

MENDING BROKEN HEARTS

A Handbook for Those
Who Care For and About Others

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TABLE OF CONTENTS



Chapter		Page
1	Companionship and Community	3
2	Looking at Ourselves	41
3	Becoming Connected	90
4	Who the Other Is	103
5	Community Centered Celebrations	139
6	Community Formation	173
7	Mentoring a Spirit of Gentleness	193
8	Gentle this Broken Heart	234

CHAPTER 1

Companionship and Community





**Love your enemies; do good to those who hate you;
bless those who curse you . . . When a man hits you on
the cheek, offer him the other cheek too . . .
Treat others as you would like them to treat you . . .
Give and gifts will be given to you . . .**

- Luke

INTRODUCTION



Let us start out by looking at ourselves. As caregivers, we have moments when there is deep confusion, fear, and even meaninglessness in our own lives. This book is about our own gentleness, even in the midst of violence.

Your teen-age son, Joseph, stumbles home in the middle of the night—drunk again, yelling, screaming, and cursing. You smell the booze on his breath. Its odor smacks at you like a clenched fist. His face is not the face of the child you once knew. His eyes are cold, almost empty. He staggers and stumbles. He sees you, but sees nothing, no one.

Your heart is broken. Your eyes fill with tears. Your mouth is dry. You hear your thoughts screaming. Your heart swells with anger. You come up to him. You are filled with disappointment, almost despair. This is the umpteenth time. You think, “Damn, he’s done it again! God, what am I going to do! Do I curse him like he’s cursing me? Do I yell at him like he’s yelling at me? What in God’s name do I do?”

Your thoughts race like bolts of lightning that pile on each other, huddled, waiting for the thunder, “He knows better! He’ll be dropping out of school. His grades are down. He sleeps all day. He curses and yells at me. He calls me a ‘no good’ and ‘worthless.’” Hope begins to slip out of your heart. Emptiness, sorrow, anger swell in that moment between lightening and thunder. There is moment of quiet stillness. Everything stops. You ask yourself, “My God, what do I do?”

Read this book thoughtfully. There is no single answer to our life problems. There is only a direction we need to take. Helping others means that we have to know who we are and who the other is. We have to enter the troubled person’s space with humility and gentle our way as deeply as we can into the other’s world. Our only gift is unconditional love.

This is a book about us, who we are, and why we do what we do. It is about

helping others who are lost, hurting themselves, and hurting others. We are caregivers. We care for and about others. We are parents. We are teachers, social workers, psychologists, counselors, psychiatrists, therapists, and advocates.

We care for those whose hearts are broken-- the abused child, the confused teen-ager, the gang member, the child with a disability, the imprisoned, the man with a mental illness, the woman with AIDS, the child with autism or mental retardation, the elderly, and all others who are marginalized from family and community life. We care for and about our own children, our parents and grandparents, and all our vulnerable family members.

Our care is based on unconditional love. This is easier said than done. Our task is to find ways to express human warmth where there is fear, meaninglessness, neglect, abuse, confusion, anger, frustration, and despair. Our option is to serve those who are the most forgotten. We bring a peaceful feeling of companionship and community to the poor, the neglected, and the abandoned. We serve those who are weak and scared, violently fearful, isolated, and sorrowful. And, we lend a helping hand to those who are disabled, mentally ill, elderly, and physically ill.

We can only give what we have. Our gift is the expression of unconditional love. We wrap it in the warmth of our presence, the nurturing of our words, the kindness of our touch, and the gaze of our eyes. We offer it freely and unconditionally. We ask for nothing in return. We hope for a smile, a kind word, a giggle, a warm gaze, or arms reached out for an embrace.

Our task is to mend hearts that are broken by confusion, despair, poverty, neglect, abuse, racism, segregation, old age, chronic illness, mental illness, and developmental disabilities. We give our presence by staying peaceful when faced with violence, by reaching out to those who hit, by speaking words of affection and encouragement to those who curse, and by protecting those who cannot help themselves. This sounds so easy. Yet, we know from our own lives that it is quite hard.

Consider Joseph and his mother. For some mysterious reason his heart is broken. He seeks meaning in booze, but only finds momentary escape. Perhaps he is trying to find himself in the bottom of a bottle. Perhaps he is scared of life, does not know who he is, and where he is going. Perhaps fear drives him to find momentary peace in booze. Maybe it is just a passing experimentation.

His mother's heart is broken. His heart is broken. Both are scared. Joseph is lost. His mother has to mend his heart. She has to be stronger than her son. Somehow or other she has to summon the courage to bring a feeling of

unconditional love to a child who rejects it. As her mind swirls with fear and almost hopelessness, she has to find a way and a moment to bring Joseph peace. She has to enter Joseph's world where he is, not where she wants him to be. She has to know what he has forgotten—that we all need to feel safe and loved on this earth. Her presence has to bring hope. Her eyes have to fill with motherly warmth. Her hands have to reach out to his shattered heart. Her words have to express unconditional love.

As care givers, we need to be well grounded. Our hope is not independence, but interdependence. Our primary task is not to control others or force others to be what we want them to be or do what we want them to do. It is to bring a deep unconditional love to those whom we serve. Our central purpose is not self-determination or self-reliance; it is a feeling of connectedness between those whom we serve and ourselves. Our central role is to express a profound sense of companionship and community. What we often think are our primary tasks will come in due course if those whom we serve feel safe, loved, loving, and engaged.

We are community-makers. Community is a gathering of gifts. Our gift in the act of care giving is the creation of companionship and the formation of community. Those whom we serve bring their mind-body-spirit, their dreams denied, and their hunger for love. They bring their troubles and sorrows, their life-story, and their broken hearts. We bring a spirit of gentleness to mend their hearts.

We are a gentle people. We seek non-violent ways to teach persons to feel safe with us, to feel loved by and loving toward others, and to learn that it is good to be with others and us. We gentle our way into broken hearts, and gentleness begets warmth between us. Our mandate is to gentle these broken hearts.

We, as care givers and community-makers, need to change as much, perhaps even more, than those whom we serve in a process that starts with a focus on gently teaching a feeling of companionship to those who feel separate and apart from us, fear us, and even hate us. Our first task is to weave delicate laces of companionship between us and those whom we serve. And, we weave these laces from our heart to those whose hearts are broken. We have to see clearly our own and each other's wholeness-- mind, body, and spirit. We mend broken hearts based on our belief that all people have a deep longing to feel at-home with others and are called to come together in a spirit of companionship and community.

We enter into the cold and empty spaces that separate us from those whom we serve. We meet each person where he/she is. We meet each with a gentle humility and a warm hope that this moment will be a moment of feeling safe and loved. We meet each feeling that they are in pain,

fearful, and see little meaning in us. We carefully reach across the void to mend their broken hearts. With this reach, we slowly and respectfully begin to give meaning to our own being as well as to that of the troubled person.

This approach to care giving is based on a psychology of human interdependence that sees all change as mutual and as bringing about or deepening feelings of companionship and community. But, we know that the mutuality has to start with us—our hands, our words, and our eyes. We search for the feelings in the heart, not the thoughts in the head. We do not seek to modify behaviors, but to teach a deep sense of being safe and loved. These reside in the heart. They are feelings. They are the muddied undercurrents that we have to still.

Our central role is to be teachers of companionship and community. Our relationship with those whom we serve needs to be driven by values based on unconditional love and the expression of warmth. We need to reflect on our own being, values, and relationships. And, we have to deepen these as we seek to help those who are marginalized.

The act of care giving starts by concentrating our efforts on two initial tasks-- eliminating in ourselves whatever the person might see as domineering and elevating our expression of unconditional love to the highest level possible. For those with broken hearts, meanness is seen and felt in the simplest and slightest frown, reprimand, or word or gesture of discouragement. It is often seen in our sheer presence, slightest touch, and softest words. For those who are fragile, many modern care giving practices are seen as mean-spirited, neglectful, and even abusive-- verbal reprimands, physical restraint, time-out, token economies, suspensions, and a host of others common strategies.

Popular culture tells us to control others, send them away, make them learn to stand on their own feet, give them tough love, and teach them a lesson. These approaches have not worked. More people are imprisoned than ever before. More children are abused and neglected. More adolescents are living on the streets. The homeless wander aimlessly on the streets like urban ghosts. The electric chairs of rich nations have waiting lists. Orphanages, psychiatric hospitals, and refugee camps are filled with children and adults. Millions of children around the world live in garbage dumps. The elderly are left behind as their sons and daughters search for riches.

We are caregivers. We have to do better. We start by bringing care and justice to one person at a time. One of the hardest tasks of care giving is to look closely at look at ourselves. Few caregivers knowingly make others feel afraid or use even minor forms of punishment. However, anyone who has been pushed to the distant edges of community life can easily perceive us

as domineering or controlling in even our most subtle interactions-- a frown instead of a smile, a stern request instead of a welcoming invitation, a word of affection not said, a greeting not given, a touch not extended. We have to be extremely sensitive to our every move-- not because we are mean, but because the other might see as being so.

