



What Happens

When: prayer is the Best Medicine?

by Marcey

Contents:

Desperate for Inspiration: Reflections of a Recent Nursing Graduate.....2

My Passion for NCF is Passion for Jesus Christ.....4



Recently I was blessed to be able to spend three months nursing at an HIV and AIDS clinic in Jos, Nigeria. While working alongside the many people at the Faith Alive Foundation, God taught me many lessons about who He is, and how that relates to me and my profession.

I want to share with you one of the many lessons I learnt while I was away. One of the first weeks I was in Jos I accompanied a couple of the community health workers on a home visit. After driving a very long, beautiful and bumpy ride we arrived at our destination—at least that's what I thought. We continued to follow the health workers on a fairly long hike up towards the family that we were going to visit and their home. The initial thing that struck me was how far this family was from accessible health care. Without the community health care workers the next closest access to

health care was a half hour drive away. This is an eternity for someone who is ill and doesn't have the resources to ready transportation.

What happened next is a lesson that will stick with me for the rest of my life. When we got to the home we were introduced to all of the family members; most importantly, to the little baby that we had come to visit. The baby was the sickest child that I have ever seen in my entire life. She and her twin were born a couple of weeks earlier. One was doing well but the other was very sick.

As an emergency nurse it is in my nature to want to fix things. I instantly wondered what would happen at home if someone brought this baby to me at triage. I would ask questions as I walked them and their parents to a room while instantaneously we would be surrounded by doctors, nurses, lab staff, etc. I looked around and discovered my absolute limitations. I didn't have any of the supplies or people that I would normally rely on. I felt completely incapacitated with my inability to help this little baby.

Through the silence of my broken heart the community workers, after assessing the baby and talking to the parents about what to do next, said that we should pray. Whenever they go on home visits they pray for the people that they meet. It was at that point that we joined hands and cried out to God for the healing of this precious little baby. I left downcast at my absolute

inability to change this situation and begged for God to intervene. On the trek back down the health workers shared with me the challenges they face on a daily basis. I was moved to hear it wasn't uncommon for them to give from their own personal finances in situations like this to help people in similar situations.

Two days later I saw Ashom, one of the community health care workers who was with us, and asked him how the little baby was doing. He said that the child had been brought to the clinic earlier that day and was referred to the teaching hospital for further care. This in itself was an absolute miracle.

I love the science of nursing and being able to intervene in difficult situations. However, I now realize the limitations we have as nurses are not too great for God or prayer. God taught me was that he is bigger than science and medicine and that prayer truly has a place in the scientific, resource-filled profession that I have grown to rely on.



What's your story?

Hear stories told by other nurses at:
www.ncfcanada.ca

This newsletter was brought to you by Paperland Canada Inc.

Contact Us

By Email:
Judith Fanaken -
nationalchair@ncfcanada.ca

Designed by Wendy Voss
wendy.voss@gmail.com



Desperate for Inspiration

Reflections of a Recent Nursing Graduate.

by Catherine Lang

One of my greatest fears is that my life will be boring. As I entered into nursing school, I quickly realized that there was enough work and virtually unlimited learning options in the field of nursing for me to keep me on my toes forever, which is perhaps one of the reasons why I persevered through school. However, one value of nursing in particular posed a special challenge to me: beneficence. In nursing, the challenge is not only to do no harm, but to also be a benefit. As the complexity of the field of healthcare began to unfold before me, I realized that on my own, I have no special gift of insight or creativity and I struggle with apathy when I am tired. I make mistakes often. I want to benefit people, but I do not always know how. In short, I struggle with the ancient problem that “I do not understand what I do. For what I want to do I do not do, but what I hate I do... I have the desire to do what is good, but I cannot carry it out” (Rom 7:15, 18c, NIV).

