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Recommended Citation
Available at: http://scholars.wlu.ca/consensus/vol28/iss2/5
Parish Nursing Ministry: Caring for Body, Mind and Spirit

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What is Parish Nursing?

Part of the church’s mission statement is “to preach the kingdom of God and to heal the sick.” (Lk. 9:2) This reflects the will of God, and specifically God’s will regarding sickness and healing. Parish nursing is one of the newest specialty areas of nursing dedicated to providing nursing care while also meeting spiritual care needs. While it has long been practiced in European countries, parish nursing has only been recognized in North America since the 1980’s. In Chicago, Granger Westberg first introduced the concept of parish nursing as caring for body, mind, and spirit. Since then, this ministry has flourished. Today several thousand nurses have felt “called” to practice parish nursing ministry in faith communities throughout North America.

Spiritual care is the primary focus for parish nurses. It is our belief that all care is spiritual care if it addresses the needs of the client with respect to their faith beliefs. The intention of the parish nurse is not to relieve other nursing services of the important role they play in health and healing. Rather, parish nursing augments the services already available in the community by linking the church with community resources and by fostering partnerships with all health care agencies for the purpose of health promotion and prevention.

Most parish nurses bring to their roles unique gifts, experiences, and knowledge, as well as compassion, empathy and a desire to use their skills within their faith community. To practice as a parish nurse, one must be a registered nurse having obtained a degree or diploma in nursing. While parish nurses have a variety of nursing backgrounds, many have had experience working in community health, education, long-term care facilities, or emergency-outpatient departments. Parish nurses demonstrate knowledge of the health/healing ministry within the church and dedicate themselves to delivering a more integrated wholistic approach to health and healing. They have an ability to
facilitate the learning process around health issues. They are self-motivated to grow both spiritually and professionally, striving for excellence in their roles within the church community. Parish nurses are very much aware of the health services and resources available within their communities. Furthermore, they are members in good standing with their licensing body and have knowledge of current Standards of Practice of Nursing.

**The Role of the Parish Nurse**

What does a parish nurse do? How do the duties of a parish nurse differ from those of nurses working in a hospital? Most nurses employed in hospitals, clinics and doctors’ offices are primarily working with people who are sick. While parish nurses also aid the sick, they assist their clients in exploring opportunities to promote well-being. Spiritual wellness is an integral component of parish nursing and optimal health. If a person is rejuvenated spiritually, then there is a possibility that strength may be restored to the physical body as well. Parish nursing not only addresses physical care needs, but also recognizes that spirituality is a significant factor in the continuum to health.

The parish nurse acts as a health educator. Together, with the members of the health cabinet, a health survey is completed outlining the health concerns of the church members. A series of forums, seminars, workshops, or educational events may be arranged to address the specific needs identified within the health survey. The church facility is an ideal venue for learning to occur. Within the church congregation, there are doctors and nurses, social workers, counselors and educators who may be able to assist with some of the seminars. These people often welcome the opportunity to share their knowledge and experiences with others in the church. This is one method in which the church can take seriously its obligation to connect faith and health. The Bible promotes the faith/health connection. Jesus said to the woman afflicted with bleeding for many years, “Daughter be of good comfort, your faith makes you whole.” (Matt. 9:22) Today, much research is being conducted to support the concept that faith can have a positive influence on one’s health and well-being.

**The Parish Nurse as Personal Health Counselor**

Parish nurses, by virtue of their educational backgrounds, address the health concerns of many people within their church community.
Their familiarity with many congregational members as well as their trustworthiness to maintain confidentiality enable parish nurses to establish rapport with their clients. Providing an environment conducive to the sharing of information will assist parish nurses in opening the lines of communication.

One visible way of building a relationship is through the monitoring of blood pressures. This non-invasive procedure establishes two things on which to further build a relationship. First, it is seen as non-threatening and secondly, it allows nurses an opportunity to ask open-ended questions. The one-to-one rapport also allows the client to seek advice about a new diagnosis, medication, stressors, or to disclose previous health concerns. The elderly, in particular, are quite responsive to this informal interaction. They often do not want “to bother” anyone with their concerns or they have difficulty getting to doctors’ appointments. They are uncomfortable with the long waits in doctors’ offices. A parish nurse who sees them regularly has the ability to make an assessment and refer them to their family doctor in a timely manner.

