

Visiting the Sick, Visiting Christ, Visiting Myself. A Theology of Pastoral Care

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Received: 2.12.2023 • Accepted for publication: 27.01.2024

Abstract

Fr Adrian Budica reflects theologically on the pastoral ministry of a chaplain from an Orthodox perspective. It reflects the author's personal journey through Clinical Pastoral Education (CPE) towards chaplaincy, connecting the insights about this ministry gathered in this training with his own Orthodox faith in connecting points such as: extending Christ's presence to others, Christ's ministry in the three unctions/roles (Prophet, King/Leader and Priest), Christ's presence in suffering (St Silouan's testimony) and the Sacrament of Repentance/ Confession. The author draws basic distinctions while trying to hold both roles in his work (priest and chaplain).

Keywords: spiritual care, suffering, chaplaincy, Christ.

Rezumat

Pr. Adrian Budica reflectă teologic asupra slujirii pastorale a unui capelan din perspectivă ortodoxă, referindu-se la călătoria sa personală prin Educația Pastorală Clinică. Autorul unește perspectivele despre această slujire adunate în această pregătire, cu propria sa credință ortodoxă în puncte de legătură precum: extinderea prezenței lui Hristos la alții, slujirea lui Hristos în cele trei ungeri/ roluri ale Sale (Profet, Rege/Conducător și Preot), prezența lui Hristos în suferință (mărturia Sfântului Siluan Athonitul) și Taina Pocăinței/ Spovedania. Autorul face anumite distincții fundamentale, încercând să păstreze ambele roluri în slujirea sa (preot și capelan).

Cuvinte cheie: îngrijire spirituală, suferință, misiune pastorală, Hristos.

"Keep your mind in hell, but despair not." – St. Silouan of Mt. Athos

*"Blessed be the God and Father of our Lord Jesus Christ, the Father of mercies and God of all **comfort**, who **comforts** us in all our tribulation, so that we may be able to **comfort** those who are in any trouble, with the **comfort** with which we ourselves are **comforted** by God. For as the sufferings of Christ abound in us, so our consolation also abounds through Christ. Now if we are afflicted, it is for your consolation and salvation, which is effective for enduring the same sufferings which we also suffer. Or if we are comforted, it is for your consolation and salvation. And our hope for you is steadfast, because we know that as you are partakers of the sufferings, so also you will partake of the consolation."* – 2 Cor. 2.3-7

Introduction

I first came in contact with chaplains during a hospital internship as a seminarian at St. Vladimir's Seminary. I was drawn to the idea of a chaplain's role - mysterious, frightening, awe-some. I received some basic training and was responsible to inform patients of pastoral care services and to "be a listening presence." It only took a few weeks of patient visits for me to crash and burn. "Why did this patient start crying when I just listened? Did I make them feel worse? Who am I to pretend I have something to offer? Can I actually do this?" Dr. Albert Rossi, our Seminary counsellor, helped me process the struggle, reminding me that while visiting the sick, I was visiting the sick *and* visiting Christ (Mt. 25). Christ was and is, paradoxically, the One suffering (the patient), the One healing (the physician) and the One connecting (the chaplain). My subsequent chaplain residency was centered on Christ and me visiting my-self. My initial intentions to be of help received its complementary spiritual tool – *helplessness* – for me to be able

to care for others. Ten years later, I am equally, if not more, passionate, more in awe and fear in my role as a chaplain. Paraphrasing St. Paul in 2 Cor. (above), I suffer and I am comforted by God together with those who suffer and/or find comfort in Him.

Spiritual Care as ministry to Christ, to others, to self

Chaplaincy Pastoral Care can be defined in different ways. One of my favorite definitions comes from St. Paul's words, "*I have become all things to all people*" (1 Cor. 9.22). It is my goal to engage different people in different situations while also staying true to my identity as an Orthodox Christian, as a priest, and as a chaplain. It is indeed difficult a difficult task to capture all that I do as a chaplain in an "elevator speech." At my hospital, we define chaplains as those who "*help create a sacred space for people of all faiths and cultural beliefs in stressful, life changing or transitional moments to find meaning, hope, connection and comfort by enabling them to*

identify and draw upon their own sources of inner strength.” This description is a good starting place, but like all elevator speeches, misses a lot of the nuance of being a spiritual caregiver, let alone an Orthodox caregiver.