By the world’s standards, I have everything going for me. I have had countless opportunities, good nutrition, healthy development, broad and quality education in numerous streams, excellent family support and encouragement, and I know how to be diligent to achieve. But, along with all of these factors come lofty expectations of myself and society, and these expectations threaten to steal my joy in living with their weight. I might eventually achieve “expert” (Benner, 1984) status and recognition on my own, but I desire even more than that; I desire inspired practice. I want the best outcomes for my patients, not just positive outcomes. Not only that, I want the best for everyone connected to them. I want my work to be worthwhile, meaningful, and eternally significant. However, I have witnessed too much burnout to pursue this on my own and there are too many factors I cannot control. Nursing has highlighted for me my desperate need for inspiration. That is where faith comes in to play.



My faith forms the basis of my philosophy of inspired nursing.

My understanding of inspired nursing is that I am a channel for God’s power and grace to flow through to bring healing and transformation to His beloved, broken Creation and nursing is a means to draw people into life to the full. Formal nursing theory and nursing associations in the past three decades have attempted to define the ideals of nursing. Yet what they have come up with, for example, the Canadian Nurses Association’s primary nursing value of “safe, compassionate, competent, and ethical care” (2008, p 8), are essentially impossible to achieve and sustain in the overwhelming situation of healthcare and humanity.

An interesting parallel of the situation of society’s expectations of health care providers, largely nurses, is found in the second chapter of the book of Daniel. King Nebuchadnezzar had a dream that greatly troubled him so he asked all the wise, educated leaders of the society to do the impossible. He want-

ed them to not only interpret his dream, but also to tell him what the dream was! The king became enraged and threatened to put all the wise men to death, but Daniel, a young Jewish man of faith, who also had everything going for him that the world would admire, approached the commander who was to put all the wise men to death with “wisdom and tact” (Daniel 2:14d). Daniel was able to gain more time to pray for the answer for the king. Daniel and his close friends then pleaded for mercy from God concerning the impossible task.

Just as the wise, educated people of society in Babylon were demanded to perform impossible tasks, society expects nurses to be ethical and excellent despite the incredible demands on our time and resources, and creates intimidating consequences for failing to follow through on professional responsibilities (Moore, 2006). As part of the up-and-coming generation, I place heavy expectations on myself to not follow the same ineffective patterns of power struggle, busyness, stress, pride, and poor communication I have seen in healthcare.

Not to worry, as Daniel said to King Nebuchadnezzar after God had given Daniel the answer to the King’s impossible request, “no wise man, enchanter, magician or diviner can explain to the king the mystery he has asked about, but there is a God in heaven who reveals mysteries” (Daniel 2:27, emphasis mine). I believe the same God is still living, active, and concerned about His creation today. God, through the Holy Spirit, can direct my practice just as He inspired Daniel and, even more importantly, how He guided His Son Jesus. On my own, effective and significant nursing practice to the level I desire is impossible; however, God is not finite like me, and He knows how to bring good about in any situation. He can bring the transformation and healing I yearn to bring. There is one cru-

[To be continued on Page 3]

cial element to this, found in Psalm 27:33. In the midst of global crisis, economic collapse, climate change, political turmoil, abuse, injustice, and countless other tragedies, the psalmist (David) writes words that resonate deeply with me, "I am still confident of this: I will see the goodness of the Lord in the land of the living". If I do not believe that Christ has truly overcome sin and death, that I will see His goodness while I live and that life to the full is possible, the hope necessary for inspired nursing is lost.

