

Charley's chaplains

Caregivers keep going during, after hurricane

By **Karen P. Riley**

On August 13, the fury of a category four hurricane, Charley, came directly through Port Charlotte, FL. Families and pets of employees took shelter at our Bon Secours St. Joseph Hospital, expecting only a category two hurricane. Team "A" was caring for 113 patients. Team "B" was instructed to come in once the all clear was sounded from the county.

Just hours before the storm, the first-floor ICU evacuated to a higher floor in anticipation of a storm surge. The hospital roof took a direct hit from 145-mph winds, and torrential rains raged down to the upper floor, flooding it with six inches of water. Patients were moved from their shelter in the halls to the other side of the nurses' station. The eerie sound of creaking and bending metal windows, fractured glass and rattling doors heightened anxiety.

It is said that whatever disaster plan was prepared is over within the first seven minutes of an actual disaster, and then you need to think on your feet. The critical decision-making of nurses and managers who were afraid themselves while calming staff and patients was remarkable!

Two at a time, nurses rounded the string of beds lined up in the corridors to see to patients' needs. The strains of "Amazing Grace" punctuated the hallways. Generator lighting gave the halls a surreal light. A week's worth of laundry was used to clean the floors in one night.

A CPE-trained Unitarian minister arrived for shelter and to minister. Centering herself, she assisted patients to remain calm with the Lord's Prayer and 23rd Psalm. Her experiences, she said, "felt like the truest and best of ministries ... and restored my confidence and soul." We took turns making rounds and slept on the floor of the pastoral care department.

Halfway through the storm I carefully went up one of the stairwells that had flooded to listen to fears, distribute Bibles and rosaries, and ask about basic needs. Many patients asked for prayers; some comforted the nurses. A patient who was a Catholic Monsignor was saying the entire rosary out loud. The memories of that night are blurred together; it felt like I was everywhere, trying to get the pulse and heartbeat of our wounded hospital body.

Because of the structural damage, all patients were evacuated after the hurricane for almost 24 hours. "Walkers" or wheelchairs were transferred by school buses. Ninety ambulances transported bed-bound patients. Ambulances from other counties navigated intersections with no traffic lights

See [Charley](#) on page 17.

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A container full of debris sits outside Bon Secours Hospital in Florida after cleanup begins from Hurricane Charley.

Historic meeting in Portland, Maine

Four foundational documents affirmed

On November 7, 2004, in Portland, Maine, the constituent boards of the Council on Collaboration (AAPC, ACPE, APC, CAPPE/ACPEP, NACC, NAJC)*, met and affirmed four foundational documents:

- ▼ Common Standards for Professional Chaplaincy
- ▼ Common Standards for Pastoral Educators/Supervisors
- ▼ Common Code of Ethics for Chaplains, Pastoral Counselors, Pastoral Educators and Students
- ▼ Principles for Processing Ethical Complaints

Since September 2003, three task forces authorized by the constituent boards worked to draft a common set of foundational documents. The writing and signing of these documents marks an exciting moment within the world of spiritual and religious care. This endeavor will move us forward in the eyes of the public as professional associations who share a common set of standards. They provide us with the power of greater advocacy as we come with a common voice to the issues that face our profession.

The content of these documents can be viewed on the websites of each association.

- * American Association of Pastoral Counselors

Association for Clinical Pastoral Education, Inc.
 Association of Professional Chaplains
 Canadian Association for Pastoral Practice/ACPEP
 National Association of Catholic Chaplains
 National Association of Jewish Chaplains

Frequently asked questions

What does this mean for these associations?

This marks a time of information sharing and mutually held horizons. The associations are not talking about merging. We are continuing to identify ways to efficiently and effectively collaborate with one another.

What does affirming these documents mean?

Affirming the documents means the boards accepted the standards, codes, and guiding principles as a shared basic foundation for our professional, pastoral life and practice. Without changing the words of the documents, each association can add their own specific particularities and wording to these as additional sections and/or use the common documents as a preamble to their own standards, codes and principles. Any standard added by an

association may create a higher standard, but may not lower the Common Standards affirmed.

For those associations for which a particular set of standards does not apply because they do not offer what is described, they affirmed that they support the documents as shared common standards among the associations that participate in the Council on Collaboration.

Can these Common Standards be revised?

Yes, these remain living documents that can be amended by the action of all the boards participating in the Council on Collaboration.

What power does the Council on Collaboration have?

The Council on Collaboration is responsible to the Board of Directors of each participating association. Its work is in service to the Boards.

Are the documents on the website in their final form?

No, there is considerable editing needed to create consistency of form and language throughout the documents. However, the content is affirmed.

When do these documents go into effect?

They are effective immediately, but will be operationalized through a gradual roll-out process.

Quest for new executive director to be extended

The NACC's Search Committee reviewed many resumes throughout the summer and identified a strong candidate to be the association's next executive director. The Executive Committee of the Board of Directors approved the choice and offered the position to the candidate in late October. The candidate has declined the offer, and NACC will now be renewing the search for the executive director.

The NACC Board of Directors met on Nov. 6 and discussed the challenges in finding an executive director. The requirement for relocating to Milwaukee seemed to be a major

impediment. There was a lengthy discussion surrounding this area and what the primary role of the executive director would be. The Board concluded that relocation was not an essential requirement of the job, since we have an excellent staff in Milwaukee, including a director of operations.

In light of this, the NACC will reopen the search and is again seeking applications. "This will delay the hiring of an Executive Director and that is a bit of a disappointment, but we are confident that with a little patience and the geographic barrier removed, we will find the right person," said Ann Hurst,

NACC vice chair and co-chair of the Search Committee. "We will be looking for a strong leader who will be able to develop and oversee the mission and strategic plan of the organization." Important criteria that the committee will consider include: understanding of chaplaincy; Catholic church involvement; collaborative leadership style; and skill in relationship building, supervisory oversight, administrative leadership, business management, and development. Relocation is not necessarily required.

A full job description can be found on the NACC website.

vision

Vision is published 10 times a year by the National Association of Catholic Chaplains. Its purpose is to connect our members with each other and with the governance of the Association. Vision informs and educates our membership about issues in pastoral/spiritual care and helps chart directions for the future of the profession, as well as the Association.

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Editor

David Lewellen
dlewellen@nacc.org

Graphic Designer

Gina Reiter

The National Association of Catholic Chaplains is a professional association for certified chaplains and clinical pastoral educators who participate in the healing mission of Jesus Christ. We provide standards, certification, education, advocacy, and professional development for our members in service to the Church and society.

NACC National Office
3501 South Lake Drive
P.O. Box 070473
Milwaukee, WI 53207-0473
(414) 483-4898
Fax: (414) 483-6712
info@nacc.org
www.nacc.org

Acting Director

Kathy Eldridge
keldridge@nacc.org

Director of Education & Professional Practice

Susanne Chawszczewski, Ph.D.
schaw@nacc.org

Executive Assistant

Sandra Charlton
scharlton@nacc.org

Finances

Sue Walker
swalker@nacc.org

Membership

Barbara Hempel
bhempel@nacc.org

Professional Practice (Certification)

Marilyn Warczak
mwarczak@nacc.org

Special Projects

Philip Paradowski
pparadowski@nacc.org

Clerical Assistant/Certification

Selena Barner
sbarner@nacc.org

Members elect incumbent and newcomer to board

NACC members used a new voting method to elect one new board member and re-elect another.

Joan Bumpus, currently the chair of the board, will serve another three-year term, and Karen Pugliese will join as a new member.

Bumpus, the director of pastoral care at St. Vincent Hospital in Indianapolis, said, "I want to be of service to the NACC. I think it's a crucial time in our history." She has served a total of nine years on the board, in addition to other national and regional work.

In the coming years, she said, she hopes to develop relationships with hospitals, the Catholic Healthcare Association, and other groups. "Hospital administrators are asking questions like, what are the standards for pastoral care? How many patients per chaplain?" Bumpus said. "None of that stuff, to my knowledge, exists very well." But, she said, the board always tries to balance "serving members best and building relationships, building a strong financial base."

Pugliese, a staff chaplain at Central DuPage Health in Winfield, IL, said that running for the board seemed natural after 20 years of being active in the organization. Having won, she said, "I'm not anxious, but it is an edgy feeling – like you're about to leap out of the plane, hoping your parachute will open."

In addition to bedside chaplain duties, Pugliese works in women's and children's services and oncology and palliative care. Also, she said, "A great love of mine has always been workplace spirituality."

Now is an exciting time for the NACC, Pugliese said, as the association reaches out to cognate groups and seeks to "give a greater voice to the



Joan Bumpus



Karen Pugliese

profession of chaplaincy." Issues to be worked on include "formal relations with the church, with the bishops, and how we partner with them," and extending chaplain education and outreach to the local level. Disbanding the regions, she said, has greatly helped the certification process, but "for professional development and enrichment, we haven't broken new ground yet."

Bumpus agreed that regional meetings are "what members miss the most. ... We're open to exploring a regional structure, but not under the same paradigm." One possibility, she said, would be recruiting volunteers to re-establish regional meetings.

The association used a new system of elections this year, called instant runoff voting. Instead of voting for two people among the four candidates, members were asked to rank their choices, 1 through 4. If the top two candidates did not win enough first-place votes, the scoring system next counted the second-place votes on the ballots that preferred the lowest-ranked candidate. Besides eliminating the need for a second round of voting (i.e., a runoff election), IRV allowed the preferences of NACC members to be more accurately reflected.

All NACC voting members were sent the 2004 ballot in the mail. Voter participation was much higher than in some past NACC elections. Of 2,997 ballots mailed out, we received 1,488 before the September 24th deadline, a return of just under 50 percent.

For a more detailed explanation, visit our Web site at http://www.nacc.org/aboutnacc/board_elections.asp

Power of music helps patients rest and recover

By Sr. Concepta Joerger, OP

Listening to favorite music can be a great way to unwind. But the soothing and therapeutic properties of music can do more. Music therapy is a branch of health care which uses music for emotional, physical, functional, and educational improvement in many settings.

