

REFLECTIONS ON CHAPLAINCY IN A HOSPICE: 1977-2001.

TEMPORA MUTANTUR, NOS ET MUTAMUR IN ILLIS.

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Abstract: In this personal and open reflection the author reflects on the part-time beginnings of his chaplaincy. He goes on to describe the challenge of bringing a 'Church' to understand the depth and variety of chaplaincy, and how educating students for the ministry of different Christian denominations was a natural and rewarding development. With grace the author describes his own personal journey of change in regard to his understanding of ecumenism, God, life and death.

When all these years ago I was asked if I was interested in a part-time chaplaincy at St Columba's Hospice in Edinburgh, I was, as I remember, both intrigued and dismayed. I had never been a Hospital Chaplain, although I had been a minister for almost twenty years and felt reasonably at ease visiting all sorts of wards, and I was not very sure what this new institution was. It was going to be the first St Christopher's type Hospice in Scotland, it was in the North of the city, and the Medical Director was a former missionary and GP, who had been a few years senior to me at school. I had been involved in the Scottish Pastoral Association and had some inkling of the ethos of pastoral care, and I suppose I was looking for a challenge. The leaders of my congregation sounded doubtful at first, when I asked their permission to apply. That is until the senior deacon pointed out that this would be a prestigious position in the city, and hinted at reflected glory for the church. As it happened, his brother in law had been the Medical Director of the Royal Infirmary of Edinburgh and was a Vice President and leading medical supporter of the hospice. Somehow all opposition melted away! I soon discovered that there were many, both doctors and ministers, who were and who remained very doubtful about the concept of a hospice, and I have usually appreciated friendly and pointed criticism over the years.

When, in early December 1977, the doors were opened and the first patient awaited, we were warned that no doctor might want to use our facilities, and that the supply of money, much of it donated through churches, might soon evaporate. We really did set out in faith, or at least the Directors

and Governors did. But the patients came, and in a few years the old house became offices and a new nursing wing was built. Since then there have been many building developments and it is hard to remember how big the garden once was, and how we managed without custom-built units and a lecture hall and all the things we take for granted. In 23 years there have been many physical changes and enlargements and as I look back I am aware of subtle spiritual and social changes too.

There was a definite Christian ethos in the planning and beginning of St Columba's. Our founder, the formidable Anne Weatherill, was deeply influenced by her Anglo-Catholic outlook, and had not envisaged that the stipendiary Chaplain would be, or could be, a Baptist minister. She found it hard to let her new creation go, and was, I think only gradually reconciled to the emerging secular institution that 'her' Hospice became. But it is largely to her that St Columba's owes the centrality of its chapel and its chaplaincy. She raised a Chapel Fund, and furnished us with a wonderful selection of holy objects and garments some of which even Episcopalians found unfamiliar! From the beginning the Chaplaincy sought to reflect the three main branches of the Church in Scotland, Catholic, Episcopalian and Protestant. Over the years there have been a variety of local clergy and lay volunteers in the team, and I hope we at least learned to tolerate our differences. Most of the time we worked harmoniously together, with a little give-and-take here and there, but sometimes there were quite strenuous interdenominational arguments. Bishops and the Cardinal were even involved when a Catholic Chaplain requested a

sanctuary light, and the Episcopalians thought they should have one too. The lay governors confessed themselves shocked and baffled that we could not always act easily and comfortably together. Yet occasional attempts to celebrate the Eucharist at least in the same place and at the same time were not entirely successful, and were nicely subverted when staff sat in the wrong section of the chapel, refusing to be corralled by denomination.

I realised how different the expectation and the reality of Hospice chaplaincy could be when I was invited, a few years into post, to address a committee of our own denominational leaders. Our wise and knowledgeable Secretary wrote to me afterwards to express his surprise at the variety of work done, and in particular the high place given to education. I think I was seen as the person who holds the hands of the dying and perhaps conducts funerals. And of course those, at least the first, were central to the work. Patients come first, and their families a close second. Much of my time was spent in listening, comforting, befriending, sometimes informing, and puzzling over the variety of spiritual needs and hopes and fears. The spiritual care of patients has remained a constant in Hospice work. Sometimes it consisted in one brief encounter, an unanswered question, a request for a prayer, a stumbled confession. At other times, because over the years the Hospice has had a much longer relationship with some patients, it became a real pastoral tie, with the patient, her family and often friends and neighbours too.

If I had to choose which aspect of the work gave me most satisfaction, it would be teaching and mentoring students for the ministry. I have taught various subjects in the Scottish Baptist College over the last 40 years, and although I sometimes found responses strange, at least we were all in the same little, self-consciously evangelical and bible based churches. At St Columba's, and in the associated teaching at New College, I found myself confronted with women and men called to minister in widely different theological and social settings. I learnt a great deal from those who chose, or were sent, on placement. Despite our often quite different theological and ecclesiological approaches, there was a core of Christian belief and commitment that we could respect in one another. Some who came in the early days are now quite senior in their churches, and occasionally I hear from men or women who feel that

their experience with the dying helped form their ministry.

