Pastoral Care and the LGBTQ Community

On Friday, June 26, 2015, in a 5–4 decision, the Supreme Court of the United States ruled that states could not ban same-sex marriages. Specifically, the Supreme Court held that "the Fourteenth Amendment requires a State to license a marriage between two people of the same sex and to recognize a marriage between two people of the same sex when their marriage was lawfully licensed and performed out-of-State."[1] This ruling overturned the long-standing legal definition of marriage as the union between a man and a woman. The Supreme Court acknowledged that historically, marriage is the union between two persons of the opposite sex. Additionally, they recognized that "Well into the 20th century, many States condemned same-sex intimacy as immoral, and homosexuality was treated as an illness."[2] The Supreme Court also noted that with new insights, the understanding of marriage changes, and that through cultural and political developments, society began to acknowledge the rights of gays and lesbians as individuals.

Christians, on both sides of the Supreme Court ruling, used social media either to celebrate the decision or to decry the moral decline of our "Christian" nation. Denominations acted swiftly, issuing statements and promoting changes within church bylaws to protect the definition of marriage as being between a man and a woman and to protect the church's rights to perform marriages that are only between a man and a woman. An alliance of evangelical leaders gathered by the Ethics and Religious Liberty Commission released a statement dissenting from the Supreme Court's ruling, declaring the enduring biblical truth that marriage is between one man and one woman, claiming the duty of all evangelical churches to be faithful to the biblical witness of marriage, and promising that the Gospel will inform their witness.[3]

---

[1] Obergefell et al. v. Hodges, Director, Ohio Department of Health, et al., p. 1, (Supreme Court of the United States, 2015), p. 1
[2] Obergefell et al. v. Hodges, Director, Ohio Department of Health, et al., p. 2
[3] Ethics and Religious Liberty Commission of the Southern Baptist Convention, *Here We Stand: An Evangelical Declaration on Marriage,* June 26, 2015, https://erlc.com/erlc/herewestand

The Issue of Pastoral Care

With a clear demarcation between evangelical churches and the LGBTQ community, the question becomes not only how a Christian minister should provide pastoral care to the LGBTQ community but whether that is even possible. Pastoral counselor Howard Clinebell holds that one cannot counsel the LGBTQ community unless one approves of the LGBTQ life. In his book *Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth, Third Edition*, Clinebell states, "Counselors must believe that being gay or lesbian is a healthy variant of human sexuality, fully compatible with Christian values and ethics."[4] His text implies that a pastoral caregiver must share the same theological beliefs as the person they are counseling. Would that exclude caring for or counseling a person who holds to an authoritarian, patriarchal view of church and marriage, if the pastoral caregiver did not have the same interpretation of Scripture? Or can a pastoral caregiver seek the care of the person, relating to them in the context of the church community, through a ministry of reconciliation? The pastoral caregiver faces many dilemmas in caring for LGBTQ persons. One dilemma is whether the pastoral caregiver can remain true to their beliefs while caring for the person. However, the process in pastoral care differs from that in preaching. Pastoral theologian David K. Switzer says, "Pastoral care is to be offered to all in need with whom we come in contact or whom we might have opportunity to serve."[5] The issue of pastoral care may not be what the pastoral caregiver believes regarding a person's situation or how they feel about the person seeking care, but rather whether, as a pastoral caregiver, they can express empathy. Switzer concludes, "Empathy does not mean approval, only understanding and the accurate communication of that understanding."[6]

The differing church statements and approaches range from hate to inclusion, adding to the

---

[4] Howard Clinebell, *Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth, Third Edition*, (Nashville: Abingdon Press, 2011), 433-434.
[5] David K. Switzer, *Pastoral Care of Gays, Lesbians, and Their Families*, (Minneapolis: Fortress Press, 1999), 11.
[6] Switzer, 12.

question of how a Christian should provide pastoral care to the LGBTQ community. Some churches give a diversity statement welcoming and wanting "people of every race, gender, sexual orientation, marital status, age, physical and mental ability, nationality, and economic station to thrive in the full life of our community."[7] Other churches, like Saddleback Church, have no statement defining marriage and relationships but advertise their ministry to those living with HIV & AIDS, "and anyone who walks alongside those living with the disease."[8] Other churches may be welcoming, but in their statements of faith, they define marriage as being between a man and a woman. Then churches, such as Westboro Baptist Church, which asserts that God Hates Fags,[9] espouse a message of hate and condemnation of gays and lesbians. Messages of exclusion and hate by churches in North America do not make pastoral caregiving an easy task and further complicate the dilemma of how and if a Christian can give pastoral care to the LGBTQ community.

The Christian community generates a wide variety of responses to the LGBTQ community. To understand the responses the LGBTQ community receives from the religious community, I conducted a small survey among LGBTQ individuals in Texas. I received thirty-one completed surveys. To identify my demographics, I asked three questions regarding how each person identified themselves. The results are in Appendix A. To deepen my understanding of the relationship between the religious community and the LGBTQ community, I asked two questions of the respondents regarding interaction with the religious community. First, I asked them to list the reactions they had received from religious people toward the LGBTQ community and its issues. Second, I wondered what support or care they would like to hear or receive from a pastor. Regarding my first question, the respondents listed 126 responses they had received from the religious community. Of these one

[7] First Baptist Church of Austin, *What We Believe*, 2015, accessed December 9, 2015, http://www.fbcaustin.org/what-we-believe.
[8] Saddleback Church, *HIV & AIDS Initiative*, 2015, accessed December 9, 2015, http://saddleback.com/connect/ministry/HIV-AIDS-Initiative
[9] Westboro Baptist Church, *God Hates Fags*, 2015, accessed November 21, 2015, http://www.godhatesfags.com/index.html

hundred twenty-six responses, one hundred and twelve were negative and fourteen were positive.[10] The negative responses are categorized into seven groups.[11] The largest of the negative categories was condemnation, judgment/and prejudice. In these categories, the comments defamed the personhood of the LGBTQ person, preached their sexual preference as sin, the lifestyle as a choice, the actual design of sexuality, eternal condemnation, and the inability to have a relationship with God.[12] Often, the negative responses received by the LGBTQ person convey hostility, fear, ignorance, or denial.