We need to constantly ask how each troubled person sees us. How are we seen by the child who becomes frightened at the slightest change or the adult who is ravished by the cruel and terrifying voices of schizophrenia? What about the teenager in the gang who is constantly threatened by authorities with a "Do this or else!" mentality? How does the elderly person, now ravaged by the fearful ghosts of senility, see us in the midst of this confusion? How does the immigrant child see us when society says emphatically that he is no good? What about the homeless woman whom we pass by as if she were a ghost in the night? What is the mentally retarded man on death row to think of us as he sits in the shadow of the electric chair waiting for his body to be scorched and mumbles, "I want to be with my mother!"?

We have to teach each person to feel safe with us and loved by us. Of course, we have to assure that harm comes to know one. But, this protection needs to fall on our shoulders, not on those whom we are helping. Instead of coming down or controlling marginalized children and adults, our task involves teaching them to feel safe and loved. We are often seen as merely one other caregiver in a long line of caregivers over their life span-- faceless and anonymous, cold and domineering. We have to put our face on care giving-- our smile, our warm gaze, our words of affection and encouragement, and our embrace. We have to examine ourselves and find our authentic way of being with those whose hearts are broken.

So, our task is to teach each person who we are-- kind, giving, and loving. These virtues have to be the most evident when someone is at their worst. We have to help each feel safe in the deepest manner possible, feel that it is good to be with us, and, most importantly, feel loved by us and loving toward us-- at good moments and difficult ones. These elements make up a sense of companionship and over time form community.

In this process of interdependence, we have to think about our own change as well as that of the person whom we are helping, and remember that there are no ready-made answers to "What do you do when . . .?". There is a direction that we want to take in helping others to feel safe and loved. When in doubt about what to do, a gentle caregiver looks at any question or situation from this perspective—"What will help the person feel safe and loved at this very moment?" Instead of worrying about issues like compliance, independence, or self-determination, the gentle caregiver is concerned with teaching children and adults to feel safe and loved.

Rather than fixed answers, we have to examine ourselves and our values-- especially nonviolence and the ability to express unconditional love in the face of violence and rejection. We have to find ways to teach a feeling of companionship and community to those who see no meaning in it and even reject it violently. We need to be gentle teachers and mend broken hearts.

A PSYCHOLOGY OF SOLIDARITY A PEDAGOGY OF INTERDEPENDENCE



We need to have a spirit of profound solidarity with the poorest of the poor and a way to teach companionship and community. A posture of gentleness, nonviolence, and justice asks us to think about our own change before considering changing someone else. It is centered on human interdependence, not independence. It looks at change as a two-way path, but with the change starting with us. The process involves our taking the first step-- entering into the vulnerable person's fear-filled space, gentling our way into the space where fear and meaninglessness reside. We have to know that when a person has a broken heart her/his world is filled with fear and meaninglessness. We have to know more than what the person knows because we are teachers. Knowing that fear and meaninglessness envelop the other, we enter into that cold void with a spirit of gentleness. We come with know demands. We come with no desire to control and no urge to modify. We come with the gift of unconditional love that gradually teaches the other, "When you are with me, you are safe and loved!"

Solidarity is seeing ourselves at worst moments in the suffering, confused, and fearful other. It is an enduring desire to liberate ourselves and others from the burden of violence and injustice. It is our actions to bring about interdependence based on a collective feeling of community, not self-determination. Independence and self-determination are not possible unless they arise out of a deep sense of companionship with others. We need to reject a "Lift yourself up by your bootstraps!" mentality and make sure that those with broken hearts feel safe and loved on this earth before anything else. We are not islands unto ourselves, but connected with feelings of being safe and loved. Life meaning comes out of an evolving sense of community.

The journey has to start with us. We need to understand that the vulnerable person sees us as frightening, not because we are mean or overpowering, but because those who are vulnerable are actually filled with fear and meaninglessness. They do not see us as caring for and about them. Our initial role is to fill the chillingly empty space between us and the other with unconditional love. This starts with our meeting each person where he/she is at—not changing the other, but changing ourselves.

A SPIRIT OF GENTLENESS IS ABOUT...

- Our nonviolence
- Our sense of social justice
- Our expression of unconditional love
- Our warmth toward those who are cold
- Our teaching others to feel safe, loved, loving and engaged
- Our teaching a feeling of companionship with the most marginalized
- Our forming community
- Our sense of human interdependence and solidarity
- Our option to be side by side with the most devalued

A spirit of gentleness might seem easy; but, always remember, we do things that many can interpret as cold and controlling, often without even realizing it. The cold space that exists between us and the vulnerable person deepens and broadens without us even realizing it when we focus on control with a “Do this or else!” mentality or when we wallow in hopelessness with an attitude of “Well, that is just the way she is.”

Without even realizing it, our tone of voice, our posture, the way we look at someone, and the way we talk can tell the vulnerable person strong messages that say, “You are no good! Do what I tell you to do or else!” We do not do this intentionally. Yet, if we do not understand human vulnerability and fragility, our simplest actions can take on a horrendous meaning. Our priorities are often messed up if we focus on behaviors instead of feelings or independence instead of interdependence. We need to worry about helping each person begin to feel more safe and loved instead of getting rid of behaviors.

We have to look at ourselves and change, and we have to help others to change. Our focus has to be on how the vulnerable child or adult interprets us in the here-and-now. We need to be seen as kind, warm, and affectionate, and teach the person that our very presence symbolizes unconditional love-- finding ways to say, “These hands will never hurt you! This mouth will never put you down. These eyes will never look scornfully at you!” We need to understand that anyone with violent behavior has to learn to feel exceptionally safe with us. We have to reach out to the person, and teach the essential lesson of life, “When you are with me, you are safe and loved! Do not fear! I will not hurt you!”

These feelings are the foundation of a culture of life that starts with the care giving relationship and spreads gradually to the broader community. It starts with our own gentleness, our acceptance of nonviolence, our constant questioning of our own beliefs and actions, our ability to teach

companionship to those who steadfastly reject it, and then to build communities of caring. Read this book thoughtfully; apply the concepts to yourself, your family and friends, and your work. Keep trying to establish feelings of companionship and forming community among those who are marginalized.

Yet, we struggle to create a sense of connectedness in a culture that demands independence and self-reliance. We listen to newscasts that announce this. We hear newscasts that tell us the strong must control the weak. We read newspaper stories that trumpet the glory of the self. These cultural attitudes become part of our care giving. We have been trained to seek compliance and control. We demand that those whom we serve choose what is right and good when they do not trust us, in fact, often fear us. We live in a world that places the individual above the community.

As care givers, we have to reverse this trend and begin to question what the other needs-- to feel safe with us and loved by us. A psychology of interdependence assumes that we find ourselves in others and in the strength of our connectedness to others. It is the foundation of who we are and what we are becoming. It leads us to develop a sense of companionship with those who distance themselves from us. We have to move from a culture of self-reliance to one of human connectedness and from a culture of self to one of otherness. As we do this, we are slowly moving toward the formation of community where we will feel collectively safe, loved, loving, and engaged.

Interdependence is based on our shared values-- the wholeness and inherent goodness of each person in spite of violent behavior and the thirst that we all have for a feeling of being one-with- one-another in spite of paradoxical behaviors that push others away. These values are difficult to maintain, but are necessary if we are to help those who cling onto the slippery edge of family and community life.

It is in the middle of the night and your drunken son has come home. Joseph screams and curses as he stumbles in his drunken daze. You watch paralyzed by a mix of sorrow and anger. He yells, "Get away!" and spits out words of hatred. These enter your heart like nails. His eyes are filled with emptiness. They do not really seem to see anything. His face is tight and tense. Doors slam. Fists pound walls.

You think, "This is the baby whom I mothered. Now look at him!" Your face is filled with fear, disappointment, sorrow, and confusion. You are filled with fright and insecurity. You do not know what to do. Should you curse back, strike out, nag, or just give up. Thoughts swirl through your mind, "I have to gain control. I must come down on Joseph. He cannot do this. God, what do I do?"

Your eyes turn cold. Your words lash out, "Stop! You know better! You're worthless. You'll never amount to anything. Get out of here!" Your face is flushed. Tears well in your eyes and flow down your cheeks like a heavy rain on parched earth.

Your son screams out, "Fuck you! I hate you!" as he collapses onto the floor in a boozed up sleep. His body is sprawled on the carpet. He breathes heavily and every now and then mutters incoherent words of hatred.

You go to bed not knowing what to do. Sleep eludes you. Tears once again well up in your reddened eyes. Then, your tears dry up. Tears turn to emptiness. Your mouth is parched from anger and disappointment. You only have your thoughts about the child who was once your little baby and now you ask yourself, "How can I bring a spirit of gentleness when there seems to be no hope?"

We are good people trying to do good things. Our role is to tap into the marginalized person's heart and uncover the hunger that we all have to feel safe and loved. This challenge is enormous and often goes against the strong currents of our culture, poverty, racism, abuse and neglect, abandonment, mental illness, developmental disabilities, and life stories filled with sorrow.