Granger Westberg, emphasizing the usefulness of the Parish Nurse, sums up what it is like to have an ongoing regular relationship with a health-care professional:

They will discuss their problem for the first ten minutes and then go on to talk about how life is treating them, about their worries and anxieties, and about their present outlook on life. When they finally rose to leave, they would say something like, I’ve told you things I have never told my doctor. It’s easy to talk with you. Thanks a lot!

Teenagers have their own health concerns. Many of them are coping with stress at home or school. They often drop in and informally present concerns about a “friend.” They want information on vegan diets, self-esteem, sexuality, as well as many other issues. Parents of teens require information on drugs, alcohol, sex and how to broach these topics with their teens. While these parents may not only be concerned with the needs of their own children, they may also be coping with the health needs of their aging parents. Questions concerning long term care placement or the availability of community resources often become primary concerns. The parish nurse often acts as a bridge builder, becoming the liaison with various agencies in the community.
Nutrition is another concern regardless of age or stage of life. Parish nurses encourage their clients to maintain their nutritional status in order to prevent illness and/or to promote healing. Parish nurses have the unique role of identifying the needs of a specific congregation. Therefore, the health needs of different churches may vary greatly depending upon the demographics of that community.

The Parish Nurse as Facilitator of Volunteers and Liaison with Community Agencies

The church provides many opportunities for volunteers. Indeed, volunteering brings with it a sense of pride of a job well done and a desire to please God through helping others. Such services include providing a listening ear for a shut-in, dropping off a home cooked meal to a new Mom, and driving a senior to a doctor's appointment. The parish nurse can assist in identifying and matching visitors and by facilitating learning opportunities for volunteers to grow through developing their gifts of serving others.

Parish nurses are greatly involved within the community, and have the knowledge and means of accessing community agencies. Organizations that may be of benefit to the clients include the Community Care Access Centre, the Alzheimer's Society, Hospice, the Cancer Society, Heart and Stroke Foundation, Clinics, Lifeline, the Public Health Unit and many more. Developing working relationships with these groups allows parish nurses to open doors for parishioners in need. People in these key positions are often invited to share their expertise by addressing the people of the church in a small group environment.

Parish nurses have a number of years of nursing experience and have developed a spiritual maturity as well. After sharing their faith, people often find it easier to disclose their deepest fears and concerns to their parish nurse. These concerns ultimately will impact physical, emotional, or spiritual well-being. Often, a person who experiences illness or challenges, also, is able to share their beliefs on a more personal level. A competent parish nurse will be able to listen to these concerns and help the person sharing them come to some understanding. The parish nurse may be initially uncomfortable. However, her willingness to try to discuss the faith-health connection will increase with ongoing experience. Long before anyone wrote articles on wholeness, wellness, and preventive health care, nurses were already practicing whole-person care."

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Key Players For Developing Parish Nursing

The key players in developing a health ministry within a congregation are the pastor(s), the health council, the parish nurse and the congregation. A strong desire to see the church as a health and healing place as well as a desire to follow the example of Jesus, the Healer, are all the pre-requisites for a strong, successful health ministry. Health is most often an issue of justice, peace, integrity, creation and spirituality. The relationship between the nurse and pastor(s) is crucial to the success of the church’s healing ministry. The pastor who has chosen to support the idea of a parish nurse ministry will play a key role in the future development within the church. He/she will be a strong advocate of a healing ministry and promote the ministry within the church and within the community. He/she will be instrumental in identifying the right people to serve on the health council to ensure success. The pastor will set the tone by bringing the message of healing to the congregation. The pastor will undergird the project with the strong biblical foundation for whole-person health care that is found in both the Old and New Testaments. The pastor(s) and parish nurse will meet regularly to review cases and collaborate efforts to best serve the individual needs within the congregation. Together, the parish nurse, pastors and health council members develop a health survey outlining a variety of health concerns and learning opportunities. Each member of the congregation is asked to fill out the questionnaire. The data is correlated and the health council then establishes educational events or forums to address these needs.

Small groups of support may come together to share a common need. It may be a cancer support group, an exercise class, a seminar to educate people about the prevention of osteoporosis, or a group designed to discuss the powers of attorney for health care should one be later rendered incapable of making these decisions due to illness or injury. The Health Council members, in collaboration with the parish nurse, are responsible for the smooth running of the educational events. They may suggest and book a guest speaker, greet people, supply the tea, coffee and juice, set up the hall and provide feedback regarding the session. Have the learning needs been addressed? Did everyone have an opportunity to share the opinion? Was the guest speaker knowledgeable? Was the timing of the event favourable to attract a good audience? These questions are part of a feedback evaluation. They act as a support for the parish nurse, often making suggestions.
and providing information that help the nurse to encourage individuals to adopt healthier lifestyles. It is important to have a variety of backgrounds and ages representing the entire congregation on the health council. A typical health council might include a doctor, a nurse educator, a homemaker, a young mom or dad, a retired person, someone with health challenges, a member of the youth group.