My second question, what support or care would you like to receive from a pastor, garnered seventy responses.[13] The respondents expressed a desire to be loved unconditionally, to be told their life matters, to have their needs met, to be welcomed and accepted for who they are, and to be understood. They did not want a pastor to judge them, lecture them, treat them differently, or see them as a problem. The respondents expressed that religious persons and pastors do not focus on the LGBTQ person's sexual identity, but focus on the humanity of the LGBTQ person. Moreover, their responses made clear that the pastor should seek common ground, be impartial, and be committed to ongoing learning, sensitivity, and inclusion. Overall, the survey reveals that the relationship between participants and their religious culture, which, like our society, as Clinebell noted, "has enormous unmet needs for healing and wholeness," and that clergy can play a significant role in a person's healing.

Theological Foundations of Pastoral Care

As defined by Clinebell, pastoral care is a broad ministry that promotes wholeness in every

[10] I define negative responses as those responses that attack or misrepresent the character, personhood, or orientation of the LGBTQ person. Positive responses were those that were accepting, affirming, or encouraging toward the LGBTQ person.
[11] Judgment/prejudice, condemnation, misunderstandings, rejection, question/denial, preach/change, and avoidance.
[12] A few of these statements said to the LGBTQ person were: "they were perverted," "sodomy is a sin," "it is against God," "it is demonic possession," "you all are going to hell," "It is a violation of human dignity," "it is unnatural," "it is Adam and Eve not Adam and Steve," and "God created man and woman."
[13] The responses fell into the following groups love, acceptance and respect, support, personal concern, guidance, and what not to do.

dimension of a person's life, including spiritual/ethical, mental, physical, relational, vocational, recreational, and societal aspects.[14] He also notes that by incorporating all these dimensions, pastoral care encompasses both the nurture of the person and the prophetic, constructive change in society and nature.[15] Through constructive change, pastors strive to liberate individuals and promote justice. However, as theologian Thomas C. Oden says, none of these other aspects should "eclipse the pastor's intense concern for spiritual formation."[16] Through caregiving, the pastor addresses all areas of a person's life uniquely, with the view of growing the person's relationship with God. All caregiving is growth- and hope-centered, recognizing that growth is an upward spiral that cultivates wholeness in all the dimensions of a person's life. Additionally, theologian Jean Stairs says, the pastor caregiver "cannot know on behalf of others what their relation to God ultimately involves [but through humility can] remain open to surprise and God's direction through the spirit at work in the process of what is said."[17] Pastoral caregiving incorporates a prayerful listening to another. Pastoral psychotherapist Margaret Kornfeld says, "God heals, [caregivers] cooperate."[18] The pastor is a witness who mediates the gracious and compassionate presence of God. While pastoral caregiving takes on many shapes and forms according to the need and the context, it remains a facilitation of wholeness. Pastoral caregiving facilitates wholeness through the natural transitions of life, the extraordinary events of life, the healing of past wounds, the restoration of places of pain, and the resolution of everyday life's hurts and hang-ups. By using religious resources, Clinebell says that pastoral caregivers holistically care with "the purpose of empowering people, families, and congregations to heal their brokenness and to grow wholeness in their lives."[19] The reactions to the Supreme Court decision, sides of Christianity fully affirming and fully condemning the LGBTQ

[14] Clinebell, 30.
[15] Clinebell, 40-41.
[16] Thomas C. Oden, *Pastoral Theology: Essentials of Ministry*, (New York: HarperOne, 1983), 199.
[17] Jean Stairs, *Listening for the Soul: Pastoral Care and Spiritual Direction*, (Minneapolis: Fortress Press, 2000), 25.
[18] Margaret Kornfeld, *Cultivating Wholeness*, (New York: Continuum International Publishing Group, Inc., 2005), 114.
[19] Clinebell, 8.

community, and the results of the survey lead to the importance of facilitating wholeness for both the LGBTQ community and those in the religious community. Whether or not a pastoral caregiver holds that being gay or lesbian is compatible with the Bible, a pastoral caregiver can facilitate wholeness in an LGBTQ person following a well-founded theology of pastoral care, which incorporates the *imago Dei*, redemption, community, hospitality, and compassion.

The foundational theological principles that direct pastoral care begin with creation. Creation proclaims that human beings are made in the *imago Dei.* Genesis 1:27 states, "So God created humankind in his(sic) image, in the image of God he(sic) created them." (NRSV) The entrance of sin into the world does not negate the *imago Dei* in humans. In Genesis 9, human beings possess a sinful nature, but God states that human beings remain valuable because they are created in the image of God. Sin may distort the *imago Dei* in humanity, but the *imago Dei* remains in humanity. Since God created humankind in God's image, each and every human being possesses inherent dignity and value. Grasping the truth of the inherent value in every human being changes the way in which one sees oneself and the way one sees others, and the way one treats oneself and the way one treats others. Self-worth is no longer reliant on who one is, what one does, or what one accomplishes; it rests solely in the worth God has placed in each individual. All human beings are bearers of the *imago Dei*, worthy of respect and honor. Disregarding others' feelings, not empathetically listening to others, or trying to fix others stands in direct opposition to the respect due them as bearers of the *imago Dei*. The awareness of the *imago Dei* energizes the pastors' caregiving abilities by helping them "recognize the image in all persons with whom they work, … [letting] them see God's active presence in the midst of every problem, … sense the power of God's grace, justice, and love in all life's circumstances, … [and opening] them up to sense God's continuing lure toward increasing wholeness."[20] Pastors who grasp the awareness of the *imago Dei* actively and empathetically listen to the other, facilitate the other's expression of feelings, explore with the other, and collaborate in the

[20] Clinebell, 14.

process of healing. Pastors, as caregivers, stand "against cultural discourses … that do harm … that seek to disempower them."[21] Pastors protect and value the *imago Dei*, the image of God that God placed in all human beings by creating them in God's own image.

