall be in league with the stones of the field, and the wild animals shall be at peace with you. You shall know that your tent is safe, you shall inspect your fold and miss nothing. You shall know that your descendants will be many, and your offspring like the grass of the earth.”<sup>241</sup>

Eliphaz makes a compelling argument that God used these horrendous acts to correct Job. Thus, Job’s health and the restoration of his house depended on correcting his wrongdoing. Eliphaz states, “Behold, this we have search out; it is true. Hear it and know for yourself.”<sup>242</sup> Job is under attack.

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<sup>240</sup> Job 5:1-11 (NRSV).

<sup>241</sup> Job 5:17-25 (NRSV).

<sup>242</sup> Job 5:27 (NRSV).

In this wager between Satan and God, Satan uses all of his tricks to discredit Job's trust in God. Though Job's friends appear to mean well, it is possible that these friends were unknowingly on assignment from Satan. The goal is to offend and hurt Job. If Satan can disturb one's trust, aggravate one's peace, and take away hope, this can cause even the most pious of us to renounce our affiliation and understanding of God. Satan destroyed Job's connection to the Holy, which resulted in loneliness. For the person who is abled body, he or she would take matters into their own hands and attempt to fix the problem. For the person who has had multiple disasters and has realized life's finitude, a life without hope is hard to repair. It is paramount that one repair this loneliness.

### **Job's Loneliness Demands Attention**

Ontologically, the new life seeks total surrender. It is becoming a new person or *a new being*. Consider the words of Paul in Second Corinthians 5:17, "So if anyone is in Christ, there is a new creation: everything old has passed away; see, everything has become new."<sup>243</sup> This is the commitment to Christ, meaning that one totally submits to Christ. In the same way, Job aims to be totally committed to Christ and has encountered loneliness that demands his attention. The understanding of new creation has to be "deliteralized." Paul Tillich explains that old symbols must be "'demythologized' not taken literally but instead taken spiritually."<sup>244</sup> Therefore, this a dynamic change, becoming a new person, results in a symbolic change. In addition, one must understand this very change amidst

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<sup>243</sup> 2 Corinthians 5:17 (NRSV). Italics added for emphasis.

<sup>244</sup> Tillich, *Dynamics of Faith*, xvii.

<sup>244</sup> Deuteronomy 6:5 (NRSV).

loneliness. Historic traditions and symbols of modern day experiences resemble and play out in the lives of the dying. The dying are trying to wash away the old life for the one to come. People must demythologize this symbolic ritual, or symbolic change, because biblical narratives set into motion the instructions for life and death.

Sin is a familiar term to the religious and non-religious. Sin's narrative holds the *old being* captive, much like *loneliness* holds dying. Jesus died on the cross to redeem and to bring the loss closer to himself. Therefore, this same grace is available to redeem and set the dying free. The ultimate concern Tillich speaks of demands an ultimate surrender. He finds the groundwork for this in the Old Testament, particularly, Deuteronomy 6:5, which reads, "you shall love the Lord your God with all your heart, with all your soul, and with all your might."<sup>245</sup> Tillich makes certain to mention that, "the Old Testament is full of commands which make the nature of this surrender concrete, and it is full of promises and threat in relation to it...and the threat is the exclusion from such fulfillment through national extinction and individual catastrophe."<sup>246</sup> Ultimately, one becomes unconditionally and ultimately concerned with the "demand, threat and promise" and with what God represents in such instances. Moreover, the summation of that calculation or understanding determines his or her faith.

Questioning God's position and meaning in one's life is a question of faith. Tillich states, "man is driven toward faith by his awareness of the infinite to which he belongs, but which he does not own like a possession. This is in abstract

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<sup>245</sup> Tillich, *Dynamics of Faith*, 14.

<sup>246</sup> Tillich, *Dynamics of Faith*, 14.

terms what concretely appears as the ‘restlessness of the heart’ within the flux of life.”<sup>247</sup> This restlessness of the heart is also loneliness. In Tillich’s sermon “Loneliness and Solitude,” he considers Matthew 14:23 which states, “and when he had sent multitudes away, he went up into a mountain apart to pray: and when the evening was come, he was there alone.”<sup>248</sup>

### **Theology of Death**

Western attitudes towards death vary around five dominant patterns.<sup>249</sup> These beliefs help to articulate our understanding of the relatedness between death and loneliness. Phillippe Aries, a cultural historian, offers insight toward patterns of attitudes regarding death. Aries five patterns of attitudes are, “death tame death, death of the self, remote and imminent death, death of the other, and death denied” or forbidden death.”<sup>250</sup> Each attitude gives insight into one’s beliefs about death, Corr explains:

Tame death: Death is familiar and simple; that is, it is regarded as inevitable and no attempt is made to evade it. Persons who are dying typically calmly await their deaths, usually surrounded by loved ones and members of the community, all of whom wait peacefully for the end. In other words, death is a public event. A major of focus of attention is the community; it is deeply affected by the loss of one of its necessary participants. Death is also seen as a sort of sleep; either one is awakened at some point to eternal bliss, or one remains eternally asleep.<sup>251</sup>

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<sup>248</sup> Tillich, *Dynamics of Faith*, 10.

<sup>249</sup> Phillippe Aries and Patricia Ranum, *Western Attitudes toward Death: From the Middle Ages to the Present* (Baltimore: John Hopkins University Press, 1974), 58.

<sup>250</sup> Aries and Ranum, *Western Attitudes toward Death*, 58.

<sup>251</sup> Charles A. Corr, Donna M. Corr, and Clyde M. Nabe, *Death and Dying, Life and Living*. (Belmont: Wadsworth, 2006), 53.

No one death is exactly the same as any other death. Tame deaths are familiar but not exact, the person is different, the surroundings or visitors are different. For example, at Holly's bedside, a dying 84-year-old woman, was a 24-hour continuous care nurse. The goal is 24-hour coverage, but it is simply not possible. The shifts are usually divided into two-twelve-hour shift, in which both nurses receive a lunch time, bathroom breaks, and the possible "I need a break" break. In hospice, it is usually customary that no one dies alone, but it is not always possible. Even still, a nurse was placed at the bedside to ensure no pain was present. This is either the pain of aloneness or physical pain and it is likely the nurse does not even know how to evaluate the differences between the two. Nurses are briefed on the patient's symptoms, for example, labored breathing, distended abdomen, and lethargy. Both the breathing and swollen abdomen can cause physical pain and the nurse would be available to monitor and to administer medicine. But there was no report given to the nurse about spiritual distress to monitor. Very likely there would not be a chaplain requested unless the family asked a chaplain. But what would the chaplain offer the patient as she etched closer towards death?

To the right of Holly was her daughter, who held her hand while looking directly at Holly. The chaplain noticed a Bible laid open at the foot of the bed and asked if it was okay to read Holy Scriptures for a while. Holly's daughter whispered, "Of course." Uncertain of Holly's request or thoughts because she was no longer able to speak, familiar scriptures were read in hopes the scriptures would generate feelings of safety and assurance.

Because Holly was elderly in age, and traditional in her protestant faith, I intentionally chose to read from the King James Version. Even without a verbal response



from Holly, both science and spirituality believe the hearing is the last thing to leave the dying. Therefore, the offered word choice hoped to be familiar and soothing.

The Lord is my shepherd; I shall not want. He maketh me to lie down in green pastures: he leadeth me beside the still waters. He restoreth my soul: he leadeth me in the paths of righteousness for his name's sake. Yea, though I walk through the valley of the shadow of death, I will fear no evil: for thou art with me; thy rod and thy staff they comfort me. Thou 82reparest a table before me in the presence of mine enemies: thou anointest my head with oil; my cup runneth over. Surely goodness and mercy shall follow me all the days of my life: and I will dwell in the house of the Lord forever.<sup>252</sup>

An “Amen” and moment of silence followed this passage. This silence spoke for itself. This silence affirmed that all would be well, and that God’s goodness really is enough. Maybe this psalm took Holly to her youth or to a place where her faith was strong, and her eyes affixed to Jesus. As Holly laid there with her eyes fixed in one spot, maybe she could see Jesus. Moreover, if she could not see Jesus, what was she really receiving from Psalm 23 as her focus already seemed fixed on the future.

Verse 1 proclaims, “The Lord is my shepherd; I shall not want.” The shepherd provides for his herd of sheep. He provides protection and leads them towards nourishment. Likewise, the Lord will keep his entire flock safe, even those who are dying. However, how does one fight back against the loneliness of death, if such a

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<sup>252</sup> Psalms 23 (KJV).

loneliness is neither welcomed nor understood? This psalm answers the question by reminding the reader and the lonely that God protects and does not abandon. One does not have to have an understanding of loneliness or even worry about their current state of loneliness. In verse 2, נהלני (ye-na·ha·le·ni), or He leadeth me, serves as a reminder to pause and take in the green pastures, and all that is around you because the Lord is in the midst and is carefully watching.

Another excellent source of biblical inspiration to explore a theological understanding of loneliness is the 23<sup>rd</sup> chapter of Psalm. The Hebrew word, מנוחת מי (mei me·nu·cho·vt), translated still waters, depicts comforting waters rather than a source of water that is overwhelming or out of control. Still waters are not waters that have stopped, rather waters that flows forward and continues. This מנוחת מי (still waters) that God “leadeth me beside” gives space to realize God is with Holly and others like Holly. Furthermore, in that time of loneliness God brings calm by presenting Godself. A *tame death* at best seemed present because Holly did not appear to be fighting or trying to evade death. Nevertheless, she was experiencing a piece of the journey that she had to walk alone, even surrounded by family, staff, and others. Her dying was indeed a public event, but her journey seemed mysterious and without appropriate language to explain.

### **Holly’s Death in the Public Arena**

When it is possible, the hospice chaplain provides the contents of a worship experience. Scriptures are read, sacred songs are sung, and prayers lifted. The theology of some, is the belief that the presence of others includes anyone in the community religious or not, as a supportive presence. After reading Psalms 23, I sang an old familiar song from Holly’s faith tradition, *I Need Thee* by Annie Hawks.

A young woman of 37 years wrote *I Need Thee* from a place of oppression. Michael Hawn, writes, “These personal devotional hymns by 19<sup>th</sup>-century women have their place. They provide glimpses into the lives of women segregated from the positions of leadership (even in the Church) by gender, leading lives separate from their spouses primarily in domestic settings, and with little or no voice in the public arena.”<sup>253</sup> Consider Holly, dying in the public arena, without a voice in the public square due to the oppressive nature of dying. Her own voice no longer brings repose in her own house and bedroom. Rather her voice of reason falls upon ears that do not hear. The silence is unheard and misunderstood. Holly’s message, her very being before her impending death is met with loneliness. Loneliness deafens humanity, Holly’s and the other, and ushers it into its final season.

### **Theological Ethics of Loneliness**

According to Jill Stauffer, ethical loneliness “is the experience of having been abandoned by humanity compounded by the experience of not being heard.”<sup>254</sup> Most of the theological work on end of life care involves pastoral leaders helping to bring meaning to an uncertain situation. Using the evidence found at silent bedsides, I propose that the loneliness experienced by the dying articulates unheard testimonies. According to Stauffer the dying cannot “give their testimony –their claims about what they suffered and about what is now owed them—on their own terms.”<sup>255</sup> Therefore, they experience an *ethical loneliness* from a deafened community of onlookers.

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<sup>253</sup> Michael C. Hawk, "History of Hymns: 'I Need Thee Every Hour,'" *Discipleship Ministries: The United Methodist Church*, accessed November 11, 2017, <https://www.umcdiscipleship.org/resources/history-of-hymns-i-need-thee-every-hour>.

<sup>254</sup> Jill Stauffer, *Ethical loneliness: The Injustice of Not Being Heard* (New York: Columbia University Press, 2015), 1.

<sup>255</sup> Stauffer, *Ethical loneliness: The Injustice of Not Being Heard*, 1.

Charles A. Corr, coined the *death of the self*, which “produces great anxiety in a person because it is believed that one is either rewarded or punished in his or her future state...death of the self involves a final testing period and what one does at this moment determines what will happen to one after death.”<sup>256</sup> For example, providing care to someone of the Jewish faith tradition may involve reciting the Shema for him or her. At the bedside of Ralph, the chaplain recited the Shema, Deuteronomy 6:4-9:

Hear, O Israel: The Lord our God is one Lord: And thou shalt love the Lord thy God with all thine heart, and with all thy soul, and with all thy might. And these words, which I command thee this day, shall be in thine heart: And thou shalt teach them diligently unto thy children, and shalt talk of them when thou sittest in thine house, and when thou walkest by the way, and when thou liest down, and when thou risest up. And thou shalt bind them for a sign upon thine hand, and they shall be as frontlets between thine eyes. And thou shalt write them upon the posts of thy house, and on thy gates.<sup>257</sup>

This last and final act of saying the Shema is meaning for meaning. Rabbi Goldie Milgram writes in “Understanding Jewish Approaches to Dying and Burial, the Shema “is the sacred phrase one says when going to sleep, waking up and leaving this life. שמע ישראל (Shema Yisrael Adonai Eloheynu Adonai Ehad). No translation effectively conveys the meaning of this phrase, which reads like an “Aha!” moment:

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<sup>256</sup> Corr, Corr, and Nabe. *Death and Dying, Life and Living*, 58.

<sup>257</sup> Deuteronomy 6:4-9 (KJV).

‘Listen! G\*d is One.’”<sup>258</sup> No matter what has happened in life, regardless of the differing religions and beliefs encountered, many come to realize, there is only One G-d<sup>259</sup> Rabbi Milgram explains:

Listening is such a central Jewish principle that tradition teaches a dying person to leave life just as when going to sleep, by saying the sacred phrase that begins with this word, shema, “listen!” A dying person is not meant to be listening to the sounds of distressed family, nor the incessant beeping of hospital equipment.

Dying is a time to listen at the gateway that leads out of life, beyond the threshold of the body. You might listen for the voice of G\*d or for whatever experience might be awaiting you after embodied life ends.<sup>260</sup>

Therefore, saying the Shema is like providing permission and well wishes on the journey towards death. Death should not be something to fear, rather an opportunity to meet others who have died before and join in a safe community of others who welcomes you. There is still a culture and misunderstanding within theology, and the rest of society that lends persons to be fretful of death.

*The remote and imminent death* suggests, according to Corr that “one’s attitude toward death is basically highly ambivalent. Death is viewed as a wholly natural event (not a supernatural one), but still great effort is made to keep it at a distance. It is both natural and dangerous, both inviting and repelling, both beautiful and to be feared.”<sup>261</sup>

This uncertainty of what death is the root of loneliness that many of the terminally ill

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<sup>258</sup> Goldie Milgram, “Understanding Jewish Approaches to Dying and Burial,” *Reclaiming Judaism*, accessed July 19, 2018, <http://www.reclaimingjudaism.org/teachings/understanding-jewish-approaches-dying-and-burial>.

<sup>259</sup> “G-d” was intentionally used while writing about Jewish beliefs and understandings. God is so holy one ought not write it on anything that can be destroyed out of respect and reverence for the Holy.

<sup>260</sup> Milgram, “Understanding Jewish Approaches to Dying and Burial.”

<sup>261</sup> Corr, Corr, and Nabe. *Death and Dying, Life and Living*, 53.

experience. Often heard, “Death just happens, we all will experience it.” While he seems so nonchalant about his feelings towards death, he makes clear he is not ready to experience it. Jim explains there is no need to rush towards death, because there is nothing after death. In listening, Jim seems to keep a healthy distance between him and death. However, when I ask if he has seen anyone die before, maybe a loved one or close friend, he replied no. He later and very subtly expressed his fear of the unknown and having nothing to compare to his situation. The Christian minister or even the Jewish Rabbi may hope their patient can find refuge in Holy Scriptures such as Psalm 56:3-4,

But when I am afraid, I will put my trust in you. I praise God for what he has promised. I trust in God, so why should I be afraid? What can mere mortals do to me?<sup>262</sup>

Jim does not seem to be a big believer in a higher power. Nevertheless, can such scriptures bring healing to both a Christian and non-believer who proclaims an extreme state of loneliness? Marva J. Dawn, states that the psalms give background to her state of “profound anguish” and “loneliness.”<sup>263</sup> Marva explains:

I’ve had numerous minor surgeries on my hands and feet, hundreds of laser burns for my eyes, and nine major surgeries, including a resectioning of my intestine because of an intussusception, a hysterectomy, a rebuilding of a shattered foot, three eye surgeries after retinal hemorrhages, two cancer surgeries, and a kidney transplant. I’ve spent countless weeks on crutches or in a wheelchair because of burns, injuries, and my shattered foot, then broken leg, and present leg brace. I

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<sup>262</sup> Psalm 56:3-4 (NLT).

<sup>263</sup> Marva J. Dawn, *My Soul Waits: Solace for the Lonely in the Psalms* (Downers Grove: InterVarsity, 2007), 12-13.

perpetually battle limited vision in my good eye and hearing loss in the left ear. My intestinal nerves are dead, and their functioning has to be manufactured with a combination of four medicines. Walking is difficult because of my crippled leg, bone deterioration, and dead nerves below the knee. Periodontal problems, nerve damage from cancer surgeries and arthritis cause perpetual pain. Every day is a struggle to balance multiple insulin injections with exercise and the effects of immunosuppressants. Some days I'm thoroughly tired of all the strain...instead of trying to fight my battles alone, I could rest in the Lord's fight for me and appreciate the gifts He gave to free me from my loneliness.<sup>264</sup>

Marva Dawn describes her loneliness as the “terrible times of rejection or crisis or fear or loss. Sometimes we are lonely for...we are fighting a particular battle against illness or suffering the ravages of chemotherapy; we are new in the neighborhood; our values are different from those of our colleagues.”<sup>265</sup> She continues by saying, “sometimes our loneliness is a general, pervasive alienation: we just don't feel as if we belong in our place of work, in our community, in our family, even in our church. Maybe we don't have anyone with whom we can share the most important dimensions of our lives.”<sup>266</sup> So then, if one's community becomes neglectful then whom do they lonely turn to? Dawn says she was able to “join the psalmist in asking God if He is going to forget us forever. The original Hebrew text expresses it as wondering if God will disregard us for “an everlastingness. God seems to have dropped us out of His plan. Nothing is changing. We have been abandoned.”<sup>267</sup> Dawn seemed left to her thoughts and wonders what is next

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<sup>264</sup> Dawn, *My Soul Waits*, 16.

<sup>265</sup> Dawn, *My Soul Waits*, 16.

<sup>266</sup> Dawn, *My Soul Waits*, 16.

<sup>267</sup> Dawn, *My Soul Waits*, 16.

because right now seems like forever. Moreover, waiting in a place of forever seems like suffering.

### **Tools of Affliction**

When people look for biblical references of one who suffers, Jesus is usually the ideal candidate. Another biblical characters who merit consideration would be Job. Job was a central character in the Bible from the land of Uz, and was considered “perfect and upright, and one that feared God, and eschewed evil.”<sup>268</sup> Commentaries suggest in its entirety, the book of Job paints a picture of “the history of Job’s sufferings, and his patience under them, not without a mixture of human frailty, a dispute between him and his friends upon them, in which, the opponents were Eliphaz, Bildad, and Zophar. The respondent was Job. The moderators were, First Elihu, secondly, God himself. The issue of all in Job’s honor and prosperity, upon the whole, we learn that many are the afflictions of the righteous, but that when the Lord delivers them out of them all the trial of their faith will be found to praise, and honor, and glory.”<sup>269</sup> Affliction falls on anyone, not just those who have done something wrong.

Sufferings and afflictions such as abandonment and loneliness are not punishments for wrong doings, but according to Elihu, tools to push one in a better direction. Job Chapter 33 declares, “God indeed does all these things, twice, three times, with mortals, to bring back their souls from the Pit, so that they may see the light of life.”<sup>270</sup> Any number of times “mortals” can experience what seems like punishment to help them see the “light of life.” Moreover, this light points to God in 1 John 1:4-5, “In

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<sup>268</sup> Job 1:1 (KJV).

<sup>269</sup> Williams Jenks, ed., *The Comprehensive Commentary on the Holy Bible*, vol. 3, (South Carolina: Nabu Press, 2010), 594.

<sup>270</sup> Job 33:29-30 (NRSV).



him was life, and the life was the light of all people. The light shines in the darkness, and the darkness did not overcome it.”<sup>271</sup> Therefore, this *tool of affliction*, this loneliness leads back to the light of God.

