Chaplaincy Update at LA Medical Center- April 2024

As we begin another new month, I am reminded that summer is approaching and how quickly spring is passing by. This is my fourth month at LA General, and I continue to be grateful to God for guidance and wisdom as I serve as a chaplain. As noted, before, I try to visit at least fifteen patients a day, depending on what other activities are going on. One of the units I cover once a week on Wednesdays is the Labor and Delivery unit, which is known as 3B. From my days of serving at Providence, I know that labor and delivery is one of the units with a few patients, and on most days, I visit with mothers who are waiting to deliver. Sometimes, these mothers are dealing with pregnancy complications that require constant monitoring. It's always a joy for me to walk into the department and see a mother who has delivered and is holding the baby while being transferred to the postpartum unit, which in some hospitals is known as "Mother and Baby."



Artwork in Labor and Delivery Unit

While in most cases, the patients in labor and delivery are coping well, sometimes there are challenging encounters, and so this month, I would like to reflect on a few of these visits.

"Sheltering as a family"

During one visit, I met a middle-aged woman in her midthirties who had just delivered a baby boy the day before. She seemed sad and withdrawn and, at first, said, "I am doing okay, though I have a lot going on." I sensed that as I walked around the bed to see the baby who was sleeping in a crib near the bed, the woman was trying to decide if she wanted to share her story or not and was assessing if she could trust me with what she was going to say. To keep the conversation going, I asked her about the baby's name, and she replied that she had chosen to name him "Benjames" (pseudonym). I commented that it was "a unique name," and the woman went ahead to tell me that she made it up by combining two other names.

After several interruptions by other staff members, the woman, who now seemed comfortable with my presence, started to share her story. She had been admitted from Union Rescue Mission to deliver the baby here at LA General, and it was her fourth child. She had three other children under the age of fourteen, and to avoid leaving them alone at the shelter, she contacted a friend who offered to care for them until she could pick them up. As I explored how she ended up at Union Rescue Mission, the woman, who is a first-generation immigrant, went on to share her story of moving from Maryland after her marriage ended and things did not

work out with her cousin, who had invited them to stay with her in Fresno. She was now feeling desperate and didn't know what to do; all she knew was that she did not want to go back to Union Rescue Mission with the new baby since they needed a more stable environment.

I helped the mother explore options, such as talking to a social worker, to see what resources are available for finding other shelters that may accept families. She was also thinking about going back to work, but with four young children, she was not sure how things would work out. The mother was also concerned because she had her own health issues and the medical team was trying to manage her blood pressure, which was too high. Towards the end of the visit, I asked the woman if she had any faith background, and she went on to share about her faith as a Christian and that she had not attended any church for a while. She agreed for me to pray for her and bless the baby, who was "a gift to her and her family," even though she was worried about what the future with four young children looked like as a single mother. As I continued with other visits, this visit remained in my mind, and when I attempted to follow up for additional support the next morning, I discovered that she had been discharged.



Lunch with staff chaplains and CPE interns!

"Blessing the Remains"

A few weeks ago, I received a referral to visit with a mother who had a fetal demise. While checking in with the nurse, she informed me that the mother, who had delivered a few hours earlier, was incarcerated, and they were only waiting for a chaplain "to bless the remains" and then for a social worker to bring some grief and counseling resources. She decided to escort me to the room and introduce me to the woman whose name she said was "Jaime" (pseudonym). When we entered the room, Jaime was lying on her bed, though she was awake, and seemed like she had not slept at all. After introductions, I stayed present to provide support while we waited for the fetal remains. Jaime went ahead to share that she had "four other children who are all healthy, "but they had been taken away and are in the foster care system." She also mentioned that before she was taken to jail in March, she had lost the father of her children, so she was planning to wait until she left prison in May so that she could have more time to grieve. As we spoke, I noticed that Jaime felt ashamed and was still

unsure if she could trust me with her story, especially the part about why she was in jail. After staying silent for a few minutes, Jaime then went ahead to let me know she had done "something stupid" and was only looking forward to getting out of jail and finding a shelter.

