Parish Nursing:
Clarifying the Relationships among Faith, Health, and Values

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A CONCERN FOR HEALTH HAS LONG BEEN PART OF THE TRADITION OF CONGREGATIONAL life. This tradition emphasizes striving for the “fullness” of life. Martin Marty presents true fullness as pertaining to God alone; to Christ as embodiment of God (Colossians 1:19); in one case—perhaps—to the church as the body of Christ (Ephesians 1:22-23) and derivatively to all that the earth contains (Psalm 24:1). Simultaneously, believers may move toward being “filled with all the fullness of Christ” (Ephesians 3:19) and measured by “the stature of the fullness of Christ” (Ephesians 4:13).1


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Parish nursing offers congregations the opportunity to revitalize their ministry of health. Implemented over time, parish nursing will provide people a better and more sacred way of managing their health.
This traditional Christian view of health is challenged by society and most particularly by the health care culture. There, health is not understood as striving for the fullness of life or from a whole person perspective, but is seen as something only physical, or minimally as the absence of disease. Christian congregations over time have often abandoned their traditional understanding of health and, through default, endorsed the secular perspective.

A survey completed by the National Council of Churches reported that “a majority of local congregations in the United States are directly involved in addressing health-care needs in their communities.” It continued that “more than half of all congregations have some activity in nutrition, substance abuse, mental health and prenatal care.” Furthermore, the report noted that “churches do not replace usual sources of health care, but rather they extend, assist and even enhance other sources.” Some of the more significant aspects of that enhancement are: (1) The congregation’s mission, no matter what denomination, is health and salvation understood from a whole person perspective. (2) The congregation is the only agency in the community that fosters development of values that people live by throughout the life span from birth until death. Congregational efforts to clarify values related to health could, over the long term, impact how people make decisions regarding their use of health resources. (3) Involvement in religion may constrain individual high-risk behavior, such as smoking, drinking, and illicit sexual activity. This also, over the long term, can result in less use of health care resources. (4) Participation in religious groups may be a source of social support. This is a significant consideration when addressing change in health habits or the isolation of loneliness. Today, modification in health behavior is primarily understood as a medical issue. Actually, it is much more a spiritual issue, with implications for meaning and purpose in life. Elderly, in particular, living alone and managing chronic illness, can benefit by the fellowship and social support of the congregation. (5) Through religious involvement there is access to a unique system of symbols and rituals that allows people to make sense of and cope with their experiences. (6) Participation in a religion can facilitate acceptance of the fact that suffering exists even in a God-ruled world. This understanding can be helpful with life’s problems. While research related to religion and health identifies that extrinsic measures of religiosity, such as denominational affiliation, are generally inconsistent predictors of health, people with intrinsic religiosity, such as a strong attachment to religious beliefs, prescriptions, and religious life in general, report being in better health. The congregation can be instrumental in assisting people to develop their personal definition of health from a whole-person perspective, forming their values related to health, and encouraging living out these health values in

a society that is often presenting contrary messages. This has long-range implications for both personal use of health care resources and corporate availability of health care resources. Congregations must retrieve their mission in health and proactively claim their role in the transformation of health care delivery. One way in which congregations are choosing to revitalize their mission in health is through the development of a health ministry or, more specifically, through the integration of a parish nurse into the ministerial staff of the congregation.

I. REVITALIZING THE CONGREGATION’S HEALTH MINISTRY THROUGH PARISH NURSING

Health ministry is “the intentional reaching out to others by a community of faith to promote whole person health, which is seen as an integration of body, mind and spirit.” Health ministry emanates from the call to wholeness and service as reflected in Christian Scriptures. The foundations of health ministry are hope, mutuality, faith, grace, imagination, desire, and patience. The framework for health ministry is based on the concepts of health promotion, disease prevention, and response. Health ministry recognizes the importance of the stewardship of health both from an individual and corporate perspective.

Parish nursing is one expression of health ministry. The idea of a nurse being integrated into the life of the congregation came from the early work of Granger Westberg with Wholistic Health Centers. Parish nursing is a health promotion, disease prevention activity based on the care of the whole person and encompassing seven functions: (1) integrator of faith and health; (2) health educator; (3) personal health counselor; (4) referral agent; (5) trainer of volunteers; (6) developer of support groups; and (7) health advocate. The role of parish nurse does not embrace the medical model of care or invasive practices such as blood drawing, medical treatments, or maintenance of intravenous products. It is a professional model of health ministry that uses a registered professional nurse. The focus of this ministry and practice is the faith community. Parish nursing has grown from six nurses in six congregations in the Chicago area in 1985 to over 3,000 parish nurses across the United States. Internationally, parish nursing is integrated into congregations.

6Granger Westberg, Theological Roots of Wholistic Care (Hinsdale, IL: Wholistic Health Centers, 1979) 73-90.
gations in Canada, Australia, and Korea. The American Nurses Association in 1997
designated parish nursing as a specialty nursing practice and in 1998 published
Scope and Standards of Parish Nursing Practice.

Parish nurses develop long-term relationships with people in the congrega-
tions they serve. They come to know these people in their episodes of wellness as
well as their episodes of illness. Providing education and personal health counsel-
ing that is directed to the body, mind, and spirit assists individuals in coming to a
new understanding of themselves and the stewardship of their personal health re-
sources. When they understand that the underlying causes of dis-ease can be at-
tributed not only to genetics but also to how one addresses grief, guilt, stress, life
changes, and outlook on life, they see the importance of addressing these issues in a
proactive manner. The health care system only manages the disease entities that
develop as a result of these factors. A parish nurse ministry can begin to address the
grief, guilt, management of stress, coping, and outlook on life in very diverse and
consistent ways with individuals and groups in the congregation. The parish
nurse’s accessibility and lack of fee for service makes possible early intervention.