### **Vegas Traveler**

The excitement of a baby’s birth is a reminder how full life is. First steps, first school, first significant other, first marriage, and the like demonstrate life. Life is the ability to grow and reproduce. Life is where trial and error ruled the world, and the errors taught the living many lessons. No one believed his or her mother that the stove was hot until one touched it, felt the heat, jumped back, and fanned their hand in hopes of removing the excruciating pain and growing redness. That is life. Do you remember when you and a few friends decided to fill the gas tank of the Buick passed down from your parents and drive to Vegas? More than likely, you enjoyed yourself, enamored by all the lights and glitter. That buffet line was not so bad either. Nevertheless, you were most pleased that you had enough money left over for bus fare, because that ol’ Buick got tired and could not make the journey home. Then you laugh because Ricky tagged along and Ricky never had enough money to complete the activities everyone wanted to do. However, Ricky always seemed to enjoy himself and arrive back home safely. This story was told to me as a patient of mine reflected on life. She said man I had a lot of fun in my life. Here in my latter years, I am realizing just how much I did not know. If only I could write a book, I am sure I could save someone from all the trouble I encountered.

She spoke as if her life was over, that she had already entered into death, or because she was unable to do what she previously could. She thought life was over.

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<sup>271</sup> John 1:4-5 (NRSV).

However, the fact is, life is what happens before death too. Life still speaks even from a place disconnected from daily interactions with others. She was very much alive. I find there are two common thoughts near the end of life. Professor Norbert Elias, explains near death thoughts as: one, an “attempt to avoid the thought of death by pushing it as far from ourselves as possible—by hiding and repressing the unwelcome idea –or by holding an unshakable belief in our own personal immortality –‘others die, I do not.’”<sup>272</sup> My Vegas traveler knew and understood well she was dying.

### **Existence Matters**

There was nothing to avoid. It was as if she was looking death in the face and saying you don’t win, life was mine to enjoy and I enjoyed it; with a few hiccups along the way. Elias nearing the end of his own life writes, “we can look death in the face as a fact of our own existence”<sup>273</sup> This existence matters. Moreover, contrary to the Vegas traveler, Elias makes real the assertion that the dying “adjusts our lives, and particularly our behaviors towards other people, to the limited span of every life. We might see it as our task to make the end, the parting from human beings, when it comes, as easy and as pleasant as possible, for others as for ourselves; and we might pose the question of how this task is to be performed.”<sup>274</sup> For most Christian, Jesus is always the answer.

### **Before the Resurrection**

Through the life of Jesus and through loneliness God has prepared the dying for the journey to come. Loneliness is a tool, placed directly in your path to help you transition into a peaceful death. The life of Jesus has been used to help us live better, love

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<sup>272</sup> Norbert Elias, *The Loneliness of the Dying* (New York: Continuum, 2001), 1.

<sup>273</sup> Elias, *The Loneliness of the Dying*, 1.

<sup>274</sup> Elias, *The Loneliness of the Dying*, 1.

deeper, prosper and grow. Jesus's life was the resource. Through loneliness and before death's final call, the life of Jesus was always a demonstration and learning tool.

### **In the Garden of Loneliness**

Jesus is fully prepared because he is divine. Yet he is preparing when he gets to the Garden of Gethsemane because he is fully human. The beloved story in Matthew 26 of Jesus' prayer in the Garden of Gethsemane can be often overlooked. When the reader arrives at the story, it is difficult, it is sad and the reader wishes to speed through to the Resurrection. However, there is no Resurrection without the communion of friends and family on Thursday. Allow me to implore upon the lonely and the clergy called to bring comfort to them, to not run through this theological garden of instruction and example. Rather sit and examine the Garden experience for it is a critical moment before the encounter with death. The Garden must be gleaned over too because there is no Resurrection without the prayer and suffering found in the Garden. Spending time in the garden is a precondition for Jesus to get to the cross; the garden story in the Gospel of Matthew reads:

Then Jesus came with them to a place called Gethsemane, and said to the disciples, "Sit here while I go and pray over there." And He took with Him Peter and the two sons of Zebedee, and He began to be sorrowful and deeply distressed. Then He said to them, "My soul is exceedingly sorrowful, even to death. Stay here and watch with Me."<sup>275</sup>

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<sup>275</sup> Matthew 26: 36-46 (NRSV).

He went a little farther and fell on His face, and prayed, saying, “O My Father, if it is possible, let this cup pass from Me; nevertheless, not as I will, but as You *will*.”

Then He came to the disciples and found them sleeping, and said to Peter, “What! Could you not watch with Me one hour? Watch and pray, lest you enter into temptation. The spirit indeed *is* willing, but the flesh *is* weak.”

Again, a second time, He went away and prayed, saying, “O My Father, if this cup cannot pass away from Me unless I drink it, Your will be done.” And He came and found them asleep again, for their eyes were heavy. So He left them, went away again, and prayed the third time, saying the same words. Then He came to His disciples and said to them, “Are *you* still sleeping and resting? Behold, the hour is at hand, and the Son of Man is being betrayed into the hands of sinners. Rise, let us be going. See, My betrayer is at hand.”<sup>276</sup>

When Jesus is in the Garden, the first thing I see him dealing with, he deals with his past personal pain. In addition, if you are going to move forward in the things of God in your life, there comes some moments, that you got to deal with the stuff, which is dealing with you.

In Matthew 26:38 Jesus says, “my soul is exceedingly sorrowful, even to death,” are words most people would never imagine Jesus saying. The Greek phrase that is used there, *περίλυπος* (*perilupos*), it literally means, very sad.<sup>277</sup> The origin is from *peri* and *lupé*, meaning very sad, deeply grieved.<sup>278</sup> This then could also mean I am hurting, I am

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<sup>276</sup> Matthew 26: 36-46, (NRSV).

<sup>277</sup> “Sorrowful,” *Bible Hub*, Matthew 26:38, accessed June 18, 2018, <http://biblehub.com/lexicon/matthew/26-38.htm>.

<sup>278</sup> Bible Hub. Matthew 26:38, Greek “Sorrowful.”

distressed, and I do not know how I am going to make it through. So then, Jesus is plainly saying my soul hurts. Is that not what loneliness is, an aching of the soul? No one expects to hear the healer say he is wounded. Until this moment in the garden, he has been the miracle worker, the fixer. In the Gospel of John, he even made a dead man rise, after crying in sorrow, \Jesus said, ‘take away the stone.’ Martha, the sister of the dead man, said to him, ‘Lord, already there is a stench because he has been dead four days.’ [Jesus] cried with a loud voice, ‘Lazarus, come out!’ The dead man came out.”<sup>279</sup> Jesus is a wonder worker.

Moreover, Jesus acknowledges the hurting and loneliness of his own soul. For his entire life, Jesus has been working wounded. He has made ways out of seemingly no way, he has demonstrated with ease the ability to help others. Maybe because, like the rest of humanity, it is easier to see into the lives of others, help and mediate others, but it is difficult to come face to face with your own loneliness.

The stories found in the gospels lead Christians to a sure and certain faith. The Holy Text has wisdom writings, consider Proverbs and Ecclesiastes. Christian writings have poetry and love letters, consider the Psalms and Song of Solomon. Bruce M. Metzger explains, “the sources for our knowledge of the life and teaching of Jesus Christ fall into two categories—those written by non-Christian authors of the early centuries of our era, and those written by Christian believers about their Lord.”<sup>280</sup> It was the oral remembrance passed down, later written for the inspiration of Christian believers. Nevertheless, it is the words of Jesus himself that many readers find most interesting for

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<sup>279</sup> John 11: 38-44 ( NRSV).

<sup>280</sup> Bruce M. Metzger, *The New Testament: Its Background Growth, & Content*, 3rd ed. (Nashville: Abingdon, 2003), 89.

this study. Because even after Jesus has blessed the crowds, on Thursday met with his disciples and gave thanks (communion), he, as Metzger explains, “left the house and walked through the dark streets of the city and out into the Kidron Valley in order to reach the Mount of Olives. Here he sought a favorite spot of his for prayer and meditation, the garden of Gethsemane at the foot of the Mount of Olives.<sup>281</sup> According to Metzger it is here on the mount “Jesus endured there in spiritual agonizing... but the evangelists indicate that, being greatly distressed and sorrowful, he prayed that the cup of his suffering might be removed from him.”<sup>282</sup> To read words on a page, one would understand the scripture ensuing Jesus wanted the cup removed. That he did not want to participate in the events to come. Scholars suggest, “Jesus’ prayer was heard in the removal of the cup of suffering, but in his submitting to the divine will, which involved death and resurrection (Heb. 5:7-8). He attained a remarkable degree of tranquility that accompanied him through his arrest and trial to his last moments on the cross.”<sup>283</sup> Which would suggest the Garden of Loneliness is necessary an even a needed event for the acceptance of the cross.

In this moment, Jesus seemingly is fully human. He is fully demonstrating that no matter life successes, they all must be laid down. Fully human and fully alive, he faced his heart’s pain, the things that have hurt the core of his own humanity. No matter how faithful or pious, everybody has to lose the façade that everything is okay and indulge in the pains of life. For the entirety of Jesus’ life, everything seemingly ended up resolved. The crowd was hungry, “And taking the five loaves and the two fish, he looked up to

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<sup>281</sup> Metzger, *The New Testament: Its Background, Growth, & Content*, 145.

<sup>282</sup> Metzger, *The New Testament: Its Background, Growth, & Content*, 145.

<sup>283</sup> Metzger, *The New Testament: Its Background, Growth, & Content*, 146.

heaven, and blessed and broke them, and gave them to the disciples to set before the crowd.”<sup>284</sup> Jesus fed thousands, from two fish and five loaves of bread. Repeatedly, Jesus healed and blessed and made them whole, In Matthew 8, “When Jesus entered Peter’s house, he saw his mother-in-law lying in bed with a fever; he touched her hand, and the fever left her, and she got up and began to serve him. That evening they brought to him many who were possessed with demons; and he cast out the spirits with a word, and cured all who were sick. This was to fulfill what had been spoken through the prophet Isaiah, “He took our infirmities and bore our diseases.”<sup>285</sup> Jesus fixed things. Who now would bore his cup and life’s distresses? He alone reflected. So many times, Jesus was probably hurt, and like the rest humanity, they dying never tell the tales. Jesus is here, announcing, I am the Messiah, soon to bear the cross for the sins of all, and I am here, hurting. Life can be deceptive, in loneliness, truth is revealed.

Jesus looks back over his life, and seemingly acknowledges you cannot go through life not being hurt. Jesus was betrayed by someone near and dear to him. Metzger states, “Judas brought a motley crowd of Jewish temple guards and servants of the high priest to search with lanterns and torches every hiding place. Such elaborate precautions, however, proved to be unneeded, for Jesus made no effort either to run away or to offer resistance to arrest.”<sup>286</sup> Jesus already knew that his diagnoses of death was coming, He knew that day on Calvary’s Hill would soon arrive. He walked and operated in life surrounded by crowds and people he loved yet living inside of loneliness. Loneliness of knowing death is in the foreseeable future and no one else seems to

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<sup>284</sup> Luke 9:16 (NRSV).

<sup>285</sup> Matthew 8:14-17 NRSV.

<sup>286</sup> Metzger, *The New Testament: Its Background, Growth, & Content*, 146.

understand. The official terminal diagnosis was given when Judas, “by a prearranged signal, Judas identified Jesus to the crowd by going up and greeting him with the usual salutation, ‘Rabbi,’ accompanied by a kiss on the head; this was the customary manner of greeting a respected teacher. Thus, the betrayal took the form of a kiss that was a sign of honor.”<sup>287</sup> Affection and signs of love adorned Jesus, seemingly loved by all, yet immersed in such an ethical loneliness.

Jesus’s reputation and life scandalized. Stauffer concedes such a “loneliness is the isolation one feels when one, as a violated person or as one member of a persecuted group, has been abandoned by humanity, or by those who have power over one’s life’s possibilities.”<sup>288</sup> Jesus was hurt by religious folk. Repeatedly, I hear people who felt rejected by their faith group, ostracized or abandoned by their family. No one can be diagnosed with an illness and not become hurt. Persecuted groups cannot live without hurt and a sense of loneliness. The loss of a loved one to death, or in the case of Judas, a loved one lost to ignorance, there is a hurt and loneliness only that person can understand, which everyone will go through at some point.

There will be hurting people, pain will be experienced, and the Garden of Gethsemane represents the place, a certain location in life, where you find yourself dealing with matters of the heart. While some may find comfort in going to their local church or synagogue, maybe even calling upon friends, in the Garden of Loneliness, one can be completely free. No need to hold back the hurts or cover the scars etched on your heart by human blundering. Within loneliness one rest in pain in order to find freedom of life. In the Garden experience, one may be hurt, confused, heavy with the drama of life,

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<sup>287</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 146.

<sup>288</sup> Stauffer, *Ethical Loneliness: The Injustice of not Being Heard*, 1.



likely to turn and seek relief. The Garden is yours; loneliness becomes your safe space. Matthew 26:40 reads, “then He came to the disciples and found them sleeping, and said to Peter, ‘What! Could you not watch with Me one hour? Watch and pray, lest you enter into temptation. The spirit indeed *is* willing, but the flesh *is* weak.’”<sup>289</sup> Even when Jesus asked his friends to sit and watch awhile, they were unable to embrace the magnitude of the moment. This demonstration of the Garden experience was Jesus’ time to move forward. It was only here that he acknowledged the hurt that weighed on him. The Garden of Loneliness allows people confess the hurt and acknowledge it, in order to let it go.

As one discovers or actually acknowledge the pain, then right there in the Garden of Loneliness, the pain can be released. Jesus had to get over the pain. The pain is often contributed to humanity not respecting you as in individual. It is possible that family and friends will disappoint and trouble your heart leaving feelings of discomfort and loneliness. Everyday people, including family do not always have the right thing to say. These same people do not always show up when needed most. Rather very easily demonstrate their own faults and shortcomings. So many people are hindered by society, by the hurts of others that progress is inhibited due to the hurt. It is almost as if hurts imposed by others causes stagnation in life. As Jesus moves closer to the end of his life, he cannot afford to be stagnant for the sake of humanity. Even the people Jesus trusted in and along life’s journey failed him when once he had trusted them, primary example, Judas.

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<sup>289</sup> Matthew 26:40 (NRSV).

Judas was one of the twelve disciples. Roaming dirt roads and doing good deeds along the way, Jesus and Judas has history. Yet, Metzger notes that “it is probable that during these days the plot was formed to destroy Jesus. Judas Iscariot, one of the Twelve, went to the chief priest in order to betray him to them. And when they heard it, they were greatly pleased, and promised to give him money. So, he began to look for an opportunity to betray him”<sup>290</sup> Reflecting over the life and whole journey of Jesus, it is his actions and words that poor life into his followers. In order to get to the Garden of Gethsemane, Judas sets Jesus’ road to death in motion. Much like the doctor who enters the room and announces a terminal diagnosis, Judas extends the kiss that announces who Jesus is to authorities. According to Metzger, it had to be Judas “chosen originally, we may believe, because Jesus saw in him the potential qualities of a useful apostle. That he was a man of superior energy and administrative ability may be inferred from his having been made the treasurer of the apostolic group.”<sup>291</sup> Maybe Judas intentions for handing with Jesus was never to be a faithful treasurer, but rather a smoldering cyst. Metzger writes, “probably he had become a follower of Jesus in the hope of taking part in a political revolution and occupying a distinguished place in an earthly kingdom. But when Jesus refused to let himself be acclaimed as the worldly, national king of the Jews, and demanded instead commitment to purely spiritual values, Judas became more and more alienated from him and his teaching.”<sup>292</sup> Almost like the cyst could not take it anymore and burst. Judas was no longer, if ever, following the teachings of Jesus. Judas seemingly failed Jesus. People have the ability to fail you in times of greatest need. When hurt or wounded by people

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<sup>290</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

<sup>291</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

<sup>292</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

you know, it is like to become a hindrance in life. Imagine a stumbling block or slippery rock that seems impossible to maneuver around. These failures by trusted individuals hurt.

The Gospels seems to convey the motive for Judas's haphazard care and regard for Jesus. It was not that Jesus was a terrible person or had brought shame upon Judas, but rather it was greed.<sup>293</sup> Metzger explained in the Gospels "single out as all-controlling was his love of money. Over the months, he had gratified his avarice by petty pilferings from the common purse (John 12:6). He did not suddenly become the betrayer of his master for thirty pieces of silver. Greed was a cancer at the root of his character that gradually absorbed all that was excellent in him, and at the end became a tyrannical passion."<sup>294</sup> Judas had months, rather years, with Jesus destroying their relationship. Judas had been present with Jesus all along. Jesus was not alone, rather surrounded with people the majority of his adult life.

### **The Way towards Calvary**

As Jesus begins to make his way to the cross of Calvary, it is very poignant to see the number of people who surround Jesus begin to decrease. Consider Jesus' entrance into Jerusalem, Palm Sunday, thousands of people are on the roadside calling out his name. Jerusalem roads "were thronged with crowds consisting partly of those who had been accompanying Jesus, and partly of those who, having heard of the raising of Lazarus, flocked out of Jerusalem to see him. They welcomed him with enthusiasm."<sup>295</sup> In the Gospel of Matthew, it states, "the crowds that went ahead of him and that followed

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<sup>293</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

<sup>294</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

<sup>295</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 142.

were shouting, ‘Hosanna to the Son of David! Blessed is the one who comes in the name of the Lord! Hosanna in the highest heaven!’<sup>296</sup> The crowd cheered and “grew larger as the procession moved to the gate of the city, and the more exuberant cut leafy branches from the trees,<sup>297</sup> as the procession passed, and waved them in joyful exultation.”<sup>298</sup> Jesus was surrounded by people singing his praise. Yet the Gospel of Luke talks of the tears shed by Jesus before receiving praise. Luke records that, “as he came near and saw the city, he wept over it, saying, ‘If you, even you, had only recognized on this day the things that make for peace! But now they are hidden from your eyes. Indeed, the days will come upon you, when your enemies will set up ramparts around you and surround you, and hem you in on every side. They will crush you to the ground, you and your children within you, and they will not leave within you one stone upon another; because you did not recognize the time of your visitation from God.’”<sup>299</sup> There is a distressing time where Jesus reflects and the lack of understanding by the bystanders causes him to cry. Although surrounded by people, their inability or willingness to see what it takes to create and bring about peace, appears as an awareness that only Jesus saw.

The crowd begins to dwindle after the parade, he makes his way to the temple turning over the table providing as Metzger notes a “cleansing of the temple of the traders and money changers who profaned it.”<sup>300</sup> This symbolic act was filled with meaning, “setting forth an important aspect of his understanding of his messianic work, namely the

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<sup>296</sup> Matthew 21:9 (NRSV).

<sup>297</sup> Side note, when we first learn of someone’s illness, it is likely that we will meet them at the hospital and lavishes them with flowers, and shout their praises, remind them of their strength and ability to get well. The crowd brought leafy branches and shouted his name.

<sup>298</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 142.

<sup>299</sup> Luke 19:41-44 (NRSV).

<sup>300</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 143.

purging of contemporary Jewish religion from commercialism and materialism.”<sup>301</sup>

Frankly, consumerism seem to lack importance that Jesus wanted to convey to his followers and to those within the temple. When Jesus makes his way to the upper room where then he would be with The Twelve. In his last week, Metzger explains that “on Thursday...Jesus sent Peter and John into the city to prepare the Passover for him and the Twelve...the most solemn holiday.”<sup>302</sup> Soon after, he would be alone with only eleven, enjoy a time of reflection and talking about things of the future.<sup>303</sup> Then Jesus takes with him 11 disciples to the Garden, asking eight of them to stay, only taking with him, “Peter and the two sons of Zebedee” (James and John).<sup>304</sup> All the disciples went with him to Gethsemane, yet he only takes Peter, James and John to go and pray with him. Later, Jesus returns to his three faithful friends and find them sleeping- saying to Peter, “so, could you not stay awake with me one hour? Stay awake and pray that you may not come into the time of trial, the spirit indeed is willing, but the flesh is weak.”<sup>305</sup> They are sleep, the confidants, are sleeping while Jesus agonizes in grief. Sounds like a phrase often used in in contemporary times. Jesus goes away again to pray, returns to find his friends again sleeping. This time Jesus does not attempt to wake his friends, “and prayed for the third time, saying the same words,” referring to “the spirit indeed is willing, but the flesh is weak.”<sup>306</sup> It can be speculated that Jesus’ friends wanted to be helpful and assist Jesus, but simply could not because their flesh was weak. In this time of distress, Jesus reached out to a chosen few who he hoped could assist him in his last days. The friends simply

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<sup>301</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 143.

<sup>302</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 144.

<sup>303</sup> Metzger, *The New Testament: Its Background Growth, & Content*, 145.