Although the "Fall" alienated humanity from God, professor of Christian ethics Dennis Hollinger notes that it did not destroy the image of God or negate the goodness of God's creation.[22] The essence of creation remains good. Hollinger says the "Fall" misdirected creation and humanity, but did not obliterate their essential qualities.[23] However, Hollinger asserts that "The Fall left nothing unscathed. Instead of living in the Garden in a state of grace, humanity lives in places of pain, separated from God and one another. When considering God's response to the "Fall," Catherine of Sienna notes that to redeem the image of God in humanity, God took on humanity's image, assuming human form.[24] In Christ, God shows his solidarity with humanity. Through Christ's death, God bore the weight of sin and death. The power of sin and death, which is at the core of human pain, was defeated. Humanity now has access to forgiveness, freedom, sanctification, and eternal life. Paul affirms that "All this is from God, who reconciled us to himself through Christ, and has given us the ministry of reconciliation; [that] is, in Christ God was reconciling the world to himself, not counting their trespasses against them, and entrusting the message of reconciliation to us." (2 Corinthians 5:18-19 NRSV) Hollinger says God calls all whom God redeems and who experience the sanctifying presence of the Holy Spirit to participate in God's process of redemption.[25] Pastoral caregivers are active participants in the act of redemption. Having been set free from their places of pain, the pastoral caregiver uses their own pain to participate in the pain of another. In *Out of Solitude: Meditations on the Christian Life*, Henri Nouwen states, "It is not proving [oneself] better than others

[21] Clinebell, 80.
[22] Dennis Hollinger, *Choosing the Good,* (Grand Rapids: Baker, 2002), 75.
[23] Hollinger, 76.
[24] Suzanne Noffke, O.P., trans.. *Catherine of Siena: The Dialogue*, (New York: Paulist Press, 1980), 46.
[25] Hollinger, 82.

but confessing just like others that is the way to healing and reconciliation."[26] In addition, the pastoral caregiver participates in reconciliation and redemption by offering comfort that reflects the comfort they have received from God. God "consoles us in all our affliction, so that we may be able to console those who are in any affliction with the consolation with which we ourselves are consoled by God. For just as the sufferings of Christ are abundant for us, so also our consolation is abundant through Christ." (2 Corinthians 1:4-5 NRSV) Pastoral caregivers participate in the process of healing and redemption that began on the cross and will end in Christ's return.

The process of healing is rooted in our shared humanity, which fosters community. Nouwen says, "By the honest recognition and confession of our human sameness, we can participate in the care of God who came, not to the powerful but powerless, not to be different but the same, not to take away our pain but to share it. Through his participation, we can open our hearts to each other and form community."[27] God designed humans to live in relationship and flourish in community. As God lives in relationship and community within the plurality and unity of the Trinity, humans live in relationship and community within plurality and unity with each other. According to pastoral theologian Deborah van Deusen Hunsinger, the Christian community's "primary locus is the communion of love and freedom that characterizes the intimate mutual indwelling among the members of the Trinity: Father, Son, and Holy Spirit."[28]

Humans are not to live in self-sufficiency, independent of one another. However, each person maintains their distinct identity and personal integrity while living in a community joined together by Christ in fellowship through the indwelling Spirit. Genesis 2:18 attests to the truth that God created humans to live in a mutuality of giving and receiving of love, saying, "It is not good for man to be alone." Additionally, God designed the Church to live in community as one body with many parts. Community is the ground on which people grow and heal. In *Cultivating Wholeness*, Kornfeld asserts

[26] Henri Nouwen, *Out of Solitude: Meditations on the Christian Life*, (Notre Dame: Ava Marie Press, 2000), 135.
[27] Nouwen, *Out of Solitude*, 43.
[28] Deborah van Deusen Hunsinger, "Practicing Koinonia," Theology Today 66, (2009): 346.

that "community is not only the place where healing occurs, it is the means through which it happens."[29] However, communities are in need of healing themselves. Sick and dysfunctional communities aggravate problems, increase issues, exclude outsiders, and make the well sick. Unhealthy communities raise people in an atmosphere of fear, and they grow up, as Kornfeld asserts, not knowing "who they are meant to be. They have learned either to hate or not see the best in themselves: their lively assertiveness, sexuality, and creativity."[30] Communities need to be safe, inclusive, just, supportive, and authentic. Pastoral caregivers and church leaders must instill essential skills and practices in their communities to foster trust, love, acceptance, respect, honesty, and mutual understanding. Only through healthy communities of mutual care, healing, and hope can caregivers promote wholeness because, as Stairs holds, "pastoral care is a function of the entire congregation."[31] Proverbs 27:17 states, "As iron sharpens iron, so one person sharpens another" (NRSV), thus relaying the truth that relationships with others are invaluable in facilitating the wholeness that God desires. These relationships in community are neither authoritarian nor sacerdotal. They are soul-caring relationships, which Stairs says, provide "unconditional support, truth-telling, accountability, and vocational discernment. [They] see beyond the secular and individualistic dimension of life to the sacredness and interdependence of all of life."[32] They are a sharing of our human experiences in an atmosphere of mutuality and accompaniment. Clinebell states, "Wholeness grows best in relationships in Spirit-energized caring communities where God's justice-based love comes alive in caring group commitments."[33]