Our option for unconditional love flies in the face of a culture that says that individual choice is the driving and foremost value that demands, "You chose to make this decision to harm! Now, suffer the consequences!" Choice is good, but it has to be based on a context of personal experiences that enable us to trust ourselves and others, to feel safe in making decisions, and a sense of it being worthwhile to be engaged in the surrounding community.

Interdependence is centered on the coming together of the caregiver and the person in need with all their gifts and vulnerabilities. In effect, we say to the person, "I will teach you to feel safe, loved, loving, and engaged. You and I will come together and become 'we'-- companions. . .!" As companionship emerges, our role is to bring ourselves and others into this increasingly warm space and teach a collective feeling of being mutually safe and loved.

A PSYCHOLOGY OF INTERDEPENDENCE IS...

- A recognition of companionship and community as the most basic values in caregiving
- An acceptance of the whole person: mind-body-spirit
- A belief that all persons hunger for a feeling of being-one-with-others
- An understanding that fear and meaninglessness create and drive violence toward self and others, isolation from others and a deep sense of worthlessness
- A sharp focus on teaching feelings of being safe, loved, loving and engaged with us and others
- An option for the most marginalized
- A belief in unconditional love as our way of being

OUR ASSUMPTIONS

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Our assumptions are few, but powerful. We are all mind-body-spirit and care giving needs to focus much more on the spirit, emotions, and moral sense. A spirit of gentleness goes straight for the heart and ensures that the foundation of what we do is based on teaching others to feel safe with us and loved by us. We might not be able to do anything about the mind or the body, but we can mend the heart. We might not be able to bring about social justice and change, but we can bring justice to one person at a time. We can mend a broken heart. Care giving is also about justice. A spirit of gentleness means that we bring this gift of love to those who are the most marginalized. We assume that an act of love done to one is an act of love done to all. We might not be able to change systems, but we can change ourselves and, if we deepen and broaden our sense of companionship and community, we will eventually bring justice to all. We also assume that everyone has a basic longing to feel one with others, to have safe and secure relationships, to be with others, and to be loved by them.

Our care giving has to emerge out of unconditional love, and the change has to start with our daily interactions and what we do in the here-and-now. This is no easy task and it cannot be left to simply talking about unconditional love. We have to show it in our every action - generous when we are denied, helping when we are refused, and warm when we are rejected. Indeed, we need to express the most warmth during the worst moments. These assumptions are vital elements in care giving. Without them, there is little reason to provide care, let alone reflect on the expression of unconditional love. These assumptions are at the deepest region of the heart. We recognize the struggle that occurs in broken hearts between a fear of loss and a hunger for love. We have to make the hunger

for love stronger than the fear of loss.

Our assumptions are the human undercurrents that give meaning to life. If we do not feel that each person is a whole being, no matter how others perceive them, then we will not bother giving ourselves. If we do not feel that each person longs for a sense of being at-home in the world, then there is little need to worry about companionship or community. If we do not see our care giving as an act of justice, then justice will never come about. We have to realize that the best and most enduring change starts with us and our interactions, not with anything or anyone else. No one can tell us to be loving; it has to come from our heart.

BASIC ASSUMPTIONS

- Each human being is made up of a mind-body-spirit
- Personal change comes from within the heart
- Each of us hungers for a feeling of being-with-others
- The caregiving relationship is based on unconditional love
- Personal and community change occurs from the bottom up
- Caregiving is as act of justice

In those who are violent toward us or themselves, there is an ongoing struggle that pits this hunger for love against an ever-present fear of loss in the deepest regions of the heart. Many come to us with life-stories filled with abuse and neglect. Others have had lives in which they were loved, but were unable to feel it or express it due to mental retardation, autism, mental illness, or other conditions. Many have passed decades in institutions where this fear has been made into a rushing current or have lived with care givers coming and going in and out of their lives, never being

able to establish a sense of being loved or loving. They have every reason to surrender to the fear of loss and starve the hunger for love. Thus, our role is quite serious-- to bring a feeling of life where there is one of death and love where there is one of abandonment.

HUNGER FOR LOVE

- To be connected
- To be responded to
- To respond to others
- To care about others
- To love and be loved

FEAR OF LOSS

- To be disconnected
- To be ignored
- To withdraw
- To ignore others
- To be scorned

To give care is to give a sense of connectedness within a small circle of others. It begins with caregivers responding to the hunger for being one-with-another and fighting against cultural currents that demand control, often under the guise of choice, "You made a decision, and now suffer the consequences! That is how you learn!". Our option is to build a sense of companionship with a spirit of human interdependence that springs out of our expression of unconditional love. This is no easy task, and requires us to evolve the deepest values and skills possible.

Interdependence is based on a culture of life that recognizes this struggle, and asks us to teach a sense of companionship and community based on trust. It requires a profound empathy for the past and present feelings of the person and the expression of this in nurturing words, warm gazes, and loving touch. This expression is what causes a richer life that helps the caregiver and the vulnerable person become more. Serving others is a life-project built on a sense of companionship and community. Caregivers are the laborers who initiate, deepen, and maintain it. Our work is based on giving to others, teaching companionship and community, and thereby, mending broken hearts.

The burning tropical sun parches the earth. Exotic birds sing their love songs. Tiny dirty feet dig their toes into the dust. Fifty-two little children sit in the shade. Their faces are frozen in a deep sadness and emptiness. Their eyes do not look up toward the coconut trees that give shade. They look down into a bottomless well where there is nothing. Their faces are weathered way beyond their childhood years. They are faces of women and men carved into the skin of boy-men and girls-women. They sit on hard plastic chairs waiting for nothing. The parched leaves of the coconut trees are softer than these imprisoned children's skin. Soft clouds pass above. Love birds sing. Trucks roar by the fenced patio. Sweat drips from the children's faces.

Some of these little ones have stolen bread and chocolate. Others have stabbed those whom they feared. Others have sniffed shoe-glue to forget about love lost, love denied, love never known.

I wonder what do I say in the empty moments between the birds' songs and the trucks roar? What do I do in these frozen moments as the clouds and the birds float above?

"What is love?" seems so basic. The children listen to the question and giggle as they think about sex, a collective feeling emerges, "Oh, another lecture on safe and responsible sex!" The faces twist in a giggle of boredom. I ask, "Who can sing a song about love? Who can be our teacher about love?"

The smallest child, Victor, stands up. His head is bowed and his shoulders are bent toward the dry dust beneath his dirty feet. He comes toward me unsure and humble. I lift his small body onto a chair and ask him to sing about love.

Victor lifts his seven-year old head and opens his half-closed eyes. He looks at me with fire-hot eyes that pierce my heart, eyes that say, "Love is lost. It is nowhere to be found. It is unknown." He opens his mouth. His chest surges with feeling. He sings, "Love is nothing more than a tomb. It is my mother gone and never more seen. It is my father gone and never more seen. Love is a tomb." All the children listen as his words fly slowly and solemnly through the air. The birds stop singing. The trucks stop roaring.

The other children yell out, "Victor, sing some more! Sing more!" His manly voice goes on, "Love is remembering my father who took me on his truck. Love is recalling my mother's kisses. But, now love is like a tomb, empty and forgotten!"

I ask, "What is love?" A little girl clad in her prison uniform whispers, "Tenderness!" The breeze blows. The birds sing. Tenderness floats above, down, around, and into these children's broken hearts.

We have to move from a culture of death that unwittingly leads us to control instead of uplifting others, seeks frigid obedience instead of mutual engagement, and wallows in the turgid waters of behaviors instead of the undercurrents of love. A culture of life rejects violence and the perception of violence. It uplifts instead of putting down. It is based on the clear and on-going expression of unconditional love.

CULTURE OF LIFE

- Based on companionship
- Leading to community
- Centered on the person
- Involving mutual change that starts with us

CULTURE OF DEATH

- Focused on control
- Leading to compliance
- Centered on behavior
- Imposed change under the guise of choice

We need to empower ourselves and define our role as teachers of safety, engagement, and unconditional love--not focusing on control, but trust; not seeking compliance, but engagement; not preoccupied with external behavior, but moral development; not imposing change on others, but on ourselves. We begin to liberate others by teaching them to feel safe with us and loved by us.

REFOCUSING OUR PERCEPTIONS

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In the list that follows, compare how a person whom you are trying to help struggles with fear and is distanced from a feeling of being safe. Reflect on the subtle interactions that the person expresses that show “I am safe with you” but always remember that we are not blaming ourselves. Yet, we need to gain insight into the fear that envelops those we serve. Look at each factor in the list and check those that apply. If fearful outweighs safe, then we know how important it is to teach the person a feeling of, “With us, you are safe!” Decide what major areas indicate fear. But, beware! We are not interested in focusing on behavior. They are only signs of a deeper anguish that is driven by deep fear and meaninglessness. Our full focus will be on dealing with fear. For now, get a sense of the fear that pervades the people we serve.

FEELS FEARFUL...

- Runs away
- Cries a lot
- Expressionless
- Sad appearance
- Slovenly
- Hits self
- Hits others
- Sleeps poorly
- Complains
- Refuses to participate
- Eats poorly
- Self-stimulates
- Curses
- Hordes
- Flinches

FEELS SAFE...