I am not a music therapist, but I believe in the power of music to bring healing. That is why I began a music program at St. Mary Rogers Hospital. And I have learned how music can help reduce stress and pain and aid sleep, digestion, muscle stimulation and mood regulation.

I sense that music in a room helps a patient get into touch with their inner being. Music is an easy tool to use in doing spiritual assessment. Patients often will speak about their religious beliefs, or faith, trust, and hope in their God. Music has a way of opening the mind, spirit and body.

Previously, the only source of entertainment in our patients' room was the TV. "Tom" (not his real name) was a patient in our hospital and had been lying in his bed for several weeks when two local musicians came to play for him. Tom's near-constant pain left him very agitated most of the time, and there was nothing more doctors could do for him. But when the musicians played, it was incredible to watch. He really brightened up. Tom asked the musicians to remain, and they played five pieces that night.

The nurses said that through the night, he rested well – possibly the first restful night he'd had. The next day he was still talking about the music.

I was convinced that music could improve the health of patients and reduce depression and anxiety. I realized we needed something more to help our patients focus on something soothing and relaxing, rather than just TV. I adapted our program to fit into our hospital setting with the support of administration, physicians, staff and our department. One has to be willing to take the initiative to put a project into action.

Kathy Kaczmarek, director of pastoral care, got Wal-Mart to donate six portable CD players, and we have collected many different types of music. We have religious, classical with many different composers, country, easy listening, nature sounds, instrumental. Patients can check out CDs, which are returned when they are discharged.

On an average day, we might have six patients listening to music from our collection of 800 CDs. I keep the discs and players on a cart for easy transportation.

As I began this program, I set up a simple evaluation form for the patients to fill out after using music. There were two reasons: to see how the patients reacted to the music, and to show the administration that music was good for the soul, mind and body. The evaluations were very positive.

One patient who had a stroke that impaired his speech loved the music that I brought to him, especially a religious CD by Perry Como. His wife told me that he would try and sing along with the music. I ended up giving her the CD, as I knew that this really did help him with his recovery.

Another patient told me that the music helped him to relax and forget about his pain and the outcome of his stay. Great music nourishes us in ways that we don't even realize. Many of my patients, when listening to

music, stated that they ended up sleeping, which I told them is what is supposed to happen.

In "The Mozart Effect," author Don Campbell writes of the transformational powers of music in health, education and well-being. He describes using music to reduce stress, depression, or anxiety, how music induces relaxation, helps with sleep, and improves memory or awareness. Music helps patients suffering from strokes, cancer, coma, heart disease, or mental disorders. It can be used in a therapeutic situation to reduce anxiety and pain, transporting the listener to another reality temporarily.

On Sept. 11, 2001, when all that was on TV was the attacks on the World Trade Center, a patient's wife met me in the hall, told me how depressed her husband was and asked me to talk to him. We turned off the TV and I had a prayer with him and then asked him if he wanted some music. Two hours later the wife met me with tears in her eyes and told me how much better he was. Music helped him to focus on other things rather than destruction and violence.

Other patients do not need as much pain medication when they get music; it lets them focus on the sound rather than the pain. Al Bumanis, spokesman for the American Music Therapy Association, has been quoted as saying, "Numerous studies have shown music therapy's benefits can elicit verbalization, increase comfort levels, reduce blood pressure, reduce pain perception, reduce fear, stress and anxiety, and increase a sense of self-worth and self-control."

Music gives patients control over something; I let the patients choose what they prefer to listen to. I usually ask them what kind of music they like and I try to get something of their interest. For stroke patients, especially if their speech has been affected, I try to use music with

Music helped him to relax and forget about his pain and the outcome of his stay

words to stimulate the brain. This past spring I took music of the '40s and '50s to our Adult Care house. These patients have dementia, and the staff says that their favorite songs are those written during that time period. They can relate to them. For the older patients who may find it hard to change a CD, I use a 24-hour radio station with easy listening music.

In addition to music, I have used background sounds with patients. One of the favorites is ocean waves; the soothing sound of water just slapping against the shore is very relaxing.

Music can also be a source of interpersonal healing. When Sr. Thecla Kuhnline, OP, was working with us, she would often enter a patient's room, hold their hand and sing a song. The patients really appreciate this tender, caring presence of a chaplain.

For someone who is dealing with a prolonged illness, or even facing death, the gift of music can take their mind off the machines, the hospital environment and the pain. Patients have stated that music is the only truly wonderful thing that has happened to them since their illness.

When a patient is close to dying, I usually offer music to the family. I take in harp, flute, or other instrumental music as well as some kind of soothing Christian music. Not too long ago, a patient was dying in ICU and I took a Christian CD in for the family. The song that was playing as the patient died was "The Old Rugged Cross." The daughter thanked me and told me that that was her mother's favorite song.

A cancer patient who was dying and enjoyed the outdoors loved to listen to birds. I had a CD of bird songs which I took into his room. The wife told me the next day that he woke up in the middle of the night and said, "I hear birds singing." He died very peacefully.

In ministering with patients and families, music is a way to show com-



Sister Concepta Joerger checks the music on a CD player for patient Floyd Caldwell. Joerger has found that offering music to patients provides many benefits.

passion, caring and sensitivity to their spiritual and physical needs, as well as the gentle touch of what we are all about. Physicians, nurses, and physical therapists will frequently ask me to bring music to a patient's room. I see this as being part of the interdisciplinary team.

In addition to seeking music for a patient, staffers enjoy listening as well. They like to have music at their stations, especially around the holidays.

Chaplains from other areas have contacted me about this program. I am proud and happy to share this with others, as I feel very strongly about what music can do for a person. This program has helped patients find meaning with suffering, grief, and end of life.

In this new century, we can see many changes in health care and the role of chaplains. We chaplains are being challenged and encouraged to reach out and seek new and innovative ways of helping our patients with spiritual needs, illness, and death and dying. We are faced with pain management and palliative care. Let's be the ones who are willing to speak out and reach out to put music into patients' rooms.

Sr. Concepta Joerger, OP, NACC Cert., is a chaplain at St. Mary Rogers Hospital in Rogers, AR.

Music is a way to show compassion, caring and sensitivity to spiritual and physical needs

Resources

The Internet has many articles on music therapy. I would recommend www.mozarteffect.com, the site of author Don Campbell, as well as his books *The Mozart Effect* (New York, Avon Books, 1997) and *Music: Physician for Times to Come* (Wheaton, IL, Quest Books, 2000).

Also try Deepak Chopra's *Quantum Healing: Exploring the*

Frontiers of Mind/Body Medicine (New York, Bantam Books, 1989).

A site run by a composer and performer of healing music is www.shirleykaiser.com.

The Web site of the American Music Therapy Association is www.musictherapy.org. You can explore links on your own and make it fit your own situation. That is what I did, and it works.



Image of God's touch brightens a dark night

By **Linda F. Piotrowski**



It had been a long week, raining every day since Sunday. Reflecting the darkness outside, eight patients in our small community had

recently been diagnosed with some form of terminal illness. All of them had thought they were in good health. Now they had been told they had six months or less of life expectancy.

I was ready for an escape! It was 10 p.m. Thursday night, so pajamas on, mug of tea at my side, my husband and I had just settled in to watch one of our favorite television shows, "Without a Trace." Five minutes into the show, my pager went off.

Grumbling and moaning, I got up to call in. It was 2South, our MedSurg unit at the hospital where I serve as interfaith chaplain. "It shouldn't be too bad," I told my husband. I dialed the number, silently praying that I wouldn't have to go in.

No such luck! The nurse informed me that a 57-year-old woman had just been given a diagnosis of a probable six to nine months left to live. Her husband and the elder of her two sons had just left. Her younger son remained in the room with her. The nurse told me, "Dr. Quinn offered your help. Both the patient and her son jumped at it. Can you come in?"

My heart sank, yet I responded in the affirmative. "Of course I'll come in. Just give me 15 minutes and I'll be there."

Quick! Out of the pajamas, on with

a decent outfit and into the car! Even after 16 years of answering pages, my sense of inadequacy kicks in whenever the pager goes off. Driving to the hospital I began to cry and rant at God. I began telling God, yelling really, threatening God, saying, "Look! I'm sick of this, you know. I'm 55. She's 57! She's only 57! She's so young to be told she is dying. What can I say, what can I do to comfort her and her son? I don't have anything left to say. You'd better be there. You'd just better help me!" The ride to the hospital was filled with my complaints and demands. I was angry, inadequate, scared.

After checking in at the nursing station I went to the patient's room. I stood outside for a moment, swallowed hard, called on God again, knocked and went in.

With just the night lighting on, the room was fairly dark. As my eyes adjusted I saw a tiny woman sitting up in bed. Seated in a chair at her bedside was her son, Frank (not his real name). Both were crying. He jumped up and offered me his chair. After introductions I suggested that he wait in our chapel while I spoke with his mother.

When Frank left the room I sat in the chair by the bedside and took her hands. They were warm, very warm. Her face was gentle, the kind of face that reflects the experiences of a lifetime. Her eyes were red from crying. She began to share the story of this shattering diagnosis. She squeezed my hands as she talked about her fear of facing her death alone. She did not want her family to know of her fear, her sense of being overwhelmed. Her concern was not for herself but for Frank, her baby. Her husband and elder son would be fine. They were strong. It was Frank, the fragile one, she was worried about. She spoke of her deep faith and how it had sustained her throughout her life. She talked at

length about Frank's varied illnesses and how they had brought the two of them closer. Her life had been filled with challenges and heartache. Frank was just beginning to experience some joy and success in his life. She was a first-time grandmother; her granddaughter was six months old. Just when life was beginning to come together, this happened.

She began to be short of breath and put one hand to her chest. I offered to go to Frank so she could rest. She agreed that was a good idea and asked me to pray before I left her.

