

VISITATION: THE MOST SACRED TIME ¹

1. First Things First: Visitation is being the Presence of Christ

Ultimately, when you visit someone in the hospital or at home or in a care facility, the important thing isn't what you say or do but the fact that you are there; this is a ministry of presence.

- Enjoy your time. There is much to learn.
- Look for ways a patient or family member ministers to you.
- Hospital and home visitation are not really so different from the rest of the life of the church community. We love and serve one another, confident that when we gather in Christ's name, he is there among us. May this be so for you in deacon ministry and beyond.

Discussion Questions

1. What is the most difficult challenge you face when visiting?
What helps you overcome that challenge?
2. As we minister what is not satisfactory, what changes would you suggest?

2. Beginning

Visiting—going to the home or bedside of people who are cut off from the church's fellowship by age, medical condition, mental illness, or other reasons—is one of the most meaningful and important ways the church can show compassion and love. It is also one of the most straightforward ways to serve. It requires no in-depth theological knowledge, one needs no particular skills or talents, and there is no cost. Still, many are nervous about visiting the homebound or sick.

This is normal, understandable, and maybe even appropriate. When we go out as pastors, elders, deacons, or in any other role—we might even say, “When we go out as Christians”—we represent Christ and the church, and this is quite important. But it is God who has called us to this task, and God will certainly equip us for it.

3. Jesus: The Foundation and Example

From the earliest days of its being, the church has been concerned with caring for those within the fellowship with particular need or illness. The need to care for society's most powerless is the Christian call to compassion so none in the community would be neglected.

And even before there was a church, there was Jesus. Jesus' care for the sick was one of his activities that drew the attention (and sometimes the ire) of the people. He reached out in compassion to society's outcasts—like those suffering from leprosy (Mark 1:40–45)—and to others whom the “holy” people wouldn't normally touch—like the woman with a hemorrhage (Mark 5:25–34). He served any who were sick, from the servants of military figures (Matt. 8:5–13) and religious leaders (Mark 5:35–43) to the nameless masses at Galilee (Mark 6:53–56) to a Gentile woman from a foreign land (Mark 7:24–30). His willingness to show this compassion on the Sabbath—that is, without regard for his own reputation or the legalistic concerns of others—gave rise to some of the first accusations against him.

Even without Jesus' miraculous power to heal at our fingertips, we can still model his compassion for those who are suffering. Jesus seemed to recognize that physical illness was not only a condition of one's body but also in many cases a barrier to true fellowship. Sickness, especially extended illness that can isolate a person from his or her community, becomes not just a medical problem but also a spiritual one.

Caring for the sick was the hallmark of Jesus' ministry and should be a hallmark of ours, as well. This isn't just pastor work; it is the work of any who would follow Jesus. And while visiting those who are confined to their homes or to a hospital room is not a cure for every spiritual problem, **it is part of a person's healing**. It is also a fitting presentation of the gospel for that person's context: the good news for them, here and now, is to know that the body of Christ is with them in whatever they are facing.

4. Some Practical Help

Deacons are called upon to do the intimate work of visiting people whom they do not know very well. Here are a few simple steps that might help on the first few visits. With a little practice, you will establish your own patterns and routines.

The suggestions in this study are not intended to be a checklist or a set of restrictions. Indeed, local customs or hospital rules may make some of these suggestions inappropriate for your context. Rather, they are just some thoughts to help you get started.

a. Preparation for Visiting:

- **Pray** for the sick daily. Make prayer for those who are homebound or hospitalized a regular part of your daily discipline. If you will be in a long-term visiting relationship, include this person specifically in your prayers.
- **Call** before you go to someone's private home. Tell the person that you are visiting on behalf of the church and want to come see how they are doing and spend a few minutes with them. (**Try to avoid saying things like "I've been assigned to visit you" or "You're one of my shut-ins."**) Setting up a time may require some firmness: They might tell you not to go to any trouble. Politely assure them that you really want to come. "I know I don't *have* to do that, but I *want* to. Would Tuesday afternoon at 3:00 be all right?" If you do not know the person, try to talk first with someone who does know them to find out if there is anything that might be helpful for you to know.
- **For hospital visits**, you may want to call first. Most hospitals will generally tell you what room a patient is in by calling their information number. They will also connect you to the patient's room. My personal preference, if I'm fairly confident they will be there (and that I won't be interrupting anything), is to go without talking to the patient beforehand. (It avoids the "I'm fine—don't go to the trouble" response.)

b. Visiting the Homebound Person

- **Before you arrive, pray.** Do not omit this step; it really makes all the difference! Ask God specifically to give you the words to say, to be present with you throughout the visit, and to use you to bring light and love to the person you are visiting. (I often pray before I leave, on the way in the car, and while walking to the front door.) **Visiting is a lot easier if you remember that God is right there with you, helping you, and prayer reminds us that this is the case.**
- **Be a good houseguest.** To whatever extent they are physically able; let them serve you when they offer (getting you a cup of coffee, for example). This might be one of a very few opportunities to feel they are serving and not being served.
- **Ask** them to tell you what's been going on in their lives or about their families. Often they will want to tell stories from the past. Talk about what is going on at the church. Be yourself! If they have difficulty remembering things, just listen patiently, assuring them it's okay if they cannot remember.
- **Physical touch** can be very important, within boundaries. Shake their hand or give them a hug when you arrive, if it is appropriate. Touch can be especially important during prayer.
- **Bring them something from the church.** It is not essential, but you may want to. If you know you are going later that week, take a Sunday bulletin or two. Bring a CD recording of a recent service ordered through John Baker, take a quilt or a shawl..
- **“You are missed.”** You can tell them **they are missed** at church. Tell them you would love to see them there, but be careful not to make it sound like the church is upset that they're not showing up. If transportation is an issue, tell them you will look into getting them a ride, if they would like.
- **The church is thinking about them and cares for them.** Always remind them that **the church is thinking about them and cares for them** and ask if there is anything the church can be doing for them. Don't promise (or try) to do these things yourself, but talk with others about how particular needs can be met. See if there are particular prayer concerns the church can be praying for and ask if these concerns can be added to our Prayer Chain via Debbi Roldan at 6drrar@gmail.com.

