

HIV / AIDS MINISTRIES NETWORK

FOCUS PAPER # 22

A NETWORK OF UNITED METHODISTS AND OTHERS WHO
CARE ABOUT THE GLOBAL HIV/AIDS PANDEMIC AND
THOSE WHOSE LIVES HAVE BEEN TOUCHED

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Dear Network Members:

One question we are most frequently asked is *"How do I talk to or counsel with a person living with HIV disease?"* This question is not only asked by care partners, friends, and family but also by church professionals, clergy and lay. Even though most religious professionals have had to take some course(s) in pastoral counseling, they often feel inadequate when it comes to providing emotional/spiritual support to individuals and families affected by HIV disease.

This edition of the HIV/AIDS Ministries Network Focus Paper is devoted to providing some insights and practical assistance to anyone faced with responding to the emotional/spiritual needs of persons living with HIV/AIDS.

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The emotional/spiritual needs of persons living with HIV disease have never been more acute. HIV infected individuals are living longer than any time in the past 12 years. Because they are living longer, they have to deal with longer-term stresses. Increasing numbers of family members and significant others are choosing to care for the infected individual and also needing emotional/spiritual support themselves. More and more church and community members are coming out of the closet to let it be known that they or their loved one has HIV disease. Increasingly they are seeking out and even demanding supportive, compassionate, and non-judgemental emotional/spiritual support from our religious communities.

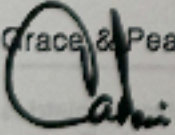
In *"Guidelines for the Giving of Pastoral Care to Those Infected/Affected by HIV/AIDS"* and *"10 Assurances of Pastoral Care for Those Infected or Affected by HIV/AIDS,"* the Reverend Don Nations provides the theological and psychological framework out of which appropriate emotional/spiritual support needs to take place. My own experience supports the notion that such a framework most adequately addresses the emotional/spiritual needs of persons infected with or affected by HIV disease.

However, read closely (and if necessary often) the reflections of Richard Cory and William Nunn in the **U.M.C. Family HIV/AIDS Network** concerning the pastoral care they experienced first hand (both appropriate and inappropriate emotional/spiritual support). They indicate clearly what they found helpful and harmful. All of us who find ourselves or choose to be care partners with persons living with HIV infection will do well to open ourselves to hear the voice of the Creator spoken through these two stories of faith.

In your Focus Paper mailing, you will find information and/or order forms for a number of new resources. One resource I would invite you to secure is the book recently published by the Department, *HIV/AIDS Ministries: A Practical Guide for Pastors* by Pat Hoffman. The Department believes it is a basic HIV/AIDS ministry resource which every clergy, lay church professional, or anyone seeking to be in ministry with persons living with HIV disease will find helpful.

If you have not done so, we invite you to join the hundreds of individuals working with and living with HIV disease who are finding support and resources through the **Computerized AIDS Ministries Resource Network**. A flyer at the end of this Focus Paper gives you the details on how to sign-up.

Grace & Peace,


Cathie Lyons
Associate General Secretary

Charles Carnahan
Executive for HIV/AIDS Ministries

GUIDELINES FOR THE GIVING OF PASTORAL CARE TO THOSE PERSONS WHO ARE INFECTED/AFFECTED BY HIV/AIDS

by Don Nations

1. THE FIRST QUESTION TO ASK IS NOT, "HOW DID YOU GET INFECTED?"

We do not ask someone who has cancer, lupus, or suffered a heart attack how they got sick; so why should we ask that of someone with HIV? When someone tells us their HIV status, they are usually dealing with the present and future more than the past. There may be lifestyle issues that need to be discussed at a future time, but our initial reaction needs to be compassion-- not questioning.

2. AVOID THE "BLAME GAME."

Spending time blaming people who are HIV positive for their illness distracts from the most important issues. The truth is that we have all done things in our life that involved risk. For the most part, we have been spared the consequences of those acts. We are hypocritical when we blame others if they suffer the consequences of their acts. The "blame game" prevents us from giving beneficial pastoral care to those who need it.

