



# IN TOUCH

Newsletter of the Lutheran Nurses Association of Australia

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## Demonic Possession and Mental Health

At our May meeting, Dr John Kleinig spoke to us about demonic possession and mental health in biblical times and today. Dr Kleinig is an emeritus lecturer at Australian Lutheran College. He began by quoting Luke 7:21: *In that hour [Jesus] healed many people of diseases and plagues, afflictions and evil spirits* -- three kinds of healing, including demonic sickness.

Luke was a doctor, and demon possession or demonisation is mentioned frequently in the New Testament. In Matthew 4:24 five disorders are mentioned: various kinds of sickness, chronic pain, affliction by demons, lunatics (possibly epileptics) and paralysis. Dr Kleinig prefers to speak of spiritual oppression and deliverance, rather than demon possession and exorcism.

Modern medicine understands sickness as physical or mental or both. Spiritual phenomena are given a psychological diagnosis. Alternative medicine is now challenging the failure to identify and treat mysterious disorders.

To put 'spiritual' into mental health doesn't work.

The **ancient** understanding of sickness and health classified personal symptoms by their effect on the whole person. Spiritual factors and remedies were included in the treatment, but it had a limited understanding of physical causation. Today's animists and some Pentecostals rely exclusively on spiritual diagnosis and treatment.

A better approach, Dr Kleinig said, is an integrated treatment of the physical, psychological or spiritual causes of the sickness and the effect of each on the whole person.

Dr Kleinig briefly described four cases in which he had been involved with spiritual deliverance: a boy with a haunted bedroom, suffering nightmares; a pastor addicted to pornography; a woman who was a victim of ritual

sexual abuse as a child; and a woman involved with witchcraft.

These are the sort of cases pastors face today. There has been a resurgence of the occult in



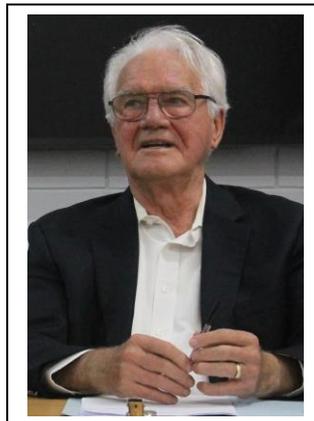
Australia over the last 60 years, which have seen the collapse of the three defensive walls against evil spirits: the cultural order (respect for family and marriage); the moral order (wide-spread sexual revolution and drug taking, to name two); and the spiritual order (turning from Christianity to other religions). Spiritual and moral impurity by breaking the Ten Commandments leaves people vulnerable to demonic attack.

Many follow a subjective spirituality. They look for higher levels of mindfulness in religions such as Buddhism and Hinduism, or empowerment through witchcraft. There is a fascination with the occult. People often confuse the psychological with the spiritual and see demonic attack as a form of mental illness.

At the same time, there are those in the church who are embarrassed about speaking of the devil and demons, and find it a challenge to deal with spiritual things spiritually.

In 1 John 3:8, the apostle spells out that *'the reason the Son of God appeared was to destroy (undo/loose) the works of the devil'*. The Gospels include a number of accounts of Jesus 'casting out' evil or unclean spirits by an authoritative command.

St Matthew records: *When evening came, many who were demonised were brought to >>*



## Awards presented

This year's Lutheran Nurse of the Year award certificates and cheques have now been presented to the two recipients. Pastor John Strelan made the presentation to Gillian Mibus at *St Stephen's*



in central Adelaide on 29 May (pictured left) – the earliest opportunity due to her work commitments.

Fred Miegel (pictured right) received his on 19 June from Alice Springs congregation chairman, Bruce Lindner. Contracting COVID kept both Fred and his wife, Karen, in isolation for several weeks, and then on the Sunday when the award was originally scheduled to be presented, Fred received an emergency call out from the hospital before the end of the service.

### >> **Demonic Possession and Mental Health**

*[Jesus], and he drove out the spirits with a word and healed all the sick* (8:16).

Other examples Dr Kleinig gave were: Matthew 8:16 and 8:32; 10:1; 15:22; 17:15; Mark 1:22; 3:11, 14,15; 4:35; 5:8, 7:29 and 9:25, 29; Luke 8:28; 13:12.

