



## Ministry of Hope

Dr. Peggy Wobbema (D.Min. 2007) describes a day in her life as a hospital chaplain.

### **The shift started at 7 a.m.**

My pager went off at 7:20. A young man had attempted suicide by hanging and was now in the ER. His wife was on the phone, weeping. I introduced myself and expressed my concern. That call began a flurry of activity and intervention with the family that took most of the morning. Counseling a family struggling with the “why” of suicide is not easy. There are no easy answers, only desperate needs for comforting words of hope.

As I dealt with this tragedy, I received a call from Labor and Delivery—a mother had just given birth to a dead baby. I whispered a

prayer as I walked down the hall, asking the Holy Spirit to comfort this woman. The young mother's face was stained with tears. Her first words were, "Chaplain, why did my baby die?" For the next few moments we talked about grief and about dreams that would never be realized.

A difficult part of life is living with the mystery of unanswered questions. The grieving mother did not know who the father of her child was. Her family had abandoned her. As I listened to her story, I could tell that God had been only a distant part of her life. We talked about the comfort available in God's presence during difficult times, then wept and prayed together.

The emergencies subsided, and I began to make my rounds through the hospital. A staff nurse asked if I had a few moments to talk with her. We found a quiet place, and she poured out her pain. Her husband had asked for a divorce the night before. Her world was shattered—her heart broken. She had cried to God for help, but none seemed to come. Her faith was in critical condition.

How could I help her understand that God doesn't abandon us in times of need? As we talked about how she had dealt with troubling situations in the past, she was reminded that God's help and presence had been available to her in the past, and that they were in the present as well.

One final call connected me to a family struggling with end-of-life decisions. The patient was critically



ill and not improving—she was dying. A conference was scheduled for the physician, family and chaplain to discuss the patient's condition and the end-of-life comfort care that might be needed.

The doctor presented the situation from a medical perspective. Everything that could be done was being done, but the patient continued to deteriorate. The doctor sat in silence as the family wept, stunned by the reality presented to them and unable to respond. The doctor left the room. I gently asked the family, "Did your mom ever let you know what she would want in this type of situation?" For the next hour, the family and I explored the

patient's wishes and the emotional struggles attached to letting her die. They wondered if they would be killing their mother by giving her the comfort care she needed. Reiteration of the patient's condition and the doctor's assessment brought further clarity. They made the decision. Together we went to the bedside to pray. After the ventilator and medications were stopped, the patient's heart rate slowly dropped. A final breath, and the patient was dead. Grief support began.

As I left the hospital, I lifted the day's events to God, knowing that the next day would be another typical day in the life of a hospital chaplain.