I am an experienced chaplain, but a new clinical pastoral education student. I was born in the early 1970s, into a Black-American interreligious family. My mother was Christian, and my father was Muslim. I was raised with the maternal side of the family until I was eighteen-years-old. My maternal grandfather was a Pentecostal pastor, and he made me a child minister. Therefore, most of my childhood was very Christian, both religiously and culturally.

As a young child, my experience of God was that He was that which is to be feared and obeyed. This religious upbringing kept me away from alcohol and drugs, unlike many of my friends, family, and even siblings, who suffered intensely from addictions. Prayer, fasting, and religious discipline were very much a part of my spiritual formation in my early years, and these were tools of outward deliverance from prevalent social evils.
Then as a young adult, I was reacquainted with the paternal side of my family and decided to embrace my Islamic inheritance. I thought that I could leave the past behind.

A CHAPLAIN BEFORE I WAS TRAINED

As an 18-year-old novice Muslim, I struggled to connect with an Islamic identity. The religion seemed to be too puritanical, too disconnected from my postmodern context. As a college student, however, I was literally and figuratively pushed out front, despite my lack of experience, to serve as the chaplain, imam, counselor, and spiritual leader of a community of young Muslims who were all looking for religious identity and sensitive to their social context in America. I had the advantage of having been among the first black Americans to desegregate white schools in the New Haven suburbs. I had been exposed early to personal challenges around race and class identity. Pakistani boys and girls disillusioned with Islam but intoxicated with the American lifestyle, together with alienated Filipino, Mexican, and Black-American Muslims, all looked to me to lead them into some kind of Islamic well-being. I felt completely at a loss trying to guide my community without training. I wanted to be qualified in Islamic spiritual identity formation, but there was no institution in America where this type of training took place.

In 1994, I graduated from college and joined Americorps. I looked forward to being an apprentice, learning from 200 of America’s top activists as they worked on restoring community life in America’s most blighted cities. Once again, I found myself becoming a chaplain, imam, counselor, and spiritual leader. Within myself, however, I felt completely inadequate, totally unqualified. Soon the ritualistic elements of my Islam practice—prayer, fasting, and religious discipline—were not enough to sustain the demands made upon them. Fortunately, the first traditional Islamic formation institution in America, the Zaytuna Institute, was begun, and I was able to take valuable classes. I vaguely began to discern some structure behind my impromptu chaplaincy. In 1997, I began to volunteer as a chaplain in Connecticut prisons. This led to a long-term, part-time position as Islamic chaplain for the State of Connecticut’s Department of Correction. For awhile, all went well. Then, in the aftermath of September 11, 2001, I was in a personal and professional crisis. I was bewildered by the emotional, psychological,
and physical onslaught that challenged me. It was not a simple thing to leave the past behind.

I had been raised in the literalist tradition of Pentacostal Christianity. Then I had come under the influence of an ultra-conservative version of traditional Islam. In both, religious improvisation is strictly prohibited. And yet something had to be done. So I entered the Islamic chaplaincy program at Hartford Seminary, to find out what it was that was missing, and I found myself propelled into clinical pastoral education (CPE). I’d been a chaplain for a decade, and an organizer of chaplains, and I’d never paid any notice to CPE. It was clear that I needed to find meaning for my own pastoral care.

**TWO STORIES ABOUT BEING A MUSLIM CHAPLAIN**

The following two verbatim extracts illustrate some of the distinctive experiences of Muslims in chaplaincy training. In the first verbatim, I learned how to use prayer in the pastoral care of a Christian patient. The second verbatim illustrates the importance of praying from the Qur’an with a Muslim patient. These are two samples of my learning journey. I hope these brief verbatim extracts, while full of my own story, will also cast light on some of the distinctive experiences of many Muslim trainees.

Mary, 47 and widowed, at 5’6” weighs all of 110 lbs. Her long brown hair has dominant silver streaks. Mary’s face and spirit looked as if they once could have lit up a room due to her powerfully lucid crystal blue eyes. Years of damage and pain have clearly taken their toll. Mary seems almost like a child captured in an adult’s body. Mary is being treated for bipolar disorder/depression and crack cocaine addiction. She has been clean on and off for eight years.

**PATIENT:** I am Catholic and would like to soon see a priest for my confession.

**CHAPLAIN:** Would you like to talk with me until a priest is available to meet with you?

**P:** Of course, let’s go to the day room and talk. What are you? I mean, what is your religion?

**C:** I am a Muslim. My religion is Islam.

**P:** That’s cool. Didn’t you guys just have a holiday recently?

**C:** Yes. It was Ramadan. Our holiday is called *Eid al-Fitr.*
P: I know, I know about Muslims.

C: How do you know about Muslims?