In Scripture, God calls both communities and pastors to create an atmosphere of hospitality by providing care for the stranger, as this is part of the support and accompaniment found in mutual love. "Let mutual love continue. Do not neglect to show hospitality to strangers, for by doing that

[29] Kornfield, 16.
[30] Kornfield, 31.
[31] Stairs, 135.
[32] Stairs, 140.
[33] Clinebell, 55.

some have entertained angels without knowing it." (Hebrews 13:1-2 NRSV) Hospitality is another theological foundation that forms the basis of pastoral care. Hospitality offers more than comfort; to offer hospitality, priest Margaret Guenther says, is to "invite someone into a space that offers safety and shelter and [puts one's] own needs aside, as everything is focused on the comfort and refreshment of the guest."[34] Hospitality attends to the physical, relational, and spiritual needs of others. Stairs says, "As pastoral caregivers, we offer the best of ourselves to another, including a willingness to be generous of spirit and warmly hospitable. We offer meaningful space and time that is uncluttered and personal, but spacious and appropriately comforting."[35] A pastoral caregiver creates space physically, relationally, and spiritually. Physically, one establishes an inviting room in which another feels welcomed. To create an atmosphere of welcome, Guenther says that the physical aspects of the room should be pleasant, uncluttered, quiet, and personal but not overly so.[36] Relationally, the pastoral caregiver creates a place that is safe from interruption and secure from the fears of criticism, exposure, or rejection. Hospitality recognizes the *imago Dei*, respecting and holding precious the soul of the other. Others can come to the pastoral caregiver bearing their souls, burdened with fear, shame, guilt, or pain, and feel safe. Through reflecting God's love and mercy, the pastoral caregiver attends to the spiritual aspects of hospitality. The theology of hospitality promotes a companionship that respects the other's privacy and seeks the other's best. Essentially, as Nouwen notes, hospitality means "the creation of free space where the stranger can enter and become a friend instead of an enemy. Hospitality is not about changing people, but about offering them space where change can occur. Nowen says that it is not to bring men and women over to our side, but to offer freedom not disturbed by dividing lines."[37] Hunsinger understands hospitality is a sacred space where one lays aside one's own concerns, "following the example of Christ, who emptied himself of his

[34] Margaret Guenther, *Holy Listening: The Art of Spiritual Direction*, (Plymouth: Cowley Publications, 1992) 14.
[35] Stairs, 21.
[36] Guenther, 15.
[37] Henri Nouwen, *Reaching Out: The Three Movements of the Spiritual Life,* (New York: Image Books, 1986), 71.

equality with God in order to participate fully in our human plight."[38] In the sacred space of hospitality, the pastoral caregiver meets the other with respect, connection, and care.

Care begets cure, and compassion begets healing. Compassion loves others as the Father loves us. Nouwen says, "Compassion–which means, literally, 'to suffer with' – is the way to the truth that we are most ourselves, not when we differ from others, but when we are the same."[39] Christ illustrates compassion in the parable of the Good Samaritan. (Luke 10:25-37) Christ says, "A man was going down from Jerusalem to Jericho, and fell into the hands of robbers, who stripped him, beat him, and went away, leaving him half dead." (NRSV) Christ does not define the injured man by ethnicity, social status, religion, or any other means. Christ defines the injured man only by what happened to him. As a point of protest, Christ demonstrates the exclusiveness and injustice of the religious system by the refusal of the priest and Levite to help the injured man. The religious clergy were more concerned with orthodoxy than with participating in God's plan. The religious clergy sought holiness and purity of practice through separation from all that is impure rather than through showing mercy. Jesus further exposes the exclusiveness of the religious clergy by describing the man who showed compassion as a Samaritan. When he saw the man, the Samaritan did not pass by on the other side but acted out of compassion. The Greek word "σπλαχνίζομαι" for compassion conveys an intense response that arises from the gut, which is the basic and decisive attitude that moves one to action by entering into the situation with the other.[40] The injured man is lying on the side of the road, half-dead, vulnerable, helpless, and unable to save himself. The Samaritan, moved with compassion, acts. The Samaritan's love was blind to every social, cultural, or religious boundary. Unbounded by prejudice, he transcended barriers to help those in need. He met the man's immediate needs by pouring oil and wine on the wounds, binding the wounds, and providing a place of safety, rest, and

[38] Deborah van Deusen Hunsinger, "Paying Attention: The Art of Listening," Christian Century, 123, no. 17, (2006): 30.
[39] Nouwen, *Out of Solitude*, 135.
[40] Gerhard Friedrich, ed., *Theological Dictionary of the New Testament*, Trans. by Geoffrey W. Bromiley, D. Litt., D.D., Vol VII, X vols. (Grand Rapids: Wm. B. Eerdmans Publishing Company, 1976), 554.

healing. The Samaritan also met both the man's relational needs and future needs. He did all that was needed for the man's complete recovery, but he did not do it alone. By leaving the man with the innkeeper, the Samaritan established a community for the man and provided help for his future. The Samaritan brought him to a community to aid in his recovery and assured him of continued healing. Through his promise to pay any further debt, the Samaritan assured the man's freedom. Christ invites all believers to love their neighbors through acts of mercy and participate in His redemptive action as ministers of reconciliation, delivering others from injustice and bondage into a community of life and freedom. Acting out of compassion and unbound by prejudice, a pastoral caregiver sees the hurting individual and attends to the individual's immediate, future, and relational needs. Psychologist David Benner says, "Pastoral care is a ministry of compassion, and its source and motivation is the love of God. In its most basic form, pastoral care is simply a Christian reaching out with help, encouragement, and support to another at a time of need."[41]