Feeling at a loss, I asked what we should pray for. She shook her head, crying, as she said, "I don't even know what to ask." I was overcome with sorrow at her current condition and what I knew lay ahead for her. I wanted so desperately to comfort her. Still holding her hands, my head down, I struggled to begin, "Gracious God, we want to believe in your graciousness, yet at times like this we struggle ..." Tears in my eyes, I raised my head to look into her eyes. As I did so, she pulled one hand out from mine, placing it on my cheek. In spite of her tears she smiled. Her hand was warm as she caressed my cheek throughout the prayer, and I could feel her desire to comfort me as I attempted to comfort her. I finished the prayer and assured her I'd go to Frank. I promised to see her in the morning.

As you enter our chapel, the first thing you see is a stained glass window depicting the Green Mountains of Vermont. From a hand pictured in the right corner of the window, like a soul released from earth, a dove flies upward. Frank sat staring at this scene, tears streaming down his face. He held a tiny crucifix in his hand.

For the next forty minutes he talked and cried. His mother had supported him throughout his tortured childhood

She's so young to be told she is dying. What can I do to comfort her and her son?

and adulthood. She had helped him to negotiate life's storms and in the process enabled him to discover God's faithfulness. These two shared an extraordinary bond. We talked quietly about how he might help his mother through her final days. He wanted to be brave for her. Finally, we prayed and he returned to her side.

Driving home that evening, I tried to make sense of all I had experienced. I was overwhelmed with emotion. As I went to bed I felt numb. I prayed for insight.

And it became clear that the image at work within me that night was of Jesus, his mother and John at the foot of the cross. The woman, of course, represented God, who in Jesus became human and broken and was oh so kind. She was Jesus in agony on the cross yet reaching out from brokenness to comfort and care for others. Mine was Mary's role, while Frank was living out the role of John, the beloved.

When I think about ministry, I think about how time and again I feel Mary's feelings of helplessness, her powerlessness to intervene, her inability to relieve pain. That evening, like Mary, I was given another to comfort while feeling bereft myself. I think about how it feels to stand by as witness to the pain of another. When the pager goes off, sometimes I want to weep, for I know it is calling me to another situation where I will feel powerless in the face of suffering. What is this for? What am I to do? I have no ability to cure. I don't even have sacraments I can confer.

In his book *The Sacred Journey*, Frederick Buechner tells of a call he received from a distraught friend whose family members had been in a tragic car accident. Would Buechner, he cried, come to him? Buechner panicked. He writes of his fear of "opening up the door to his own pain or to anyone

else's." Although he knew it was wrong, he asked his friend for permission to call back in ten minutes. When he did, his friend had calmed down and said he no longer needed him. Buechner was relieved but appalled at himself. The call began a journey that ultimately took him to the seminary. "And my friend's broken voice on the phone was a voice calling me not simply for his sake, as I suddenly saw it, but also for my sake. To journey for the sake of saving our own lives is little by little to cease to live in any sense that really matters, even to ourselves, because it is only by journeying for the world's sake ... that we start to come alive."

We want God to be powerful, to intervene, to cure, to fix all of the brokenness. But how can that happen when *God* is so broken? Are there gifts that we discover only when we are broken and powerless? Do we hope to find something within ourselves that is ours to give to the world? Does salvation lie in our helping strangers?

To answer the call in the night, to stand by, to stand with, to witness to another's pain, to witness the presence of God, is our call and our role as chaplains. Each time we go to minister, we go with only our faith trusting that God will be present. And without fail, God is there as God promises to be. That night, I realized God is on the cross hundreds of times in hundreds of faces. This is why we do what we do.

When I awoke the morning after that call, I had an epiphany of sorts. How often I have longed to see God's face. At long last I got to see God! God is a tiny frail woman in a hospital bed with kind eyes and warm hands, touching my face.

Linda F. Piotrowski, NACC Cert., is interfaith chaplain at Central Vermont Medical Center. Her e-mail address is Linda.piotrowski@hitchcock.org.

To witness to
another's pain,
to witness
the presence of
God, is our call
as chaplains

Redemption

Having been tenant long to a rich Lord,
Not thriving, I resolved to be bold,
And make a suit unto him, to afford
A new small-rented lease, and cancel th'old.
In heaven at his manor I him sought:
They told me there, that he was lately gone
About some land, which he had dearly bought
Long since on earth, to take possession.
I straight return'd, and knowing his great birth,
Sought him accordingly in great resorts;
In cities, theaters, gardens, parks, and courts:
At length I heard a ragged noise and mirth
Of thieves and murderers; there I him espied
Who straight, *Your suit is granted*, said, and died.

George Herbert
(1593-1633)

One Book, One Association

NACC to read Cather novel together

By Susanne Chawszczewski, Ph.D.

We are excited to introduce a new educational project for the National Association of Catholic Chaplains: “One Book, One Association.” Modeled on the Library of Congress “One Book” projects, this NACC project has been designed to gather you, the members, together as a community by selecting one novel each year and encouraging reading, writing and discussion.

For the initial year of the project, we have chosen *Death Comes for the Archbishop* by Willa Cather and encourage all of our members to read this book. Your local public library or bookstore may already have copies, or you can order it online at such places as www.amazon.com or www.barnesandnoble.com. The 1990 paperback edition’s ISBN number is 0679728899.

On these pages you will find Willa Cather biographical information; bibliographic and web resources; discussion questions; information on continuing education hours; and ideas for meeting with other members of our association. Complete information will be available on our website at www.nacc.org/resources/onebook/cather.

The Book

By David Lewellen
Vision Editor

Published in 1927, Cather’s novel, based loosely on history, follows the career of Father Jean Latour, a French missionary assigned to become the Vicar Apostolic of New Mexico in 1850, when the area had recently become American territory and was still very much part of the frontier. He and his

companion, Father Joseph Vaillant, experience harsh weather, primitive living, cultural differences, and most of all, isolation and loneliness. But they find consolation in the stark beauty of the land, the love of their flock, and their own inner spiritual resources.

This project seems especially appropriate this year, as we prepare to meet in Albuquerque, only 70 miles down the road from Santa Fe, where most of the book is set. Cather’s descriptions of the landscape are so vivid that I suspect we will gain a whole new appreciation of the book once we’ve seen a little of New Mexico.

Death Comes for the Archbishop is a novel about journeys, and it works by moments. It covers a span of nearly 40 years, but at 300 pages of generous-sized type, it’s a fast read. It is episodic in structure, and Cather sometimes jumps around in time, using flashbacks. Only two characters are carried through the book’s entire length. It is not a grand chronicle; it is glimpses of one man’s journey, both physical and spiritual.

One recurring theme is the different forms that spirituality can take. Latour is more respectful of Native American beliefs and customs than one would expect from a priest of that time – we can probably put this down to Cather talking. But there are many references to the mingling of Native American and Christian beliefs, and especially to faith among isolated groups of people.

Railroads, television and the Internet have each in turn shrunk the world so enormously that this kind of isolation is hard to grasp – but it’s worth thinking about passing a life with no one but a family or a very small village for company. Over the course of a generation or two, what would happen to beliefs and practices? In the novel, they evolve.

Another theme is change. Even today, Native American communities live in pueblos in New Mexico, as they have for

millennia. But the world around them has changed enormously – and the change was no less rapid or drastic in Cather’s mid-19th-century story than it is today. The frontier was harsh, lawless, and isolated. It was easy for a rogue priest to establish his own little kingdom. But following the Mexican War, New Mexico had to adjust to new rulers – and to a new bishop imported from Europe. Latour is explicitly challenged by one character, Padre Martinez, who says, “We have a living church here, not a dead arm of the European church. Our religion grew out of the soil, and has its own roots. ... The dark things forbidden by your Church are a part of Indian religion.” Historically, Padre Martinez was on the losing side. And yet, Christianity has proved flexible enough to accommodate and incorporate many peoples; on my last trip to the Southwest, I attended a mariachi Mass.

If Cather had fully explored all the bits of plot that she mentions or implies, we’d have a thousand-page, Michener-style book to wade through. Instead, we have dozens of minor characters who pop up for a chapter or two and are part of the rich number of legends and stories throughout the novel, which works as a spiritual history and geography.

But *Death Comes for the Archbishop* is also a spiritual biography – or maybe even more a portrait. Father Latour doesn’t really evolve. Things happen to him, and he deals with them creatively and wisely, but we don’t see his faith change much. What Cather does do is provide us with two contrasting examples of faith in Latour and Father Vaillant. Latour is an intellectual, a rationalist; Vaillant is a feeler, an extrovert, a man who needs any kind of society and who feels a simple, direct, emotional connection to God. His exuberance and immediacy is set against Latour’s deliberation and cool reserve. But they both love each other and work together well.

When Latour and Vaillant discuss miracles, Latour elaborates, "One might almost say an apparition is human vision corrected by divine love. I do not see you as you really are, Joseph; I see you through my affection for you." Very true. Who knows why or how love starts, but once it does, it can be self-sustaining. You could say that seeing the person through love is either a miracle or an instance of God at work.

Father Latour and Father Vaillant are the center of the plot, but they are only two threads in a tapestry. The whole story was and is larger than them, as large as the desert and sky of New Mexico. That might help explain the puzzling title of the novel, in which death is only one small incident. "Life of the Archbishop" sounds grandiose, but maybe "Death Comes for the Archbishop" puts things in context, realizing that Latour's short period of life on earth is simply a link in the chain.

Willa Cather



Willa Sibert Cather was born December 7, 1873, in Virginia. At age ten, she and her family moved to Red Cloud, Nebraska. This small town in the middle of rough prairie was to influence Cather's work and her orientation to the American pioneer experience.

After graduating in 1895 from the University of Nebraska, Cather worked in journalism and as a high school teacher in Pittsburgh. In 1906, she moved to New York to work as editor and then managing editor of McClure's Magazine. There she became lifelong friends with a regional writer from New England, Sarah Orne Jewett.

