An Episcopalian Answers Questions About Health Ministry and Parish Nursing

by Jean Denton

National Episcopal Health Ministries
Introduction

Because our health care system too often treats us in ways that disconnect our physical selves from our spiritual and psychological selves, more and more Episcopal congregations are exploring the concept of Health Ministry in order to bring wholeness and healing to broken people. The church is well able to integrate spirit, body and mind, combining ancient healing traditions with modern tools of health education and health promotion.

Many congregations are exploring parish nursing as a part of their health ministry. This booklet seeks to answer the most common questions asked by clergy and lay leaders.

If after reading this booklet you would like more information, please contact

National Episcopal Health Ministries
6050 N. Meridian Street
Indianapolis, IN 46208

Telephone: 317-253-1277 X34

www.EpiscopalHealthMinistries.org

May God richly bless you as you seek to discover your ministry and the ministry of your congregation!

Jean Denton
5th Sunday of Pentecost, July 8, 2001

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What is health ministry?

Health ministry in a local congregation is an intentional ministry focusing on both healing and health, combining the ancient traditions of the Christian community and the knowledge and tools of modern health care.

Health ministry is a living witness to the healing activity of God through the local congregation, encouraging whole-person health through:

- integration of body, mind and spirit
- increased self-knowledge
- personal responsibility and
- interdependence among God’s people.

Every person is a trinity in unity; a person cannot be divided mind from body or body from spirit without losing his or her essence. But the current health system inadvertently attempts to pull people apart. The health-care system addresses biological concerns, but becomes uneasy when a patient asks, “Why did God let this happen to me?”

The church, so often uncomfortable with the biological side of life, also bears responsibility for dividing the integrity of mind, body and spirit. Spurred on in its early history by the heresy of Manichaeism, the church has split the spiritual (the “truly” good) from the physical (that which is passing away). René Descartes further articulated this split, and unfortunately, the church seems to have listened more keenly to Descartes than to Jesus on this point! Today’s church is still uncomfortable in dealing with issues of bodily concern. Health ministry seeks to weave together “cure of body” with “cure of soul.”
What is parish nursing?

Parish nursing is caring for wholeness — mind, body and spirit — by combining the knowledge and skills of nursing practice with an understanding of the spiritual and religious beliefs that underlie health. Parish nursing is practiced in the congregation — the local community of faith — be it parish or mission.

Parish nurses, with one foot in the spiritual world of the church and one foot in the physical world of medicine, minister in ways that reunite the mind, body and spirit, addressing and embracing the relationship between the visible and the invisible. The parish nurse links these spheres, translating the jargon, forging the connections and facilitating the parishioner’s more complete understanding of his or her health experience.

What is the difference between parish nursing and health ministry?

Actually, they fit very closely together. Parish nursing focuses more on the nurse’s roles and on the responsibilities that individual carries. A parish nurse often leads a congregation in health ministry. Health ministry is broader in scope. It focuses more on outcomes for the parish and on the congregation’s work of bringing health and healing in the community. Sometimes the phrase health ministries (plural) is used to emphasize the multiplicity of players; this ministry does not belong to any one person. Often it is a parish nurse who leads the parish in health ministries.

What is the theological grounding for health ministry?

Support for health ministry within the church has firm grounding. Episcopalians may not have many doctrines, but those we do have apply to health ministry:

- **Creation.** God looked upon creation and said, “Behold, it is good. Behold, it is very good!” God has made all things that are, and all that are to be. And they are good — very good. God created matter and God created flesh and blood and bones and teeth and spleen and all the rest. And they are very good!

- **Incarnation.** God became flesh, and chose to live in the created world. God lived in matter, and does not stand apart from flesh. In Christ, God stands in the midst of the living today. Our hands and feet are the hands and feet of Christ in the world today; our kidneys and mouths and stomachs are no less Christ’s.

- **Stewardship.** Episcopalians understand that we are not owners, but caretakers, of the material world. Stewardship often applies to time, talent and treasure, but what about the torso? St. Paul reminds us that our bodies are the temples of the Holy Spirit. Are we not then to be good stewards of them? Are we not then to take good care of this flesh, this piece of life borrowed for a time from God?

- **Salvation.** The root of “salvation” is the Latin “salve,” which means making whole. We cannot be made whole unless we consider all parts that make us who we are. All creation is to be restored, not just the non-material parts. As Paul explains in Ephesians, all things are held together in Christ. Our bodies are sacred.

