

Spiritual care is an essential component of an wholistic model of nursing but it has not always been easy for nurses to deliver it as they would like. Last month 50 people gathered for a conference in Leicestershire to share and hear more about a new initiative in UK churches that enables nurses to exercise a leadership role in helping congregations to deliver whole-person health care, community health care with an expressed spiritual dimension.

Parish Nursing is the Christian expression of Faith Community nursing. Parish Nurses work from the basis of “intentional spiritual care” and are registered nurses appointed by faith groups to lead programmes of community-based whole-person health care through a local congregation. This kind of nursing complements current provision, providing evidence-based advice and education for health, signposting to relevant health care providers, developing support groups, advocating for health, and training and coordinating volunteers.

Parish Nursing is founded on a Biblical understanding of whole-person health which includes physical, social, mental and spiritual wellbeing. Parish Nurses always respect those of other faiths and none, and referrals to other denominations or faiths are made on request. Nurses from other faiths may be encouraged to develop something similar, related to their own understanding of health. .

Where did Parish Nursing come from?

It began in 1985 in Chicago, under the direction of a Lutheran Hospital Chaplain, Granger Westberg. He believed that registered nurses, who were trained to coordinate all sorts of care interventions around an individual, a family or a community, might be the key to helping people in congregations and their communities move towards better wholistic health, self care and management of chronic conditions. He appointed one nurse to each of six churches and supported them with in-service training. An introductory course was developed, and there are now 12,000 Parish nurses around the world from all denominations, in Canada, Australia, New Zealand, South Korea and now some African countries, as well as the U.S.A.

Here in the UK, following an initial conference in 2001, a Masters level dissertation¹ was written examining the appropriateness of this model for the UK. Three regional seminars followed, then a contextualised training week for seven nurses in November 2003. Now there are 29 churches of different denominations each with at least one Parish Nurse. Most are offering voluntary hours but nine churches have now found ways to fund the new ministry. Training weeks are held twice a year and there is an annual symposium. A charity has been formed to help develop the work and its website is www.parishnursing.co.uk

What is the extra dimension that Parish Nurses bring?

Delivery of any form of health care depends upon the foundational model of health that it is built upon. A Biblical understanding of wholeness includes the relationship of each individual to God as well as to self and others. Through the life and ministry of Jesus, God’s concern for the integral wellbeing of individuals, families and communities, in all aspects of life is demonstrated. Therefore, from a Christian worldview, whether or not people believe or go to church, the integration of their physical health, mental wellbeing, social interaction, and spiritual life is of great significance. So in addition to the other health interventions, worship, prayer, and the sacraments of the church may have therapeutic value along with intentional care of the Spirit. The relevance of Spiritual care has been demonstrated in the past by many involved in health care. Mary Seacole and Florence Nightingale were inspired by their own faith, and believed that nursing was about more than good physical and mental care. Spiritual care is a recognised component in many health care settings through the work of chaplains. In the care of patients

¹ “Parish Nursing” A thesis submitted for a masters degree in Applied Theology, University of Wales, 2001, Helen Wordsworth

with cancer, spiritual care is written into the care standards, is identified in the Liverpool Care pathway and is an explicit part of palliative care.

But what about Spiritual care in the community? In all communities there are places of faith and people whose work is spiritual and religious care...ministers, priests, vicars. The parish nurse works alongside the faith community with links into the health care system, and so complements the work of health visitors and community nurses by offering intentional spiritual care and promoting health and well-being among those they are asked to serve. Confidentiality and record-keeping are the same as for other nurses, since parish nurses follow the NMC code of practice. But not being part of the state provision, and not having a statutory caseload means that Parish Nurses have time to offer clients...a precious commodity. That time can be used in many different ways depending on the local community need. Priorities for health promotional activities can be assessed in partnership with the local NHS community staff and these can be delivered to the many toddler groups, lunch clubs, and other groups that are related to the local church or meet in church buildings. Parish nurses may assist the community to use church buildings for health support groups or education. As churches are already engaged with some of the "hard to reach" groups like the homeless, asylum seekers, and ethnic groups, the Parish nurse may help some of these people access health services that they would not otherwise approach. Behind the Parish Nurse is a bank of potential congregational volunteers who through training and education can be supported to assist with pastoral visiting and befriending, picking up both spiritual needs and potential health risks as they go. Bereavement care, self-care, and the promotion of healthy lifestyles can all be delivered through a local church by the parish nurse. But the most unique added value element is the actualisation of "intentional care of the spirit" through the use of scripture, prayer, and presence. Parish Nurses have time to build relationships with people that allow for the discernment of spiritual distress and of appropriate responses.