Verses such as these show how Jesus used his authority to release people from demonic power. He also authorised the apostles and other disciples to release people from demonic powers (Matthew 10:1; Luke 10:19). After Jesus' ascension the Apostles continued this ministry (Acts 5:16, 8:4-8; 19:11-20). Prayer and fasting were part of this ministry.

Dr Kleinig's message to Christian nurses today who may face situations of spiritual oppression among other physical, mental or

emotional issues their clients may be dealing with is to remember that the Spirit of Christ is with us and in us, as St John wrote in his first letter (4:4). He urged those present to pray for themselves and for any patient who may be spiritually oppressed, and to rely on the guidance direction and protection of God's word (1 John 2:14 and Ephesians 6:17).

For further information, see *Spiritual warfare and the ministry of deliverance*, Doctrinal Statements and Theological Opinions, Vol. 3, LCA Commission of Theology and Inter-church Relations, 2014.

*Notes provided by Rose Howard*

If you wish to receive the full notes of Dr Kleinig's presentation, please contact [rosekazz@gmail.com](mailto:rosekazz@gmail.com) and Rose will forward them to you.

## What is monkeypox (MPXV)?

Monkeypox is a rare viral infection usually associated with travel to Central and West Africa. It is usually spread by close contact with someone with monkeypox (by inhaling infected droplets), or direct contact with infected bodily fluids, lesions or scabs on the skin, or contaminated objects, such as bedding or clothes.

Most people recover within a few weeks. Since May, there has been a global increase in monkeypox cases reported from countries where the disease is not usually seen. Symptoms usually begin seven to 14 days after exposure. This can be as short as five days or as long as 21.

Monkeypox begins with fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion. Within one to three days after the appearance of fever (sometimes longer), the patient develops a rash, often beginning as sores in the mouth and on the face then spreading to other parts of the body. Lesions start as a flat red rash that develops into pustules which crust and fall off.



## ‘Spray-on skin’ pioneer

A British-born Australian plastic surgeon has been a global pioneer in the field of ‘spray-on skin’ technology for treating burns victims. She is Professor Fiona Wood, of Perth. Fiona was born and raised in the mining village of Hemsworth, in England.

She began her medical career at St Thomas’ Hospital Medical School in London, where she was drawn to plastic surgery, and recognised that she wanted to be able to combine research, innovation and surgery. She worked under the supervision of the plastic surgical team consultant, Mr Brian Mayou, who would become one of the influential people in her life.

She graduated from St Thomas’ Hospital Medical School in 1981. She earned her primary fellowship (1983) and fellowship (1985) from the Royal College of Surgeons (RCS).

In 1987 she moved to Perth after marrying surgeon, Dr Tony Keirath, of Western Australia. Her dedication to improving outcomes for burns patients and expanding the knowledge of wound healing began in 1991, when she became WA’s first female plastic surgeon, after earning her fellowship from the Royal Australasian College of Surgeons (RACS) in plastic and reconstructive surgery (1991). In 1992 she became head of the burn unit at Royal Perth Hospital, which moved its facilities to Fiona Stanley Hospital in 2014. In this position, Professor Wood has led the Burns Service of Western Australia to be recognised internationally as a leader in burns care.

She also served as a clinical professor at the School of Paediatrics and Child Health at the University of WA and directed the McComb Research Foundation (now the Fiona Wood Foundation), which she founded in 1999.

In October 2002, she was propelled into the media spotlight when the largest proportion of survivors from the 2002 Bali bombings arrived at Royal Perth Hospital. She led a team working to save 28 patients who had between two and 92 per cent body burns, deadly infections and delayed shock.

Professor Wood has become known around the world for her invention of spray-on skin for burn patients, a treatment that is being continually developed. Where previous techniques of skin culturing required 21 days to produce enough cells to cover major burns, Professor Wood has reduced the period to five days. Through research, she found that scarring is greatly reduced if replacement skin could be provided within 10 days. Her aim is to develop ‘scarless woundless healing’.

Professor Wood started a company now called *Avita Medical* to commercialise the procedure. Her business came about after a schoolteacher arrived at Royal Perth Hospital in 1992 with petrol burns to 90 per cent of his body. She turned to the emerging US technology of cultured skin to save his life, working in a laboratory along with scientist Marie Stoner. The two women began to explore tissue engineering. They moved from growing skin sheets to spraying skin cells; earning a worldwide reputation as pioneers in this field. The company started operating in 1993 and now cultures small biopsies into bigger volumes of skin cell suspensions in as few as five days.

