

Pastoral Theology and Care 9.24.15

Fishbowl/Discussion

- You will find a copy of the transcript for our exercise on the Canvas Course Page in the Lectures and Links section.
- After hearing the transcript read aloud:
 - Where do you see elements of the caring relationship in the conversation?
 - What responses seem to fit and where do you feel yourself wanting to change a word, a phrase, or a response?
 - What questions would you want to ask the caregiver in this instance?

Introductions

- Name
- Religious/Philosophical Tradition
- A brief story about a time when you felt cared for by another person
- One hope or expectation for the course

Questions/Discussion

- What do we need to revisit from last week?

Agenda

1. Introduction to the course (9/23)
2. Questions from the previous week (9/23)
3. Questions from the previous week (9/23)
4. Questions from the previous week (9/23)
5. Questions from the previous week (9/23)
6. Questions from the previous week (9/23)
7. Questions from the previous week (9/23)
8. Questions from the previous week (9/23)
9. Questions from the previous week (9/23)
10. Questions from the previous week (9/23)

The Elements of Care

Briefly, I would describe them as:

- Empathy
- Empowerment
- Relationship
- Openness

Empathy

Probably the hardest and yet most important ability of a caregiver is that of empathy. It is in that empathy differs from sympathy, because it is that an empathic caregiver becomes emotionally present in order to recognize and open connection to another's hidden boundaries.

Caregivers describe empathy as:

- Caregivers take the perspective of the other person.
- Caregivers recognize emotions because we can affect.
- Caregivers are emotional regulation in order to not be overwhelmed by the other's emotional state or their own affective response. (Dorothy B. Johnson, 2008, p. 54)

The most important ability for a caregiver is that of empathy. It is in that empathy differs from sympathy, because it is that an empathic caregiver becomes emotionally present in order to recognize and open connection to another's hidden boundaries.



Relationship and Openness

Relationship
• We'll talk about this more in the coming weeks as they relate to ideas about boundaries in healthy relationships and personal responsibility. In order to understand the nature of the systemic nature of what is in front of us today, as we open our thinking for what the role is the systemic nature of systems, violence, and power and how that might impact the person who seeks care.

Openness
• About this, Carole writes:
• The promise of care begins when caregivers enter into the care seeker's story-making with a sense of wonder. We are humbly opening ourselves up to the mystery of life itself. (p. 18)
• How caregivers see us open to the mystery of their own life and how we are open to the mystery of theirs. Though something seems familiar, the story is always new and fresh. How are we open to the mystery of their story in the face of overwhelming reality and how are we open to the people who tell people to tell the very stories that impact them in the living world?
• To be open is to realize that no matter how familiar the details, actions, or actions of a narrative, there is always something new to be heard or discovered in the hearing.

Empowerment

For me, empowerment was not the matter we have been discussing. From my religious tradition, I see the might of that of what is the dignity and worth of humanity. Taken together, these form a powerful bridge of how we see to relate to one another, and form a beginning point of power in relationship rather than domination and control.

Relationship (1) the ability to be actively open and affected by the world around us (2) the ability to create ourselves out of empowerment to help of healing. Some other ways of thinking about empowerment in relationship are:

- **Person that empowers:** A person who helps of thinking about empowerment in relationship are: we people as people and not people as problems.
- **Active listening:** we will talk more about this in the coming weeks. In a nutshell, it is how to do with being able to reflect what someone is saying with a mirror.
- **My personal experience:** I am currently working with a person who is experiencing and/or feeling what they are.

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Agenda

- I. Introduction of new tasks to 3.4.20
- II. Questions from the previous week (re-
thinking of anthropology assignments)
- III. Quiz (week 3.4.1)
- IV. The elements of care (2.2.48)
- V. Read (2.4.1)
- VI. Fieldwork seminar and discussion (3.4.20)
- VII. Video: Design (3.4.2)
- VIII. Photo/Groupwork/Design (3.4.2)

The Elements of Care

Briefly, I would describe them as:
 Friendly

- Empathy
- Empowerment
- Relationship
- Openness

Empowerment

[illegible]

Robert E. Rasmussen, a prominent epidemiologist, has written a book titled *How the World Works* (2010). In this book, he argues that the world is not as we see it, but as it is. He argues that the world is a complex system of interconnected parts, and that we must understand the system as a whole, rather than as a collection of isolated parts. He argues that the world is a complex system of interconnected parts, and that we must understand the system as a whole, rather than as a collection of isolated parts.