What benefits are there for patients in integrating spiritual and health care?

There is a growing body of knowledge that supports the premise that spiritual care is an essential element in health, where it is seen as that which transcends physical and mental aspects of care: a person's sense of well-being; peace, dignity, identity, relationships with others, and relationships with God...at whatever level that may be. And although faith highlights some of the difficult questions of this life, there is also some evidence that having a faith makes a difference to health and wellbeing in the community. At the Parish Nursing symposium on September 16th, Ann Morisy, a freelance speaker and author referred to the following examples;

Dan Blazer and Erdman Palmore ² are among a number of researchers who have found that a positive experience of ageing is strongly linked with "doing business with God". More recently, David Hay ³ describes the survival value of religious experience when people are at rock-bottom, and the openness to the needs of others that faith may bring.

And there are benefits for the young as well as the old; Leslie Francis and Mandy Robbins ⁴ found that 13 to 15 year olds were more likely to have a sense of purpose if they

- Had a religious affiliation
- Prayed regularly
- Believed in eternal life

This group of teenagers were also more likely to have an active and constructive relationship with the community and the environment, and more likely to have positive views towards ethnic diversity. They concluded "There is a case for the current approaches which view wellbeing in emotional, social and material terms, to expand to also incorporate a spiritual dimension"

² Blazer D. and Palmore E: "Religion and Ageing in a longitudinal panel" The Gerontologist, vol.16 (1) 1976

³ Hay D. "Something There", DLT, London, 2006.

⁴ Francis L.J.,and Robbins M., "Urban hope and spiritual health: the Adolescent voice " Epworth Press, 2006

Important aspects of wellbeing are hope, a sense of belonging, and the encouragement to serve others even when physical capacity is limited; learning how to receive and offer forgiveness; laughter, music, appreciation of the creative arts, care for the environment and concern for those who have less. While these contributions are owned by many people but they are also all Biblical values and expressions of spiritual health.

Respect and choice:

At the outset of any client contact, it will be explained that the parish nurse works from a particular church and not the health service, so that the client can choose whether or not to accept the care that is offered. Wherever a nurse is working from, the client must be given due respect and choice in all matters including spiritual care. As with other interventions, nurses should act only to the level of their competence. Parish Nurses receive education and training from a range of people involved in spiritual care including chaplains and pastoral carers, and have spiritual supervision through the local church, in addition to their professional supervision.

At a Parish Nurse day in Kenya, Thandiwe Dlamini, a Swazi nurse tutor who has introduced Parish Nursing in Southern Africa, summed up the Parish Nursing movement in the following way:

“It challenges nurses to reclaim the spiritual dimension of health care.

“It challenges health care systems to treat the patient/client as a whole.

“It challenges churches to restore the health and healing mission of the gospel, serving others in physical, mental and social ways as well as having concern for their spiritual wellbeing”.

More information about Parish nursing can be found on the website of Parish Nursing Ministries UK ; www.parishnursing.co.uk

This article was submitted by Revd. Helen Wordsworth, R.G.N., R.M., R.H.V.,(tutor) R.N.T., M.Th., who is UK Coordinator for Parish Nursing Ministries UK and a Regional minister for the Central Baptist Association; It was contributed to by Lynda Bickley, M.A., R.N., R.M., R.N.T., D.M.S., Dip Counselling, Cert.Theology, and Debbie Hodge, M.A., R.N., R.N.T.,B.Sc., P.G.D.E., Cert. Theology, both of whom also held posts in Nurse Education. Lynda is a Parish Nurse at the Regeneration Centre and Coordinator for Parish Nursing Ministries UK in the West Midlands. Revd. Debbie Hodge is Free Church Secretary for Health Care Chaplaincy at Churches Together in England.

The Council of Reference for Parish Nursing includes Dr Malcolm Rigler whose vision prompted the first U.K. conference on the subject in 2001; Revd. Dame Sarah Mullally, now a priest in the Church of England; and Church leaders from all the main Christian denominations in the U.K.