- Stays with others
- Expresses joy
- Relaxed
- Contented appearance
- Well-cared for
- Respects body
- Respects others
- Sleeps well
- Expresses love
- Enjoys participating
- Eats well
- Enjoys hobbies
- Uplifts others
- Shares
- Appears content

This initial analysis is a critical step for us since we often think that we do nothing to produce fear. We feel that the person is really “pretty happy.” Indeed, this may generally be the case. Yet, we have to look more closely. We might think that we do not do anything directly to cause fear. We might see the person as simply manipulative or seeking attention. We have to probe more deeply.

Our purpose is different. We choose not to control people. We choose to help them liberate themselves from fear and meaninglessness. We are not satisfied with, “Leave well enough alone!” We have to concern ourselves with the community of people whom we serve and teach all to live together. At school, home, work, or play, our task is to teach

marginalized children and adults to feel safe with us and loved by us. Even occasional problems or seemingly minor things, like an almost constantly sad face, can be signs of deep inner turmoil and, although perhaps never “a behavior problem,” persons with such ongoing suffering need to be taught companionship.

This brief exercise is not just a measure of ourselves, but of the person's fragile nature and perception of the surrounding world-- a world in which each brings internal vulnerabilities as well as a life story. Within this world, we have to become sensitive to the state of fear and meaninglessness that envelopes those whom we serve, recognize that our task is very special, and begin a process of teaching companionship-- giving a fresh, deeper, and sometimes new meaning to who we are-- drawing the person toward us instead of pushing away and loving instead of controlling.

Our primary role is to teach this feeling and to deepen it. This first requires an assessment of the needs of the person as they relate to feeling safe with us. This can be difficult to do since there is a natural tendency is to think that the individual cannot be filled with fear because, “Who would fear me?” Recall the exercise we did previously, looking at the person's reactions toward us. We need to see fear whenever heads are bowed down, fists are lashing out, mouths are cursing, and eyes are crying-- a fear that we need to see and overcome.

We have to focus on the most crucial pillar in teaching companionship-- the feeling of, “When I am with you, I am safe!” When we grasp the significance of this, then we can examine ourselves and the depth and breadth of our gentleness. We will not rush someone who is afraid of change. We will not grab someone who recoils from touch. We will not scold someone who feels worthless. We will gentle them toward us.

We can look at our interactions in two broad categories-- domineering and loving. These are from the person's perspective and their interpretation of us based on their life-story and vulnerabilities. You might ask, “Can I be kind and good, and still be seen as domineering? How is this possible?” Someone with deeply rooted fear feels that the world is unsafe. When we present ourselves in that fearful world, we can be swept up into their ocean of fear. A simple word, an unwitting grab, an otherwise insignificant frown can quickly stir up the muddy undercurrents of terror. Not only does the person feel that the world is terrible, but that it is meaningless. You might ask the person to do something with you that is always enjoyable, and the person throws the object to the floor, hits you, and runs from you. You might think to yourself, “Everyone likes to do this. Why is the person acting out?”

You might think, “My goodness, ‘domineering’ is much too strong a word for how I interact. I just want what is best.” We may not be domineering, but the marginalized person or adult sees us as such! The person who has been

beaten sees our attempted hug as a hammer ready to fall. The man who has been institutionalized for years hears our voice and is certain that we are going to put him down. The woman who has been raped sees our body and senses an attack. The child who has passed through one foster home after another sees our presence as just one more phony authority figure. The child who has been abused or neglected sees our touch as cruel, cold, and hurtful. How we are seen is what determines how domineering we are.

As care givers we are good people trying to do good things. Yet, in many children and adults, fear is so deep that they see even the slightest skewed glance or sarcastic word as a sledgehammer beating them down. Words cannot fully describe the delicate balance between domineering and loving interactions. Care giving calls for much more than an ordinary way of doing things, "Spare the rod and spoil the person!" cannot be our rallying call. The individuals served are much too fragile to handle ordinary interactions and the attitude of, "Well, this is how I raise my own children! This is how I was raised. How is the person going to learn to handle the real world?"

Step back for a second and look at yourself and how those whom you serve see you:

DOMINEERING

- Focused on "bad" behaviors
—what to rid the person of
- Ordering people around
- Ridiculing
- Talking coldly
- Talking harshly
- Touching coldly
- Glancing coldly
- Ignoring
- Setting bad example
- Expecting too much
- Pushing too hard

LOVING

- Focused on what the person is becoming—safe and loved
- Inviting talk
- Praising
- Talking warmly
- Talking softly
- Touching warmly
- Gazing warmly
- Paying attention
- Setting good example
- Increasing hope
- Helping and protecting

Our approach has to come from a revealing understanding of the life-condition of each person and the vulnerabilities inherent in each person. It has to signal the warmest possible relationship-- beginning with us, our total acceptance of the person, our unconditional love, our tolerance and patience, and our ability to teach a feeling of companionship. Our cry has to be, "Do not spare the loving touch, the soft words, and the unconditional love!" These will not spoil the person or adult. They will give the necessary nurturing. We need to give. If we spare warm words, we will humble the person further. If we spare the kind smile, we will sadden the person further. If we spare the unconditional love, we will marginalize the homeless man or woman even more.

The first secret in gentle care giving is to express all our interactions warmly, softly, and slowly-- making unconditional love the center of all that we do. This is much easier said than done; yet, it is our task. We have to put aside the traditional behavior modification approach that says, "If you do this, then this happens!" We have to put aside the theory that life centers on reward and punishment. Our challenge is to move from a behavioral approach and create a new psychology based on human interdependence.

We need to develop a care giving process based on the expression of unconditional love, even when the person rejects us, and move from merely looking at outward change to an understanding of inner change. Care giving is repeated acts of love-- giving kindness in spite of rejection, nurturing feelings of self-worth in the face of fear, and reaching out warmly even when violence swirls around us.

PSYCHOLOGY OF THE SELF

- Earned reward
- External change
- Imposed change
- Emphasizing compliance
- Leading to self-reliance
- Authoritarian

PSYCHOLOGY OF INTERDEPENDENCE

- Unconditional love
- Inner change
- Mutual change
- Companionship
- Leading to community
- Authoritative

The traditional focus on individualism has not helped those children and adults whom we serve. Their behaviors do not have to be changed as much as their hearts. The youngster in a gang laughs at those who offer tokens. The abused person who is acting out has no reason to trust us. The man with schizophrenia burdened by nightmarish voices needs something much more human than a behavioral plan. Our role is to mend broken hearts and the fear and meaninglessness that reside in these hearts. If we do this, the behaviors will take care of themselves.

This teaching has to do with moral development-- creating a sense of companionship and community in the hearts of marginalized people. We need to find ways to gentle ourselves into the fearful and disengaged person's heart--nurturing a moral sense that says, "When you are with me, you are safe. It is good to be with me. I will always love you. And, you know what, you will learn to love me and others too!" This deals with inward

development rather than behavioral change. In this process, behavior will change-- not out of fear or greed, but out of a sense of trust. We have to reject authoritarian attitudes that give a feeling of control and adopt authoritative ones that lead the person into a safer and more loving world.

Authoritarian caregivers come down on the person served, most often out of cultural habit rather than deliberate intention. The caregiver is above the person and wields a sense of power. This worsens as violence or disobedience appears. The need to control surges. The authoritative caregiver has a keen sensitivity to the person's fears and disengagement, and has an ever-present intention to develop a sense of trust. And, upon this trust, the authoritative caregiver places strong moral pillars. Care giving in this sense goes for the heart.

AUTHORITARIAN

- Inconsistent
- Moral direction based on a "lift yourself up by the bootstraps" attitude
- Focused on the self, independence, and self-determination

AUTHORITATIVE

- Consistent
- Moral direction based on teaching others to feel safe and loved, first with us, then others
- Focused on others, companionship, and community

COMPANIONSHIP

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Connectedness to others is the center of the human condition and is built on four pillars. Companionship is a sense of connectedness. We understand that we ourselves and each person whom we serve find meaning in life through others. This is first seen in the bond that unfolds between a mother and child. It is seen in our intimate friendships. Its importance is felt when we lose one whom we loved.

COMPANIONSHIP IS BUILT ON TEACHING OTHERS TO FEEL...

- Safe
- Loved
- Loving
- Engaged

Companionship and its four pillars are taught. They need to be taught and re-taught throughout life. The more vulnerable a person is the deeper and more often they have to be taught. A sense of companionship is much more than being "nice" to someone or having rapport. It is much deeper. It is an emotional prerequisite in all human beings--having a warm circle of significant others in our life who help us feel safe, wanted, loved, and loving. These feelings are pillars in the foundation of companionship and our task is

to set them deeply and generously in each person's heart.

We have to find ways to teach their meaning to those who feel terrified, scared, unloved, and unloving. The first pillar is a feeling of being safe with us. This is done through repeated acts of love on our part in which every instance of our contact conveys the message repeatedly, "With me you are safe and loved... Do not be afraid... I will not harm you.... "

The communities we form are like a house built on these pillars. Each of them is needed and each is interconnected. Without one the others will not support the house. Our task is to place them deeply into the hearts of those we serve. We need to see that these hearts are broken and that our role is to mend them-- a mending that is done with our unconditional love and our expression of warmth.