Her early novels, *O Pioneers!* (1913), *The Song of the Lark* (1915), and *My Ántonia* (1918), shared a common theme of heroic womanhood in the face of great hardship and established her as a major American writer.

Later, Cather's writing took a new direction as she became concerned about the individualistic and materialistic life that was consuming society. One result, in 1927, was *Death Comes for the Archbishop*.

Willa Cather died on April 24, 1947.

See [One Book](#) on page 10.

Reference Works About Cather's Life and Novels

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Woodress, J. (1978). *The genesis of the prologue of Death comes for the archbishop*. *American Literature*, 50.3, 473-478.

Web Resources

- ▼ **Willa Cather Page**
<http://www.gustavus.edu/oncampus/academics/english/cather>
- ▼ **Willa Cather Pioneer Memorial and Educational Foundation**
<http://www.willacather.org>
- ▼ **Willa Cather, Death Comes for the Archbishop (1927)**
<http://www.staff.ncl.ac.uk/j.m.beck/cather.html>
- ▼ **Willa Cather**
<http://fp.image.dk/fpemarxind>
- ▼ **University of Nebraska Willa Cather Electronic Archive**
<http://cather.unl.edu/menu.htm>
- ▼ **Peoples of the American Southwest**
http://www.desertusa.com/ind1/du_peo_past.html
- ▼ **History of Santa Fe's cathedral and Bishop Lamy, the model for Latour:**
<http://www.levillee.net/roots/juliana7.htm>

One Book

Continued from page 9.

Discussion Questions

Book One: The Vicar Apostolic - Chapter 1: The Cruciform Tree

At the beginning of Fr. Latour's journey, he remarks on the featureless landscape. Espying the juniper trees on the hills, he finds one tree that is very different. "It was not a thick-growing cone, but a naked, twisted trunk, perhaps ten feet high, and at the top it parted into two lateral, flat-lying branches, with a little crest of green in the centre, just above the cleavage. Living vegetation could not present more faithfully the form of the Cross."

Describe a place or a moment you have come to in your life where you have experienced something unexplained and miraculous. How did you embrace that vision?

Book Three: The Mass At Acoma - Chapter 2: Jacinto

Through this part of the novel, Fr. Latour has been journeying with his companion Jacinto. He reflects many times about his own beliefs and those of Jacinto.

Describe an instance in which you accompanied with someone whose beliefs were different from your own. How have you incorporated those beliefs into your own world view?

Book Three: The Mass At Acoma - Chapter 3: The Rock

"The rock, when one came to think of it, was the utmost expression of human need; even mere feeling yearned for it; it was the highest comparison of loyalty in love and friendship. Christ Himself has used that comparison for the disciple to whom He gave the keys of His Church. And the Hebrews of the Old Testament, always being carried captive into foreign lands, - their rock was an idea of God, the only thing their conquerors could not take from them."

What is your idea of God? How do you carry this idea with you in your ministry?

Book Four: Snake Root - Chapter 2: Stone Lips

Fr. Latour and Jacinto find shelter from the storm in a place sacred to Jacinto and his people. Fr. Latour is uncomfortable for a time with this space.

What places do you consider sacred in your life and in your ministry? Have you ever been in a sacred space that is uncomfortable to you?

Book Six: Dona Isabella - Chapter 1: Don Antonio

"...Fr. Latour was thinking how each of these men not only had a story, but seemed to have become his story."

Describe someone who became part of your story.

Book Seven: The Great Diocese - Chapter 2: December Night

This is a beautiful chapter about doubt and faith. All of us have experienced doubt and faith in our lives. Describe an instance of doubt and faith that has affected you.

Book Seven: The Great Diocese - Chapter 4: Eusabio

"It was the Indian manner to vanish into the landscape, not to stand out against it."

Are there times when you wish for a

landscape in which to vanish? How would you describe that landscape and how would you vanish into it?

Book Nine: Death Comes for the Archbishop - Chapter 2

"I shall not die of a cold, my son. I shall die of having lived."

How would you like the story of your ministry told when you are gone? How can you use this story to help those you journey with in your ministry?

General Questions

How is spirituality reflected throughout *Death Comes for the Archbishop*? Consider especially Cather's portrayals of nature. Identify a specific example of spirituality in this work.

Upon reflection, is there a passage from the book that moved you - perhaps a favorite passage?

Conversely, is there a passage from the book that made you uncomfortable? Why?

Choose a passage or aspect from the book and write a theological reflection.

Continuing Education Hours, Getting Involved

As a community, when we read one work together, it brings opportunities for a common ground to begin our conversations. This project encourages both individual and community involvement. Here are some ways to read and reflect with your companions in the NACC, after you read *Death Comes for the Archbishop* and explore the resources provided here and on the website.

1. Write a theological reflection on a passage or aspect of the book. Send the reflection to the NACC office for possible publication in *Vision* or on the website.

2. Host a gathering and book discussion. This is a wonderful opportunity for you to connect with members in your area or via

e-mail. The NACC can help you to organize this gathering. If you are interested in hosting an event, contact Susanne Chawszczewski at schaw@nacc.org or (414) 483-4898. We can publish the information in *Vision* and on the website. Additionally, we would be happy to provide mailing labels, lists, and e-mails of members in your area.

3. Come to the 2005 Conference in Albuquerque, NM to find a real flavor of *Death Comes for the Archbishop*. Registration information about the conference will be mailed in January.

4. Use these opportunities when preparing for recertification. For questions about how to calculate your hours, please contact Susanne.

World Day of the Sick ▾ February 11, 2005



The World Day of the Sick is sponsored by the Vatican's Pontifical Council for Health Pastoral Care and has been celebrated since 1992 on the feast of Our Lady of Lourdes. This celebration is a reminder to pray for all those who are sick and to recognize and honor those who work in health care and those who serve as caregivers.

Over the last several years, the NACC has provided support materials for this celebration such as an ecumenical service, reflection notes and homily hints, prayer of the faithful, and so forth. These materials are available on the NACC website; go to www.nacc.org/resources/wds/default.asp.

For 2005, the National Association of Catholic Chaplains has created two new prayer cards for the celebration of World Day of the Sick: Prayer for the Caregiver and Prayer for the Sick. Note that the prayers this year are more inclusive of other faith traditions. On both cards the prayer appears in English on one side of the card and in Spanish on the reverse.

For a preview of the cards, go to <http://www.nacc.org/resources/wds/default.asp>.

Prayer Card Order Form

Item	Quantity *	Cost (each)	Total
▾ Card 1 – Prayer of the Caregiver			15¢
▾ Card 2 – Prayer for Sick Persons			15¢
▾ Set of both cards			25¢

**A minimum of 10 cards must be ordered.*

Grand Total _____
(Includes shipping & handling.)

Please enclose a check for the Grand Total, payable to the NACC.

Name _____

Title _____

Institution _____

Street address _____

City & state _____ Zip code _____

Phone number _____

**Mail the check and order form to:
National Association of Catholic Chaplains
P.O. Box 070473
Milwaukee, WI 53207-0473
(414) 483-4898**

ORDERS MUST BE RECEIVED IN
THE NACC OFFICE NO LATER THAN
JANUARY 24, 2005.

Orders will be shipped via
U.S. Postal Service.

Please remember in your prayers:

▾ **Brother Lewis Morrow** of Holy Cross Community in Dartmouth, MA, who died in September at age 67.

Brother Morrow was a brother of the Holy Cross and served as a chaplain at hospitals in Brooklyn before retiring to Massachusetts last year. He helped produce programs for television ministry and was active in boosting economic development in a small village in Ecuador, making regular trips to that country. He also helped establish satellite health-care clinics at 25 parishes in Brooklyn.

In Memoriam

▾ **Sister Marie Behan, CSJ**, who died Sept. 14 in Latham, NY at age 76 after a severe stroke. She spent the first 28 years of her sisterhood as an elementary school teacher and became a chaplain in 1987 at St. Clare's Hospital in Schenectady, NY. She also served in pastoral ministry at St. Patrick's Church in Binghamton, NY. She retired in 2003.

Noted authors, counselors to address conference

Preparations are accelerating for our annual conference next spring, held jointly with the Association of Professional Chaplains. NACC members can watch their mailboxes for a registration brochure in early January. In the meantime, we can tell you about the exciting and diverse group of four plenary speakers who will address the conference.

Joan Guntzelman, Ph.D.

For 30 years, Joan Guntzelman has dealt with and counseled others in dying, loss and grieving. With *God Knows Your Grieving: Things to Do to*



Help You Through, she draws on a lifetime of experience, offering support to people struggling to cope with their own losses. She is a clinical assistant professor in the

department of psychiatry at the University of New Mexico School of Medicine. A general counselor with a private practice, Guntzelman often presents lectures and workshops to professionals in the medical field and other caregivers on how to deal with loss and adjust to the stresses of their jobs.

Guntzelman also directs Ring Lake Ranch, a not-for-profit, non-denominational retreat center in the Wind River Mountains of Wyoming that provides seminars and discussions for spiritual renewal. She holds a Ph.D. in counseling psychology from the University of New Mexico and a master's in clinical psychology from Xavier University in Cincinnati.

She has written numerous articles and several books, including *124 Prayers for Caregivers*, *Blessing Life's Losses: Letting Go and Moving on*, and *A Retreat With Mother Teresa and Damien of*

Streams in the Desert

A Call to Professional Renewal

Association of Professional Chaplains
National Association of Catholic Chaplains:
Celebrating 40 Years



April 9-13, 2005 ▾ Albuquerque, New Mexico

Molokai: Caring for Those Who Suffer (Hope for the Poorest of the Poor).

Guntzelman lives in Albuquerque, NM and Dubois, WY.

John Izzo, M.Div., Ph.D.

John Izzo is one of North America's most highly sought after speakers.

In his enlightening and deeply spiritual programs he shares his insights and spiritual wisdom from over 20 years in the personal development and lifestyle change industry. John's insights and perspectives on personal well-being and change



has put him in front of audiences around the world.