P: My apartment building in New Britain is full of them. I used to see them leaving early in the morning going to prayers. I know they were going to prayers because I asked them one time, where you all going so early in the morning? They told me to prayers.

C: That’s good, that you know about other faith traditions. Tell me about your faith tradition...

I had felt an internal pull to evaluate her encounter with my faith tradition for conversion purposes, but I ignored that. Instead I aimed to be present with her, seeking to understand her walk with her own faith tradition and, ultimately, to hear what her concept of God was. I invited her to pray. It was my first attempt to use prayer in the pastoral care of a Christian patient. My desire was to learn how I would feel getting beyond this threshold, and to find out how the patient would accept and benefit from praying with me. Here’s how I went about it.

C: Do you mind if we pray together, Mary?

P: No, I don’t mind. I would love to pray.

C: Dear God, Mary and I come before you humbly asking for your support. We know with you is all help, and we feel peace in your presence, God. We need that peace, God, in our life. God, Mary acknowledges her shortcomings in the past with crack, her shortcomings as a mother, her running away from her problems, her pain and loss. God, she acknowledges how all this has pushed her daughter away from her, who is hurt with anger. God, please give Mary the strength to stay strong and be the mother and woman you desire her to be. Certainly Mary will rise above these challenges in her life with your support, and we thank You, God, for hearing our prayers. We ask You these things believing in You. Amen.

Although it was a simple interaction, I had taken a big leap inwardly in initiating this prayer. In Islamic doctrine as I had learned it, to perform personalized essential ritual worship, such as prayer, that is not prescribed by the legal sources is grave sin. At the core of my own theological presuppositions, which had influenced my ministry up to this point, was the concept of *bid‘a*, or blameworthy innovation in religious matters. Ultra-conservative Islam warns about innovation in ritual worship and religious matters. However, if I, as a Muslim, don’t pray with Christian patients, then
I am less compassionate as a pastoral caregiver. The Qur’an tells us that Muslim pastoral care is the best that has evolved for humanity! So how was I going to reconcile my ethical imperative to be a compassionate caregiver with my legal quandary?

I came to understand that to perform an act of non-essential religious worship with an understanding of its merit, while not believing it to be essential worship, is praiseworthy. Religious novices with a primary theological understanding might never pray with a non-Muslim in the form I used here or if they did, they would be very uncomfortable. I found this experience immensely gratifying for both the patient and myself. I felt my Christian upbringing strongly in the fluidity of feeling in my prayer, and I felt my Islamic background strongly in the comprehensiveness of meaning in the prayer.

The challenges in this encounter for me were more than theological. I was opening a door onto a part of myself that I had left behind many years ago. In my Pentecostal years, prayer or supplication had been a strength. When I was a young minister in my grandfather’s church, regardless of time, place, or circumstance, this part of myself would freely open up to God. During those supplications from the heart, God’s transcendence would become imminently intimate. Somehow I had lost this in Islam. We were taught that supplications in the Qur’an, and those of the Prophet, and some prayers of our righteous predecessors, should be memorized and prayed. A relationship to God that once had been close and near had become far and distant. Despite other reservations about the encounter, I felt empowered through this synthesis in my spiritual identity.

SECOND STORY

SJ was my first Muslim patient visit. I had been looking forward to a patient who would be in my comfort zone, as opposed to the vast majority who are not. Ironically, I had no previous knowledge of the patient’s religion before my visit; the nurse just told me there was someone she really thought I should spend some time with.

SJ is about 6’1” and about 210 lbs, with a little mustache and several tattoos on his arms. The tattoo most easily identifiable is the Marine Corps emblem. Dressed in faded designer jeans and a similarly colored faded
shirt, SJ had a roaming right eye and a disabled right hand. His bed was meticulously made, as in boot camp.

C, I reach out my hand to shake his hand: My name is Chaplain Bilal Ansari. Can we go somewhere quiet to sit and talk for a moment?

P, as we walk down the hall to his room: As-salaamu alaykum.

C, amazed: Wa alaykum as-salaam.

P: They told you I was Muslim?

C: In fact, I did not know until just now, but alhamdulillah [praise God]. After a brief conversation about his son who is sick and in a hospital and about his alcoholism, I invited SJ to share his story.

C: Share your story with me. The Qur’an is full of stories, so there is good in sharing your story.

