


NCF in British Columbia


Please pray for God's leading and guidance for the future of NCF in B.C. With many of our members retired, or nearing retirement, we have a strong need for younger nurses to join NCF and continue the ministry here. Events this past year have been difficult to accomplish because of low attendance. We have been praying for a new chairperson to take over and we strongly believe it is time for fresh initiatives in the leadership.

Elizabeth Obiri-Darko
British Columbia NCF Chairperson



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NCF in Saskatchewan

Saskatchewan NCF continues to be used by nurses to care for nurses. Three community groups in Yorkton, Estevan and Regina meet at various intervals throughout the year to attend group discussions on health care



issues, listen to relevant and timely speakers, study and apply scripture, and pray. Christian nurses in our province have been engaged in mentoring new graduates as well as international nurses who have come to Canada to serve in our provincial health region.

Responses to personal invitations to attend retreats, brunch/dinner meetings, and workshops have been very positive. In March, Regina NCF hosted a 'Getting Your House in Order' brunch with Bonnie Raisbeck as our speaker. Our monthly 'Prayer & Share Coffee' also continues to lift up nurses and the health care system in prayer. This fall will be our 4th annual nurses' retreat. It is planned for October 16-18, 2009 at Dallas Valley Ranch Camp near Regina.

NCF is definitely meeting the needs for education, care, and fellowship among nurses as they serve God and the people of Saskatchewan in their chosen profession.

Doreen Pretzlaw, RN
Former Saskatchewan NCF Chairperson

Monday Night E-Mail Prayer Ministry



By Celia Wong, RN

In the spring of 2006, Anne Hawes, the NCF National Director at the time, was preparing for her retirement. Anne had been responsible for sending out an e-mail prayer bulletin every Monday night to nurses across Canada asking them to pray for specific concerns as expressed by nurses. In arranging her transition, she announced the need for a volunteer to take over this ministry. When I

read that request, I thought to myself that whoever decided to do this would be a brave soul since there were some big shoes to fill. Several weeks later, I ran into Elsie Millerd, the former chair of the Ontario NCF committee. Elsie privately asked me if I would consider taking up that exact task.

I was hoping that no one would ask me, because I knew the great responsibility this commitment would entail. In view of the fact that I have been associated with NCF for over 15 years and I was not working at that moment, I could not think of a reason to decline. So, there I was, trying to do what I knew was right and said "yes".

Monday night prayer e-mails have been a means by which NCF prayer partners and friends encourage one another through sharing the word of God and can feel supported by the prayers of the NCF community. Nothing is more comforting and assuring than knowing that our prayers and

NCF in Ontario

This has been a busy year for Ontario NCF. Christian nurses in our province are coming together and learning how to integrate their profession and faith. Our small groups in Ottawa, York Region/Thornhill, Scarborough, Toronto Public Health, Hamilton, St. Catharines, Port Colborne, Guelph, Kitchener/Waterloo, Halton, and London, have been meeting regularly for Bible studies and prayer. Several small group leaders are also reaching out to student nurses and providing mentorship.

We have had a lot of success reaching out to Christian and non-Christian nurses alike through job fairs – making NCF known to different local communities. RNAO exhibitions, breakfast gatherings, and annual seminars are examples of some other events we have been involved in annually.

The use of new forums such as Facebook and the NCF website have been successfully connecting younger nurses who share similar views on healthcare. NCF has been and continues to be a place where nurses can gain and regain the spiritual strength and knowledge needed to perform in the nursing profession.

Please keep in your prayers our need for more local groups and for more opportunities to reach out to younger nurses in Ontario.

Jackie Schmidt
Ontario NCF Chairperson

praises have been uplifted to our Heavenly Father.

From time to time we are encouraged by answered prayers and inspirational stories of personal journeys with God. Monday night prayer emails have also enabled members to share their news and updates with one another.

Occasionally, I am asked, "What if I cannot pray exactly on Monday evenings?" My answer is this: God invites us to try our best. As long as we have a desire to pray, God will honour our desire and our prayers even though we may not think that they are timely. He will minister His grace to us in His own perfect timing. There have been occasions when I could not send out prayer emails before certain events for which prayer had been requested. In those cases, I can only trust that God heard our prayers in advance.

