

## Essential Tools for Active Kindness and Care

I really want to get very practical about some of this, and it's hard to cover it all, because there's really these two arenas of care and kindness that kind of overlap, and yet they are separate. In other words, there is the challenge of every day, every hour, care and kindness and that's kind of like on the less intense level, but it is so important for us as followers of Jesus to be intentional and committed and conscientious deliverers of kindness and encouragement and appreciation everyday, everywhere we go— to everybody who does anything around us. Obviously, it's impossible to do it to everybody—that's probably even not even smart, because there is such a thing as burning yourself out and there's a certain amount of self-preservation that is important, but for the most part most of us Christians—followers of Jesus —can do so much more and it's so easy and so available so good, so needed.

I want to start with just challenging you to begin doing that more. It is so much fun, really, to be conscientious every time you go into a store or a business or you meet somebody on the street that you make eye contact with. You consider them someone who needs a gift of kindness from you and you believe that you have something that can help them.

Now that's there are five points (they're in the book you have—there's a whole chapter about the five points) about giving to people. If you read that chapter, you will know that you have something to give anybody and everybody. So I urge you too to get that book and to read that chapter, because there is no one who is disqualified, either from needing it, or being able to have it given. No one's disqualified— no one's left. There's no way that you can squirm out of this and say, "*Well, I'm not really that kind of a person,*" so you're caught; and by showing up at this Workshop, I'm going to turn it tighter—that you have stuff to give and you got to give it: appreciation, compliments, encouragement, smiles, friendly waves . . .

You know, I've been really watching this, examining this all the time. You go up and down the aisles of the average store, and nobody looks at you, nobody makes eye contact. It's very hard to greet them know we must be of that elite core that looks at people, that makes eye contact. Now, it's a little hard if they don't do it back, but we must not be guilty of being just that mindless group that are just going about looking for a can of tomatoes, or looking for a mousetrap at Home Depot. We are there, and there are people that are our obligation or responsibility—our opportunity— and we have something to give them. And I believe that is what Jesus Christ wants us to be doing and we're not doing it well enough.

There's so much more we can do because we haven't begun to start thinking about and what this begins with . . . in that last session the podium was blocking the view of people, right? And one man, Eric, took ownership of that place. He said, (this is putting word in his mouth) "It is my responsibility to change this," and he came up and did something about it. Now that is an example of the kind of mentality we have to move into—

ownership of every room we enter. You notice somebody standing there and there's a chair on the other end, and you bring it to them.

You go into a restaurant and people are . . . there are seats somewhere, not somewhere else, and you have an extra one—you are you are in charge of that! This is why I am so thrilled at this crowd that are here, but they're not getting it, and you're among them. You're not getting it; you're still not getting it. How do I know? Because speakers leave there and you aren't thanking them. You aren't rushing up there or catching them and saying, *"Thank you for coming today."* I don't care if you were bored or you slept or whatever—it doesn't matter. you are but you are the Committee of Appreciation! Every time you have a speaker, a musician, a vocalist, you are the Committee of Appreciation. Do you know that? You are now so duly appointed! Last night the Harts got out of here (they sneaked out, so we didn't get a chance to thank them) but ordinarily, if it was working right, there be a hundred fifty people up there thanking, instead of two! And that's why we can talk and talk and talk, but it ain't getting through. Unless people are doing that, we're still just sitting.

So I beg you and challenge you, because this is so satisfying—to have that kind of agenda in your mind: that you're in a room, you're in a place, and you've got something to give people and they need it and you'll raise their hope, and it's a taste of God; you're giving a taste of God everywhere you go.

Okay, that's on one level. I want to go through these preliminary guidelines to talk about every level.

Number one is so important: **you cannot tell how much you are appreciated by the way people act in response.** We talk about that with our Elders all the time; they call people on the phone and they say. *"Oh, yeah, I called this person, and they said, 'Yeah, okay, bye.' She didn't like that call."*

Well I tell her then, *"Well, I met her at church and she told me. 'Hey, you know what? My Elder called me and I was so appreciative of it!'"* She sounded like she was bored to tears on the phone—you cannot tell. People are not skilled; they've never had lessons in saying, *"Thank you; I really appreciate your call."* They just say, *"Yeah, ok, thanks,"* and really, their hearts are warmed by your call.

