

Eutop

An Evangelical Urban Training Project

"CHRISTIANS CARING FOR THEIR NEIGHBOURS"

Ten Sessions of Pastoral Care and Relationships

General Description of Course.

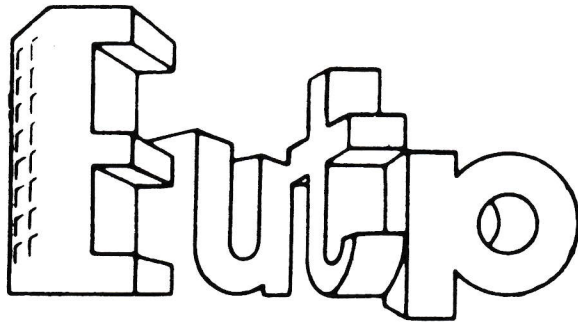
Most Christians would want to be able to befriend their neighbours and to offer their support and care in a way which is helpful, accepting and unjudging. Yet, although pastoral care is at the heart of Gospel life it is not a 'natural skill'. Jesus trained his disciples for three years and they in turn had to work slowly and patiently to show their unruly followers the seriousness and difficulty of Christian love.

We cannot leave pastoral care to ministers and social workers. All Christians are involved in caring relationships of some sort and this course has been designed for them. It's teaching methods have these features:-

People learn in groups.
There is no written work.
There is no reading or list of recommended books.
People unlock their own experiences and learn through them.

This course can help any group of Christians, women or men to learn to care pastorally for others. It can be used to train a group to visit people referred to, or who come in contact with, the minister. It should not be limited to this. Churches need to be aware of how to encourage their members to be alert to the needs of their neighbours and to respond to them reliably.





Evangelical Urban Training Project

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CHAIRMAN:
PETER HALL,
BISHOP OF WOOLWICH
CHARITY No: T32239Z

I enclose the Pastoral Care Course. This letter contains the standard points sent to all people who ask for it.

1. We are keen to get opinions about the course, so any you have would be welcome.
2. Could you tell me if you use the course or if your church does so? It would be so helpful to know the ages, sex and educational background of the group using the course. A leader would be helped if maintaining an attendance record and diary of the course followed by a report at the end.
3. I would also like to know the outcome of the course. Valerie Black has purposely left this open-ended, but the course demands a high level of contact between the carer and the person cared for; and a high quality of administration of the group. It would help us assess the course if we knew how a group will tackle these two issues.
4. We recommend that a church running a pastoral care group retains a professional adviser [session 10 note 6]. If your church wants to use the course and is having difficulty in locating an adviser please contact E.U.T.P.
5. If you would like any guidance in running course please also contact E.U.T.P.

PROJECT OFFICER: J. F. HART, B.A., DIP. T.P., D.H.M., M.I.H.

"Pastoral Care and Relationships"

Notes to Trainer

1. The notes in inverted commas are information or instructions to share with the group. You may need to use your own words but please do your best to stick close to what has been written.
2. The notes in italics are instructions to you. Do not share these with the group unless you are directed to do so.
3. Timing The expected length of each exercise is given in brackets. This is only a guide but you will be unable to go through all of your material if you allow too much extra time.
4. Course outline for members Photocopy one for each member. It is important that they know clearly the overall contents of the course.

VALERIE BLACK

Valerie Black was converted in a mission in Bootle at the age of 16. She embarked on a typical career of Bible-studies, prayer-meetings and witness team. She married an Anglican Clergyman and almost her entire life has been spent in Bootle and Liverpool. Valerie Black says...



"After the birth of my third child, when I was in my thirties, I had a serious breakdown. Caring friends said, 'Think of the kids!' and I couldn't. Others said, 'Ask the Holy Spirit to heal you!' and He didn't. That made me feel that I wasn't a Christian. Others said, 'Christians don't get depressed!' and I was.

I was treated by a psychiatrist and as I got better I started to feel back in touch with God. When I went back to the Womens' Group I taught that depression is an illness like measles. It is not something to be ashamed of. I began to study counselling so that I could help people who got depressed. I found that I needed to learn not only about others, but myself as well.

I did the three-year course of the Clinical Theology Association and followed it by training with them as a tutor in counselling. I taught with the Association for four years.

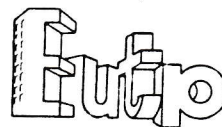
I teach counselling with Compass - a Merseyside-based caring organisation, and have counselled in my own name for ten years. I have had up to fifteen clients at a time but at present have only four. I found out that if I overload myself I cannot do a good job. This is also an area which I share in this course.

My concern has been that the course I teach takes two years. If ordinary pastoral care was given early enough, many people wouldn't need such qualified counsellors at a later stage. As family units and neighbourhoods are increasingly broken-down I feel that the role of the Church as a caring centre becomes more and more important.

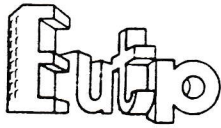
I was especially helped in preparing this course by the advice of the Reverend Oliver Horrocks and Miles Parkinson. I also want to thank Jim Hart without whose pushing, enthusiasm, and encouragement this course would never have been finished."

"CHRISTIANS CARING FOR THEIR NEIGHBOURS"

COURSE OUTLINE FOR MEMBERS



1. Introducing the course.
'Levels of Relationships.'
 2. Communication
How we hear and how we respond. Do we listen accurately?
Do we interpret what we hear accurately? Are our responses to what we hear relevant and helpful?
 3. Depression
What is it? How can we help the depressed person?
 4. Caring for yourself
We cannot help others if we neglect ourselves. Do we understand our own problems? Who gives us our pastoral care? Do we have enough leisure?
 5. 'The Ages of Man'
How does a child, a teenager, a young parent, a middle-aged person, an old person, see the world? How do they see you? What happens at different ages. When are the crisis points?
 6. Bereavement
How to support a person after someone very close to them had died.
 7. Distance, touch and 'What is not said'
The effects of distance on how we relate. How much distance should there be between my chair and yours? When should we touch another person? How do we keep close to someone who is not saying anything?
 8. Who, when, how much time, keeping feet on the ground.
Who and how many people do I care for? When do I give them time and how much? How do I help them keep their feet on the ground and a sense of proportion?
 9. 'Phasing Out' and Supervision
How do you end a caring relationship?
Who supervises the members?
How can they get help from each other?
 10. Organising a pastoral care group in a church
How do I keep confidences which are given to me?
Who refers people to our group?
From where do we get expert help when we need it?
- Open Forum
Course members share their thinking about the course.
What helped? What hindered?
Any questions?



