

vision

National Association of
Catholic Chaplains

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NACC chooses new leader

By David Lewellen

The NACC's new Executive Director is accustomed to looking at chaplaincy from different angles.

Lawrence Seidl spent 10 years as a chaplain and 14 years leading pastoral services at the Catholic Health Association before becoming Vice President of Mission Integration at St. Francis Health Center in Topeka, KS. His first day in our office was March 31. Because of his involvement in pastoral care over the years, some of you may already know him as Larry.

Having been both a working chaplain and a hospital administrator, he believes, gives him a broader perspective on what the association needs.

"What excites me is the environment appears to bring about a convergence of events, all of which offer us the opportunity of seeing and doing ministry differently," Seidl said. "The NACC can and will be challenged to re-imagine itself, particularly the practice of chaplaincy. The key to success is strategic partnerships." He welcomes the chance to work with "an organization that's very grounded to get that into place."

"Larry shared a common vision with us," said NACC Chair Joan Bumpus. "He was excited about our vision and the strategic plan." At his current position, she said, he is "in touch with what pastoral care departments and chaplains as individuals experience at the grassroots level." At the same time, his knowledge and contacts as a hospital mission leader may provide "partnerships we're missing and could be touching base with beyond the cognate groups. ... He knows from an administrator's perspective what they're looking for from pastoral care."

"We were looking for someone with business and leadership skills along with chaplain qualifications, and that was the combination we found in Larry Seidl," said Bridget Deegan-



Lawrence Seidl

Setting out on a journey full of hope

By Lawrence G. Seidl

The year 2005 marks the 40th anniversary of the NACC. This occasion affords us the opportunity to both evoke the past and anticipate the future. We evoke the past not as an exercise in trivia but as an opportunity to re-examine the cornerstones on which the organization was built. In that light, the future suggests that we have both a responsibility to change and not to change those cornerstones.

In the spirit of our 40-year history, and in my first month in office, I choose to remember the gifts of the past executive directors and ask that those blessings be the underpinning of my tenure. Having been certified in 1976, I know well the leadership of the NACC for the past 30 years, each different from another, each with gifts, and perhaps, each with shortcomings. I promise to be no different. What I pray I can do is to rekindle within me:

▼ the visionary work of Msgr. Hal Murray

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New Leader

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Krause, chair of the Search Committee. “We experienced him as very thoughtful, very affable, very spiritual — very pastoral — someone who got it, in terms of ministry.”

“Every conversation I have had with him, I have felt more and more positive about the choice,” Bumpus said. “He was diligent in making things work out. That showed me a lot about him.”

The combination of expertise in business and pastoral care was “not readily available,” Deegan-Krause said. “That’s probably what led to the search taking so long. We’re fortunate we did get a few strong candidates.”

The NACC has been without a permanent executive director since Rev. Joseph Driscoll left in November 2003. Since then, Director of Operations Kathy Eldridge has also held the title of Acting Director.

Deegan-Krause thanked the Search

Committee, which also included Theresa Edmonson, Ann Hurst, Rev. Forrest “Pat” Hanser, and Jerry Broccolo. She also thanked the NACC members who applied for the job and “graciously put themselves forward. It’s a risky thing to go before your peers like that.”

Seidl praised the NACC’s national office staff. “They proved how good they are in the past year and half,” with no permanent Executive Director, he said.

Journey

Continued from page 1

- ▼ the stewardship and service model of leadership of Fr. Tim Toohey
- ▼ the marketing and entrepreneurial wisdom of Fr. Ed Dietrich
- ▼ the authenticity and hospitality of the late Sr. Helen Hayes, OSF
- ▼ and the deep and integrated spirituality of Fr. Joe Driscoll.

As the first lay person to serve as your Executive Director, I bring a number of new firsts to the organization, including a wife and family. But perhaps more than anything, I want my leadership to bring each of you a new sense of hope for your ministry and a new sense of being connected and attached to the NACC as an organization where people are involved in their own destiny.

For a few years, I was in seminary. I remember well my homiletics teacher saying “Larry, if you are to speak of heaven and of God, push your shoulders back,

keep your chin up, wear a smile on your face, and put a twinkle in your eye. If you are to speak of hell, your everyday face is fine.” I have never forgotten that remark. May the future of our collective work bring about that positive, upbeat spirit, in our face, in our ministry and in our theology. It is what our ministry deserves.

Among many things that interested me in this position was the rich vision statement of our organization, particularly our opportunity to redefine the “practice of chaplaincy.” This vision will engage each of us into thinking differently. As we collectively reinvent our ministry by both affirming the past and being the architects of the future, your wisdom and continual input will be the one constant. The association will make that involvement our priority.

In the months ahead I will make an effort to share more with you about who I am, and the dreams that the Board has for my leadership. The past will bless us but not imprison us. It will not be a time for

resting on our laurels. The current environment of healthcare, the Church, and the country all offer an invaluable window of opportunity to re-imagine the organization. You should expect concrete, timely, and practical outcomes from us.