<sup>304</sup> Matthew 26:36-37 (NRSV).

<sup>305</sup> Matthew 26:40 (NRSV).

<sup>306</sup> Matthew 26:44 (NRSV).

could not accommodate, maybe because they did not believe that death was imminent even when explained by the one dying. Because Jesus understood his journey toward the cross nor death could not be stopped he had to keep going. Jesus asked, “are you still sleeping and taking your rest? See the hour is at hand, and the Son of Man is betrayed into the hands of sinners. Get up, let us be going.”<sup>307</sup> Jesus had to keep moving and move beyond their fleshly understanding. Because people who surround the dying may not know what to do, and even the lack of understanding cannot detour death.

Jesus surrounded by seemingly good people did not remove the anguish he experienced in the Garden of Gethsemane. Was the message conveyed by Jesus one of faith versus flesh? Jesus intentional to speak about the weak flesh three times may be an indicator pointing to how disappointing humanity can be. Jesus took with him his best friends, disciples who have travels with him and known him personally. Their flesh could not remain strong enough to endure the hour of prayer Jesus requested, while he talked to God in prayer. Hope and faith are not to be placed in friendship, but rather the certainty of God’s will. When in need of help, scripture says, “I lift up my eyes to the hills—from where will my help come? My help comes from the Lord who made heaven and earth. He will not let your foot be moved; he who keeps you will not slumber ...will neither slumber nor sleep.”<sup>308</sup> When Jesus gets to the Garden of Gethsemane, he prays and prays because he did not want to die. He did not want to experience the Calvary’s cross. Jesus pleaded through his prayers, “he threw himself on the ground and prayed, ‘My Father, if it is possible, let this cup pass from me; yet not what I want but what you want.’”<sup>309</sup>

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<sup>307</sup> Matthew 26:45-46 (NRSV).

<sup>308</sup> Psalm 121:1-4 (NRSV).

<sup>309</sup> Matthew 26:39 (NRSV).

Asking for this cup to pass would be the equivalent of please do not let me die like this; please do not allow me to die. This garden experience is likely to feel and sound familiar to many people. Even Jesus seemingly planned and hoped for something different. No one wants to be lonely, or scared, or realize death is quickly approaching, but following the model Jesus demonstrated, humanity is likely to follow the similar steps. Jesus did not want this path; neither will others who will die.

### **Lois's Garden**

One day the chaplain visited a 96-year-old, Jewish female.<sup>310</sup> In setting the stage, you might create a full picture of my patient living with loneliness. She is verbal and always concerned about her visitors, like the chaplain. She always asked about the well-being of others Lois is bedbound, unable to hear, yet seemingly eager for a visitor to bring their world and lay it out on display at her bedside. The doctors have diagnosed her with Alzheimer's disease, and a second diagnosis of vascular dementia without behavioral disturbance. The patient came to hospice soon after learning of her terminal diagnosis. Once able to walk, now confined to a bed. Lois's bed can always be found in the middle of her bedroom, which happens to be the last room in the rear of her house.

Lois is widowed and has one son that does not live in the area and seemingly never visits. Lois lives alone in her own condominium with a help of a live-in aide. The hospice team was made aware to contact the patient's son only in emergencies. Lois had been living in the absence of any chaplain or religious leader for many years. Therefore, the chaplain on the team called Lois's son anyway to inform him of the chaplain's visit, the role of a chaplain, and the hope to be active in both the lives of his mother and his if

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<sup>310</sup> The privacy of all persons involved is protected. Names have been altered. This includes patients, families, and staff.

he allowed. The goal was to ask pertinent questions that would help provide better care for the patient. Her son explained visiting would be okay but there is “no real need.” When asked for details, the PCG was unwilling, “sorry I have to go, and you don’t have to call me every time you visit. I rather you don’t. Thanks. Bye.” My forewarning message had been confirmed. Do not call the son. I just had today because this particular day was so different.

Previous visits had been scattered for various reason. The chaplain’s first visit was met with the patient screaming “no, no, no, please, don’t touch me there, please.” Quickly the chaplain realized it was bath time and the live-in home aide and hospice HHA (Home Health Aide) was having a difficult time. The chaplain asked to help, but the patient was too mad and upset to welcome any visitors at that time. The chaplain was turned away.

As a practical theologian, it is important to set the stage, describe thick observations, what sounds were heard, and what was experienced, because it all plays a role in practical concerns. According to Browning, “theology can be practical if we bring practical concerns to it from the beginning.”<sup>311</sup> I knocked on the door and “come in” rang out from the rear of the home. I entered, the house was quiet, clean, and everything in its respective place. Lois’ live-in aide was on the patio with a book and iPad, Lois was in her bed with the television on with no sound. The house felt like a quiet waiting area with the feel of anticipation of something, anything and nothing. For the past year, the bed has been perfectly placed in the same direction; in front of an immaculately clean mirror located beside the soundless television. The patient’s patio door opened and blinds up.

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<sup>311</sup> Browning, *A Fundamental Practical Theology*, 5.



The sun was bright, but it did not seem to fall on the patient, the sun's ray stopped at the patient's door. The room was cool, white, and soundless.

Immediately, a sense of isolation, loneliness bordering on pity. The chaplain could not acknowledge her own feelings verbally, so instead, the chaplain just held her hand. The chaplain rubbed her hand paying attention to the wrinkles and veins as if they were the most precious thing in the world. In that moment, she made eye contact as to question, who would care so much? Lois held the chaplain's hand tighter as a form of communication seemingly; it felt as though she believed a stranger cared for her. A stranger who soon did not feel much like a stranger anymore.

Reflecting on the whole visit, the chaplain entered the room smiling and waving with excitement because, well, Lois could not hear. She quickly noticed I was there and gave off a big smile. Looking up she asked, "How are you?" Fine, how are you? Remembering that the chaplain cannot read lips, and the patient cannot hear, there was a lot of over announcing and head nods to say all is well. That is good, by now her hands are shaking, and smiling and thinking what else can be said that she will understand? Previous visits the aide would make snide remarks when asked if the patient ever responds to her, or can she hear? Even when asked how is the patient? She would say things like "you see her, what do you think?" The chaplain desperately wants the patient to respond. Partly to prove the aide wrong and mostly so this patient can have a safe outlet.

Tell me, how are you feeling today? She cannot hear, sometimes she will say, "I don't know," as in, I do not know what you are saying, but today she just looked towards the television. Sitting beside her quietly and ensured hands were touching. She held on

tightly, never looked directly at the chaplain, just held on tightly. Sitting directly in front of her, the chaplain rubbed her hands, and straightened her wrinkles. She looked, then back to the TV. She did not let go, did not move, and just was. After several minutes of being, the chaplain pulled out her phone and pull up the images, put it in front of Lois and said, “Babies!”

Absolutely no reaction. Previous themes, like locations, art, gardens and she would always verbalize something like “oh that’s beautiful” or “have you been there?” Today, nothing. On the phone screen was a picture of myself, the patient saw it, looked and said, Oh, that’s a nice picture. Now smiling and thinking she wants to see more, just not them babies! So a few others images appeared of winding roads, rollings hills, even the leaves of an autumn fall. And the last photo was of words that read: “Life. Is. Tough. My. Darling. But so. Are you.”<sup>312</sup> To my surprise, Lois read every word aloud. She looks up at me and smiles, the chaplain affirmed her by speaking out loud saying, “That’s right, you are tough, and you are loved.” Not thinking she heard me but just wanted to speak it into the atmosphere, as a time of rejoicing and validation.

Now knowing she can read, more options were available to communicate. The handy came into use, pulled out the stylus and swiped to the appropriate page that would allow words to be written. First messages said, “I love you,” I love you and the Holy One Loves You. She responds, you and God are the only ones. Lois speech had been so limited to this point. She had not seemed to have the courage or desire to speak to any of her caregivers, unless it was the usual, don’t touch me there, and leave me alone. Even when asked if she is hungry, Lois usually responds with a nod of her head. Yet today she

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<sup>312</sup> Stephanie Henry Bennett, “Life is Tough,” *LiveLifeHappy*, accessed July 4, 2018, <https://lifelifehappy.com/life-quotes/life-is-tough-my-darling/>.

responded and spoke her truth. Encouraged to tell more, but there was only silence.

Chaplain rubbed her hair and waited. After some time passed, she held the chaplain's hand tight.

Through the patient's actions, she seemed to enjoy the interactions and holding hands tightly seemed to say she wants care and connection. A practical question came to mind: when was the last time Lois held a hand of someone? Cognitively, Lois seemed more aware than people give her credit. The patient seemed to be thinking that she is all alone. She was no longer integrated with a community of her own; she had been shielded from the rest of society. Cast away within the safety and shelter of her own home. It seemed intentional. It seemed ghettoized. Lois' social needs seemed unmet. Not due to choices she has made seemingly. There is little concrete information available, but the only visitors seem to be the live-in aide and the hospice team. The hospice aides interact with the patient, it is always with care but also with an element of fear, fear that the patient will yell out or fight back. No one from the team ever seen or heard the aide hold a conversation with the patient. The aide is never in the same room with the patient other than giving care, and there has been no indication the patient's son visits. There are no other friends involved. Is this considered loneliness?

This pastoral visit seemed to open the world back up to her, giving the patient access and permission to reveal inner feelings. Lois seemed to believe there is a God and that God is present in her life. Socially the patient is isolated, and theologically God is near. Consider Luke 9:28, which states,

Now it came to pass, about eight days after these sayings, that He took Peter, John, and James and went up on the mountain to pray.

As He prayed, the appearance of His face was altered, and His robe *became* white *and* glistening. And behold, two men talked with Him, who were Moses and Elijah, who appeared in glory and spoke of His decease which He was about to accomplish at Jerusalem. But Peter and those with him were heavy with sleep; and when they were fully awake, they saw His glory and the two men who stood with Him. Then it happened, as they were parting from Him, *that* Peter said to Jesus, “Master, it is good for us to be here; and let us make three tabernacles: one for You, one for Moses, and one for Elijah”—not knowing what he said.

While he was saying this, a cloud came and overshadowed them; and they were terrified as they entered the cloud. <sup>35</sup> Then from the cloud came a voice that said, “This is my Son, my Chosen;<sup>[d]</sup> listen to him!” <sup>36</sup> When the voice had spoken, Jesus was found alone. And they kept silent and in those days told no one any of the things they had seen.<sup>313</sup>

Upon entering the room, Lois was just a patient. After being able to communicate with her, it seemed she had encountered a sense of closeness. God’s Holy presence was dazzling all over her and in return, she expressed a sense of gratitude. In her own home untouched by a community, she finally appeared relaxed. Maybe she finally felt at home in her home. Spiritually this visit was a reminder that God really is always present and his willing to unveil Godself. Lois until this visit had only spoke in a limited amount of

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<sup>313</sup> Luke 9:28 (NRSV).

words, mostly yes and no. She spoke today, God was revealed today, and in her time of awe she will keep today's secret conversation, and as her chaplain and minister, the gospel good news was learning that being in sincere community allows loneliness to speak to the unknowing. The one who lives wounded within loneliness ministered today.

## CHAPTER FOUR: ASSERTION: BLESSED AND BROKEN

After conferring with the voices of theology, society and those seemingly listening from the position of loneliness, this research renders a verdict. Loneliness calls for a community to commune with and not sympathize over. No particular discipline need to wage war on loneliness, but rather listen at the heart level and provide a community void of judgement that will journey with those who are dying through the Garden of Loneliness. This chapter review attempts to articulate the findings of this research. The major topics covered will be how strangers really do matter, importance of presence and community. It becomes essential to ask *not* the stranger to change for us, but as a church, a culture and society, change for the stranger.

Loneliness describes feelings of abandonment and aloneness, which are particularly present at the end of life. The internal suffering of loneliness usually leads to a time of inner reflection for those that suffer. When possible, this suffering leads one to tell of the wisdom he or she learned or discovered. In essence, loneliness afflicts the soul. The soul suffers from loneliness, and despite a possible cure, no one is listening. However, the dying are not the only ones that suffer this phenomenon, but it is the dying must find a platform at the end of life. It is as if someone or something has separated their conscience, and this conscience yearns reconnection to humanity and to God.

Those with a terminal illness and near death often stare off—daydreaming and struggling to connect. This daydreaming is a symptom of loneliness. A team of psychologist and psychology students explained, Maladaptive daydreaming happens most often occurs as a coping mechanism in response to trauma, abuse or loneliness.<sup>314</sup>

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<sup>314</sup> Maria Tapu, “Maladaptive Daydreaming,” *The Psychologist* 29 (2016): 886-893, <https://thepsychologist.bps.org.uk/volume-29/december-2016/maladaptive-daydreaming>.

Sufferers “create a complex inner world which they escape to in times of distress by daydreaming for hours. It is a vicious cycle of addiction; maladaptive daydreaming inevitably creates an emotional attachment to the characters and the life created, which often replaces the painful real-life interactions between family and friends. It also interferes with studying, working and looking after one’s hygiene and wellbeing, which then further hinders daily functioning.”<sup>315</sup> Their day comprises reflections of yesterday. The dying watch the evening news as it describes how the world is in despair. Their thoughts remain in loneliness. They look for validation as the lonely reflect over their daily lives, regrets, and past choices. The lonely dying hope they contributed to making their family and world better. Sometimes it takes a chaplain or minister to help process the feelings and emotions the lonely dying have about life—their life. The chaplain or minister offers a safe space for the dying to make sense of all that has happened and can happen with God’s help.

In life, not everyone always gets it right. Life is a task, even a gift to enjoy and experience. In life, there is an expectation of accomplishments and success. What does it mean to succeed? Is success ever achieved? Loneliness afflicts the conscience, the heart, and one’s will as he or she discovers his own defects while in conversation with God. Jeremiah 18:4 states, “The vessel he was making of clay was spoiled in the potter’s hand, and he reworked it into another vessel, as seemed good to him.”<sup>316</sup> Loneliness seems to settle in vessels now empty for God’s use and reconstruction. Even though feelings of unworthiness may be present, feelings of betrayal, and judgement, this person is still able to teach others of what they have learned. Loneliness separation and disconnection from

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<sup>315</sup> Tapu, “Maladaptive Daydreaming,” para. 3.

<sup>316</sup> Jeremiah 18:4 (NRSV).

others both emotionally and physically—it is not a psychiatric condition. However, it affects one’s mental health and life span. Elderly persons with a physical or terminal illness report higher prevalence of loneliness than their peers without.<sup>317</sup> Believing they are no longer of any help, others often cast the lonely away. This separation is sometimes intentional because no one seems to get it. Other times, family and society cast the lonely into the corners of their own homes, rehabilitation centers, and assisted living facilities. Loneliness is a space where one considers their ultimate concern, their hopes for a cruel world, and healing for their wounds. Loneliness is natural and necessary, and if left unattended, loneliness can have serious consequences for the mental and physical well-being of people.<sup>318</sup> SC Tiwari says there are three types of loneliness i.e. situational loneliness, developmental loneliness and internal loneliness.<sup>319</sup> Internal loneliness are based on the person’s own personality and internal factors and coping mechanisms.<sup>320</sup>

Deciphering between culture, one’s own experience and a sense of spirituality is difficult to differentiate and maneuver through. Understanding or gaining a new horizon is possible with intentional communication. If practitioners were better positioned to help explain what happens when experience, culture, and church history collide, the understanding of loneliness would not be in such a deficit. Theological reflection gives weight to the faithfulness of the Christian who desires to walk and respond with a heart seeking Christ and seeking to see God in others too. This authentic walk as a disciple of

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<sup>317</sup> Mushtaq, Raheel, Sheikh Shoib, Tabindah Shah and Sahil Mushtaq, “Relationship Between Loneliness, Psychiatric Disorders and Physical Health? A Review on the Psychological Aspects of Loneliness,” *Journal of Clinical and Diagnostic Research* 8, no. 9 (2014): WE01–WE04, doi:10.7860/JCDR/2014/10077.4828.

<sup>318</sup> Mushtaq et al., “Relationship Between Loneliness,” WE01-WE04.

<sup>319</sup> Sarvada C. Tiwari, “Loneliness: A disease?” *Indian Journal of Psychiatry* 55, no. 4 (2013): 320–22, doi:10.4103/0019-5545.120536

<sup>320</sup> Tiwari, “Loneliness,” 320–22.



Christ is weary, yet it uncovers and reveals the human experience. The chaplain or the wounded disciple has the capacity to enter openly into theological reflection for the purpose of being liberated from the fear found within loneliness. It is a quest to rest or even thrive in a dynamic wisdom.

Evelyn Eaton Whitehead James D. Whitehead suggest that one derives such wisdom from a ministry that “as theological, it must attend confidently and competently to the resources of Scripture and the historical tradition. As practical, it must be more than theoretically sound; it must be able to assist a wide range of ministers in their efforts to reflect and act in complex pastoral context.”<sup>321</sup> The bedside of a dying person is a context that is complex and pastoral. It is a place where dreams shatter, one seeks religion and spirituality, and culture speaks in high octaves that shape the future. If the dying remains wounded within their dying and loneliness, wisdom will continue to exude from them. Yet, one’s wounds spark the provocation to speak with insight, and sometimes, clarity.

The chaplain met with Joseph at his bedside. He welcomed the chaplain into the small chambers of his hospital room where he so desperately tried to maintain control. He told me, “At this point in my life I accept all religions and all prayers.” His wife tried to speak for him, “He’s Catholic,” she said. His rebuttal, “Chaplain will you bless me?” He explained that through his time alone, contemplating life, his loneliness was an uncharted territory. He described loneliness as drowning in a cup of water. Everyone knows an adult cannot drown in a cup of water. He was alluding to the fact—with all his loved ones around—that no one could save him. For Joseph, this was something he had to do—he

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<sup>321</sup> James D. Whitehead and Evelyn Eaton Whitehead. *Method in Ministry: Theological Reflection and Christian Ministry* (Lanham: Sheed & Ward, 1995), x.

had to die. For a while, the journey of death was lonely for him. Joseph explained that he felt a sense of communal responsibility to teach what he is learning. He cannot walk, but he can talk. He says, “I’m just abled a little differently—I can still teach what I know to all those who visit me. In his despair, he learned two things, he is not dead, and he needs a community to teach what he knows.

Henri Nouwen, in his tenure, was ordained a diocesan priest who chose to live among the marginalized, including the poor those who were differently abled. Nouwen often spoke from the perspective of the minister. For the minister, according to Nouwen, “is called to recognize the sufferings of his time in his own heart and make the sufferings of his time in his own heart and make that recognition the starting point of his service. Whether he tries to enter into a dislocated world, relate to a convulsive generation or speak to a dying man, his service will not be perceived as authentic unless it comes from a heart wounded by the suffering about which he speaks.”<sup>322</sup> If this is true, then I as the chaplain or minister am not merely having a conversation with the dying, but rather a conversation minister to minister. Out of the depths of loneliness, this wound that stricken the dying, comes an outpouring of the heart. Nouwen tells the story of a Talmud legend:

Rabbi YOSHUA BEN LEVI came upon Elijah the prophet while he was standing at the entrance of Rabbi SIMERON BEN YOHAI’S cave...He asked Elijah,  
“When will the Messiah come?”  
Elijah replied, “Go and ask him yourself.”

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<sup>322</sup> Henri Nouwen, *The Wounded Healer* (New York: Doubleday, 1972), xvi.

“Where is he?”

“Sitting at the gates of the city.”

“How shall I know him?”

He is sitting among the poor covered with wounds. The others unbind all their wounds at the same time and then bind them up again. But he unbinds one at a time and binds it up again, saying to himself, ‘Perhaps I shall be needed: if so I must always be ready so as not to delay for a moment.’<sup>323</sup>

The story aims to demonstrate how the Messiah, “is sitting among the poor, binding his wounds one at a time, waiting for the moment when he will be needed.”<sup>324</sup> Nouwen believes this is also the role of the minister. For the minister must acknowledge and be aware of her own *woundedness*. He admonishes the minister, as it is the “task to make visible the first vestiges of liberation for others, he [or she] must bind his [or her] own wounds carefully in anticipation of the moment when he [or she] will be needed. He [or she] is called to be the wounded healer, the one who must look after his [or her] own wounds but at the same time be prepared to heal the wounds of others.”<sup>325</sup> The one dying of a terminal illness, experiencing loneliness at the end of life, is both wounded and healer. Joseph through his loneliness discovered he is both wounded and healer.

Those experiencing loneliness like Joseph are often required to walk the path toward death alone, forced to reflect and heal themselves. Often the lonely must heal others around them. The Talmud story suggest, “because he binds his own wounds one at

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<sup>323</sup> Nouwen, *The Wounded Healer*, 82.

