February 2009 Article of the Month

This month's article selection is by Chaplain John Ehman,
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Cadge, W. and Daglian, M. "**Blessings, strength, and guidance: prayer frames in a hospital prayer book**." *Poetics* 36, nos. 5-6 (October-December 2008): 358-373.

SUMMARY and COMMENT: Several years ago, I placed a blank book in our hospital's chapel, so that visitors could write prayers and prayer requests and generally offer written expression while in that sacred space. The book rests open on a small podium to one side of the chapel. There have never been any instructions about what to do, but the result has been the same as at other nearby hospitals that provide such a book in their chapels: from the very first day people wrote deeply personal prayers --many with an amazingly raw intimacy and beauty. Some hospital staff have told me that they go to the chapel just to be inspired by what people have written. I have thought about attempting a formal analysis of these remarkable texts, to better understand the phenomenon of this kind of "prayer book," and so I was pleased to discover that Wendy Cadge, a sociologist at Brandeis University, along with M. Daglian, an independent scholar, had undertaken a "systematic analysis of the content of hospital prayer books" [p. 361] by examining samples from Johns Hopkins University Hospital in Baltimore, MD.

Cadge and Daglian looked at the prayers written during one month for each of four years (1999, 2001, 2003, and 2005): a total of 683 prayers from 536 individuals. Unlike many hospital prayer books, the books from Johns Hopkins came from not a separate chapel space but from a "public thoroughfare close to a main entrance to the hospital and a security guard who checks identifications and distributes visitor's badges," and "next to a ten and a half foot tall marble statue of Jesus Christ, 'Christus Consolator' or 'Christ the Divine Healer' --a replica of Danish sculptor Bertel Thorvaldsen's original in Copenhagen" [p. 361]. Still, this research should be insightful for chaplains at hospitals with prayer books in more private locations, and the findings here suggest not only the value of these books to those who write in them but the potential for further study of these "cultural object[s]" [p. 359].

Among the findings:

> ...Almost two-thirds of all prayers (63.3%) included prayers for the writer, sometimes exclusively (in 27.1% of all prayers) and sometimes in combination with prayers for other people, primarily family and friends. Prayers were largely focused on writers' personal situations and experiences rather than on broader political or social issues.
> As a group, writers offered two main types of prayers...: prayers of thanks (21.8%) and prayers of petition (28%), which were often combined in prayers that first thanked God and then made a request or petition (27.5%). In a small fraction of prayers, less than 10%, writers also bore witness to their experiences, stating them apart from any mention of God or the divine.
> Prayers of thanks...were often quite general and involved writers most often thanking God for

"blessings," a broad term generally used to mean attention or favor from God, or for the divine presence more generally (41% of prayers). ...Writers also thanked God for their families or other people (17.7% of prayers), for their health (11.9% of prayers), for specific intervention from God (11.6% of prayers) and for life itself (9.7% of prayers). Prayers of thanks not connected to prayers of petition tended to be short and direct and to thank God for emotional or psychological support provided....

Writers were more detailed in their prayers of petition than in their prayers of thanks.... In their prayers of petition they tended to continue to request emotional or psychological support rather than specific outcomes. Prayers of petition were most frequently made for family or other people generally (43.3% of prayers) or for specific intervention from God around a named and detailed personal or familial situation (40.7% of prayers). Writers also petitioned for life and the self (25.5% of prayers), general blessings or divine presence (21.2% of prayers), and health (25% of prayers). [pp. 364-365]

The researchers further observe that prayer writers, as a group, seemed to understand God as "accessible and listening," as "familiar and loving" [p. 366], and as a "source of 'strength,' 'comfort,' and emotional help and guidance" [p. 368]; and "prayers often read as snippets of larger conversations…with God" [p. 367]. Regarding the sense of expectation of divine response to petitions, "writers tend[ed] to frame their requests in broad psychological language that allows for a range of interpretations" [p. 367] (i.e., "rather than in terms of specific outcomes with single possible interpretations" [p. 370]). Moreover, "Although more than two-thirds of Americans tell survey pollsters that they believe in miracles, the word ''miracle'' is rarely mentioned explicitly in these prayers" [p. 359].