3. COMPASSION IS THE KEY.

Compassion is being a channel of God's grace and coming to the side of one who is hurting. We suspend judgmentalism and focus on the needs of others. Compassion is shown in gentleness, kindness, acceptance, and love. Pastoral care that lacks

compassion is not helpful. Compassion is the way of Jesus.

4. CONFRONT YOUR OWN FEARS.

Fear leads some pastors and churches to reject people infected/affected by HIV/AIDS. They may refuse to visit or care for them. We must confront our fears with facts, put judgmentalism and prejudice behind us, and get on with the privilege and obligation of ministry.

5. FOCUS ON LIFE, NOT DEATH.

A person infected with HIV will eventually die. So will a person who is not infected by HIV. We all will die; none

of us knows when death will arrive. Therefore, our focus needs to be on how we will live the rest of our life. Focusing only on death gives the impression that we have given up hope and are just waiting for the person to die. Focusing on life declares that the person has a lot of living yet to do.

6. LET THE INDIVIDUAL SET THE AGENDA.

Many of us like to be in control of everything, including the direction of our conversations. This approach can sabotage our best efforts. The earlier you are in your relationship with the person you are

*Compassion is being a channel of
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counseling the more they need to control the issues that are discussed. If you begin a relationship by making demands of the HIV positive person such as his/her immediate repentance, notification of family/partner(s), and acceptance of death, you are being, at best, unfair and unhelpful. At worst, you are being destructive.

7. CONFIDENTIALITY IS A MUST.

We must keep the trust people place in us. Disclosing one's HIV status is often a difficult decision. It means becoming vulnerable and trusting another with a secret. Pastoral visitors are not free to tell others secrets entrusted to us. We do not tell spouses, church committees, pastors, or friends. If we break confidentiality, we may hurt the one who trusted us so much that he/she never reaches out for help again.

8. ACT LIKE THERE IS HOPE.

HIV infection is not a situation completely devoid of hope. New medications are extending the lives of persons infected with HIV. A cure may be found. There is the power of prayer. Most importantly, we all have much living left to do. The gospel of Jesus Christ is a call to hope that this life is meaningful because God is working in our life and eternity will be spent in the presence of God.

9. AFFIRM THE WORTH OF THE PERSON.

All people are created in the image of God. All people inherently have great dignity and eternal worth. God's grace has gone out to all

people and God, calling all people to a life filled with power, love, joy, and service to others. "God so loved the world" (John 3:16) means that there are no second class people. We must embody the message of love or we fail to offer the Gospel.

10. FEEL FREE TO SHOW EMOTION.

HIV/AIDS surfaces concerns about death, prolonged illness, lack of control of our lives, financial stability, transmission of the disease, prejudice, and more. The giving of good pastoral care requires that we confront these issues and get in touch with our own emotions about them. We must be careful, however, to respond to the needs of the person and not our own anxiety, fear, and pity. Our role is to be a pastor to them, not the reverse. Be emotionally present. Feel free to appropriately cry, laugh, or express other emotions when visiting with a person who has HIV.

...our focus needs to be on how we will live the rest of our life. Focusing on life declares that the person has a lot of living yet to do.

11. REMEMBER TO TOUCH.

One of the tragedies of HIV infection is that many people are reluctant to touch someone who is HIV positive. Some of this hesitation is due to irrational fears about contracting HIV through casual contact. Others hesitate because they do not accept the HIV positive person or the lifestyle they are believed to have. Whatever the reason, refusing to touch someone who wants to be touched sends the message that we are not emotionally present for the person or that we do not accept the person. (We must also be sensitive to times when a person does not want to be touched for any reason or cannot be touched because of a physical condition.)

Our willingness to touch shows our willingness to care.

12. LOOK FOR THE STAGES OF GRIEF.

People who are infected/affected by HIV wrestle with the stages of grief. They deal with shock, denial, anger, bargaining, depression, and acceptance. People go through these stages in differing periods of time and may bounce back and forth between stages. People will grieve over their HIV status, an AIDS diagnosis, the loss of a job, becoming symptomatic, the loss of their future, the death of their friends, and the anticipation of their own death. Our job is not necessarily to move people through these stages but to help them deal with their present stage. We are called to offer support to our brothers and sisters during these difficult times.