SESSION 1 - INTRODUCING THE COURSE

LEVELS OF RELATIONSHIP

INTRODUCING THE COURSE

(1/4 hour)

1. "I firstly want to tell you what pastoral care is, what it is not and what it tries to achieve. Pastoral care aims to enable people to be responsible for themselves, cope with their lives, thoughts and feelings, and make decisions. They want someone to accept them, hear them and give them loving attention and support. You are helping them explore and feel and to stay with them till they can sort out their own problems or difficulties.

2. Here are three things you are not learning to do:-

(a) You are not 'advising' or 'telling' someone what to do.

Most people do not want advice even when they ask for it. If you accept, hear, stick with, and care about them, they will make their own decisions and do their own growing.

(b) You are not learning to do advisory work.

This has its place in pastoral care by making available the necessary facts and knowing the places and people to whom to apply for specific help. You may have to set aside someone who will 'keep-up' on such things as C.A.B., Social Security, housing, etc. That is usually called 'Welfare Rights' work and is not what 'pastoral care' is about. We can't expect to be experts in all the fields we might be asked about.

(c) You are not learning to deal with serious mental or psychological problems.

This is a matter of judgement but you must refer serious problems to a professional psychiatrist, social worker or counsellor."

3. *You might want to write-up these three headings on the board or overhead projector to reinforce what you have said and to make sure that your group understands clearly the scope of this pastoral care course and the difference between pastoral care and advice-giving. Invite questions and discussion on this introduction before going on.*

LEVELS OF RELATIONSHIP

4. AIM:- *To show different levels in different situations the need for you to know what level to offer. How does the person to whom you offer pastoral care know what you are offering? What helps and what hinders.*

5. (a) *The group spends the rest of the session doing three exercises going through different levels of relationships.*

-Chatting

-Listening or being listened to

-Expressing deep feelings and staying with deep feelings in another person.

(b) You should not tell the group the purpose of these exercises in advance. They will, hopefully, work them out for themselves as the course proceeds. These exercises help the group to distinguish between one-to-one group relationships. They also show that some people will find even casual levels of relationships difficult.

(c) You should be on the look-out for strong feeling being expressed as the exercises proceed - e.g. tears, shaking, etc. Treat them by acceptance and calm caring. 'It is O.K. to cry - take your time.' We must learn to stay with tears and not try to stop the person crying, run away, or offer a cup of tea. After the person has stopped crying, and has had the chance to talk it through and absorb what it's been about, then tea, and chat is the right level!

EXERCISE ONE

(20 minutes)

6. " I want you to form pairs and chat for five minutes finding out from each other:-

- (i) 'What is your hobby?' or 'What would you like to do with spare time if you had any?'
- (ii) What famous person, living or dead would you like to meet? (not Jesus).
- (iii) What is your favourite colour?
- (iv) What is your favourite T.V. or radio programme? "

(It is best to write up the questions on the board.)

" Any things that you share are private. When you are with the main group you may only refer to methods or to personal queries unless, of course, your partner chooses to reveal his/her information to the group."

7. BRING PEOPLE BACK INTO MAIN GROUP FOR OPENING DISCUSSION

(a) Encourage people to comment on the experience.

How did it feel?

Was it good or bad experience?

Do you notice any difference in the way you feel towards your partner now?

Whatever anyone says is valid, acceptable and can be used.

Examples: 'I don't have radio or T.V.' Right. How do you feel about that?

'I never listen or watch - I've no time.' Mmm. Are you glad or sad about that - perhaps its not important to you?

(b) Help the members to see their relationships across the group by possible questions like:-

'Is anyone willing to tell us which colour they chose?'

'Did anyone else choose this colour?'

(c) End this part by asking when this sort of level of one-to-one might be used.

EXERCISE TWO

(35 minutes)

8. "Will you please divide into the same pairs. One listens to the other for seven minutes. Then change roles and repeat the exercise for another seven minutes. When you are the person 'listening' you can only speak to encourage the talker to keep exploring the experience and feelings. You can repeat back the talker's words, or say 'Mmm?', but you may not say 'I know just what that feels like,' or relate your own similar experience. Don't ask questions beginning 'Why?' Use open questions e.g. 'How does that feel to you?' Rather than closed questions like 'Did you feel angry about it?'

Each talker will explore either -

'What my day has been like.' or
'Any fresh experience of the last week'

The talker will decide whether to speak about something 'light and fun' or something 'heavy and hurting.' The listener must stick to that level, like glue! "

9. BRING PEOPLE BACK INTO THE MAIN GROUP FOR OPEN DISCUSSION

Encourage people to comment on the experience.

*How did it feel?
Was it a good or bad experience?
Was it different to the first chat, and if so, how?
Do you notice any difference in the way you feel towards your partner now?*

Whatever anyone says is valid, acceptable and can be used.

End this part by asking -

'What did you find the most difficult - to talk or to listen?'

EXERCISE THREE

(45 minutes)

10. "Will you please divide into the same pairs? One of you should listen to the other for ten minutes. You then change roles and repeat the exercise for another ten minutes."

Each talker will talk about 'LOSS' at whatever level you choose. (it is your time after all.) It could be a lost book, five-pence down the grid, or the death of a close friend or relative. "

11. BRING PEOPLE BACK INTO THE MAIN GROUP FOR OPEN DISCUSSION

Encourage people to comment on the experience.

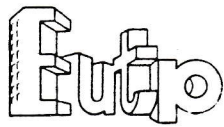
*How did it feel?
Was it a good or bad experience?
Do you notice any difference in the way you feel towards your partner now?*

Whatever anyone says is valid, acceptable and can be used.

END OF SESSION

12. You are aiming to end this session with the group being aware of

- (a) The different attitudes they need to cope with the different levels of relationships.
- (b) Situations they might find themselves in.
- (c) What is going on NOW.



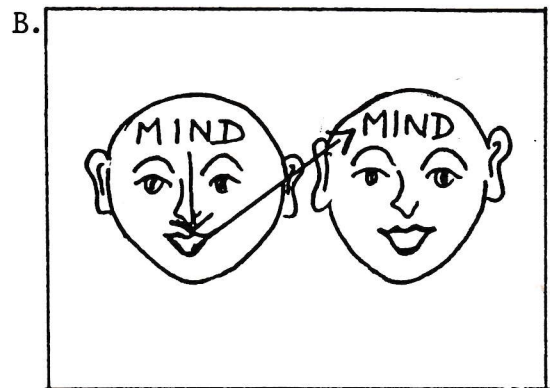
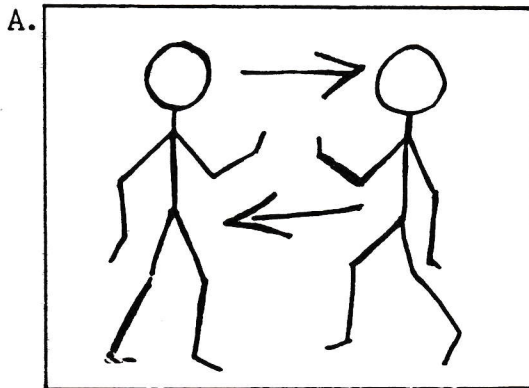
SESSION 2 - COMMUNICATION

HOW WE HEAR. HOW WE RESPOND

INTRODUCTION

(1/4 hour)

1. [For this session you need two simple drawings. They should be quite large, perhaps three by two feet, because you will be writing words on them. They should be available clipped to a board. Have a felt-tip pen ready.]