- **Suffering.** Jesus did not escape suffering, pain and death. He entered into it. He knew on some level that God would be at work there, too. Teilhard de Chardin reminds us that bleeding is
the price we pay to let God enter us deeply. Jesus embraced the shadow-side of life to show us the fullness of God, a God who does not abandon us when the sunlight can’t be seen, a God who walks with us through the pain, through the sickness, through the agony of dying. God is a God who suffers with us. Health ministers and other trained laity demonstrate this, as they are present with parishioners in their suffering.

Why should a congregation consider health ministry?

Health ministry and parish nursing in a congregation do not replicate services that already exist in the community, because parish nursing addresses health more than illness. The current health care system in the U.S. doesn’t focus on health, too often doesn’t seem to care, and isn’t a cohesive, holistic system. Instead, it’s primarily disease-oriented, fragmented and enormously expensive.

The disarray of the health care system is not the only reason congregations should become involved in health. The mission given Christ’s disciples is to preach, teach and heal, and the church’s teaching and preaching have far exceeded her healing in this day. The church needs to be true to her calling. She has the opportunity in this modern age to use many tools to bring about healing.

The Rev. Dr. Granger Westberg, a pioneer in chaplaincy and the initiator of the parish nursing movement, speaks of the mismatch between the resources allocated by the health care system and the people needing care. Westberg divides people into three categories, which he, tongue in cheek, describes as “The Well,” “The Little Bit Sick” and “The Really Sick.” In those groups, about 70% are “well,” 29% are in the second category (visiting a doctor, asking help from the local pharmacist) and only 1% are in the third group (in tertiary hospitals). Health professionals, on the other hand, are distributed in the opposite manner, with 1% of all health professionals working with “the well” to keep them well, 29% caring for those who are “a little bit sick,” and 70% working with the 1% of the people who are “really sick.” Westberg argues, therefore, that the institutional church can play a huge role in addressing health issues, particularly in keeping people well.

The health care system and the church offer plenty of space for health professionals and laity to work together to keep people well, to empower them, to educate them, to advocate for them, to teach them and to care for them. Parish nurses address the person or group holistically, recognizing that the body cannot be separated from the spirit.

How does health ministry relate to spiritual healing?

Healing is central to the ministry of Jesus, the ministry in which he calls us to follow. Jesus was a holistic healer; he did not see a distinction between body and spirit when he forgave and restored sight. Twenty per cent of all the stories about Jesus refer to his healing; the Gospels contain some 35 references to Jesus healing. Too often we overlook them.

The miracle stories in light of twenty-first century technology can seem somewhat embarrassing. We find Jesus’ simplicity embarrassing. We fail to see that our medical tools are simply aids to healing. They help create an environment where healing can take
place, but they are not healing in and of themselves. Healing happens miraculously in the invisible workings of the body's cells. God is at work there. Health professionals simply help create a space for miraculous healing to happen.

Parish nursing and health ministries embrace spiritual healing, the Laying on of Hands and anointing with healing oil, just as they embrace other ways that God uses to heal. All healing is of God.

How does health ministry differ from pastoral care?

Health ministry incorporates good pastoral care, but takes pastoral care somewhat further. The following example demonstrates how health ministry stretches pastoral care:

A parishioner spoke with her priest about her 97-year-old aunt, who was in a nursing home and who was not eating. The doctor had asked the parishioner for permission to insert a gastric feeding tube. Knowing that her aunt did not want dramatic measures, the parishioner nonetheless felt pressured to give permission for this procedure. The priest listened well, and after discussion shared that he did not see that it was incumbent upon the parishioner to have the tube placed. It was caring and loving not to make her undergo surgery, which the aunt feared.

The parishioner called the parish nurse the next day, saying she wanted all the information she could gather when making this decision. She wondered if it were more humane to let someone die in surgery (the aunt was on oxygen, and had cardiac problems as well as malnutrition) or to let someone starve to death. As the conversation unfolded, the nurse was able to suggest that other options were available. The nurse encouraged the parishioner to request a case conference at the nursing home, and agreed to go with her. The case conference included the dietician and the nursing staff. During the discussion, it became apparent that the gastric tube was the easiest answer for the nursing home, but it was not necessarily the best answer for the patient or her family. Here, health ministry included advocacy for the aunt and empowerment for the family. The elderly aunt began eating again when the food was prepared in a way she enjoyed and when time and attention were given to her eating.

Just what does a parish nurse do?

