

The effectiveness of CPE course for the formation of pastoral agents / pastoral care workers / givers.

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“The heart of CPE is ministry with people and learning from that ministry through reflection, discussion, and evaluation with peers and supervisor.”

The CPE course can be designed to bring together theological students, ministers, hospital visitors and pastoral care givers / workers of all faiths into supervised encounters with persons in crisis in hospitals and community settings. Students develop new awareness of themselves and of the needs of peoples to whom they are called to minister through intense involvement with persons in need and responses from peers, supervisor and lectures.

In the CPE process of learning, skills are developed in interpersonal and inter professional relations. Students interact with inter-disciplinary teams in the process of helping persons. The CPE course is discipline based and out come oriented. That is; the out come goes hand in hand with our activities / interventions. For instance the interventions can be; being fully present, available, active, listening, and vulnerable, praying, inviting, reflecting or confronting. The out come is the impact or difference these activities make. The outcome is sensory based. (It can be expressed to others and recognized when it happens in terms of what we see and feel. It can be briefly described to other persons in terms that have meaning or their perception of how this out-come fits within the overall interdisciplinary care plan and objectives. Finally it can be shared with the person care has been given.)

The CPE course deepens relationships with patients, care teams and persons from community settings. Pastoral care workers/givers’ abilities are challenged and they become emotionally present to persons they minister to. Pastoral care givers’ interventions contribute to healing and wellbeing of persons. The course also enables pastoral care givers become non-judgmental in their ministry to persons.

Aims and objectives of doing CPE:

- ◆ Prepare shepherds so that people find meaning in life especially when confronted with suffering, powerlessness and alienation thus fostering the overall mission of Jesus. “I have come so that they may have life and life to the full” (John 10:10).
- ◆ To secure that connection between physical, psychological, social and spiritual dimensions of the human person.
- ◆ Provide spiritual services and pastoral counseling for faith communities.
- ◆ Respond to expressed requests for the sacraments by Christians in different environments and circumstances.
- ◆ Communicate to the ministers from different religions and denominations the wishes of assistance from one of the denominations / religion members.
- ◆ Facilitate the pursuance of prayerful atmosphere in community settings.

- ◆ Offer ethical / theological advice in community settings
- ◆ Pursue continued improvement in pastoral care through reading publications, sharing with other pastoral care givers their own experiences and challenges in the ministry.

The CPE course is generally designed to be conducted for ten solid weeks; during the fifth week, the participants in the CPE do mid-term evaluations. Each CPE student is evaluated by the peer group member and the CPE supervisor is also evaluated; all in reference to the learning contract each student had made at the beginning of the CPE course. (This is an exploratory evaluation.) During the tenth week, final evaluations are done. This final evaluation of each student is kept in the file of the student who has done a CPE course. The evaluation is kept confidential; it can only be released with a written consent / permission of the student.

The weekly process / time table is as follows:

Didactics in lecture or seminar forms, ten hours; Interpersonal relationship discussions (**IPG**) three hours, Individual supervision by a qualified CPE supervisor (**IS**), **Practicum** 27 hours.

From the didactics presented, the interpersonal group discussions done, the individual supervisions conducted by the CPE supervisor and the practicum done, the students developed their theological understanding and reflections on specific human situations of ministry within the African context. The students developed communication skills in interpersonal and inter-professional relationships; they became capable to interact with interdisciplinary teams in the process of helping persons. The students' abilities are challenged and they became emotionally present to patients / persons. The students' interventions to persons contribute to persons' healing and wellbeing. The students became more sensitive to the persons' concerns / issues, and they became more non-judgmental in their approach towards persons.

Theological reflections on specific human conditions give those who do CPE new understanding of ministry which can be adapted within the African context.

Recent feed back by hospital staff on CPE students / pastoral caregivers of the sick from hospital settings:

- ◆ Patients felt supported; they realized God's presence, love and care in their lives. They felt consoled; they received spiritual support and guidance.
- ◆ The presence of the students / pastoral care givers gave some consolation to patients and their attendants. They were sensitive and responsive to the needs of the patients and their attendants.
- ◆ The students / pastoral care givers gave spiritual guidance, prayers, consolation; and this let some of the patients receive the sacraments again.
- ◆ The students / pastoral care-givers using counseling skills, resources of the patients and the resources of their attendants made patients pay the hospital bills; these in turn improved staff relationships with the patients, and their attendants became smother.
- ◆ The students / pastoral care givers were kind, considerate, good listeners and patient with the staff members, the patients and their attendants.
- ◆ The students / pastoral care givers were available, active and available in their ministry.

- ◆ The students / pastoral care givers gave the staff moral and spiritual support in their work; therefore the staff improved in their services to the hospital.
- ◆ The students / pastoral care givers' pastoral visits into the wards were moderate visits and their prayers were in context and not very long compared to some of the visits and prayers made by some members of some Christian denominations and sects who would stay for longer durations with patients.

Recommendations:

1. From the feed backs received, it is clear that CPE courses well utilized is a useful tool for forming pastoral care givers in hospital and community settings. The pastoral care givers become capable of meeting the basis interpersonal needs of love, sense of belonging, security and self-esteem.
2. The CPE model of education for pastoral care givers is capable to give persons the opportunity to develop new patterns to give response to situations that were formerly traumatic.

Conclusion:

I in person do recommend CPE courses be part of the curriculum for the formation of our pastoral caregivers / agents in the Church.

Due to the fact that the Uganda society has been hit badly by the HIV/AIDS pandemic and war, war especially in the northern part of Uganda, I feel strongly that the CPE model of education will enable pastoral care givers trained with some CPE units will be more effective in their ministry to the sick and other community settings. They will also be in a better position to face their fellow human beings' conditions in a positive, unconditional non-judgmental and loving (empathetic) manner regardless of the person's past life history. I wish and propose that the CPE model of training be a part of our formation program for forming pastoral care givers agents in our hospital and other community settings.

I have witnessed for myself that persons trained for ministry through the CPE model, have proved capable to facilitate persons and groups into an atmosphere that is emotionally safe. The persons in question are enabled to share their sad experiences of fear and security freely and this in tern has proved to be therapeutic for the persons and groups of peoples.

Furthermore, I have the ambition that the CPE process of training pastoral care workers / givers / agents will penetrate into many religious cycles / programs and also become a part of the curriculum of our seminaries here in Uganda and hopefully beyond the boundaries of Uganda.

Lastly, I feel and believe a disciplined; out come oriented pastoral care giving which the CPE process strives to provide, will continue to benefit Uganda's ever growing population. A clear indication that the CPE model of education is disciplined and out come oriented is the recent feed back on the CPE students / pastoral care givers from Nsambya hospital.