Lastly, I would be remiss if I did not offer great praise and admiration to the NACC staff for the yeoman work they did in the past 15 months, in the absence of an Executive Director. Their work was nothing short of remarkable. With the guidance of a vibrant board of directors, each of your national staff went way beyond the extra mile. While you may know them as the person who answered the phone, or the person who sent you some materials, or the person who guided you through the recertification process, I want to also thank them by that which affirms them the most, their names and individualities: Kathy Eldridge, Director of Operations and Acting Director; Sandy Charlton, Executive Assistant; Susanne Chawszczewski, Director of Education and Professional Practice; Barb Hempel, Membership Services; David Lewellen, *Vision* Editor; Phil Paradowski, Information Technology; Sue Walker, Finance; and Marilyn Warczak, Certification.

So let us begin our journey with great hope and a collective sense of our destiny. I am honored to be your Executive Director.



Name: Lawrence G. Seidl

Education: B.S. in political science from St. Benedict’s College in Atchison, KS; M.A. in counseling from Webster University in St. Louis, MO; M.H.A. in healthcare administration from Webster University.

Professional experience: High school teacher, 1974-75; chaplain at Cardinal Glennon Children’s Hospital, St. Louis, MO, 1975-1985; Senior Associate in Division of Theology, Mission and Ethics, Catholic Health Association, St. Louis, 1985-1999; Vice President of Mission Integration, St. Francis Health Center, Topeka, KS, 1999-2005.

Family: Wife Lee, a nurse, involved in working with children in Romania; daughter Kate, elementary teacher in Catholic school in St. Louis; son Ryan, senior at Indiana University; daughter Abbey, senior in high school; son Christian, freshman in high school.

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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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.

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Respect patient's wish for crucifix

Editor:

With reference to John E. Hopkins' thoughtful letter in the February 2005 edition of *Vision*: I wonder if Chaplain Hopkins has ever considered looking again when patients wonder about a crucifix in a Catholic hospital room. I wonder how pastoral care involves meeting the patient and their loved ones where they are, rather than where we would like them to be. I wonder if removing or discounting the central image of our Christian faith actually fosters the profound identification between the suffering Christ and the suffering human being.

The Crucified Christ remains one of the most poignant and primordial images of God's solidarity with human suffering. While medical technology and human compassion have done

much to mitigate human anguish, ultimately that suffering remains a mystery. Catholic chaplains are called to live in that mystery and witness to it when it serves the needs of our patients. Part of that witness should acknowledge the need for an image of the Crucified Christ. Is not our personal response to that Crucified One the motive for our ministry and identity as Catholic chaplains? As Catholic chaplaincy continues to adapt and evolve into the homologous "interfaith" hospital ministry, the crucifix may be expendable in Catholic hospital rooms. But for those Catholics who come to a Catholic hospital with their families, the crucifix serves as a reminder of the living Christ's presence in the midst of suffering — long after the chaplain has left the bedside.

*Fr. Thomas J. Powers, NACC Cert.
Lynnfield, MA*

Retiring chaplain offers farewell

Editor:

Upon my resignation as certified emeritus chaplain, I find great joy in stating that NACC acclaims the glory of God.

Servants in health care do so while in training and in educating others as well as in their own lives and struggles. Certainly, chaplains reveal the presence of God at bedsides, speaking with families and interacting with other staff members.

Above all, God's glory is served in humility and gratitude during hours of personal prayer and daily meditation. I'm pleased to add, with encouragement, that in the purity of contemplative silence God's infinite love presides.

God first, then all else.

To my well-loved colleagues of 20 years, I bid you farewell.

*Sister Jeanne Girardin, SSCh
Manchester, NH*

Correction

The Annual Report included in the March issue of *Vision* inadvertently omitted the name of Jack Crabb from the members of the Certification Commission.

Letters

Exhibit encourages talk and art about grief

By Kathy Kaczmarek

*For those of us who remember
when we were Spirits
Who remember that we are Spirits
We understand that we are
on this Spirit Journey
The Circle of Life which starts
in the Spirit World
And which takes us back there.*

Chief Noel Starblanket
(Chief of the Starblanket Cree
Nation, Saskatchewan)

How do people face loss? What sense can we make of death or disability? How can we transform terminal illness or surviving a death camp?

The "Between Now and Forever" exhibit attempts to address those questions by sharing the stories, photos, poetry and art of people who have experienced a great loss. Grief and loss touch everyone at one time or another, regardless of race, culture, age, faith tradition, or state in life. But because our society often denies its existence, many people suffer in isolation as they try to find meaning after a loss. Recognizing the need for expressions of these deep feelings, members of our community decided to bring the exhibit to town, creating a safe place for persons to express their grief and break that sense of isolation.

The project's one-week visit to Little Rock, AR, was the culmination of two years of planning, after I had initially heard about the exhibit. At the time, I was working as chaplain and bereavement coordinator for a hospice in central Arkansas.

After my initial contact with Cindy Pickard, the woman who had worked to put together this project, I began contacting persons who might be interested in offering this to the community. What began as a small group of people in various roles of grief work grew into an alliance of about 50 people who worked diligently to schedule this week-long endeavor. The initial \$3,000 cost of bringing the exhibit to Arkansas was funded by an area hospice, as well as

several area hospitals and auxiliaries, and was free to the public.