Practical Applications in Pastoral Care

Compassion and love are at the heart of pastoral care and integral to the Christian identity. Love defines a disciple of Jesus. On the night before his death, Jesus said, "I give you a new commandment, that you love one another. Just as I have loved you, you also should love one another. By this everyone will know that you are my disciples, if you have love for one another." (John 13:34-35 NRSV) However, religious persons have not always responded with love or compassion toward the LGBTQ community. Instead, within the religious context, the emotionally charged issues of sexual orientation, identity, and behavior have divided people and communities. The responses in the survey regarding what the LGBTQ community heard from religious people verified that truth. Responses such as "I think we should just kill all gay people," "You are going to hell," "God has no place for you in heaven," "God does not love you," and "Homosexuals are a violation of human

[41] David G. Benner, *Strategic Pastoral Counseling: A Short-Term Structured Model*, (Grand Rapids: Baker Academic, 2003), 19-20.

dignity." Comments such as these have isolated and hurt those in the LGBTQ community. One respondent stated that they do not expect anything from a pastor and that they simply wanted their rights guaranteed by the state, as religion has no bearing on the state. The conflict between the religious community and the LGBTQ community adds to the difficulty of pastoral care for an LGBTQ person and the issues the LGBTQ person faces. While facing the issues all humanity faces, Clinebell understands that the LGBTQ person also faces the emotional transitions and tasks of understanding their sexual orientation, revealing their sexual orientation, handling rejection by friends, family, and employers, and experiencing depression and suicidal tendencies.[42] The pastoral caregiver enters these situations with the LGBTQ person compassionately and mercifully, not only to facilitate wholeness and growth in the person's life, but also to bring healing and peace to the injustice the person has suffered from the religious community. The pastoral caregiver represents the religious community, and their compassion can accomplish much. Nouwen recognizes that "Compassion, to be with others when and where they suffer and to willingly enter into a fellowship of the weak is God's way to justice and peace among people."[43]

Through compassion, the pastoral caregiver begins to speak to the soul of the LGBTQ person, affirming their dignity and value. Despite the good intentions of many religious people saying that they love the sinner and hate the sin, this phrase strikes at the core of the human dignity of the LGBTQ person. CPE educators Rev. Nancy Anderson and Rev. Jo Clare Wilson say that such a statement made to a LGBTQ person conveys that the person is doing something wrong, and once they correct their behavior, God and the religious community will approve of them.[44] Herein lies the crux of the conflict. Many religious persons and denominations believe sexual behavior other than heterosexual relations or celibacy is a sin. Additionally, persons and denominations view sexual

[42] Clinebell, 430.
[43] Henri Nouwen, *Here and Now: Living in the Spirit*, (New York: The Crossroad Publishing Company, 2003), 135.
[44] Rev. Nancy K. Anderson, ACPE Supervisor and Rev. Jo Clare Wilson, ACPE Supervisor, "Gay, Lesbian, Bisexual, and Transgendered (GLBT) People," in Professional Spiritual & Pastoral Care: A Practical Clergy and Chaplain's Handbook, edited by Rabbi Stephen B. Roberts, (Woodstock: Skylight Paths Publishing, 2012), 287.

orientation as a choice or a lifestyle. Thus, often, any LGBTQ orientation brings ostracism and reprisal. With numerous scientific studies beginning in the 1950s, the medical community began to change its view on same-sex attraction. In 1986, the American Psychiatric Association (APA) removed all mention of gayness or homosexuality as a pathological condition or mental illness from the *Diagnostic and Statistical Manual of Mental Disorders* (DSM).[45] Then in 2013, the APA issued a Position Statement on Homosexuality saying, "The American Psychiatric Association believes that the causes of sexual orientation (whether homosexual or heterosexual) are not known at this time and likely are multifactorial, including biological and behavioral roots which may vary between different individuals and may even vary over time."[46] The APA's statement gives credibility to what many in the LGBTQ community say. Several of the LGBTQ participants noted on their surveys that their sexual orientation was not a choice or a lifestyle. One even said, "Why would I choose to be hated, if this was a fad, choice, or lifestyle?" It is in the midst of these seemingly irreconcilable differences that the pastoral caregiver is able to speak life by entering into the pain of the LGBTQ person, thoroughly acknowledging their feelings of rejection or abandonment. By validating the LGBTQ person's feelings, the pastoral caregiver says the person matters. The American Psychiatric Association "recognizes that [discrimination against individuals with same-sex attraction], as well as societal, religious, and family stigma, may adversely affect the mental health of individuals with same-sex attraction."[47] According to the surveys, the participants' primary desire was to be loved, valued, and accepted as a human being. Whatever theological understanding the pastoral caregiver believes regarding sexual orientation, they live committed to God's unconditional love towards every human being and the inherent dignity every person holds because they are made in the image of God.

---

[45] Gregory M. Herek, PhD., "Homosexuality and Mental Illness," 2012, Accessed November 25, 2015, http://psychology.ucdavis.edu/rainbow/html/facts_mental_health.html
[46] David Scasta, M.D., and Philip Bialer, M.D., "APA Official Statement: Position Statement on Issues Related to Homosexuality", American Psychiatric Association, December 2013.
[47] David Scasta, M.D., and Philip Bialer, M.D., "APA Official Statement: Position Statement on Issues Related to Homosexuality", American Psychiatric Association, December 2013.