The parish nurse ministry provides an opportunity for congregations to be
linked in new ways to agencies in their communities. Through these new relation-
ships resources can be shared and made accessible to people where they naturally
convene in the community. The parish nurse, through assessing the resources and
the needs of the congregation, identifies those that may benefit from a support
group. Sometimes the parish nurse will develop a partnership with an agency in the
community to provide the facilitation of the support group. At other times the par-
ish nurse may facilitate the group and invite experts from the health care commu-
nity periodically to join the group for educational purposes.

The parish nurse is the multiplier of ministers. In other words the parish
nurse is not the health minister. The intention is that as the parish nurse gets to
know people in the congregation, opportunities will arise to identify gifts that oth-
ers have to share with the congregation. At the same time, the nurse may identify
those who are in special need. Through matching needs with resources the parish
nurse begins to engage members of the congregation in forms of service that have
never been available in the past. Service is at the basis of a spiritual life. As people
are called to service in their congregation in new ways, there cannot help but be a
new spirit with a renewing energy. As new volunteer opportunities are identified,
the parish nurse insures that those engaged in these services have been trained to
do the work.

The parish nurse ministry is intended to be a catalyst for change. This minis-
try challenges people to re-envision the role of the nurse, the role of the congrega-
tion, and the understanding of health. The congregation can be a significant agent
to assist parishioners to become more responsible for their personal health re-
sources. The parish nurse ministry is one very visible way of making a commitment
to caring for the health and well-being of the congregation. A parish nurse ministry
re-engages the congregation with primary health care—care provided at the first point of contact, which has more to do with community than technology. Being involved in primary health care is not something new for congregations.Congregations historically have provided access to care for those who are suffering. Today the needs of congregation members are different, as the causes of much dis-ease go untreated at their source. The congregation must re-envision for itself how it will live out its ministry of health through addressing the lifestyle of its members.

The parish nurse ministry is one way of visualizing the delivery of health to a community. It begins to challenge the current structures and systems for accessing health resources. By inviting a parish nurse to be part of the ministerial staff, the congregation provides an on-site resource. Any member that is confused or unsure how to access the health system can be assisted and advocated for by the parish nurse. This is most helpful to the elderly in the congregation, who are often overwhelmed by the information given to them. One service that is often diminished in the current health care delivery system is that of listening—listening not only to the words that are said but also to those which are not said. The parish nurse ministry is a ministry of presence. The parish nurse listens to all that is said in word, actions, and silence.

II. THE PARISH NURSE’S ROLE IN HEALTH VALUES CLARIFICATION

There is no one definition of health. For some, health is “being in harmony with self, others, the environment and God.” Others emphasize a “state of wholeness created by spiritual conversion.” Still other understandings see health as a means to an end, not an end in itself. Some secular understandings of health embrace health as a right and a worldwide goal. Some people may understand health from a functional perspective—if they can perform their job, they are healthy; others may believe that if they are not sick, they are healthy.

Society’s language perpetuates this confusion. For example, even though people do not go to a hospital unless they are very ill, the hospital is still called a health care institution. It might better be termed an acute care agency. Financial plans, developed to cover sickness care, are called “health care plans.” This gives those investing in these plans the illusion that they are planning for health, when in reality they are providing for access to care when they are ill. The congregation through their parish nurse has an opportunity to help those who are part of the faith com-

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community to a clearer understanding of health, a necessary step toward becoming better stewards of personal health resources. Health is not something secondary to the mission of the congregation, but something integral to it. For if the congregation is to provide service, individual members must be able to give of themselves. People are more likely to be in a position of providing service to others if they are healthy. But what does being healthy mean to each person? What value does each person place on health? How do these values influence the choices that individuals make related to eating, exercise, relationships, and service? What kind of support does each person need to live out values congruent with their personal definition of health? How can the congregation respond and support individuals in this process of self-transformation?

The previous questions will best be addressed in community with others who are interested in this personal spiritual journey. It cannot be done in isolation. It is challenging work. Individuals need to talk this out and have their own thinking sparked by the words of another. The pastor and parish nurse can be a very effective team in facilitating this kind of study in the congregation. They function together collegially to raise up the health and healing mission of the congregation.

The environment of the congregation contributes to this process, because there is a sacredness about it. The work of clarifying values requires a knowledgeable facilitator that can create a level of trust among the participants. This kind of interpersonal work is best done in smaller groups of nine to twelve people. The use of a series model, with time between group sessions, allows participants to reflect personally on the work at hand.16

The parish nurse is well-versed in whole person health and thus an excellent choice for such a facilitating role. It is most helpful if the parish nurse has prior experience with identifying his or her own health values clarification. This gives a frame of reference for the kind of interpersonal work that needs to be done. Health values clarification will assist people not only to make better choices for their health but also to be in a better position to make long-term health decisions such as those needed in a living will, advanced directives, or durable power of attorney that deals with end-of-life issues.

A ministry of health may not bring immediate results or make a significant difference initially. The impact will occur over time. If this ministry is integrated effectively into the long-standing traditions of the congregation, our children and grandchildren will have learned a better and more sacred way of managing their health. ☺

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16One tool for health values clarification is a four-part course: L. Holst and P. A. Solari-Twadell, Living Life Abundantly: A Closer Look at Health, Values and Behavior (Oak Brook, IL: Advocate Health Care, 1997).