“I am wondering if you’re feeling...” “How are you feeling?” These simple words contain a sincere invitation to a meaningful and deep connection. As a chaplain, I connect in many ways with the patient – consciously and unconsciously – but I believe the real connection that sustains all is between God and the human soul. We are all created in the “*image and likeness of God*.” Of all the spiritual features implied in this statement (*imago Dei*), being in communion with each other is one of the most important. We are created to be as God, One in Three Persons, thus in His image and likeness, we are called to be in communion and dialogue with others. When we strive to become like God, we experience the suffering of all humanity and we struggle to sanctify it all.¹ Christ recapitulates us all in Him and suffers in us and with us all. Our Orthodox tradition uses a synecdoche² to speak of humanity as a single person with Adam. The implication is clear: there is “no other way to be saved but through our neighbor.”³ The *Sayings of Desert Fathers* reflect the same idea. Abba Anthony says, “Our life and our death is with our neighbor. If we gain our brother, we have gained God, but if we scandalize our brother, we have sinned against Christ,” and an anonymous saying goes, “Each of us should look upon our neighbor’s experiences as if they were our own. We should suffer with our neighbor in everything and weep with him, and should behave as if we were inside his body; and if any trouble befalls our neighbor, we should feel as much distress as we would for ourselves.”⁴ We also confess that the Saints are carrying the suffering of all humanity in them.⁵ Through empathy, I become a part of Christ’s work, and by ministering to others and to myself, I minister to Him and to all humankind: “Assuredly, I say to you, inasmuch as you did/did not do it to one of the least of these, you did/did not do it to Me” (Mt. 25).

As a chaplain, I use a basic pastoral strategy, a framework of four strategies that I learned from my first CPE Supervisor and I still find valuable. (1) First and foremost, do no harm! Much of my training has been around knowing when and how to put myself on hold and when and how to make use of self. Spiritual Care is the difficult balancing act between “this is not about me” and “this is all about me.” To use a metaphor, spiritual care is about journeying together, and sometimes even being lost together – and as such, much more available to be guided by Christ – rather than about me single-handedly, if not outright prideful guiding others towards a safe place, a place where I arrived, but others did not. While psychology speaks of “counter-transference”⁶, Orthodoxy speaks about being healed ourselves first. Dr. Rossi’s introduction to his podcast *Becoming a Healing Presence* warns us that “In order to

become a healing presence to others, we must first be healed ourselves through an active relationship with the Great Healer – Jesus Christ.” Once that process is activated, the following spiritual strategies feel more natural. (2) Secondly, help the patient articulate what is true for them. This process involves active listening techniques. It is similar to Christ asking the disciples in Lk. 24 – “Which things” do you mean about Jesus of Nazareth? (3) Third, walk a little way with them in their suffering. Once I acknowledge my limitations, I am aware that I can only walk a little way, and specifically, in places of their suffering. (4) Finally, offer it all to God in prayer – a ritual to acknowledge the powerful and sacred connection, a hope to have God continue to hold us (the patient and I).

Spiritual Care as an extension of Christ’s ministry – prophet, priest, and king

I am an ordained Orthodox priest and a chaplain. In the Orthodox Church, priesthood is described as an extension of the high priesthood of Christ, therefore everyone in a priestly role carries three ministries and offices: prophetic, royal, and sacrificial (sacerdotal). To some extent, I believe that chaplaincy is a ministry striving to be an extension of His Work and thrice-unction: prophet, king and priest.

I am also a member of a pastoral care team, a team “that cares as a pastor” – dictionary definition. If I go even deeper in etymology, the pastor’s role is that of a shepherd (*Lat. pastor, -is*). The Prophet Ezekiel describes some of the qualities and responsibilities of a true shepherd as: feeding the sheep, strengthening the weak, binding the broken, bringing back that which was driven away, seeking the lost (Ez. 34). In the New Testament, Christ was the One to define Himself as the True Shepherd (Jn. 10). Christ, the True Shepherd, is *the* theophany (manifestation/revelation of God) *par excellence*; He leads His sheep to green pastures and protects them from danger. And finally, unlike any paid (hired) shepherd, He puts down His life for His sheep.

