



Heliostat hotspots in the light of the Son

During the dark and dreary days of winter, don't you just long for the sunshine! We are fortunate to live in a land of sunshine. 'I love a sunburnt country', Dorothea McKellar wrote in her famous poem. Although we are probably not going to get sunburnt at this time of year, most parts of our country have a good dose of Vitamin D all year round. Imagine though, what it would be like to live in a place where for a certain part of the year there is no sunshine at all.

From November to February, the people of Rattenberg, in Austria, are literally in the dark. Rattenberg lies in a valley in the midst of the mountain range simply called 'the Alps'. There is a high mountain to the north, and there is a high mountain to the south of the town as well. November to February are the 'dark months'; the sun never gets high enough in the sky to peek over the top of that mountain to the south. For around three months each year, the people of Rattenberg do not get any direct sunlight.

This severe lack of natural vitamin D, drove more and more Rattenberg citizens and businesses away to sunnier locations. So, in 2005, the local authorities came up with a rather creative solution to their problem: 30 'heliostats' – rotating reflector mirrors, mounted on a hillside to capture sunshine from the other side of the mountain in the neighbouring village of Kramsach. Basically, the mayor of Rattenberg and his supporters were planning to shine sunlight on the whole village for a cost of \$2.5 million.

Since a mirror the size of a football field was not possible, they came up with a more feasible option. They planned to use these smaller heliostat mirrors creating a dozen or so 'hotspots' in the town, about the size of a front yard where people could bathe in 'sunlight' when they were getting overwhelmed by all the darkness.



According to the firm supporting the project, Bartenbach Light Laboratory, the heliostat light would go far beyond simply lighting the village. It would 'give the impression of the sun'. Unfortunately for Rattenberg, the project did not go ahead. It was a good idea, but

needed further 'enlightenment'!

God's light is far more than just a good idea. God gives the light from the sun and God gives the light from his Son. He is both Creator and Redeemer. This light from the Son of God radiates from him and enlightens the world. He is the true Light who has suffered, died, and risen for you and for the whole world. . ***'The true light which enlightens everyone was coming into the world'*** (1 John 1:9).

We who receive this light of the true Light -- Jesus, the Son of God – reflect that light, bringing 'hotspots' into the world around us where others can bathe in the warm of God's love. That light penetrates and overcomes the darkness. As the Apostle John announced: ***'The light shines in the darkness and the darkness has not overcome it'*** (John 1:5). Jesus said, ***'You are the light of the world. A city set on a hill cannot be hidden. Nor do people light a lamp and put it under a basket, but on a stand, and it gives light to all in the house. In the same way, let your light shine before others, so that they may see your good works and give glory to your Father who is in heaven'*** (Matthew 5:14-16). We don't make the light shine, but we do reflect the shining Light.

At this time with COVID-19 restrictions, there may be many who feel like the residents of Rattenberg during our 'dark months' of being locked inside and lacking light. The good news is that the Son is always shining even through the darkest seasons. >>

Heliostat hotspots ...

Jesus died on the cross and rose from the dead so the light of the Son may shine on us now and eternally.

May we all be living 'heliostats', reflecting the light of God's Son in creative ways that beam 'hotspots' of God's love to the lost and the lonely! We don't have to wait until the dark 'winter months' of COVID-19 are over to let

Christ's light shine. There are still so many opportunities for connection with God and others, even in the midst of a pandemic. As Christ's 'heliostats', let's make sure our mirrors are clean and always in action! May we give 'the impression of the Son', reflecting his light with all around us, in all seasons.

The gospel song says it all: 'This little light of mine, I'm gonna let it shine'!

Chris Gallasch

From the President

2020 continues to be a challenging year on many levels. Who would have thought that the International Year of the Nurse and Midwife would provide a global pandemic, both thrusting health care into the forefront of community awareness and testing our skills and resilience! Nurses are always resourceful, and can find a way to get things done, often relying on tried and tested, evidence-based methods. However, our present times are unprecedented, and so we find ourselves tentatively feeling our way, relying on government recommendations and on information from other countries. It is using this information that the decision was made to cancel the Lutheran Nurses Association of Australia's July meeting.

While indoor public meetings are again permitted, it was felt that the core cohort who attend meetings are in the highly at risk category. This meeting was to be an open forum and our annual general meeting. It is hoped that the annual general meeting can take place in September.

I'd like to take this opportunity to share current recommendations on how to continue to stay safe while in public areas. I am based in South Australia, so our main objective is to not become complacent; but the guidelines are the same no matter where you live. (Remember to follow your State's recommendations for current lockdown areas and reduced public interaction.)

The physical distancing principle is still the key to reducing transmission possibilities. This includes keeping at least 1.5 metres from other people, and restraining from shaking hands, hugging others, or any other form of physical contact. In South Australia we are allowed to have one person per two square metres (this may be different in other states at the moment).

Maintain good hand and personal hygiene, remembering the five moments of hand hygiene and, when outside the home, carrying hand gel. It's a great time to revisit these principles by completing the online module at: hha.org.au/online-learning/complete-a-module.