2. "The aim of this session is to start to open our eyes to how we communicate. Are we giving and receiving the right messages? Firstly, can you tell me any ways in which we communicate with one another?"

3. Use Drawing A and as the ways are offered write them up on it. The answers you are aiming at are the six senses:-

Hearing
Speech
Sight
Smell
Touch

Sixth sense of feeling or awareness.

4. "Ideas form in your mind or brain and are sent to your mouth. Your mouth gives the ideas to your friend's ear. Your friend's ear passes the ideas to her brain, perfectly simple! My mind has thought of the word 'table'. What does the word 'table' mean in your minds? Could you describe your table?"

Depending on the size of the group, ask all, or about six what their table looks like. You will have a wide variety of response. Then tell them what your table looks like.

"The aim of this is to make people aware that even with a very simple word we may get the wrong picture of what the person speaking is actually meaning. When we listen we have to pay very careful attention to what is actually said. Unless we are very sure we must not use words of our own. We must try to stick to their words as near as possible."

EXERCISE

[1 hour]

5. (a) Ask the group to divide into pairs - different pairs from those which formed during the previous session.
- (b) One person talks for twenty minutes and the other listens.
- (c) They then reverse roles: the other person talks for 20 minutes while the first talker listens.
- (d) The subject is - 'someone I feel who doesn't understand me' - If there are problems with this the second choice is - 'Someone who really does understand me.'
6. " You must aim to pay very careful attention to what is actually said - rather than what you think was said. You should only speak when your partner has stopped. Then you can say back to her what you heard her say. Remember - if you are in any doubt do not fill in your own words. Stick to the words she has used.
7. Everything you share together is private. When you are with the main group you may only refer to methods or to personal queries. You can, of course, reveal your own information to the group if you wish. Under no circumstances can you reveal anything which your partner has shared with you.
8. The time is the talker's. She decides the level - whether to speak about something 'light and fun' or something 'heavy and hurting.' You must stick to that level like glue! ")
9. You must keep time and tell them when to change over and when the second twenty minutes is finished. Give a little leeway to tidy up - especially if someone has been feeling a lot.
- Open group discussion. This will vary with the group and what its members have experienced. They may need time to talk it through.
10. " I can't teach you this. The only way you will learn is being honest with one another. Did you feel that you were heard? What helped? What hindered? Did you find listening to someone for such a long time tiring? ")

11. ROLE PLAY

[3/4 to 1 hour]

" I now want four volunteers to take part in a little play. You don't have to fit the part, or be yourself in any way. A man could play a woman's part or vice-versa. ")

Ask who is going to volunteer and then wait. Eventually someone will agree to take a part and others will follow. Read the role descriptions out and also print them on post-cards for the volunteers to refer to during the play.

JOE

You have just been made redundant for the second time. You feel very distressed and worried. Your uppermost feeling is that you don't want to tell your wife Dolly. You desperately need to talk. Who can you turn to? Ah, yes! You go to them in this order:-

Mrs. Brown
Mr. Boothroyd
Mrs. Stanley

MRS. CAPABILITY-BROWN

You are competent, capable and you know just what to do in every circumstance. You cope with Christmas Fayres, battered wives, difficult council officials or bossy school teachers. No problem not dealt with!

You are very busy, in a hurry authoritative and full of advice.

You get rid of Joe as quickly as possible but you will deal with it! Don't worry! These firms don't have the right!

MR. BEEN-THRO-IT-ALL-
BOOTHROYD

"I've been made redundant myself. I know what it's like. There's not a thing you can do. I've never been the same man since. I don't know how to help you. There's no jobs to be had."

You enthusiastically welcome Joe. You feel most sympathetic. You talk away about all the problems you faced and how awful it had been.

MRS. STICK-WITH-IT
STANLEY

You are a busy housewife making the tea. You go to the door and see Joe's distress and decide you can give him a good half-hour if you throw the mince in the oven. Tell him to sit down while you sort out your pans. You then sit down to concentrate - you don't take time up making cups of tea. You offer no advice but just listen and do your best to get him to talk about his feelings. You stick as best as you can to what he offers. At the right moment you draw his attention to the fact that time is running out.

"We won't have much longer on our own. My husband will be home soon. You're welcome to stay, but Dolly will be expecting you home soon too. You will have to tell her sometime you know. Do you feel any more ready to face that?"

*After the role-play,
the main group re-forms.*

Thank each volunteer by name and emphasise to them and to the group that they are back to their normal selves and have left their

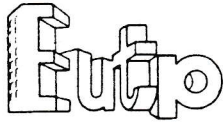
roles behind. It is important not to leave people a bit out of touch with themselves - and who they are!

DISCUSSION

12. *Try to encourage the group to explore the play themselves and bring their own bits to it. Questions to ask include:- How well or badly did each volunteer stick to his role?*

Could they have played the parts differently?

What you are hoping to be able to show at the end is that each volunteer had some good things to offer but two of them did not hear what had really brought Joe to them at that moment. - his problems of his present feelings and that he couldn't face his wife. Hopefully Mrs. Stanley did hear. ASK - 'Was there anything that Mrs. Stanley might have done differently or better?



SESSION 3 - DEPRESSION

1. AIM:- To show the value of counselling for depression. To make people aware of how much they know already. To show a little of what depression feels like, and what are helpful things to do.
2. “ We are considering depression early in the course because you have probably come across it, and because basic caring is a very valuable offering. Any of these situations may have elements of depression:-

Home stresses
Bereavement
Job - loss
Wrong or difficult relationships
Marital breakdown
Teenagers' problems - on both
parents' and child's parts.
Overwork
Underwork
Illness
Old age
'Shut-ins'
Young mums with babies
Long-ago buried experiences
Loneliness. ”

DISCUSSION

3. You are aiming to show how much the group already knows. The group should sit in a circle if possible. You will need a large sheet of paper pinned up and a bright, clear felt-tip pen.
4. “ I am giving you one word - 'Depression.' What words or feelings are springing to mind? ”
5. Write in single words on the sheet, all that is offered. You can expect to have a wide variety of response and many extremes such as -
overcheerful - miserable
over-eating - under-eating
no energy - excessive energy
can't wake - can't sleep
weariness, tunnels, pits, dreams.
anxiety, black, tears
lack of concentration
apathy, anger, despair
worthless - no value - guilt.