Since beginning his career as a Presbyterian minister in 1977 at the tender age of 20, Izzo has been inspiring people to live spiritually nourishing lives. Today, he is one of North America's most influential change agents, a powerful speaker, and a phenomenal retreat leader.

His international best-selling book, *Awakening Corporate Soul: Unleashing the Power of People at Work* (Fairwinds Press) has been acclaimed as one of the first books in 1996 on leadership spirituality. *Values Shift: the New Work Ethic* is a

best-selling book on leadership values and integrity, and his book *Second Innocence* was published by Berrett-Koehler in 2004.

He has presented at numerous CEO conferences in the UK, South America, North America and the former Soviet Union. He contributes annually to the Greenleaf Center for Servant Leadership's Convocation, and is a former speaker with Wyncom's Lesson's in Leadership distinguished expert series. His work has been featured on Canada-am, ABC

World News, CNN, Newsday, Wisdom Network, NPR and CBC Radio, and numerous international print media including *Association Management, INC. Magazine, Entrepreneur Magazine, Nurseweek, Profit Magazine, The American Medical Journal, The Los Angeles Times, and Maclean's Magazine.*

Dr. Izzo presents to over 100 audiences annually, and he and his associates have worked with hundreds of organizations. Although raised in New York, he is a dual citizen of Canada and the United States. He lives in the mountains of Howe Sound, British Columbia with his wife Leslie and their three children.

Rev. Richard Rohr, OFM

Father Richard Rohr is a Franciscan of the New Mexico Province. He was the founder of the New Jerusalem Community in Cincinnati in 1971, and the Center for Action and



Contemplation in Albuquerque in 1986, where he presently serves as founding director.

Richard was born in 1943 in Kansas. He entered the

Franciscans in 1961 and was ordained to the priesthood in 1970. He received his master's degree in theology from Dayton

that same year. He now lives in a hermitage behind his Franciscan community in Albuquerque, and divides his time between local work and preaching and teaching on all continents. He considers the proclamation of the Gospel to be his primary call, and uses many different platforms to communicate that message. Scripture as liberation, the integration of action and contemplation, community building, peace and justice issues, male spirituality, the enneagram, and eco-spirituality are all themes that he addresses in service of the Gospel.

His best-known books are *Simplicity*, *The Wild Man's Journey*, *Quest for the Grail*, *Everything Belongs*, and *Job and the Mystery of Suffering*. His best-selling tape is *The NEW Great Themes of Scripture*. His latest book is *Soul Brothers* published by Orbis Press. His new book, *Adam's Return: The Five Promises of Male Initiation*, was published in September 2004 by Crossroad Press in New York.

Clarissa Pinkola Estés, Ph.D.

Clarissa Pinkola Estés is an internationally acclaimed poet, scholar, Jungian psychoanalyst and a cantadora (keeper of the old stories in the Latina tradition). Her work is known worldwide for its

groundbreaking explorations into the nature of the psyche through the use of mythos, fairy tales, poetics and psychoanalytic commentary. She credits what has



been called her "infinitely rich" and "one-of-a-kind voice" to having been immersed since childhood in the old and demanding oral traditions handed down to her "day by day, task by task, test by test, prayer by prayer, story by story," by her immigrant and refugee family elders, both Hungarian Magyar and Mexicano.

Dr. Estés is a former executive director and director of training for

the C.G. Jung Center for Education and Research. Her doctorate is in intercultural studies and clinical psychology, and she has taught and practiced privately for 33 years.

Her published works include *The Gift of Story*, *The Faithful Gardener*, *Women Who Run With the Wolves* (published in languages worldwide and on the *New York Times* best seller list for three years), and an 11-volume collection of original, best-selling audio works including a 12-part live performance series, *Theatre of the Imagination*, broadcast on Pacifica and National Public Radio networks across America and Canada.

For her lifelong social activism and writing, she is the recipient of the Las Primeras Award from MANA, The National Latina Foundation; The President's Medal for Social Justice from The Union Institute; the first recipient of the Joseph Campbell "Keeper of the Lore" Award; and Spirit of Women Award 1998-99 given by the National Consortium of Health and Hospitals. Dr. Estés founded and directs La Sociedad de Guadalupe, a human rights educational organization that broadcasts, via audio, throughout the world and has a special interest in adult literacy.

Conference Site

Most of the common conference events will be held at the Albuquerque Convention Center, 401 2nd Street NW. There will also be some association-specific events held at the conference hotels. Complete information will be provided onsite at the conference.

Hotel Information

The APC and NACC have contracted with three hotels, all within one block of the Albuquerque Convention Center. Please be sure to reserve your rooms by March 9, 2005 to receive the conference rates.

Doubletree Hotel Albuquerque
201 Marquette, NW
Albuquerque, NM 87102
Local Phone: 505-247-3344
Reservations: 1-800-222-TREE

Room Rates:
Single: \$109 plus taxes
Double: \$119 plus taxes
Triple: \$129 plus taxes
Quad: \$149 plus taxes
Suites: \$196 plus taxes

<http://www.doubletreealbuquerque.com> for hotel information and amenities.

Hyatt Regency Albuquerque
330 Tijeras, NW
Albuquerque, NM 87102

Local Phone: 505-842-1234
Reservations: 1-800-633-7313

Room Rates:
Single: \$115 plus taxes
Double: \$115 plus taxes
Triple: \$130 plus taxes
Quad: \$145 plus taxes

<http://albuquerque.hyatt.com/property/index.jhtml> for hotel information and reservations.

La Posada de Albuquerque
125 2nd Street NW
Albuquerque, NM 87102
Local Phone: 505-242-9090
Reservations: 1-800-777-5732

Room Rates:
Single: \$99 plus taxes
Double: \$109 plus taxes
Triple: \$119 plus taxes
Quad: \$129 plus taxes

<http://www.laposada-abq.com> for hotel information and reservations.

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THE NATIONAL ASSOCIATION OF CATHOLIC CHAPLAINS

NACC recognizes Annual Appeal donors

We are pleased in this issue to pay tribute to the members and friends of the NACC who have contributed vital support to our Annual Appeal, which will allow us to extend the reach of our ministry beyond institutional walls.

We thank these many donors who have shared their blessings and joined with us in the past fiscal year (through June 30, 2004) as partners in our effort to share the healing ministry of Jesus. Together with our partners, the NACC will work toward our goal of making professional spiritual care and counseling available to all God's people.

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 Rev. Felix C. Ojimba
 Kathleen O'Wrill, in memory of Chaplain Norm Clark
 Theresa Pasquarello, DHM
 Greta Day Pate
 Rev. G. Verle Peterson
 Sister Rosemary Petrie, RSM
 Harleen Pino
 Kathy Ponce, in honor of Sister Jenny Ricci, CND
 Sister Mary Ann Poppler, SCC
 Karen J. Pozniak, SNDdeN
 Ellen Kruger Radday
 Jim Radde, SJ, in honor of Bro. J. Fillmore Elliot, SJ
 Ken Rancourt, in memory of William F. Turner
 Sr. Mary Sean Reagan
 Kathryn Foster Redig
 Ellen Reilly, SND, in memory of deceased long-term patients of NE Sinai Hospital, Stoughton, MA
 Sr. Agnes Reinert, OSB
 Sr. Jenny Ricci
 Most Rev. Frank J. Rodimer, Diocese of Paterson, N.J.
 Rev. H. James Roleke, SJ
 Ignatius M. Roppolo

Most Rev. George E. Reuger
 Peter M. Ruta
 Judy Ryan, SNJM
 Sr. Clement M. Sabol, VSC
 St. Francis Medical Center, Inc., Monroe, LA
 Sr. Mary Hope Sanchez
 Karen Sanders, in honor of Joe Driscoll
 Dorothy Sandoval
 Fr. Paul L. Sankoorikal
 Sister Mary Schmidt, RSM
 Peg Schneider
 Sister M. Veronica Schultz
 Rev. Arthur B. Schute
 Rev. Norman R. Schwartz
 Sister Rita Sculti, OP
 Rosemary Seibert, RSHM
 Rose Sevenich, OSF
 Rev. Thomas Shaughnessy
 Nancy A. Siekierka, in honor of Rev. Joe Driscoll
 Sisters of Mercy of the Holy Cross, in honor of Sister Martha Amann
 Gene E. Sitzmann
 Betty Skonieczny
 Mary R. Skopal, SSJ
 Flo Smithe, in memory of Sister Rose Carmel
 John E. Sroka
 Sister John Marie Stack, OSF
 Chaplain Patricia Stockdale
 Rev. James H. Sullivan, SMA
 Michael L. Sullivan
 Anne Tahaney, OP
 Judith A. Talvacchia, M.Div, in honor of Fr. Joseph Driscoll
 Mrs. Mary M. Tatman
 Rev. Richard A. Tessmer
 Rev. Louis Tuffuor, in memory of Mr. Simon Tuffuor
 Fr. George V. Uralikunnel, in memory of Mariam and Varghese Uralikunnel
 Sr. Suzanne M. Vandenhede, OSM
 Chaplain Jim Varick, in honor of Chaplain

Mary Pisaniello

Diane M. Wagner

Bro. M. Benedict D. Wallbaum, CDM, MA, in memory of Florence Y. Wallbaum

Dolores Walsh, SC

Patricia M. Walsh, OP, in honor of the Catholic Community of Pleasanton, CA

Sr. Dorothy Wenzel

James D. West

Paula K. White, in memory of Charles E. White

Regina J. White, MSC

Margaret White-Sherlock, in memory of Aleatha Miracle

Jeannette M. Wyrick, in honor of St. Vincent's Pastoral Care Dept., Birmingham, AL

Bro. Edward Yochim, CFA

Sr. Renee Zastoupil

Darrell and Mary Fran Zeller

Charley

Continued from page 1.

to unfamiliar hospitals, many over 100 miles away.

Our emergency department, however, stayed open throughout the disaster and recovery period. Within six hours, Florida-based Disaster Management Assistance teams arrived for triage and support.