The exhibit itself contains three components. First, there is a video presentation titled "Turning Toward the Morning," which tells the stories of three families who experienced a powerful loss. Beautifully portrayed with words and music, the persons talk candidly about their feelings of grief, and also how they were able to find hope and life again. While the subject matter is the loss of a child, this video is for everyone, for all who have loved and lost. "Turning Toward the Morning" is a celebration of the human spirit, offering a message of hope and bringing light into the darkness, not only for bereaved parents but for all who experienced a loss.

The second part of the project was the exhibit itself, which provided 25 framed pieces that told the stories of persons who have experienced a significant loss. Some were living with a terminal illness or disability, some had lost a spouse, some were parents who had lost a child, and there was one story from a child whose father was killed on September 11. Each was unique, including artwork, letters or journal writings, or pictures, as well as the narrative. Perspectives on grief and healing came from a Cree Indian chief, a Catholic nun/grief counselor, as well as a man who had survived the Nazi death camps. There were also stories of hospice nurses, a chaplain, and a funeral director. With each platform, the journey of loss and finding life again was expressed with honesty, clarity, and courage.

The third part of the project was a memorial area where persons had the opportunity to create their own memorials in the form of a note, a letter, a story, poem, or drawing, and share them with others. These personal renderings later become part of the exhibit as it travels the country.

Cindy Pickard participated in the opening day, and during the week, we had groups of school counselors, support groups, clergy, college students in social

work, etc., and even some classes of school children. There were always support persons available for persons who might need to talk or ask questions.

One school counselor brought one of his middle-school classes, and they talked openly about the losses they had already experienced. They wrote letters to parents, grandparents, and even to friends who had died. There was also a memorial wall, where people could place carnations in memory of someone they had lost. The personal stories that people told and their expressions of love were very powerful indeed, and at the end of the week, over 200 personal remembrances had been posted in the memorial space that was surrounded by a garden area for reflecting. This reflection area was designed and set up as a donation by one of our area florists, and it provided a quiet space for persons to process what they had experienced.

The week ended with a full-day workshop that included a keynote speaker, Mrs. Deena Burnett, whose husband was on Flight 93 on September 11. She shared her personal story of grief, and how she has found meaning and purpose for her life and her daughters. We offered various workshops on some aspect of grief, loss, and healing, including art therapy in grief, caring for caregivers, anticipatory grief, loss and renewing hope, creating memories, children and grief, pregnancy and infant loss, and grief during the holidays. Some bereavement support groups were present that day, but the majority of those attending were individuals who have been through or were still in the grief process.

Since it was just before Thanksgiving, I gave a workshop on "Handling Grief During the Holidays." Besides giving information, it allowed time for personal sharing, and people told their own stories and hopes for a holiday that could still have meaning. In each of the workshops, there was time for personal sharing, questions and participation in the classes, and the project ended with a service of closure. All in

all, over 400 people went through the week-long exhibit, and the feedback from the community was very complimentary.

The alliance to bring in the exhibit included chaplains, clergy, social workers, school counselors, grief counselors, leaders of grief support groups, and more. Committees were formed to work on the planning tasks, and a Little Rock church donated space for the exhibit. The beauty of this project was that it brought so many of us together for a common goal: to help those in our area who have experienced grief and loss.

I was so glad that I had pursued this project, as we have seen so much good for the community, and it also allowed many of us to come together and plan something that would truly be a community effort. Because of the success of this endeavor, we are now planning another weekend experience for fall 2005 — a one-day seminar for professionals with CEU credit, and then a one-day experience for the general public that will focus on the absence of a parent. Workshops again will be offered, with focuses on loss through military, through crime or violence, through jail and incarceration,

loss through dementia, illness or divorce.

The “Between Now and Forever” project was rewarding far beyond our expectations. It provided hope, comfort, and an opportunity for healing. It inspired compassion, understanding, and a sense of unity for many diverse groups, and has begun a powerful network of caring professionals that works for a common goal.

For more information on this project and exhibit, contact Cindi Pickard at Rites of Passage, (830) 966-6170, or through their website: www.ktc.net/ritesofpassage

Excerpts from ‘Between Now and Forever’

“Now I’m asking myself when my time here is done, who will think of me then? What of me will survive in the ones still alive? Will they feel joyful and free? What of me will survive? Let it be Love as my legacy.”

From “Legacy,” a song by Elaine Kolb

“Live each day to the fullest as if it’s your last. When someone you love leaves the house, tell them how much you love them. Don’t take anyone for granted...cherish each day.”

Mary Locke, whose daughter was killed in a car accident

“Seven years ago, a blinding moment of tragedy crushed me, emptied me of joy, and filled me with despair. Any vision of a fulfilling life was destroyed. Now paradoxically, it is through responding to that tragedy that I have found the road back to fulfillment.”

Azim Khamisa, whose 20-year-old son was murdered

Foundation had roots in response to founder’s loss

Cindi Pickard founded Rites of Passage in 1988 in part to deal with her own grief and loss.