Empathy

It is likely the hardest and yet most important ability of a caregiver is that of empathy. Hard in that empathy differs from sympathy; important in that, without empathy, compassion becomes difficult, power is harder to manage, and open connection to another is harder to maintain.

Curie does not empathize as

- Caregivers take the perspective of the other person
 - Caregivers vicariously experience the care recipient's affect
 - Caregivers act emotion regulation in order to not be overwhelmed by the other's emotional state or their own affective response (Derry & Johnson, 2003, p. 54)
- The most people empathize takes two basic forms: cognitive concern prompting disinterested help and empathic distress prompting desires to withdraw. Emotional regulation plays an important role in how people react to empathic experiences" (p. 83)



Agenda

- I. Introductions of new students (1-1:20)
- II. Questions from the previous week (ie - theological anthropology, assignments, etc.)
- III. Quick break (1:45)
- IV. The elements of care (~2-2:45)
- V. Break (2:45)
- VI. Fishbowl exercise and discussion (3:00)
- VII. Verbatim Groups (3:30)
- VIII. Break/Compassion Groups (4:15)

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Empathy

Probably the hardest and yet most important ability of a caregiver is that of empathy. Hard in that empathy differs from sympathy; important in that without empathy, compassion becomes difficulty, power is harder to manage, and open connection to another is harder to envision.

Carrie describes empathy as:

- Caregivers take the perspective of the other person
- Caregivers vicariously experience the care seeker's affect
- Caregivers use emotion regulation in order to not be overwhelmed by the other's emotional state or their own affective response. (Decety & Jackson, 2006, p. 54)

For most people empathy takes two basic forms: empathic concern prompting desires to help and empathic distress prompting desires to withdraw. Emotional regulation plays an important role in how people react to empathic experiences." (p. 81)



Empowerment

For me, empowerment ties into the reasons we form care-giving relationships. From my religious tradition, I see the care-giving relationship as being tied to our understanding of the "love ethic" (love of God, neighbor, and self, UUAs might think of this as the dignity and worth of humanity). Taken together these form a powerful image of how we are to relate to one another, and frames a beginning sense of power as relational rather than coercive or unilateral.

Robert Mesle, a process philosopher, described relational power as:

(1) the ability to be actively open to and affected by the world around us; (2) the ability to create ourselves out of what we have taken in; and (3) the ability to influence those around us by having first been affected by them (Process Relational Philosophy, 2008, p. 73).

Doehring mentions healing and justice as two key goals of a care-giving relationship and these are often aligned with empowering ways of relating. Some other ways of thinking about empowerment in relationships are:

- **Person-first language** (ie. - A person suffering from depression, rather than a depressed person); this enables us to see people as people and not people as problems.
- **Active listening** - we will talk more about this in the coming weeks. In a nutshell it has to do with being able to reflect what someone is saying with a minimal interpretive/intuitive point added to the statement.
- **My personal favorites are stupidity and curiosity.** We can't know what someone is experiencing and/or feeling related to an experience, we can only ask what it is like for them to live through it and be open to their lives and what they see.

Relationship and Openness

Relationships

- We'll talk about this more in the coming weeks as they relate to ideas about boundaries (or healthy relationships) and personal/experiential limits we need to attend to in spiritual care settings.
- What is important to attend to today, as we spark our thinking for down the road is the systemic nature of oppression, violence, and power and how that might impact the person who seeks our care.
- It's good to be in relationship with the person who calls upon us to care; it is equally important to see the systemic roots of the crises that cause the need for care and to do something about that as well.

Openness

About this, Carrie writes:

- The process of care begins when caregivers enter into the care seeker's story-making with a sense of wonder, awe, and humility, opening themselves up to the mystery of life narratives. (p. 9)
- How as caregivers, are we open to the mystery of the narratives before us; how are we open to the belief that even though something seems familiar, the story is always new and fresh; how are we open to the surprising resiliency of humanity in the face of overwhelming odds; and, how are we open to the simple ways that people resist the very stories that impact them in life-limiting ways?
- To be open is to realize that no matter how familiar the details, actors, action of a narrative, there is always something new to heard or discovered in its hearing.



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Agenda

- I. Introduction of new tasks to 3.4.20
- II. Questions from the previous week (continuation of anthropology assignments)
- III. Quiz (test) (3.4.1)
- IV. The elements of care (2.2.46)
- V. Test (2.4.5)
- VI. Feedback seminar and discussion (3.4.6)
- VII. Verbalize Design (3.4.2)
- VIII. Final Group presentation (3.4.1)

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Empowerment

[illegible][illegible]

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