

## God, Life, and Everything "An Ebola State of Mind"

Back in my seminary days (when MC Hammer was the latest rage), all seminarians were required to spend time as intern chaplains, usually at a hospital. I got placed at Bellevue Hospital where I was assigned six different units to visit each day.

This was at the height of the AIDS crisis when nobody *really* knew how the disease was transmitted, and everyone lived in mortal fear of it. The medical staff were suiting up in gowns, gloves, and face masks. The HIV positive patients were isolated in a separate wing of the hospital.

We intern chaplains had a conference with the head chaplain about all the panic. We wondered if we could really be available to the patients if we were separated from them by all that gear. What message would we be sending them? Since research was already beginning to suggest that HIV could not easily be transmitted, we discussed whether we should go to the patients without all that stuff.

After consulting with medical personnel, our supervisor said we each had to come to our own decision on how to approach those with HIV. It was a slightly frightening time, but one that made us look at our fears and sense of pastoral presence.

I was reminded of this when I saw on the news that Bellevue has been designated as the go-to hospital for any possible cases of ebola that might make their way to New York City. There are differences, of course. We know a lot about how ebola is transmitted, so the precautions, though far more stringent, are also more reasoned and appropriate. As clumsy as our country's response may seem, we are much better prepared to handle ebola than we were to handle AIDS.

For what it's worth, if I were called upon to provide pastoral care to someone afflicted with ebola, there's no question that I would gown up. But then, there's no question of ebola's communicability. Also, ebola, if treated promptly and properly, can be cured.

But it does leave us pondering what kind of a response we need to make to this disease. Do we need to fall into panic mode, fearing every cough or every person who walks into an emergency room? What is the government's responsibility for this? What is yours? Or mine?

Let me start by saying that I believe the government has a role to play in stopping the spread of the disease. A friend of mine has for years insisted that government has no business in health care - that in fact there should be no CDC or even Medicaid. Actually, he has told me over the years that "government is the problem" and shouldn't be involved in much of anything other than the military. Not even air traffic control or postal service. He is, however, screaming that the government has responded too slowly to the ebola apocalypse.

Part of his screaming is fear. And why such fear? Certainly, the descriptions of ebola death are gruesome. The fact that someone could fly into the country undetected makes you stop and think. Sure, we need to screen people more closely, and that is government's job, and the government must do a better job.

But, I would suggest that while ebola is nothing to mess around with, the fear is largely there because we love fear. In fact, we're addicted to it. Watching TV news is like a drug - you don't like its effects on you, but you can't turn away. And when you *are*

away from it, you can't wait to see more. Every news broadcast screams, "be afraid!" Ebola is perfect for this kind of news.

So let's take a step back and remember that so far, one person has died in the US from ebola. Two others are infected - and recovering. More than 20,000 had died of AIDS before the government stepped in back in the 80s.

Let's also remember that our facilities are so far superior to those in countries where ebola is at the epidemic stage. We have better hospitals, medications and equipment for medical personnel. Those brave and dedicated doctors and nurses (and clergy, I might add) in western African nations continue to serve their patients even though they risk their lives to do so. Indeed, 129 nurses have died caring for ebola patients. Fear will not keep them from their service to humanity.

One thing I would like to note in this discussion of ebola is that fear can take over where it has no right. Many is the time that disease has swept through society - or taken up residence with disastrous results - and yet, dedicated medical and pastoral care workers stay at their posts despite the risks.

Last month, our church observed the feast day of Constance and Her Companions, nuns in Memphis, Tennessee who remained in the city during the 1878 Yellow Fever outbreak. Both Episcopal and Roman Catholic nuns stayed, and nearly all of them died. In April, we'll observe the Feast of Damien & Marianne of Molokai, a priest and nun who cared for lepers when few others would. Fr. Damien contracted leprosy and died from it. Sister Marianne cared for him and others until her death in 1918.

My point is not that these are exceptional people but that they set aside their fear. Believe me, my fellow seminarians and I at Bellevue Hospital, as we considered what we should do, understood very well that the times might be exceptional, but we were not. We don't have to be exceptional in order to set aside fear especially in our privileged society with such good medical care. We do not need to give in to panic, no matter how addicting it can be.

This is especially true if we believe God is with us in all things. So, as we deal with ebola, let's set aside fear and replace it with an extra helping of patience and compassion.