Cadge and Daglian suggest that prayers like those written in these books may serve as "a means through which people reflect on and reframe difficult events, striving to incorporate them into their current belief structures" [p. 369]. They go on to set their research in the context of sociological and psychological theory. They also note the fairly consistent *pattern* of the prayers written in these books:

Patterns in the ways prayers were written in these prayer books are also important to consider, particularly because they were likely written by people from a range of religious and social backgrounds who were largely improvising rather than simply repeating prayers they learned in other contexts. The possibility that writers were simply copying the format, and to a lesser extent the content, of the prayers writers before them left in these books cannot be eliminated and needs to be examined in future studies. Alternative explanations might focus on commonalities in the structure of prayers in different Christian traditions and/or broader patterns in the structure of written thank yous and requests in the United States, outside of explicitly religious contexts. [p. 370]

With this in mind, the authors hold out the need for future research: "Additional information about how and why people write prayers in these books, how they decide what to write, and what they expect as a result of the prayer is also necessary to further develop and expand the preliminary interpretations offered here" [p. 370]. This should be a challenge for chaplains who provide such books in their hospitals and who have stacks of these rich resources sitting in storage.

Suggestions for the Use of the Article for Discussion in CPE:

For students at CPE centers where chapels visitors have the opportunity to leave prayers, this article should spark a close look at those prayers. The present study focuses on prayers in a Christian context, but any comparisons with analogous writings in non-Christian settings or by non-Christians would be intriguing. What do students understand to be the value and function of these kinds of written prayers for patients, families, and staff at hospitals? Some students may have difficulty relating to the sociological approach of the authors, but the

article is clearly written and contains many illustrations of the prayers being analyzed. The concept of "content-fixing objects" [--see pp. 363 and 370] may be worth exploring.

Related Items of Interest:

I. Other articles examining prayers left by chapel visitors:

Grossoehme, D. H. "**Prayer reveals belief: images of God from hospital prayers**." *Journal of Pastoral Care* 50, no. 1 (Spring 1996): 33–39. [Chaplain Grossoehme, at Children's Hospital Medical Center of Akron, Ohio, looked at 63 prayers written over a 6-month period in an "open notebook" (p. 33) kept in the chapel. Among his conclusions: "There is a certain archeological quality to delving into this body of prayer as recorded in the chapel. The prayers left behind reveal a view of the God in whom the writers believe, but they also raise new questions about God and God's actions. The prayers reveal the brokenness of creation in a variety of forms, and the desire and belief that God's presence and mere entry into the human situation can bring wholeness. ...The Children's Hospital prayer book has the role of being the place where people can give voice to whatever is evoked from them by their experience of hospitalization. It points to the external and eternal One who draws us into conversation, and it records our side of that conversation. It is a means by which people create a community of support where there appears to be no one. And it reflects our belief in a God who hears and acts based upon our voices." (p. 39)]

Hancocks, G. and Lardner, M. "**I say a little prayer for you: What do hospital prayers reveal about people's perceptions of God?**" *Journal of Health Care Chaplaincy [Great Britain]: Publication of the College of Health Care Chaplains* 8, no. 1 (Spring-Summer 2007): 29-42. [*This article is published in a relatively inaccessible British journal: a publication of the College of Health Care Chaplains (*www.healthcarechaplains.org*), not to be confused with either the* Scottish Journal of Health Care Chaplaincy *or the* Journal of Health Care Chaplaincy *that is published in the United States.* According to ap Sion, in "Distinguishing between intention, reference and objective…" (see Section II, below), this study by Church of England Trust chaplain Graeme Hancocks and Roman Catholic honorary chaplain Sister Mary Lardner, "involved the analysis of 939 prayers from prayer boards and books left in 2005 at the chapels and prayer/quiet rooms of three of the six hospitals which comprise Leeds Teaching Hospitals, England. Categorized according to type, 59% were concerned with specific intention (for named individuals who were sick), 7% for general intention (for the sick but of a more general nature), 20% for death (including people who were dying), 9% for thanksgiving (in instances of recovery, the life of the dead, and the hospital), 2% for forgiveness (for themselves or others), and 3% for hospital staff and carers. In terms of addressee, 37% were addressed to God explicitly, 20% to God implicitly, 18% to the worshipping community, 17% to an uncertain addressee, and 8% to a person or persons directly. The different names used for God were also identified and quantified, as were 30 separate categories illustrating content. Hancocks and Lardner compared their results to Grossoehme's (1996), concluding that they were largely similar, although some differences were evident." (p. 55)]

