

# CHAPTER 8

## AND HE WILL GIVE YOU REST

BY LISA COPEN

I remember as a teenager reading the book *Joni* by Joni Eareckson Tada, and being impressed with the amount of strength she revealed by sharing not only the things she was able to overcome, but by revealing how weak and vulnerable she felt becoming a quadriplegic at the age of 17. Up until that point, I had been exposed to your typical church or ministry that was founded on simply a call God had given an individual. By reading Joni's story, I saw firsthand how a much-needed ministry was rooted in the experience of one who had gone through a fire of refinement accompanied by personal suffering, rather than one who had gone to seminary to follow a calling. It was a memory that would stick with me.

Years later, as a college student, I debated about what area of social work I should go into. I volunteered at organizations such as the Rape Crisis Network and a hidden home for battered women. Although I could take an unlimited amount of classes and volunteer many hours, I had not experienced what these women had gone through. Of course, I was extremely grateful to the Lord that He had not sent me down these particular paths of "education" so that I would be qualified to offer my personal experience; however, I found it difficult to connect on a level that I wished for, in order to offer my best.

After four years of college and hundreds of hours of volunteer work, I was simply burned out and still without a degree. I went to my parents and confided, "I can drop out, or I can flunk out, but I have to take a break." Fortunately, they were extremely understanding and trusted my judgment that the break was necessary. I worked in a retail establishment selling clothes and was extremely relieved that if I sold a woman a scarf that was not her best color, her life was not at risk because of my advice.

I followed my heart from Oregon to San Diego after falling in love with a man who wrote amazing love letters and talked to me for hours on the telephone. He would become my husband five years later. But at the time, I was driving up and down the coastline, wondering what God's plans were for my life, and singing the worship song, "He who began a good work in me will be faithful to complete it," with tears streaming down my cheeks. God provided places to live and jobs, but oftentimes it was at the last minute that He would come through. I had decided counseling was not my calling and that I would rather work for a nonprofit with a cause. So when I was hired to work at a large nonprofit corporation, I was eager to work my way up through the organization to a position of working with their programs, fund development, or the membership department.

My job description was to fill in for whoever was unable to come to work that day. I was the lowest person on the totem pole, and I was expected to be in two places at a time, covering for practically every job position for a variety of services. This included working in a little store, rolling tents, writing thank you letters to donors, doing bulk mail of thousands of pieces of mail, being the receptionist, and anything else my supervisor thought I should be doing at that time. In reality, it was a frustrating job where I was the pawn between managers who all fought for a level of control, so I could not please everyone. A few years later, I would come to appreciate the experiences I had there, however, and be grateful for the wide range of skills I'd been taught that were instrumental in beginning my own nonprofit organization. It was one of those moments when you know that God has always been in control, even when He was working "undercover."

One morning I awoke at the age of twenty-four with a wrist that seemed to be frozen into place. The thought of simply moving it was too painful. I was not alarmed. I had been lifting boxes and rolling tents the day before and assumed that it was just an average sprain. My supervisor was concerned because she had secretaries who had been having carpal tunnel surgery, so she took me off all computers so I could heal quickly. I assured her that I thought it

would heal in a few days, and life would return to normal.

That was the last time I was able to define the word “normal” in the typical fashion of most people. Within days, although my wrist began to heal, the other wrist froze up, and then it went from shoulder to shoulder, elbow to elbow, knee to knee, hip to hip. After numerous visits to see my general practitioner, who was unsure of what could be causing these flares, which were accompanied by extreme pain, I went to see a doctor of internal medicine. She spent over an hour asking me what seemed to be a series of unrelated questions and then did lab work. Within twenty-four hours she called me with a diagnosis: rheumatoid arthritis.

This was in 1993, when Internet access was just starting to become available. There was not yet an online environment where I could look for in-depth information about what my future might hold. When the doctor called me with the diagnosis, I bluntly asked her, “On a scale of one to ten, ten being normal, what will my life be like?” She tried not to answer with a specific number, but I told her I needed to know what to expect and what kind of battle I was up against. She reluctantly said, “If you’re lucky, maybe six.”

I hung up the phone with mixed emotions. Although I was relieved to have a name for this pain I was experiencing, I did not understand the term “chronic illness” or “autoimmune disease.” Up until that time, I had been quite sheltered from any form of chronic illness in my circle of relationships. I had the mindset that illness was something that happened to people when they got “old.” I had the ignorant assumption that anyone who was perfectly healthy at the age of twenty-four should simply be able to take a few pills for ten days and then recover.