<sup>324</sup> Nouwen, *The Wounded Healer*, 82.

<sup>325</sup> Nouwen, *The Wounded Healer*, 82.

a time, the Messiah would not have to take time to prepare himself if asked to help someone. He would be ready to help.”<sup>326</sup> Nouwen says the story of Jesus gives “a new fullness by making his own broken body the way to health, to liberation and new life.”<sup>327</sup> At the end of life, the loneliness experienced by the dying, the wounded, makes his own journey towards death, available to help heal and liberate. Thus, “like Jesus, he who proclaims liberation is called not only to care for his own wounds and the wounds of others, but also to make his wounds into a major source of his healing power.”<sup>328</sup> One finds ultimate healing only through the experience of loneliness and after death. Society has failed to hear adequately those voices nearing the end of life. There is healing and liberative healing available for all of society. The lonely have the ability to speak in a way that is powerful to others who are also wounded in a seemingly broken society.

Society can benefit from hearing the wounds of many voices. Catholic priest, professor, and theologian, Henri Nouwen contends in silent tears, these voices cry out, “words such as ‘alienation,’ ‘separation,’ ‘isolation’ and ‘loneliness’ have been used as the names of our wounded condition. Maybe the word ‘loneliness’ best expresses our immediate experience and therefore most fittingly enables us to understand our brokenness.”<sup>329</sup> Loneliness is not something to push away, but experience. Many will experience it as a condition. In their dying, the lonely minister to others. Nouwen says loneliness “is painful; for over and above his experience as a man in modern society, he [or she] feels an added loneliness, resulting from the changing meaning of the ministerial

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<sup>326</sup> Quoted in Nouwen, *The Wounded Healer*, 82.

<sup>327</sup> Nouwen, *The Wounded Healer*, 82.

<sup>328</sup> Nouwen, *The Wounded Healer*, 82-83.

<sup>329</sup> Nouwen, *The Wounded Healer*, 83.

profession itself.”<sup>330</sup> Being a minister of loneliness is not a profession one chooses, but it is a profession that has a mighty word for the world. There is an added loneliness because one only realizes and recognizes it at the end of one’s life for the greater good. It is a learning and teaching about how to detach oneself from a world of attachment to a world one can create.

The dying lonely like Joseph have strived much of their lives to better themselves to become successful citizens of the world. These individuals have had to focus on themselves, but now must speak of detaching, letting go, sharing, and releasing within this space called loneliness. One could question why is there so much detachment in death—why do the dying have to detach from their homes or even people with whom they have come to feel safe. Bill Holmes an adult neurologist, ordained chaplain, and well aware of his illness,<sup>331</sup> talked about home, and explains the home as “the focal point of our lives, for it is there that we have the possibility of escaping the pressure of day to day work and having time to just be ourselves. The home is the wellspring of personhood, the place where we begin to learn about community and the value of working for the common good. It is where we initially establish our identity.”<sup>332</sup> Bill Holmes, the author of *Thoughts from the Bedside: From Medicine to Chaplaincy and Beyond*, and other chaplains, have had the opportunity to spend countless hours at the bedside of the dying. It is typical for a chaplain to hear one request when visiting with patients in the hospital, “I want to go home.” Home is where familiarity lives. Home

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<sup>330</sup> Nouwen, *The Wounded Healer*, 83.

<sup>331</sup> Bill Holmes, “My Turn,” *Highland Baptist Church*, accessed July 16, 2018, <https://hbclouisville.org/2018/07/03/my-turn-by-bill-holmes/>.

<sup>332</sup> Bill Holmes, *Thoughts from the Bedside: From Medicine to Chaplaincy and Beyond* (Macon: Nurturing Faith, 2018), 93.

means feeling normal, safe, and in control again. The chaplain hears this repeatedly, implied or verbalized. Over time, “frequent moves are made, especially forced moves, things change. Not only is there a loss of whatever stability might exist in a family; there is also a loss of a sense of belonging...[personhood is] left behind.”<sup>333</sup> Moving from the hospital to home is a change. It is moving and changing how one understands of his or hers place in life and society. It is a shift to go from feeling safe and secure to a place of uncertainty. As a practitioner, I have learned that I must be sensitive and respectful of the psychological wondering that takes place at the end of life. The dying wonder about purpose and the marks he or she will leave on the world.

Families suggest that their loved ones are no longer interested in the same things. The patient confirms that to me. Families suggest he must be depressed because he encourages silence, and says, “Sit a little while.” Bereavement specialist comfort the family members left behind after a death of a loved one. Chaplains attend to the needs of the dying and learn from the verbal and non-verbal discourse being rendered from there societally prescribed ghetto. He tells the family repeatedly, to shush, and to sit awhile. In this scenario, he is the teacher and his classroom is the ghetto of loneliness. Learning takes place right here within this confined ghetto of loneliness. Ghetto, the place dying persons are forced to live sometimes intentionally, most times not right here, the lonely he can share his new journey and reflect on the life he lived. This new journey recognizes failure and sees the hope that lies ahead. If only someone would commit to the silence or listening to his life’s reflections the curriculum for learning how to die could be written.

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<sup>333</sup> Holmes, *Thoughts from the Bedside*, 93.

Bill reflected on his heritage, particularly about prayer from his conservative evangelical church and the many stories connected to prayer.<sup>334</sup> There are many ways to pray and a variety of things to pray for. Even so, “If you have been around critical illness, dying and death for very long, and tried to do the work of a pastor or chaplain, you will likely have become a person of prayer.”<sup>335</sup> The chaplain follows the tradition of the patient. An evangelical may want a prayer of healing, using the language learned of healing in Isaiah 53:5: “But he was wounded for our transgressions, crushed for our iniquities; upon him was the punishment that made us whole, and by his bruises we are healed.”<sup>336</sup> Holmes always wondered what to say exactly to God, because so often he was in trouble for cursing or being banned from the church campgrounds. One particular gathering is forever burned into my memory circuits. We were asked by the leader to form a circle and then, in turn, offer a “sentence of prayer.” He recalls:

For sure there had been no time in my life up to that point where I had publicly uttered anything that even remotely resembled a prayer. In fact, at one point I had been banned from the yard and very house in which I stood that night because I had repeatedly used profanity as we played in the front yard. Before my time to pray came, I leaned over and whispered into the ear of my friend, Gary, ‘what do I say?’ I received no answer.<sup>337</sup>

He made his way through that experience with his friends at his side, but he was very interested in saying the right thing to please the listeners and to please God. Gary was not

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<sup>334</sup> Holmes, *Thoughts from the Bedside*, 109.

<sup>335</sup> Holmes, *Thoughts from the Bedside*, 109.

<sup>336</sup> Isaiah 53:5 (NRSV).

<sup>337</sup> Bill Holmes, “BSK: From Then and There to Now and Here,” *President’s Blog*, last modified January 24, 2017, sec. 3, para. 8, <https://bsk.edu/president/presidents-blog/>.

much help. Bill finds himself surrounded by people. His family loves him, church members adore him, and his comrades celebrate him. Yet in the end, he reflects on being that kid that did not know what to say and wondered if God even had time for him. He says, “Beyond feeling that God was about to be very busy, I was left with uncertainty about what to say to God. I still have some uncertainty about what to say, but I am okay with that now. I am more interested in hearing what God has to say to me—not an easy task, as I have a somewhat noisy heart.”<sup>338</sup> Tattering back and forth, he laments in this season of loneliness.

The culture created within Bill’s church was passed down, but it was not etched on his heart. He discussed with Ms. Mary from church, and “Mary would read some Scriptures or have us read it; then she would ask us to spend some time in silent prayer before ending wither own prayer for us. I often heard her pray, ‘Speak to us, Lord Jesus, that we might hear and know you.’ If there was much in the way of ‘Lord, help Billy with his homework’ or ‘Help these boys and girls make good grades,’ I don’t recall it. The emphasis I recall was on hearing and understanding.”<sup>339</sup> In this vanity, the loneliness seems to better position the dying to engage in an acute ability at hearing and seeking understanding. One can build, dissect, and reengage learned experiences with one’s ear bent towards God’s voice.

During his state of loneliness, Job knew intimately and believed deeply in God. Job waited for God through all his torment and loss. The story of Job has been an important story learned in the Christian tradition. One’s own personal station in life may determine how one interprets and receives that story. Personal circumstances play a role

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<sup>338</sup> Holmes, *Thoughts from the Bedside*, 110.

<sup>339</sup> Holmes, *Thoughts from the Bedside*, 110.



in how Job's story might cross your mind down the road, thus providing you a new insight and understanding as God returns the story to memory. Bill describes that while Christians easily recognize the Sermon on the Mount, few seem to understand it fully. He writes,

But sometimes I get the feeling that it stops right there, the kingdom most often prayed for in much of American Christianity is modeled more after our political and social agenda, not the kingdom of God. The will we seem to be most interested in is our own or that of our particular political group, so never mind what is going on in heaven. How often is it that daily bread is all we seek? As for forgiveness—it is in short supply. As for deliverance from evil, the threat of nonexistence arising in the midst of a cancer pronouncement or the fear evoked by a catastrophic, life-threatening illness makes the cry for deliverance quite real. Deliverance is the subject matter in an acute care unit, even if unspoken. When you find yourself looking up at the ceiling from a hospital bed in the midst of monitors that shout out your blood pressure, heart rate, respiratory rate, and oxygen saturation on a continuous basis, being delivered from the fear of what might happen next looms large...our greatest sense of abandonment.<sup>340</sup>

Such an abandonment leaves one to ponder life's events alone. It may be the same story line for thousands of others—we live, we die. However, the context of the story now applies to us personally. The historic story comes alive in the life of the dying, and God is heard much too clearly. Every wound and scar are better understood and available for others but no one hears because their life is out of context.

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<sup>340</sup> Holmes, *Thoughts from the Bedside*, 111.

## Ultimate Concern

Humans seem to try to evade and demolish any signs of loneliness. Society is not very accepting of it. The one who experiences it receives a double whammy, and it is painful. The pain comes from loneliness and the rejection from others. For the majority of people's lives they have watched the lonely person with sorrowful eyes. The reflection of the mirror causes anguish and an acute awareness of the life not accepted or understood by society. In turn, life is spent searching for something more. Humans search for something to mend together the pieces of our lives. Nouwen calls it a search for "the experience of unity and community. It has also led people to ask anew how love, friendship, brotherhood and sisterhood can free them from isolation and offer them a sense of intimacy and belonging. All around us we see the many ways by which the people of the western world are trying to escape this loneliness."<sup>341</sup> Nouwen suggests the many ways people aim to escape, "psychotherapy, the many institutes which offer group experiences with verbal and nonverbal communication techniques, summer courses and conferences supported by scholars, trainers and 'huggers' where people can share common problems, and the many experiments which seek to create intimate liturgies where peace is not only announced but also felt—these in popular phenomena are all signs of a painful attempt to break through the immobilizing wall of loneliness."<sup>342</sup> Thus, society throws one more last attempt to save her from her loneliness, and a chaplain arrives to help pray away or convince away the loneliness of the dying.

Loneliness does not have to go anywhere! Loneliness is a wound that can produce healing when allowed to do so. It is not sharing the pain and anguish of loneliness alone.

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<sup>341</sup> Nouwen, *The Wounded Healer*, 83.

<sup>342</sup> Nouwen, *The Wounded Healer*, 84.

Such pain would only produce more loneliness. Instead, Nouwen suggests this sharing is an acknowledging “pain and suffering as rising from the depth of the human condition which all men share.”<sup>343</sup> If culture believes there is a light at the end of the tunnel, then loneliness is that light. Loneliness is that beacon of hope that points us in the direction of forgiveness, hospitality and community. In the Judeo-Christian tradition, Nouwen says hospitality “gives us more insight into the nature of response to the human condition of loneliness. Hospitality is the virtue, which allows us to break through the narrowness of our own fears and to open our houses to the stranger, with the intuition that salvation comes to us in the form of a tired traveler. Hospitality makes anxious disciples into powerful witnesses, makes suspicious owners into generous givers, and makes closed-minded sectarians into interested recipients of new ideas and insights.”<sup>344</sup> Loneliness is a necessary part of the journey.

Bill who is living with several terminal diagnosis, describes how “dying starts at birth. A great deal of neuroscience research has been gathered in the last several decades on *apoptosis*, which is programmed cell death so that some nervous system cells start to die at birth. But beyond the scientific there is a sense in which much of life is spent wrestling with this reality.”<sup>345</sup> Bill makes an important claim here that we all wrestle with reality, but only the aging and dying population actively begin to explore and make known the discoveries of one’s assessment of reality. In such a personal assessment, “The power of death is at work in the world is evident in many aspects of our lives. We use work and possessions to justify our existence. Bill Holmes declared even “non-work

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<sup>343</sup> Nouwen, *The Wounded Healer*, 88.

<sup>344</sup> Nouwen, *The Wounded Healer*, 89.

<sup>345</sup> Holmes, *Thoughts from the Bedside*, 13.

experiences, especially when we perceive them as devoid of meaning, can be like waiting on death. For some the harshness of work [and loneliness] may be so great that it is seen as a foretaste of death or nonexistence.”<sup>346</sup> Perhaps it is the foretaste of where the world *ought* to be. Tillich “proclaimed the doctrine of the “sacred void,” a period of waiting for the right moment (Kairos) to act.”<sup>347</sup> There is a right moment to be ontologically alive and of value to others.

Nouwen offers insight of “a time, not too long ago, when we felt like captains running our own ships with a great sense of power and self-confidence. Now we are standing in the way. That is our lonely position.”<sup>348</sup> It does not have to be that way. In fact, the dying are metaphorically the captains leading the way forward through loneliness and toward something greater we hope. Nouwen continues with the metaphor of captain as the wounded healer, this loneliness in the life of the captain is a wound that “hurts all the more, since he not only shares in the human condition of isolation, but also finds that his professional impact on others is diminishing. The minister is called to speak to the ultimate concerns of life: birth and death, union and separation, love and hate.”<sup>349</sup> This captain is well experienced from his bruises and wounds of life and is now better able to explain and codify his or her own assessment of life. His or her own experiences couple with time now available to compare and contrast multiple arenas that allows space for meaningful interactions. This interaction needs to be with the sibling, saints and friends, and the minister with the hopes of providing insight of the ultimate concern.

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<sup>346</sup> Holmes, *Thoughts from the Bedside*, 13.

<sup>347</sup> Tillich, *Dynamics of Faith*, xv.

<sup>348</sup> Nouwen, *The Wounded Healer*, 87.

<sup>349</sup> Nouwen, *The Wounded Healer*, 85.

Ultimate concern is of great importance when loneliness is sheltered, marginalized, or ignored. Others place loneliness on the edges of events or refuse to admit it to the places where decisions take place. Such acts do a disservice to the whole community. It is a sad day when “in hospitals, where many utter their first cry as well as their last words...are often more tolerated than required.”<sup>350</sup> How much more would one understand? How many glimpses of God have we missed by suppressing the thoughts of the dying and castrating the loneliness? Nouwen describes, “Prisons, where men’s desire liberation and freedom is most painfully felt, a chaplain feels like a guilty bystander whose words hardly move the wardens. In the cities, where children play between buildings and old people die isolated and forgotten, the protest of priest are hardly taken seriously and their demands hand in the air like rhetorical questions.”<sup>351</sup> Should we remove loneliness?

Loneliness, like aloneness at the end of life should not be removed. In Tillich’s sermon titled, “Loneliness and Solitude,” Tillich exclaims,

God Himself cannot liberate man from his aloneness: it is man’s greatness that he is centered within himself. Separated from his world, he is thus able to look *at* it. Only because he can look at it can he know and love and transform it. God, in creating him the ruler of the earth, had to separate him and thrust him into aloneness. Man is also therefore able to be spoken to by God and by man. He can ask questions and give answers and make decisions. He has the freedom for good

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<sup>350</sup> Nouwen, *The Wounded Healer*, 85.

<sup>351</sup> Nouwen, *The Wounded Healer*, 85.

or evil. Only he who has an impenetrable center in himself is free. Only he who is alone can claim to be a man. This is the greatness and this is the burden of man.<sup>352</sup>

Loneliness is a gift that does not feel like a gift. It is more like receiving a new car without tires. Like the children of Israel—free from bondage yet trapped in the wilderness—loneliness makes you wonder in the wilderness of your own mind. The Israelites learned through painful lessons before God allowed the next generation to enter the promise land. It is the pain, the wondering, the praying, the insight—might I say, *prophetic insight*, that the next generation must learn of from today’s dying.<sup>353</sup> Most importantly, you have an obligation to tell the story from beginning to end, until your life is no more. That biblical writer says, when you “lie down and when you rise.”<sup>354</sup> When you are up and when you are down. Through your dying and in your resurrection we ought to continue to declare the position and presence of the one God who continues to speak, louder and louder.

The loudness of the wounded-ness are meant to be heard. Lois taught me that that strangers matter. It was the stranger that came to her aide, the stranger that listened long enough to hear her speak. I was the stranger that demonstrated genuine love to her without the need for her to change. Lois seemingly no longer had the ability to hold full conversations and speak in complete sentences. But when the stranger came and took the time, Lois spoke. Most people, who visited her, like the hospice staff or even her live-in aide did not know that Lois would communicate in a meaningful way. Lois’s son

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<sup>352</sup> Paul Tillich, “Loneliness and Solitude,” *The Value of Sparrows: Writings of a Christian Mystic*, Last modified September 9, 2012, chap. 1, para. 5, <https://thevalueofsparrows.com/2012/09/09/sermon-loneliness-and-solitude-by-paul-tillich/>.

<sup>353</sup> Deut 6:4-9 (NRSV).

<sup>354</sup> Deut 6:7 (NRSV).

believed there was “no real need” for a visit from himself nor a member of clergy. Lois’s biological and live-in care-provider were completely unaware or unwilling to discover the message of the dying is wisdom; strangers matter. Who will rise up and attend to the oppressed of your land, they dying? The book of Leviticus, chapter 19 states, “You shall rise before the aged, and defer to the old; and you shall fear your God: I am the Lord.”<sup>355</sup> Lois taught that the dying process is continual, that she has aged and her wisdom ought to be looked upon and sought as she has aged chronologically and even in wisdom. The next verse reads, “When an alien resides with you in your land, you shall not oppress the alien. The alien who resides with you shall be to you as the citizen among you; you shall love the alien as yourself, for you were aliens in the land of Egypt: I am the Lord your God.”<sup>356</sup> Lois has been pushed to the corners of her home, emotionally neglected and yet has profound wisdom for the stranger who attends to her very being.

In attending to her being, one ought not to push her to the corners of aloneness rather admonish her with hospitality. Hebrews chapter 13, verse two reads, “Do not neglect to show hospitality to strangers, for by doing that some have entertained angels without knowing it.”<sup>357</sup> Lois laid in her bed demonstrating her inability to move about the world, which in direct contradiction to all those who are willing and unwilling to visit her. Lois serves as a reminder to come to the aide of those who are abandoned, lonely, oppressed and dying. Come not to change her or give her instruction on how to live well or therapeutic advice on how to walk and change her predicament. But rather, Lois with all of her verbal and non-verbal statements, living as a tool of affliction, teaches

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<sup>355</sup> Leviticus 19:32 (NRSV).

<sup>356</sup> Leviticus 19:33 (NRSV).

<sup>357</sup> Hebrews 13:2 (NRSV).

hospitality to the stranger matters. She received love from the stranger experiencing communion with the Holy. Her personhood teaches wisdom to those who will visit for a while.

### **The Untapped Gift**

This gift is an untapped gift. The irony, per Nouwen, is the one “who wants to touch the center of men’s lives, finds himself on the periphery, often pleading in vain for admission. He never seems to be where the action is, where the plans are made, and the strategies discussed. He always seems to arrive at the wrong places at the wrong times with the wrong people, outside the walls of the city when the feast is over, with a few crying women.”<sup>358</sup> The funeral begins, and the saints and sinners gather to mourn the loss of their dearly beloved. This community gathers to learn how the deceased lived, died, and will live again. What a shame it is to learn of this after the decease has died. What prevents society from gathering as a community to learn from the dying how he or she lived, what it is like to die, and what it means to commune with God? Funerals are for the living, which means that the funeral is fashioned entirely for the needs of the mourners. The focus is not on the person who has died, but on those left behind. The lonely are ignored, and they are dying.

Emory professor and Director of the Early Career Pastoral Leadership Program, Thomas Long states, “Christian faith views this time in between [life and death] not with resignation, not merely as a season of passing time before someone passes away, but as a period filled with meaning and opportunity for communion with the one who is dying.”<sup>359</sup>

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<sup>358</sup> Nouwen, *The Wounded Healer*, 86.