God used a very vivid dream to illustrate to me His wisdom, love, and redemptive power in the midst of a seemingly hopeless situation. I had this dream during my fourth year of nursing school. I was in a compound surrounded by dense, green forest. I knew I was a prisoner during a war and that I had been especially punished and tortured for my faith and my race. My hands were disfigured and many of my fingers were missing fingernails. I had played the violin, but that was no longer possible. The leader of this compound was an important man and he had been especially brutal to me. However, among the prisoners, I had a reputation of being a healer because I would take care of people after they were tortured or if they were sick. I would dress wounds, feed, rehydrate, clean, administer herbs, and provide whatever creative care possible in a confined camp. Often, there was nothing I could do but pray and people would be healed when I prayed for them. I was aware of all these factors, when, all of the sudden, I started hearing rumors that the leader had been gravely wounded and was dying. I saw a group of soldiers coming in force towards me. They quickly ushered me to the leader's quarters. I entered the room and saw doctors working feverishly over this man, but in vain, as the gaping hole in his leg was bleeding at a deadly rate. Someone whispered in my ear, "We heard you can heal. It is his only hope." The doctors gave up on him in front of me, and I was faced with a choice. Would I pray for this man who had caused me so much personal harm? Who had caused countless people harm? Who had the potential to continue hurting others? A moment of indecision occurred as I understood all the factors. The moment passed, I placed my hand on his wound and looked in his eyes and said, "In the name of Jesus, be healed." Everything went white, and I was in the future, aware that he had been completely healed, the camp transformed, and Christ glorified.

This was a dream, but my choice was real. It demonstrated to me how God's love for humanity includes even the despised people and

that the hope of transformation was beginning to sink deep in my heart. It was God's confirmation of His ultimate victory to me. We are not fighting in a losing battle. I recognize that this is impossible to uphold professional and personal standards on my own strength, which is why I am dependent on God to reveal 'the mystery' of how I should act in impossible situations and ethical dilemmas just like He revealed to Daniel. The most important factor surrounding this dream is that I had spent the most time with God during that year, than ever before. Sabbath rest and daily resting in God's presence governs how I react to situations I come across. It enables me to actually believe and enact nursing care that has the capacity to bring transformation. It enables me to stay positive even when gossip is brusque and cynical. So, spending time with God is an essential element of my nursing practice. I cannot help but hope that someday, technical nursing will not be necessary, and instead, people will be healed when I pray for them.

In short, my vision of nursing is that nursing is a tool to express my faith because I have specialized skills and education to minister to people and promote life to the full through Christ in me. Nursing is an opportunity to promote the redemption of illness and meaningful, enjoyable existence. Despite specific skill sets that make it possible for me to be useful in a health care setting, I have also witnessed that "only love changes human behavior" (Colson, 1999, p 29) and only Christ gives us enough love. This is not to say that I think non-Christian nurses are unable to provide quality care, but I do believe that for me, nursing would be too stressful and draining for me to enjoy if I did not have Christ. In light of the hectic pace of nursing, I find rest in the fact that when I listen to God, I do not have to worry about getting everything done, because I have peace that I did the right things. It may sound cliché, but that is because it is worth repeating; God has the best plan for my patients, my family, myself, and the world and He has the power to carry it out, but He waits for me to seek Him, to learn that He is always good, and listen to how He will direct. People of God, "put your hope in the Lord, for with the Lord is unfailing love and with Him is full redemption" (Psalm 130:7).



Catherine Lang completed her BSN at Trinity Western University, Langley, B.C., graduating in 2009. Students write a personal philosophy of nursing paper in their final

term of the program in which they articulate their own view on the integration of their faith and professional practice. This article is an adaptation of that paper. Catherine is currently employed in the Emergency Room at Abbotsford Regional Hospital and is active in her local church. She has a passion for other nursing graduates as they adjust to their roles as nurses, and will be speaking to the 4th year Nursing Class at Trinity Western University about this transition.

References:

- Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice* Addison-Wesley Publishing.
- Canadian Nurses Association (2008). *Code of ethics for registered nurses*. Ottawa: Canadian Nurses Association.
- Colson, C. & Pearcey, N. (1999). *How now shall we live?.* Wheaton: Tyndale House Publishers, Inc.
- Moore, B. (2006). *Daniel: Lives of Integrity, Words of Prophecy. (1st Ed.)* Nashville, TN: Lifeway Church Resources.



Please Pray For...