In normal human development mothers and fathers do this unwittingly in the early months of life in the attachment process. In older children and adults with broken hearts, this feeling has not yet been learned or was once learned and then severed for any number of often mysterious reasons—the death of loved ones, one foster home after another, trauma, physical illness, mental illness, and tragic life-stories. We must remember that the lack of this feeling does not necessarily mean that previous caregivers did not love or treat the individual well. It means that, for whatever cause, the feeling is not currently or sufficiently present. Some individuals never develop these feelings due to the nature of a disability, others develop it, but lose it due to traumatic life experiences.

When we approach someone who is filled with fear, they do not see us as an individual but as an accumulation of their life experiences. Our identity is lost in the maze of all the other caregivers who have come in and out of their lives. We walk too quickly toward them and they have fear. We talk too loudly or sternly and they sense a cruel demand. We ignore their presence and they feel that they are nobody. We touch them and they recoil.

To teach companionship is to help a person learn his/her identity—to learn who "I am" by learning who we are. We need to be sources of feeling safe and loved. This requires our warm example and unconditional love. Our identity to the person, how we are seen, is critical and at the very foundation of care giving. The person does not see us or what we are doing in the same way. They only see a faceless caregiver. We have the task of teaching who we are and who the person is.

FEELING SAFE



We need to feel safe on this earth. We need to feel safe within ourselves. This gives a sense of being grounded and a feeling of “I am somebody!” Most of us are fortunate to feel it deeply with those who form our circle of friends. But, many others are filled with fear and meaninglessness. Fear is much more than not feeling safe. It is a feeling that pervades a person's being. It involves feeling alone and apart, highly anxious and overly worried, and depressed and abandoned. It is not just the fear of being afraid of the dark or the fear of being attacked in a mid-night alley. It is a profound and enveloping feeling of being afraid of life itself, having little reason to exist, and even preferring to die. It is seen in the retreat into constant self-stimulation-- having no meaning other than your flicking fingers; constant complaining—an overall dissatisfaction with life and living; a desire for death-- trying to kill yourself or hurt yourself. It is seen in the disconnectedness of schizophrenia-- with the eyes bulging and the face turned to the nightmarish demands of cruel and taunting voices. It is felt in the lonely expressions of people sitting and staring out the window for hours on end-- waiting for nothing, expecting nothing, and hoping for nothing. It is seen in bouts of crying, sleepless nights, and a feeling of worthlessness. It is heard in the screams of elderly persons with their words pounding out lost loves, lost children, and lost hope. It is witnessed in the macho violence of the gang member whose only knowledge is a feeling of “I am worth nothing. I must attack or be attacked. My reputation is to give fear!”

Until we understand the nature of fear and its grip on so many individuals whom we serve, we will not grasp the utter necessity of teaching them to feel safe with us. All sense of engagement, feeling loved, and expressing love toward others hinges on a person's ability to feel secure on this earth. As care givers, we have to concentrate on the subtlest aspects of fear and interpret the person's "behavior" as rooted deeply in a pervasive terror and meaninglessness.

Sit for a moment and think about someone who is troubled. Consider how fearful or meaningless the person must feel. This will be hard because we do not often look at life in this way. Instead, we often see troubled people as “behavior problems” who irritate, manipulate, or disobey us. We too often see them as “knowing better.” Any of these might be partially true, but under each of them is a strong undercurrent of fear pushed by feeling meaningless, alone, without choice, or oppressed. As care givers, we need to be able to read these currents and respond to them, not just reacting to what we see on the surface.

FEELS SAFE

- A feeling of self-worth and being grounded
- Knowing one's place in the world and feeling well about it
- Having a circle of friends
- Accepting others
- Able to tolerate the vicissitudes of life knowing that you have a supportive circle

FEELS FEARFUL AND MEANINGLESS

- A feeling of worthlessness
- So filled with fear that there is no connectedness, just clinging to one person or indiscriminately moving from one person to another
- Lacking a sense of self-worth
- Lacking a sense of self
- Enveloped by constant insecurity

We are good and certainly mean no harm. Yet, there is a fear of us. "Well!" you might say, "the person does this or that because of his autism . . . or her manic moods . . . or his schizophrenia . . . or that is the way her family is... Or, she is just mad because she is not getting her way . . . It is just manipulation . . . It is only attention-seeking . . . " Any such statements might be partially true. But, there is a deeper truth. We need to see the underlying fear that arises from a life that is felt as meaningless, lonely, without choice, and oppressive. And more, we have to see the role that we play in worsening these feelings through our ordinary interactions that disregard these or the role we can take in alleviating the suffering that they imply.

If we are to help marginalized people, we have to feel their fear deeply. We have to know that our role is to teach them to feel safe within themselves by teaching them that they are safe with us. It is hard for us to understand the depth of someone's fear and the role we play in it. We are good caregivers and we are trying to do good deeds. We might feel that, if we recognize fear in those whom we serve, then we are the cause of it. This might be so or, at least, partially so; but, more than likely, it arises out of their life-story and innate vulnerabilities. However, until we recognize their fragile emotional nature, we will unknowingly rub salt into these wounds and remind them that we are no different from past caregivers.

FEELING LOVED



The second pillar in teaching a feeling of companionship is the essential human need to feel loved. Feeling loved is an extension of feeling safe. It is self-esteem, a sense of worth, and being grounded that originates with and

is increased by the feeling that the person is esteemed by another. It gives a feeling that "When I am with you, I do not fear. But, much more. I know that I am good. I am somebody because I am connected to you!" When we feel loved, we lift up our head, look forward to being with the other, seek the other out, and feel warm when we are with the other. Feeling loved means that the person knows her/his worth, finds value in self, and sees him/herself in the other. We need to teach the person, "You are safe with me and it is good to be with me. And, you know what? You are good and loved by me!" Until the person senses a feeling of "I am somebody!", there is no room for being loved. While there is the cold and empty feeling of "I am nobody!", it is impossible for the person to feel loved.

As with the first pillar, caregivers might think, "Well, I am kind and good! I express love. Surely, the person must know this." Yet, a person with a broken heart has to learn this. As with feeling safe, many people do not grasp basic life-meanings and these actually have to be taught, deepened, or strengthened. We have to be more than kind and good. We have to teach a feeling of self-worth, and then the meaning of being loved. We need to give a meaning to "I am good because I am loved." Each has to learn a sense of self in order to feel loved and love others.

To teach a feeling of being loved, we have to give it abundantly and unconditionally. It is pure nurturing. We have to give it during good moments and bad. Our care giving and expression of unconditional love have to be active, intense, and deeply rooted in our values. We cannot feel timid about talking about love and expressing it in the warmest ways possible and during the most difficult moments. Indeed, the true mark of our gentleness is our expression of nurturing and unconditional love in the person's most violent or despairing moments.

This can be very hard in a culture that values privacy, space, and individual strength. However, care giving is a public act. It deals with ongoing relationships. It requires the display of affection and a certain intrusion into the locked up spaces of marginalized people and the rigid barriers of a cold culture. It requires the strength of the recognition of our interdependence.

Of course, we have to also feel that we are good before we can teach it to others. The expression of love of others can only emerge from a love of self-- not a selfish love, but one in which we find contentment in ourselves because we find it in those close to us and our accomplishments. We have to recognize that we are good and trying to give to others. Our unconditional love is the gift that we give to others.

We all seek dominion or meaning in our life. This is central to the human condition-- having a sense of control, empowerment, and purpose on this earth. This has little to do with having possessions or accumulating them. It deals with finding meaning in life by finding connectedness with others.

In a spirit of gentleness, this is found in our love of others-- a meaning that draws us close to others and has us extend ourselves to others. In this, we find the central purpose of life. However, when a person lacks this, it is easy to push others away and seek dominion in seemingly absurd things. The person feels, "I cannot trust others. I will only trust that which I can have power over!" Many behavior problems are the person's way of trying to find some meaning in life, even if it is the power over hurting one's own body, hurting others, or simply withdrawing from human contact. Our task is to make or re-make a sense of being loved the center of the lives of those whom we serve. Read the list that follows and check the factors that apply to a person whom you are helping to get an idea of how loved the person feels. When you are finished, think about how much more deeply you have to teach a sense of being loved.

FEELS UNLOVED...

- Complaining
- Addiction to drugs or alcohol
- Poor grooming and dress
- Withdrawal
- Self-stimulation
- Hurting Self
- Hurting others
- Irritability
- Running from caregivers
- Running from peers
- Screaming
- Hoarding objects
- Hurtful sexual expression
- Sense of worthlessness

FEELS LOVED...