You may not judge the effectiveness because then you cop out and you quit, because you say, *"Ah, they don't care anyway."* There are some great little stories in that in book; there's a whole collection of about 25 anecdotes. One of them is from Glenn DeMaster, our Executive Pastor.

He tells about backing out of his driveway and there is a newly-arrived Asian woman who he knew that she could not speak English, and he waved to her. She gave no sign. A couple days later, the same thing happened; he waved to her; she gave no sign. no indication that she even noticed it, or cared. A couple days later, he backed out of the driveway and she was standing on the corner where he turns to go away from home. She

was standing there, and he opened the window and he waved to her. Then he proceeded, and he noticed out of his rear view mirror that then, after he waved to her, she left. Well, maybe that was a coincidence.

He started to see this happen; she was standing on the corner, waiting for him to wave to her, and then she would go on home. People are so needy and the smallest sign of care and concern is so easy to give. You may be the arch-introvert of history—the most shy person ever— but you can wave to people; you can smile to people, and it's a gift of God. And you can't tell by the way they act whether they appreciate it. You just have to do it.

Number two - **actions are more important than care and kind feelings.** Good deeds can start in your head as well as in your heart. Care really doesn't exist unless it turns into an action. That's not totally true, I guess, because our hearts get broken, like for the tsunami victims, and you know, like that. Our hearts are broken but even there, unless you send in a check to World Vision or World Relief or something, it doesn't really count very much that it breaks your heart a little bit if you don't do something if you can. So feeling sad or caring or loving or sympathy, it doesn't really count as bona fide care compared to trying to do something. and Good deeds can start in your head as well as in your heart.

Some people have said to me, "*Well, you know, I don't really feel much, and I don't have many emotional responses to people's distress.*" Well, that that's an honest, legitimate condition that some people have more than others, but it doesn't take feelings. If you see somebody's bleeding, you know that they need some help. Use your head; you can see it, you can observe it, and you can do something. So you don't have to feel for people but you do have to act for people.

If you go into a store and there's a clerk and there's waiting, there's no feelings. It's a person up there; you can't feel like they need something, but your brain tells you- here's a human being. This is a young woman; she's probably a mother, probably got kids at home, and I'll bet a word of appreciation or encouragement will lift her spirits. You don't have to feel for her; you just think about it, and you give her a gift of some sort.

Okay, number 3 - **set sensible limits on your care and kindness.** lest you overdo it and discontinue. I think that is the main reason people do stop caring, or drop out of it, or pull back is that they do too much. You know, if I'm going through a heartache, I don't need you to adopt me; I just need some expression of care and concern. You don't have to take over my life. I don't even have time to go to lunch with you, so don't feel like you have to take me out for lunch; but I will relish a hand on my shoulder that says, "*Sorry your dad died. It's got to be hard.*" How long does that take? 6 seconds? and it helps me. You don't have to say, "*I'll call you every night for the next week; I'll take you out for lunch; or we'll be doing something.*" NO. You just give that little gift and it's a gift and it's over with and it's appreciated. And if we set limits like that, you have to know what you can handle; know what you can include, and . . .

I know sometimes there's room for a new friend, and you can move it in that direction if you want, but if you know your life is full of social relations and there's no room for a new friend, do not go there and do not make the kind of overtures that are going to involve you in time with a person that you're going to end up possibly maybe resenting—the time or the effort. So you go there if you can, but the small gift is enough.