...the National NCF as they plan for the reorganization.

...the Nurses who are struggling between life & work.

...the nurses and healthcare workers in Haiti; for their safety and health

...NCF: that our presence at job fairs and conferences will be a blessing to the Christian nurses in attendance

...praise God for the student nurses who connected with the NCF booth at Urbana '09; that their hearts would be opened to missions.

*If you are interested in being a part of NCF please contact:
Judith Fanaken -
nationalchair@nfcncanada.ca*

If you are interested in praying for nurses across Canada please go to the NCF website and check Monday Night Prayer.

My Passion for NCF

is Passion for Jesus Christ.

by Romie Horsman



After our church was visited by the ministry “Heaven’s Gate and Hell’s Flame”, my spirit started to yearn for souls to be protected from hell’s flames. I started to pray for a ministry that will bring my desire to fruition. I started a prayer group at home, found a prayer partner at work to pray the same desire with me, and spent many times at the church altar after service asking God for a ministry that will bring people back to Him. I even retreated to Lakeshore Camp in Ontario to prepare myself in prayer.

The Lord answered the cry of my heart. When I returned from my retreat,

a terminally ill patient was healed after praying with me. He accepted Christ before he went home. Another woman who had been comatose for a few days went home walking. No one understands the reasons why. The only thing I know is that God is a mighty healer and Saviour. He can miraculously turn an obnoxious patient to receive Jesus. I also witnessed three Jewish patients accept Christ after the gospel was shared to them with fervent prayer. A resident from British Columbia accepted Christ because he was convinced of his sin by the Holy Spirit and prayed the sinner’s prayer at the end of the tract. I gave him my best Bible, pocket-sized with the golden rim, when he told me he had no Bible. A nurse who previously decided to have an abortion changed her mind and married her boyfriend. The power of the Gospel with intercession changed her life. If I could write more, even this newsletter will not hold all there is to share.

Several decades ago, Nurses Christian Fellowship (NCF) was completely new to me. I understood that the living God was leading me to be involved with the organization. My passion toward NCF grew as God demonstrated the glory of His call. I was introduced to the NCF Coordinator, Anne Hawes (Workman) via a coordinator with the Teacher’s Christian Fellowship (a ministry under Inter-

Varsity Christian Fellowship). The NCF journey has been and continues to be graced with many miraculous events and unexpected favourable changes.

We have been very blessed by churches and hospitals. Our mobile library and book table brought good services to these groups and in return they provided us with financial support as we partnered with them in their Home Mission rally. God calls many individuals to regularly and faithfully support NCF. If you feel God’s nudge, you can contribute to this meaningful ministry too.

He continues to sustain us with His power, love and vision. We have a great committee team spearheaded by Pauline Martin and great, faithful and talented members. I have many dreams and pray that nurses will be connected from coast to coast. Christian nurses gathering to witness for Jesus, appropriating our faith in our nursing roles, encouraging one another, and testifying to this awesome God we serve.

~ ~ ~

Romie Horsman is the former Montreal NCF Chair, a woman of prayer who is passionate for Christ, and a retired RN. She resides in Montreal and is now a Power to Change ministry administrator with the nickname “Gentletouch”. Visit: www.christianwomentoday.com/viewforum

Faith & Nursing Symposium: Saturday June 12th, 2010 9 AM - 4 PM For such a time as this

Keynote Speakers:

Dr. Sonya Grypma , Dr. Sheryl Reimer-Kirkham, Dr. Rick Sawatzky

Venue:

Laurentian Leadership Centre, Ottawa

Registration:

RSVP to Guelda.Redman@twu.ca

Registration deadlines:

Before April 9th early bird rate \$35

Before May 24th, 2010 \$45

Trinity Western University and Nurses Christian Fellowship Canada are trying to bring together nurses from across Canada for a national conversation on how faith and nursing inform each other.

For more information visit: www.ncfcanada.ca