- Asking for help
- Finding joy in others
- Pride in self
- Socializing
- Pride in hobbies
- Caring for bodily needs
- Helping others
- Contentment
- Finding joy in care givers
- Finding joy in peers
- Sweetly communicating
- Sharing possessions
- Loving sexual expression
- Sense of self-esteem

When a person does not feel loved, it does not necessarily mean that we are mean, cruel, or thoughtless. Most often, it has been deeply rooted long before our arrival in the person's life due to life experiences, inner vulnerabilities, or a combination of both. The question is, "If the person feels unloved, what can we do to cause a sense of being loved?" We need to enter a process of teaching, "You are good and loved!" This occurs side by side with teaching emotional safety and is intertwined with it. It is taught within the same context and at the same time.

FEELING LOVING TOWARD OTHERS



As these feelings unfold, a simultaneous task is to teach the person to love others. This third pillar involves an increasingly stronger feeling of human interdependence-- moving from the passive and indulgent love that the caregiver initially showers on the person and toward an active love in which the person learns to reach out to others.

In normal moral development, a baby first learns to feel safe and loved in a passive, indulged way. The caregiver gives, the baby learns to receive. The caregiver showers the infant with warm smiles, touch, and sounds, the baby learns to feel loved. The caregiver begins to quietly ask for loving interactions and one day the baby gives love. It is not demanded. The baby grips our finger, looks sweetly at us, and coos. Little hands gradually reach out. Lips turn upward in a smile. Eyes brighten upon seeing us. To be loving is hoped for. And, it comes.

Feeling safe and loved are prerequisites to learning to love others and have to be present throughout the process. In each of these dimensions, our expression of unconditional love is the force that energizes the entire process. Teaching the expression of love toward others starts with teaching it to be expressed toward us in simple, but beautiful, ways-- a warm handshake, an affectionate gaze, an endearing embrace, a kind word.

Love and hate are like twins. They are both deep and intense. The only thing that separates them is an abiding sense of companionship. Love takes hold of the heart when there is trust. Hate latches its cold grip on the heart and breaks it when the fear of loss or a sense of "What is the use!" takes control. We have to create trust and teach others to feel loved and loving. This feeling has to start with us and our ability to teach it. Our example, words, touch, and presence are the person's first signs of knowing what it is. We have to be very giving and realize that we are gently teaching those whom we serve to have dominion over their own lives through the expression of love. We teach it by also asking for it, coaxing the person into expressing it, and setting a consistent example.

Look at the list that follows and think about the factors that apply to a person whom you are trying to help. Think about how much more you have to find a way to teach the person to love others.

LOVING OTHERS

- Smiles
- Touches warmly
- Communicates joyfully
- Approaches others
- Stays with others
- Seeks out others
- Shares personal objects

DESPISING OTHERS

- Frowns, cries, clings, curses
- Grabs, hurts, disrespects
- Communicates harshly
- Withdraws
- Self-stimulates
- Prefers solitude
- Hoards

The ability to express love to others involves a moral maturing that stretches the person and moves him/her beyond self. Instead of passivity, the person begins to find joy and contentment in the well being of others, to strengthen self-esteem by reaching out to others, and to feel empathy--feeling that others are feeling and even what they are feeling.

HUMAN ENGAGEMENT

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Human engagement is the fourth pillar in building a feeling of companionship and community. It involves the gradual unfolding of a sense of active participation as a companion and as a community member. It is a feeling of becoming an active participant in community life. It is not self-centered, but a shared feeling of “We are somebody because we are together and we are forming a better community.” Its initial expression is found in the simple act of reaching out to others.

Loving others is the first dimension of engagement. It is intertwined with feeling safe, loved, and loving. As this occurs, each person then becomes more of an active participant in family and community life. This participation involves doing as well as we can in school, work, and play. It involves the development of our personal gifts and talents. It grows more complex the more grounded we become. In one person it might be sweeping the streets as if one is sweeping the heavenly stars. In another person it might be leading a nation. In yet another person it might be the mere act of smiling. For the homeless child, it might mean finding a home and becoming a member of a family. For the person with a severe intellectual disability, it might mean learning to communicate through sign language or gestures. For the teen-ager in a gang, it might mean slowly leaving the ways of the gang, finishing school, and starting a family. For the abused and neglected baby, it might mean learning to feel safe with a foster family. For the aged person wracked by senility, it might mean following a schedule that slows down the loss of skills once found so easy.

Engagement is like the widow’s mite. The poor widow who gives a pittance gives as much as the rich person who gives millions. Engagement is each person becoming an active participant in the formation of companionship and community to the degree that each is capable. Caregivers have to be sensitive to the gifts and talents of each person, have high expectations, but also realize that, without the foundation of feeling safe and loved, no one learns anything.

Engagement is a difficult process. We have emphasized that the foundation of the human condition is feeling safe and loved. During this dimension, caregivers indulge the person with unconditional love. The only expectation is that each person learns to accept love. Yet, a moment comes when more is expected. The person moves from passive acceptance to active participation.

This involves an emotional stretching process. The person trusts the caregiver. Now, the caregiver begins to help the person move from being a passive participant in the world to a more active one. The first sign of engagement is a desire to be with the caregiver. This comes out feeling safe with the caregiver and loved by the caregiver, but then it becomes more

complex. When a person has been indulged with love, he/she begins to express love to others. Yet, there is often a self-centeredness. The world still revolves around the person.

Engagement relates to chipping away very gently at the self-centered nature that comes with a broken heart by teaching the person that it is good to reach out to us and others, be together, do things together, and even do things for others. This starts with teaching, "It is good to be with me! I will help you at every moment. Then, we will learn to do things together. And, you will even do things for me and others because you trust me!"

Engagement is asking the person whom we have indulged with nurturing to begin to participate more in companionship and community. It is a new demand, but one that is built on feeling safe and loved. As trust emerges and deepens, the sense of demand is lessened.

It is a stretching process much like the one that a toddler goes through. It first involves learning to wait for what one wants. The mother who stands at the grocery store check out stand watches her baby grab a piece of candy. At first, the mother gives in to avoid a tantrum. The next week, the mother takes the candy and says, "In a second!" The baby waits. The next week, she says, "Wait until we are outside!" The baby waits. Then, "Wait until we are home!" The baby waits. The mother is stretching the baby and, because the baby trusts the mother, the baby waits. The mother starts where the baby is at and sometimes gives in to avoid violence and evoke peace. She slowly gentles herself into the baby's world. As the child or adult learn to wait, the caregiver also begins to ask the person to do things together. Eventually, this turns into doing things on one's own and even for others.

ENGAGEMENT IS LEARNING THAT IT IS GOOD...

- To be together
- To do things together
- To do things for one another
- To do things for others

Engagement cannot begin without feelings of physical and emotional safety emerging along with feeling loved and loving. As the person learns to feel these, we begin to teach engagement. At first, caregivers need to move gently, slowly, and softly. It makes no difference that the person "knows" what to do or how to do it. The question does not revolve around this; it involves the difference between mistrust and trust. Distrust encompasses a feeling of "I do not want to be with you. I do not want to do anything with you. I do not trust you. I do not want to do anything for you!" We have to slowly, but surely, gentle our way into the person's heart. Trust is rooted in

feeling safe and loved. It leads to doing things for others.

At this point, many caregivers might worry about "compliance"-- a kissing cousin of an authoritarian attitude. Compliance is based on fear; engagement is based on trust. Instead of being preoccupied with compliance, we need to teach the person to feel that it is good to be with us, doing things together, and eventually doing things for us out of mutual trust. The authoritative caregiver does not give any hint of demand, but finds ways to draw the person into a commonly shared world in which there is a sense of connectedness. The care-giving act is one that teaches a fundamental meaning "We are on this earth to be together and to do things together, and even do things for others. And, these are good!"

Disengagement is self-centeredness. If the world is unsafe, then it is necessary to put up walls around our very being. These defenses serve to protect us and push away those whom we see as domineering. Engagement teaches a new feeling. If the world becomes safe, then the walls can come down. This requires a very soft pushing into the person's besieged world and an understanding of the moral conflict between disengagement and engagement. The disengaged person sees no reason to be with us. Aggression or withdrawal gives more meaning to the person's life than being with us. Our role is to teach a deep meaning of the goodness of being together.

All of us look for meaning, a sense of dominion or purpose, in our lives. For some, it might be family or friends. For others, it might be material possessions. For the powerless, life's meaning can be found in the basic act of rejection-- pushing others away as the last frontier of some dominion in their lives. We have to teach that there is meaning in being with us, doing things with us, and even doing things for us.

Caregivers might think, "Well, the people whom I serve like to be with me!" This may be so, but the question is "Do they like to be with me because of mutual warmth, doing things with me for the sake of being with me, and doing things for me out of trust? Do they want me to be with them when they feel sorrow, anger, and frustration?" Engagement relates to a feeling of mutuality, one in which the person learns that to be with others is inherently good. It is a symbol of what it means to be human-- being together, offering support and protection, giving and receiving generous encouragement, and sharing joys and sorrows.

Read the following list and ask yourself to what degree someone whom you are helping is disengaged or engaged with you, house mates, work mates, classmates, and friends. Check the factors in each column below that apply. When you are done, think about the meaning of engagement and how much more deeply you have to help the person learn it.