Committed to both the inherent dignity of every human being and God's love and mercy, Guenther realizes that the pastoral caregiver "is able to accept any disclosure with equanimity. Through [the pastoral caregiver's] loving acceptance, [they are] able to model and reflect the love of God so yearned for by the [other] who despairs for his [or her] worthiness."[48]

Loving acceptance acknowledges that all human beings share many similarities and is sensitive to the terminology and language used when discussing relationships in casual conversation, teaching, and preaching. First, the pastoral caregiver should use inclusive language when talking about relationships that do not have a heterosexual bias. A simple way to be inclusive is to substitute 'spouse' and 'partner' for 'husband' and 'wife'. Anderson and Wilson say, "The [LGBTQ] community will listen to the language of someone to determine the safety of and the opinions of sexual orientation."[49] Second, while the LGBTQ community may forgive someone for unfamiliarity with terminology because they know the pastoral caregiver has a good heart, understanding the correct terminology is also helpful. Knowing the proper terminology is especially useful when the pastoral caregiver is unknown to the LGBTQ community. Instead of derogatory or offensive language, the pastor caregivers should use language acceptable to the LGBTQ community. The pastoral caregiver should not use the term "homosexual" because it is a clinical term, considered stigmatizing by many in the LGBTQ community. In its place, the pastor should use lesbian, gay, bisexual, or another term in referring to sexual identities. The use of the term "queer" may or may not be appropriate. This term is in a transitory stage. In the 1970s, it was an offensive and derogatory term, but now the LGBTQ community embraces it as a matter of pride. The term "lifestyle" denotes choice, and whether or not the pastoral caregiver personally believes LGBTQ is a choice or not, they should avoid its use.[50] The pastoral caregiver needs to be aware of their own language and the language of

[48] Guenther, 21.
[49] Anderson and Wilson, 285.
[50] Southern Illinois University Evansville, "LGBT Resources: Safe Zone," 2015, accessed November 28, 2015, http://www.siue.edu/lgbt/definitions.shtml.

other Christians to promote an atmosphere of inclusive and non-offensive language and conversation.[51] Third, in addition to vocabulary, the pastoral caregiver promotes loving acceptance through becoming familiar with the LGBTQ community's issues, problems, and spiritual struggles. This requires time to gain knowledge and understanding through both reading and dialogue. Having LGBTQ people or persons with whom to dialogue allows the pastoral caregiver to discover the spiritual, emotional, and relational issues facing them. The reality is that the pastoral caregiver is already friends with the LGBTQ person, whether they are aware of it. Building on these three practices and sensitivities, the pastoral caregiver increases their awareness of the debilitating effects of culture on the LGBTQ community, their understanding of what LGBTQ individuals feel, and their ability to provide comfort and pastoral care.

After building bridges of relationship, an LGBTQ person will most likely trust the pastoral caregiver and begin conversations regarding the questions of their sexual identity. Sexual identity questions occur often in a person's youth and are particularly sensitive at this time. Switzer emphasizes that the pastoral caregiver will "get nowhere at all unless at the beginning [they] help the young person acknowledge their feelings about being there [with the pastoral caregiver] and then respond[s] to their feelings and any suspicions that they might have."[52] The young person needs reassurance that the pastoral caregiver will not reject them and that the caregiver will keep the matter confidential. With regard to confidentiality, Switzer says that the caregiver needs to be sensitive to the young person's anxiety over their parents' finding out.[53] Confidentiality always seeks the best interest of the person seeking care. If the person seeking care is planning suicide, confidentiality is not in the person's best interest, and the pastoral caregiver should inform the necessary parties. Several studies show that LGBTQ youth are two times more likely to attempt suicide than other

[51] Additional resources regarding LGBTQ terminology can be found at the following websites: http://itspronouncedmetrosexual.com/2013/01/a-comprehensive-list-of-lgbtq-term-definitions/; http://www.wearefamilycharleston.org/lgbt-a-z-glossary/; http://www.algbtical.org/2A%20GLOSSARY.htm
[52] Switzer, 81.
[53] Switzer, 82.

youth, and another study found that nearly 25% of transgender youth attempted suicide.[54] A person recently asked his pastor about his complicity with LGBTQ youths' suicides because of the church's strong anti-homosexual stance, and the pastor said that he could not "go there."[55] A critical or corrective response and rhetoric by a pastor or church can result in isolating the young person and stymying the relationship. Switzer asserts that the probability of suicide or attempted suicide diminishes when the pastor's genuine care and skill in eliciting the young person's story and feelings enables the person to feel less isolated.[56] The care and skill consists of attending well to the other by listening to gather information through the person's tone and manner of presentation, suspending any personal judgments, focusing on the person's internal experiences and external responses, discovering content, and finding the themes present. Hunsinger notes that responsive communication, achieved through open-ended and clarifying questions, as well as careful reflection on the pastoral caregiver's perceptions of both verbal and nonverbal cues, conveys interest and caring, allowing the LGBTQ youth or person to share at their own pace.[57] Switzer, in *Pastoral Care of Gays, Lesbians, and Their Families,* gives sixteen open-ended and clarifying questions to explore sexual identity with another person. These questions are not for the pastor to determine the sexual orientation of the other person, but to give the other person the ability to express, identify, and explore their sexual identity.