<sup>359</sup> Thomas G. Long, *Accompany Them with Singing: The Christian Funeral* (Louisville: Westminster John Knox, 2009), 108.



This is no time to run away or to leave the one dying alone with his or her thoughts, but rather to join as if dying were a sacrament.

Sacraments are communal. David Tracy asserts, “A Christian sacrament is traditionally believed to be a fact as the re-presentation of a real possibility which God has made present to humanity in Christ Jesus...the major Christian traditions have not believed that fact (or, for some traditions, the validity) of the sacramental rite depends upon the personal actualization by the minister of the possibility ritually re-presented.”<sup>360</sup> Therefore, in the dying process there are contained acts, meaning, and interpretations. God is in the presence of the sacramental event. In life and in death we call upon God to be a present help. Mystery is present in death, and God as Mystery speaks. David N. Powers, professor of Theology and Religious Studies, who specialized in sacramental theology, wrote “one needs to look at what is done in order to discern how people think that God is addressing them and where the power of the Spirit is working...one had look for signs of where else people are looking for God’s Word and may find that it is in the testimony and wisdom of other persons’ lives.”<sup>361</sup> Tillich does not describe death or dying as a sacrament, rather he writes:

But sometimes God thrusts us out of the crowd into a solitude we did not desire, but which nonetheless takes hold of us. The prophet Jeremiah says — ‘I sit alone, because thy hand was upon me.’ God sometimes lays hands upon us. He wants us to ask the question of truth that may isolate us from most men, and that can be asked only in solitude. He wants us to ask the question of justice that may bring us suffering and death, and that can grow in us only in solitude. He wants us to

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<sup>360</sup> David Tracy, *Blessed Rage for Order* (Chicago: University of Chicago Press, 1996), 215.

<sup>361</sup> David N. Power, *Sacrament: The Language of God’s Giving* (New York: The Crossroads. 2011), 25.

break through the ordinary ways of man that may bring disrepute and hatred upon us, a breakthrough that can happen only in solitude. He wants us to penetrate to the boundaries of our being, where the mystery of life appears, and it can only appear in moments of solitude.<sup>362</sup>

Therefore, distancing oneself is an option. Not all loneliness is a forcing to the edges of society. It is instead an intentional discourse prescribed by the self to grow through solitude. Joseph and all the lonely entered into a moment of solitude, where earthly walls came down and life met mystery. Which Ettema, Derksen, and Leeuwen seem to measure up with “Existential Loneliness (EL) which is understood as an intolerable emptiness, sadness, and longing, that results from the awareness of one’s fundamental separateness as a human being.”<sup>363</sup>

### **Neutral in God’s Love**

Speaking of Joseph, he said he has taking a step back from everyone and was trying to live a life neutral in God’s love. He said it several times before he was asked the meaning of a life neutral in God’s love. Joseph explained that in his current predicament—failing health, knowing that he is going to die—he has chosen to listen to God. He shared how God told him not to request anything from him through prayer, but to listen intently and watch the many blessings that are all around. To hear clearly, he must remain neutral in all situations so that he can moved to where God calls him.

Practical theology “attempts this deep understanding of others, their situations, and their

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<sup>362</sup> Tillich, “Loneliness and Solitude,” chap. 3, para. 5.

<sup>363</sup> Eric J. Ettema, Louise D. Derksen, and Evert van Leeuwe, “Existential Loneliness and End-Of-Life Care: A Systematic Review,” *Theoretical Medicine Bioethics* 31, no. 2 (April 2010): 142. doi: 10.1007/s11017-010-9141-1.

identities.”<sup>364</sup> Practical theology may be the act that communicates an affirmation during the lonely journey towards death.

The American Psychological Association states, “an older adult may also sense a loss of control over his or her life due to failing eyesight, hearing loss and other physical changes, as well as external pressures such as limited financial resources. These and other issues often give rise to negative emotions such as sadness, anxiety, loneliness and lowered self-esteem, which in turn lead to social withdrawal and apathy.”<sup>365</sup> Joseph openly spoke about his limited income. He described his medicine as the pills that took away his manhood by shrinking his penis. Yet he says his withdrawal is intentional, and it has helped him to remain neutral and receive the mysteries of the universe. Likewise, Holmes states, “Living in a new reality. All it takes is one minute, one brief event, or one spoken word, and your reality is changed forever. It takes a while to learn to live with whatever, even while we are exhorted to pray for a ‘miracle.’ I say ‘learn’... Resisting any temptation to claim a special blessing or dispensation from God. I linger in the shadow of uncertainty cast by cancer. Meanwhile I am filled with awe and gratitude. How can this be? I don’t know. It just is. Amen.”<sup>366</sup> Their terminal illness brought on loneliness, which in turn created a space for these men to learn. Is it contentment?

These similar views led me to think of a few scriptures or ways of living that are challenging when living well seemingly.<sup>367</sup> If contentment occurs—or even just a place

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<sup>364</sup> Browning, *A Fundamental Practical Theology*, 284.

<sup>365</sup> American Psychological Association, “Aging and Depression,” accessed February 23, 2015, para. 3, <http://www.apa.org/helpcenter/aging-depression.aspx>.

<sup>366</sup> Bill Holmes, “New Reality,” *Facebook*, November 28, 2017. <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf>.

<sup>367</sup> “Therefore I tell you, do not worry about your life, what you will eat or drink; or about your body, what you will wear. Is not life more than food, and the body more than clothes? Look at the birds of the air; they do not sow or reap or store away in barns, and yet your heavenly Father feeds them. Are you not much more valuable than they?” Matthew 6:25-26 (NRSV); “I know what it is to have little, and I know what it is

where learning takes place, this would be a positive predicament spiritually. Whereas, Natale suggests, “there is an implicit notion that loneliness is unpleasant and therefore must be alleviated if not eliminated completely.”<sup>368</sup> As a chaplain loneliness seems to be positive, whereas psychology as Natale says, it is negative, *unpleasant*, and must be eliminated.

If loneliness were a positive situation, some sort of freedom would occur. If indeed there were a needed to for liberation, how then would that look? A new wisdom generates a sense of contentment. However, if loneliness has been oppressed and lives on the margins of society, what then comes from this experience of unbearable struggle?

Today was another day with Joseph. Joseph was bedbound, verbal, and full of thoughts—but one has to have patience. With his wife seated at his bedside, he told how long his last night was. His wife spoke over him, saying we all have long nights. She expressed how she stay up during the night and flipped through channels. She encouraged Joseph to do the same thing. I asked him why he thought about during those long nights. He said he knew the end was coming, but there is so much to be done and he could not get out of this bed. He acted as if he needed to talk to someone, but he found himself only staring straight ahead. His wife assured him that everyone has long nights, which it is normal. However, she was not hearing his heart. I asked him, “What would want to talk

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to have plenty. In any and all circumstances I have learned the secret of being well-fed and of going hungry, of having plenty and of being in need. **13** I can do all things through him who strengthens me.” Philippians 4:12-13 (NRSV); “Of course, there is great gain in godliness combined with contentment; **7** for we brought nothing into the world, so that we can take nothing out of it.” 1 Timothy 6:6-7 (NRSV).  
<sup>366</sup> Samuel M. Natale, *Loneliness and Spiritual Growth* (Birmingham: Religious Education Press, 1986), 18.

about? How could you help those you will leave behind?” I told them there are no bad people.

His wife quickly interjects, “Oh yes, there are a lot of bad people in the world. Yes, there are honey.” He stares forward. “No, there are good people, with good hearts, who have done some bad things. But ultimately people are good, I can see it now.” His wife began giving examples of all the bad people who have committed hideous crimes. Every now and then, she would say, “Oh they had a mental illness, or he just needed someone to talk to.” She insisted there were bad people, and she desperately wanted Joseph to be on her side. I intervened kindly, saying, “He needs to see the good,” hoping that she would stop and let him talk. Joseph said, “There are good people with good hearts but ‘social eyes’ won’t allow them to show it—the world makes us act strong. We are all good people.” In this very moment, he continues stating, “We shouldn’t have to act strong, but social eyes won’t allow us to cry or speak openly about our hearts.” He looks at me, and I affirmed the feelings from his heart, and the difficulty of the situation. He will probably die never able to tell his wife about the matters on his heart because she looks upon him too, with social eyes.

He gives pause and causes one to consider if he is another example of the American Psychological Association research that “often give rise to negative emotions such as sadness, anxiety, loneliness and lowered self-esteem, which in turn lead to social withdrawal and apathy.”<sup>369</sup> When I met with Joseph as his chaplain, I assessed, he does not speak openly to his wife because she exerts an external pressure that seeks to suppress his feelings. In turn, causing a deep sadness. Thus, he has already begun to

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<sup>369</sup> American Psychological Association, “Aging and Depression,” para. 3.

withdraw from the demands of social eyes. The presence of his wife seems to be a contributing factor to his sense of loneliness. J. P. Flanders explains, “loneliness should not be eliminated. Rather it should be controlled because it is a valuable feedback mechanism with important survival value to both the individual and the nation.”<sup>370</sup> Ontologically, Joseph has to separate himself as a way of survival. However, if this is a transcendent loneliness, discussed in chapter two, “the problem of loneliness has a fundamentally different character. It considers the human loneliness as universal loneliness, a transcendent character; the loneliness of a [human] separated from God.”<sup>371</sup> I would go as far to say, separated from a people where God is no longer visible.

It is quite the contrary for Bill, maybe personal experiences, and their sense of isolation differs. Joseph felt alone surrounded by people. People also surround Bill, and he senses a keen difference between himself and those people. His life before the diagnosis seemed like a guitar with no strings, and now his life—several cancers later—seems to be a guitar with strings. It is where life is the song rather than words that never reach the pinnacle of meaning. Sunday morning, Bill writes:

So she asked me what I would do differently if I had it to do all over again. I asked what the “it” is. “It” is being with those who are nearing the end of this journey we call life. I would sit longer, share more Scripture, and pray more often, and say less. The accumulated wisdom of humankind somehow fails in the face of eternity. I have no desire to do it over again.<sup>372</sup>

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<sup>370</sup> Natale, *Loneliness and Spiritual Growth*, 19.

<sup>371</sup> Szucs, “Theoretical and Practical Aspects,” 13.

<sup>372</sup> Bill Holmes, “To Do Over Again?” *Facebook*, June 10, 2018, [https://www.facebook.com/J.WilliamHomesMDiv?hc\\_ref=ARTwmyB5oLWHyuS5R9B-8JPLTWwTFLPk679anvYE6a6ul5pImTOX3eW\\_2maqhgTxjq4&fref=nf](https://www.facebook.com/J.WilliamHomesMDiv?hc_ref=ARTwmyB5oLWHyuS5R9B-8JPLTWwTFLPk679anvYE6a6ul5pImTOX3eW_2maqhgTxjq4&fref=nf).

Bill seems to be speaking about two different things. One, his job to walk with those who are dying, and secondly, he has no interest in walking as the dying. Bill recently announced that he will retire from his second career, chaplaincy. He has begun giving away his books and planning next steps. He says:

Behind my desk 7 years ago. Well over half the theology and Biblical study books have been given away. I have held on to the writings of all who have been my seminary teachers. There are still some Bonhoeffer, Calvin, and a few others. There remains a tone of Brueggemann and Moltmann. Poetry has taken over the would-be vacant shelves. Wendell Berry has his own shelves in another room, not far from the biographies of all who have been our presidents plus others who have impacted my life. One of the largest collections I have encompasses the many wars our country has fought. Glory? A little, perhaps. War is never good. Starting in July I will focus on catching up on a ton of fiction, starting with Kentucky writers.<sup>373</sup>

In his case, the move from an intense reality to a quiet fictional space seems to happen with intent. Bill has likely saved lives as a neurologist and helped to save lives emotionally and spiritually through his words of wisdom and caring heart. However, when he says, “the accumulated wisdom of humankind somehow fails in the face of eternity,”<sup>374</sup> I hear a wisdom that says, no one is here to save him. There is no one that he can cry out to remove the disease that is ablaze in his body. There are no comforting words to slow the path towards eternity. Alone he must turn to God.

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<sup>373</sup> Bill Holmes, “Behind my desk,” *Facebook*, June 9, 2018. [https://www.facebook.com/J.WilliamHomesMDiv?hc\\_ref=ARTwmyB5oLWHyuS5R9B-8JPLTWwTFLPk679anvYE6a6ul5pImTOX3eW\\_2maqhgTxjq4&fref=nf](https://www.facebook.com/J.WilliamHomesMDiv?hc_ref=ARTwmyB5oLWHyuS5R9B-8JPLTWwTFLPk679anvYE6a6ul5pImTOX3eW_2maqhgTxjq4&fref=nf).

<sup>374</sup> Holmes, *Thoughts from the Bedside*, 93.

Crying for help in a world that shuns the weak is lonely. To lament life personally sounds selfish when one has lived a so-called good life. Moreover, both the psychologist and the chaplain have named this separation, calling it anticipatory grief. Yes, one will miss his or her own life, and all that it could have been. Nevertheless, right now in this moment, the dying are living a communal life apart from a community that understands. There is no trial, jury, or conviction of loneliness. There is only a space of misunderstood living before death. It is a space of loneliness. There is no turning back or rescue planned for the fallen superhero. There is only reconciliation unto God, and loneliness drives us there.

Day-after-day lives as are born, and simultaneously in any given neighborhood, life is flogged by the simple knowledge of a disease that grows within you. The local hospital overflows with the wounded. Then there is you fighting a war on life, whereby you are unable to turn back time and the future is hazy at best. The inner voice and distant gaze captivates and pulls through the maze of the now and not yet. At the center of loneliness's war are cries, doubts, and whispers. Who knows if it is one's own voice, God, or the chaplain who sits with in this time of unspeakable suffering? Elizabeth A. Johnson, a Christian theologian reflects on forced concentration camps and imagines those who suffered as they sought God's compassion. Those in the ghettos of loneliness seek compassion while their wounds are revealed. Moreover, death's loneliness causes one to look at pulpits and review sermons that rarely engage loneliness nearing death. Standing in the remnants of hope, would it be too drastic to compare Hitler and every theology that believes loneliness should be eliminated? Johnson explains, "Headed for death by gassing, gunshot, disease, or starvation...Hitler's goal was to wipe this people



and their heritage off the face of the earth.”<sup>375</sup> Nevertheless, does that not sound familiar as clergy sit at the bedside of those dying of Cancer, AIDS, ALS, or maybe Coronary Heart Disease? Who on repeated occasions help evade or eliminate feelings of loneliness that could serve as profound wisdom for a people who will experience death? If this is true with loneliness, like it was with the aforementioned circumstance, then

The enormity of the crime left thinkers stunned. They began to speak of the Holocaust as an ‘interruption’ that invaded Christian theology’s view of a rationally ordered world. It was an “earthquake” that cracked open the ground of faith’s confidence in God; an unbridgeable “chasm” that split history and its supposed progress into an incommensurable before and after; a ‘tremendum’ that shattered belief not only in God but also in humanity and its secular projects.

Taking the measure of the Shoah, one simply could not go on as before crafting interpretations that would allow this magnitude of suffering to make some kind of sense in God’s plan for the world.<sup>376</sup>

I was amazed at Joseph’s awareness and astute realization that his wife had no idea of what he was going through. He explained how his wife seemingly had no interest in his understanding and insight into his own decline. In addition, because he needed to maintain the perfect image of being a strong man, his wife would not allow his friends to come to his bedside. She always said they could come when he felt better. Joseph’s growing understanding was it would not feel better, and it only felt better when he was able to talk about it lot. In the Hebrew Scriptures, *lot* was used to reference the will of

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<sup>375</sup> Elizabeth A. Johnson, *Quest for the Living God: Mapping Frontiers in the Theology of God*. (New York: Continuum, 2007), 49.

<sup>376</sup> Johnson, *Quest for the Living God*, 50.

God; “The lot was always resorted to by the Hebrews with strictest reference to the interposition of God, and as a method of ascertaining the divine will”<sup>377</sup> Joseph believed he needed to be in the community with others, but society would not allow him to be himself.

On the other hand, others surround Bill and intentionally, he pulls others into himself for the sake of sharing what has been left undone and what is needed in the onward march. He writes, “Amazed But Not So Much. On the eve of beginning the 76<sup>th</sup> year of life outside of my mother’s womb, I AM AMAZED. But this amazement is short lived because children are still being pulled from their mother’s arms, men are still being beaten and incarcerated because of the color of their skin, women are still seen as less than men, and the Gospel has been distorted beyond recognition to justify the unjustifiable in high places. Bill Homes June 7, 2018,<sup>378</sup> Bill looks for God while his heart aches at the devastation all around. Positioned to be rescued. Elizabeth Johnson, also wrote about the living positioned to be rescued.

In the midst of great upheaval, community reliance supersedes individual suffering. Suffering is not all physical, it can be spiritual, emotional, and manifest physically. The realization of no one to depend on can bring about suffering. Being misunderstood and not heard is suffering. Not being rescued by God is suffering. Johnson recalls a story of an inmate named Albert Mainslinger in a museum from one of the camps, in the town of Dachau. There in the camp, amid

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<sup>377</sup> “Lot,” *Bible Study Tools*, accessed June 13, 2018, para. 1, <https://www.biblestudytools.com/dictionary/lot/>.

<sup>378</sup> Bill Holmes, "New Reality," *Facebook*, November 28, 2016. <https://www.facebook.com/J.WilliamHomesMDiv?fref=nf..>

the tools of torture and other paraphernalia, there hung a striped outfit worn by one inmate named Albert Mainslinger. Next to it were displayed two pieces of paper, documents filled out when he entered and left the camp. In 1939 his admission form listed his weight as 114kg (250lbs) and, further down, his religion as Roman Catholic. In 1945 his discharge form, signed by the American administrator of the camp, contained different information. His weight was 41kg (90lbs). On the line for religion was written *Das Nichts*, nothing. I stared, struck silent.<sup>379</sup>

The suffering was so blatant that only one word describes it, *nothing*. He waited for someone; he waited for God to bring salvation. It never happened. Johnson writes, “who can fathom the suffering—unjust imprisonment; years of slow starvation; morning, noon, and night trying to evade the terror meted out by the guards; unremitting hard labor in the cold and heat; people in agony all around; having no idea when this would ever end or if the next minute would bring his death. As his body withered so too did his soul, any trust in a good and gracious God evaporating away.”<sup>380</sup> In his waiting, loneliness revealed his reality. While God was there with Albert, he did not perceive it as such.

A woman terminally diagnosed, with average weight and full hair, leaves the hospital and returns home. Her religion is Christian. Eight years later, she is taken to the hospital because she can no longer bare all the changes to her body, including now the constant vomiting. Released home under hospice care, she asks her mother, “why is this taking so long? Why won’t God just take me?” Her mother walks away and mutters, “God, it’s not supposed to happen like this.” Not even the woman’s mother can bare the

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<sup>379</sup> Johnson, *Quest for the Living God*, 50.

<sup>380</sup> Johnson, *Quest for the Living God*, 50.

suffering and abandons her daughter to the ghetto of their home. Years pass, the deacons stopped visiting, and friends disappeared as she wonders how long until death comes? Not knowing how to die, she withers away into her own world, seeing no one, needing anyone. Ones' *woundness* is the provocation to speak with insight, and clarity. This unnamed woman is speaking. Others pushed her to the margins of society because she was an interruption to others, their lives must go on. No one is there to witness and partake in their loneliness, thus diluting the meaning of their loneliness. The wisdom of the lonely is ghettoized and muted. To give a platform for loneliness to speak would admit God is still speaking. It could very well mean, acknowledging the canon or authoritative religious scriptures are still open, and the lives of all people "is part of an overall divine plan for the world."<sup>381</sup> When this thought becomes more regularly accepted the chaplain and the patient can envision and seek deeper answers to where is God in my loneliness? What will God reveal to others through loneliness? There is no longer a need to find a way out of loneliness, rather loneliness may assist in finding God, particularly within community. To find and reveal God may be the last sacrament, at the very least affirm Jesus's plight through the Garden of Gethsemane, speaking to God through his loneliness.

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<sup>381</sup> Johnson, *Quest for the Living God*, 51.