In the coming months, I would go through a roller coaster of physical pain as a physician tried to find the medication that would best work for my condition. I would sit down on the floor to watch a movie and, two hours later, not be able to stand up. One morning, I had to call my supervisor at work at 7:30 AM, and tell her that I literally could not open my own door because my hands and wrists were too swollen to both grasp the knob and turn it. Ironi-

cally, the week of my diagnosis I had purchased my first new car that had a stick shift. I would grab the stick with both hands while steering with my knee, and shift while I screamed to get into the next gear and my shoulder back “into place.”

I continued to work for another nine months as I waited to get in to see a rheumatologist with the goal of finding an effective treatment plan that would work with my body. At the time, the newest medical action was to put someone who was recently diagnosed on “all the medications” available for this disease, and then gradually wean her off of them as she went into remission. Unfortunately, all of the medications they put me on I had to stay on and eventually increase the dosage to have the treatment be effective. In the seventeen years I have had rheumatoid arthritis, I have not yet experienced any level of remission, only degeneration.

I resigned from my job and went back to college to finish my BA in sociology before my disease became disabling. I wanted to complete my degree so that my career goals would still be a possibility. The year that I graduated, I also married my sweetheart, who stood before our family and friends and pledged that he would love me in sickness and in health. He has never left my side, and his commitment to me and our son, and his dedication to providing for us is the reason that I am able to follow my passions.

My husband worked about seventy-five hours a week to support us until I finished school. As I started to go on interviews, they would go well until the interview was complete, and then my knees would lock up and I would be unable to stand, or I would not be able to open the door as I left. I saw my career dreams quickly fading away. Though God graciously took care of us, leading my husband to a job that financially provided (literally, in the week we were to run out of money), I began to grieve the loss of my dreams and my identity that was ingrained in them.

So, as I went into the deepest emotional and physical valley of my illness, simply trying to get dressed before noon and to complete at least one household chore before my husband came home, I asked God, “What now?” We had planned to start a family, and were trying to decide if we should immediately apply to adopt a

baby or try to conceive first. Though reluctant, my doctors assured me that, if I wanted to be a mom, I should try to accomplish that sooner rather than later – to not wait to “get better” because it likely would not happen. After a year of trying to conceive and my health failing, I went back on all of my medication, and we started the adoption journey.

Not wanting to get caught up in the depressing state of putting life on hold indefinitely while we waited for a baby, I remember telling the Lord, “I need something . . . I don’t want to get obsessed with the pursuit of a child and miss the plans you may have for me while I am waiting.” I went to the library and checked out stacks of books on how to start a nonprofit, how to write for magazines, how to self-publish your own books, and more.

I spent a few years volunteering for the Arthritis Foundation. It is an amazing organization, and I found a great deal of comfort through understanding my disease better. However, I found that there was no place to be able to express my faith in Jesus, as well as my spiritual struggles. I was trying to understand how one can completely believe that God will heal, yet at the same time, wonder if healing is truly God’s will at that time.

I helped write their monthly newsletter, but I became weary at simply offering people the advice to have one more cup of hot tea or a bubble bath to make all of their pain go away. In my experience, the only thing that was going to get me through a life living with chronic disease was to cling to Jesus, and to know that God had a purpose in the pain. I believed my pain would never be wasted, and that though I would struggle with how my life could be defined by this illness, I was still living in God’s “Plan A” and not in God’s “Plan B.” This was the hope I wanted to offer people, but I was restricted in what I could write for this secular organization.

I sought out Christian support for people who lived with chronic illness and was unable to find a support group or ministry specifically outreaching to people with chronic illness. I had assumed there was at least one main organization for people who lived with illness, but I could not find it.

I remember going to the Christian bookstore after my first ap-

pointment with the rheumatologist, and the only books on the shelf in my area of interest were how to “die with dignity” or how to survive cancer. “Where are the books for people who live with chronic illness?” I asked a store clerk. She said she couldn’t think of any and went to ask other clerks. She came back and said that was quite an interesting idea; there were a number of people who she knew who had illnesses such as diabetes and arthritis who would find a Christian resource rather helpful.