I've talked for many years about '**naming the elephant**', but I got it's got to be repeated in case you haven't heard that concept, because it is so important. It's important with people who have a serious loss or some kind of serious illness, and it is known that they have gone through a tough time. So you meet this person, you need Joe, and you know his wife died a month ago. You meet him at church on the Plaza, or in the visiting area. You say, "*Hi, Joe.*" Most Joe's will report that that's about as far as it goes. "*How ya doin', Joe? Isn't it interesting what the Dodgers are doing?*"

And you can get into all kinds of trivial issues, but most of the time you should say to Joe, "*Joe, it's been a month or so, hasn't it, since Gwen died. It's got to be tough,*" or something like that. What you say is not doesn't have to be smooth or polished, but it is important you get the issue on the table. "*It's been a month,*" or "*Your wife died. You're alone now.*" Somehow you get the subject on the table; otherwise it's phony. He's thinking about it; you're thinking about it; and you're talking about the weather, or the Dodgers, or something else that isn't really what's on their mind.

Now, once you talk about Gwen, or his being alone, then you move on to the Dodgers, but the cared-for person—the person who needs care—we need to name the name the issue; and not avoid it. For most people who have lost a loved one, a spouse, a family member, a dear one, find that people avoid the subject. They avoid the subject for good reasons—out of good feelings—but they misunderstand. We could talk a lot about that, because there are times not to name the elephant, but in most cases you name the obvious.

You know, you meet person, let's say that have an amputation: he's had that amputation for 20 years; he's not thinking about it, but you are. And in many cases, you are distracted by that unless you ask about it, and get that issue satisfied so you can get on with a more conventional relationship. "*Ah, I see you lost your leg; you must have a story there.*" Okay, most people who had an amputation are willing, able, and eager to talk about it; not ashamed or embarrassed, or gonna be in tears, or anything like that. But it is something that people want to talk about, need to talk about, and in a conventional relationship, you need to have that surface.

**Check your story at the door** – I think we have a national plague of that. You know, if you tell me that your dog died, you're going to have to sit still in hear my ten stories about my ten dogs that died. Most of the time, if you tell somebody a story, and if you had something, and they've had something similar in their own life, they are not going to spend much time with yours; they're going to tell you their story, and they're going to totally forget that you opened the subject.

You're the patient, so if you're on that end, just bite your tongue and don't go into your story, even though it's relevant, it's interesting, it's tragic—whatever—don't go there, until that person has a chance to tell theirs. There is a time to tell your story and there's a lot of times if you have had something similar to another person, it is helpful to say, "*You know, we went through this . . .*" At least, it establishes a kind of bond and a kind of credibility to your position but nevertheless, unless they ask, resist the temptation to go fully into it, because there's so many things: if you've been through heartaches similar to another person, we always have unfinished therapy needs, and that's going to be our chance to having a little therapy again, and it'll all come out, and they are cheated. So check your story at the door.

Number 6 – **Touch, when appropriate.** 'When appropriate' is an important issue nowadays. But it is phenomenal. If you're in the hospital, visiting a hospital person—probably in any situation—a touch on the hand, holding a person's hand, a touch on the back, or if they're lying in bed, a hand on the forehead, and a blessing and a prayer, the physical touch is phenomenally healing to people. It is measurably healing. By measurable, I mean that if you do a chemical analysis of person's blood after they've been touched, it is healthier than before they were touched! So that's how powerful touch is. So, almost always, a gentle touch is appropriate and needed, and yet, sometimes you've got to be careful. I think hugs are sometimes a very powerful touching experience, but in the present world, it's something to handle With care. Many times, it is necessary to ask people, "*Is it okay if I hug you?*" or "*Would you like a hug?*" or "*Is it okay?*" Even in hospital work, often I will say, "*Is it all right if I lay my hand on your head?*" to give them a blessing or something, and get permission for that. I don't ask for hand touch or hand holding; and the interesting thing is, you call on somebody in the hospital, and you say, "*I'd like to have a prayer with you, would you like a prayer?*" almost always, the person reaches out. Even the toughest old Hell's Angel motorcycle guys, if you're going to pray for them, they reach out their hand. I promise you, it has been phenomenal. It's almost like they've been told, "*If anybody comes to prayer for you, you reach out and touch.*" As if that's 'admission information.' It is such a signal of where people are and I think it is partly, when you are a hospital patient, it is a signal of regression: you are regressing to childlikeness. The touch is a child-like need. That's why I have said many times that if I am a hospital patient—this has to do with women in Ministry—I think I would prefer to have a woman Chaplain, because when you're a little boy, you'd rather have your momma than your daddy. You would! And women seem to resemble mothers more than men do.