Encourage discussion.

TRAINER'S COMMENTS TO GROUP

6. “ Depression is 'de-pressing,' - the pushing down of feelings which the person finds unacceptable or unbearable. They may do this consciously or subconsciously. They may express their distress by immobility or there may be much weeping when their control is snapping. Anger can be turned on to the self as disgust, etc., and at rock-bottom - suicide. Suicide can also result from weary, hopeless despair. ”

7. " Here are some helpful hints for dealing with depression:-

(a) Should, oughts and 'pull yourself together' are OUT.

(b) Make contact at a friendly, accepting level. Patient and prolonged listening - often a long job - is the main way to help. When the person feels that you really care and accept him he may begin to expose the real problem. As you accept the problem he can begin to come to terms with it himself.

(c) Have a relaxed manner.

(d) Let the person talk at his own pace and in his own way.

(e) Allow him to ^{state} his case against life and encourage him to express this. Accept the feelings which come, which might be - longing, anger, fear, despair, tears, envy, lust.

(f) He might show conflict, confusion and mixed-feelings, especially where he has strong feelings about someone. He may express love and hate for the same person. You must reassure him that this is normal and possible.

(g) If you think that there is any possibility of the person wishing to commit suicide ask him whether it has ever crossed his mind. You must always take this seriously and get help if necessary. Do not take risks.

(h) However, this must not cause you to break confidence. Encourage the person to seek help himself or seek his permission for you to seek help for him.

(i) Always ask the person whether he is being advised or treated for depression by his doctor. If he is, ask him to tell the doctor that he is seeing you. "

You may find it helpful to write up summaries of these 'hints' on a board, or for an overhead projector, to help your group remember them. Have discussion and invite questions as you go through them to ensure that they are being heard.

EXERCISE ONE

(3/4 hour)

8. Please form pairs and spend twenty minutes each talking about 'When I feel depressed.'

GROUP DISCUSSION

(20 minutes)

9. " Let us discuss that exercise bearing in mind some of the things we learnt in the previous sessions.

(a) Did you listen and give back the same or similar words? You should not have said things like 'I know just what that feels like,' and then related some experience of your own.

(b) Did you use 'open' questions and not 'closed' questions? An example of an open question is 'How do you feel?' An example of a 'closed' question is - 'Do you feel depressed?'

(c) Were you aware of the feelings in the other person?

(d) Remember what I said several times on the first session about keeping confidences. You may only refer now to methods, or to your own queries on feelings. You may not tell us anything personal that you were told. You can, of course, reveal your own information to the group. "

Refer to your course outlines when you prepare this.

Session 1 - paragraph 6.

Session 2 - paragraphs 6 and 7.

EXERCISE TWO

(1/2 hour)

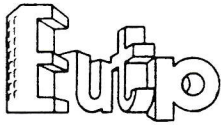
10. " Please return to your pairs and spend 15 minutes each talking about - 'being with a depressed person makes me feel....'. The aim of this is to show what we have to cope with in ourselves if we are to stay with someone who is depressed. "

GROUP DISCUSSION

11. *You want the group to -*

Understand the difficulty of staying with tears and depression.

Acknowledge the person's feelings and cope with them. Face the question - 'How do I stay with someone who offends me? Or who hurts where I hurt?'



SESSION 4 - CARING FOR YOURSELF

'LOVING YOURSELF AS YOUR NEIGHBOUR'

DISCUSSION ONE

(10 - 15 minutes)

1. " You will probably remember from last time just what it costs us emotionally to stay close to someone who is depressed, angry or hurting. I want to encourage you today to think about the questions, - 'Why might I need caring for?' "
2. *Invite discussion of this question. You are looking for three reasons:-*
 - (a) *If I am to care for and understand other people, I must understand myself and be cared-for so that I know what it feels like.*
 - (b) *I must be able to deal with my own feelings so that they don't get in the way when I am with someone else.*
 - (c) *Giving and receiving mutual support and comfort should be a part of ordinary living.*

DISCUSSION TWO

(5 - 10 minutes)

3. " A keen, committed man - always giving, always working, often extremely tired - says 'I find I know what to do for people because I do for them what I desperately need myself and hardly ever receive.' "
4. *Invite discussion of this man's situation. You are aiming to illustrate two dangers -*
 - (a) *His own needs stop him seeing the other's need.*
 - (b) *He is giving because he feels 'driven to it' and not because he cares freely for other people.*

EXERCISE ONE

(1/2 hour)

5. " I want you to form pairs, A and B.
A looks at B and says - 'Who are you?'
B replies - 'I am.....' - whatever he or she wishes to say in a word or short sentence.
A looks at B and says - 'Thank you. who are you?'
B replies with the same words as before or another statement about himself.
A looks at B and says - 'Thank you, who are you?'
This goes on until B decides to say - 'Stop! I don't want to go on!'
B should then share with A how he felt doing this. What does the person that he has just said that he is need to help him be and do.
You should then change roles. Stay in the role and don't chat. If you are listening, do that as carefully as possible.' "

EXERCISE TWO

[3/4 - hour]

6. You need a large sheet of plain white paper for each person and wax crayons (or felt-tip pens), with a wide range of colours. Get several of each colour if possible. It may be useful to have pieces of cardboard for people to rest the paper on.

“ Please take a sheet of paper each and pick a crayon whose colour feels most like where you are emotionally right now. Draw a picture of yourself on the paper - not with arms and legs but whatever springs to mind which represents you. ”

After ten minutes for the group to draw their picture ask them to form two's or threes to talk about their pictures.

“ Would each of you talk about your own picture? You can offer any explanation or interpretation of it.

If you are listening you may not comment until the 'artist' has finished. You can comment on how the picture strikes you but you may not offer any interpretation.

For example you might say things like - 'Your pictures seems small compared to the sheet of paper,'

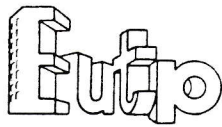
You may not say - 'do you think this means.....?' or, 'I think that this is your father,'..... or whatever! ”

FINAL DISCUSSION

[10 minutes]

7. Come together to chat through the exercises and to think about - 'How has it felt to have someone else care about who you are?'