Based on the lack of Christian resources for those with chronic illness, I could have easily assumed that I was the only one who had not yet been healed, despite my faith. Thankfully, I knew that my pastor had rheumatoid arthritis, and he was one of the first people I went to for advice and encouragement for this unexpected detour in life. I remember him praying with me and asking God to heal me, while lightly grasping my hands with his own hands that had started to show deformities.

I recalled the impact that Joni Eareckson Tada had on me years earlier, and I had the opportunity to go and hear her speak. My husband and I stood in a long line of people waiting for her autograph afterwards in order to have thirty seconds of her time to ask her if she knew of specific Christian ministries for people who lived with chronic illness. I was beginning to think that this was what God had called me to, and I was feeling an indescribable peace because I felt like God had answered my desire to be able to experience the actual path of suffering that those I encouraged were on. If there were such a ministry, I wanted to be a part of it. If there was not, was this where God was leading me?

Joni was very supportive when I told her of my desire to start a chronic illness ministry and said she was not aware of any ministries I would duplicate. She expressed how great the need was and basically told me to “go for it!” I never looked back or questioned how God would create a ministry where there was limited energy and no budget.

On the one-year anniversary of my husband’s new job, he received his first bonus and purchased our first computer with it so I could be connected with the world. He was working long hours

at his regular job during the week, then working Friday and Saturday nights doing gigs with bands, and then playing at church on Sunday morning. He was doing everything he could to support us financially while also eager to see where God would lead my growing interest in chronic illness ministry.

I logged on to the Internet from home and immediately saw great potential in being able to reach out to others who live with chronic illness and also connect them with one another. Before my illness I had had a great deal of energy and was spontaneous and social. I missed people. Between my illness and my husband working many hours, the Internet became a wonderful connection outside of my apartment. There was a large patient community growing on the Internet back in 1996, as those who lived with different health conditions sought out information on their own in order to become better advocates for their health care.

In my own church, people had expressed an interest in getting together and talking about their faith and illness and being a support to each other. However, because of the variety of illnesses, schedules, and transportation issues, getting together had become a bigger challenge than we had expected.

My best attempt to bring us together was through a small newsletter that I began called "... And He Will Give You Rest" based on the Scripture, "Come to me, all you who are weary and burdened, and I will give you rest" (Matthew 11:28). Soon thereafter it was going across the country as people shared it. With extremely limited computer knowledge, I built a small website and posted articles about chronic illness and faith. On the website I mentioned this monthly newsletter and asked for a \$15 donation to help me cover photocopying and postage expenses. Surprisingly, people actually began to send me checks in the mail. In 1997 Rest Ministries, Inc. was born.

Subscribers to the newsletter wanted to know who else was receiving it so they could connect with one another on the Internet. "Share and Prayer" was our first online group. Next came our first support group in our community called "HopeKeepers." Some drove from over thirty miles away, often accompanied by their

spouse, and whatever it took to make them comfortable for ninety minutes. We met at the local library with people packing in large pillows to sit on, small pillows to hold up an arm or support a knee, bottles of water, Bibles, and more. Since there were not any Bible studies about chronic illness, I wrote a five-lesson study called “When Chronic Illness Enters Your Life,” and we used this to guide us through our mixed emotions while keeping the focus on Christ and not just on our aches.

God took over from there and expanded the ministry in ways I never could have imagined. Over 300 HopeKeepers groups are currently active, our newsletter has turned into a magazine, I have self-published a number of books that have financially supported the ministry for years, and my Internet provider called to see what I was doing that brought 80,000 visitors a month to our website. We have published daily devotionals for over ten years that one can receive each morning via e-mail. And the ministry has been featured on national television and radio programs.

I have had the joy of being able to experience my passions, writing and speaking – all in the context of sharing God’s love for those who are hurting due to illness. In 2004, I had a “full circle moment” when Joni and Friends ministry called to see if I would be interested in being an affiliate of their organization, specifically for those with illnesses or invisible disabilities. It’s been a joy and an honor to now be a part of Joni’s ministry.

In order to reach out to the many people who live with chronic conditions who do not know Christ, we began National Invisible Chronic Illness Awareness Week in 2002. It has grown to become a full virtual conference with twenty speakers giving seminars in a five-day time period over the Internet where one can “attend” for free and without ever leaving the comfort of home. Our annual conference has become a well-recognized and respected event by the online patient community, and we’ve reached hundreds of thousands who would not have previously visited our Christian website.