P: I used to attend the B** Mosque [a Pakistani ethnic mosque], and right after I got out of the Marines the brothers would assist me, as I was a new convert. But as I began to struggle, no one came to my aid. And when I came around, no one cared to assist me. I stopped attending, which led me to just work and go home. I didn’t hang out or party. I worked and came home to support my family. I lost my job. Could not find work. I began to drink more and more. So religion was far from me and any honorable life was just as far. (His eyes roaming around the floor.)

C: Look at me. You are a man of honor and service. You are a religiously inclined person. You are overwhelmed by hard economic times and a need to support a family. And, I would probably guess the liquor store is closer to you than the mosque. Is that right?…What is your plan for the next chapter of your story? God has placed you in here to reflect and begin recovery. Before you leave, God has arranged our meeting in this hospital. What does that suggest to you about God’s desire for you?

P: He wants me to change and get back to my religion.

C: What else does that suggest?

P: I think he has heard my prayers and that he really wants me to be there for my son.

C: You are a Marine. I served the Marine Corps as a chaplain volunteer also, so I know a bit about what you are made of. You would never conceive of leaving a brother on the battle field alone, right?

P, he sits straight up: Never.
C: So you have the drive and determination not to leave the battle. You are going to face a battle tomorrow when you leave. How will you survive? Do you have a plan?

P: Now I will try to make it to jumu‘ah [congregational] prayer on Friday. Although I have to walk through and past several major triggers of mine, and it will not be easy. You’re right. It will be a battle.

C: You think you can do it? You think God will support you in your struggle?

P: Yes. Look, He has sent me a Muslim chaplain in a Catholic hospital that used to be a Jewish hospital! God must be looking out for me.

C: I know He is. Can we pray together?

P: Please. I need to hear the prayer it has been a long time.

C, I sit closer and recite the prayer al-Fatihah to him in Arabic, and translate it into English:

P: Thank you for coming here.

C: I hope our paths cross in the mosque, so that I can witness God’s power to transform stories.

P: I hope so too. I really appreciate it. It’s amazing that you’re here.

C: As-salaamu alaykum.

P: Wa alaykum as-salaam.

Reciting al-Fatihah, the Opening Chapter in the Qur’an, is equivalent to reciting the Lord’s Prayer to a Christian or the Sobriety Prayer to a recovering addict. In this context, with a struggling Muslim who has not prayed in a long time, I would pray no other prayer than the Opening Chapter of the Qur’an. No prayer feels better or is more meaningful to a Muslim than al-Fatihah because this is the prayer that is found in every ritual episode of a Muslim life. Its cadence and rhyme do wonders when recited, and it is considered a form of healing prayer for the Muslim soul.

This Muslim patient had an addiction problem, a particular source of shame. Among Muslims, addictions have traditionally been legislated against: community considerations have been punitive, not pastoral. There is a common presumption that the first pristine Muslim community was all puritans, with no addictions to alcohol. That belief is far from the actual Qur’anic narrative on alcoholism. Today, the Muslim community, as in the first days of Islam, has to become the place where spiritual wellness is found and sustained.
Most zealous lay Muslims in America think like legalistic theologians and believe that is the proper way to be. But too much legalism compromises our ability to hear the meaning and feeling in our sacred sources, which means we cannot grasp their value for pastoral care. The Prophet Muhammad, peace be upon him, once observed that “religion is giving good advice.” Our legalist bent causes us to be evaluative, interpretive, prescriptive, and reductive in our advice.

Yet truly good advice does not evaluate matters on legal grounds without considering their ethical implications. It does not interpret based on theological presumptions about others’ meaning. It does not preach ideal behaviors without considering realistic social barriers. It does not reduce a person’s feelings to legal or theological facts. Truly good advice emerges out of a place of compassion and attempts to be reflective, by letting the ones in crisis know you understand them where they are. And that is what the Islamic sources show about how our Prophet behaved.

Muslims have problems, and yet there is no one educated to guide the community through grief, anger, death, dying, sickness toward wellness. Such guidance can be found throughout our sacred sources, which clearly articulate a pastoral theology of care based on compassion. That is why I believe that chaplaincy is very much an Islamic necessity that someone in every Muslim community must fulfill. We are in serious need of a missing lens.

I find that working with my CPE supervisor creates a space where reflection on the dynamics of Muslim and Christian personal and spiritual formation turns the best of our respective sacred traditions into bifocals. Although my Islamic chaplaincy experience spans a decade, I feel I am just now beginning to take my first steps inward as a chaplain. And for once in my life I refuse to be pushed out front; I accept to be pushed inside.