Okay, number 7 - **avoid pat answers.** That's a really important habit to break, if you're into pat answers and fixing things. Pat answers are part of trying to fix things. It's another national plague. If I could fix the world, I would I would try to fix that. When I say, "*You know, my dad died, and I'm really sad,*" the person thinks, 'now how do I make Jim not sad'. If I say, "*My dad died,*" the initial response of, I'd say, 99% of the people is, "*I've got to make Jim feel good.*" Well, is that what I want? No, I don't want that. I want to feel sad! I do not want anybody to try to take my sadness, but the initial response of helping, caring people is, 'now I've got to try to make Jim feel better.'

Well, you make me feel better if you say, “*Yeah, it is sad to lose a Dad.*” There are always exceptions to that, but, as conscientious caregivers, you don’t have to worry that no ones going to say something some pat answers to me, 99 out of 100 would give me all the pat answers, so you don’t have to worry that you have to do it. I want one person to say, “*Yeah, it is sad to lose a Dad.*” All the other people will fix me, or try to. You don’t have to worry that nobody’s going to say, “*You know he’s better off in heaven.*” or something like. 99 people say that; I got that. I want somebody else to say “*Yeah, it is sad to lose a Dad.*”

Number 8 – **accept, allow, encourage and appreciate tears.** This is another real growth thing for all of us—especially men, probably, but women, too, though—to actually value someone crying with you, rather than wanting, directly or indirectly, to get them to stop. So that you know when a person is crying with you, that you know they’re at a better place than if they aren’t. And you value that! And you celebrate that, rather than reach for the Kleenex box. You know, I discourage my students from reaching for the Kleenex box, because, even though it seems like a nice humane, wonderful, caring thing, what does a person do when they can take that tissue? They jam those tears back in, and it’s so much better to let it flow and mess up the mascara and the makeup ... let it make a mess of you. It is much more healing than jamming it back in.

And to get the point where you actually like that, is much more helpful to people than, “*She’s crying. How can I get her to stop?*” You don’t say that, but most of the pat answers are responses to somebody making you feel uncomfortable, and you want them to stop that because you feel uncomfortable. So, to get comfortable with another person’s tears ... you’re at a good place.

Those are some general principals. These first things were about to everyday kindness, but now we move into people with deep problems. Number one is ‘take ownership’. We talked a little bit about that, but you can safely assume that most people are going to stay away. You cannot safely rationalize yourself out of a caring situation on the basis of the fact, “*Well, they’re going to be overrun with people. Everybody’s going to be there; they won’t need me, because I hardly knew her.*” I think they’re somewhere in the Old Testament it says, the mind is deceitful above all things. The mind is ingenious about giving you good reasons why you don’t have to go places you don’t want to go. And they’re all good, solid, reasonable reasons and they allow you to get out of tough situations. Well, after you do all that rationalization, then you go anyway. I know this from experience. Some neighbor has died, and I don’t know them very well. There’s going to be a visitation or viewing at a funeral home, and I can rationalize my way right out of why I don’t have to go. “*I hardly knew them; we hardly talked, and the last time we talked, he was kind of crabby toward me, and besides, they’ve got this huge family.*”

After I get done with all the rationalization, I got to get in the car and go, because most of time we’re uncomfortable moving into those places where you’re not real familiar with the person, or it’s a hard heartache. But it’s just opposite, isn’t it, “Did you see how many people came? Those people from the shop that I never met, they came.

It is a gift; it is a gift! It is a spiritually heavy gift because you are doing something that you aren't real comfortable with, and when you do a gift that is not just really easy for you, I believe it's a little higher moral value. I talk to some people who say, "*Oh, that's nothing. I do that all the time.*" Well, that's not a bit deal then. But if you go, and you don't want to go, that's a higher moral gift, I think.