Her mother died of cancer when Pickard was still a child, “at a time when people were not so honest with the patient.” As she made her own way through a difficult life, she assisted other people to tell their stories because “my mother was never able to tell her own.” It began when she was a home health aide to a family living with AIDS and made a video of their life. “It made a huge impact,” she said. “I realized how significant and powerful it is to use arts to reach people, instead of standing up and giving a talk.”

The entire exhibit “travels when God wants it to travel,” Pickard said, but she gives many presentations without it, and her foundation has produced 10 documentaries on death and dying.

“Between Now and Forever” is primarily about the experiences of survivors. “It’s so inspiring to me to hear stories of these different people,” she said, “how they not only found peace, but went on to do things for the world that never would have happened if not for grief and loss.”



John and Joann Ingersoll of Benton, AR, stand beside photos of a rose garden they made in memory of their daughter, Beth, who died of lupus at age 27. Their display was added to the “Between Now and Forever” exhibit.

Companionship in Christ gives suffering meaning

By Michelle A. Lemiesz



“I don’t understand why God would allow me to suffer.”
 “Where is God these days? War, poverty, disasters — how can a loving God allow this

much pain?”

“It seems that every day, she just gets worse. I pray to God, but He just doesn’t seem to hear me.”

“I’ve lost faith in the Church. There’s too much corruption, too much hypocrisy. How does God allow this to go on?”

A day doesn’t go by that I don’t hear questions such as these. They come from family, friends, patients; I hear them on the news; I read them in the paper. It is no secret that we are living in a troubled age. It seems like even the earth is in flux as storms rage and destroy. The questions of evil and the

meaning of suffering in human existence are age-old questions. Great philosophers and theologians have grappled and sought to explain them. So how can I bring more light, more understanding to such an ancient dilemma when there are times that I ponder the very same questions?

Being introverted in nature, I tend to reflect upon these and other issues in the silence of my home. I have become aware that I am increasingly comfortable with the mystery in my own life, and yet I still seek to understand how I can convey this in a way that honors the seekers, and also reflects my own beliefs and life journey. So I sit here, and think about the

dear ones in my life: my family, friends, colleagues and patients, all who ask the ultimate question “Why.” Perhaps in some small way the thoughts I place here may speak to their hearts as together we journey seeking an answer to the mystery of “Why.”

My Dear Ones:

So often you have verbalized to me your frustrations about the seemingly “unfair” moments of life. In trust you have opened up your heart as you look for answers to help you make sense of the pain and suffering in your life and in the world around you. You look at me searchingly as if I have THE answer that will make sense of all the chaos surrounding you. I must admit that all too often I feel inadequate when I can’t give you the answer it appears that you are desperately seeking. For you see, a master’s of divinity degree doesn’t give you all the answers, and neither does certification as a chaplain. In fact, my dear one, nothing really does. We all have to find our own answers, our own meanings to the everyday struggles and pain in life. All I can do, and will do, is be your companion on this great journey into the questions.

Edward Schillebeeckx, a Catholic theologian, has written that “the Christian message does not give an explanation of evil or our history of suffering.” He notes rather perceptively that for most Christians, “suffering remains impenetrable and incomprehensible, and provokes rebellion.” I find some consolation in those words. We are not missing something if we ourselves have not come to grasp suffering. We are not bad or faithless people; we are simply people coping with the joys and sorrows of life. Isn’t it wonderful, somewhat freeing, to know

that we are “normal”? The words, the questions we raise are not foreign to God. Scripture has many passages which speak of humanity’s frustration in understanding suffering and the apparent absence of God; examples are found in Psalm 44:18-27 and the Book of Job, to name a few. Yet for me, none of them speak the volumes, dear one, as do the words of Jesus on the Cross — “My God, my God, why have you forsaken me?” (Matthew 27:46). It is a prayer, it is a cry of desperation, and it forms a spoken bond with men and women for all times: Jesus the Lord is our companion into the questions.

So we stand here, you and I at the foot of the cross, and we hear these words; words that come from a man who spent his life doing God’s will, healing, preaching and sharing the Kingdom. All perceptions of sinfulness and punishment have been broken when the nails pierced Jesus’ skin. His suffering is not the result of any action he did or did not do. He, like so many before and after him, is a victim to political and religious factions. Yet this final act of love and acceptance transforms him and all of us as well.

It is at the foot of the cross where we encounter the three Marys — Mary of Magdala, Mary of Nazareth and Mary the wife of Clopas (John 19:25). Unlike the male disciples, these three women stood together and openly embraced the crucified and suffering Christ with their presence and their witness. They did not run away, they did not crumble with grief; they stood together and became companions to not only one another but to Jesus as well. These women of faith gained strength and courage from one another at a time when all sanity appeared to be lost. We can only imagine what questions and thoughts were ruminating in their minds. Despite this they stood

All too often I feel inadequate when I can't give you the answer

and testified their love and faith in Jesus.