DISENGAGEMENT

- Ignores others
- Rebels against care givers
- Rebels against friends
- Rebels against family
- Refuses to share
- Sees no joy in others
- Sees little joy in self
- Withdraws
- Self-stimulates
- Has little pride in self
- Prefers to be alone
- Dislikes school or work

ENGAGEMENT

- Seeks others out
- Enjoys care givers
- Enjoys friends
- Enjoys family
- Offers to help
- Finds joy in others
- Finds joy in self
- Participates
- Has hobbies
- Takes pride in self
- Seeks to socialize
- Likes school or work

Teaching engagement is a very complex task due to our culture's obsession with independence, self-reliance, and productivity. These cultural values are secondary in moral development. For independence, skill acquisition, and a sense of empowerment to come about, we need to teach a sense of engagement-- helping the person to continue to feel safe and loved while being slightly stretched. Engagement's complexity is compounded by the self-centered nature of violence, a feeling of "I will do what I want to do!" Since we have indulged the person with unconditional love, we can produce distrust and rebellion if we are not cautious and delicate in stretching the person. Teaching it is like chipping away at a delicate piece of glass with jagged edges. It requires gentle movement into the person's world without frightening the person. It is a quiet, gentle intrusion rather than an insistent invasion. The intrusion pushes softly and quietly forward, retreats at any sign of rebellion or violence, and then pushes forward again. In the beginning we met the person where she/he was at—in a fearful and meaningless world. Now, we ask the person to meet us, not halfway, but just tiny bit.

While teaching engagement, it is understandable that the person might rebel. When there is rebellion, we have asked too much. We are seen as demanding. Fear emerges once more. We need to back off and re-establish a sense of trust. Perhaps, we have to give in for a while, but then move forward. It is like the ebb and flow of the ocean. Caregivers need to be sensitive to when to push and when to back off.

Trust can be easily shattered when the person has a life-story of being pushed, pulled, and tugged by caregivers. At this point, we have to be very soft, slow, and gently inch forward without the person even feeling any sense of being made to do anything. This is a hard care-giving role-- to get someone to be with us who does not want anything to do with us and to bring about participation with us in a person who only senses cruel

demands. As we stretch the troubled person, we have to be very careful. A good rule is to avoid provoking any violence and concentrate on evoking peace.

BECOMING ENGAGED

- Rebellious
- Passive participation
- Doing things together
- Ebb and flow of rebellion
- Doing it by self
- Mutual enjoyment
- Pride in being together and doing things together

EVOKING PEACE

- Be soft, slow, and gentle
- Do things for the person
- Draw the person into activities with you
- Always be ready to help or even back off
- Give gradual responsibility
- Focus on the relationship
- Honor the person for being with and doing things with you

As in learning to feel safe and loved, the first dimension of engagement involves a passive phase, "Fine, I will let you be with me. You can ask me to do things with you. I might do a little for you. But, if I do not want to be with you anymore, I will just leave!" This occurs in an ebb and flow-- first no participation, then a little, then none, and then a little. The caregiver understands this process and gradually deepens the sense of mutual participation. Finally, the person starts to take joy in doing things with you, for you, then on her/his own, and finally for you and others.

This process takes much patience and tolerance on the caregiver's part. The disengaged person simultaneously learns that our presence is good and that this leads to feeling the goodness of being together. As the moments wear on, the care giver might start doing something for the person instead of asking the person to do it, but gradually draws the person into the process-- ever sensitive to the ebb and flow of rebellion, making certain that there is little or no frustration, and expressing warmth throughout the process. Indeed, at the is point, care givers often need to increase their expression of unconditional love to remind the person of companionship and highlight the joy of being together.

CARE GIVING TOOLS



We possess four basic tools to teach the person who we are: our presence, our hands, our words, and our eyes. Of course, how we use these comes from our values—seeing each individual as brother-sister, knowing that everyone hungers for love, and centering our care giving on unconditional love. We are instruments of teaching companionship and community. Unconditional love has to be expressed in our very being. Our presence has

to evoke peace like a single glimpse of the sun does in the midst of a storm. Our touch, words, and eyes have to be like a gentle breeze that calms the storm of fear and meaninglessness that is always lingering on the horizon.

We must be authentic. How we use these tools has to reflect our own life-story and personality. In some cultures and sub-cultures a warm embrace is common and natural; in other cultures it is strange and unnatural. In some cultures a kiss on the cheek is common; in others it is stilted and frowned upon. Some caregivers have little difficulty speaking a language of love; others find it awkward. These differences have to be respected. Yet, we also need to think about what the marginalized person needs and begin to stretch ourselves so that we might bring the warmest possible acts of love to those who feel unsafe and unloved. The challenge is to do this and still remain authentic.

TOOLS OF CARE GIVING

- *Our Presence*—To convey a message of peace, protection, and caring
- *Our Hands*—To convey a message of being safe and loved
- *Our Words*—To convey a message of encouragement and nurturing
- *Our Eyes*—To warm the person's heart with tenderness and love

We use these tools to help the person memorize who we are and who he/she is. Just as a first grade teacher helps a child learn numbers by repeating them over and over again, so we also teach these central feelings through repeated acts of love. Just as a teacher uses work sheets to do this task over and over, so we also use our tools to help the person with a broken heart to memorize and internalize feelings of being safe, loved, loving, and engaged. We have to be aware of our tools and orchestrate their use with care and sensitivity so that we might mend broken hearts-- a soft touch here, a warm gaze there, a word of encouragement, a loving embrace, a sense of sharing.

OUR PRESENCE AS A TOOL



Our mere presence can bring a sense of peace or an enveloping sense of fear. It can either signal to the person, "Oh, this is just one more care giver like all the others!" or "When you are with me, you are safe and loved!" If we choose the latter, we will then look much more closely at ourselves and the role that we play in teaching new ways of interacting with us. Our bodily presence has a profound influence on how the person learns to interpret who we are. And, it is expressed in how we use our hands, our face, and our voice. Our bodily bearing is a sign of our spiritual bearing. What a terrified child or adult sees in us is what he/she sees in our heart. A

spirit of gentleness asks us to present ourselves as relaxed, peaceful, non-demanding, and loving. It asks us to slow down and soften our presence. We have to teach a new meaning to our presence. We have to teach the person that our very presence is good and loving. This is partially learned through our movements, sounds, softness, rhythm, and warmth. These are very subjective, but absolutely necessary to define and put into practice.

Our presence has to evoke peace rather than provoke violence. Our movements need to be attuned to the needs of the person. When the person is angry, we have to go more slowly and less frighteningly. Our very presence has to be non-threatening and welcoming in spite of any violence that might be going on. The rhythm of our movements has to be reassuring and nurturing, sometimes slow and deliberate and other times more animated. Our being has to express warmth through our gaze, touch, and words. Everything we do has to uplift rather than put down. Care giving is a very creative and delicate act. Our presence is critical. It is the first image that the vulnerable person has of us. We need to enter the person's frightening world where he/she is at with humility, with the knowledge that deep and enveloping fear and meaninglessness are in the person's heart, and with the purpose of evoking peace. At the beginning, there is nothing else that is important.

THE CARE GIVERS PRESENCE

- Movements attuned to person's needs
- Relaxed and unafraid
- Peaceful
- Calming
- Soothing
- Welcoming
- Generosity of spirit
- Sense of uplifting

Our presence can be seen as a sledgehammer. We need to be deeply aware of the person's fear of us. Do not expect the person to come into your space. Enter gently into the person's space. Make no demands. Indeed, for a few, our mere presence is a demand. We have to soften our presence and just worry about the present moment almost like calming a terrified baby and bringing a sense of "Shh, I am not going to hurt you. I am not going to make you do anything. I just want to be with you!"

TOUCH AS A TOOL

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Once we have entered this world, our touch is very important because it can send a direct and concrete message to the person that he/she is safe with us and loved by us. It is not always possible to use touch as a tool, but when we can it is powerful because it can give a clear message of being safe and loved. We have to be aware that our hands begin to give a new memory-- safe and loving, slow and gentle, warm and nurturing. Instead of fear, they need to signify warmth, affection, support, uplifting, kindness, and welcoming. Our physical contact is a good tool because it can send a clear and concrete message of being safe and loved.

Remember that we only have four tools to teach a person to feel safe with us and loved by us. Physical contact will be meaningless for many vulnerable people or even provoke fear. Many have deep memories of abuse, physical restraint, and being pushed around. Our touch has to give a new memory, "When I touch you, it means you are safe and loved!" As with our presence, we have to enter into the person's world slowly and softly. Our touch has to avoid provoking fear and churning up the muddied waters of old memories. It has to evoke peace. For many people, our initial contact will have to be light and delicate. Then, as the person's fear diminishes, we can linger longer.