Number 2 - **show up**. Now that's a whole book, but I was struck by that guy last week who said, "*God wasn't there until people showed up.*" When I'm a patient in the hospital personal, I don't like to have a lot of visitors, and there a lot of people like that, but to get a note, or a call, or somebody who stops at the door and says something, or comes in and says a prayer . . .

Most of the time, the hospital is not a place where you go to visit. Nursing homes, you go to visit, but most the time people in the hospital, you don't go there to visit. Your stop there is a symbol; it's a symbol of God's presence; it's a symbol of love; it's a message and in most cases it should be over ten minutes or less..

It is not a time where you ordinarily go into the life story. Your presence there is a powerful gift that lifts their spirits and helps their healing. But because usually we don't know enough about the person as a patient, it is hazardous to stay too long. It is far closer to being right if it's brief than it is long. Even though long seems caring, it is not, because there is a danger of draining people. I've found this especially with men who have heart attacks. Most of them are Type-A personalities. You go in to the ICU, and they had a heart attack six hours or four hours before. You go into the ICU; they say, "*Hey, Jim, how are you doing? Sit down!*" I swear, these guys work at all their relationships. They may be tied up to a dozen tubes, but they're exactly the same way. You walk out, and they die, because they gave too much. I really learned that with going into ICU, especially with men. It is very brief and it is a touch and a prayer, and I'm gone, because they put out way too much.

Okay, number 4 - **Listen 90%, talk 10%**. Most of the time, what you're there for is to help the other person say something. You're not there to say much; you don't have anything to say that's going to fix them, anyway. Most of the time your work is the help them say a few things. If it's someone convalescing at home, and you are legitimately visiting, or it's an older person in a nursing home or confined to a home, you are there to draw out their story—to hear their story—to help them tell vignettes and anecdotes and their life history. Those are times where you are really helping them because people come alive when they tell their story.— especially older people.

Reminiscence has a bad name; reminiscence is a **tremendous** thing for an older person. An older person doesn't have a future; they just have a past, and when you hear . . . when you show interest and value their stories. they come alive again, because they're telling their story; they're telling their life. So it is a great gift to people to find ways—you know some of these people can't talk—find ways to get an anecdote, to get a little piece of their life, to hear when they had their first date their wife 70 years ago. Get little pieces, you help them talk, they come to life.

Again, we're back to feelings—accept, appreciate their feelings. Don't try to change them. Value anecdote telling, incident sharing, reliving events, encourage story telling.

Number 5 - **too brief is better than too long.** I said that already. Often your presence is a healing power symbolically and you really ought not to visit per se.

Number 6 - **maintain appropriate eye contact.** I think this is worth hesitating on. We had a Pastor here once that I admired. He was a great guy, and he was a popular person on campus. If I met him on Sunday morning on the Plaza and I say, "*Hey.*" I won't tell you his name. I'll say, "*Hey, Joe,*" and we meet and maybe I had something to talk to him about; he was always he was always checking everything else out. He never would stay with me, even though I just said I wanted to say, you know, "*I'll see you tomorrow,*" he was always looking around. It's really important to try to avoid that; when you're talking with someone stay with him, and resist glancing around and noticing more important people!

I think we call voluntarily, intentionally **smile more.** Smiles are so infectious and healing and helpful and reassuring and so easy to do.

Number 8 – **avoid defensiveness.** You go visit somebody; say you're a pastor or a caregiver from your church, and they say, "*You haven't been to see me for a long time.*" Instead of getting defensive, "*Well, you know, I've been so busy . . . but yeah, I know, I really should see you more often. I'm sorry,*" or something like that. Look at it this way: "*Oh, you've really missed me.*" You hear their feelings. The feeling behind that is that they missed you, so you pick up on that, rather than get defensive.

*"You missed me; that makes me feel really good,"* rather than getting defensive. Or they say, "*My pastor has never called on me.*" Rather than defend the pastor, "*Well, he's so busy. He took a trip to the Holy Land . . .*"

No. "*You'd really like him to visit.*" Try to avoid being defensive of yourself or defending for them. Listen to the feelings, the feelings that are there. "*The pastor never visits.*" "*Oh, you'd like him to visit. You're feeling left out,*" or something like that.