Help came. Our part-time priest came in on the weekend. Stephen Ministers (pastorally trained laypeople from a local Methodist church) came by to say they were available. They were already oriented and had hospital badges, so they were a good fit for pastoral support.

On Monday morning, I was asked to coordinate 24-hour spiritual care for the Emergency Department for two weeks and to get mental health support for all caregivers in four facilities for as long as necessary. The director of pastoral care was on an extended retreat/vacation. Our part-time priest was leaving in two days. I was energized by the challenge!

As soon as I walked out of the meeting, two DASH (Disaster Assistance to Stricken Hospitals) chaplains from Holy Cross Hospital in Fort Lauderdale showed up. This organization had been put together as a result of Hurricane Andrew in 1992. They provided weekend and night duty so we could rest and attend to our personal losses.

With intermittent communications, directors of pastoral care in hospitals of counties not affected were called to secure help. A primary goal was to obtain persons with at least CPE, mental health, parish nurse or Stephen Ministry training. Eventually, 21 persons assisted

with pastoral coverage from eight counties and five health-care institutions. Another 20 have been available for mental health support for our employees.

Every chaplain or mental health counselor involved was identified with credentials, addresses and phone numbers. They were instructed to wear professional badges to get past the National Guard as they entered the county, because of the curfew and entry restrictions to residents only.

What most impressed chaplains was the teamwork and immense strength shown by nurses and doctors in spite of their own property damage. Enduring their own personal stresses, the caregivers soldiered on as they dealt with illnesses exacerbated by the storm, serious mental health issues, motor vehicle accidents, lightning strikes, fetal deaths and storm-related injuries.

One chaplain described her 120-mile drive and the terrible smell emanating from the churned-up Peace River. "There was no denying the disaster," she recalled. Another emotionally drained chaplain cried all the way home. He felt the sense of hopelessness from the patients who had lost everything and were sick on top of it. But sharing the stories of difficult times felt sacred for the chaplain.

Four hurricanes affected our community within a six-week period. Charley, the first, damaged over 80 percent of our caregivers' homes. Many now have extended family members or neighbors living with them. Cars were damaged as well. The response from the federal government has been incredible, but roofers are unable to keep up.

Our anxiety level grew as Hurricane Frances was on its way just weeks after

Charley. Frances and Jeanne, with 75-mph winds, pulled off many of the temporary repairs we had already done to our roofs. Fear and powerlessness loomed in our minds as Ivan slowly inched its way toward us and then headed away.

The week before Hurricane Charley, we had learned that a non-faith-based company had offered a letter of intent to buy our hospital. Uncertainty, grief, and personal devastation have taken a toll on our emotionally drained caregivers.

Persons trained in critical incident stress management were deployed from the government and county. The Florida Baptist Convention sent clergy and a psychiatrist. Bon Secours Venice Hospital, 40 miles away, supplied a counselor. Every caregiver who showed up to the personnel pool was given a job in the first month. Some were sent to other facilities to work or sat guarding a door. Others helped clean up their coworkers' yards. With the help of our generous health care system, no employee has had to miss a paycheck, and emergency loans are available.

Weeks later, we continue to provide for the emotional and spiritual needs of our caregivers as they travel "the zone of uncertainty" in a community blessed with courage, generosity and hope.

Karen P. Riley, NACC Cert., is chaplain/parish nurse coordinator at Bon Secours St. Joseph Hospital in Port Charlotte, FL.

It felt like I was everywhere, trying to get the pulse and heartbeat of our wounded hospital body

NACC Certification Spring - Fall 2005

Spring Locations and Dates

Saturday/Sunday April 30-May 1, 2005

Atlanta, Georgia

Baltimore, Maryland

Los Angeles, California

Milwaukee, Wisconsin

St. Louis, Missouri

Due date for materials
February 1, 2005

Fall Locations and Dates

Saturday/Sunday October 1-2, 2005

Boston, Massachusetts

(Southwest Location - TBD)

Milwaukee, Wisconsin

Portland, Oregon

St. Louis, Missouri

Due date for materials
July 1, 2005

Procedures for Certification Process

1. Full membership in the NACC is required before applying for certification. Inside the membership application, you may indicate that you would like to receive a certification application.
2. Submit the *original* certification application, *copies* of your supportive materials (see Checklist for Supportive Materials Required for Certification Interview), and the certification application fee to the national office by the due date for materials listed above. Materials must be postmarked no later than February 1, 2005 for a spring interview and July 1, 2005 for a fall interview.
3. Include a short cover letter indicating your first and second preference for an interview site.
4. Keep a copy of all materials submitted to the national office, including the application form, as additional copies (3) must be made and sent to your interview team members when you are notified that a team has been assigned.
5. Materials are reviewed to verify that you have met all the formal requirements for an interview.
6. After your materials are determined to be in compliance, an interview date, location, and interview team will be assigned.
7. When you receive notice of your interview team, you are responsible for sending copies of your certification materials to each of the team members. Your materials must duplicate those sent to the national office with your original application. These copies are to be mailed by Fed Ex, UPS, or certified mail, at least 30 days before your interview date. The copies will be returned to you after the interview. The office copy will be kept until the process is closed, and then this copy will be destroyed.

To reduce the need for extensive travel, the Certification Commission has increased the number of locations for interviews. However, there is a chance that you may not receive your first preference for an interview location. The number of interviews scheduled at any one site will be determined by the number of available interview team members living in, or close to, the interview site.

The Certification Commission recommends that you seek mentoring from a certified NACC chaplain or supervisor as you enter the certification process.

A new program, a new column, and a request

A happy and peaceful November to all of our members and readers. We hope you're ready to give thanks soon, and then to celebrate the timeless mystery of Advent and of Christmas.

On page 8 of this issue, you can learn about a new initiative for the NACC, which we're calling One Book, One Association. In the next few months, we are encouraging all our members to read the novel *Death Comes for the Archbishop* by Willa Cather, and to get together to discuss it.

We plan to make this an annual event. Our education and professional practice director, Susanne Chawszczewski, has done all of the planning and research this year. But if you are interested in helping to choose the next selection or in preparing study materials, please contact Susanne at 414-483-4898 or schaw@nacc.org.

A new feature debuts in this issue of *Vision*. If you turn to page 6, you will find the first installment of "Seeking, Finding." This is intended to be a monthly column of theology, reflection, and/or inspiration. It may take any number of forms and angles, but the goal is to give you something to think about for the coming month. Linda Piotrowski volunteered to be the first writer, and produced an excellent reflection on caring for others in the midst of suffering, and finding God in unlikely places.

Editor's Note

We have a small core of volunteers who have agreed to contribute "Seeking, Finding" columns once or twice a year in rotation, but we are always open to new voices. If you have an idea for a column, please send a one- or two-paragraph summary to dlewellen@nacc.org, or mail it to David Lewellen, National Association of Catholic Chaplains, PO Box 070473, Milwaukee, WI 53207.

There are two more specific topics that we'd like to cover in the near future. First of all: Are you involved in a grief support group? What are the issues that its members face? What are questions that they ask? How do you, and other members of the circle, offer counsel and support? What are your challenges as leader or facilitator?

The next topic is for chaplains who work at a teaching hospital. How much training in spirituality or chaplaincy do medical students get nowadays? Does your institution have a program for students to shadow chaplains? What do they learn from it? How does the medical school regard your work? What other programs for cross-disciplinary enrichment are there?

If you encounter either of these issues regularly and would like to write an article about your experience, please send a one- or two-paragraph summary to the above address.

Waiting in Joyful Hope 2004-05: Daily Reflections for Advent and Christmas

By Robert F. Morneau

Liturgical Press, Collegeville, MN; 2004, \$2.00

Reviewed by Linda F. Piotrowski

Waiting in Joyful Hope 2004-05 by Most Rev. Robert F. Morneau is quite a find! Everything about this little book, from Ann Blattner's cover design showing Joseph and Mary on their journey to the clear page layouts and readability, makes it a wise choice as a road map for a personal or communal journey in faith at Advent.

Bishop Morneau, auxiliary bishop and vicar of priests for the Diocese of Green Bay, Wis., uses a familiar format of pulling out a quote from the listed daily scriptures along with a mini-theological reflection on the chosen passage. He then poses questions to serve as a meditation. He ends with a brief prayer. The mini-reflections refer to such diverse sources as scholar Walter Bruggeman, poet Gerard Manley Hopkins, and entertainer Frank Sinatra, providing food for thought and insights into the mystery of the coming of the savior.

Always eager to find resources for use with the residents at

Book Reviews

the nursing home where I minister, I asked residents in my prayer study/group to undertake an early Advent journey. We used December 21, with its topic of Advent Joy. The residents found the format pleasing and the reflections easy to understand. The meditation questions about experiencing joy in our lives and the relationship between presence and joy provoked a lively discussion with much meaning, given their current situation in life. I am confident that this year's Advent journey will be more meaningful for them and me as I have chosen to use the reflections with them this year.

The little book will fit easily into a pocket or purse, which can make it a readily accessible daily companion as you await the coming of the Christ. Costing only \$2 (with additional discounts for quantities of 50 or more), for less than the price of a 14-ounce bag of M&M's, you can purchase this little gem of spirituality as a thank-you gift for local clergy, volunteers serving a hospital or nursing home, or for spiritual care and other staff members wanting to journey through Advent together.

Linda F. Piotrowski, MTS, NACC Cert, is the interfaith chaplain for Central Vermont Medical Center in Berlin, VT.

Book Reviews

Aging, Death, and the Quest for Immortality

C. Ben Mitchell, Robert D. Orr, and Susan A. Salladay (eds).

Grand Rapids, MI: Eerdmans, 2004, \$24

Reviewed by John Gillman

The title of this collection of thirteen essays is engaging and current. The aging process, inevitably resulting in death, seems to lead away from any quest for immortality. The first two realities named in the title are uninvited and usually unpleasant. The latter names a longing of the human spirit, whether in the hope of resurrection (from a Christian perspective) or for research yielding physical bodies that will never die (from a scientific perspective).

