

Linking Faith and Health

by The Reverend Donna Coffman, RN, MACE/MDiv, FCN

Since the last half of the nineteenth century, western societies have been blessed with the miracles of modern medicine. Highly refined surgical techniques, antibiotics, immunizations, and technologies that probe the deepest mysteries of the human body have changed the way we go about curing and healing. Along with skilled, specialized health care professionals these advancements and others have brought us to a time and place in medicine that 150 years ago was unimaginable!

However, in the midst of this flood of discovery and progress, a great tragedy occurred. Many of the bridges between faith and health were washed out. In the excitement and thrill of the explosion of scientific knowledge, the Church relinquished her position as the center of healing for individuals and communities. The bridges that existed for centuries collapsed in a matter of a few decades. Faith and health were segregated. In this new millennium, many are disillusioned and struggle with a gnawing fear about the state of health care in our country and around the world.

In a culture that prizes specialization, health care (and perhaps life in general) has become very fragmented. We take our bodies to doctors, our souls to church, and our minds to school. In the frantic pace of American life, emotions are pushed down until we violently explode or gradually fall into depression. Billions of dollars are spent on health care each year. Health care expenditures account for 16 percent of the Gross Domestic Product; and 97 percent of those dollars are actually for care of illnesses that often are the result of the stress of isolation and fragmentation. Only 3 percent of health care dollars are spent for health education and promotion along with illness prevention. ⁱ

People enjoy longer life today, due in part to a decline in deaths from acute illness. Now we find that many of them are trying to manage one or more chronic illnesses. For those fortunate enough to be able to read and to afford health insurance, navigating a chronic illness or hospitalization can be frustrating. It is like wandering through a desert while shifting sands constantly cover any trails we might follow. Think of the frustration and grief of those who are unable to even get to the desert because they cannot understand the jargon or afford the health insurance! Segregation of body, spirit, and mind, difficult access, high cost, and fragmentation of services are only some of the challenges we face.

Take heart! The problems facing health care today may actually be a chance for the church to once again be seen as a healing place! As current trends move care out of institutions into communities, congregations are reclaiming Christ's healing ministry in a very tangible, visible way. Registered nurses by the hundreds are answering God's call to serve in churches. They are eagerly, joyfully rebuilding the bridges between faith and health. These nurses – called parish nurses or faith community nurses – are the anchors of a swelling health ministry movement. They are strengthening the capacities of individuals, families, congregations, and communities to connect what they believe with how they care for themselves. They are empowering members to take responsibility for

healthy lifestyles based on faith. These pioneer women and men are opening the way for congregations to experience a depth of spiritual renewal and power often associated with the dynamic, early church that was well known for healing ministry.

Registered nurses with spiritual maturity are joining church staffs as paid or volunteer parish nurses across the United States, Canada, and in a growing number of other countries. Parish nursing began in the mid-1980s in Park Ridge, Illinois, the vision of Dr. Granger Westburg, a Lutheran minister who worked as a hospital chaplain. From that first small group of six or seven nurses, the witness and ministry of parish nurses is multiplying daily. This phenomenal grass roots swell reminds me of the story of the feeding of the 5,000. The multiplication of the blessings of parish nurse ministry may well be a modern day miracle that is feeding thousands of people who hunger for integration of body, spirit and mind and thirst for a caring presence in times of transition.

One of the joys and challenges of these rapidly-expanding ministries is that they are like snowflakes – no two are alike. Using the nursing process of assessment, planning, implementation, and evaluation, a particular ministry of a particular congregation in a particular location is created based on the assessed needs and desires of the congregation and the community surrounding it, along with the time, gifts, and skills offered by the parish nurse.

Although no two health ministries are the same, there are common threads that bind all parish nurses together no matter what their region of the country, denomination, or nursing specialty. First, there is the sense of an irresistible call to this ministry. I am constantly amazed at how God works as I listen to their “call stories.” Many come to parish nursing after a walk through their own valley of suffering. Describing a sense of being claimed by God and of being unable to shake off God’s “holy nudge,” they are giving many their faithful care.