The service is used by doctors in Auckland, Sydney and Birmingham. In many cases, cells can be delivered by plane and ready for use the next day.

Professor Wood was voted most-trusted Australian in a *Reader’s Digest* poll for six successive years from 2005. That year, she won the WA Citizen of the Year award for her contribution to Medicine in the field of burns research. In 2015 she was elected a Fellow of the Australian Academy of Health and Medical Sciences. She was named a Member of the Order of Australia in 2003.

## Moments like these ... 😊 😐 😞

*IN TOUCH* readers share humorous, momentous, or moving experiences

I spent some years doing a lot of operating theatre work in a country hospital. In those days we would have one or two procedures in the morning and then finish the day working on the wards.

One day after completing the theatre list, I was on my way back to the ward when I stopped off to comb my hair. This was in a room where we kept our handbags. This was also the doctors' change room. It was a long room with a toilet/shower up one end and lockers at the other end.

I rushed in and combed my hair, tidied my

uniform, and was about to head off when I became aware of a presence in the room: a doctor sitting on the toilet in green theatre garb! I wanted to fall through the floor! I ran out and tried to hide as far away as I could!

The doctor, who was always known for his sense of humour, sought me out, and said: 'Does this mean we have to get married?'

I will never be able to express the embarrassment I felt that day!

-- Jenny Wood, Nuriootpa, SA



## Newsbrief

According to figures released in May by chartered accountants StewartBrown, the number of residential aged care homes in country South Australia running at a loss jumped from 37 per cent to 65 per cent in the year to December 2021. The number of homes in the metropolitan area running at a loss went from 41 per cent to 46 per cent.

Experts at the University of Sydney's Institute for Infectious Diseases are calling for a national centre for disease control to ensure Australia is better prepared to respond to future disease outbreaks. At present individual states and territories are responsible for public health protection and providing the infrastructure for surveillance and response. The COVID-19 pandemic has shown that Australia lacks a national mechanism to efficiently collate disease surveillance data, co-ordinate responses and conduct rapid applied research to inform policy and guide decision making.

A University of SA study has discovered a direct causal link between Vitamin D deficiency and dementia. The genetic study, supported by the National Health and Medical Research Council, analysed data from 294 514 participants from the UK biobank. More than 487 000 Australians live with dementia, and it is the country's second leading cause of death. The study found that up to 17 per cent of the

UK cases examined might have been avoided by boosting Vitamin D levels. Sources of Vitamin D include sunshine, fatty fish, egg yolks, cheese, beef liver and mushrooms.

The average person blinks around 14,000 times per day. On average, most people blink around 15 to 20 times each minute. That means, while you're awake, you probably blink 900–1,200 times an hour or 14,400–19,200 times a day. Blinking is an important reflex that helps to keep our eyes healthy and lubricated. When we blink, our eyelids spread tears over the surface of our eyes, which helps to clean and protect them. So the next time you find yourself getting lost in a good book or movie, make sure to take a break and blink a few times!

The name of the LCA Parish Nurse Trust Fund has been changed to LCA Pastoral Care Nurse Foundation, and guidelines for its operation have been drawn up. The foundation receives Memorial Gifts, legacies and other donations which remain in a permanent fund in the Lutheran Laypeople's League. This fund generates interest to support the LCA's Pastoral Care Nurse ministry. When interest is allocated each May, up to half is transferred to another Pastoral Care Nurse fund from which grants are made to support promotion of the ministry and education for potential Pastoral Care Nurses. All Memorials are listed in *INTOUCH*.

# Recognition for Florence

Florence Nightingale is widely commemorated around the world. She is remembered in the Church of England with a commemoration on 13 August. Several other churches in the worldwide Anglican Communion commemorate her with a feast day on their liturgical calendars. The Evangelical Lutheran Church in America commemorates her life on 13 August.

Washington National Cathedral celebrates her accomplishments with a double-lancet stained glass window featuring six scenes from her life. It was designed by artist Joseph Reynolds and installed in 1983.

In 2002 she was ranked number 52 in the BBC list of the 100 Greatest Britons, following a UK-wide vote.

