



I can't wait to tell you about...



Anne van Loon RN PhD
AFCNA Chairperson 2016

our conference retreat

Hope and future:
Igniting and rekindling hope in hurting people

Over the past 20 years of nursing, pastoral health and care ministry, I have heard many personal stories from people who have lost hope. Loss of hope leads people to give up trying for their future vision. That dream could be healing from a condition, a life partner, a child/family, a job/income, a house, peace, personal safety, enough to eat, clean water, meaning, purpose and so much more. The bible tells us that 'without vision the people perish' (Proverbs 29:18a), but without hope it's impossible to have a vision, and without a vision the future can look bleak.

At Easter we celebrate the HOPE we have as a direct result of Jesus' death and resurrection. God's kingdom has come here on earth and is ours now, enabling us to build strong and healthy lives, life-giving relationships and thriving communities. How can Christians be a source of hope in their community? In particular, how can FCNs ignite and rekindle hope in the hurting? That's the theme we will explore over three days from Monday May 2nd to Wednesday May 4th, so please come and join us.

Reverend Dr Lynn Arnold (a former Premier of SA, CEO of World Vision, CEO of Anglicare, and currently Anglican priest at St Peters Cathedral in Adelaide) is our keynote speaker. He will share with us how Christians can be purveyors of hope within their community. There is a diverse selection of speakers who will focus on mental health, aged care, church-based community hospice, faith community nursing, disability support, vulnerable children, church-based community care, working with survivors of child sexual abuse, pornography addiction, refugees and asylum seekers, and vulnerable young men. Additionally, we have a number of electives including: praying without words, art therapy, journaling, creative arts, hand and foot massage.

On day three we will focus on you—the person working with vulnerable people—and offer a mini-retreat experience. We are delighted to be led by Reverend Jenny Pryor in this activity. We are also very privileged to be treated by the amazingly gifted and internationally renowned violinist, Niki Vasilakis.

Conference participants can stay on site at Nunyara Conference Centre, 5 Burnell Drive, Belair, South Australia; be day participants and stay nearby; or just come for a single day. We urge you to take this opportunity to be equipped and energised for your FCN, pastoral care, health and community care ministries. You won't be disappointed that you came.



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The full program and speaker details are available at www.afcna.org.au or www.baptistcaresa.org.au. AFCNA thanks Baptist Care SA for supporting us and partnering in this conference. Full three day registration is ONLY \$320Au for AFCNA members, which provides you with all meals, accommodation, conference dinner, and conference resources.

Register at www.eventbrite.com.au. Type in 'Hope and a Future Conference' [event number is 19992156077]

Enquiries: Anne van Loon, avanloon@baptistcaresa.org.au, Mobile: 0409921337; Phone: 8273 7100

Please come and bring other church workers involved in health, pastoral care, and community care ministries as we celebrate 20 years of faith community nursing in Australia.

Anne van Loon
Chairperson AFCNA 2016

'For I know the plans I have for you,'
declares the Lord,
'plans to prosper you and not to harm you,
plans to give you hope and a future'.
(Jeremiah 29:11, NIV)

Waiting for God to do something new

Sometimes we feel like a desert wasteland. Our lives are dry, lifeless, and nothing appears to grow, let alone thrive and bear fruit! The blackness of despair obscures our hope and we go through the motions in life. This is not what God says about what he will do in us and through us. He promises abundant life, lushness, full of luscious fruit!

¹⁹ For I am about to do something new.
See, I have already begun! Do you not see it?
I will make a pathway through the wilderness.
I will create rivers in the dry wasteland.
(Isiah 43:19 New Living Translation)

⁷ 'But blessed are those who trust in the Lord
and have made the Lord their hope and confidence.

⁸ They are like trees planted along a riverbank,
with roots that reach deep into the water.
Such trees are not bothered by the heat
or worried by long months of drought.