Of course, we need to be cautious with our touch. Some cultures frown upon physical contact. Some care givers even fear it. Some people whom we serve might misinterpret it. Others might exploit it. Some systems forbid it. If touch is to be used, it should be part of the culture of the classroom, school, or home. All involved should agree it upon. If physical contact is not used, caregivers need to be very good with their presence and words. At the start, the person might be scared of our touch, flinch at it, or be spooked by it. If we see this reaction, we should touch more softly as if touching the wing of an angel. We have to teach the person that our touch is good, beautiful, and loving. This calls for us to touch abundantly, over and over again, forming a physical and spiritual connection between the person and ourselves. Touch as a teaching tool can bring up some difficult issues. It is not a tool that should be used with everyone. Nor is it used in the same way. It is a key tool because it is concrete and helps enter many broken hearts quickly. Caregivers have to know with whom to use it and when to use it as a central way to teach the person, "When you are with me you are safe and loved!" Some might misinterpret the touch in a sexual manner. We have to take some caution and make sure that this does not occur. A way to do this is to always link the touch with words that define its meaning, "We are friends. This means that we are friends." And, if there is any hint of misinterpretation, the caregiver needs to try other less intrusive forms of touch, for example, a pat on the back instead of a hug. The age of the person also has to be considered. The older the person is, the higher the

possibility of misinterpretation. So, as the person enters pre-adolescence years, it might be necessary to back off on physical contact like hugs and replace them with milder forms like a pat on the back.

WHAT PROBLEMS MIGHT ARISE WITH TOUCH?

- Our touch is to teach the person the feeling of being safe and loved
- With any sign of sexual misinterpretation on the person's part, the touch should be changed to something less intense and always given with "This means you are good... I am your friend..."
- If this is too much, back off on the physical contact
- We also have to be vigilant for any type of pedophilia
- If the person fears touch due to life-story or the inherent nature of a disability, use your physical contact slowly, softly, and lovingly—avoiding any provocation of fear or violence

We have to make sure that all involved know why touch is an important tool and then watch out for the slightest hint of misuse or misinterpretation. The use of physical contact should be thoroughly discussed by caregivers-- its importance, its use, its possible abuse. It is important because it is a quick way to teach a person to feel safe and loved. It is concrete and direct teaching. Its use is important among persons with broken hearts. The best teaching is very concrete and direct. It occurs in the here-and-now. Person's who do not know the meaning of being safe and loved can learn its meaning through our touch.

Many people with broken hearts are scared of human touch. The nature of their vulnerabilities can lead them to rebel against it or years of abuse can make them horrified of it. The use of physical contact has to be done cautiously. Many children and adults not only have to learn that it is good; they have to deal with years of old memories that mean that it is bad. Caregivers have to slice their way through these old memories and teach new ones.

Touch is often good because it can send a strong and clear message of being safe. Generally, its initial use should be soft and slow to avoid provoking fear and rejection. It should be done repeatedly so that the person memorizes that it is good and the first sign of companionship. As the person begins to feel safe, caregivers find other ways to signal being safe and loved.

WHEN SOMEONE FEARS OUR TOUCH, BUT IT WOULD BE GOOD... TOUCH AS IF YOU ARE TOUCHING THE WINGS OF AN ANGEL.

- Lightly
- Quietly
- Slowly
- Without provoking any fear
- Explaining. "I will not hurt you... This means I love you..."

As caregivers, we have to collectively decide what role physical contact plays in the culture of our care giving. It is a good tool because it is a very concrete way to begin to teach many people that "When you are with me, you are safe!" It is obvious that it is not always usable for the reasons we have touched on. Yet, we also have a responsibility to stretch ourselves and even our culture. Talk about it. If physical contact is to be used, use it in an authentic way and discriminate when to use it. If your life-story, personality, or culture is such that it is hard or confusing for you to have physical contact with others, do not use it as a tool, but find other ways to teach others to feel safe with you. What we need is contact with troubled individuals and contact that brings a sense of peace.

In a way, we have many hands. Our presence is like a hand that can bring peace. Our words are another hand that can uplift. Our eyes are like hands that can bring warmth. And, our hands are often the most direct way to bring a feeling of peace, uplifting, and warmth.

OUR WORDS AS A TOOL



Our words are our third tool. Words are more than words. They are like our hands that need to reach out to and uplift the troubled person. They form a dialogue. As care givers, we have to see them in their wholeness—their warmth, tone, rhythm, as well as the message of their content. The dialogue has to start with us and, in the beginning, will have little meaning since the person with the broken heart will not know the meaning of our message of love. We have to recognize that our words can be as intrusive and demanding as our touch.

The person is likely accustomed to gruff and demanding words. When we talk, we too often just use words of reprimand, "You know better than that!" or just words of behavior modifying praise, "Good job!". Our words need to be used to talk of our affection, how good the person is regardless of what she/he is doing, and how the person is safe with us and loved by us. All the time we converse, we should also use our hands to show the person what we mean.

OUR WORDS AS A TOOL. HUSH! DON'T BE AFRAID...

- Expressing unconditional love
- Bringing warmth, encouragement, and honor
- Expressed softly and slowly
- Telling simple, here-and-now stories of love, goodness, and other things of beauty

In the beginning, our conversation should be in the form of story-telling, not long-winded stories, but short, love-filled ones. This is harder to do than you might think. So often, the person does not seem to care. It can feel like we are talking to a wall. However, the more we use our words to story-tell, the more the person learns that we are good and kind. The words themselves are important. But, the warmth conveyed within them is even more important.

To become a good storyteller, think of how you might converse with a baby or with someone who has just suffered a great loss. These images should conjure up warmth and love in the tone of our words, “Shh! I will not hurt you... You are good... Just know that I love you...”

OUR EYES AS A TOOL



Our eyes are our most penetrating tools. We need to pierce through the fear and meaninglessness that so many are caught up in. They say that the eyes are the windows to the soul. We are not talking about the “Look at me!” eye contact that we sometimes ask for. No, we are saying that our eyes have to meet the person’s, penetrate the heart, and give a message of warmth and love even when the person seems not to be looking at us.

As strange as it may sound, our eyes are like our hands and words. They have to slowly and lovingly touch the person's heart and send a deep message of being safe and loved. Remember! Persons with broken hearts fear us and see no meaning in us. When we look at them, they might look down or look coldly at us. Their eyes might dart back and forth. They see feel no connection with us. We need to use our eyes as strong and penetrating tools that reach into the person’s broken heart-- warming it, caressing it, and mending it.

OUR EYES AS A TOOL. OUR EYES ARE THE WINDOW TO THE SOUL...

- Do not mind that the person is not looking at you
- Place your gaze as near to the person's empty fearful eyes as possible
- Use them carefully bearing in mind that our eyes can be like a sledgehammer or a warm breeze.
- Use your eyes as you would your hands—softly, warmly, lightly, lovingly

These are our teaching tools. We have to learn to use them to teach the fearful person safety, engagement, and unconditional love. This process brings about a sense of companionship and, eventually, community that, at first, is rejected, but then slowly accepted as it takes on meaning. And, from this an active and mutual feeling of companionship and community emerge.

We have a responsibility to look at our own interactions and make sure that they express the softest and warmest human expressions possible to ensure feelings of safety. However, before this, we need to remind ourselves again of the sense of fear that pervades the hearts of vulnerable children and adults.

Our attitude toward care giving is critical. We have to be clear about who we are and where we are headed in the care giving relationship. Our direction is toward companionship and quenching the thirst for feeling one-with-others. Our focus is on nonviolence and teaching human interdependence. The first dimension in this is to recognize fear and teach a feeling of being safe with us.

Let us go back to Joseph who has just stumbled into his home in the middle of the night.

Your thoughts race like bolts of lightning that pile on each other, huddled, waiting for the thunder, "He knows better! He'll be dropping out of school. His grades are down. He sleeps all day. He curses and yells at me. He calls me a 'no good' and 'worthless.'" Hope begins to slip out of your heart. Emptiness, sorrow, anger swell in that moment between lightening and thunder there is a moment of quiet stillness. Everything stops. You ask yourself, "My God, what do I do?" You think, "Oh, it is so hard to give love where there is hatred, but that is what I must do—teach my child to feel safe with me and loved by me once again. I should hug him, kiss him, and tell him he is good. Then we will figure out where to go from here!"

We have reflected on the need to teach him feel safe with us and loved by us, even at these horrible moments. We have thought about how we have certain tools—our presence, our touch, our words, and our eyes. Now you respond to the question, “My God, what do I do?” Think of what your presence says. Will words of degradation or love come from your mouth? Will your hands slap Joseph or sooth him? Will your eyes look with hatred or warmth?

Our overall response has to be that we will encounter him with unconditional love. This is very hard and paradoxical. It goes against the grain of some cultures and many personalities. Yet, it is what will begin to mend a broken heart. You might not say anything at the moment or you might just mother him. Maybe you cannot give him a hug at the moment, perhaps tomorrow you will say, “I love you!” and we will figure this out!” Then, though worried and sad, you might give him a hug and a kiss.

We have looked at what the act of care giving is about. Its first purpose is to teach a feeling of companionship that eventually serves as the foundation for community formation. We have examined the importance of our presence, touch, words, and eyes, and have defined these as our principle care giving tools. We have analyzed the four elements that make up a feeling of companionship and community and have described their meaning. By now, we should understand our work is to teach a feeling of being safe with us, loved by us, loving toward us, and engaged with us. If we can do this, then these feelings will spread into the community that we are forming.