**CONFIDENTIALITY
IS A MUST.**

13. BE AWARE OF THE PSYCHOSOCIAL ISSUES SURROUNDING HIV/AIDS.

Those infected/affected with HIV deal with a variety of issues such as social isolation, rejection by friends and family, prolonged periods of illness, fear of what tomorrow will bring, the sometimes negative reactions of the religious community, reproductive decisions, guilt, and grieving. As givers of pastoral care, we need to recognize these issues and help people as they work their way through them. We also need to educate our community about HIV/AIDS so that it may respond supportively.

14. EXPRESSIONS OF SPIRITUALITY AND THE EXPERIENCE OF SPIRITUAL LIFE VARIES FROM PERSON TO PERSON.

No one experiences God in the same way. Some people express their faith emotionally; others are quiet and contemplative. Some people enjoy singing; others prefer to listen. Some belong to a particular religious group; others do not. Some are very sure about their spiritual direction; others are searching and have a lot of questions. Such differences are not bad. They demonstrate the unique way God reaches out to all of us.

Since religious expressions differ, we must not require everyone to experience God the way that we do. We can not assume that we know another person's spirituality just because we know they are infected/affected by HIV. We must be present as pastoral guides who help people to find their own way on their spiritual journey.

15. AVOID SAYING, "I KNOW HOW YOU FEEL."

Even if we had similar situations, we cannot completely understand how anyone else is experiencing a particular situation. More helpful responses include, "I hear your pain"; "I am sorry"; "I am here for you"; "I understand this is a difficult time for you"; "What can I do to help?"; and "How do you feel?" Sometimes a quiet hug is appropriate and needed.

16. GET EDUCATED.

To give helpful, consistent pastoral care, educate yourself about HIV infection. Learn the basic facts about modes of transmission,

progression of the infection, common illnesses and medications, and the psychosocial issues that surround HIV/AIDS. Becoming educated about HIV communicates to people with HIV that you care about them. You can find out about HIV in many ways: books, tapes, seminars, volunteer opportunities, HIV/AIDS hotlines, American Red Cross programs, denominational resources, hospitals, and more. However you choose to become educated, do it today.

17. PASTORAL CARE WITH A PERSON INFECTED/AFFECTED BY HIV/AIDS IS USUALLY A LONG PROCESS.

We cannot heal every wound and solve every problem in one hour. Pastoral care with someone whose life has been touched by HIV requires time, patience, and the development of a relationship. Our role is to come along side of people and support them, to be present with them. It is not to answer every question and give the solution to every problem. We must be patient as people work through the stages of grief and the myriad of issues that surround HIV infection.

18. KNOW YOUR LIMITS.

HIV brings us into contact with issues such as counseling, bio-ethics, living wills, medical treatment, grief, guilt, stress reduction, and nutrition. None of us can adequately deal with all of these issues. We must realize when we have reached our limits and be willing to refer the client to another person.

19. EVERY PASTORAL CARE SITUATION CAN BE USED BY GOD TO MAKE US INTO THE PEOPLE GOD WANTS US TO BE.

God meets us in the people we encounter. People living with HIV, through the issues they raise, help us confront fear, death, frustration, impatience, prejudice, and spirituality. Walking through these issues with our them can be mutually beneficial. We must always be open to growth and personal change.

20. DOCTRINE, DOGMA, DENOMINATIONALISM, AND GUIDELINES ARE NOT ADEQUATE SUBSTITUTES FOR CARING, SHARING, AND LOVE.

We all operate within the structure of a religious organization. That does not mean, however, that all we have to offer is that structure. We must add to that framework caring, personal sharing, and love. Unless we become personally involved, we will fail to show God's love to others and fail to follow the example of Jesus.

10 ASSURANCES OF PASTORAL CARE FOR THOSE INFECTED OR AFFECTED BY HIV/AIDS

by Don Nations

Assurance #1

GOD LOVES ALL OF US.