Their leaves stay green,
and they never stop producing fruit.
(Jeremiah 17:7-8 The Message (MSG))

⁷⁻⁸ 'But blessed is the man who trusts me, God,
the woman who sticks with God.
They're like trees replanted in Eden,
putting down roots near the rivers—
Never a worry through the hottest of summers,
never dropping a leaf,
Serene and calm through droughts,
bearing fresh fruit every season.
(Jeremiah 17:7-8 New Living Translation)

Now that's the hope only God can provide!



If you would like to fan into flame the hope within you and recharge yourself for pastoral health and care and FCN ministry, then join us at the conference. Day 3 is particularly focused on you and helping you to fan a flickering flame to life.

Rev Jenny Pryor and Rev Kerry Davies will lead these activities, and internationally renowned violinist Niki Vasilakis will share her amazing musical gifts with us.

You won't want to miss this opportunity, so register now!



Becoming a purveyor of hope

What our community really needs are more purveyors of hope! People who are willing to help a person with mental illness see a future they can achieve, and encourage them in the process of attaining that future.

This was recently stated by a senior mental health social worker in SA Health. In chronic illness the 'concept of "hope" has been recognised as a potential psychosocial resource for dealing with the vagaries of experiencing a chronic condition' (Brooks et al, 2015, p. 4). Health professional colleagues have described hope as the motivator for change, a precursor to the stages of change.

As Faith Community Nurses the ability to ignite hope in others is essential for practice. Christians talk a lot about hope, but often without any idea of how to describe it, let alone be a purveyor of it.



What is hope?

In chronic illness hope is defined as 'the belief that it is possible for someone to regain a meaningful life' (Brooks et al, 2015, p.4). In the mental health recovery framework 'most definitions of recovery involve some component of acceptance of illness, having a sense of hope about the future, and finding a renewed sense of self' (Davidson, 2004, p. 14).

Biblically, hope is to desire something with confident expectation of its fulfilment (Life Application Study Bible). It is not a nice, wishy-washy sentiment of something you would like. It is grounded in confidence that it will happen. Hope has strength. Hope is actively trusting that God will do what He promises. Lee Strobel, atheist journalist turned Christian apologist in *The Case for Hope*, notes hope is a recurring theme woven throughout Scripture. The word 'hope' is used 97 times in the Old Testament and 83 times in the New Testament (2015, p. 5).

Strobel (2015, pp. 54-55) points out 'some key implications of the historical truth of the resurrection of Jesus', amongst his list are:

Hope in Jesus' comfort: If Jesus personally knows the pain of loss and suffering, he can uplift and encourage me in the midst of turbulence that he himself warned was inevitable in a world corrupted by sin.

Hope in Jesus' compassion: If Jesus loves me as he says he does, he has my best interests at heart. That means I have nothing to lose and everything to gain by committing myself to him and his purpose.

Hope is the knowledge of the presence of God in our circumstances, in joy and in sorrow, and the promise of our future in Him (Jeremiah 29:11). Because of Jesus we can have hope no matter what our circumstances. We need to understand this and live out our lives so we thrive. And we are called to ignite this hope in others.

Igniting hope in others

Studies show personal qualities of health care professionals, particularly their hopefulness, impact the patient's hopefulness (Dameron, 2014). If we are hopeful for the patient, they more likely to be hopeful too. The reverse is also true.

Battling a chronic illness, myself, I have first-hand experience of the power of another person's hope when I was despairing. After an acute flare up I faced the future with darkness and fear. A health professional said to me, 'the future will not feel the same as this. Believe me I'm a professional'. Yes, the circumstances may be unchanged, but she had hope that I would find hope: I would come to a place of acceptance, finding meaning and hope for the future. I placed my hope in her hope and the future looked less bleak.

In health settings 'definitions of hope usually reflect an expectation of success in the pursuit of desired goals' (Synder, 2006). Synder et al (2012) describe patients with high hope as:

- better able to cope with pain and disability
- making better use of information to do more of what helps, and less of what hurts
- having more strategies and being more likely to use them
- having more positive thoughts daily and, therefore, less depression
- more confident and challenged by goals

As FCN's we can support the goal setting process and increase people's hope. We can learn strategies for promoting hope in others using our interpersonal resources, activating their internal resources and helping them access external resources (Slade, 2009, p. 16).