In 2006, the Japanese public ranked her 17 in The Top 100 Historical Persons in Japan.

The US Navy ship the *USS Florence Nightingale* (AP-70) was commissioned in 1942.

Beginning in 1968, the US Air Force operated a fleet of 20 C-9A 'Nightingale' aeromedical evacuation aircraft, based on the McDonnell Douglas DC-9. The last of these planes was retired from service in 2005.



A Dutch KLM McDonnell-Douglas MD-11 airliner (registration PH-KCD) was named in her honour.

In 1981, asteroid 3122 was named Florence.

She has appeared on international postage stamps, including, the UK, Alderney, Australia, Belgium, Dominica, Hungary (showing the Florence Nightingale medal awarded by the International Red Cross), and Germany.



In Britain, the NHS Nightingale hospitals are named after her.

A Nightingale statue is located in the Hart Garden at the southeast corner of White Hall in London. It was dedicated in November, 2001 during the renovation of the garden in celebration of the College of Nursing achievements. Artist Larry Griffis of East Greenwich created the bronze sculpture. Florence is credited with establishing the first nursing school.



The Florence Nightingale Museum is located in the grounds of St Thomas' Hospital at 2 Lambeth Palace Road, London.

The statue of Florence Nightingale, installed in Waterloo Place, London 1915 as one of a cluster of statues, is the first Public Statue in London of a Woman other than Queen Victoria.



# **Notes and News**

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## **Combatting elder abuse**

World Elder Abuse Awareness Day (WEAAD) is observed each year on 15 June, to highlight a problem that is more widespread than most people realise. Elder abuse is any act which causes harm to an older person and is carried out by someone they know and trust, such as a family member or friend. The abuse may be physical, social, financial, psychological or sexual, and can include mistreatment and neglect.

WEAAD was officially recognised by the United Nations General Assembly in 2011, following a request from the International Network for the Prevention of Elder Abuse, which first established the observance in 2006.

According to a study by the Australian Institute of Family Studies released earlier this year, one in every six Australians over the age of 65 -- around 600 000 -- experience abuse during a 12-month period. Only a third of the victims seek help, leaving around 400 000 suffering in silence each year.

The study found the most common form of abuse was psychological (11.7 per cent or 471 300 people), followed by neglect (2.9 per cent or 115 500 people), financial abuse (2.1 per cent or 83 800 people) and physical abuse (1.8 per cent or 71 900 people). While sexual abuse was the least prevalent at 1 per cent, it still accounted for 39 500 cases every year.

The findings were based on a survey of 7000 people aged 65 or older living in the community. The study did not cover people who live in aged-care facilities, or who could not participate in the survey due to their cognitive decline.

The Royal Commission into Aged Care Quality and Safety has estimated that the prevalence of physical abuse, emotional abuse and neglect in aged-care settings is 39.2 per cent, and the fact that people with cognitive



decline were not included gives rise to the likelihood that the 600 000 annual figure is much lower than the reality.

Family dynamics can make abuse difficult to address. For example, when the abuse is perpetrated by an adult child, the older person may be reluctant to expose the abuse to avoid losing contact with other family members such as grandchildren.

The research showed that when victims do seek help or advice from a third party, family, friends and general practitioners or nurses are the most common sources of support.

This is an area where Pastoral Care Nurses (PCN) can play an important role. While they minister to people 'from the cradle to the grave', most PCNs report that a significant part of their ministry is directed to older people in the congregation and community. Their home visiting enables them to pick up on any family dynamics that may suggest that elder abuse could be occurring. Because of the trust that PCNs build up with parishioners, any member, experiencing abuse may feel comfortable about sharing their difficulties with the nurse.

The annual survey of more than 3000 Australians again found that doctors were the most trusted of any profession, after the COVID-19 pandemic put health in the spotlight. Nurses and paramedics rounded out the top three of the Trusted Professions poll, while scientists were ranked fifth overall.

*LCA Pastoral Care Nurse*  
**Notes and News**

**Newcastle, NSW**



At Newcastle, NSW, Maureen MacPherson is now in charge of pastoral care at the Life-way congregation. She shared an article from the May issue of *INTOUCH* with members of her visiting team, to help equip them for their role. Over the past two years, COVID restrictions have made it difficult for them to visit members living in care facilities.