Wearing a face mask in public has become a controversial topic. And while the use of face masks by the general, healthy public is currently not recommended by the Australian government, it is recommended for those who are vulnerable because of their age or chronic medical condition, or are in areas where it is difficult to maintain physical distancing.

If wearing a mask, it's important to ensure it is of good quality, that your nose and mouth are both covered, and that it fits snugly under your chin. Single-use masks are to be used only once, and good hand hygiene should be used, both donning and removing the mask (health.gov.au).

All of us at the Lutheran Nurses Association of Australia pray for everyone's continued good health and safety. We especially remember our high-risk populations and those living in current areas of increased active cases, particularly those living in Victoria.

Our trust in God's love and plans for our future gives us the grounding to stay strong. Look after yourselves, your patients and your loved ones!

I look forward to getting back together to celebrate our special year in person ... hopefully in September.

Megan Materne

Newsbrief

One of the people honoured in this year's Queen's Birthday honours was Professor Jenny Abbey. She was a Foundation Director of one of the three National Dementia Collaborative Research Centres established under the Australian Government's National Dementia Initiative, and was Queensland's first Professor of Nursing (Aged Care) holding a joint appointment between Queensland University of Technology and the Prince Charles Hospital. She is the author of the Abbey Pain Scale, the scale most widely used in Australian Residential Care facilities to assess pain for people with dementia who are unable to verbalise their needs in a meaningful way. Most of her research work has been in the field of palliative care needs of people with dementia.



With hospitals in eastern France saturated with patients at the height of the Coronavirus pandemic, one of the country's high-speed TGV trains was equipped to transport patients from the country's heavily affected in the east to hospitals in the west. Each carriage carried a medical team, including an anaesthetist, an intensive care doctor, and three nurses. Around 50 people, including carers and support staff, were on board during travel. The aim was to transport patients from regions in full pandemic peak to calmer regions.

In some parts of India, train carriages were turned into makeshift hospital wards to cope with the number of COVID-19 patients.

A national day of thanksgiving will be held on Australia Day 2021, to pay tribute not only to the essential workers on the public health frontline, but also to all who risked their own wellbeing to

serve their community during the COVID-19 pandemic. It will be the first time that Australia Day will share commemorations with another national event.

Under the plan, announced last month by Federal Education Minister, Dan Tehan, students studying nursing, teaching, clinical psychology, English, maths and languages will pay 46 per cent less for their degrees, with annual fees falling from \$6804 to \$3700. There will be no change for medical and dental students. The new funding model will be applied to students who begin studies from 2021. Students currently enrolled in courses set to gain from the policy will be able to do so from next year.

The Australian Nursing and Midwifery Education Centre in South Australia has won a contract with the Department of Innovation and Skills to provide 'COVID Clean' training for up to 5500 employees across the State. The fully accredited course became available through face-to-face training and as an online learning program from 1 July. Employees who complete the course will be issued with a certificate to display in their workplace or include with their resume.

A study by the South Australia-based Global Centre for Modern Ageing (GCMA), has found telehealth – whether accessed by phone or online – has worked well for older Australians. More than 60 per cent of the 1200 people aged over 60 who were surveyed nationally said they were willing to use telehealth in the future. The research showed that most older Australians who used telehealth during the pandemic found their experience to be similar to or better than a face-to-face consultation. For both phone and online consultations, 85 per cent said the quality of care/treatment provided was the same as or better than normal, and 88 per cent said the value for money was the same or better than they usually experienced.

More than two in three said they would feel confident using telehealth in the future. Nearly half (49 per cent) said they were likely to use telehealth after the pandemic. Privacy concerns did not appear to be a major issue for older people using telehealth.

Pioneer doctor in India

Edith Mary Brown was a British doctor and medical educator who, together with Martha Rose Greenfield and her sister Kay, founded the Christian Medical College in Ludhiana, India, in 1894. It was the first medical training facility for women in Asia. She served as principal of the college for half a century. She was a pioneer in the instruction of Indian female doctors and midwives with modern western methods.

Edith was born in Whitehaven, England in 1864, the fourth of five sisters. Her father died when she was young, and the family moved to London. Her older sister was a missionary, which led her to develop an interest in medicine and mission.

She graduated from Girton College, Cambridge, one of the first women to be admitted to the Honours Degree Examination at the University of Cambridge in 1882. After graduating, she studied medicine at the London School of Medicine for Women, and in Edinburgh where she became qualified as a doctor of medicine in 1891. The Baptist Missionary Society sent her to India in 1891.

In 1881, the Greenfield sisters had started a medical mission in Ludhiana. They were evangelists and educationalists from Scotland. Their pioneering medical work was the precursor of the Medical Training and Health Care Service Programme of the present Christian Medical College. When the Greenfield sisters and their associates organised Health Care Educational Services, Dr Brown joined them in 1893.

She was shocked by the medical conditions in India, and felt a need to educate women, particularly midwives. She was appalled by the neglect of women, who were silently suffering from diseases of ignorance, illiteracy and the *pardah* system, due to which they were deprived of medical treatment. She decided that if she had to change this, she would require a team of trained people to help her.