Scripture: John 3:16-18; John 10:27-29; Romans 8:35-39; 1 John 4:7, 8

God is love. God's love is extended to all people. It has no end and is unconditional. God's love has no "ifs, ands, or buts." No one and no thing can separate us from the love of God that is in Jesus.

We are all precious to God. Jesus lived, died, and was raised from the dead in order to demonstrate God's love for us. Our love for God is demonstrated by our loyalty to Jesus and our love for one another.

Even when we feel unloved or unlovable, God's love is constant. Even when we disappoint ourselves, God continues to love us. Even when others turn their love away from us, God's love for us never waivers.

HIV infection often makes us feel separated from others-- our families, our friends, our partner, even God. The Scriptures assure us that nothing can separate us from God's love-- not even HIV. In the midst of the challenges of HIV/AIDS, we can be assured that God still loves us.

God accepts us right where we are. That does not mean that God approves of all we do or that God is willing to leave us just the way we are. It does mean that God's acceptance is unconditional. We are loved!

10 Assurances of Pastoral Care For Those Infected or Affected by HIV/AIDS

- 1. GOD LOVES ALL OF US.**
- 2. GOD WILL DRAW NEAR TO US.**
- 3. GOD OFFERS FORGIVENESS.**
- 4. GOD IS WITH US.**
- 5. GOD BRINGS GOOD INTO OUR LIFE.**
- 6. GOD GIVES US A PURPOSE.**
- 7. GOD GIVES US STRENGTH**
- 8. GOD'S GIFTS ARE PEACE, HOPE, AND JOY.**
- 9. GOD TAKES THE SIDE OF THE POOR, THE SICK, AND THE OPPRESSED.**
- 10. GOD NEVER GIVES UP ON US.**

Assurance #2**GOD WILL DRAW NEAR TO US.**

Scripture: Psalm 145:18; Ephesians 2:13-14, 19; Hebrews 10:19-22; James 4:7, 8

An affliction far more common than AIDS is "FRAIDS," an irrational fear of HIV/AIDS and those infected/affected by HIV. This fear produces anger, discrimination, spreading of myths, and avoidance of those infected/affected by HIV/AIDS.

God does not have 'FRAIDS! God desires intimate contact with us. God wants to hear our concerns, fears, hopes, dreams, and questions. God wants to cry with us and laugh with us. God wants to hear our prayers and to talk with us.

When HIV touches our life, we often experience the end of some relationships. Because we do not want to be hurt again, we can become reluctant to reach out to others.

The Scriptures assure us that nothing can separate us from God's love— not even HIV. In the midst of the challenges of HIV/AIDS, we can be assured that God still loves us.

God wants us to take the chance and reach out. God will never hurt us. God will never turn away from us. God will not cut off our spiritual relationship with Jesus Christ. We can be sure that if we reach out to God, we will find that God is already reaching out to us. If we draw near to God, God will draw near to us (James 4:8).

Assurance #3**GOD OFFERS FORGIVENESS.**

Scripture: Psalm 130:1-4; Isaiah 1:18-19; 1 John 1:9-2:2

Guilt! We have all felt it. We have carried it around with us. We have been its victim. The good news is that God has provided a way for us to unload our burden of guilt. That way is God's forgiveness of our sins through Jesus.

God's grace and forgiveness is greater than our sin. Forgiveness is God's work. Receiving God's forgiveness allows us to forgive ourselves for the mistakes we have made. It also allows us to forgive those who have hurt us.

Letting go of guilt is a healthy choice. It frees up emotional energy for us to deal with the other issues of life. It liberates spiritual energy so that we can continue our spiritual journey. It releases physical energy so that we can keep our bodies healthier.

Forgiveness also helps each of us to be honest with ourself. We must admit that we are not perfect and that some things in our life must change. This admission helps us to stop wasting time. Then we can spend our time more constructively, doing the things that make us stronger.

Forgiveness is a gift that truly is good for us.

Assurance #4

GOD IS WITH US.