Conclude - “ We have not had time to consider the need for leisure! We will 'make time' in one of the sessions towards the end of the course. ”



SESSION 5

THE AGES OF MAN

[Prepare the following chart before the session. You can make a hand-out for each person or you can write the chart on the board. In this outline the chart is given in two forms. The first is for the class, and the second is for you - giving you examples and explanations to help your presentation. You should not give this fuller version to the class because it will overload them. Also people often treat a list of examples as a total explanation, and not as examples to trigger their minds.]

STAGES OF DEVELOPMENT	AGE (YEARS)	GROWTH WORK BEING DONE		PEOPLE MOST INVOLVED
		THIS	VERSUS THIS	
Infancy	0 - 2	Trust	Mistrust	Me and one other person (usually Mother).
Early Childhood	2 - 4	Autonomy	Shame and doubt	Parental Persons
Play Age	5 - 7	Initiative	Guilt	Basic Family
School Age	6 - 12	Industry	Inferiority	Neighbourhood School
Adolescence	13 - 19	Identity	Mixed-up Identity	Peer group
Young Adulthood	20 - 30	Intimacy	Isolation	Partnership
Adulthood	30 - 65	Creative Living	Self Absorbtion	Divided Labour Shared Household
Old Age	65 +	Integrity	Despair	Mankind is My Kind

Predominant Aspects of General Development according to Freud, Erikson and Piaget. Adapted from Gordon R. Lowe, 'The Growth of Personality' Penguin Pelican 1972

INTRODUCTION

30 minutes

Although we are not learning to be high-powered Counsellors it does help us to know if something went wrong at a certain stage. If we can understand something about this, we can get clues about where and when the person's present problems developed. There are three areas of growth-

- Physical
- Psychological
- Social

These are continuously changing throughout our lives. Will you first spend a quarter of an hour absorbing and thinking about the chart and we'll then discuss it.

During discussion the group will probably challenge the age-limits of the stages. You should help them to see that these are only generalisations, because we are all different. With different people each stage might take a different time. But - the stages must happen if growth is to occur.

Because we cannot cover every aspect of this vast area this session outline now offers two alternatives for your group to follow and you can choose the one which is most helpful to your needs.

ALTERNATIVE "A" - ADOLESCENCE

EXERCISE ONE

20 minutes

Tell the group - 'Here is the word 'adolescence.' What springs to your minds?' Write-up the words on the board - all are acceptable. You should build up a picture with many different aspects - opposites, confusions, worries about the self and others the need for commitment to the peer-group (or not as the case may be!)

EXERCISE TWO - ROLE PLAY

1hr. 15 minutes

" Would you now work in pairs and spend half-an-hour each in these roles:-

Talker - You are to become your own parent chatting to a close and trusted friend about your own teenage child (yourself). Describe what it's like being your own parent, how you cope and what the problems are.

Listener - You are the 'Close and trusted friend.' "

The group discusses the exercise together at the end. The exercise is long so that the speakers can get to the real issues. Encourage the pairs to struggle to stay with it.

EXERCISE THREE - ROLE PLAY

15 - 20 minutes

Now you are all teenagers in your group. Talk together about what life is like now for you all. Remember always that most teenagers need their peer-group very much.

ALTERNATIVE "B" - OLD AGE

EXERCISE ONE

1 hrs. 15 minutes

Tell the group - "Here are the words, 'Old Age.' What springs to your minds?" Write up all offerings on the board - all are acceptable. Issues, will usually arise naturally. Use the time to the full - talking and sharing.

EXERCISE TWO - ROLE PLAY

1hr. 15 minutes

Would you now work in pairs and spend half-an-hour each in one of these roles:-

'My family have put me in this home.'

'I live with my child and their children in
a very small house.'

'I live alone.'

When you change over, your partner need not choose the same role. Stick to the role as closely as possible and try to explore the feelings and emotions involved.

*The group discusses the exercise together at the end.
The exercise is long so that the speakers can get to the real issues.
Encourage the pairs to struggle to stay with it.)*

EXERCISE THREE - ROLE PLAY

20 minutes

EITHER - Now you are all old people sitting in the communal lounge of your old peoples' home. Chat among yourselves for twenty minutes.

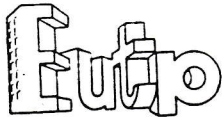
OR - Now you are all old people who have come to the church-hall for your weekly lunch. Chat among yourselves for twenty minutes.

You as leader, should choose which of these to use. Have a short discussion after the role-play, if possible.

EXAMPLES AND EXPLANATIONS TO THE TABLE

STAGES OF DEVELOPMENT	AGE (YEARS)	GROWTH WORK BEING DONE		PEOPLE MOST INVOLVED
		THIS	VERSUS THIS	
INFANCY	0 - 2	<u>TRUST</u> Child is fed and loved. He is shown dignity and respect.	<u>MISTRUST</u> Child is mistreated. People are not safe. He is emotionally deprived. These attitudes may persist throughout his life if they are not dealt with.	<u>Me</u> - 'I am a separate person.' <u>One person</u> - This is usually the mother. In early stages child may think - 'I my mother am.'
EARLY CHILDHOOD	2 - 4	<u>AUTONOMY</u> <u>Self-reliance</u> - 'I can walk myself.' 'I can explore.' <u>Self-control</u> . 'I can eat when I want to. I don't eat when I don't want to' etc.	<u>SHAME & DOUBT</u> I am told I'm bad naughty, etc. I'm frightened to leave mum's skirt. I'm no good.	<u>PARENTAL PERSONS</u> I am looking for another parental figure. I am looking for a male and a female figure.
PLAY AGE	5 - 7	<u>INITIATIVE</u> 'I want to learn. Life is good.' Exploration - outward movement towards life.	<u>GUILT</u> If it goes wrong it's my fault.	<u>BASIC FAMILY</u> All sorts of combinations. Grandparents may be important.
SCHOOL AGE	6 - 12	<u>INDUSTRY</u> 'I enjoy working hard.'	<u>INFERIORITY</u> I can't do it. What's the point of trying? I'm no good anyway.	<u>NEIGHBOURHOOD</u> <u>SCHOOL</u> Children often now introduced to these at 3 years.
ADOLESCENCE	13 - 19	<u>IDENTITY</u> 'I know who I am.' Adolescent child recaps previous stages and sorts out 'left-overs' or 'unfinished business.' I can look hopefully forward.	<u>MIXED-UP IDENTITY</u> It is not clear who I am. I mistrust myself and others. I don't know what I'm about and I don't know what life is about. ----- The adolescent is left with the attitudes not dealt with at previous stages. These may be guilt, inferiority, shame, doubt, or mistrust.	<u>PEER-GROUP</u> 'My own age-group matters most.' <u>Therefore</u> - there could be difficulties with parents at the possibility of conflicts.