Among these nurses there is also a deep commitment to the leadership of wholistic health ministries that address not only the physical dimension of people, but the spiritual, emotional, intellectual, social, and vocational aspects as well. Parish nurses know that we are created with a built-in desire to pray. So prayer is a key element of all parish nurse ministries.

Parish nurses are keenly aware of the differences between cultural, scientific, and biblical models of health. Culture tells us health is young, firm, disease-free bodies, shiny hair, and sparkling white teeth. This image is vividly portrayed in advertisements for potions and products “guaranteed” to make us slim, trim, and forever young! Science tells us that to be healthy means to be disease or dysfunction free. The absence of disease is quantifiable by charts, scales, and values. The focus of the scientific model is on cure and perfection.

In contrast, parish nurses emphasize the biblical interpretation of health based on the Old Testament concept of shalom or wholeness and the New Testament concept of being saved or healed. To be made whole, healed, or saved means to be brought into right

relationship with God, self, others, and creation, to be made “righteous.” Parish nurses believe that even someone living with an incurable illness or chronic disease can be healed or brought into right relationship. Healing is a gift from God that comes in community with others and does not necessarily include a problem free body or life.

All parish nurses focus on health promotion and illness prevention, which is known in faith communities as stewardship of the gift of our bodies. They emphasize personal responsibility for lifestyle choices within the context of faith. The National Institutes of Health and other agencies agree that 50 percent of one’s current personal health status is a result of lifestyle choices made on a daily basis. Heredity accounts for 20 percent of personal health status; 20 percent is related to our environment. Only 10 percent of our health status is directly related to the medical care system.ⁱⁱ

The American Nurses Association recognized parish nursing as a specialty practice in April 1997 and acknowledged the Scope and Standards of Practice for Parish Nurses in February 1998. All parish nurses use these boundaries to establish their practice. This document defines parish nursing as “a unique, specialized practice of professional nursing which focuses on the promotion of health within the context of the values, beliefs, and practices of a faith community...its mission and ministry to its members...and the community it serves.”ⁱⁱⁱ Parish nurses must be currently licensed in the state of practice, have extensive clinical experience and the ability to perform the independent functions of nursing practice. This means that they do not provide services that require a doctor’s order, such as giving medications or intravenous fluids. They do not duplicate existing services like home health or hospice. Parish nurses do not maintain a clinic in the church.

Parish nurses are health consultants for congregations so current health knowledge, good communication skills, and the ability to model wellness are essential. All parish nurses do health education linked to faith and are encouraged to participate in their own educational preparation for this unique effort. A variety of courses offered around the country provide foundations for combining nursing expertise with theological concepts. A basic formation course includes the theology of health, prayer and healing, spiritual development, the ministry of presence, ethical decision-making, and working in a church. Other sessions in the course explore the nursing functions of the role such as referral and resource management, documentation and congregational assessment.

At this time there is no certification or credentialing examination for parish nurses. As this ministry evolves, I expect that certification will be an option as it is now for nurses who specialize in such areas as cancer or emergency care.

I believe that the church has a major role to play in what health care will look like in this century. Jesus not only healed bodily wounds; he also healed the wounds of fragmentation and isolation. He restored hope and healed broken relationships. The church, where people meet weekly to seek healing, is a natural place to learn to care for ourselves. By embracing parish nurses, churches can open the doors to healing for a world that is struggling with managed care, fragmentation of health services, high cost

and difficult access to care. The increasing numbers of people who are living with chronic diseases can learn to manage their illnesses so that they can live out their call to life abundant. (John 10:10)

Kairos time, God's time has come for the church to move towards care of people as whole persons —body, as well as mind and spirit—and parish nurses are joyfully leading the way!

i Kaiser Family Foundation <http://facts.kff.org> downloaded 10-23-08.

ii The Congregation: A Community of Care and Healing, Presbyterian Church (U.S.A.), social justice and peacemaking unit, office of human service, Louisville, KY, 1991, p. 2

iii The Scope and Standards of Practice for Parish Nursing, American Nurses Publishing, Washington, D.C., 1997, page 1.

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