Scripture: Joshua 1:5; Psalm 23; Matthew 28:18-20; Hebrews 13:5, 6; II Corinthians 4:7-10

When we are HIV positive, we can feel very isolated and alone. We need to know that someone will be there for us, even in the hard times of life. God will never desert us or leave us alone.

Many things can make us feel isolated and alone. HIV/AIDS scares some people away from us. Sometimes HIV scares us away from other people. Managing our health, visiting doctors, and dealing with changing working conditions steals much of our time, thus often preventing us from spending time with others.

God is with us, in good times or bad; in health or sickness; in strength or weakness. We may have to endure many things in this life, but we do not have to be lonely. God has promised to remain with us forever and ever-- in this life and in the next. We are not alone.

Letting go of guilt is a healthy choice. It frees up emotional energy for us to deal with the other issues of life. It liberates spiritual energy so that we can continue our spiritual journey. It releases physical energy so that we can keep our bodies healthier.

Assurance #5

GOD BRINGS GOOD INTO OUR LIFE.

Scripture: Romans 8:28; James 1:2-4, 12, 17; I Peter 1:3-9

God does not make bad things happen to us. God does not make us sick. God brings good into our life.

Bad things happen for a variety of reasons. We suffer because of the mistakes of others. We suffer because our decisions have brought negative consequences. We suffer because of the evil structures of society. Sometimes there is no satisfactory reason for our suffering.

God promises to help us bring good results out of difficult situations. HIV has affected our lives. The question we must answer is, "How are we going to react to this reality of life?"

We can choose to live in denial or face our mortality and be freed from the fear of death. We can choose to withdraw into ourselves or reach out to find the support we need and offer support to others. We can choose to run from God or to reach out and have a relationship with a God who offers us goodness, love, and care.

Assurance #6

GOD GIVES US A PURPOSE.

Scripture: Matthew 28:18-20; Mark 1:14-20;
John 14:1-15; II Peter 1:1-8

God does not make bad things happen to us. God does not make us sick.

One of the most terrible things is to live without purpose: to have no plans, no direction, no goals, no reason for living. To merely "exist" is a tragic way to spend our time when we could be living.

When HIV touches our life, we may feel hopeless and want to stop living. We start to lose sight of our dreams and plans. We begin to believe that we have no purpose. That is not true!

God affirms that we always have a purpose. As long as we are seeking to become better people, reach out to others, work on our spiritual growth, care and pray-- we have a purpose.

How do we find our purpose? We can start by doing a self-inventory. We can ask: "What are my talents, resources, goals, hopes, and dreams? What is most important to me? How has God gifted me?" Next, we ask: "What are the needs of my family, friends, society? What would God have me do about these needs?" Then, we ask: "Where does my self-inventory match up with the needs I see?" The intersection of our self-inventory and the needs of others may be a good place to begin fulfilling our purpose.

God offers us life. God will give us a purpose. Let us be done with existing and get on with living!

Assurance #7

GOD GIVES US STRENGTH.

Scripture: Psalm 34:4; II Corinthians 12:9, 10; Philippians 4:13

All of us feel tired and overburdened sometimes. Demands related to friends, family, work, health can tire us out. Add the challenges of HIV to this mix and it is easy for us to reach the point of exhaustion. We may begin to believe that we can not overcome the next difficulty we face.

We find strength as we become connected to God through Jesus Christ. In this spiritual relationship, we find what we can not find in ourselves. Our strength is not found in wrestling with life but in resting in God's hands (Isaiah 40:29-31).

How reassuring to know that spiritual strength is promised to those who wait upon God. How empowering to realize that we can face all challenges backed by the power of God.

Strength is not measured in weight, muscle size, or athletic ability. Strength is measured by our oneness with God. As our spiritual relationship becomes stronger, we become stronger people. God's strength will never fail us.

Assurance #8

PEACE, HOPE, AND JOY ARE GOD'S GIFTS.

Scripture: John 14:27; Romans 5:1-5; II Corinthians 12:9, 10; Philippians 4:4-7; Hebrews 4:16

Beyond the materialism and selfishness of society (and ourselves), we need peace, hope, and joy. We feel these needs more intensely when our lives are touched by HIV.