I hope and pray that NCF prayer partners will continue to find encourage-

NCF in Atlantic Canada

This year we have continued holding regular NCF gatherings in Fredericton, St. John, and Moncton. Our newsletter, *The Link*, has been successful in reaching out to and connecting nurses in Atlantic Canada. We have also been distributing Ambassador Kits (packages containing information about NCF) to nurses who are interested in learning more about our ministries. For the first time, in 2008, we participated at the job fair in Fredericton.

NCF in Fredericton met bi-weekly this year on the UNB campus, in the Faculty of Nursing building. In March they decided to shift their focus and meet at the hospital chapel instead of the University. Though their numbers are small, the times of fellowship and focused prayers for the local hospital and government are encouraging.

Our main emphasis is prayer for God's leading/direction to enable us to be a visible presence on and off campus, for leadership, focus and direction, as well as renewed interest and fellowship in the fall. Karen Chase, our current leader will be getting married and moving to Halifax in June, so please pray for her as she takes these new steps. We are also seeking nurses willing to commit to serving on the committee and for NCF representation in P.E.I. and Nova Scotia.

Marg Winchester
Atlantic NCF Chairperson

NCF in Québec

Québec NCF is composed of a community of nurses who dedicate their time to serve the Lord by praying for and supporting other nurses. We meet frequently for Bible studies and prayer meetings. Though some of the nurses are bilingual, our meetings and activities are offered in English only. We are affiliated with another group of nurses who are predominantly French-speaking, and these nurses participate in some of our special activities. We or-

ganize and offer one-day conferences which address present day topics of interest to the nursing work place. Topics include spirituality, understanding mental illness, and healing the body and mind through prayers. We are requesting prayers that more young nurses become involved and that someone will answer the call to be the chairperson for Québec NCF.

Pauline Martin
Québec NCF Chairperson

ment, prayer support, and companionship as we strive together to serve God and to share His grace in our nursing roles.

Paul says to the Philippians, "If you have any encouragement from being united in Christ, if any comfort from His love, if any fellowship with the Spirit, if any tenderness and compassion, then make my joy complete by being like-minded, having the same love, being one in spirit and purpose." May we follow Paul's teaching to be like-minded and share our love and encouragement for each other so that we may keep company with each other as we fulfill our purpose in God's kingdom in the field of nursing.

If you would like to join hundreds of nurses across Canada in this weekly e-mail prayer ministry, please contact me at e-mailprayerministry@ncfcanada.ca. We also welcome any suggestions for improvements that may help NCF and its ministries serve you better.

Spiritual Caregiving in Plural Contexts...continued

"I feel I have a spiritual bond with many of the Sikh and Punjabi patients – they are so devout. When I come to a woman's house and I know that she has had a prayer shawl over her head and then she comes and beckons me. I feel like I'm almost walking on holy ground. And I feel an immediate bond. So I don't think, 'Oh, you're from a different religion'. I admire her devotion and so it's a bond for me. It's not such a barrier." (Reimer-Kirkham et al., 2004, p. 158).

The point then becomes how religion and spirituality—even when representing different beliefs—can be an avenue for connection between nurse and patient. Mary O'Brien (2007) who has written several books on spirituality and nursing also draws on the Old Testament narrative of Moses and the burning bush when she says that a nurse's spiritual posture is one of standing on holy ground, one that requires us to 'take off our shoes' as it were. She writes:

"God frequently speaks to us from a 'burning bush', in the fretful whimper of a feverish child, in the anxious questions of a surgical patient, and in the frail moans of a fragile elderly. If we 'take off our shoes', we will be able to realize that the place where we stand is holy ground; we

will be able to respond to our patients as we would respond to God in the burning bush." (p.7)

With a motivation of service and compassion, nurses are able to connect with patients to bring comfort and healing.

To take on this posture of standing on holy ground requires that we know ourselves. Nouwen (2006) says that solitude, silence, and prayer are often the best ways to self-knowledge because they bring us in touch with our own sacred center, where God dwells, a place of adoration, thanksgiving, and praise. Spiritual caregiving then comes from a deep place within to connect with patients and colleagues.