In offering spiritual care, I see myself as a prophet inasmuch as I try to create a sacred space with the patient, a place to encounter God. The chaplain, just like a prophet, is often seen as “a person of the cloth,” implying that he/she has a “special connection” with the Holy. Some patients say to me, “put a good word for me with the Man Upstairs – you’re closer than I am.” I, on the contrary, try to help them connect or reconnect with the Holy, as they understand spirituality. And when we pray together, I imply that it is here and now where you can meet the Holy, in the natural, not in the “special connection.” I try to facilitate a theophany by listening and speaking, by praying and being silent, by empathizing both in faith and in suffering.

With respect to the royal office as a chaplain, I strive to be a leader in “ruling” over my passions. This enables me to

¹ A common theme in Orthodox theology: suffering together.

² “A figure of speech in which a part is used for the whole or the whole for a part, the special for the general, or vice-versa, as in *ten sails for ten ships* or a *Croesus for a rich man*.” (Dyctionary.com). It is commonplace in Orthodox theology to call Adam and Eve all humankind. We are individually a microcosm to the macrocosm.

³ St. Symeon the New Theologian, *Theological, Gnostic and Practical Chapters*, 3.3 and *Homilies of St. Macarius*, 37.3, both cited by K. Ware [1, p. 143]. Orthodox Theologian A. Khomiakov, writes also, “*When anyone falls, he falls alone, but no one is saved alone*” [2, p. 38].

⁴ In *The Sayings of the Desert Fathers*, Anthony the Great, 9 [3, p. 3] and in Paul Evgerinos’ systematical collection “On Love”, 38.8 [4, vol. iii-iv, p. 189].

⁵ St. Silouan of Mt Athos and St. Sophrony of Essex both wrote extensively about this in their works. See paragraphs below reflecting on the theology of St. Silouan.

⁶ Counter-transference is defined as “1: psychological transference especially by a psychotherapist during the course of treatment; especially: the psychotherapist’s reactions to the patient’s transference; 2: the complex of feelings of a psychotherapist toward the patient” (Merriam-Webster Dictionary, <https://www.merriam-webster.com/dictionary/countertransference>)

recognize the passions in others and also to learn from others dealing with these struggles. I try to lead the patients through the dark, unknown places of their soul, whether they arrive there unexpectedly or they have been there for a long time. The royal or leader role also implies a mutual relationship of safety and trust and giving up my own expectations or ambitions for the ones I serve. Christ implied that He leads His sheep in a relationship of love and trust: the gatekeeper opens the door to Him (implying that he/she recognizes Him); the sheep follow Him because “they know My voice,” whereas “the voice of a stranger they will not listen to.” As a spiritual caregiver I must be the one initiating, sustaining, and ending the pastoral relationship. My pastoral leadership (“royalty”) is dependent on this. How would they trust me if I am “a stranger”? This implies I must be true to my own self (voice) and to the voice of Christ.

I heard this old piece of (Hebrew) wisdom, which speaks of humans carrying two notes: one in the left pocket which says, “I am nothing but ashes and dust” and one in the right pocket which says, “I am the image of God and the entire universe was created for my sake and for my sake only.” The wisdom is in discernment, i.e. knowing when to use which note. It is the same with pastoral authority, which is implied in the role of the chaplain. I am aware of my own tendency to reject power altogether (in “humility”), emphasizing the kenotic aspect of the Incarnation and salvation – the fact that power comes from self-emptying, from obedience to God, and ultimately from the Cross and death that He endured. But leadership (the royal office) is implied in our very essence and even more in our ministry as chaplains. I am continuing to learn to balance one with the other.

The royal office is related closely to the sacerdotal role. My model Leader (Christ) is also the One giving His life for us. He is the supreme priest by being the sacrifice and the sacrificer.⁷ As a chaplain, I try to “make sacred” (Lat. *Sacri-facio*) by allowing the patient to express it and by offering everything the patient has shared to God as a prayer. Just like the Sacrament of Eucharist, the supreme sacrifice, God transforms/sanctifies not only the gifts, but transforms us as we partake of it. The Eucharist is the Mystery of the Communion/Community. As a chaplain I also have the hope to be in communion with other humans, and we all with God. As Martin Buber stated, I know myself truly only in communion with God and with others.