Within a space of trust and relationship, the LGBTQ person or youth can share their deepest struggles. One of these struggles is the LGBTQ person's desire or need to come out. Clinebell says that "Often gay men and lesbian women seek counseling during the coming out process, particularly as it affects key relationships for them."[58] The pastoral caregiver should explore with the person their desire to come out, understanding the fears of rejection from family and friends. The desire to come

[54] Center for Disease Control and Prevention, "Lesbian, Gay, Bisexual, and Transgender Health," 2015, accessed November 28, 2015, http://www.cdc.gov/lgbthealth/youth.htm
[55] Personal conversation with the person who asked the question. Neither the person's name nor the pastor's name are identified to maintain confidentiality.
[56] Switzer, 88.
[57] Hunsinger, "Paying Attention," 27 & 29.
[58] Clinebell, 432.

out may result from the burden of remaining hidden. Hiding one's sexual orientation, as hiding any truth of who one is, takes a toll on other aspects of one's personality. Switzer says, "To come out to significant persons is not just a need to have a relationship of genuineness with them, but also to have a sense of genuineness within one's own self."[59] Coming out is part of the process of becoming whole and no longer living a fragmented life. However, Theologian T. W. Jennings notes that, instead of being a means of becoming whole, coming out, "may be expressive of self-destructiveness, or excessive preoccupation with sexual identity, and unrealistic with respect to anticipated responses."[60] The pastoral caregiver provides the means by which an LGBTQ person coming out can identify and assess their need to come out. Once the need for coming out is understood, the pastoral caregiver should help the person identify a family member or friend who would respond with understanding, acceptance, and love and support. After determining the first person, the pastoral caregiver helps the LGBTQ person assess the reactions of other family members and friends and develop a plan for revealing themself to them. Developing a strategy involves designing determinable and measurable steps for approaching each person, preparing the LGBTQ individual for the reactions of family and friends, and planning how they will respond to these reactions. The pastoral caregiver does not say how they would approach the situations because only the LGBTQ person will face the consequences. The pastoral caregiver supports the LGBTQ person in coming out and offers love, support, and acceptance throughout the process. Switzer says, "Coming out is not an easy decision, nor is it a simple process for most to go through."[61] However, it need not be a lonely one. It is an opportunity for growth and healing for LGBTQ person and their relationships.

The LGBTQ person's relationships add an extra dimension to pastoral care for those coming out, in which the pastoral caregiver extends care to the family of the LGBTQ person. Parents may

[59] Switzer, 108.
[60] T.W. Jennings, "Homosexuality," in *Dictionary of Pastoral Care and Counseling*, ed. Rodney J. Hunter, (Nashville: Abingdon Press, 1990), 531.
[61] Switzer, 109.

request pastoral care when they discover the sexuality of one of their children or when their child comes out. At this time, parents wrestle with the surprise of the discovery, the idea that they are responsible for their child's sexuality, and with the resolution or reconciliation of their relationship with their child. Siblings of the LGBTQ person may have similar issues to resolve. The siblings may need someone to help them handle their brother's or sister's revelation and nurture their relationships with their gay brother or lesbian sister. In meeting with the family, the pastoral caregiver seeks reconciliation as the primary goal, regardless of the family's level of functionality or the family's beliefs about sexuality. Unfortunately, not all family situations end in reconciliation. Parents, siblings, and other family members may set firm conditions for a relationship that they are unwilling to alter. Significant barriers to the alteration of the conditions are the belief that the gay or lesbian person could change their condition, and beliefs that their child's sexuality is a violation of Scripture. In these instances, Switzer advises that the pastoral caregiver can inform the family about available information on sexual orientation and identity and about readings that will assist them in working through the issues.[62] Additionally, regardless of what the pastoral caregiver believes the Bible says about human behaviors, the caregiver can focus the family's attention on Scripture that promotes reconciliation and love. The goal of pastoral caregiving in family situations is, as always, reconciliation, even if it does not come about.

Pastoral caregiving during life stages and circumstances of an LGBTQ person, such as long-term care, rehabilitation, acute care, and hospice, requires not only the pastoral care needs arising from the situations themselves but also the pastoral care needs arising from the complications between the biological family of the LGBTQ person and their partner. In these situations, the pastoral caregiver acts as a mediator, helping navigate what is best for the LGBTQ person, seeking reconciliation where possible. People want those who are closest to them with them in the darkest moments of life because this helps them feel safe and accepted, especially for the LGBTQ person

[62] Switzer, 128.

who is likely to be their partner. Thus, as Anderson and Wilson note, these situations give the pastoral caregiver the opportunity to advocate for the acknowledgment, recognition, and inclusion of the LGBTQ person's partner.[63] The caregiver advocates for the partner's inclusion with the family and with the staff and care-providing facility, recognizing the closeness of the relationship. Other complications in the health care of an LGBTQ person, such as dementia, AIDS, and HIV-positive, may require other pastoral skills. Additionally, Anderson and Wilson note that Dementia requires people who share memories with the person to surround them, keeping the memories alive.[64] These include family, friends within and outside the LGBTQ community, and partners. HIV-positive, while no longer constituting a death sentence, requires sensitivity and the ability to help the LGBTQ person, their partner, their family, and their friends grieve as they come to understand what the diagnosis of HIV holds. Switzer says that it is essential for the pastoral caregiver to "be sure that the family [and friends] know what being HIV-positive is and what having AIDS is. … [In addition, all concerned] need to be encouraged to talk openly about their fears."[65] Once symptoms of AIDS begin, all concerned need to know what to expect and how AIDS progresses. Switzer says that anger towards the LGBTQ person because they did this to themself and questions about God's activity in the situation may arise.[66] Throughout these life stages and circumstances, the pastoral caregiver enables the LGBTQ person and their friends and family to go through the depth of the issue before coming to the other side and facing the issue anew.

Conclusion

Through the situations discussed in this paper and many others, pastoral caregivers can speak blessings into the lives of LGBTQ persons. This paper does not include a comprehensive list of all the situations particular to LGBTQ persons, nor does it seek to deal with pastoral care opportunities

[63] Anderson and Wilson, 289.
[64] Anderson and Wilson, 289.
[65] Switzer, 132.
[66] Switzer, 133.

with LGBTQ persons that do not revolve around their sexual orientation. LGBTQ persons' pastoral care needs are identical to those of others, with some additional challenges. They experience the same physical, emotional, relational, and spiritual issues that all humans do. Pastoral caregivers offer care in a loving, sensitive, understanding manner to all who seek help, including those struggling with sexual identity. Pastoral caregivers concretely demonstrate God's love to others through empathetic listening, understanding, and acceptance of the other person. Empathy, understanding, and acceptance do not necessarily mean approval but constitute a primacy of understanding that all people are made in the image of God and a dedication to demonstrating God's love, mercy, and grace. The pastoral caregiver can further demonstrate their understanding and commitment by helping their congregation become a place of love and respect. However, churches have many decisions to make in order to remain faithful to their beliefs and to live the life of compassion to which Christ calls. While many in the religious community and the LGBTQ community have differing views and beliefs on the topic of sexuality, neither needs to feel threatened by the differences.