From the early Christian martyrs to modern-day saints such as Maximillian Kolbe and Mother Teresa, men and women have endured and fought against great injustices and suffering. No one, not kings or popes or saints, is exempt from pain and suffering. I recall being shocked when I read that Mother Teresa suffered great doubts and periods of deep depression. Her faith, her deep conviction in doing the will of God, transcended her humanity, making her able to go forth and continue the work she was called to do. You and I are not Mother Teresa, but we too share in the mission and wonder of God's plan for creation. Through our baptism each one of us is uniquely called to share in the mission of Christ; and that mission involves the cross. Thomas Merton, the great 20th-century spiritual writer and monk, once wrote that suffering is only an obstacle if we allow it to become one. We have a choice, and as Merton noted, that choice is "found positively and concretely in the will of God." As I ponder the lives of many great persons of faith, it becomes transparent to me, my dear one, that the thread that brings all of these men and women through their pain and suffering is Jesus and their belief that life is greater than the suffering at hand.

As one who has experienced the swirling mist of chaos, the pain of betrayal, the emptiness of loss, and the sharp knife of physical pain, I have found meaning and solace in the life, death and resurrection of Jesus Christ. I recall the deep betrayal I felt when someone who I believed was not only a friend, but a soul mate, revealed a truth about himself after a four-year relationship. His dishonesty with me tore at my heart and revealed a person I no longer

knew. When I was a teenager my grandfather died suddenly. He and I shared an especially close relationship, and this loss during my final year in high school sent me reeling into depression and confusion. Suddenly, it seemed I didn't know who I was, or where I was going; it took a few years for me to refocus myself and my life's goals.

In March of 1995, while I was driving home to Buffalo, NY during a snowstorm I had a near-death experience when I was hit by an 18-wheeler tractor-trailer. Even now I still suffer severe pain in my left shoulder that feels like my arm is dislocated from its socket. I try to be "in the pain" until it dissipates through medication and relaxation.

It was after these dark moments that I came to realize that there was indeed One who had gone before me; One who had experienced loss, betrayal, physical pain and suffering — Jesus. So often we get tied up in emphasizing the divinity of Christ, that we forget that he was also very much a human person.

The question Jesus posed to the disciples is relevant to us in our struggles "Can you drink the cup that I am going to drink?" (Matthew 20:22a). In the words of Jean Vanier, the founder of L'Arche,

Jesus isn't bringing people into a world of dream. Jesus is not helping people to fly away into theories. Jesus doesn't want theories. He doesn't want dream. He wants the truth. He wants reality. So as we follow Jesus, he will bring us into a world of pain. But then we'll begin to see how he doesn't reject pain, but there's going to be the whole mystery of the transformation of pain, that he'll bring light and love into the pain and it will be transformed.

And then as we continue to follow Jesus with the disciples, what we will discover is that Jesus is not just the powerful messiah, but he's somebody vulnerable.

Remember, dear one, all our theories, all our philosophizing and theological reflection are for naught if we spend our time becoming stuck into the "whys" of life instead of living the mysteries. As Christians we are called to become companions to one another, accompanying others in this great journey into living the questions. Perhaps, if you know (and feel) that you are not alone, that your pain and suffering is not due to punishment and that you are joined with the vulnerable Christ, your heart may find solace.

I have found that in time the "why questions" dissipate as I seek to live the questions of my own journey. It becomes more important for me to realize that my life is a mystery, and within that mystery there arises the good and the bad, the joys and the sorrows, the exultation and the pain. In order to live my life to the fullest, I live the mystery to the fullest. My dear one, I stand with, for and behind you in order to risk entering your mystery, your life. I hold you and all you are as sacred, and I stand with you in a most secure place, the foot of the Cross. Together we witness the Crucified One, our companion in life, who makes all things new.

With All My Love,
Michelle

Michelle Lemiesz, NACC Cert., is director of chaplaincy services at Mount Carmel East Hospital in Columbus, OH.

My life is a mystery, and within that mystery there arises the good and the bad

A Song to the Self

By Georgia Gajmerac-Leiner

Imagine driving long distance
and just listening to yourself,
as you do daily to others.
Listening through the layers
of you whatever they may be.
Perhaps your hair is sprayed into place,
your face is Simply Glowing by Nivea,
your ears are swabbed, and
your lips are bright with the color Santa Fe
by Gabriel.
Beneath the woolens, cottons, silk and
nylons,
and finished off by ankle boots—
you feel perhaps
a sore back,
a painful knee.
But also you feel the energy
of the many places of pulses
bobbing like bubbles of a spa,
keeping your body a perfect temperature.
Your organs are healthy as far as you know,
for which your lips are poised to utter
praise
and gratitude.
Beneath these archetypal digs
you find an early self of you,
an adolescent girl
always
happy in the morning,
and you want to join her.
Being shy
she is open to hurt and ridicule
over and over again,
but over and over again
you hold her to yourself
with the might of faith.
Whatever harm may have been done to
her,
whatever harm you may have done to
others,
hold yourself dearly
for all is past.
Listen to yourself as you listen
to others
and know that what you do
is enough.

Georgia Gajmerac-Leiner, NACC Cert., is coordinator of pastoral care services at Emerson Hospital in Concord, MA.