That we live in a disturbed world is not news to anyone. That we can find peace in the midst of it IS news. God offers us peace. We can have peace because we know we are God's. We know that justice will prevail. God never leaves us.

Hope and HIV are not opposites. HIV affects the body but hope is found in the soul. We hope for a cure. We hope that we can fulfill our dreams. We the have hope that after we take the step of death, our story will not end. In fact, our hope says that our existence is eternal and that one day we will be in a place with no death, illness, or tears of pain.

Hope and HIV are not opposites. HIV affects the body but hope is found in the soul. We hope for a cure. We hope that we can fulfill our dreams.

Scripture calls us to rejoice at all times. While we do not rejoice about the negative things in our life, we do rejoice that God goes through these things with us. We rejoice that the love in our hearts will last forever. We find joy in the faces of children, in the little things of life, and in the

kindness of loved ones. Without peace, hope, and love, life is unbearable. With them, we can live and thrive.

Assurance #9

GOD TAKES THE SIDE OF THE POOR, THE SICK, AND THE OPPRESSED.

Scripture: Amos 5:10-15, 21-24; Matthew 5:1-12; James 1:27; 2:2-9

God's love is extended to all people. God has a special concern for the persons who are poor, sick, and oppressed. Repeatedly Scripture defines true religion as caring for the poor, the stranger, and the afflicted. Scripture condemns the actions of those who are unjust, abuse their positions of power, and close their eyes to the needs of others.

HIV disease increases poverty. Those who are poor become poorer. Many who have been financially comfortable become poor. Due to peoples' fears and unjust social structures, being infected/affected by HIV often results in our oppression.

God does not desire us to be in poverty, to be sick, or to be oppressed, but sometimes we are. God is not indifferent to our situation. God is our advocate, our comforter, and our refuge. God's will is for justice for all. As The Reverend Dr. Martin Luther King, Jr. said, "even though the arc of the moral universe is long, it bends towards justice." The struggle may be long, but we do not struggle alone. God struggles along side of us and on our behalf.

We can take comfort in the knowledge that our situation is not forgotten by God. Jesus came to preach good news to the poor and set free the downtrodden.

God's love is extended to all people. God has a special concern for the persons who are poor, sick, and oppressed. Repeatedly Scripture defines true religion as caring for the poor, the stranger, and the afflicted.

Assurance #10

GOD NEVER GIVES UP ON US.

Scripture: Psalm 12; Psalm 18; Proverbs 3; Hebrews 12:1-3

People sometimes break their promises, destroying our faith in them. We may become so disappointed in the actions of others that we begin to give up on people. When the people who hurt us are members of the religious community, we are tempted to give up on religious institutions and people. We can even be tempted to give up on God.

Some clergy and congregations fail to meet the needs of people. However, millions of people, including those whose lives have been touched by HIV/AIDS, have found parts of the Christian community to be very supportive.

We all need spiritual moorings, to feel connected to something greater than ourselves. We all need to feel like we have a place in eternity. We want to experience love, peace, forgiveness, and hope. We lose all of these benefits if we react to the uncaring acts of others by shutting down our spiritual life.

People will sometimes fail us, but God will not. God is always greater than the people who claim God's name. Even if we have given up on people, we do not need to give up on God. God never gives up on us.

The Reverend Don Nations is pastor of Port Tampa United Methodist Church in Tampa, Florida and a member of Florida Annual Conference. He is on the clergy advisory committee of Francie House, a spiritual outreach to those infected/affected by HIV/AIDS, and an HIV/AIDS instructor. Copies of the brochures *10 Assurances* and *Guidelines for Giving of Pastoral Care to Those Persons Who Are Infected/Affected by HIV/AIDS*, from which the two articles in this Focus Paper were adapted, may be obtained from The Reverend Don Nations, Port Tampa United Methodist Church, 6914 South DeSoto Street, Tampa, Florida, 33616, (813) 837-5002.