STAGES OF DEVELOPMENT	AGE (YEARS)	GROWTH WORK BEING DONE		PEOPLE MOST INVOLVED
		THIS	VERSUS THIS	
YOUNG ADULTHOOD	20 - 30	<u>INTIMACY</u> I enjoy others and can be close to them.	<u>ISOLATION</u> I doubt myself and others. 'One therefore keeps one's distance.'	<u>PARTNERSHIP</u> Marriage/Co-habiting. Doing things together. Close Relationships.
ADULTHOOD	30-65	<u>CREATIVE-LIVING</u> I get on with living. I enjoy life. I relate well to others. People offer me things and I offer them things. I am a supporter - of older people - of younger people I am broad-shouldered. I can cope.	<u>SELF-ABSORPTION</u> I have confusion or doubts about myself or others. I am still dealing with the left-overs from growing-up. - unfinished business. I have little space for others.	<u>DIVIDED LABOUR</u> <u>SHARED HOUSEHOLD.</u> We share the work.
OLD AGE	65 +	<u>INTEGRITY</u> What I appear to be - I am. Life is good. People are O.K. I can be trusted	<u>DESPAIR</u> Hopeless. The past was no good. No future. The present is bad.	<u>MANKIND IS</u> <u>MY KIND</u>



SESSION 6 - BEREAVEMENT

'HOW TO SUPPORT A PERSON AFTER SOMEONE VERY CLOSE TO THEM HAS DIED'

INTRODUCTION

“ 'Bereavement' and 'depression' are the heaviest topics on this training course. You may yourself feel upset or depressed, or feel that these sessions are hard work. Bereavement is a universal experience for mankind. We have all lost someone or something at some time and the subject often brings strong feelings to the surface in you as well as in the person you are caring for. When someone is bereaved they need warm acceptance and acceptance at all stages. Sustained caring is needed more than with most other problems. While in many other caring jobs you can expect some movement, bereaved people are often unable to move or ask for any help. The carer will often have to take the initiative and visit regularly, especially during the first six months. Your visits should be less frequent as the need becomes less. ”

EXERCISE ONE

(3/4 hour)

“ Please work in pairs. One of you should spend 15 minutes trying to be someone you know who has been bereaved. You should try to get into her skin you should try to sit like her, speak like her and say the things she might say..

The other of you should try to stay with your partner's assumed situation. You should not try to move her into or out of feelings but should encourage whatever level she offers. By now you have done a lot of this work and I want you to stretch your approach to offer 'tuning' words which try to convey to your partner that you are aware of any feelings of which she becomes aware.

After the 15 minutes are up reverse roles. ”

DISCUSSION.

Remind the group of the rules of confidentiality. These are given in Session 1, paragraph 6. They are stressed repeatedly during the course because keeping confidences is an essential requirement for the pastoral carer and must be strongly re-inforced in your group's thinking as the course proceeds.

You are aiming from the discussion to make people aware of how different the experiences of bereavement are, and of the problems which crop up.

- (a) *Some of us need to cry and feel how dreadful it is and express it.*
- (b) *Some of us show little or no emotion and say that we are coping well and don't feel very much at all. We are probably feeling the pain so much that we unconsciously cut-off.*
- (c) *Reinforce the need for 'acceptance' - it is wrong to try to stop tears or feelings. It is equally wrong to try to push someone into tears and feelings too soon, before they are ready.*

EXERCISE TWO

[1- hour]

Divide the group into threes or fours. Hand out photo-copies of the sheet - 'Bereavement - what may be expected at different stages.' Give them time to read it and absorb the information. Invite questions to clarify anything they don't understand.

" I am going to give you three questions, or statements, at ten-minute intervals. Your threesome (or foursome) should decide together the 'best' and the 'worst' response. "

At the end of each ten minutes the offerings are given to the main group and discussed. It should become clear how easy it is to give the worst responses and how hard it is to give the best response.

The three questions or statements are:-

'I can't believe it's happened!'

'Why has this happened to me?'

'I feel I don't know who I am any more!'

ROLE PLAY

(1/2 hour)

Mrs. Crawford was a pillar of the church - Mothers' Union rummage sales, prayer meetings and so on. She was always at the church. Her husband was very stay-at-home, and never went to church.

Six months ago Mrs. Crawford went on a church outing. There was no hall or shelter and when it poured with rain she got soaked to the skin. She caught pneumonia and died two weeks later.

The young Curate has been asked to visit Mr. Crawford. No one from the church has visited him in the meantime."

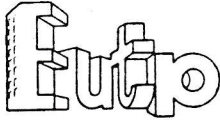
ROLES: Mr. Crawford
The Curate

Invite volunteers to enact the curate's visit to Mr. Crawford. When the play is finished, get the group to consider what went well and what badly. Did the curate do the right job? Is the door open for another visit? If there is time and there has been a lot of criticism ask for two more volunteers to enact the role-play again.

BEREAVEMENT- WHAT MAY BE EXPECTED AT DIFFERENT STAGES

The times given are averages of very wide ranges. Most bereavements take at least a year and some up to two years.

<u>DEATH TO TWO WEEKS</u>		
<u>SHOCK</u>	<u>NUMBNESS</u>	<u>DENIAL</u> Nightmares - like 'the person was buried alive.' I can hear his voice, breathing etc., Talking to the lost person. Talking to photographs.
<u>ONE TO THREE MONTHS</u>		
<u>YEARNING</u>	<u>SEARCHING IN MANY DIFFERENT WAYS</u>	<u>ANXIETY</u>
<p><u>ANGER</u> Possibly with self. Possibly with deceased Possibly with others. May be real anger at legitimate problem, e.g. at driver who runs a child over. May be without reason or imagined.</p>	<p><u>Examples</u> Looking for photographs. Going through cupboards. Window shopping. (These are really searches for the lost person.)</p>	<p><u>Examples</u> Tension. - Will the insurance money cover everything? I'll never be able to cope by myself. Will I have to get a job? Will my friends want to know me now? How will the neighbours cope with me after losing a child?</p>
<p><u>ANGER AS DEFENCE AGAINST PAIN</u> The pain is so bad that I get angry with people for no reason. I can cope with anger better than pain. 'I don't like it if they do. I don't like it if they don't.'</p>	<p><u>REAL GUILT</u> 'I never went near her for twenty years'. <u>IMAGINED GUILT</u> 'If I'd have done enough she'd have been alive today.' This is often said by a person who served the dead person devotedly.</p>	
<u>LONELINESS</u>	<u>DIFFICULTY IN MAKING DECISIONS</u>	<u>STRESSFUL FIRSTS</u> The first birthday. The first Christmas The first wedding anniversary etc.
<u>EIGHT TO NINE MONTHS</u>		
<u>DEPRESSION</u>	<u>APATHY</u>	<u>LOSS OF IDENTITY</u>
<p><u>MITIGATION</u> The severity is lessened The pain is more easily borne. Emotions are worked through, Stress is eased.</p>		<p>Who is the new me? I was a wife: I'm now a widow. I was a son: I'm now an orphan. I was once a father: Now I have no child.</p>
<u>ONE TO TWO YEARS</u>		
<u>MITIGATION</u> These processes continue.	<u>ACCEPTANCE</u>	<u>HEALING</u>