So, how exactly does someone who lives with daily pain and a degenerative chronic illness actually run a national ministry? I



could not tell you a formula except that I take one day at a time. Rest Ministries' website looks like we are a large organization with staff members and an office. Our office is my home office, and I wear many hats. I have one assistant who is a volunteer who helps me return phone calls and answer e-mails. She lives in Oklahoma, and I have, in fact, never met her in person.

The only reason that we have been able to continue to grow and reach so many people is mostly due to the fact that people who discover Rest Ministries find encouragement for themselves, but then they immediately turn around and encourage others. We have a large social network called the Sunroom. Here, one can connect with about 1,600 people and find those who have similar illnesses, or those who are in related situations in life such as homeschooling, parenting, marriage, etc., while also living with a chronic disease. We aim to be one of the places where God will set the lonely among family (Psalm 68:6).

While we do have writers who may have credentials attached to their names such as "reverend" or "doctor," the person nearly always lives with a chronic condition. Those who read the daily devotionals from Rest Ministries or articles on our website will find that they are written from the perspective of someone who is still currently living with a chronic illness, not by a healthy person who was trained to teach people with illness how to live. Sometimes, the actual event or spiritual struggle shared in a devotional or article may have occurred within the last forty-eight hours.

It is this level of authenticity from our volunteers that makes Rest Ministries both a comforting and a safe place. Everyone admits they struggle, while clinging to the promise that God will never abandon them. There is no substitute or slick marketing campaign that can replace the willingness of people to allow their weaknesses to be seen in order that God and His faithfulness can shine through. I remember reading about how we are like wet sand near the ocean. If one were to poke a stick into the sand over and over and make holes, like the problems in our life can feel, each hole is immediately filled up with the ocean's water, which can be compared to God's love and presence. No matter how many holes

are in our lives, God can immediately fill them if we allow Him to.

Sharing one's vulnerabilities and Christ's strength is one of our greatest assets. The Bible says, "That is why, for Christ's sake, I delight in weaknesses, in insults, in hardships, in persecutions, in difficulties. For when I am weak, then I am strong" (2 Corinthians 12:10, NIV). We can read this and say, "Yes, I believe that to be true." But it is human nature in us to want to appear like we have it together and to not reveal our weaknesses, lest we be judged.

Following my joint replacement surgery in four fingers on my left hand, I became brave enough to take down my glossy professional photo of myself and replace it in my newsletter with a snapshot of me a few days after surgery. My hair was straight, my face was puffy and full from prednisone, I had not showered in a couple of days, and I had a cast on my hand that was over eighteen inches around. I found it interesting that I received e-mails from people who said how grateful they were that I had revealed my "true self" and how much more they could relate with me after seeing the snapshots of me post-surgery than they could with my professional photo.

Another time I poured out my heart on a blog post about just being tired with the daily-ness of living with a chronic illness. One woman e-mailed me and said, "After three years of receiving your newsletter, today you became real to me. I will pray for you."

The greatest strength of ministries that are born from suffering is that the people who are involved have walked the walk and are sharing their time and story simply out of compassion, in order to make another person's journey slightly less lonely. Doctors, counselors, pastors, chaplains, and others in the professional helping fields have experiences that can help them facilitate a person through a difficult time. However, I believe that we should never rule out people who have or are "walking the walk" simply because they do not have a title linked to their name. One of the few requirements of our HopeKeepers group is that one of the people in the leadership role must actually have an illness. He or she can have helpers, and we encourage them to do so, but nothing takes the place of someone who has been through a similar challenge.

Telling our story is important. Every person has a story that is unique. If you take ten people diagnosed with the same chronic illness on the same day, at the same age, their experiences will still differ. And that is one of the reasons that God has given each person his or her own testimony. Regardless of what people may say about your beliefs, they cannot take away your testimony.

There is a great deal of controversy regarding the theology of healing. Many people still believe that the only reason a person has illness in his or her life is due to sin. When a person with a chronic illness shares his testimony of how God has used the thorn of an illness to His glory, it's not uncommon for listeners to want to step in and tell him how he has the power to change the outcome of his testimony by following whatever formula they think is necessary to receive God's healing.

Some people have been told that their "testimony is wrong," because God never wants His people to suffer with illness. Many feel that their testimonies are not good enough because in the end they are not sharing how God healed them physically – but rather how He has healed them spiritually.