## CHAPTER FIVE: WHAT IS NEXT FOR EOL EDUCATION?

Contemporary society including clergy, theologians, and practitioners are in need of a more adequate dialogue and interaction with death and dying in the public sphere around a theological understanding of loneliness. Practical theology must respond to this growing crisis of loneliness and faithfully engage with the public in a public theology, as practical theology. Building upon the case studies of Lois, Joseph, the Unnamed Woman, and the review of professional and theological literature, this chapter provides six clear recommendations for theological professionals to engage with the loneliness experienced by the dying. Building upon these recommendations: *Stranger Matter*, the Ministry of Presence, *People Just Don't Get It*, *Transformation, Loneliness and Justice Work*, and *Occupied Memory*, a model course that includes *End of Life Matters*, a Ministry of Presence, *the Unnamed Dying*, and *the Sacrament of Community* is offered for these professionals.

### **Strangers Matter**

The case study of Lois illustrates the *value of the stranger*. Lois's experience reminds faith based professional of the need to attend to the dying as a continued resource and tool of affliction to learn. Loneliness is not always a negative predicament; rather, it is a continued sacred avenue that teaches change for those who are well. The stranger in the case of Lois was called to accommodate, listen to, and be hospitable towards Lois as well as others experiencing the process of death. The stranger who will step in the gap between life once known and this new reality finds value added comfort from the stranger. The stranger is he or she who arrives unexpectedly, yet needed to learn from and glean from persons like Lois.

Lois's case show that there is wisdom in the lonely places, and that the wisdom of the wounded is available to teach a wounded and dying world. The dying become the best possible teachers for clergy, scholars and chaplains as they reveal profound theological insights. Theologian David Tracy explains, such a discourse "discloses meanings and truths which in principle can transform all human beings in some recognizable personal, social, political, ethical, cultural or religious manner."<sup>382</sup> Lois teaches beyond this right now moment. She leaves to the attender information to begin again the healing process the world needs. Those who are dying are like ministers to help heal through their own brokenness. Even in its brokenness strangers can be healed and transformed. Moreover, strangers help heal those who are dying by providing ministry in a shared space. For example, Lois alone and quarantined to her bedroom, visited by the chaplain, a complete stranger uttered, "I love you." Lois replied, only you and God. The stranger's love brings about something familiar, brings Gods unending love to be felt and received. Henri Nouwen, said, "No man can stay alive when nobody is waiting for hm. Everyone who returns from a long and difficult trip is looking for someone waiting for him at the station or the airport... a man can keep his sanity and stay alive as long as there is at least one person who is waiting for him."<sup>383</sup> Lois has been waiting for a light, and in her case, the light was held by the stranger. So much so, "Let us not diminish the power of waiting by saying that a lifesaving relationship cannot develop in an hour. One eye movement or one handshake can replace years of friendship when man is in agony. Love not only last forever, it needs only a second to come about."<sup>384</sup> The Stranger for Lois was a healing

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<sup>382</sup> Tracy, *Analogical Imagination*, 55.

<sup>383</sup> Nouwen, *The Wounded Healer*, 66.

<sup>384</sup> Nouwen, *The Wounded Healer*, 67.

breath of fresh air, it was a sacred moment scribbled on a smartphone that said, “God loves you and so do I.” There was no doubt, no hesitation, only affirmation and belief, Lois replied, “You and God are the Only Ones.”

Lois’s experiences show that ministers and those training to help heal a sick world need to be exposed to opportunities to sit with the dying. Those who are dying can be found in their homes, care facilities like nursing homes, even abandoned under bridges. While there are hundreds of academic institutions in the world, the most logical source to teach theologians about death, dying, and loneliness are those who are terminally ill. Sarah Koss believes that “community-based clergy are highly engaged in helping seriously ill patients address spiritual concerns at the end of life (EOL). While they desire EOL training, no data exist in guiding how to conceptualize a clergy-training program.”<sup>385</sup>

As part of the National Clergy Project on End-of-Life Care, the project conducted a diverse purposive sample of 35 active clergy from five US states (California, Illinois, Massachusetts, New York, and Texas) to ask about End of Life (EOL) issues and care.<sup>386</sup> Several key themes around curriculum structure, curriculum content, and issues of tension emerged. Participating clergy desired educational topics such as increasing their medical literacy and reviewing pastoral counseling approaches.<sup>387</sup> Clergy admitted difficulties in “collaborating with medical teams, surrounding issues of trust, the role of miracles, and caution of prognostication.”<sup>388</sup> The clergy desired future EOL training and

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<sup>385</sup> Sarah E. Koss et al., “Training Community Clergy in Serious Illness: Balancing Faith and Medicine,” *Journal of Religion and Health* 57, no.4 (2018): 1413, doi:10.1007/s10943-018-0645-8.

<sup>386</sup> Koss et al., “Training Community Clergy in Serious Illness,” 1413.

<sup>387</sup> Koss et al., “Training Community Clergy in Serious Illness,” 1413.

<sup>388</sup> Koss et al., “Training Community Clergy in Serious Illness,” 1413.

admitted the need for community-based clergy. It is helpful to understand how course offerings around death, dying and loneliness are essential in providing clergy education surrounding viable options available to the patient. Nearing the end of life, many people call upon their clergy leader for prayer and for spiritual guidance. Such a class will benefit the many Lois's who will come in the future needed affirmation and love from the stranger. This love transcends from a life of good health inward towards a sure and certain death. It is this love that and presence of the stranger that expresses a faithfulness of humanity, "to express a solidarity based not just on a return to everyday life, but also on a participation in the death experience which belongs in the center of the human heart."<sup>389</sup> It is such a solidarity the academia needs to learn, teach and practice that will breakdown the ghettos of loneliness and allow the dying to find their way home.

Along with all the physical symptoms and emotional issues found in the dying process, there is a spiritual component to death. Many clergy are not aware of the dangers associated with aggressive care vs. palliative care. Sunday morning services and evening Bible study have been inundated with talks of miracles vs the realities of death. Lois's case demonstrates that the five largest seminaries in the country would benefit from course work surrounding terminal illness and loneliness associated with it. If such schools are preparing clergy to benefit and walk with all of society throughout life, then academia have failed the community at the end of life.

It is concerning that the top five seminaries in the US are focused on helping people live better, but do not teach clergy how to help people die better. A leading group of physicians and PhDs conducted a survey to a nationally representative sample of 1665

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<sup>389</sup> Nouwen, *The Wounded Healer*, 69.



clergy with a 60% response rate (1005) completed in 2015.<sup>390</sup> The survey concluded that although clergy interact with approximately half of U.S. patients facing end-of-life medical decisions, little is known about clergy-congregant interactions or clergy influence on end-of-life decisions.<sup>391</sup> It was also concluded that clergy end-of-life education may enable better quality end-of-life care for religious patients.<sup>392</sup> Therefore, I propose a new vision for a proposed curriculum.

Such a curriculum teaches leadership and journeying toward solidarity with those who are dying. Lois while being one woman secluded in her room represents thousands who will follow in similar predicaments. In hopes of teaching every Christian the importance of walking with all of humanity nearing death, it begins with trained clergy coming through academia, headed for the parish and society. Lois teaches, that the stranger helps soothe and provide a hope through Christ's love for today and whatever tomorrow may hold. The love provided and shared by the stranger with Lois, gave a reminder that Love is on both sides of the grave. Nouwen suggests, "no one can help anyone without becoming involved, without entering with his whole person into the painful situation, without taking the risk of becoming hurt, wounded or even destroyed in the process. The beginning and the end of all Christian leadership is to give your life for others."<sup>393</sup> The joining in, or hour of solidarity between Lois and the stranger was as if

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<sup>390</sup> Michael J. Balboni et al., "U.S. Clergy Religious Values and Relationships to End-of-Life Discussions and Care," *Journal of Pain and Symptom Management* 1, no. 6 (2017): 999-1009, doi:10.1016/j.jpainsymman.2016.12.346.

<sup>391</sup> Balboni, "U.S. Clergy Religious Values and Relationships to End-of-Life Discussions and Care," 999-1009.

<sup>392</sup> Balboni, "U.S. Clergy Religious Values and Relationships to End-of-Life Discussions and Care," 999-1009.

<sup>393</sup> Nouwen, *The Wounded Healer*, 72.

the hope had been unshackled by love. And such a love lives in and beyond the death experience.

### **Ministry of Presence**

The second major theological recommendation grows out of these case studies comes from Joseph. This case reminds theologians that there is an ethical and spiritual responsibility of the Church, Academe, and Society to prepare those in ministry to empower and help all those who are dying or will die in the future. In 2018, an estimated 1,735,350 new cases of cancer will be diagnosed in the United States and 609,640 people will die from the disease. It is likely those 609,640 people never learned how to die or had simple conversations that informed them of contours of life.<sup>394</sup>

This research found in the previous chapters brings to surface a proposal of the Life in Transition Program. It is a support group for those who are dying. Practical theology calls forth a very public theology that speaks to the realities of God in all of life. A theological discourse with society according to Theologian David Tracy asserts this publicness has a public discourse that speaks to “fundamental existential questions it ask.”<sup>395</sup> It is this that calls the Church and any spiritual practitioner to care for and lead those who are surviving with, living with or dying with cancer and any other terminal conditions who are preparing to die. This is a personal journey and the LiT program will work to prepare individuals of the possible realities associated with dying. The impending death of 609,640 people living with cancer should inspire services for those

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<sup>394</sup> Balboni, “U.S. Clergy Religious Values and Relationships to End-of-Life Discussions and Care,” 999-1009.

<sup>395</sup> Tracy, *Analogical Imagination*, xi

who will die from cancer alone this year. The dying die allegedly from their disease but many also die from loneliness associated with dying.

The elderly and persons who are transitioning from a robust and vibrant life to one of aloneness and loneliness are acutely aware of their mortality. A life ending diagnosis can cause feelings of grief, intense loneliness and depression. Mourning and grief are a natural process for survivors to experience following the death of a loved one, but theologians must question whether a person can mourn their own impending death, which based upon this research is a clear: yes. This anticipatory grief is the mourning of a person's own life as it was once known. It is the un-fulfillment of hopes and dreams. As the person continues to decline and need more help from others, relationships change, and sometimes loneliness arises. The question becomes should loneliness with all of its negative connotations be absolved or embraced. Loneliness is misunderstood and is not to be pushed away. Rather practitioners ought to change the trajectory and understanding of loneliness. For example, Joseph's wife was at the bedside seemingly operating and functioning in a differently reality than the new reality Joseph lived in. Joseph desire was to talk with someone with the willingness to learn from him, who now realize, we all die alone.

Loneliness is a very real issue that must be addressed publicly and intentionally. There is plenty of information and groups available for the bereaved family and friends who are left to grieve after the dying have died. Many supportive groups are available to them because of all the risk associated with grief and depression. The Department of Psychiatry, University of California at San Diego's Zisooki and Shear found complicated grief related major depression to often be "persistent and gravely disabling, and

dramatically interfering with function and quality of life, and even be life threatening in the absence of treatment but found to respond to targeted psychiatric interventions.”<sup>396</sup> Considerable work has been done on mourning and grief, yet this research found less emphasis on the theory of pre-death consultation and preparation for the dying. Dying alone is certain, dying with others who are willing to journey with you, entering into joys and sharing hurts, is nothing less than the ministry of presence that is so desperately needed within the death process.

### **People Just Don't Get It!**

Joseph's case study demonstrates that, *People just don't get it*. The chaplain visited with Joseph asking a series of questions that he answered honestly and accurately within this place of loneliness. Every response Joseph would give, his wife would almost eagerly correct the answer, and direct her response to the chaplain about the way she knew it to be. And every time, Joseph would have a rebuttal with either an answer or a request that was more appropriate for his current station in life. He found himself blessed to have people around him, yet broken realizing *people just don't get it*. He spoke of the need to teach. His body was broken and unwilling to cooperate, but he felt his mind was brilliant and filled with wisdom that others needed to know. Nevertheless, there was no community seemingly available to him. In the words of Tillich, Joseph experienced a “sacred void,” a period of waiting to be ontologically alive and of value to others.”<sup>397</sup> Joseph had insight of the ultimate concerns of life and death, and no one listened except for the chaplain. Chaplaincy at a foundational level administers the ministry of presence

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<sup>396</sup> Sideny Zisooki and Katherine Shear, “Grief and Bereavement: What Psychiatrists Need to Know,” *World Psychiatry* 8, no. 2 (2009): 67, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2691160/>.

<sup>397</sup> Tillich, *Dynamics of Faith*, xv.

as often as needed. Joseph affirmed the need for a space of both silence and one where he was able to be of service to the larger community. Suddenly, it is realized it is not the responsibility of the Church, chaplains or academy to change others, nor take away one's new identity within loneliness. It is the job of the church to get it.

Every church needs to establish programs based on their perceived needs of their congregants. Many of the programs, which have already been established, have been reactive and not proactive, or simply in place for those who grieve a loss of a loved one. The Life in Transition program is the Church's proactive approach to not only help their congregants but become actively involved in the community (all of society) to celebrate life and death. This program is designed to be one in which participants can die without regrets but cannot be effective unless we first and always address the barriers to participation. Those barriers can include accessibility, privacy issues, transportation, attitudinal, communication, policy, programmatic, and social.<sup>398</sup>

Accessibility is a major issue for this program. Illness and disease can and will bring about physical changes to the body that will certainly limit the participant's ability to fully participate. The program will need to be offered in multiple formats, locations, times, etc. to make sure participants can attend whenever possible. The program may need to have a physical location that includes the Church but also a hospital or hospice location as well. The program may be live streamed on the internet and segments on public network channels until ABC and other networks had better understands the

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<sup>398</sup> "Common Barriers to Participation Experienced by People with Disabilities," *Centers for Disease Control and Prevention*, accessed July 4, 2018, <https://www.cdc.gov/ncbddd/disabilityandhealth/disability-barriers.html>.

importance. The facilities will need to be ADA accessible<sup>399</sup> including ramps, elevators and adequate lighting.

The program should be in partnership with the local hospital and if at all possible and have a nursing staff member available whenever possible for health changes, but also to answer questions. The meetings at the church may not always have medical staff present, but meetings at a hospital or health facility will have medical staff nearby. Church members who are in the medical profession or retired medical professions may find gratification in this as a volunteer opportunity.

This program also needs to address privacy. Certain illnesses may come with a stigma attached and participants may be unwilling to talk about their diagnosis with others. The initial recommendation includes having a “no diagnosis” declaration as a ground rule. Participants should never feel obligated to feel that talking about what they are dying from is more important than their own personal journey that have led them to this place of loneliness. Attitudinal considerations are the stigma, prejudice, and discrimination attached to a personal or diagnosis. The privacy consideration and the attitudinal consideration work hand in hand and may affect this path towards death. The attitudinal issues of each member will most certainly bring biases to the group and may have unintended consequences. There may be participants dying of diseases such as AIDS, hepatitis, and cancer that may have negative connotations associated with them.

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<sup>398</sup> “The Department of Justice’s revised regulations for Titles II and III of the Americans with Disabilities Act of 1990 (ADA) were published in the Federal Register on September 15, 2010. These regulations adopted revised, enforceable accessibility standards called the 2010 ADA Standards for Accessible Design, ‘2010 Standards.’” ADA Standards for Accessible Design,” *ADA United States Department of Justice Civil Rights Division*, accessed July 10, 2018, [https://www.ada.gov/2010ADASTandards\\_index.htm](https://www.ada.gov/2010ADASTandards_index.htm).

Although participants are dying, they will still bring their prejudices to the space where all may be included and not ghettoized to the margins of society.

Implicit bias also needs to be taken into consideration as well. If at any point there seems to be underlying issues with implicit bias among participants, there will be a session added to discuss stereotypes and associations to improve cohesiveness among the group.

In addition to the concerns mentioned above, communication barriers also need to be considered. There are many barriers to communications including language, hearing and verbal. Communities spans ethnicity, age, and socio-economic assemblies. Language barriers may inhibit a participant's ability to fully contribute in the meetings. Every attempt should be made to engage sign language interpreters. Family member or interpreters are welcomed to attend with the participant. The support group will be geared toward adults; any person with a terminal condition will be welcomed to participate. I would recommend specially trained counselors to work with children.

There are often policies in place that deny qualified individuals with disabilities the opportunity to participate in or benefit from federally funded programs, services, or other benefits.<sup>400</sup> The meetings will have three overarching themes: The Garden of Loneliness, the 12-Steps Program for death and thirdly providing resources and assistance to alleviate burdens. This program will be led by a spiritual leader, who often invites a different service provider to meetings to present services, answer questions and sign up participants for services whenever necessary.

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<sup>400</sup> "Common Barriers to Participation Experienced by People with Disabilities," *Centers for Disease Control and Prevention*, accessed July 4, 2018, <https://www.cdc.gov/ncbddd/disabilityandhealth/disability-barriers.html>.

Programmatic barriers include things like scheduling meetings during the day when caregivers may not be able to provide transportation to meetings. Also, hosting meetings with heavy topics and asking participants to be transparent and open about their loneliness, who they themselves have been unable to identify or name. The chaplain or leader will provide the disclaimer that only the living can handle what is to come. Helping each participant to understand they are fully alive yet find themselves in a position to prepare and share in their future. The chaplain will affirm the difficulty of the situation, that there may be no support at home to fully unpack and reflect on the day's lesson. Communication will be vital, as noted in chapter two, due to feelings of loneliness even when surrounded by others.

Last but certainly not least are social barriers. These are barriers that the illness or disability itself has brought to the lives of the program participants. Participants are less likely to be employed at the time of participation. People with disabilities are more likely to live in poverty compared to people without disabilities (21.6% compare to 12.8%),<sup>401</sup> Participants may feel like a burden to their family because of the financial burden of a terminal illness. Many elderly patients may not have access to services due to income level or inability to communicate fully with providers about their needs due to their lack of social skills. This program will help participants overcome social barriers such as the lack of relationships, access to friends and needed services by inviting a service provider to come and share at each meeting.

Each program meeting will have overlapping themes. The foundation of the program will be the adapted twelve-step program, which will be covered later. The topic

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<sup>401</sup> "Economic News Release," *U.S. Bureau of Labor Statistics*, last modified June 21, 2018, <http://www.bls.gov/news.release/disabl.a.htm>.



of discussion at each meeting are as follows. Many of the topics will help participants create a “before death” to help prepare themselves and others. The remaining topics are designed to assist the participant in coping with their misunderstood position in life that have left them in a place of loneliness.

I proposed that elements of the meetings be based on the AA and NA 12-step program.<sup>402</sup> Loneliness is not necessarily something to be done away with. The Addiction Center explains that, “recovery is a lifelong process, there’s no wrong way to approach the 12 Steps as the participant tries to figure out what works best for their individual needs. In fact, most participants find that they will need to revisit some steps or even tackle more than one of the steps at a time.”<sup>403</sup> These steps have been proven and successful over the many years since they have been introduced. They are easy to follow, and I have adapted them to fit this program. There is something holy about the presence of others to join with the dying in a time of holy silence or of one learning about the new reality of the end of life. The ministry of presence is paramount when death is certain.

### **The Unnamed Dying Woman’s Lesson of Transformation**

In Chapter Four, the case study of the unnamed woman has so much to teach theologians and chaplains about loneliness. The unnamed woman’s personhood was not taken away but rather the power and conviction of her loneliness was revealed. She did not need anyone to see her in a way other than a whole and complete creation of God. It is possible she experienced such a love in her loneliness that God’s love was experienced in the absence of others. Loneliness touches the lives of those whose names we do not

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<sup>402</sup> “12 Step Program,” *Addiction Center*, accessed July 10, 2018, <https://www.addictioncenter.com/treatment/12-step-programs/>.

<sup>403</sup> “12 Step Program,” para. 4.

know. Loneliness is real. The unnamed woman's wisdom had been muted, and the meaning of loneliness was diluted, when she became an interruption instead of a learning tool for all to learn. Her loneliness and even silence pointed towards God, even when her mother remained outside of the room asking for God. God was there. God was in the midst. God was speaking and no one was available or prepared to receive what the still speaking God was saying. Therefore continued change is required in the classrooms of seminaries, pulpits of the church, and hospital family rooms, learning about the ministry of presence, the power of loneliness, and that strangers matter.

Acknowledging lives of adults may be in very different places, all have had many similar experiences that help relate and validate the move of God in all things. Some experiences we share and others we aim to carry by ourselves. This course will help people celebrate where they have been and better assess our current location to see our interconnectedness and our role in becoming and remaining whole persons living in the reality death will come becoming whole communities that can reflect the whole body of Christ. A deepening of one's spirituality is discovering what is real, who they are and what their responsibility is for the common good of all people for the duration of their whole life. A hope to embrace the times of great joy and times of loneliness as Jesus experienced in the Garden of Gethsemane. Five weeks exploring one's place in the world will transform lives and one hopes, change the culture in your church. People can only believe the change will spill over and saturate the world to help others die in peace. And like the unnamed women to experience and be affirmed of God love in the silence and absence of others.