APPENDIX A

Do you identify your gender with the sex you were assigned at birth?

Yes	No	Prefer not to answer	I do not know
25	4	1	1

What would you say is your sexual preference?

Heterosexual	Homosexual	Polysexual	Asexual	Prefer not to answer	I do not know
0	19	8	3	0	1

What would you say is your romantic preference?

Heteroromantic	Homoromantic	Polyromantic	Aromantic	Prefer not to answer	I do not know
3	19	6	2	0	1

The terms used for sexual preference and romantic preference were determined in discussions with those who attend the Sexual Identity Forum (SIF) in Waco, TX. I now realize that the use of preference is not a term that is friendly to the larger LGBTQ community, as it denotes a choice. In my questions, I should have used orientation rather than preference.

Bibliography

Anderson, ACPE Supervisor, Rev. Nancy K., and Rev. Jo Clare Wilson, ACPE Supervisor. "Gay, Lesbian, Bisexual, and Transgendered (GLBT) People." In *Professional Spiritual & Pastoral Care: A Practical Clergy and Chaplain's Handbook*, edited by Rabbi Stephen B. Roberts, 282-290. Woodstock: Skylight Paths Publishing, 2012.

Benner, David G. *Strategic Pastoral Counseling: A Short-Term Structured Model.* Grand Rapids: Baker Academic, 2003.

Cameron, Dana, and Bonnie Berkowitz. *The state of gay rights around the world.* June 26, 2015. https://www.washingtonpost.com/graphics/world/gay-rights/ (accessed November 27, 2015).

Centers for Disease Control and Prevention. *Lesbian, Gay, Bisexual, and Transgender Health.* 2015. http://www.cdc.gov/lgbthealth/youth.htm (accessed November 28, 2015).

Clinebell, Howard. *Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth, Third Edition.* Edited by Bridget Clare McKeever. Nashville: Abingdon Press, 2011.

Ethics and Religious Liberty Commission of the Southern Baptist Convention. *Here We Stand: An Evangelical Declaration on Marriage* . 26 June, 2015. https://erlc.com/erlc/herewestand (accessed November 21, 2015).

First Baptist Church of Austin. *What We Believe.* 2015. http://www.fbcaustin.org/what-we-believe (accessed December 9, 2015).

Friedrich, Gerhard, ed. *Theological Dictionary of the New Testament.* Translated by Geoffrey W. Bromiley, D. Litt., D.D. Vol. VII. X vols. Grand Rapids: Wm. B. Eerdmans Publishing Co., 1976.

Guenther, Margaret. *Holy Listening: The Art of Spiritual Direction.* Plymouth: Cowley Publications, 1992.

Herek, PhD., Gregory M. *Facts About Homosexuality and Mental Health.* 2012. http://psychology.ucdavis.edu/rainbow/html/facts_mental_health.html (accessed November 25, 2015).

Hollinger, Dennis. *Choosing the Good.* Grand Rapids: Baker, 2002.

Hunsinger, Deborah van Deusen. "Paying Attention: The Art of Listening." *Christian Century* 123, no. 17 (August 2006): 24-30.

Hunsinger, Deborah van Deusen. "Practicing Koinonia." *Theology Today* 66 (2009): 346-367.

Jennings, T W. "Homosexuality." In *Dictionary of Pastoral Care and Counseling*, edited by Robert J. Hunter, 528-532. Nashville: Abingdon Press, 1990.

Kornfeld, Margaret. *Cultivating Wholeness.* New York: Continuum International Publishing Group, Inc., 2005.

Noffke, O.P., Suzanne, trans. *Catherine of Siena: The Dialogue.* New York: Paulist Press, 1980.

Nouwen, Henri. *Here and Now: Living in the Spirit.* New York: The Crossroad Publishing Company, 2003.

—. *Out of Solitude: Three Meditations on the Christian Life.* Notre Dame: Ave Maria Press, 2000.

—. *Reaching Out: The Three Movements of the Spiritual Life.* New York: Image Books, 1986.

Obergefell et al. v. Hodges, Director, Ohio Department of Health, et al. 14-556 (Supreme Court of the Unted States, June 26, 2015).

Oden, Thomas C. *Pastoral Theology: Essentials of Ministry.* New York: HarperOne, 1983.

Saddleback Church. *HIV & AIDS Initiative.* 2015. http://saddleback.com/connect/ministry/HIV-AIDS-Initiative (accessed December 9, 2015).

Scasta, M.D., David, and Philip Bialer, M.D. *APA Official Actions: Position Statement on Issues Related to Homosexuality.* APA Official Action, American Psychiatric Association, 2013.

Southern Illinois University Evansville. *LGBT Resources: Safe Zone.* 2015. http://www.siue.edu/lgbt/definitions.shtml (accessed November 28, 2015).

Stairs, Jean. *Listening for the Soul: Pastoral Care and Spiritual Direction.* Minneapolis: Fortress Press, 2000.

Switzer, David K. *Pastoral Care of Gay, Lesbians, and Their Families.* Minneapolis: Fortress Press, 1999.

Westboro Baptist Church. *GodHatesFags.* 2015. http://www.godhatesfags.com/index.html (accessed November 21, 2015).