O'Reilly, J. "**The hospital prayer book: a partner for healing**." *Literature and Medicine* 19, no. 1 (Spring 2000): 61-83. [The author, a long-time chaplain, takes a phenomenological approach to an examination of prayer books at the chapel in the Rush-Presbyterian Medical Center (Chicago, IL), and she offers many examples of prayers from the books. She seeks to demonstrate "that the book is both a place of healing for those who write in it and a partner in the work of the hospital" (p. 62). Among her conclusions is that for the people writing in these books, "God becomes the listener to needs, worries, and chaotic feelings in the hospital setting where people experience so much loss of control. Patients, caregivers, and visitors attempt to maintain a semblance of calm, of holding themselves together. The prayer requests offer an outlet, while at the same time providing some boundaries. Writing slows down the rush of feelings, the worried thoughts. The belief that God

cares about the writer and his or her situation calms the writer. ...[T]he writers of the prayer requests experience a letting go as they put their prayers on paper. Paradoxically and at the same time, the hospital prayer request book writers write to gain some control over a situation. They write so that they may not feel so alone. The letters to God use the language of the writers' religious traditions. Because of this, writers are apt to remember their connection to their communities of faith. The very fact that writers let their words and all they hold for them remain available for others to read is also a means of creating a community of strangers in a hostile place." (p. 81)]

II. The following studies focus on prayers/prayer requests from visitors to Christian churches:

ap Sion, T. "**Distinguishing between intention, reference and objective in an analysis of prayer requests for health and well-being: eavesdropping from the rural vestry**." *Mental Health, Religion and Culture* 11, no. 1 (January 2008): 53 - 65. [(Abstract:) The present study proposes an approach to analyzing prayer for health and well-being within the developing research context of exploring written prayer requests. This approach, building on and modifying the conceptual framework devised for analyzing prayer requests left in churches, is examined on a total of 1067 prayer cards left in one rural church over a 16-month period. The conceptual framework distinguishes between three aspects of intercessory and supplicatory prayer defined as reference, intention, and objective. For prayer reference, only 5% of prayer examples were for the prayer author alone, while the majority of prayer examples were for other people who were usually family members and friends (81%). For prayer intention, nearly one-third of all the requests made were for explicit physical and mental-health concerns. Many of the requests also included important affective intentions where, for example, prayer authors communicated with others, expressed emotions, empathized with others, and identified needs. For prayer objective, prayer examples relating to health and well-being were largely part of primary control requests (69%) where the prayer authors sought to influence and suggest desirable outcomes to their prayers. From the results of the analysis, a number of conclusions are then drawn.] *--NOTE: ap Sion's citation of an article by Hancocks & Lardner in the* Journal of Health Care Chaplaincy *refers to a relatively inaccessible British journal: a publication of the College of Health Care Chaplains (*www.healthcarechaplains.org*), not to be confused with either the* Scottish Journal of Health Care Chaplaincy *or the* Journal of Health Care Chaplaincy *that is published in the United States.*

ap Sion, T. "**Listening to prayers: an analysis of prayers left in a country church in rural England**." *Archive for the Psychology of Religion / Archiv fur Religionspychologie* 29, no. 1 (2007): 199-226. [(Abstract:) This study builds on a long-established tradition within the psychology of religion concerned with the analysis and interpretation of prayer. Drawing on 917 prayer-cards left in one rural church over a sixteenth-month period, the analysis distinguishes between three aspects of intercessory and supplicatory prayer defined as reference, intention, and objective. Results of the analysis showed that only 4% of prayer requests had the prayer author as a key focus, and that there was a preference to pray for other people and for world or global issues (90%). Specific concrete issues were not included in 29% of prayer requests, but in the 71% of requests where concrete contexts were provided, 76% of these were concerned with illness, death, and conflict or disaster. Overall, there were more examples of secondary control (57%) than primary control (43%), and primary control was found more often in requests which had the prayer author as a key focus and in the categories of illness, growth, work, relationships, and general requests. These results give rise to a number of hypotheses regarding prayers authors' perceptions of prayer and its purpose.]

Schmied, G. "**God images in prayer intention books**." *Implicit Religion* 5 (2002): 121–126. [This is a study of 2,674 prayers from seven prayer intention books from German churches. The author pays attention to the concepts of explicit and implicit religion.]