

## **Hospital Chaplaincy: Spiritual Health Care**

***Mia Hilborn***

Hospital chaplaincy, the concepts of care and healing, prayer and visiting the sick, and its association with the priesthood of all believers, is an ancient ministry with biblical roots. The Levites had the duty of assessing sickness and how it should be treated by the community. The book of Job shows clearly the despair of pain and grief, and contrasts good and bad listening. The gospels are peppered with stories of healing and the lengths to which people would go for a sick child or favoured servant; and of Jesus' love for the sick and vulnerable, the example to those who followed him.

Hospitals in this country arose from the ministries of monastic houses: my own job title 'Hospitaller' has come down from the twelfth century. An Augustinian priory, St. Mary's Overie, on the south bank at London Bridge, catered for people who walked to London and found the bridge closed for the night. The priory gave hospitality to those in need, for some their last journey, dying under the care of the 'hospitaller'.

The work of the priory, founded in 1105, continues today at Southwark Cathedral and St Thomas' Hospital, named for St. Thomas Becket. Henry VIII abolished it in the mid-sixteenth century as part of the abolition of the monasteries, together with Bart's and Christ's hospitals, Blackfriars and Charterhouse. Under Edward VI, St. Thomas' was re-founded, minus its fabulous monastic wealth; and only granted the name for St Thomas the Apostle. From more recent times, the name of the murdered Archbishop has been included, 'St. Thomas' referring to both.

Considerable change has occurred since the sixteenth century, and from the later Anglican establishment where all prospective Nightingale nurses had to be interviewed by the chaplain before being offered a place! We now have a large multi-faith team coming from the Pentecostal, Roman Catholic, Anglican and Free Churches, Jewish and Muslim Communities, Buddhists and Hindus. They are from three African and four Asian countries, the United Kingdom and Ireland. Some fifteen languages are spoken, and we have links with the Orthodox as well as inter-faith networks.

We are a training team, teaching the chaplains of all faiths to work together. They need a robust faith, theologically under-girded, and we help them to put that into practice with difficult spiritual and ethical issues, accepting our differences. The aim is to discuss and to recognise human and spiritual needs.

Chaplaincy work is new to many, including patients. I have had conversations with, for example, a young Muslim who asked me what is a chaplain, or a priest, or even a church. Many times a Christian or Muslim or Hindu parent, sitting anxiously at a child's bedside, has asked a blessing from me, "You, woman of God, you bless baby please."

Here at Guy's and St Thomas' the hospitals have about nine thousand staff and approximately one million patient contacts annually - a lot of people. Not all need a chaplain but we see around six to eight thousand patients a year as well as visitors and staff; about twenty per cent of my own work is with the latter. We are also chaplains to the London Fire Brigade.

Our work is not complicated but it can be amazingly draining. Spiritual care, talking about pain, fears, doubts, body image, suffering, 'why me?', ethics, relationships, God, churchgoing, sin, these things all come up in time spent with individuals. Then there are religious rites, - over fifty emergency baptisms a year, anointing, holy communion (thirty to sixty a week), a wedding rarely, final prayers and viewing of loved ones, over a hundred funerals annually. We are heavily engaged in cultural care - liaising with family members and faith communities on various subjects, from photos or noise to religious versus medical diets; and also 'ethical' subjects, like organ donation, withdrawal of care, termination of pregnancy, assisted conception, transplant, and so on.

Less than fifty per cent of our patients are 'local'; many are referred from all over the country or the world as St Thomas' has so many specialities. Or there are accidents: a shopper knocked down, a runner collapsed, a tourist who had a heart attack, a young person knifed; or a baby born with heart problems in Wales is rushed to our special unit. All bring their related personal problems: a newly retired American executive sits by his wife's bedside as their dream trip to Europe fades into a nightmare, a young Muslim may have married a Roman Catholic, neither family approving, so moved to London. One collapses and it is round a deathbed that the families meet for the first time, united in grief, worried about the children and wondering what type of final prayers or funeral would be appropriate. Should they call the Imam or the Roman Catholic priest? Or should they ask for an Anglican, as someone in the middle? It has happened to me on several occasions.

Chaplains have to be trauma specialists, trauma defined as whatever gives the patient real difficulty in coping. Health care staff have to deal with some alarmingly difficult situations and may need to off-load onto someone like me before going back to work. Or someone may be so angry about an event that they need to get away to talk and pray before returning to the fray. I have the greatest respect for those who work in the emergency services, and consider it a real privilege to work alongside them.

Anglicans and Franciscans seem particularly well-suited to hospital chaplaincy, both ecclesiastically and theologically. Anglicans, with varying emphases and practices, can adapt in a respectful and dignified way to suit different wishes, a robust model for chaplaincy; and I find having a Franciscan rule fits, with its rhythm of worship, communion, prayer, study and service. It keeps me going through the difficulties in the hospital or with the fire-fighters. This daily re-fuelling by the Holy Spirit is vital for survival in such a stress-filled environment.

It is truly wonderful to see God's hand at work, to feel we walk where Christ is, looking for signs of the kingdom and never becoming inured to pain and suffering or complacent of human need. I hope I may never stop knowing the privilege of giving holy communion, praying at a sickbed or saying the final prayers as someone leaves this life to go to glory. Such things are too wonderful for me, and yet God-in-Christ draws me close to him daily through such encounters, and I am profoundly grateful for the honour. *f*

*Mia Hilborn is a priest and a member of the Third Order, married to David. They have two children.*