- **Pray** with the person before you go. Nothing could be more important. (See “Prayer” below.) The home visit doesn’t need to be long and probably not longer than a half hour. Close by telling them how good it is to see them and that you hope to see them again soon.

c. Visiting the Hospital (or the Very Sick at Home)

- **Pray for God’s help**, just as with any other visit.

- **Wash your hands.** For obvious reasons, it is a good idea to wash your hands before and after visiting each person. Many hospitals have ample antibacterial gel or foam in various locations. I think it is most polite to do this outside the patient’s room.

- **Knock loudly** before entering. Remember that hospitals aren’t very private places, but any degree of dignity you can offer will be appreciated. I suggest that if there is no answer, you knock again, then go ahead and enter.

- **Just talk** with them. Tell them you’re there from the church paying a visit, so they understand that this is part of the church’s caring for them. It’s okay to ask how they’re doing. Often it helps people come to terms with illness. While there is no need to press for unseemly details, do not be shy about talking about illness—it’s a big part of their lives (at this moment).

- **Keep your visit short.** People who are ill often need rest, and they will tire themselves out before they will tell you to go away. Take the initiative to excuse yourself. You might say, “Well, you need to get your rest. It’s been nice visiting you.” If you will be back, tell them this. If you aren’t sure, don’t make a promise you may not keep.

- I suggest **waking up the sleeping patient** when you get there (if there is no other family present). Nine times out of ten, the person will be glad you did and might be more angry that you didn’t wake them than because you did. (Sleeping patients are awakened all the time by nurses, doctors, meal deliveries, and so on.) If other family members are there let them decide whether to wake the patient.

- We visit the hospital as much **for the others** in the family as for the patient. Let them know of the church’s love and prayers for them too.

- What people need from us as spiritual caregivers is **love and compassion**—not explanations and answers. Avoid giving medical advice, even if you're a professional. And there is no need to give theological advice either. If someone wonders why God would allow their disease to happen, it's often best to say, "I don't know. I wish I did." Whatever you do, do not attempt to speak for God: "I'm sure God has a purpose for your car accident." (We don't actually know that, and it is not comforting.) Also, do not offer false words of comfort like, "I'm sure everything will work out all right" or "you'll be better soon." This may not be true. **We are called to offer love, not necessarily answers.**

- **Offer to** wash their eye glasses; find fresh ice and/or water if permitted.

- **Leave a note.** If you don't get to see anyone (sometimes the patient is away for tests or therapy or too sleepy to talk), it is not a failed visit. **God is the one who works through these visits, not us, and is capable of ministering to the person whom we did not get to see.** Leave a note, telling them you were there and wishing them well, assuring them of the church's prayer and concern.

- **Pray** with the patient before you go. (See "Prayer" below.)

5. Prayer

Often the main fear and hesitation people have about visiting is the threat of having to pray aloud in front of others. While this is a very widespread fear, the benefit of offering to pray with someone is very great. If they have not been attending church, they may not have had the opportunity to pray with anyone else for a long, long time. If they are in a hospital, nothing could be more comforting.

Don't worry. No one is grading your performance, certainly not God, and not the person for whom you are caring. Go and pray with the confidence that the Holy Spirit will give you the words and that God is faithful to hear every prayer, no matter how well we offer it. Here are some thoughts that might be helpful about praying with someone:

- **Ask them if they would like to have a brief time of prayer.** If they say no, assure them that you will be praying for them. But they will almost certainly say yes.

- **Prayer is simply talking to God.** It does not need to be fancy or well prepared. It only has to be honestly what we are feeling and thinking.

- **Ask** if they would like for both of you to take a turn praying or if they would like you to pray for them. (Usually, they will ask you to pray for both of you.) Ask if there are particular things they would like you to pray for. Occasionally, they might offer to pray for you, too. If they ask how they can pray for you, try to think of a prayer request so they have the opportunity to serve you, just as you are serving them.

- **Physical touch** is, again, very important when praying. Hold hands or simply lay your hand on the person's arm as you pray. If other visitors are present, invite them to join the circle. (Often nurses and caregivers gratefully accept this invitation.) But do not insist.

a. When Praying Include:

- **Thanksgiving** for the gifts of life, for the doctors, nurses, staff, for family members present or absent, and for good and happy things that you have talked about during the visit. Definitely thank God for the person you are praying with.

- **Asking** for health, and strength, and comfort, and for particular things you have been talking about.

- **Declaring** our trust in God, who sent Jesus Christ to die for us and rise from the dead, and who lives with us still. Declaring our confidence that God is in charge.

- **Ending** with “Amen” or with “We pray the prayer that Jesus taught, saying...” and say the Lord's Prayer. The person will usually join in.

6. Between Visits

Remember that between visits, there are many meaningful ways to extend the love of Christ: cards, short notes, emails, and phone calls can all bring joy and comfort to people's lives. But these are most helpful when built on the foundation of a relationship, established by spending time face to face with the person.

ⁱ This workshop is adapted from the work of Brian Ellison, Parkville Presbyterian Church, Parkville, Missouri as part of a series by The Presbyterian Leader; www.thepresbyterianleader.com, 2011.