About the author: Sheryl Reimer-Kirkham is a professor of nursing at Trinity Western University in Langley, B.C. She is director for the new Master of Science in Nursing program. She lives in Surrey, B.C. with her husband and two young daughters. She can be contacted by e-mail: Sheryl.Kirkham@twu.ca, mail: 7600 Glover Road, Langley, B.C. V2Y 1Y1 or phone: (604)513-2121

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Have I Got a Job For You!

By Clara Martin, RN

"What is a newly-retired public health nurse doing behind a booth at a job fair?"

"Does she need a job or is she hiring?"



In a way, both are true. My real "job" is to represent the Lord. What I discovered a few years ago is a unique little opportunity to share my faith with others – representing NCF at Health Care Job Fairs. More volunteers are needed across Canada and the commitment of time is lessened the more people help.

Think about it! People in need of a job or information about jobs come to these events looking for guidance. They are often at a crossroad in their lives. They need the Lord and you can help! After all, ours is a helping profession. We are trained for this.

A bit about me...

In 1969, I graduated from the

Atkinson School of Nursing at Toronto Western Hospital. Continuing with my studies, I then attended the University of Toronto to obtain my BSc in Nursing in 1972. After graduating, I started working at Princess Margaret Hospital in Toronto, where I stayed for the next 3 years. In September, 1975, I was hired by Toronto Public Health where I worked for the following 5 years. After much prayer and discussion, I felt God calling me to work full-time at the church I was attending at the time; to visit families in the neighbourhood and develop Bible studies. I returned to Toronto Public Health in October, 1984 and continued to work in various offices and programs until my retirement this past November. In the past several years, I have been assisting with Health Care Job Fairs in Toronto, representing NCF. At the beginning, Belinda (Hartslielief) Owens, the Ontario Director of NCF at the time, was at the NCF booth with me. I enjoyed it from the outset, talking with nurses, student nurses, and anyone else who passed by. It is a wonder-

ful opportunity to meet nurses and other health care providers. Many have not heard about NCF and are delighted that it exists to support nurses in their workplaces. Some leave their names and e-mail addresses; others prefer to take the NCF card and magnet to check the website for information.

A bit about job fairs...

Job fairs provide us with opportunities to speak with people from various health care sectors and from diverse religious persuasions. Besides NCF materials including the Ontario NCF and Canadian NCF newsletters, I have available other resources such as the popular, *Our Daily Bread*, a small booklet entitled *Daily Strength* (which contains verses for each day of the month), Gospels of John, and New Testaments. Nurses often tell me they will carry these small booklets in their bags for quick reading, a spiritual snack so to speak. More recently, I have also brought with me copies of the Jesus DVD, which is now available with numerous language options. It is especially useful in reaching out to those whose mother tongue is not English, and I try to reserve it for people who are not believers. I recall giving the DVD to a gentleman from Iran who was looking for work as a technician. Even though

I was unable to assist him in finding a job, I was able to give him the words of eternal life in Farsi and he was eager to receive them. Another time it was to a person who was from Bangladesh, as the DVD could also be played in Bengali.

I would like to encourage you as nurses to take the challenge to represent NCF at the next Health Care Job Fair in your city. If you can, find a partner with whom you can volunteer alongside, so you can encourage each other. God always honours His word; you never know whom you may be able to encourage.

If you would like to learn more about how you can get involved with job fairs, feel free to contact Fronica Yiu at nationalchair@ncfcanada.ca or your local NCF group leader.