More chaplains earn certification

Congratulations to the following NACC chaplains who have been granted certification following their interviews in 2004:

Ms. Judy Ann Armas, Seattle, WA
Sr. Mary Donna Cooper, RSM,
Mobile, AL
Sr. Phyllis Ann DiRenzo,
Philadelphia, PA
Mrs. Diane Houston,
Carrollton, TX
Sr. Mary Louise Kelly, CIJ,
Rockville Center, NY
Sr. Marianne Kelly, RSM,
Brooklyn, NY

Dr. Jane King, Augusta, GA
Sr. Joy Manthey, CSJ,
New Orleans, LA
Sr. Judith Minear, SSJ,
Wheeling, WV
Ms. Carole Weber, Scottsdale, AZ
Sr. Geraldine Whitman, IHM,
Willow Grove, PA
Mrs. Meredith Young, Roswell, GA
Mrs. Marianne Zoltowski,
Gansevoort, NY
Ms. Sara Moore, Washington, DC
Mr. Gregory Pocock, Atlanta, GA
Mr. George Reed, Tacoma, WA



Briefs

NACC member publishes book

“Awesome Homilies: The Power of his Word” is the title of a new book of sermons released by Rev. Matthew Vanissery, an NACC member in Fontana, CA.

The book’s 47 homilies cover topics throughout the Christian calendar and the various sacraments and life-cycle events, including four on the topic of funerals. Vanissery also devotes chapters to human suffering, medical ethics, and the ministry of healthcare.

In the introduction to the book, Varkey Cardinal Vithayathil of India calls it “an innovative initiative in the path of homiletics. ... The breadth of the variety of topics and the depth of scholarship of presentation places this work along the line of uniqueness.”

For more information or to order the book, visit www.awesomehomilies.com or call 909-574-6455.

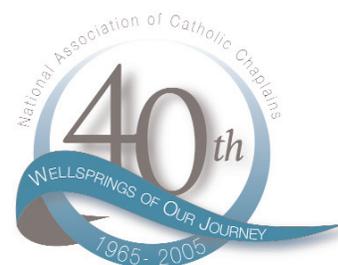
Aid for palliative care programs available

The nation’s six Palliative Care Leadership Centers are now accepting registrations. Sponsored by the Robert Wood Johnson Foundation and The Center to Advance Palliative Care, the six centers provide on-site training and mentoring to hospitals attempting to start or grow palliative care programs. The largest initiative of its kind in the nation, the program seeks to jumpstart palliative care programs throughout U.S. hospitals.

The six centers are Fairview

See [Briefs on page 9](#)

The NACC will celebrate its 40th anniversary with a special issue of *Vision* in July. We are encouraging submissions that relate to our history and our work, and we'd like to hear from you about your joyous, funny, sad, memorable, or life-changing moments with the association. Please send them to dlewellen@nacc.org or schaw@nacc.org. The deadline is May 31.



Chaplains' ministry comes down to presence

By **Judith A. Talvacchia**

Presence.

What does this deceptively simple word mean to me and to the many and varied people I serve? During the course of a week, I conduct many prayer services. I pray individually with residents, families and staff. I discuss religion and spiritual life with those who are looking for resources to cope with illness, with aging and with death. I support families and staff members who struggle to care for the elderly and for themselves at the same time. But in the end, what it all comes down to is presence. Can I be truly present to myself, to others, to God? Can I help the people with whom I work to be truly present to themselves, to others and to God as well? Sounds simple? In theory maybe, but putting it into practice requires time, training, prayer, and reflection.

Have you ever tried to be really present to another person without letting any distractions interfere? Can you put aside thoughts about what you have to do next, or the things about that person that annoy you, or how many times you have already heard a story? One of the biggest services a chaplain offers is the ability to be present in an attitude of attentive listening to others — to hear them just as they are in the moment, as if the chaplain had nothing else in the world to do and could think of no better way to spend that time. How often does anyone listen to you in this way?

When a chaplain is able to listen with complete attention, several things can happen. The person feels important, respected, appreciated and most importantly, heard. If the chaplain

accepts people just as they are at that moment, it becomes easier for people to accept themselves as they are. They become more willing to let other people into their lives. They become more willing to let God enter in. For people who are in conflict or distress, the ability to become open to others and to God is a crucial first step toward inner healing. And it all starts with attentive presence.

However, as a chaplain, I cannot be present to others if I don't attend to my own inner work. I have to accept myself, and recognize my own strengths and weaknesses as well as those of others. Am I able to let others into my life? How present am I to God working in me? How do I reconcile the sometimes overwhelming demands of others with responsibilities to my own community, or to myself? Can I listen to other people describe problems similar to my own and focus on their experience? Much of chaplain training focuses on these issues.

Another major focus of chaplain training is developing the skill to be attentively present to others by watching subtle details. For example, does a person have a tense expression as they tell me that everything is fine? Are the ways they coped in the past not available to them now? Or do the ways they cope not serve them well in their present circumstances? Perhaps what seems like the same story I have heard before bears a different need now, or the same need still unfulfilled. I need to see the clues that people give me about what their real issues are. The better able I am to pick up these clues, the more present I can be to others.

A different challenge is being present to people who can't communicate

verbally. However, they still offer non-verbal clues about their needs. Can I recognize the human being trapped in the dementia who wants love and attention and interaction as much as anyone else? Can I recognize the person that God loves? Can I find ways to express God's love to people who can't respond on a cognitive level? My sense of success depends on whether I can trust that my faithful, attentive presence to them day after day has an effect, even if they can't verbalize it.