I had to learn about the differences in training methods and aims in the various churches. I think I took it for granted that Catholic priests were trained in a different format from Free Church of Scotland ministers, but over the years I had to explain quite often to doctors and Nurse tutors, that there was no uniform syllabus, that colleges in each denomination might act quite separately in pastoral training, and that there was really nothing I could do about it. A National Syllabus for training clergy in the care of the dying was not a possibility! This became obvious in two ways. When Gillis College was in Edinburgh, a student was placed with me each year, and I think I was the only non-Catholic Pastoral Host. This meant that I had to take an imaginative leap into the world of Seminarians and priests for which my upbringing in Charlotte Baptist Chapel had scarcely fitted me. But I was asked to do it each year and I hope I learnt to respect the outlook and ethos of Scottish Catholicism.

The other opening to ecumenical understanding came in the Pastoral Studies' Course, which I helped to run for 20 years. Originally it was designed for the requirements of the Church of England, and most of our students in the first years were Anglicans, but over time it broadened to include Scottish and Polish Catholics, Church of Scotland, Methodist, Baptist, Free Church of Scotland, United Reformed and assorted others. In the course are lectures on many aspects of dying and bereavement, with an increasing emphasis on communication, reflection and understanding the human condition. There has been useful cross-fertilisation with Nursing Studies. Opportunities have been given for contact with patients and in the last few years, volunteers and staff. There has been lots of space for personal discussion, and since it is usually timed during the Edinburgh festival, for some culture as well. Participants have reacted in many different ways, and most have been very positive, and gone home to recommend the course in their colleges.

Since I am a native of Edinburgh it has been inevitable that my friends and family have been around. Some of the volunteers I had known since I was a child, and that was usually supportive. But sometimes I met patients whom I had known years before. This could be comforting for them, but quite

heart-rending for me. It was a privilege to sit with old friends of my parents, but death was coming a bit too close to me. Then cousins and contemporaries came in and I watched with them and their families. And then my own wife. I had told students that there was a difference between caring for strangers who became swiftly friends and caring for 'one's own', but it took hard experience to teach me the truth of that. Then I discovered what caring colleagues meant, and I was nursed back into some sort of spiritual health, and enabled to continue.

So how has Hospice Chaplaincy changed me? It has taken away certainties about the boundaries of salvation. I had grown up with a very definite set of beliefs about the new birth, conversion, and the gap between the 'real' believer and the nominal Christian. In the Hospice I met patients who were inarticulate about their faith yet showed a true trust in God. I met a few who were very talkative about their faith and were terrified to die. I worked with staff who were sacrificial in their care for patients and quite dismissive of organised religion. I hope that I have grown in tolerance, appreciation and in an understanding of those whose experience has been so different from mine.

For many years I had been involved with inter-church councils of various kinds, and had taken part in many debates. Now I discovered how little denominational distinctives mattered in the face of imminent death. Very occasionally I was enabled to look beyond the Christian fence into the faith of other religions. I listened to Jewish people, I made friends with a Jehovah's Witness and we stopped trying to convert each other, I was asked to pray with a Moslem, and I learnt a lot from agnostics and from that vast number of Scots whose affiliation is Protestant (no church). I do not believe that I was given the gift of an evangelist, which can make a

Baptist minister feel dangerously deprived, and at the Hospice I did not have to worry about numbers at the services –or indeed about fabric and finance.

This work has also affected the way I think about death and life after death. I heard Richard Holloway say that he never thought about the after-life, and he was applauded. I find this strange. The mystery of dying prompts a desire to imagine what happens next, to discover what the great religions have taught. It gives a certain piquancy to the preaching of the resurrection, and adds an urgency to the Christian hope. Death has always fascinated humankind, and easy answers about heaven and hell do not satisfy me any more. I have learnt about bereavement, loneliness and loss, and I hope become more sensitive to the long grief of others.

And the Hospice- how has it changed? It has grown and offers more services to more people for a longer time. It has shed much of its amateurism without losing the services of its many volunteers- but now they sign contracts and undergo training. It has become more professional and instead of learning on the job, more recent members of staff have been expected to have previous experience of palliative care and certificates to prove it. Treatments have changed, but cancer has not been conquered. The Hospice has grown in the estimation of Edinburgh people; and- although one is not supposed to say this too loudly- it has become quite financially stable. But still in the middle of the building complex is the beautiful chapel, looking over the Forth to Fife, and still worship is offered daily, with communion every Sunday, and still it is a place of compassion and love, as well as research and learning.

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