## **Loneliness and Justice Work**

Throughout these case studies, a theme of justice has emerged again and again. People never understands or sees the beauty of the ghetto until one is in the depths of the ghetto. Beauty and wisdom and hope lie within the ghetto, if only all could see it. Therefore, I cope with the belief, this same beauty and wisdom, and hope lives at loneliness's door. If only more people would sit at loneliness's door and wonder and listen. Joseph seemed to express a curiosity of life and examined life, believing it humanity should extend their thoughts and wonder about the end of life and all that it brings. Loneliness can be found all throughout life, it's hard and difficult even. For instance, Jesus's time in the Garden of Gethsemane. He cried out his hurt, he tried to talk to his friends, and they remained sleep. In their privileged they slept, in Jesus's oppressive state his frustration was real. Jesus knew what was to come, and no one could sit awhile with him to listen, to learn, to prepare.

Journeying with those who experience loneliness is justice work. The work of justice is always found near the oppressed, women, the fatherless, socio-economics, class just to name a few. Repeatedly, throughout this research readers will find the quest towards a sense of freedom, wholeness, and liberation. A community that is dying is essentially an oppressed people whose voices are missing from the society in which they live. These dying individuals are resources for all of society to use in hopes of healing wounds. And such a society finds itself in a place of radical inequality and injustice, who rejects the wounded healer; A society who essentially rejects death and the affluence of loneliness. This research indicates that culture has rejected the wisdom of the dying likely because of an occupied memory. Culture has so much good, so much life, it has given

memories from past interpretations, causing a sameness that has forgotten to look toward what could be. It forgets to look for the impossible—even in the dying.

The wisdom found with loneliness is ignored and found on the margins of life, looking towards a new horizon of understanding, trust, and community. Many resist the new reality of the dying, thus resisting the hope found in the lonely journey. Future plans are to continue the work of justice as is this research. Next looking at communities disenfranchised due to race, social class, gender, and sexual orientation. There is so much work to do here at the foot of the cross and I believe practical theology will help us unpack and see God's revelation for the greater good of all people.

### **The Occupied Memory of Loneliness**

The final and most recommendation that this theological study of loneliness provides is the value of the occupied memory of loneliness. Occupied memory grows out of Womanist Theological Ethics, which is framed with feminine pronoun 'she,' and hopes to create an improved journey toward paradise through memory for the North America context. She brings multiple voices into dialogue with world religions and African roots to better assess and possibly locate paradise. The Womanist encourages reflection on the concept of occupied memory as a resource and a challenge for identity formation of marginalized persons and the importance of missing voices. A more authentic-self is capable of regenerating/creating a sustainable postmodern civilization for a public discourse.

The African American community contends with the struggles of police violence, poverty, and oppression, which are interlaced within loneliness. As a consequence of their oppression, blacks have nurtured their individual and communal identities by telling stories of love, strength, and courage. This practice of sharing powerful stories of faith, suffering, and love continues to present day. What happens when the very memories of

the past that are a source of strength, become themselves occupied memories that betray the deep wounds and fears of a people? Womanist theologian, Bess B. Johnson, tells a story:

Describing the difference between the play of male and female children in the black community where she developed. Johnson says: the boys in the neighborhood had this game with rope...tug-o'-war...till finally some side would jerk the rope away from the others, would fall down...Girls...weren't allowed to play with them in this tug-o'-war; so we figured out how to make our own rope—out of...little dandelions. You just keep adding them, one to another, and you can go on and on... Anybody, even the boys could join us.... The whole purpose of our game was to create this dandelion chain – that was it. And we'd keep going, creating till our mama called us home.<sup>404</sup>

This is symbolic of the oppression located deep in memory and expressed in the reality and culture of today that must be honed and remembered. Even the Bible has captured oppressive memories that must be critiqued again and again.

The Methodology of the Occupied Memory of Loneliness takes place in five stages. The first phase of this process is to identify the oppression. The second phase of this methodology is to identify the urgency. The third phase of this methodology is seeking safe spaces. The fourth stage is self-affirmation and the final stage is advocacy, praxis, and synthesis.

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<sup>404</sup> Delores S. Williams, “Womanist Theology: Black Women’s Voices,” *Religion Online*, accessed January 30, 2013, para. 34, <https://www.religion-online.org/article/womanist-theology-black-womens-voices/>.

## **The Insights of Occupied Memory of Loneliness**

This practice of sharing powerful stories become themselves occupied memories that can detour and ignore profound wounds and fears of a people that can serve as lessons to be learned. Womanist theologian, Bess B. Johnson, tells a story “describing the difference between the play of male and female children in the black community where she developed. Johnson says: the boys in the neighborhood had this game with rope...tug-o’-war...till finally some side would jerk the rope away from the others, would fall down...Girls...weren’t allowed to play with them in tis tug-o’-war; so we figured out how to make our own rope—out of...little dandelions. You just keep adding them, one to another, and you can go on and on... Anybody, even the boys could join us.... The whole purpose of our game was to create this dandelion chain – that was it. And we’d keep going, creating till our mama called us home.”<sup>405</sup> This is symbolic of the oppression located deep in memory that must be honored and remembered. The death event is like the boys playing rope, persons have created their own version of what the end of life should look like and what’s not included. Loneliness is a part of the on-going dandelion chain, all persons nearing the end of life has something very valuable to add and connect for a more holistic and freedom filled journey towards the end.

Lois from previous chapters help readers to better understand the concept of occupied memory as a resource and a challenge for identity formation of marginalized persons like those experiencing loneliness and the importance of missing voices. Occupied memory addresses the challenges and reinforced customs stored in memory and allows space to visualize a more colorful garden that includes dandelions of

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<sup>405</sup> Williams, “Womanist Theology: Black Women’s Voices,” para. 34.

loneliness and other symptoms. Occupied memory in conversation with Delores W. William's work will argue that memory serves as the avenue to both break down and build up social customs that impact the formation of identity within loneliness. It is the important work of the stranger and clergy-person to help those who are dying add links to their chains of identity will share their lustrous dandelions with all who will listen. Frankly, Lois's Garden will never be seen and tended to without the listener.

### **Joseph Identified the Oppression**

Just as Lois' story empowers readers to engage the story of the occupied memory of loneliness, Joseph's witness empowers the readers to sense the oppression of loneliness within the story. People who alive and well rarely looks towards the end of life. Yet, Joseph wondered how different would life be if the alive and well people of the world were immersed in the telling of other people's memories and realities. All for his sake of being able to create their own understanding of death and loneliness and not the retelling of altered and misguided truths—truths learned from television or fears learned from people who were or are afraid of death. Identifying the source of oppression and the disruption of harmony is the first step of occupied memory to create a new and just way of dying for all of humanity.

### **Urgency Says the Unnamed Woman**

The urgency is evident from the recognition of differences as the Unnamed Dying Woman shows readers. A dying population is separated by hope found in mountain top memories and a remembered pride found in separation; the living and the dead. The little black boys and little black girls so clearly saw difference even in playing a game of tug-o'-war. Society too often separate selves into winning and losing, living and dying

groups. The unnamed woman demonstrates that once difference was recognized it became an urgent matter to solve the absence of connection or the lack relationship. If not, there becomes injustice and suppressed societies whom are forced to live on the margins void of solidarity with the rest of the group. Occupied memory seeks community as a prerequisite toward the essence of truth and hope of God. For it is memory that helps life thrive through speech and symbolism; all people including those who have passed away. Occupied memory urges all people to seek a space in their heart and mind that is untainted by one sided truths and push through the stretching. The mind of humanity is already occupied with resources that affirm and mold identity.

### **Safe Space of Lois's Garden**

The third step of occupied memory is for people to seek out others similar to themselves and find safe space. The mind and body have already recognized differences that have also disrupted the belief of being whole. The little girls who began the game of building an everlasting dandelion chain had no intention or desire to discriminate against boys or anyone. Their intent and hope were to begin a game with people who would play with them and add to the dandelion story. People who would become an integral and beautiful flower in Lois's Garden. This game of building chains was a safe space—a giving and receiving. In such a place, the individual is able to bring their entire being to the playground or ghetto of loneliness, along with all of their memories, hopes and fears.

### **Strangers Matter in a Recreated World**

Lois's case also empowers occupied memory not only by acknowledging spaces for fun but also by acknowledging the spaces of isolation that holds hostage memories of good and bad. Too often people remember negative memories and create long lasting



judgments that seems to extend until death. But for the little girl who found refuge and comfort in the dandelion, she remembers not only the dandelion but the interaction with the boys who would not allow her to play tug-o'-war. Lois remembers the abandonment of her son and the separation of the caregiver. In the spaces of loneliness where *Strangers Matter* the actualization of the appearing of a tangible stranger served as the catalysis that promoted community within loneliness at the end of life. Affirming the memory as positive allowed God to be revealed. This positive memory of her history increases the chance for self-love, and this is the very place the world will be re-created.

### **Advocacy and Praxis**

Finally in the Advocacy and Praxis stage of occupied memory, habitual practice of asking where is God in any situation will serve as theological reflection and as a place for deeper exploration. Moreover, it will serve as the platform to reintroduce God desires into the world. Such a praxis advocates for people to live as whole humans and not surviving as broken beings. This allows the insertion of action filled hope into a world that seems to only stand on the truth of difference. Relying on difference alone fails to see manifested truth and manifested God throughout history. Society may have no interest in the dying, knowing God or any gods, yet occupied memory allows room and space for those persons. All of history has a place in the present. And all of society should get to experience the benefits of God being intimately connected with and in the world. Joseph, Lois, the unnamed women, and so many others can tell the journey towards the cross and meeting God while on the way. Will society listen?

## End of Life Matters - Proposed Course Offerings

Building upon these six theological insights and recommendations, I propose offering a somewhat “meshed” curriculum/course offering from multiple universities that should be considered for any seminary choosing to take a more vigorous step toward solving this identified problem. Most seminaries offer the foundational master’s level courses very similarly to those provided at the Southern Baptist Theological Seminary.<sup>406</sup>

To earn a Master of Divinity in the above example, a student must successfully complete 88 credit hours. Each course holding a varying amount of credits. For example, Applied Ministry is one credit hour, whereas Mission, Evangelism and Ministry requires 24 credit hours made up of different classes. Introduction to the Old Testament requires two classes, part I and part II both worth three credits each. The seminary has placed a value on what areas of ministry that are of great importance and most likely to be contented with in parish ministry.

I recommend seminaries require six hours or more of specialized training in dying and end of life changes, which would include the growing state of emergency of loneliness. The courses in dying would cover Kubler-Ross’s Stages of Grief,<sup>407</sup> Effective Hospital Ministry, Crisis Counseling, Death and Dying, and End of Life Care. While viewing the course list for both the top five largest schools and the several smaller schools with less than 200 students noted that the smaller schools such as Phillips, Union

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<sup>406</sup> “Master of Divinity in Christian Ministry,” *The Southern Baptist Theological Seminary*, accessed July 15, 2018, <http://www.sbts.edu/theology/degree-programs/mdiv/christian-ministry/>.

<sup>407</sup> “The Five Stages of Grief,” *Grief.com: Because Love Never Dies*, accessed July 15, 2018, <https://grief.com/the-five-stages-of-grief/>.

and Memphis Theological Seminary<sup>408</sup> were more likely to have a course on death and dying than the larger ones.

I believe that some of the approaches at Phillips Theological Seminary a graduate seminary located in Tulsa, Oklahoma with a student body of 152, would be empowering based upon the findings of this study.<sup>409</sup> The school offers several courses that I would offer would be helpful to clergy in training.<sup>410</sup> Those classes to be considered for electives are Storytelling in Ministry offering for example Phillips Theological Seminary course description explains it is “practical introduction to the art of storytelling as it applies to teaching and preaching ministries. Students will learn to re-imagine and tell biblical stories using a midrashic process and personal narratives based on life experiences.”<sup>411</sup> This will help with narrative understanding and the power of story, to hear the wisdom of others at the end of life, and to bring scripture to life.

While it is of utmost importance for clergy to counsel and hear the stories of the dying and those living through loneliness, it is important to consider the locations of where these conversations will take place. A class in Effective Hospital Ministry is necessary for all training clergy who plan to be a chaplain and those going into parish ministry. The class at Phillips Theological Seminary allows students the “opportunities to practice basic skills of listening, praying and responding to the spiritual needs of the sick. In addition, significant attention to theological reflection in the clinical environment will be the basis for better understanding the church's role in providing healing and supportive

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<sup>408</sup> “Spring 2017 Class Schedule,” *Memphis Theological Seminary*, accessed July 15, 2018, <http://memphisseminary.edu/wp-content/uploads/2016/10/Spring-2017-Class-Schedule.pdf>.

<sup>409</sup> “About Phillips,” *Phillips Theological Seminary*, accessed July 15, 2018, <http://ptstulsa.edu/AboutPhillips>.

<sup>410</sup> “Course Offerings: Courses in Area V: Practical Theology,” *Phillips Theological Seminary*, accessed July 15, 2018 <http://ptstulsa.edu/AreaVPracticalTheology>.

<sup>411</sup> “Course Offerings: Courses in Area V: Practical Theology,” para. 6.

care. Through reading assignments, classroom instruction, verbatim case studies students will gain the preliminary insights, knowledge and skills necessary for effective hospital ministry.”<sup>412</sup>

Joseph in chapter four, taught that Chaplaincy at a foundational level administers the ministry of presence; and this presence is needed often. Joseph affirmed the need for a meaningful space of both silence and one where he was able to be of service to the larger community. It seems there are few academic institutions that teaches in-depth studies surrounding care for the dying. Phillips offers a course in *Caring in Depth: Death and Dying* which provides “an opportunity for careful study of caring in depth around the broad topic of death and dying. The course is designed to help equip leaders in ministry in a variety of forms to hone practicing attention to and remaining present in the midst of death, dying, illness, loss and grief.”<sup>413</sup> This is one of only a few seminary classes that I found that draw attention to and remain present in the midst of death, dying and illness specifically.

General Pastoral Care training has been found in several seminary curriculum including Asbury,<sup>414</sup> The Cornerstone Bible College,<sup>415</sup> New York Theological Seminary,<sup>416</sup> but Pastoral Care in Crisis Situations should be considered as mandatory for

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<sup>412</sup> “Course Offerings: Courses in Area V: Practical Theology,” para. 19.

<sup>413</sup> “Course Offerings: Courses in Area V: Practical Theology,” para. 20.

<sup>414</sup> “Certificates in Pastoral Care,” *Asbury Seminary*, July 15, 2018.

<https://asburyseminary.edu/academics/degrees/certificates/pastoral-care/>.

<sup>415</sup> “Courses in Pastoral Training,” *The Cornerstone Bible College*, accessed July 15, 2018,

<http://www.tcbs.org/pastoral-training/>.

<sup>416</sup> “Master of Arts in Pastoral Care & Counseling,” *New York Theological Seminary*, accessed July 15, 2018. <http://www.nyts.edu/prospective-students/academic-programs/master-of-arts-in-pastoral-care-counseling/>.

a broader understanding of how to provide good care skills and effective communication in order to handle crisis situations that persons in will face in ministry.<sup>417</sup>

Components of classes at Union Presbyterian Seminary with campuses in Richmond, Virginia and Charlotte, North Carolina can be integrated was well to crate the best overall program. The Pastoral Care Toward the End of Life course, which examines issues that pertain to the aging process as well as individuals near the end of life. Students are expected to make weekly visits with a minimum of two elders and report on those visits. Students also are expected to interview a medial or mental health professional who works with the aging and at least one family caregiver. Each student will then be expected to research a specific medical/psychological condition related to aging and present a case study based upon their findings.<sup>418</sup>

### **LIT 12– Step program (Life in Transition)**

This program will begin with an Introduction to the program: Kubler-Ross's Five Stages of Death and Dying. The five stages: denial, anger, bargaining, depression, and acceptance. It is important to explore the range of emotions associated with dying and to validate them all. It also allows people to be honest with themselves and others about their emotions while gaining strength and support from their fellow program participants. The stages overlap and do not occur in any order and perhaps some emotions will be skipped altogether. As research shows in Chapter Four, the dying better understands their plight unlike anyone else.

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<sup>417</sup> “Course Offerings: Courses in Area V: Practical Theology.”

<sup>418</sup> “Class Listing,” *Union Theological Seminary*, accessed July 15, 2018, <https://www.upsem.edu/academics/class-listing/>.

1) Admitting powerlessness over *death (and life) and this position in life has become too much to figure out on my own.*

Believing that a higher power (in whatever form) can help – *starting every meeting with prayer for complete healing. We recognize that complete healing can often come in the form of death.* Deciding to turn control over to the higher power, understanding even Jesus called out to a higher power for help in Matthew 26.

2) Taking a personal inventory – *of life, getting prepared through wills and death planning*

3) Admitting to the higher power, oneself, and another person the wrongs done – *making amends with family, friends and enemies, a search for community begins.*

4) *Reflection on who we are, self-examination of this place and space of isolation and loneliness*

5) Being ready to have the higher power correct any shortcomings in one's character – *acknowledging that we can live our lives and can have restored character and community moving into death.*

6) Asking the higher power to remove those shortcomings

Beginning to create our wisdom list of how to better help ourselves and others as we move through this new position in life. Although we are wounded, the wounded healer must speak and heal others.

7) Seeking enlightenment and connection with the higher power via prayer and meditation

8) Acceptance of this place and this space, looking for a sense of community.

9) The Realities of Life – the full session will address all the things and/or opportunities in life that the participants were not able to do and/or accomplish in life. This session will offer the participants opportunities to vocalize regrets and a time of reflective wisdom. 10) Seeking to help instead of waiting for help

11) Making a commitment to a person, or cause, or for a peaceful dying process. The acceptance of the benefits loneliness provided. Carrying the message of the 12 Steps to others in need – *being open about impending death and how the program is helping them live a better life*

Funeral planning – this session offers a chance for participants to pre-plan their funeral and put their plans on paper. This will allow participants to know their final wishes were known.

12) Will and planning—This session will encourage participants to gather important documents, make two wills: a living will and an after death will. This session will also encourage putting a power of attorney in place to make decisions and establishing a living trust. Whether participants are young or old, there will always be a need to update beneficiaries on policies and accounts. As discovered, few people plan for death, nor do they plan to be sick. While life insurance can be helpful, long-term healthcare insurance must be considered for anyone who seeks to remain at home while ill. This session will proceed the final arrangements session (funeral planning).<sup>419</sup>

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<sup>419</sup> Michelle Kaminsky, “Estate Planning: 11 Things to Do Before You Die,” *Legal Zoom*, last modified April 2016, <https://www.legalzoom.com/articles/estate-planning-11-things-to-do-before-you-die>

## Church Context

This example curriculum is designed to help practitioners see a model that is set in the context of a church, but uses the resources discovered from a practical theologically informed research which includes disciplines beyond the church. This is for the use of an urban multi-cultural United Church of Christ congregation in mind. For this context, imagine, the church building has been located in the Oakland Park community for over 100 years. Recently the building has been deemed a historical landmark, therefore the structure and the exterior of the building must remain intact to remain faithful to its' historical value. The past congregation was White, German, and Evangelical. The same membership remained until they all died out, the last few remaining wanted to sell or abandon the church. Finally, they decided to allow a new pastor to bring new energy into the church.

With an introductory course affirming all of life and the garden experiences within it, congregants and non-congregants can transform the world. Being better to be able to reconcile how God can use anyone no matter his or her location on life's journey. At least assist in God's transformative work with strangers and particularly engaging people nearing the end of their own life as wells of hope; that their thirsty souls be quenched.

### **Sacred Right Now Moments—“My soul thirst for God, the living God” (Ps 42:2)**

This curriculum works to bring persons living in such a narcissistic age together to drink from a communal well filled with grace and hope. Attention will be given to the importance of spirituality, intentionality, trust, and fear. God is God, yet as culture and society changes there needs to be way to see God in your own context. No one is saying



God has changed, simply saying God seeks us and we seek God, mutuality ought to always be at play.<sup>420</sup> A theologian Elizabeth Johnson, states, “a tradition that cannot change cannot be preserved. Where people experience God as still having something to say, the lights stay on.”<sup>421</sup> The world is dim enough; allow the light and life of Christ to shine in others. Imagine the journey ahead with the lights turned on. Our time together would be playful, as adults, and the children could play and find innocence and truth. If allowed their authentic selves could experience life, a salvific freedom could be experienced. One’s woundedness experienced in life can be revisited, reviewed, and become available to help someone else on life’s journey.