SESSION 7 - DISTANCE, TOUCH AND

'WHAT IS NOT SAID'

“ So far we have concentrated on the spoken word, but many of our communications are unspoken. We must, therefore, be aware of the messages which we give without words and which the people we want to care for give to us without words - using our other senses! ”

EXERCISE ONE

45 minutes

Form the group into a circle. Write on the board these words and statements:-

" I AM NOT SURE HOW MUCH I WANT TO BELONG TO THIS DISCUSSION."	DESPAIR
" I DONT TRUST YOU"	TENSION
DEPRESSION	ENTHUSIASM
ANGER	ANXIETY
FEAR	HAPPINESS
	DETERMINATION

“ I want each of you (or six or eight volunteers from a large group) to choose one of these statements or words. Without moving from your chair and without using any words, I want you to take turns to show the group which one you have chosen. The group will guess what you are expressing. ”

If by the end some words have been chosen more than once explain to the group how some states are more easily displayed than others. If some words have not been used at all, encourage the group to think about how we might express them. Look at any offerings from the group.

CONCLUSION

“ We need to look for clues to peoples' unspoken messages so that you can be more sensitive to them and their feelings. It may not be right to put these unspoken messages into 'bald words.' Often words say one thing and the body another. If you have found the exercise difficult it could be that you need to sharpen your awareness of non-verbal communication. ”

EXERCISE TWO

30 minutes

“Work in pairs and spend ten minutes each telling the other - 'I am the clothes I am wearing.' ”

Back into main group discussion

EXERCISE THREE

40 minutes

Confine a fairly small space with chairs and furniture. The size will depend upon the number of people in your group.

“I want you to walk about - mill about - within this space in silence for four or five minutes. Be aware of how you feel about getting near to or far away from other people. ”

(4 - 5 minutes)

“Now form pairs and take ten minutes each to tell the other what had happened and what it felt like. When you are listening you should begin two yards away from the talker and should slowly move your chair nearer until your knees actually touch the talker. Then you should back off enough to turn sideways and look away from the talker. Finally turn your chair round so that you face away from the talker. Throughout these moves the talker should try to keep talking. ”

Group Discussion: These exercises aim to show that the wrong distance between you and the person you are caring for will hinder the relationship. You will also hinder it if you withdraw your attention partly or wholly. Different distances are appropriate at different times or with different people, and it is important to try to be sensitive, if you are to get them right.

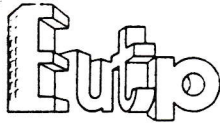
EXERCISE FOUR

15-20 minutes

“Work in trusted pairs. Hold one or both hands, as feels right to you both. Without breaking the hold talk for five minutes each about what you feel about touching and being touched. ”

Reform group for discussion. Remember that you will get a lot of different responses to this exercise.

Tell the group finally: “A most helpful check is to ask yourself, 'Why am I touching?' You should touch the other person if it comforts her, if it encourages the flow or if it gives her a life-line to hang on to. It is not right to touch the person if it stops her feelings, shushes her feelings away; or because you need to touch. ”



SESSION 8 - WHO, WHEN, HOW MUCH TIME, KEEPING FEET ON THE GROUND.

INTRODUCTION

5 minutes

“ We are concerned in this session with 'nuts and bolts' but we must not lose the emphasis of being with another person in a helpful and caring way. Let us focus on two words:-

Boundaries:- between me and the person I am caring for.

Grounding :- I must keep my feet on the ground, and will not be swamped by all the material and feelings of the person I am caring about. ”

DISCUSSION ON 'BOUNDARIES'

1 hour

Divide the group into threes or fours. In a very large group divide into fives - at the most. Ask each sub-group to choose a 'jotter' to note very briefly what the group says.

“ In your sub-groups discuss these issues :-

- what problems of time and place do you think will crop up in your pastoral caring?
- How much time would you expect to give someone?
- Where do you think you would meet the person?
- What ways can you think of to resolve difficulties. ”

Give them 20 minutes for this discussion. If they need longer extend the time by ten minutes. Reform the whole group.

Firstly - Ask each 'jotter' to report (very briefly)

Secondly - Ask the 'jotter's' sub-group if it wants to add anything (very briefly)

Thirdly - Open a general discussion, lasting for about half-an-hour.

NOTES ON THE DISCUSSION

Your group will have its own emphases on what it regards as important. Try to ensure that all of the following issues emerge in the discussion -

- (a) A good pastoral-care session will last from one to 1½ hours. After that time energy and concentration flag, and the session becomes rambling and not very useful.
- (b) A good, useful, working or supportive session may be as short as half-an-hour.

- (c) *They should compare various meeting arrangements and think about the problems and benefits involved:-*

By appointment at a neutral place e.g. a church hall.

At the home of the carer by appointment.

At the home of the carer casually.

At the home of the person being cared for.

- (d) *How do they set boundaries upon the time they spend with the person?*
- (e) *There is a real danger that the carer's time and home can become 'invaded' if he does not begin as he means to go on.*

EXERCISE ON 'GROUNDING'

1 hour

“ I want you to imagine a 'bog' into which someone has fallen and feels he is sinking. There are two ways that you could respond as a carer. - You could leap in alongside him and say, 'Oh, I know just how you feel! Isn't it terrible?'

- You could stand at the edge, stretch out your hand and say, 'I can see your distress. My feet are on solid ground. Here is my hand. Take hold and between us we will try to put your feet on solid ground.'

Will you now work in pairs, choosing a partner who was not in your sub-group for the first discussion? Take it in turns to spend twenty minutes each talking about - 'The thing which most frightens me or overwhelms me.' ”

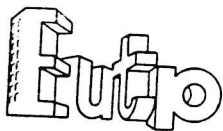
Reform whole group after the exercise and talk through the things that helped and those that hindered. The group should analyse what questions helped the person to get a clearer picture and the ones that stopped him moving forward.