My role as a chaplain differs in many ways from my role as an Orthodox clergyman. Working in a multi-faith environment means I meet people of various faith traditions or no religion at all. To me, it is an exercise of humility, ultimately acknowledging and learning from the way God works with different people. In my Orthodox understanding, it is not just the “fact” or information that Christ gives to us – “I am God” – but also our continuous answer to His question and invitation: “Who do *you* say that I am?” (Mt. 16.15). Every second, minute, day, life event, there is a new beginning to my own faith, a new answer. I accept the limits that come as a chaplain: I will not preach to the patient, nor will I dispense solutions (“quick-fix-es”), as powerful I may find them for myself. I understand that what works for me, or better said, how God is working with me at this time and place, is not what is profitable, useful, or even beneficial for someone else. While I can see the hospital as my “parish”, the patient is not my parishioner

per se: he did not choose to be my patient, as he has not “decided” to be in my workplace, the hospital, where I do my rounds. But even as clergy, I am blessed to grow from witnessing people in their suffering, and learn how to listen to them and know them better, how to respond to them.

As a chaplain, I am not just another passer-by or friend socializing with the patient, nor another member of the clinical team that may tell the patient “you *must* do this and that.” On the contrary, I have the hope that I (the chaplain) and God would be able to take something away rather than add to the burden. Thus, my presence, even if short, might mean a lot in the long-run, especially for one bound (willingly or unwillingly) to think deeply, as the most common daily activity. The invitation, “I am wondering if you feel...” The answer “No, not at all” or “Yes, I do feel...” becomes the way, maybe the only way, the patient hears himself, while not ashamed or afraid of someone or Someone witnessing. It may be the only way he allows someone/Someone to join in his suffering, and the only way someone/Someone invites him to look towards God in prayer.

Spiritual care as walking with someone in their suffering

The theology of St. Silouan of Mt. Athos has been the base of my theological paradox and grounding: “*Keep your mind in hell, but despair not.*” St. Silouan lived and spoke about humility. I understand humility as *real* reality, seeing myself and everything around the way things *really* are, that is, seeing in the Light of God.” To me, this saying speaks of humility, as keeping a balance between death and life, between “I am a sinner” but also “I am the child of a Loving God.” A hymn that we sing in the Orthodox Church as part of the Funeral Service articulates this as “*I am the image of Thy ineffable glory, even though I bear the wounds of transgressions.*”

This goes back to my third pastoral strategy of chaplaincy, “Walk a little way with the patient *in their suffering.*” This it means I will intentionally explore with patients under the surface of “I’m fine” or even “Everything is OK...today”, because I believe that healing can only start with humility or “*reality*” (as I defined it earlier) and dying to one-self. When I see the place that I and/or the patient really are, be it “discouraged, abandoned, lonely, helpless,” or even “at the bottom of hell”, I believe that’s when we find ourselves closer to God than ever. Only by going to the two extremes we make God absent: either “I am great or even perfect as I am, I need no improvement” (opposed to “Keep your mind in hell”) or complete despair (“do not despair”). Not that we add a sin if we despair, but I don’t need to stay there, knowing that God will receive me with love and heal me. If a patient is in complete despair, I refrain myself from trying to fix him, offering him what would be a false hope. I explore with them how they see themselves, their life and their values even now, in desperation. I invite them to reconnect with God in a direct dialogue or prayer. They can freely accept it or refuse it. In my heart, I keep the faith that he or she may be at that point closer to God that I have ever been – the paradox of our God, the Crucified and Resurrected Lord.

This understanding relates very well to the Orthodox theology of the heart, as the very center of the soul and the place of meeting God. In the mystical and ascetical tradition of the Church, the heart is the inner “chamber” that we go in to pray:

⁷ In one of the prayers in the Divine Liturgy (during the Cherubic Hymn), the priest prays, “*For You (Christ) are He Who (both) offers and is offered, Who accepteth and is distributed, O Christ our God.*”

“When you pray, go into your room, and when you have shut your door, pray to your Father who is in the secret place; and your Father who sees in secret will reward you openly” (Mt 6.6). For centuries, Christians have strived to have their mind descend into the heart. Many have devoted their entire lives to this, in monasteries or in the city, and many writings have been preserved on how one should practice this meeting with God in the “prayer of the heart.” But this encounter is in no way reserved for the “few.” On the contrary, I believe it is my very life and the most basic way for me to encounter God.

