



LCA Pastoral Care Nurse **NOTES & NEWS**

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Lessons from the COVID Experience

Two leaders of Lutheran Parish Nurses International – Dr Marcia Schnorr and Carol Zimmermann – have surveyed Lutheran Parish Nurses in various parts of the world to identify insights gained from the COVID pandemic experience.

They developed a survey in two parts: six questions related to demographics, and five questions specific to the focus of the study.

Respondents were asked to identify their previous experience, if any, with a pandemic. In addition, they were asked to name three specific things they were able to do for their congregation or community, three ways they will apply their learning in the future, and any wisdom from the experience that could be shared with future nurses

Most respondents were from small to mid-size towns in central USA. Years of service ranged from less than one year to over 32 years, with the most serving 20 years. Hours of service per month ranged from 22 people serving 1-10 hours to five serving over 101 hours per month.

Forty per cent of the Parish Nurses work in a more traditional nursing setting as well as serving as a Parish Nurse. The largest age group for respondents was 51-70 (58%).

The first question asked if they had ever experienced something similar. Forty-four respondents (88%) said they had never experienced anything similar to this pandemic. Six responded with one or more examples of a previous similar experience. These included HIV/AIDS, polio, SARS, and serving as an army nurse.

The second question asked: ‘What surprised you most about the experience?’ Responses can be summarised into four groups.

- Total shutdown, and isolation (28%)



- Mental health concerns (20%)
- Inability to attend church or have pastor or Parish Nurse visit (14%)
- Frequently changing guidelines (12%)

The third question asked respondents to name three specific things they were able to do during the pandemic. The following actions were noted.

- Creative ways to connect and communicate (76%)
- Consult with pastor and church leaders about guidelines (50%)
- Health education (24%)
- Run errands for the elderly (16%)
- Make face masks or recruit sewers to make them (10%)

The fourth question asked participants to name three ways they will apply learning from the pandemic experience to the future. Responses were grouped into three general categories.

- Be more diligent in communication (46%)
- Better use of technology (40%)
- Stay up to date on health education (20%)

The final question was ‘What wisdom from this experience can you share with young and future nurses?’

- Encourage Parish Nurses to maintain personal devotions and worship (24%)
- Remain positive and calm (18%)
- Maintain positive self-care (14%)

During ordinary times, the roles of the parish nurse reflect the strength of the individual nurse and the needs of the congregation and community in which they serve. Traditionally the roles of the parish nurse would include health education, personal health counselling, liaison to the community, coordination of volunteers, and serving as integrator of faith and healing.

In the early phase of the pandemic, study participants reflected these roles and often expressed frustration as well as joy as they tried to find new ways to fulfil these duties.

Pressing issues included

- changes in communication style;
- Losses in human contact;
- Loss of shared grieving.

The study demonstrated that Parish Nurses continue to seek to meet the basic human needs of all people. Parish Nurses were quick to recognise these needs in parishioners, staff, and themselves.

The pandemic duties reflect how parish nurses across the globe worked to meet these needs and to support others in meeting the

most basic needs for their congregation and community.

The large number of responses that noted the need to provide Christ-centred communication and connections suggests that Parish Nurses consider developing a system that is useful in a pandemic -- but could also be used during extremes of heat or cold that may keep people at home, or in cases of smaller epidemics and ill health among those who live alone that can create similar feelings of aloneness.

Some respondents shared various 'buddy systems' that maintain connections and communication with the church family.

Copies of the report are available at the LPNI web site www.lpni.



Vale Jan Nicholson



One of the first four persons to complete the LNAA's Introduction to Pastoral Care/Parish Nursing course, Jan Nicholson of Tarrington, Vic, died on 17 November, after a long battle with cancer. The course was held at the Eventide Lutheran Home in Hamilton in 2010. While Jan did not have the opportunity to officially serve in a Pastoral Care Nursing role, she maintained an interest in this ministry, and together with her daughter, Jane Tonissen, participated in the Lutheran Parish Nurses International study tour to New Zealand in 2015.

Jan's funeral was held at Tarrington on 24 November. Sincere condolences to Jan's family, especially Jane!



Lutheran Parish Nurses International

Board meeting

At the November board meeting, Carol Lueders-Bolwerk (right) stepped down as a board member of Lutheran Parish Nurses International (LPNI). Carol heads the Parish Nurse education program at Concordia University in Mequon, USA. Taking Carol's place will be Darlene Rueter of Carroll, Iowa, USA.

Treasurer, Sue Neff, reported a healthy bank balance of US\$34 128.40.

Study Tours

Present indications are that between 20 and 30 people will participate in the LPNI study tour to Alice Springs in September. All participants will need to have been fully vaccinated. Some places are still available. For a registration form, contact: revbob@ozemail.com.au.

The 2023 tour will now most likely be to Bucharest and Brasov in Rumania instead of Ukraine.