This volume is sponsored by the Center for Bioethics and Human Dignity, which aims “to bring Christian perspectives to bear on today’s many pressing bioethical challenges.” The first three essays, by an octogenarian, a theologian, and a geriatrician, echo the Biblical theme that the aim for all living and dying is “that God be gloried.” Scripture is liberally cited. The theologian most often quoted is Jonathan Edwards, the Calvinist leader of the eighteenth-century Great Awakening. Unfortunately, this section contains mistakes in Latin expressions and Greek translation.

More helpful are the four essays on ethical issues. Robert Orr underscores the importance of decision-making and truth-telling (a discussion that would be strengthened by including cultural issues). John Kilner offers an insightful critique of utilitarian ethics, which has been used to argue for an age-based rationing of health care. In a nuanced discussion, he asserts that “age per se is not a medically relevant factor in determinations about individual patients.” Stephen Post cautions clinicians about not confusing – and hence, misdiagnosing – depression with dementia.

Among the three essays on caring for the elderly, Jackie Cameron’s contribution on “Palliative Care: Suffering and Healing at the End of Life” stands out for the clarifications made between palliative care and hospice care – as well as for the implied critique of earlier essays, particularly the one by the theologian R. Geoffrey Brown. Cameron, an M.D. and clinical instructor, confesses, “I hate death” and judges that “death is inherently bad.” Identifying herself as a Christian, she goes on to say, “We are sometimes too quick to speak of resurrection or to assert that death is merely the gateway to eternal life. We sometimes jump immediately to our future hope without being willing to face the difficult realities of the present.”

But in an earlier essay, Brown stated that in death and dying Christians are “substantially free from fear,” and later, playing on a line from a movie, declares: “Death may be the enemy, but I love the enemy.” It would be fascinating to have Cameron and Brown on the same panel to discuss their views on death.

The last three articles, under the rubric “The Quest for

Immortality,” take up the issue of stem cell research and include a personal reflection on disability by a mother whose daughter has a neuromuscular disease. The authors of the two articles on stem cell research argue that it is a misguided quest unsupported by Biblical principles; one author calls it a twentieth-century form of alchemy. While these chapters raise important moral principles, the debate is more complex than these authors indicate.

This collection of essays, uneven in quality, is nonetheless helpful for the issues it engages and the questions it raises.

John Gillman is an NACC and ACPE supervisor at VITAS Hospice Care in San Diego.

Sexual Abuse in the Catholic Church: Trusting the Clergy?

Eds. Marie M. Fortune and W. Merle Longwood.

Binghamton, NY: Haworth Press, 200, \$17.95.

Reviewed by Rabbi David J. Zucker

This slim volume addresses recent priestly sexual boundary violations in the American Roman Catholic Church, what has been and might be done about it. It publishes the proceedings of a seminar in Albany, NY in 2003.

Archbishop Harry J. Flynn of St. Paul and Minneapolis, the chair of the U.S. bishops’ Ad Hoc Committee on Sexual Abuse, focuses on what the USCCB tried to achieve at their 2002 Dallas conference. He writes of national standards but points out that the NCCB is not a governing body.

Rev. Marie Fortune, an internationally known figure in combating sexual boundary violations, suggests that for too long the lawyers, not the Gospel, have been guiding the process. “The goal must be the protection of the vulnerable.” In her words, the Church needs to move from “an institutional protection agenda” which avoids action, citing Mt 7:1, “Do not judge, so that you will not be judged,” and instead move to a proactive “justice-making agenda” to confront sin. She quotes Lk 17:2, “It would be better for you if a millstone were hung around your neck and you were thrown into the sea than for you to cause one of these little ones to stumble.”

Professor Carolyn Moore Newberger of Harvard Medical School writes that priesthood “provides authority and legitimacy. As a consequence, you have to assume that people who want access to children – people who seek opportunity, secrecy, and power and credibility with children in order to groom them for sexual relationships – will enter the priesthood Pedophiles will be among us, and . . . we have to do what is necessary to make sure that they do not have opportunities to have access to children in order to exploit them.”

The Rev. Donald B. Cozzens, professor of religious studies at John Carroll University in Cleveland, points out that the Church needs to be more transparent and provide actual numbers. In response, Bishop Howard J. Hubbard of the Diocese of Albany

See Book Reviews on page 21.

Book Reviews

Continued from page 20.

urges a balance between “providing a compassionate and comprehensive response to the crisis, including compensation to victims” and at the same time “continuing to support all of the other important church programs that serve society.”

The book concludes with Latina and African American perspectives, and an

essay about the Church and its relationship with gay men.

Desire to protect the clergy, predators who want access to children, and institutional reluctance to publish data are true across the religious spectrum. They are not unique to Catholicism. Likewise, Fortune’s comment that “sexual activity in this context is exploitative and abusive” knows no religious boundaries. While the framework for this book is the Catholic Church, many of the issues are equally

applicable to other religious communities – Jewish, Protestant, Muslim, Buddhist, and so on. These are human and institutional problems, not matters that are religious-specific.

Rabbi David J. Zucker, PhD, is chaplain/rabbi at Shalom Park, a senior care center in Aurora, CO. Certified by the National Association of Jewish Chaplains, he chaired the Executive Planning Committee of the 2003 EPIC Cognate Chaplains' conference in Toronto.

Nouwen Society launches Web site

New York (CNS) – The Henri Nouwen Society has launched a new Web site at www.henrinouwen.org to recognize the late priest and author.

The site offers daily meditations, weekly reflections and discussion guides based on Nouwen’s work. The Dutch priest died in 1996, having written more than 40 books on the spiritual life.

The Nouwen Society was founded in 1998 to further the priest’s legacy and bring together admirers of his work in a Christian community. An events calendar on the Web site lists retreats and reading groups throughout North America.

Hospice pioneer Kubler-Ross dies at 78

Scottsdale, AZ – Elisabeth Kubler-Ross, the Swiss-born psychiatrist who first identified the five stages of grieving, died Aug. 25 at age 78.

Kubler-Ross described denial, anger, bargaining, depression and acceptance in her bestseller “On Death And Dying,” published in 1969 and still in print. The research helped the medical profession to deal with a factor it had long refused to acknowledge.



In Brief

She lectured throughout the 1970s on life after death, sparking controversy with her claims of being helped by “spiritual guides.”

She lived in Virginia and southern California and in both established hospice-style retreats. She did not found the hospice movement but helped it grow. Today the US has over 1,200 such institutions.

NACC member to serve bereavement group

NACC member Sr. Betty Anne Darch of Evansville, IN has been elected to a three-year term on the Board of Directors for the National Catholic Ministry to the Bereaved.

The NCMB is a national organization headquartered in St. Louis that supports bereavement ministry in the United States. It offers pastoral and spiritual support, education and resources to the bereaved, caregivers, agencies, congregations, and dioceses.

Deacon Donald Wehling
Des Plaines, IL
Recovery from kidney surgery

Marilyn Warczak
National office, Milwaukee
Surgery

Deacon William C. Zoeller
Greenfield, WI
Cancer



Prayers for Healing

If you know of an association member who is ill and needs prayer, please request permission of the person to submit their name, illness, and city and state, and send the information to the *Vision* editor at the national office. You may also send in a prayer request for yourself. Names will be posted here for three months, but may be reposted if there is a continuing need.

Plans move ahead for NACC's 40th anniversary

Our 40th Anniversary Committee has been meeting diligently as we prepare to celebrate 40 years of the NACC. It has been such a wonderful experience to participate in conference calls with some of our members who have so much history to share. Many wonderful ideas have surfaced for our celebration – special events at the 2005 Conference in Albuquerque as well as special projects throughout the next year.

Please watch future issues of *Vision* for information. All of you, in one way or another, have been part of this rich history. We will be asking for your reflections in the near future as we

place the finishing touches on a series of questions for you to reflect upon.

We have scheduled the following special 40th anniversary events for the conference:

Saturday, April 9, 2005

40th Anniversary Plenary Session — 3:00 p.m.

Monday, April 11, 2005

40th Anniversary Celebration of the Eucharist — 4:30 p.m.

Monday, April 11, 2005

40th Anniversary Banquet — 6:00 p.m.

Positions Available

▼ CHAPLAIN – ROMAN CATHOLIC PRIEST

Hartford, CT – Roman Catholic priest chaplain needed to provide pastoral and sacramental care to Roman Catholics throughout the hospital. Cooperative ministry with interfaith chaplains and CPE students. Priest will do interfaith spiritual care to all patients, families, and staff on assigned units. Bachelor's degree and theological degree is required. Ordained priest in the Roman Catholic church. Must be in good standing and eligible for faculties to be granted. Must have four units of CPE (ACPE or NACC) and be a certified member of APC or NACC or eligible for and willing to pursue certification. Experience in hospital chaplaincy preferred. Fluency in Spanish preferred. Position is full time, day/evening shift. Please submit your resume to kgrenie@harthosp.org in the Human Resources Dept. at Hartford Hospital for further consideration or fax to (860) 545-2351. Hartford Hospital, 80 Seymour Street, P.O. Box 5037, Hartford, CT 06102. Visit our website at www.harthosp.org.

▼ CHAPLAIN

Durango, CO – Mercy Medical Center has a part-time opening for a CPE-trained chaplain to work in a team environment in the Spiritual Care Department. Must be willing to participate in rotation of night and weekend call. Bachelor's degree in theology or related area, two units of CPE. One year experience in spiritual care in a medical setting preferred. Clinical, pastoral care techniques, verbal and written communication skills, computer skills, ability to process ethical/medical situations with the ability to transverse campuses and speak publicly. Mercy Medical Center is a JCAHO-accredited, 83-bed acute care facility. Durango is nestled in the Animas valley of the San Juan Mountains. in southwest Colorado. Contact Pati at 800-345-2516 ex. 2408 for more information. Resumes may be submitted to: Mercy Medical Center, Human Resources, 375 E. Park Ave, Durango, CO 81301. Fax: 970-382-2410. Website: www.mercydurango.org. EOE.