Jaime then decided to take a break to freshen up, and when she returned, she took the fetal remains, which the nurse had wrapped like "a baby," from the crib. She was still sad, and for a few minutes she just stared at the remains. She then continued her story; a few days earlier, Jaime had started feeling pain and was not sure what was wrong. She had gone to the infirmary, where she was given some pain medication, but the prison staff did not check if something was wrong with the baby "because they didn't really care." The day before, when she discovered no heartbeat, they finally allowed her to undergo an examination. While still looking at the baby, Jamie expressed her regret that maybe if the prison staff had allowed her to be checked, they could have saved the baby, whom she was longing to have as her own, as her other children had been taken away. We talked about dealing with grief, and I helped Jaime see that hers could be complicated because she has several losses she was dealing with. I also encouraged her to allow herself to grieve even while still in jail instead of suppressing it. As I explored Jaime's faith preference, she went ahead to let me know she had grown up in a Catholic home but was no longer practicing or thought of herself as a Catholic. Instead, she had her own relationship with God, which is why she had requested for someone to bless the remains. She also informed me that she had planned to call the

baby "Genesis," and I read Psalms 23 and then offered a prayer as Jaime had requested. After the prayer, I noticed that Jaime was tearful while still holding the remains, and it was evident that she had started to grieve the loss. As I prepared to end the visit, Jaime asked me which passage I had read before the prayer, and I shared that it was Psalms 23, which I encouraged her to read again later as she continued to grieve the loss.



Leading reflection for High School Volunteers at St. Camillus

"When surrogacy goes wrong!"

One of my challenging visits was with a woman in her twenties who just had a fetal demise. Upon entering the room, the image of a flower, typically hung outside the door after death occurs, alerted me that this visit would be challenging. The patient, Susanna (pseudonym), was lying on the bed when I arrived, and after introducing myself as a chaplain, I inquired how she was doing. It was evident to me that she still seemed tired and sad, and she responded, "I am doing okay." Susanna then went ahead to ask me if I knew her story, and I responded that I was not aware, but I had seen the sign

outside the room, which indicated that she may have lost her baby. She went ahead to talk about her pregnancy's loss, which was about twenty weeks old, and then revealed that she was a surrogate for a couple outside the US and had started to develop issues in the last few weeks. Susanna, her voice filled with sadness, shared that the doctors had informed her that the fetus was not viable, and even if she carried it to term, the baby would die due to a rare illness that kills even babies born at forty weeks. Susanna then went ahead to share that, as a Christian, she was struggling with not only the moral decision of terminating the pregnancy, but also other issues such as being a surrogate and the use of IVF.



An Afternoon with USC Medical Students at St Camillus

As I explored the reasons why she had become a surrogate, Susanna shared with me that she had done it as a referral from a friend and for financial reasons since she was a single mother raising two kids of her own. We talked about dealing with grief as a mother, and Susanna went ahead to note that she was wrestling with questions

about how the baby or fetus felt during the procedure and wanted to believe that "she was in a better place based on her faith as a Christian." Most of my previous encounters were with mothers who had lost their own fetuses, so dealing with a fetal demise for a surrogate was a new experience for me, as was wrestling with the morality of the choices or decisions that women such as Susanna had to make. Susanna then proceeded to request Christian-specific reading materials about surrogacy, termination of pregnancy, and IVF, which I emailed her.

Prayer items:

- Pray for mothers with complicated pregnancies, those who have lost their babies, and those dealing with issues such as surrogacy and IVF.
- Pray for the staff working in Labor & Delivery, Mother and Baby, or Postpartum, as well as all the units where they care for children, including pediatrics, neonatal intensive care units, and pediatric intensive care units.
- Pray for incarcerated mothers and the difficulties they encounter in caring for their children, as exemplified by Jaime's story above (pseudonym).

Donation requests by our Volunteer Department:

- Adult diapers (all sizes), pants for men (size 36-42), and hygiene kits. These items can be dropped off at St. Camillus Center for Pastoral Care (Address: 1911 Zonal Ave, Los Angeles- CA 90033, Tel: 323-225-4461). In case of questions, please feel free to reach out to me- Charity Ngaruiya, using my email- cngaruiya@dhs.lacounty.gov