In this discussion the points on which to concentrate are:-

- (a) *Did the listener listen to what was said and respond as she thought right, keeping in mind all the things she has learned so far during the course.*
- (b) *Did she try to help the person get a clearer picture. If she used a general phrase like 'Everything is frightening' she should have helped him to narrow the field down by saying perhaps 'could you give a particular instance?' Had he responded with 'Nobody cares or understands.' She might then have asked - 'Could you talk about how one particular person doesn't understand you?'*

In this way the listener isolates one strand of the confusion and could then talk about this one only - concentrating on it and exploring it. The talker should try not to go on to other strands. The person being cared for may refer to others when the carer meets him next time.

- (c) *Was the listener aware of how she responded to silence (an issue we referred to last time.) Did she allow silence or did it panic her into talking? Did she know what was happening during a silence? Was it 'dead' or 'living?' It is not good to leave somebody trapped in an embarrassed silence.*
- (d) *Did the listener feel that she was being swamped by the person's material?*



SESSION 9 - 'PHASING OUT'

AND SUPERVISION.

PHASING OUT

“ We thought last time about how much time was needed for a session. Now we want to think about how we end our caring role.

It is usually easy to end one session - it has probably been arranged like that and the person will not expect any more.

There are also long-term commitments to an elderly person or a shut-in person, whom you visit regularly. These visits usually continue until the person moves home or dies; or where the person makes it clear that he doesn't want any more visits.

The situations which can cause difficulties are those where the carer is helping someone with problems over quite a long time. When you feel that no purpose would be served by further visits and want to call a halt, discuss with the person that you think your visits may be coming to an end and ask him how he feels about it - leaving the door open. You must remember that the longer you have been seeing someone, the longer he needs to prepare for the finish. You must give him the opportunity to tell you how he feels about visits ending - especially in some cases after a year or more. ”

EXERCISE ONE - SOLE PLAY

45 minutes

Read out these role descriptions and also print them on post-cards for the volunteers to refer to during the play. Ask for two volunteers who will sit as they would in the actual situation.

MRS. JESSIE JOHNSON

You have been in real difficulties with your family for a while. Your teenage son, Jim, has been charged with shop-lifting. Margaret, 13, has been missing school.

The baby is driving you crackers. He is a 2 year-old toddler and you said that at one point you felt like battering him.

MRS. ROSE REILLY

You have supported Jessie and have visited her regularly. Jim is now on probation and is fairly settled. Margaret is now going to school regularly again. You have persuaded her to send baby George to the nursery for three hours each day. You have taken four months of visits to help Jessie make progress on all of these problems.

You now want to talk to her about whether she still needs your visits. You want to point out that they will have to stop at some point.

The two volunteers continue in their roles for about 20 minutes and the whole group then discusses the play for twenty minutes. If they do not themselves do so, raise the following questions:-

Was the decision made, right for both women?

Did Jessie express her feelings honestly about the visits of Rose finishing?

Did Rose hear Jessie's real feelings and take them seriously?

Will the visits end naturally, at the right time, and in the right way?

If not - what would get in the way?

EXERCISE TWO

1hr. 15 minutes

“ Will you please form pairs and work for twenty minutes each and then change round?

The talker discusses -

'What time do I have for leisure and how do I feel about my leisure time?'

'As a carer trying to do the job, how do I think I might be cared for?'

When you are listening you should concentrate on -

'Am I giving my partner enough time to think and feel?'

'How am I coping with my silences?' ”

Bring the group together again and discuss for about half-an-hour,

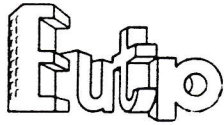
What would the pairs like to bring to the main group from their exercise?

How would the group actually intend to support one another in the task which lies ahead?

“ This exercise opens up for us the practical issues of organising and being part of a pastoral care group, issues which we will continue with next week. ”

Make personal notes of the issues raised by this discussion:-

- (a) If peoples' expectations are not realistic gently point out any needs which are unlikely to be met.*
- (b) Some members of your group will, themselves, want watching very carefully if they say - or imply without saying - that they do not want or need supervision. They may view supervision as 'someone checking-up on what I do.'*
- (c) Some members may be very nervous and will need careful support in their caring work.*
- (d) Some people who take the course might be quite unsuited to pastoral caring, and you should be ready to advise them about this.*



SESSION 10 - ORGANISING A PASTORAL
CARE GROUP IN A CHURCH.

OPEN FORUM

“ This is the last session of this course and we now want to decide how we are going to organise ourselves as a pastoral-care group. We could decide that there are areas in which we need further training before we begin.”

These notes are to guide the discussion but your group will need to agree on decisions about each point which will have to be formally recorded and circulated. Simple but good administration is essential to good caring. Without it the carers may let the people being cared for down.

1. Are we ready to start our group?

Has the course helped our preparation enough?
In what areas would we like more training?
Who could give us this training?
Are there other areas which we would have liked to have covered?
Can we provide further training after our group has begun to work?
What has been unhelpful or unclear?

2. What can each member do? (Encourage honesty especially here)

What sort of caring do I think that I could do?
What could I definitely not do?
What could I definitely not cope with?
How much time do I intend to give?
How many people can I care for at once?

3. Who refers people in need to us?

Many referrals will come via deaths, baptisms, Sunday Schools or requests for help - the usual referrals to churches.

If the group becomes established and known to be competent, other community agencies may refer people to it or requests might be made directly.

NOTE: We are not considering contacts made from door-to-door visiting or casually-accepted caring tasks. These pose different problems.

4. How will our group be run?

Each member must feel answerable to the group; she is not simply pleasing herself.

Who refers people to members of the group?

How does a carer decide where and how often to meet the person referred to her?

The group will need a secretary to keep records of its meetings and decisions, and the case-loads of its members.

How often will the group meet?

5. How do we keep peoples' confidences?

During the course we have stressed that any things people share in the exercises are private and can only be revealed by the person himself, whose information it is.

A carer may deal with someone's most intimate affairs and these must be kept private. Case-discussions in the group may not, therefore, be possible because the carer cannot share the information with the group. Betraying confidences is very easy and can be done by accident or without the person even being aware of it.

Discussion - How do we betray confidences?

How can we guard against betraying confidences?

How can I get help and support about someone I am caring for without giving her information away?

6. Expert help

Your pastoral care group should probably seek an expert counsellor to advise it on a formal basis - perhaps monthly. She would probably need to be paid a fee. She would work with the group as a whole and also help members individually with any difficulties they are having. A carer could discuss her clients' personal situations with the expert counsellor without betraying confidences.

7. Looking-after the carers.

Refer back to final discussion of previous session.

When should a man be alone with a woman in a building, say a church hall?

Will a client physically threaten a carer?

What personal supports will be provided for each carer?