Number 8 – **watch out for hot-button sidetracks.** Let's take some examples, here. The death of a child. A guy tells you about a child in his family that died. He says, "*I don't know why God would allow such a terrible thing to happen.*" Sometimes this is more of a question, "*Why would God do this to me; why would God allow this?*"

Now that is a theological issue. For most of us, no matter who we are, even if we're the professor of Theology at a Seminary, and this question comes up, it is not a question that you try to answer. It is not a legitimate question. It's a cry! It's a cry; it's a question. It's technically a question, but it's really coming out of their heart. Instead of trying to think, "*Well, you know, what the Bible says . . .*" and you try to go there with some theological answers, you go where they are.



*“This is just the most terrible heartbreaking thing that anybody could ever experience, isn’t it.”* So you get inside of it with them and you sound more like them. A true friend is a person who cries out for you, or with you, on your behalf; not a person who gives you answers to things like that.

b) an accidental death – another kind of example. *“I was driving home from work, and I stopped for a couple of beers, and backing out, I hit this guy on a bike and killed him.”* There’s the temptation—that you’re gonna work with drinking and driving. Now, that’s a huge problem, a terrible problem, but it’s not yours, in this case. It is not what you get distracted on, *“How much did you drink? What kind do you drink?”* No, it is not an issue of beer, or drinking, or something; this man is devastated. The other will take care of itself, or be taken care of. You say, *“How awful! What a terrible accident!”* You stay with the accident. Don’t get distracted by an important issue: the time when a person is crying out; it is not the time to address that moral problem.

c) *“My daughter is so depressed she can hardly function; she can barely eat; her friend, her partner, Jenny, died of cancer a few weeks ago. They’d been together thirteen years.”* Alright, what’s the hot button there? Aids . . . Gay . . . something like that, that may loom as something you want to talk about. Well, that is totally irrelevant for your response to a heartbroken person. You go with that. *“Oh, my, she’s in deep grief. This is a terrible loss. No wonder you’re worried about her.”* You stay with that. There will be enough other people, enough other time for the other issues to come up, if they should come up.

So, be aware of hot buttons. It can be behavior that you don’t approve of, theology that you consider shallow or wrong, or use of the English language. Some people just don’t talk good! Inappropriate ideas, humor improperly placed; there are so many things that can come in to an outcry that distracts you. Even asking questions about, *“When did it happen?”* In most cases, it doesn’t matter. *“Where did it happen?”* Those things are not important in the initial response—the emphasis is on ‘initial’. As you stay with the person, more information can be helpful, but in the initial response, you show the person you care about them. You stay with their anger; you stay with their fear; you show that you understand and accept, and allow their devastation. And if you do that, you probably earned the right to go farther into some of the issues of their lives.

Okay, a couple more things – **feelings**. I just want to added that on there. Name feelings constantly. It would be a very good habit to start practicing. Whenever somebody tells you anything –information, news, or anything, try to respond to the feeling, or with a feeling word.

- *“I bought a new car.”*  
*“Exciting!”*  
Not: *“What kind?”*

Try to give people a feeling response.

- *“My dad died. he was a hundred and three.”*

Reply – *“That’s sad; it’s always hard to lose a dad.”*  
Not: *“What a blessing he lived so long.”*

- *“I’m going to have sinus surgery.”*  
Reply – *“You’re in for some uncomfortable days, I imagine.”*  
Not: *“They work wonders these days.”*
- *“I’ve been losing a lot of my hair lately.”*  
Reply – *“That worries you, doesn’t it!”*  
Not: *“Oh, I know just the thing you should try for that.”*

You can imagine all different conventional responses, but try to be feeling, communicating people.

- *“My son joined the Army.”*  
Reply – *“You’re proud of him.”*  
Not: *“Where’s his basic training taking place?”*  
You might say, *“Oh, I’ll bet you’re really worried about him.”* That’s another feeling-type response.