As the director of Rest Ministries, I have received my share of e-mails telling me I am doing a disservice to the Lord by allowing people to see how God can be glorified in one's life despite the existence of an illness. I believe that God can heal and that He still does heal people every day in our world. But I do not believe that there is a specific formula that a person can follow and be guaranteed a healing.

Our testimony is one of the greatest gifts God gives us, and Rest Ministries has become a safe place where people can share their testimonies along with the fears and challenges that accompany an illness. They can share without fear that they will be judged or placated with simple theology such as, "Just give it to God and it will all be fine."

Nearly one in two people in the United States lives with some kind of chronic condition such as diabetes, heart disease, fibromyalgia, or multiple sclerosis. Many people also live with constant chronic pain from conditions like migraines or back pain

from car accidents. Most of this pain is invisible, and the person who is suffering may hear the words, “But you don’t look sick,” or, “But you look fine.”

I often encounter churches that are reluctant to embrace the chronically ill community because there is an unspoken assumption that the church will be weighed down by their needs as well as depressed by the fact that these people are not healed. After all, if church is supposed to be an example to the community on how wonderful life can be if one walks alongside Jesus, what message would be sent if it appeared that some members had given up on the hope of being healed? What are we communicating to our visitors about God’s healing power if there is an announcement in the bulletin about a chronic illness group meeting? Won’t those people with illness always need something like rides, meals, or child-care? How can it be a good thing to have a ministry like a HopeKeepers group for those who live with chronic illness because doesn’t that just encourage people to continue to accept their illness, rather than seeking God’s will which would, of course, be a healing?

I am very passionate about spreading awareness that “the church” needs to understand more about chronic and invisible illness. Without embracing those with illness, we are missing great ministry opportunities. We must (1) allow healthy people the gift of serving those in need; (2) allow ill people the gift of being served; (3) give ill people the chance to serve others and share the bounty of what God has taught them through suffering.

I have found that people who live with chronic illness understand suffering on a daily basis and are the most compassionate and understanding group of people you may ever know. Oftentimes it is those who live with illness who are the ones trying to make and deliver meals to others who are only slightly more ill than they are. And if you stand outside of a room where a group of people are who have chronic illness but who know Jesus, you’ll be pleasantly surprised to hear the joy and laughter that reverberates, even through tears. To live with an illness each day, one can find a sense of humor, true joy in the Lord, and an appreciation for

life that was never completely understood before the disease.

Illness will exist, and people can either go through those valleys with great depression that sometimes results in suicide (yes, even believers), or the church can offer what Jesus challenged it to offer: a safe place with food, compassion, and transportation. Luke 14:21 says, “Then the owner of the house became angry and ordered his servant, ‘Go out quickly into the streets and alleys of the town and bring in the poor, the crippled, the blind and the lame’” (NIV). I interpret this to mean that we are not just to serve those who are able to make it to church on Sunday morning. Rather, we are to go out into our communities and find the people who are suffering, feeling lonely and disheartened, and bring them into our church so they can see and experience the love of Jesus.

There are many New Age churches that are recognizing this need in the chronically ill of our community, and they are quickly filling it, with transportation to and from church, organized visitation from church members, and more. And for the person who lives with chronic illness, she may be in so much pain, and so desperately want to have some of that pain relieved and to feel taken care of, that despite the fact that she may have grown up knowing Jesus, she may easily be swayed outside of her faith to a different kind of faith, simply because there was a van from the New Age church that would pick her up.

Those involved in church leadership may ask, “Why do those chronically ill people have to be so sensitive? Why do I have to constantly accommodate their needs? Can they not just be grateful that we are doing our best?” The truth of the matter is that people want to be loved and to feel like they are cared for. Most churches believe they are doing this, but those on the receiving end often say that the message or ministry is not clearly being communicated. Simple misunderstandings easily cause frustration and harden hearts. For example, although one may assume that saying, “You look so good!” is a compliment, for the chronically ill person it often feels like the reality of their situation is not believed or that it is invalidated.

Why? This is how it feels: If she looks so good, she can't truly be

in that much pain, right? And if she says she is in that much pain, then surely she is just looking for attention, right?

A church can say, “Of course we take care of those who have a chronic illness!” But when a person with an illness needs a ride to the doctor on a weekly basis for six weeks, is the church able to provide for this tangible need? I have found that most churches and individuals have the best of intentions, and it’s a lack of communication, not a lack of caring, that causes people to be hurt.