St. Sophrony of Essex once said that it is in suffering that we are most closely to encounter God. Why? When a part of our body hurts – for instance, if we broke a finger – our entire mind seems to concentrate in that place and it’s very hard to do anything else without thinking of your hurt member. It is a natural movement of the mind. Likewise, when our heart is truly broken, our mind naturally descends into the heart. The painful experience can become the very basis of the healing experience inasmuch as I don’t ignore it, avoid it or move my mind away from it. What Henri Nouwen calls “deepening the pain”⁸ I see as potential for (nothing less than) meeting God and deification. I witness and assist the patient to explore that brokenness, in the present moment, rather than taking them (“their mind”) somewhere else. But if I avoid that brokenness or attempt to “fix” it, I might actually rob them and myself of the opportunity of meeting God in the heart.

Chaplaincy Pastoral Care is indeed a profession, as we are part of a health-care team that strives to “make the patient better.” Not everyone is ready or willing to be better, but I, the chaplain, will still be next to him, trying to separate my own will and expectations of this person from his own will and expectation and from God’s will and expectations. So, I am back to square one: this is God’s work, and I am blessed to be a part of it. I believe that it is God Who suffers in us, Who listens to us and “walks with” us, and ultimately the One Who receives, heals and comforts all, and I can witness it daily but even more clearly as a chaplain. Surely, I am not a stone, nor any other inanimate object: I too have feelings and concerns, and I pray to Him to heal me first and then help me in my first and most important strategy: “Do no harm.” So, if I were to re-define *my* Pastoral Care in a few words, I would say *“God’s love for humanity that we try to extend to our fellow humans, helping them and us re-experience ourselves as children of God.”*

Chaplaincy Spiritual care as Confession

In the Orthodox Church, the Holy Sacrament of Confession is one of the central ones. As I grew up in Romania, I would go to see my spiritual Father (confessor) as often as possible; no one could partake of the Holy Eucharist without prior preparation and Confession beforehand. It is a Holy Mystery (or Sacrament) because Christ is present invisibly receiving the Confession and giving forgiveness (from Greek “mysterion”, hidden). With God’s grace, as a chaplain, I am striving to become a “spiritual father” inasmuch as I can work with the Holy Spirit, “the Comforter, the Spirit of Truth, the Giver of Life.” It takes great courage to confess your deepest feelings and thoughts, and an equally great courage (and responsibility) to witness them. I believe that everyone needs

and benefits from Confession, and I think that to a certain degree, Pastoral Care brings me and the patient back to that often-forgotten disposition. On one hand, it is liberation through sharing, as opposed to suffering inside, alone. It is coming back to the Existence, to “the I AM” (Greek “ho on”, YHWH), as opposed to living in the imaginary world that we all build in our selves. On the other hand, it is letting go: when I, the chaplain, stop myself from “repairing things” (my way), but rather acknowledge the presence of God; when we both let go of our fears, shame and despair and offer it to God with the hope that God can heal and transform us. “Powerless” becomes “all-powerful/Almighty” when we let Him work.

As I read and hear in the lamentations of the Psalms, the patients may feel broken-hearted, overwhelmed, lonely etc. If I, the chaplain, am there, I try to witness and validate them in their suffering. If they wish, I can pray with them. Then I reflect on what the visit meant to me, in my theological understanding. It is quite often that I do not meet this person again. In that I continue to learn how much chaplaincy is a synergy and how I must continue to trust God: as much before and in the visit as after the visit. God’s work with my patients continues even after my work is done. One patient tells me it was wonderful to talk to me and asks me to come back; another has that look on his face that reads “Go away!” or “Not you again!” Either way, I believe that God works in this world and in us, with whatever we give to Him. No matter what answer we give to God, He continuously looks for ways to make our good and bad choices for our own benefit.

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⁸ In his book *The Wounded Healer*, a classic in the pastoral care field.