The work of a chaplain can be hard to see or to measure easily, but I believe that it provides an essential service to God's people, especially at a nursing facility. Everyone there is experiencing vulnerability and often fear of the future. For people who come for short-term rehab, the challenge is to prepare for life beyond the facility with greater confidence. For long-term residents, the goal is to live this life as fully as possible while they prepare for eternal life. For families and staff, the aim is to return home with peace of mind and heart in spite of the stresses they experience at the facility. My hope is that my attentive presence helps each of them move into the future at peace with themselves, with others and with God. Being part of this process is inspiring and always a privilege and a joy. I can't think of a better way to spend my days!

Judy Talvacchia, NACC Cert., is a chaplain at Mary Immaculate Nursing/Restorative Center in Lawrence, Mass.

Can I be truly present to myself, to others, to God?

Briefs

Continued from page 9

Health Services, Minneapolis, MN; Massey Cancer Center at Virginia

Commonwealth University, Richmond, VA; Medical College of Wisconsin, Milwaukee, WI; Mount Carmel Health System, Columbus, OH; Palliative Care Center of the Bluegrass, Lexington, KY;

University of California, San Francisco, CA.

For more information, visit www.capc.org/plc or by calling 212-201-2683. Space in the program is limited.

Book Review

Book describes helpful responses to illness

The Etiquette of Illness: What to Say When You Can't Find the Words

By Susan P. Halpern; Bloomsbury, N.Y.; 2004; \$17.95.

Reviewed by Sr. Colette Hanlon, S.C.

This book fits the description “small but mighty.” When a friend in a very different ministry recommended it to me, I was initially reluctant and passed it along to a colleague. Her enthusiasm piqued my curiosity. Although the first few pages did not excite me, I soon found myself engrossed in the eminent common sense (yet uncommon practice) on every page.

As a cancer survivor like the author, I thought I might have a sense of how to be present to another with a life-threatening illness. Reading along, however, I became increasingly aware of how we all live in the “taken-for-granted world” that enables us to move forward. However, for the recently diagnosed — or the terminally ill — the customary ways of being and doing are radically altered. The chapter on how to talk with children about illness and death take on new significance now that data demonstrates that shielding the young from these realities carries a great price, especially for children who have lost a sibling.

Halpern discusses moving from the acute phase of her cancer to the realization that she had to learn the etiquette of living with what was now for her a chronic illness. She offers examples of numerous other patients and caregivers whose lives have been irrevocably altered through accident or disease. She stresses the

need to be sensitive to both the cared-for and the caregiver. She reminds the reader of the importance of paying attention to what each person in the relationship wants and needs.

The chapter on how patients and doctors talk to each other is particularly poignant. The author encourages patients to seek a second opinion and to be honest in acknowledging their own feelings in their communication with the professionals treating them. As she addresses the reality that calamity can arrive at anyone's door with no warning, she emphasizes that compassion toward those who have been visited before us is the best gift we can offer.

The chapter on the end of life stresses the importance of enlarging the perspectives of all involved in the final journey. She offers suggestions on how to open up the conversation about dying to encourage an individual's hopes and plans. Being cognizant of the customs and the culture of the patient and caregiver is critical at this phase. Her final words sum up the book: “Opening the heart as a receiver of love and care makes exchange equal. It is not all one person giving, one receiving. It is the reciprocity of giving and receiving that gives rise to joy.” It is obvious that her personal struggles have brought her to a place where she lives in this attitude of compassion.

Sr. Colette Hanlon, SC, NACC Cert., is director of pastoral care and patient relations at the Hospital of Saint Raphael, New Haven, CT; chanlon@SRHS.org.

In Memoriam

Please remember in your prayers:

▼ **Sister Carol Therese Johnson, CSJ**, who died in Tucson, AZ on Feb. 25 at age 74. She worked in parish and school

ministry in California before joining the NACC in 1993. She moved to Tucson in 1997 and served as a patient advocate and emergency room chaplain at St. Joseph's Hospital.

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 may be reposted if there is a continuing need.

Deacon William Zoeller
Greenfield, WI
Cancer

Susan Bays
Quincy, IL

Carol Shepherd
Lowell, MA
Leukemia



▼ MANAGER OF SPIRITUAL CARE

Mission Viejo, CA – Your Mission: To practice where your expertise will be valued most. Mission Hospital, located in beautiful Mission Viejo, California, is a 338-bed, full service, acute care facility and trauma center serving the entire South Orange County of Southern California. We are seeking a Manager for our Spiritual Care Department. The manager will have overall responsibility for chaplains and pastoral care volunteers, as well as provide pastoral ministry. A master's degree in theology/divinity or related field is required, as well as NACC or APC certification, five years pastoral ministry experience including two years in healthcare and one year as a supervisor. Experience in ethics, holistic care and Catholic health are highly preferred. We offer competitive compensation and benefits. Please send your resume to: Mission Hospital, Attn: HR, 27700 Medical Center Rd., Mission Viejo, CA 92691. FAX: (949) 364-4234. E-mail: recruiter@mhr.stjoe.org. EOE. mission4health.com