Just comprehending why sending a “Get Well” card may not be the best way to encourage a person who is chronically ill can go a long way in expressing your desire to understand her. It’s important to remember that, despite the fact that a person may live with a chronic illness, he still has a life where he is surrounded by all of the happenings that occur in the lives of people who do not live with chronic illness. He may lose his job due to the economy. He may get cancer. His child may be in a car accident. His wife may have an affair. He is not exempt from the challenges and crises of life just because a chronic illness already exists.

The Bible not only admits, but actually assures us, that there will be suffering here on earth. I don’t pretend to understand God’s reasoning, especially when families suffer through manifold tragedies. However, I do know that He called us to embrace Him during our darkest moments so that when we are ready to go back out into the world, we are able to comfort those who are suffering, regardless of what kind of suffering they are experiencing. This is where 2 Corinthians 1:4 falls into place: “[He] . . . comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves have received from God” (NIV).

One of the biggest challenges of living with a chronic illness is the daily-ness of it. Every day may be slightly different in the way that it may be a different body part that aches or moves out of place, but the illness never leaves. When we have something like the flu, we are able to put it into perspective, knowing that if we get some sleep, eat some soup, and maybe take some medication, in a week or two our lives will return to normal. When you have a chronic illness, there is no such thing as normal, unless you de-

fine normal as “constant chaos.” Being able to share my story with others and create an environment where anyone can share his or her story – whether it is an encouraging day or a lonely day – is a great honor. It has allowed me to meet amazing people whose strength I know could only come from a God who promises, “But those who hope in the Lord will renew their strength. They will soar on wings like eagles; they will run and not grow weary, they will walk and not be faint . . .” (Isaiah 40:31, NIV).

During my journey with chronic illness, I have rarely asked for healing, not because I don’t desire to be healed, or because I am any kind of a martyr, but simply because I have always believed that God could heal me at any given moment and that He knows that in my heart, I would love to even taste the life “before rheumatoid arthritis” again for a moment. However, I would not want to miss out on the treasures that God may be able to reveal to me only in the darkness.

And there have been many treasures. We became parents through adoption of a newborn baby boy in 2003, and the relationship with his birth family is a gift we never expected. I have a career that I am passionate about and able to do from home, allowing me to work around my disabilities. It also allows me the freedom to be a stay-at-home mom – something I likely would not have chosen, but am forever grateful for.

The blessings I have been given through my chronic illness, from the tangible to the spiritual, are gifts that came in the ugly gift wrap of illness, but gifts I would still never exchange for my health. So, as I take each day and whatever it holds, I cling to what is one of my personal favorite expressions of trust and surrender in the Bible, Psalm 119:50: “My comfort in my suffering is this: Your promise preserves my life.”

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Questions for personal reflection and/or discussion:

1. If you are a person with a chronic illness, what would you echo or even add to what Lisa has shared in this chapter? Or, if you do

not have a chronic illness, what did you learn that will help you to help loved ones or friends who do live with chronic illness?

2. Lisa wrote: “Sharing one’s vulnerabilities and Christ’s strength is one of our greatest assets.” The Bible says: “That is why, for Christ’s sake, I delight in weaknesses, in insults, in hardships, in persecutions, in difficulties. For when I am weak, then I am strong” (2 Corinthians 12:10, NIV). The apostle Paul is describing one of the paradoxes of faith: specifically, that rather than striving for mastery and adequacy in all things, one can entrust to God one’s weaknesses, and He turns them into strengths. How have you experienced this yourself or witnessed it in others?

3. Lisa’s following thought summarizes the theme of this book: “Telling our story is important. Every person has a story that is unique. If you take ten people diagnosed with the same chronic illness, on the same day, at the same age, their experiences will still differ. And that is one of the reasons that God has given each person his or her own testimony. Regardless of what people may say about your beliefs, they cannot take away your testimony.”

Describe the uniqueness of your own personal story in a sentence (or a paragraph of no more than four sentences). If in a group setting, share these thoughts with the group.

4. Do you think that the Christian church could do better in terms of its care for and ministry to people living with chronic illness? If so, what might you do to initiate a dialogue on this question in your own church?

5. Lisa says: “The blessings I have been given through my chronic illness, from the tangible to the spiritual, are gifts that came in the ugly gift wrap of illness, but gifts I would still never exchange for my health.” If you were in her situation, would you be able to echo these sentiments? If you are in a situation like hers, and you agree with her, put this expression of faith into your own words.