Before moving to Newcastle, Maureen was the Pastoral Care Nurse at Epping in suburban Sydney. In 1997, she completed a five-day *Introduction to Parish Nursing* course at what was then Luther Seminary.

**LPNI study tours**

Several places have become available for this year's Lutheran Parish Nurses International study tour to Alice Springs on 22-28 September.

The program includes a day-long seminar, a day trip to the historic Hermannsburg mission site, visits to Yirara Lutheran college for Aboriginal students from remote areas, the Living Waters Lutheran primary school, the

Royal Flying Doctor base, as well as various tourist sites.

Sunday worship will be bi-lingual.



For further details or a registration form, contact [robert.wiebusch@lca.org.au](mailto:robert.wiebusch@lca.org.au)



Plans are taking shape for the 2023 study tour to Romania on 7-15 September. The tour will begin in Bucharest, with sightseeing, worship and a seminar to learn about the Lutheran ministry in Romania's capital, and possibly engage in a service project.

The tour group will then travel by train to Brasov, to learn about the history of Lutheranism in Transylvania. There will a cable car ride to the top of Tampa Mountain, a visit to Dracula's Castle, and to the large Gothic *Marienkirche* that was renamed the Black Church, following a devastating fire.

Tourists will then return to Bucharest by

^ Bucharest train, for a farewell evening before departing for home. Registration forms are expected to be available shortly.



† LCA PARISH NURSE TRUST FUND MEMORIALS  
Rev Noel Schmocker Died 30/05/2022; Clarence Berthold Schutz 21/11/1924-02/04/2022

## LNAA Program

*Venue for regular meetings:* LCA/SA District Office, 137 Archer Street, North Adelaide  
**25 July** 7.30pm **Euthanasia and Physician-Assisted Suicide** – Chelsea Pietsch

*Annual General Meeting*

**26 Sep** 7.30 pm **'House Model' Aged Care at LHI** – Megan Oudshoorn RN

**28 Nov** 7.30pm **Pharmacy Today**

**06 Feb 2023** 7.30pm **Vascular Research**

Visit our Facebook page: @lutherannursesassociationaustralia

## LNAA office bearers

**President:** Mrs Megan Materne, 48 Saltram Pde, Oakden, SA 5086 ☎ 04 0391 9061

**Vice-President:** Mrs Dianne Proeve, 20 Annesley Ave, Trinity Gardens SA 5068 ☎ 04 7550 9048

**Secretary:** Mrs Rose Howard, 2 Glen Eyre Crt, Aberfoyle Park SA 5159 ☎ 04 1046 3649

**Treasurer:** Mrs Vicki Minge, 16 Douglas St, Lockleys, SA 5032 ☎ 08 8352 8819

**Extra Members:** Mrs Sylvia Hutt, 6 Brook Dr, Aberfoyle Park, SA 5159 ☎ 04 1785 4873

Mrs Lynette Pech, 51 Alabama Ave, Prospect, SA 5082 ☎ 04 1889 2131

**Spiritual Counsellor:** Rev Chris Gallasch, 1215 Grand Junction Rd, Hope Valley, SA 5090;  
☎ 08 8265 8001

## *IN TOUCH*

*IN TOUCH* is published six times a year. **Editor:** The Rev Robert Wiebusch, 200/1215 Grand Junction Rd, Hope Valley SA 5090 ☎ 08 8336 3936. Email: [robert.wiebusch@lca.org.au](mailto:robert.wiebusch@lca.org.au) Deadline for next issue: **15 October 2021.**

## Membership renewal for the 2021-22 financial year is now overdue

Kindly return the form below, together with your cheque, to the LNAA Treasurer, Mrs Vicki Minge. Funds can be transferred electronically to: BSB: **704942** Account name: **Lutheran Nurses Association of Australia.** Account number: **155449** If you transfer funds electronically, please advise the Treasurer. Your name or postcode should be included when notifying the treasurer.

### **LNAA MEMBERSHIP RENEWAL FORM 2021–2022**

**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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My membership fee of \$25 enclosed.

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Reference: \_\_\_\_\_

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**LNAA TREASURER:** Vicki Minge, 16 Douglas St, Lockleys, SA 5032 [pvminge@hotmail.com](mailto:pvminge@hotmail.com)