▼ ROMAN CATHOLIC PRIEST

Madison, WI – St. Marys Hospital Medical Center is seeking a Roman Catholic priest to fill a 3/4 time staff chaplain position. Join an actively involved Pastoral Care team in providing spiritual, sacramental and liturgical care in this 400-bed acute care facility. NACC or APC certification or eligibility for certification preferred. Healthcare experience desired. Please apply online or request the required application form from: www.stmarysmadison.com; Job Line (608) 258-6400 or (800) 236-6101; St. Marys Hospital Medical Center, Human Resources, 707 S. Mills St., Madison WI 53715. A member of SSM Healthcare System. An Affirmative Action/Equal Opportunity Employer.

▼ DIRECTOR OF PASTORAL CARE

Long Island, NY – To head a department at Winthrop University Hospital as a staff member of The HealthCare Chaplaincy. The director will have the opportunity to continue building an existing pastoral care department, which currently has two staff chaplains, as well as being part of one of the country's pre-eminent pastoral care and training organizations. Winthrop is a very well regarded 600-bed community hospital with a Level I trauma center and a full range of medical specialties (www.winthrop.org). Qualifications: ACPE, APC, NACC, or NAJC certified, high energy with a well developed sense of the role of professional chaplaincy, excellent clinical skills, and an ability to handle all aspects of pastoral care administration. Send resumes to: The Rev. George Handzo, Director of Clinical Services, The HealthCare Chaplaincy, 307 E. 60th St., New York, N.Y. 10022 (ghandzo@healthcarechaplaincy.org)

▼ PRIEST CHAPLAIN

Fresno, CA – St. Agnes Medical Center is the elite hospital of the Central Valley of California. Located in Fresno, we have just completed the largest expansion in our history with a new heart and vascular wing and doubling the size of our emergency department. The Center for Spiritual Care is seeking a full-time priest chaplain, rotating shift. Reporting to the director of spiritual care, this position is responsible for providing emotional and spiritual support in pastoral counseling to patients, their families and hospital staff. The incumbent in this position must be a Catholic priest and should have a master's of divinity degree in theology or its

Positions Available

equivalent. Successful completion of four quarters of clinical pastoral education in an accredited program, certification by the National Association of Catholic Chaplains is preferred. You must have a basic understanding and respect for other religious traditions, and be open to working as a member of an ecumenical spiritual care team. Please visit our website at www.samc.com for more information and to apply online. Or you may fax your resume to LuAnn Bertolino at (559) 450-3735 or mail it to Saint Agnes Medical Center, People Center at 1111 E. Herndon Ave., Suite 202, Fresno, CA 93720. Saint Agnes is a member of Trinity Health. EOE.

▼ CHAPLAIN

Austin, TX – SETON Healthcare Network; bachelor's degree required, master's of divinity degree or master of the-ology from an accredited school of theology also required. Ordination preferred for this position that will serve a network of hospitals, consisting of a level II trauma center and premier children's hospital. Board certification by the Association of Professional Chaplains or National Association of Catholic Chaplains must be received within the first two years of hire date. Must be computer proficient, learn electronic documentation and have good writing skills. Must be dependable, adaptable to rapid change and have emotional/spiritual stamina to serve patients of all ages, faiths and cultures with all types of medical and behavioral conditions. Please contact Marilyn Faulks, clinical recruiter, at mfaulks@seton.org, or fax to (512) 380-7525. SETON is an EOE.

▼ DIRECTOR OF PASTORAL CARE

Hartford, CT – This position at Saint Francis Hospital and Medical Center is responsible for the overall operation of the Pastoral Care Department, including supervision of all staff and management of all other resources. The director of pastoral care offers skills in administration of the department as well as direct ministry to patients, staff and families. Qualifications include education equivalent to Master of Divinity or equivalent courses from an accredited theology school/seminary; one year of clinical pastoral education (CPE) is preferred (or plan to acquire such education upon hiring) and a graduate degree in theology, scripture, spirituality, psychology, counseling, or administration is desired. A minimum of three years experience of demonstrated leadership in congregational and hospital ministry is required, and licensure of valid ordination (or endorsement to this position) from an approved ecclesiastical body; and certification or willing to seek certification through the Association of Professional Chaplains (APC) or the National Association of Catholic Chaplains (NACC). Must have a compassionate ministry style and excellent verbal and written communication, management and supervisory skills. Send resume to: Beth Frechette, VP, Human Resources; Saint Francis Hospital and Medical Center; 114 Woodland Street, Hartford, CT 06105, fax 860-714-8196 or email efrechet@stfranciscare.org.

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Calendar

June

- 5-8** Catholic Health Assembly
annual meeting, San Diego
- 16-18** U.S. Conference of Catholic
Bishops meeting, Chicago
- 24** Board of Directors telephone
meeting

July

- 1** Chaplain certification materials due
at NACC office
- 4** Independence Day; national office
closed
- 11** Copy deadline, August-September
Vision
- 14-17** National Certification Commission
meeting in Milwaukee

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