A group of women missionaries met in Ludhiana, with the result that a medical school with 30 beds was initiated in a rented building. In January 1894, a woman in Bristol donated £50 to help Dr Brown rent an old school house in Ludhiana. That year she and her colleagues started the North Indian School of Medicine for Christian Women. The aim was to train Indian nationals, particularly women, for medical education and health care services. She started with four students and four faculty members. The medical school, the first for women in India, grew into a full college with medical, nursing and pharmacy schools, and a hospital with 200 beds.



The institution continued to be run by women, for women and children, until 1947. During the partition of India in 1947, the State of Punjab was split into India and Pakistan, resulting in the massacre of thousands in Ludhiana. Many Muslim employees of the college and hospital fled to Pakistan, while Sikh and Hindu refugees arrived over the border. Despite the violence, the college and hospital remained safe from attack, and became an emergency centre for those seriously injured.

The period from 1894 to 1952 saw it develop into a Women's Christian Medical College. In 1952 the name was changed to Christian Medical College (CMC) to enable it to admit both men and women for the upgraded course, which came into effect in 1953.

A major landmark in the history of the school was the inauguration of the Brown Memorial Hospital in March 1957. Today this college and hospital is a premier institution. It has expanded its services, and includes the Christian Medical College, a Dental College, College of Nursing, College of Physiotherapy and Institute of Allied Health Sciences.

CMC is one of the oldest educational institutions and hospital in India. By 1951, on the >>

Pioneer doctor in India

60th anniversary of Dr Brown’s arrival in India, the college had graduated 143 nurses, 411 doctors, 168 pharmacy dispensers and more than 1000 midwives.



CMC hospital, Ludhiana

Today, the hospital’s Psychiatry Department is combating the substance abuse crisis in the State of Punjab. The Department offers de-addiction services, and has found that most patients are between 20-30 years of age, and are addicted to anything from cough syrup and heroin to cocaine and alcohol.

In 1964, the Department of Medicine attained the required number of teachers and services for

it to be upgraded to train postgraduates in medicine, leading to the MD degree. The college now offers speciality and super-speciality degrees in all major services.

CMC provides health care and education in urban and rural communities through clinics and medical camps. A dedicated Rural Health Outreach Program has been in place since 2003. This initiative provides a network of health services in the rural belts around Ludhiana in conjunction with local villages.

A monthly psychiatric clinic is held at Missionaries of Charity, a home for mentally challenged children. Clinics in surrounding villages are organised and managed under this program. The social and preventive medicine department is also very active in this program, and community health centres that provide basic health care in nearby areas are managed by this department. Students and physicians are regularly posted in these centres.

Dr Brown retired as CMC principal in 1952 and moved to Kashmir.

She died on 6 December 1956 in Srinagar, at the age of 92.



The LCA’s RAP

At its 2018 convention of General Synod, the Lutheran Church of Australia (LCA) resolved to embark on a Reconciliation Action Plan (RAP) to help improve relationships between Aboriginal and non-Aboriginal church members.

The RAP will provide a framework for the LCA to better hear, recognise and support Aboriginal and Torres Strait Islander people, and develop ways for this to happen. It will aim to develop culturally appropriate ways in which Aboriginal members of the church can be involved in addressing questions of recognition and representation, and in service and leadership within the church.

Nurses, especially those working in hospitals,

regularly meet and care for people of many different cultures and ethnicities. The LCA’s emerging RAP should be an invaluable aid for them, helping them to listen more intently, and develop stronger respect, particularly for Aboriginal and Torres Strait Islander cultures, as well as the many others they deal with in their work.

The RAP logo is based on a painting by nine-year-old Henry Reid, an Eastern Arrernte and Wangkangurru boy.

† **LCA PARISH NURSE TRUST FUND MEMORIAL**
Leah Gwenneth Steicke, 24/12/1929-08/06/2020

Program



Venue for regular meetings: LCA/SA District Office, 137 Archer Street, North Adelaide

27 Jul 7.30pm **Forum: Hate the sin, love the sinner** **Cancelled**

The Annual General Meeting has been rescheduled to **September**

28 Sep 7.30pm **Eye bank: giving the gift of sight** **Subject to confirmation in next issue**

30 Nov 7.30pm **The role of a cancer nurse** **Subject to confirmation**

Visit our Facebook page (@lutherannursesassociationaustralia) for details.

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IN TOUCH

IN TOUCH is published six times a year. News items, letters, articles, jokes suggestions for topics, are welcome. Deadline for next issue: **15 August 2020**. **Editor:** Robert Wiebusch, 200/1215 Grand Junction Rd, Hope Valley SA 5090 ☎ 08 8336 3936. Email: robert.wiebusch@lca.org.au.

Membership renewal for the 2020-21 financial year now due

Kindly return the form below, together with your cheque, to the LNAA Treasurer, Mrs Vicki Minge. Funds can be transferred electronically, using the following information: 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 may be given as a reference. This should be included when notifying the treasurer.

LNAA MEMBERSHIP RENEWAL FORM 2020-21

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My membership fee of \$25.

I arranged electronic transfer of my membership fee of \$25 on: _____

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In future, please send me electronic copies of *IN TOUCH*

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