The parish nurse engages in several roles. The International Parish Nurse Resource Center identifies the classic roles as follows:

- Integrating faith and health within the parish community
- Counseling parishioners on questions of personal health
- Acting as a health educator
- Acting as a referral agent
- Coordinating volunteers
- Developing support groups
- Advocating for individual and community health

The parish nurse is a nurse of the church, not simply a nurse in a church. She is not transplanted from the hospital or clinic to perform the same tasks, and she does not attempt to replicate existing services available in the community and place them in the church building. Plenty of agencies are already providing nursing care in the
home — dressing changes, blood draws, monitoring intravenous feedings, and so on. Most, though certainly not all, geographic locations have sufficient doctors and clinics available for treatments.

Parish nursing uses a public health model to balance the themes of wellness (health promotion, disease prevention) with healing (treating disease, recovery, chronic illness and death). The parish nurse focuses on enhancing the well-being of parishioners and the parish as a whole, and is also present at times of sickness and dying. In short, the parish nurse is involved in the continuum of health.

Under the Nurse Practice Act (which differs somewhat from state to state) the professional nurse has several responsibilities. Some of the nurse’s responsibilities are delegated functions, tasks done under the supervision of a physician. Often these are invasive procedures requiring doctor’s orders, and they are often the first tasks people think of when they imagine a nurse at work. The parish nurse, however, focuses specifically on other parts of the Nurse Practice Act: assessing health needs, teaching, referring to services in the community, coordinating health care, counseling regarding health-related concerns and advocating for those who need a voice. The parish nurse does not do “hands-on nursing” in the usual sense of the phrase.

What makes these services different from those offered in more “traditional” settings is that they are conceived of and delivered in the context of Christian faith. They are not ends unto themselves. They are not body worshipping or narcissistic. They do not come from duty or obligation, but from a deep sense of our connectedness one to the other and to Christ. Parish nurses do things that are peculiarly Christian, and these have strong implications for health and wholeness.

Carrying out a parish nurse’s responsibilities takes many forms, and the specific programming depends on the individual parish with its particular demographics, resources and energy. The parish nurse might offer Health Risk Appraisals, teach classes on safe babysitting, take blood pressures after the Sunday worship service and maintain a resource bank with information on health and illness. She might find a speaker on “The Healing Power of Humor,” visit parishioners who are in the hospital, coordinate the Lay Eucharistic Ministers as they take the Sacrament to shut-ins, or even meet with parishioners to do exercise or Yoga. The possibilities are endless.

Parish nursing contains a strong element of community health nursing, the parish itself being the community. Besides working with individuals and families, the parish nurse also works with the parish as a unit, paying attention to community concerns such as safety and encouraging the Sunday School curriculum to make space for programs related to abuse, such as “Good Touch Bad Touch” or “Kids on the Block.” Health ministry deals with the parish community, looking at its demographics, physical plant, and healthy or unhealthy practices.

In what kind of situations does a parish nurse really make a difference?

The real answer to this question comes from the people whose lives have been touched by this work.
A mother stops in the Health Ministries Office and says to the parish nurse, "I don't know what I should do, if anything. Our babysitter molested my little boy last night." She is hurt, confused and angry. She doesn't know where to turn, so she turns to a health professional in her church, who listens well, prays with her, refers her to community services that can help her and stays in touch with her and the little boy.

A young man stops the parish nurse after a Sunday worship service and says, "Do you see this lump on my neck? Do you think I should see a doctor? I don't have health insurance, so I've been putting it off." The nurse helps him understand that he needs immediate attention, and works with him to see a physician the next morning.

Another man comes for anointing and for prayers for healing after Eucharist. He says, "I think I might be alcoholic, and I know I can't handle it alone." The parish nurse and the priest pray with him. Afterward, he asks whether he can talk about his problem, and over a cup of coffee, the parish nurse gives him information about a local AA group.

An older woman comes to get her blood pressure checked. During the conversation, the parish nurse recognizes the real issue is the parishioner's alienation from her daughter. The woman's real need is to tell her story and get some guidance for handling the situation.

A 37-year-old business executive comes to talk with the parish nurse on her way back from getting a second opinion about her back pain. It isn't lupus after all – it's metastatic bone cancer. She comes in shock and disbelief. She meets with the parish nurse many times after that, seeking answers to practical questions, wanting to share her hopes and her fear of more pain, needing to talk about her life and her mistakes and heaven and advance directives. And she wants to talk through her burial service. When her condition stabilizes, the parish nurse suggests to this woman that she has something precious to give to her community – the ability to share her experience with others who have life threatening illnesses. Together they form a support group, and in the midst of community, the woman continues to come to terms with her impending death.

What is a typical day like for a parish nurse?

A parish nurse doesn't have a "typical" day. Sundays may include taking part in the service by assisting at a healing station, leading the prayers, or even preaching. After the service, the parish nurse might greet people and hear their concerns, gather information, teach a Sunday School class or take communion to those in the hospital as a Lay Eucharistic Minister.