▼ CPE RESIDENCY

Chicago, IL – Resurrection Health Care has an opening for one nine-month Clinical Pastoral Education residency position available Nov. 29, 2004 – Aug. 31, 2005, with stipend and health benefits. At Resurrection Health Care, CPE Residents go through a significant progressive curriculum focus from Level I to Level II CPE outcomes. The program has a variety of specialization areas, including ministries in the acute care settings, nursing and rehabilitation centers, retirement communities, and possibly behavioral health (which is

in the process of being completed). The following are required at the time of application: at least one unit of CPE, a theological degree (M.Div. or equivalency), and commission to function in health care ministry by an appropriate religious authority. Send your application materials to the Director of CPE, Resurrection Health Care, Clinical Pastoral Education, 1127 North Oakley Avenue, Chicago, IL 60622, Tel. 312-770-3326, Fax: 312-770-3352, or e-mail: rmanching@reshealthcare.org EOE

▼ DIRECTOR OF PASTORAL CARE

Baltimore, MD – The Jenkins Senior Living Community, located in southwest Baltimore and managed by Catholic Charities, provides services to over 400 older adults. Services include a skilled nursing facility, an assisted living facility, adult day care services and HUD subsidized apartments. We are looking for a compassionate and capable individual to direct our pastoral care program. This full-time position is responsible for providing, organizing, and implementing a program of spiritual care for our clients, as well as their families. Duties include administrative oversight, coordination of program services, pastoral care, support, and staff and volunteer supervision. Requirements include a bachelor's degree and three to four years of pastoral care experience with seniors in a nursing home or related setting, as well as supervisory responsibilities. Must be a Special Minister of the Eucharist or able to become one. Must have good communication skills and the ability to speak clearly and distinctly in English. Please visit our web site and apply online at www.cc-md.org. or contact Jean Shacklette, Human Resources Manager, 410-646-6504, jshackle@catholiccharities-md.org

▼ CHAPLAIN

Illinois – Resurrection Health Care has immediate openings for two part-time chaplains. Westlake Hospital, Melrose Park, IL is looking for a priest chaplain to coordinate all spiritual services for assigned units, attend patient conferences and ethical consultations on assigned units. Respond to codes, crisis situations, deaths as well as serve as on-call chaplain. Celebrate Mass and administer other sacraments. Must be an ordained Catholic priest in good standing. Pastoral experience in health care preferred. Resurrection Behavioral Health, Broadview, IL is looking for a chaplain to provide professional consultation and assessment of patient care needs. Assist patients/family in identifying/drawing upon their inner spiritual resources. Lead/co-lead spirituality groups on assigned behavioral health units. Pastoral experience in health care/behavioral health setting preferred. Master's degree in theology, four units of clinical pastoral education at a NACC or ACPE site. Certified as a chaplain by the NACC or ACPE. Send all resumes to Patricia Higgins, Westlake Hospital,

1225 W. Lake Street, Melrose Park, IL 60160, fax (708) 938-7452.

▼ DIRECTOR OF PASTORAL CARE

Nashville, TN – Saint Thomas Hospital, a 541-bed acute care facility, is a member of Saint Thomas Health Services, the area's largest faith-based healthcare system. Founded by the Daughters of Charity in 1898, Saint Thomas Hospital's mission, vision and values continue a tradition of serving all persons with special attention to those who are poor and vulnerable. The Director of Pastoral Care will plan, direct and collaborate with the Pastoral Care team to ensure the highest quality of spiritual care is offered to patients, their loved ones and employees. A minimum of five years' administrative experience is required. Master's degree in theology, spirituality or a related field is required, with five to ten years hospital experience or experience in the field of ethics, pastoral care and/or spirituality. Clinical pastoral certification in NACC or COC is preferred. Saint Thomas Health Services is a member of Ascension Health, the largest Catholic healthcare system in the country. Contact: Monika Shaw, Human Resources, Saint Thomas Hospital, 4220 Harding Road, Nashville, TN 37205. Phone: (615) 222-3865; fax: (615) 222-3812; Email: mshaw@stthomas.org; www.saintthomas.org. EOE

▼ CHAPLAIN COORDINATOR

Pensacola, FL – Chaplain to manage the pastoral care needs of 120 residents for The Haven of Our Lady of Peace in Pensacola, Fla. The Haven is part of the Ascension Health System. Eligible for certification by NACC and at least two years' experience required. Benefits include competitive salary, paid time off and retirement package. Sacred Heart is an equal opportunity employer. Please fax resume to: Employment Office, (850) 416-6740.

▼ PRIEST CHAPLAIN

Methodist Hospitals, Gary, IN – This position offers religious ministry to all hospital patients, families, employees and medical staff by providing spiritual leadership within a medical environment. This ministry does not intervene or supplant the ministry of a patient's clergyman. Coordination of the chaplaincy program with other departmental programs of the hospital is essential to promote total patient care. Chaplain must be ordained Catholic priest and demonstrate competence in delivery of spiritual care services, good interpersonal skills, caring in interventions with staff, patients and public. Possesses a mature and flexible personality in meeting unanticipated demands and priorities. Communicates effectively both orally and in writing. Able to work cooperatively within multidisciplinary teams. Bachelor of Divinity degree or equivalent and minimum of four quarters of CPE is required. Send resumes to Rebecca Gil Villareal, 600 Grant St., Gary, IN 46402; phone (219) 886-4380 or fax (219) 886-4249; e-mail rvillareal@methodisthospitals.org; www.methodisthospitals.org

▼ CHAPLAIN

East Chicago, IN – St. Catherine Hospital is a Catholic hospital with a history of treating everyone regardless of economic status and/or culture. We have an immediate opening for a full-time Catholic chaplain to join our ecumenical spiritual care team offering spiritual and creative ministry to our acute care patients as well as our outpatients and their families. Ability to work in a multicultural setting is necessary, and previous hospital ministry experience and Spanish-speaking is preferred. Qualified candidates will possess minimum requirements of a bachelor's degree in ministry or related field, NACC/APC certification or pursuing certification. Contact Kathleen Roque

(219) 392-7073 or fax/send resumes to St. Catherine Hospital, 4321 Fir Street, East Chicago, IN 46312. Fax: (219) 392-7169 or e-mail kroque@comhs.org. EOE

▼ DIRECTOR OF PASTORAL CARE AND EDUCATION

New York, NY – As an HCC staff member, to lead a multi-faith department at Memorial Sloan-Kettering Cancer Center – one of the world's premier medical institutions serving a diverse international clientele. It has a long history of well integrated professional pastoral care with a central role on the active psycho-social team. Qualifications: APC, ACPE, NACC or NAJC certified, high energy with a well developed sense of the role of professional chaplaincy, and excellent clinical, supervisory, and administrative skills. Send resume to: The Rev. George Handzo, Director of Clinical Services, The HealthCare Chaplaincy, 307 E. 60th St., New York, N.Y. 10022. Email: ghandzo@healthcarechaplaincy.org

▼ CPE RESIDENCY

Mayo Clinic, Rochester, MN – Residency positions beginning August 31, 2005 through August 31, 2006 for Resident I and Resident II applicants. Residents are offered a broad array of clinical opportunities, which include medical and surgical subspecialties, diverse intensive care unit ministries, organ transplantation, a children's hospital, a psychiatric hospital and a regional trauma center. Two different hospital campuses and three different certified supervisors make this a uniquely powerful learning environment. Mayo Clinic health and dental benefits available to residents at a reasonable rate. The Resident stipend is \$25,500 for 12 months, four consecutive quarters of CPE. For program information, e-mail cpeprogram@mayo.edu, or write Mayo Clinic CPE, 201 West Center Street, Rochester, MN 55902, phone: (507) 266-7275; fax: (507) 266-7882; website: www.mayo.edu

▼ CHAPLAIN, PASTORAL CARE

Adrian, MI – The Pastoral Care Department of Adrian Dominican Sisters Campus has an opening for a chaplain to become a member of a five-person interdisciplinary team supporting the dignity of each sister in residence at the Dominican Life Center and enabling her to function in a holistic manner. The chaplain will provide a wide range of pastoral services for residents requiring flexibility, vision for future, and a genuine interest in gerontology. Qualifications include certification or in the process of certification by College of Chaplains or National Association of Catholic Chaplains, advanced degree in theology or equivalency, background in gerontology and skills in group facilitation, and the ability to function well under stress and cope with crisis situations. Send resume to Louis Martin, Director of Human Resources, 1257 E. Siena Heights Dr., Adrian, MI 49221; e-mail lmartin@adriandominicans.org; tel. (517) 266-4101.

Position Wanted

Certified Chaplain seeks full/part time ministry in the Santa Barbara, CA area. Very highly skilled with counseling and supporting persons with disabilities. Needing small hospital or nursing home or hospice work due to my own physical disability and difficulty walking long distances. I also recently obtained an administrator certification from the State of California for elderly care facilities. Please contact: Mark Andrew Dextraze, P.O.Box 846, Santa Ynez, CA 93460; (805) 350-2732; dextrazemark@aol.com

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Portland, Oregon
theresa.edmonson@providence.org

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erjohnent@aol.com

Calendar

December

- 5-6** COMISS Network forum, Alexandria, Va.
- 17** Copy deadline, February *Vision*
- 24** Christmas Eve; national office closed
- 27** National office closed in lieu of Christmas Day
- 31** New Year's Eve; national office closed

January

- 1** Supervisor certification materials due at NACC office
- 3** National office closed in lieu of New Year's Day
- 9-12** National Association of Jewish Chaplains annual conference, Philadelphia
- 24** Copy deadline, March *Vision*

THE NATIONAL ASSOCIATION OF
CATHOLIC CHAPLAINS

3501 South Lake Drive
P.O. Box 070473
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