### **Week One: Introduction to Spirituality—“My soul”**

**Scripture.** “Guard the good deposit that was entrusted to you- guard it with the help of the Holy Spirit.”<sup>422</sup> Ground rules must be set. All questions are welcomed. No tearing down or insulting comments.

**Question one.** What does spirituality mean? How are humans spiritual beings? This question will be asked every time the group meets to see how the answers change and to assess how the material is changing the participants. Allowing time for discussion, leader will repeat each response being careful not to embarrass or think less of the answers given. The leader is responsible for helping ensure a safe environment.

**Question two.** What does it mean to be an adult? After all, people all have come here to seeking something, seeking to be whole as an adult? So then, as an adult what does that mean? Who are you?

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<sup>420</sup> Johnson, *Quest for the Living God*, 11.

<sup>421</sup> Johnson, *Quest for the Living God*, 23.

<sup>422</sup> 2 Tim. 1:14 (New International Version).

After allowing adequate time to play with who they are or even who they want to become the leader will begin with guru Erik H. Erikson's understanding of an adult and other stages.<sup>423</sup> So often people see the last stage before dying as adult, as the point in which they have grasped and conquered being a well-developed adult. The end of life seems most meaningful, but they must consider all of the stages and transitions we incurred on the way to adulthood. Chapter Four discussed the deception and hurts individuals encounter throughout their lives, and the impact that deception of time of hurt left on their heart. The aim is to grow into adulthood and age gracefully. Believe it or not, it is possible that some of us have yet to become adults. Chronological tells how old a person is, but they have not encountered a crisis that engulfed us into thriving adults.

#### **Demonstration of Erikson's understanding of Human Development<sup>424</sup>**

**Infancy (0-1), Trust vs. Mistrust, Hope and Faith.** When a baby cries and a voice respond, does not that child begin to recognize the voice of safety? When no one responds, is there not a sense of mistrust or no trust that is building? The task for the infant is building a hope in the people who are entrusted with his or her care. When she cries she has faith her dad or loved one will come to the rescue.

**Toddler (2-3), Autonomy vs. Shame, Determination.** Shame surfaces when that child sees others eating with spoons and forks and he is unable to. The fork just does not land in her mouth, it pokes her cheeks, almost pokes her eye out in extreme cases. But when that child can successfully take a bite of scrambled eggs, that child feels strong and

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<sup>423</sup> James W. Fowler, *Becoming Adult, Becoming Christian: Adult Development and Christian Faith* (San Francisco: Jossey-Bass, 2000).

<sup>424</sup> Fowler, *Becoming Adult, Becoming Christian*, 16-29.

autonomous. The task for this child was to remain determined until his or her desired results were achieved.

**Preschool (3-6), Initiative vs. Guilt, Competence.** I have moved to South Florida just recently, and I did not know a soul. At the preschool age, I learned to interact with people. I learned to pull on the coat tails of people young and old and engaged them. Some I asked to play some I asked for a glass of water, but I initiated the contact.

**School Age (7-12), Industry vs. Inferiority, Industry Work.** Oh gosh, school age is the worse age and memory for many of us. What is remembered about school? What seemed like life or death at this age?

**Adolescence (12-18), Ego vs. Role Confusion, Identity.** How many have issues without egos getting in the way? “Hi I’m Deacon Joe and I know I do a better job at locking up the church than Sister Jane?” Or maybe our partner makes less money than the other do and drive a better, nicer, sleeker car? That can sometimes play with egos and it makes questions about roles not only within relationships, but in the community and at church? Sometimes one question if the role lived out is correct and true for the person one believe themselves to be.

**Young Adult (18-36), Intimacy vs. Isolation, Love.** I was once told if a person could acquire one or two real friends in a lifetime they have been blessed. One or two- Why is that? It is so easy to build walls and keep people at a distance. The opposite would be knocking those walls down and allowing intimacy to take place. Is there a difference between intimacy and sex? Absolutely. Great intimacy is a place of safety. Intimacy is allowing someone the chance at getting so close to you that you are vulnerable (in a good way), giving of your whole self to the moment, to the person, to the experience. When

this happens, love is experienced. Lois had to learn this stage to later serve as a good example of becoming vulnerable and receiving love of a stranger.

**Middle Age (36-55), Generality vs. Self-Absorption, Care.** This is a beautiful age range; sometimes I wish we could jump over all those more difficult ages to experience this age group. The goal of this age is to achieve care. Care for others and care for self. While it is possible to go overboard with caring for oneself, too much one can become very self-absorbed. The other side to being self-absorbed is generality. In this stage, humanity is able to generate and accumulate new relationships. There is a genuine care presented and given to others.

**Older Adult (55+), Integrity vs. Despair, Wisdom.** In 2018, it is hard to imagine a group of people over the age of 55 living in a state of despair. Many are still working, planning vacations and enjoyed the relationships cultivated in the years prior. With age, sometimes illnesses are found and terminal diagnosis rendered. It is more likely for those after learning their life will change fall into this state of despair. Despair is an extreme sense there is nothing more to look forward to. Despair is barely surviving; persons forget how to live vibrantly. It is surviving at the end of your rope; having no vision. Despair is carrying the burden of not knowing. Now living in and with Integrity is the aim. Serious questions arise: Have I completed my hopes and dreams? I need to begin considering what my tombstone will say. Here lies ....who? What will be the stories my family, friends, neighbors tell about me? The goal is to work from a place of wisdom. Who has wisdom? Is it silvered hair sagely persons? If this is true, the journey is to be reflected upon. Nevertheless, it is those who lived who knew their diagnosis imparted valuable information to the living. Important information often silenced in culture and society.

Yet, those persons told their truths and the question becomes; what was heard? Wisdom can be found in a multitude of places, particularly those experiencing loneliness near the end of their lives.

**Assignment.** Take some time, 20 minutes, and let us begin to honor our older adults, our mothers, fathers and ancestors by answering these questions: 1) What are my personal hopes for the world, my church and my family (or self)? 2) Whom do I have genuine relationships with now? 3) Who would I like to have a genuine relationship with in the near future? “For I am convinced that neither death, nor life, nor angels, nor rulers, nor things present, nor things to come, nor powers, nor height, nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord.”<sup>425</sup> 4) Have I left room for the stranger? Benediction until next week.

### **Week Two: The Vison and Thirst for God**

The goal of this lesson is to better understand that our life looks a whole lot like the person beside us. To better understand and see similarities, one realize people’s names are different yet walls of protection and being self-absorbed are possibilities found in life. That demonstrates we all have work to do when we look in the mirror at ourselves. The real work for last week was to determine how will one live moving into the unknown? The future requires all of humanity to be actively involved, in the journey towards death. Regardless if we are healthy, wounded or experiencing loneliness.

This evening session is to discover what is next, speak one’s own truth and experience love and a real sense of presence from the stranger. Nearing the end of life is like being thirsty wanting something to quench your dry, lonely and tired circumstances

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<sup>425</sup> Romans 8:38-39 (NRSV).

of life. Humanity is thirsting for God. Pull out the list you have worked on. The items on this list are going to represent vision, vision for where our lives as adults are going. The items on the list are visions to help quench our long-standing thirst. Let us explore some of the visions you envisioned or desire for those whom you love the most. It is the personal truths that will enhance and guide the creation of a revised end of life curriculum.

You all meet week after week because a sense of community has been discovered among strangers. That is great, considering “Shared values lead to *common action* undertaken in a spirit of *mutual concern*.”<sup>426</sup> Does it not feel good to know experiences and concerns are to be shared? When a mutual concern is recognized what then? If you all learn that both the men and women’s restroom is out of order, what happens? Everyone becomes concern because it affects the community. Therefore something has to be done about it, an action has to occur because the mutual concern demands explicit attention.<sup>427</sup> The dying process is indeed a community event. There is an individual vision and there should be a communal vision. And that vision is at the heart of this ministry, a gift of from God. We all die alone, yet in community.

Where there is a gift there is a challenge. When there is running flowing water just across the road and what happens? A steady stream of traffic comes out of nowhere attempting to hinder our forward progression to cross the street. That traffic looks la lot like demands on our time, not knowing how to nurture our common vision, and not showing concern in appropriate ways, not being effective.<sup>428</sup> The challenges can be

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<sup>426</sup> James Whitehead and Evelyn Whitehead, *Method in Ministry: Theological Reflection and Christian Ministry* (New York: Sheed and Ward, 1995), 96.

<sup>427</sup> Whitehead and Whitehead, *Method in Ministry*, 96.

<sup>428</sup> Whitehead and Whitehead, *Method in Ministry*, 96-97.

overcome remembering as adults one should have the ability to genuinely give and receive love, care for the other and share wisdom.

**Assignment.** Whom do you trust? Review your life and the people in it and ask yourself, is love and trust being given and received?

### **Week Three: Trusting the Circle “the”**

Begin with prayer, worship and scripture reading (1 Peter 4:8-11).

**Question one.** Last week your assignment was to review your life and the people in it and ask yourself, about trust. What happened?

**Follow up questions.** What does a circle usually represent? What are some examples (I’m assuming wedding ring, prayer circles, and groups of same interest)? What is the importance of having such a circle?

This section is called “the” because we tend to use that word when we are certain. “The” is “used, especially before a noun, with a specifying or particularizing effect, as opposed to the indefinite or generalizing force of the indefinite article”<sup>429</sup> For example, the problem is thirst, or the temperature is 87 degrees. So in the past weeks we have assessed who we are, what our collective vision is and now it is time to discuss the circle of commitment. Before we go any further, we must better establish the circle of trust for this group that will help us commit. “The” group in this room tonight have sat with each other and listened to the deep desires of each other’s heart. The way to honor this information is listening not with your ears alone but with your heart and a place of compassion. Deep listening is listening with the sole intention of listening for helping not advising.

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<sup>429</sup> “The,” *Dictionary.com*, accessed May 4, 2012, sec. 1, <http://dictionary.reference.com/browse/the>.

When one reaches out to help others, not only is that individual transformed, but is made well. Whole communities can be positively impacted by choosing to listen with the heart. This is something real, something that has been tried and tested. Palmer Parker, author of a *Hidden Wholeness*, writes “I witnessed more personal transformations than I had seen before, and I watched more people embrace their social responsibilities as well.”<sup>430</sup> Being in a community like this there is an infinite number of possibilities for desires to come true when trust has been established. Essentially, that is what the circle is about. Previously mentioned, the wedding band and the like, are circles that symbolizes commitment and trust.

With the trust *commitments* continues to grow. How can commitment be lived out and demonstrated in life? “The” are things we are certain of, things that are real. If looking to be better Christians, one must consider there are systemic problems in the world. Some places do not have clean water to drink, children are starving, women’s voices are not being acknowledged around the globe, and their bodies are not being respected, much like those who are dying. It is real that a young boy who looks suspicious can be gunned down. Fear is real. In addition, I dare to say that love is real. Compassion is real. Trust is real, and it is possible the God that lives in in and through the lives of strangers who share compassion with the dying.

What is real? There are members in this community setting who are widowed and live alone. There are people in this congregation who are no longer connected to their biological family for whatever the reason. What will be your commitment to these persons and this congregation? What will be your commitment to all of God’s children

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<sup>430</sup> Parker Palmer, *A Hidden Wholeness: The Journey Toward an Undivided Life* (San Francisco: Jossey-Bass, 2004), 25.



rather they are striving or surviving after a diagnosis? Recall the passage from 1 Peter 4:8-11, “Above all, maintain constant love for one another, for love covers a multitude of sins. Be hospitable to one another without complaining...so that God may be glorified in all things through Jesus Christ. To God belong the glory and the power forever and ever. Amen.”<sup>431</sup> Understanding God’s call on our lives to live in community and to take care of everyone in that community is a big deal.

**Discussion.** What are other real things in the world and community?

**Assignment.** What is the responsibility of humanity to what is real?

#### **Week Four: I Belong “Living God”**

**Begin with prayer, worship and scripture reading.** When responsibilities are embraced one “distinguishes the inner voice of truth from the inner voice of fear.”<sup>432</sup> Fear is so readily available, and one seeks intentionally the inner voice that resides within. The sound of the still small voice that still speaks in every context full of life is desired. This voice gives direction, clarity, community; this voice is the “living God.”

In order to hear God, get rid of all of the noise that surrounds. How many people get off work, get in their car to drive home and immediately turn on the radio? How many are honkers in traffic? In addition, I imagine many arrive home have the television on in one room and the radio in another. So, tell me, when is silence welcomed? When do the teacher within you speak? All those things have its place in our lives. But most importantly time and space with God to commune becomes an ultimate concern. When is prayer time with God? Please don’t tell me the only time spent with God is a scream of,

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<sup>431</sup> 1 Peter 4:8-11 (NRSV).

<sup>432</sup> Palmer, *A Hidden Wholeness*, 27.

“Oh God” when in need or afraid. Ok let us say that is the only time, the world is in need of your wisdom, prayers and presence even if a stranger. .

The world is afraid of everything even unto death—afraid of not being remembered or making a significant difference. But the thing is, just being present is a wonderful and transformative difference. Fear has to go and be replaced with a more sense of compassion and cares for others- By now full capacity of integrity, wisdom and love can be demonstrated.

On a piece of paper, as many pieces of paper needed, write on them fears that hinder trusting people and hinder people from helping previously unknown persons. All are thirsty and in need of the Living God. All are in need of each other. God has humanity positioned to be hands and feet, as beating caring hearts, as intellectuals that should be able to join together for the sake of committing acts of love. Therefore an seminary students and academics are called to listen and be present with humanity from birth to death. A special emphasis and attention needs to be given at the end of life.

I will stand at the front of the group with an offering basket and ask everyone to come up as they feel led to offer their fear over to God. This symbolizes the fear leaving the individual in hopes they find a release of that burden to now better operate and live in wisdom. I will then lead a benediction.

**Assessment.** Each participant should reach freedom or “salvation.” Salvation in this forum is a *saving grace* “that brings release and [a] new openness.”<sup>433</sup> Because of the release persons will be able to articulate who they are, the inter-relatedness and the stretching implications of tragic/hurtful/ and joyous situations. Be able to define or

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<sup>433</sup>Fowler, *Becoming Adult, Becoming Christian*, 60.

express avenues in which they can personally assist others and situate themselves within a grace-filled loneliness. The quest for wholeness through this exercise cannot be attained, “rather, it is a way of being and moving, a way of being on [a] pilgrimage” practicing faith.<sup>434</sup>

### **Sacrament of Community**

This week and any following weeks has to be about community. This research has demonstrated what loneliness looks like in isolation and what it looks like surrounded by many, even the stranger. Community is something beyond being surrounded with friends and family. Rather it is a time that allows persons to fight their way to be in the midst of those who are dying and need to be heard. Bill who lives with cancer said, “A community is not just a collection of people gathered around us, but a group with a common bond.”<sup>435</sup> Having family at the bedside of one dying is nice in gesture, hearing advice from those who are thriving in life isn’t always the best solution. Rather having a sense of community that “arises out of our shared life experiences that come to all of us in some way and at some point. These include, of course, illness and suffering. The cause and the mode of our illnesses and disabilities have the potential to disenfranchise us and leave us outside our identity group.”<sup>436</sup> Those who are dying are pushed and sometimes forced into the wilderness unable to relate to those who live on the main lands of life. Sometimes it is one’s own disease that separates the living from the dying, “consider also the impact of aging that often brings with it dementia and loss of mobility with greater

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<sup>434</sup> Fowler, *Becoming Adult, Becoming Christian*, 60.

<sup>435</sup> Holmes, *Thoughts from the Bedside*, 35.

<sup>436</sup> Holmes, *Thoughts from the Bedside*, 35.

dependence on others and a loss of community.”<sup>437</sup> Few seems able or skilled to walk with and journey along with those who are dying.

Community and a gathering of people at the bedside of the dying seem to be two different things when experienced by the dying. Sure, nursing aides can sit at the bedside and turn on the television when requested, but they are not always able to be the community one needs. Much like family members who receive a phone call saying *so-n-so* is ill or in the hospital, they visit, but unable to be “community.” Most likely because, “Dying in community is not an oft-considered topic, but my experiences of the last few years suggest that we as a society often fail the dying as they draw their last breath alone.”<sup>438</sup> It seems likely that no one has been adequately involved or taught how to be community. Simply because, “We have allowed technology to either distort or redefine how we relate to each other.”<sup>439</sup> The teachers of community are absent and the television as teacher, has failed the living and the dying.

It is “not infrequently, someone dies in a hospital room without the presence of family or friends. In some cases it is because the one dying is quite elderly and his friends and family are deceased, in poor health, or simply unable to withstand keeping a death vigil.”<sup>440</sup> Many die alone and many die within a place of loneliness. For instance, Bill tells a story about,

Arriving mid-morning in the ICU to check on a ninety-year old man, I noticed his nurse was not one I had ever met. I introduced myself and soon learned that she was usually gone by 7:30, as she worked the night shift. I assumed someone had

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<sup>437</sup> Holmes, *Thoughts from the Bedside*, 35.

<sup>438</sup> Holmes, *Thoughts from the Bedside*, 35.

<sup>439</sup> Holmes, *Thoughts from the Bedside*, 35.

<sup>440</sup> Holmes, *Thoughts from the Bedside*, 35.

not shown up for work so she had stayed to help. I quickly learned my assumption was incorrect. Over the last several nights she had come to know this man who was likely to die soon. She was concerned he was going to die without friends or family with him. To date there had been no visitors. She decided to stay, as his death was imminent. His life-support system had been withdrawn, and intravenous fluids had been stopped. A “do not resuscitate” order had been written for him in keeping with his advance directive executed several months before. The nurse I had just met was at his bedside holding his hand as he took his last breath and passed into eternity...He may have had acquaintance and some he counted as friends but had few or none with whom he had built close relationships.”

They dying process begins after birth. Humanity is born and humanity dies. In between the two, life is lived, explored and enjoyed. It is that terminal diagnosis that forces the dying to consider their loneliness in bedside conversations. Who shows up to reflect over life and journey with is now noticed more than ever before. Living life is enculturated in consumerism and individuality. Dying is a communal experience and sometimes a space of discomfort. Being able to introduce the new self to a community of even one, allows a sense of full humanity and loneliness has brought about a communal end.

The dying experience is an opportunity to gather intentionally, to commune with the ill and with God. They terminally diagnosed theologian, Bill Holmes states, community is built by “investing ourselves in the lives of others. It is not an easy thing to do, for we must first get up from our chairs and leave our virtual communities, at least for

a while. We must pay attention to who people are.”<sup>441</sup> Sounds as if much of life is spent learning about self or avoiding the other. When it takes a fascination and interest in the other to build community. For community is what is needed most at the end of life. It is in community that the wisdom of loneliness can be heard within a community of others who authentically care. Bill continued, “We do not have to “figure them out,” but we do need to come to a point of appreciation of their unique life stories.”<sup>442</sup> The stories of experience, of grief and joy and of very possibly of loneliness experienced outside of community. Bill explains that, “unless we are already dead, then who we are today is not necessarily who we will be tomorrow. Our human tendency is to assume we already know all there is to know of the other. In making that assumption we turn the other into a finished work, frozen in time.”<sup>443</sup> This is another reason loneliness never leaves is because community is never created to honor the new person the dying has become. People, who are dying, are yet growing, changing even maturing as they continue to learn and navigate the dying process. The so-called healthy person refuses to see the new masterpiece God is creating in the dying. Rather they choose to see only the person who once was. Therefore, loneliness allows room, space, and opportunity for the dying to create and become a part of society once again. Loneliness calls for an intentional space for the wounded and lonely to be within community for the sake of healing society.

### **Call for Future Explorations in Loneliness as a Theological Construct**

A more adequate dialogue and interaction with death and dying in the public sphere of society must be discussed. It must begin with the dying and include the

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<sup>441</sup> Holmes, *Thoughts from the Bedside*, 36.

<sup>442</sup> Holmes, *Thoughts from the Bedside*, 36.

<sup>443</sup> Holmes, *Thoughts from the Bedside*, 38.

academy, the church and all of society. The research has demonstrated the need for a more robust academic quest to include and journey with those experiencing loneliness. Practical theology is called to respond to this growing crisis and faithfully engage with the public in a public theology as practical theology. Building upon this profound research Practical Theology has begun, there is yet more work to do. This work points towards more research and explorations of loneliness before death and its many levels. Indeed, this is not a work to be done without great dialogue with the dying and other disciplines. Such explorations would consider race, economic classism, gender and the varying levels found within loneliness. Like Kubler Ross, there are stages of loneliness that needs to be explored. Loneliness is becoming an epidemic that the church must respond to.

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