A weekday can bring almost anything. A parish nurse may do the following types of things during a standard week:

- Attend a meeting with the AIDS Service Center to plan a program to help people cope with the upcoming holiday season.
- Teach a session on menopause to a women's group.
- Meet with a parishioner who is concerned about an aging parent.
- Meet with a hospital discharge planner to help facilitate a parishioner's getting needed help at home.
• Track down a program to help children of divorce.
• Take the blood pressure of a concerned man.
• Lead a grief support group along with a social worker from the parish.
• Organize and facilitate a plan to arrange a Sunday morning education series on various health concerns, perhaps using the skills of the health care practitioners in the parish.

Does a health ministry exclusively serve the parish, or does it serve the neighborhood, too?

The congregation is the focus of the health ministry. Anyone who is part of the parish is encouraged to access services and also to offer care to others. Depending on time and resources, the health ministry might also minister to individuals in the community around the parish.

When an offering by the church’s health ministry it is appropriate to larger groups, the public is often invited. Such programs may include a speaker coming to address a group on coping with cancer, or a support group for widows, or a lecture series on depression or mental health vis à vis spiritual health.

But remember that health ministry means helping people to integrate mind, body and spirit, not delivering traditional medical care. The health ministry is not trying to replicate existing services, so when people need to be referred to the Family Service Agency or to a counselor or to the Health Department, the parish nurse makes that referral and does not try to meet every need herself.

How do you know whether a church is ready for a health ministries program?

First of all, most churches already have some aspect of health ministry in place, be it a corps of parishioners who deliver Meals on Wheels, an intercessory prayer group, a Crisis Committee, or a Stephen Ministry program. Many churches may not have named these programs “health ministry,” but it can be understood to be a part of health and caring. That gives something to build on. It tells where the current energy in the parish can be found. It gives a familiar place to start expanding ministry, should the church so choose.

Looking at the parish in terms of its resources and its energy is important. Resources don’t have to be financial. They can be interest, skill, vision or commitment. If these exist, it might be the right time to harness them into a fuller, more organized program.

Recognizing the specific health-related needs in a particular parish is also important. Does the parish have a large aging population? Or, is the parish full of young couples with little children? Are there obvious unmet needs? Necessity may be the driving force for beginning a program.

I am interested in starting health ministries at our parish. Where do I begin?

– Pray. Ask God for whatever you need, be that clarity, connections, direction or insight. Pray seriously for discernment. Pray with an
open heart. And continue praying throughout the process. Invite the Spirit into the decision-making. Health ministry is not a human endeavor done with human talents. You may want to find yourself a Spiritual Director with whom to explore this possibility.

– Start to educate yourself about health ministry. Read all you can. Secure a copy of the resource manual *Steps to a Health Ministry in Your Episcopal Congregation* from National Episcopal Health Ministries. The book *Health Ministry in the Local Congregation*, by Stephanie Ulrich and Allen Brown, is also available through the National Episcopal Health Ministries office. Another resource is a little book by Granger Westberg, *The Parish Nurse* (Augsburg Press), which can be purchased from a bookstore. Become as knowledgeable as possible, seeking information from others in your local community and from others in the church.

– Contact the International Parish Nurse Resource Center (314-918-2559; www.parishnurses.org) and the Health Ministries Association (800-280-9919; www.hmassoc.org) for information. And contact National Episcopal Health Ministries at 317-253-1277 or at our website: www.EpiscopalHealthMinistries.org. You’ll get encouragement, support and linkage with others in your area who are involved in this ministry.

– When you find others of kindred spirit, spend time with them regularly. Toss around ideas, questions and hopes. Listen for suggestions.

– Once you have acquired some information, talk with your Rector or Vicar. Share your enthusiasm, and give the clergy some reading material. Allow time for him or her to reflect on your proposal, but be sure to get back in touch within a reasonable amount of time.

– Discuss and dream with the clergy who support you, and then plant seeds in the parish. Pass out articles to people you want to get interested. Let folks know of your enthusiasm through the parish newsletter, and invite them to gather with you to learn more.

– Hold an informal meeting of interested parties. Show a videotape like *Body & Soul* (produced by National Episcopal Health Ministries) that describes the concept and shows what programs in other churches look like. This will help make the concept real.

– Become educated by attending “Education for Episcopal Health Ministry and Parish Nursing,” offered through National Episcopal Health Ministries in partnership with the International Parish Nurse Resource Center. The course is open to all who want to lead Episcopal congregations in health ministry, and uses the endorsed curriculum. Continuing education units are offered to RN’s who take this course.