A few of the many resources available:

- Daily Strength – Scripture Gift Mission: 1 (705) 325-1002
- Jesus DVD & Magdalena DVD – Tobias Communications Inc.: 1-800-463-4685, or (519) 886-2410
- New Testaments and Gospels of John – Canadian Bible Society
- Stickers for young children who may be accompanying their parent(s)



Nurses Christian Fellowship Canada

NEWSLETTER 2009

Spiritual Caregiving in Plural Contexts

By Sheryl Reimer-Kirkham

Two recent stories that caught media attention highlight some of the complexities of spiritual caregiving in plural healthcare settings typical of Canada and many other nations. The British media was caught up with the "praying nurse" when Caroline Petrie was suspended after she offered to pray with a patient (Nursing Times, 2009). At the same time, the media in British Columbia featured the story of a nurse who cut the beard of a devout elderly Sikh, clearly violating religious proscriptions in his case (Wintonyk, 2008). The nurse did not know that the cutting of hair was prohibited for a baptized Sikh; her intention had been to provide for his personal hygiene. These two incidents draw attention to the religious, spiritual, and cultural pluralisms faced by nurses, as well as the political nature of religion and spirituality today. Global patterns of migration are creating unprecedented diversity in our societies, leading to questions about

how today's predominantly secular health care settings accommodate religious, spiritual, and cultural pluralities. While spiritual caregiving is now given increased attention in nursing education and research, how it is integrated into health care services varies considerably (Cavendish et al., 2007; Pesut et al., 2008).

Petrie has since been reinstated but her situation has sparked a healthcare and religion debate in the United Kingdom about boundaries for what nurses do with their own values and beliefs. While the concern about proselytizing was flagged by the "praying nurse's" intervention of prayer, one might ask whether similar boundary issues are raised when a nurse offers therapeutic touch, crystals, or other spiritual interventions also rooted in particular philosophic and spiritual traditions. When a nurse has minimal knowledge of the many religions represented and held dearly by patients, the second scenario arises. Our current nursing education emphasizes, or more accurately, privileges a generic spirituality over religion and can leave nurses ill-prepared for practice. Nurses are uncertain about how to handle professional boundaries, and how to care in culturally and religiously appropriate ways for their patients.

A group of nurse researchers at Trinity Western University, Langley, B.C. are studying how nurses, other healthcare professionals, and spiritual care providers (chaplains) are approaching spiritual caregiving in plural settings. We are completing one project within inpatient settings and have received

funding (from the Social Sciences and Humanities Research Council of Canada) for a second project in home health settings. We are pursuing questions such as:

- Given the plurality of society—covering the gamut from atheism to personalized New Age spiritualities to "fusers" who mix religious beliefs (Christianity) with other beliefs to strong adherence to creedal religions—how do caregivers negotiate this range of differences?

- What are the roles of health care professionals in relation to religion and spirituality? What are the professional boundaries?

In our research, we heard stories from nurses, some of them Christians, which reflect uncertainty and moral dilemmas about what to do with their own values and beliefs with concerns. How does one initiate conversation about matters pertaining to religion and/or spirituality? Is it ever appropriate to share one's beliefs with a patient? How does one care spiritually for a patient who has beliefs that differ significantly from one's own beliefs?

Although many nurses in our study told us that they did not think they provided "spiritual care" per se, they nonetheless exhibited a range of ways of tending to the spirit. This typically included respectful acknowledgement of the patient and eliciting from patients (and/or family) what meaning they were making of their illness experience (for example, how they were coping with it and what was important to them). Open-ended questions such as, "What sources of support assist you with this



health challenge?" or "Do you have a faith or other social community that is supporting you?" can create a safe space for the patient and allow the nurse to assess the patient. Henri Nouwen (2006) writes about having a hospitable spirit for all those we encounter and suggests that listening is a form of "spiritual hospitality". Nurses have many opportunities to offer this form of hospitality to patients and families.

A factor in how nurses and other caregivers in our study were able to connect with patients had to do with self-awareness, especially about how one's own values and beliefs influenced approaches to spiritual caregiving. Some nurses perceived spirituality as a very personal matter, and thus were more likely to use very open-ended approaches. One hospice nurse who was very private about her own beliefs, for example, would sit with the patient and say, "Shall we sit quietly for a while?" Another nurse of Sikh background was less apt to make a referral to a chaplain because in her religion it is more important that patients be able to say their prayers and follow dietary rules and other guidelines (such as the five Ks of the Sikh religion).

Our research has shown many effective and profound ways in which healthcare providers connect with patients across differing values and beliefs. One nurse, a Christian, explained that spirituality could become a bond with patients, even when they had very different beliefs. She gave this example of visiting a Sikh woman in her home:

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