My Call from God to Parish Nursing: Mt. Zion Lutheran Church

I have enjoyed a career in a variety of health care settings for over thirty years. However, in 1987, I felt God was impressing upon me the need to re-enter the workplace following the birth of our three children. Life at home was very busy and life in my church community was also full. I was facilitating a small bible study group on discipleship. It was almost as if I was reading the passage for the very first time. The charge to the disciples was clear, ‘to preach and teach and heal.’ Being interested in health and well-being, this statement really came alive for me. I had seen the church as a nice place to be as a little child. It also functioned as a safe haven from the challenges of being a teenager in the 1960’s. Indeed, the church had sustained me throughout my lifetime from baptism to confirmation to marriage and the births of my children. All my significant life events had been identified by the doctrine of my faith. This was so important!

I had sat through many sermons and heard the stories of Jesus since I was a child. I knew that Jesus had miraculous power to heal and that the disciples were good people and could also perform miracles. But the thought of modern day healers in the church and the church being a healing place was a novel concept. I began to wonder what life would be like if those in the caring professions really took this charge seriously. Could we actually heal? What would the church look like as a place of healing?

What is parish nursing at Mount Zion? I would like to think that it is awesome, but the truth is we are a fledgling ministry with all the challenges and pains of a birthing experience. Along with that comes all the excitement and expectation of something new and wonderful and creative. The past year has been one of challenge as we coped with the absence of a pastor due to illness. A part-time pastor was called to assist during this time of need to augment the team approach in caring for the needs of our Mount Zion community. But, it has been the people of Mount Zion who have been so generous in sharing their time and talent and support that has been most helpful and hopeful.6

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We have been challenged this past year in other ways. Continued cuts to our health care system have resulted in greater need for advocacy and so my priorities have changed somewhat to accommodate this need. Illness, along with an aging population, have resulted in referrals to community agencies such as Community Care Access Centre and long term care facilities. I have worked more closely with families to facilitate smooth transitions and ongoing care. It has been both time consuming and rewarding work, resulting in the successful placement of three of our seniors. Church visitors, pastors, the congregation and myself continue to provide support following placement.

The incidence of cancer has increased and we are being challenged to reach out to our friends in a very unique way. I see this as another opportunity for growth as we are stretched to embrace these issues and meet the challenge of loving our neighbour by visiting, providing meals and going even beyond that. Caring for people with life threatening illness can be exhausting. I have watched the connections and bonding that has resulted from people sharing their stories with each other, offering hope and encouragement when faced with the unknown.

While the goal of parish nursing ministry is to address the needs of the whole church community, in this past year, the focus has been on the needs of our seniors. This includes blood pressure monitoring, super singles, the 45+ group, referrals from the pastors or individual contacts. These connections provide opportunities for the parish nurse ministry to take place. Meeting informally and formally with these people has resulted in approximately 180 client contacts over the past year, 111 home visits, 30 hospital or nursing home visits, 87 phone visits. While the reasons for these visits in the past year were often illness and for the sake of promoting health, spiritual care has always been the primary focus. Outreach has always been part of the mandate of parish nursing ministry at Mount Zion. I have continued to support one client; with multiple health, social and spiritual concerns referred by a pastor in the community. I have also mentored student nurses from Conestoga College and McMaster Divinity College, challenging them to look at their own spirituality so that they, in turn, can recognize spiritual needs in their patients and clients. Stephanie Von Schilling and I taught a class at Waterloo Lutheran Seminary on Spirituality in Nursing. I continue to accept speaking engagements at other churches in the community that are exploring opportunities for parish nurse ministries.
I am being stretched in my role as parish nurse. I have acted as camp nurse at Edgewood for the confirmation classes. This was rewarding and I enjoy the connection with young people. Wherever I go, I proudly hold up parish nursing ministry at Mount Zion as one example of what can happen when a church gets serious about becoming a health and healing place. All this would not be possible without the ongoing support of countless individuals at Mount Zion, the pastors, Health Council and Church Council members, and the parish nursing community beyond Mount Zion.

Notes

1 Granger Westberg, The Parish Nurse: Providing a Minister of Health for your Congregation (Minneapolis: Augsburg, 1990) 48.

2 Ibid., 19-20.