So as nurses we can be 'purveyors of hope'. We can promote hope using various strategies. We can support goal setting, and provide the belief that there is a future to begin with. However as pastoral health and care ministry workers and Faith Community Nurses, we have a biblically based hope in Jesus, for eternity and for the here and now. Our belief rests on God who says, 'Trust me, I have good plans for you, plans to give you hope and a future' (Jeremiah 29:11 adapted).

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Vicky Legge

RN, Grad Cert (NgComHlth&Dev), Grad Cert (CCM),
Cert IV (Min&Theol), Cert IV(PC), Cert IV (TAE) 2016



Launch of the 'Hope Pack'

In earlier editions we have discussed Lindy Gower's recovery from depression and the work she has done to document the strategies that helped her move out of darkness and into the light of life.

Baptist Care received a grant from the Commonwealth government's 'Partners in Recovery' program to finalise the Share manual explaining 'How to get a Share program started' and to publish the Hope Pack. The graphic designer is currently working on this so that Reverend Dr Lynn Arnold can launch the Hope Pack at the Conference dinner on Monday May 2nd at 6 pm.

Lindy will speak about the development and uses of the Hope Pack at the conference on Monday May 2nd at 11.45 am. Please join us for the conference dinner and the launch. Tickets are included in the full conference registration. Tickets for day visitors will be \$75 and can be booked via Eventbrite. They include your own copy of the Hope Pack to use in your FCN practice.



**Come and hear more of Lindy's story on Monday May 2nd at 11.45
and for the Hope Pack launch by Rev Dr Lynn Arnold at 6 pm.**



Doing More with LESS

SHARE—doing life together

'Share—doing life together' is a regional model of community care that has been evolving with different churches in the Adelaide Hills since 2011. It combines the Australian faith community nursing model with the developing Davey framework, to target people recovering from severe mental illness who are discharged from the Community Mental Health Service but who are socially isolated in their community, and therefore at risk of relapse.

Share is currently made up of three different weekly social groups that provide a platform for genuine and meaningful relationships. Each group consists of those living with mental illness as well as informed friends who are volunteers from the local churches and community.

As a mental health nurse and a faith community nurse, Share provides me with an opportunity to apply cost-effective and innovative solutions within the local community that benefit everyone involved. Below are some of the participants' testimonies which echo the power of community to achieve remarkable outcomes when they are provided with professional mental health support in a social environment.

What was life like before joining the Share group?

'I didn't talk much; I closed down. I would isolate myself. I'd lost confidence in myself; home was increasing my depression. I had no friends and no interests. I worried about the next bad thing that would happen to me. I was in a bad way. I didn't know how to reach out to people anymore. I'd lost a lot of my social skills... life was like being in jail, a place no one wants to be. I would sleep all day, sleep all night. If the only people that cared about me were paid, then that didn't count.'

What difference does the Share group make?

'It's made me much, much happier! I have a thirst for life, feeling useful; something I haven't felt for a long time... my mentor is the light of my life... I have made other friends too... I have a lot of interests now. I'm positive. I now have a purpose. It's helped boost my self-confidence and love of life, which I haven't had for a very long time! This time when I was discharged (from hospital) I actually had some people who wanted to help me. My days in hospital are over. I'd probably be dead without this group.'



Share appreciates the generosity and support of local partnering churches, volunteers, participants, the Australian Faith Community Nurses Association, the regional mental health service and many others, including my late husband, Peter John Davey, whose suffering provided the catalyst to develop the Davey framework, which is proving to be an inspiration to so many.

Mille Davey
RN, RMHN, Grad Dip Theol (FCN)
Founder of Share—doing life together



If you would like to hear more from Millie about the Share program and how you and/or your church can be involved, come to the Conference on Monday May 2nd at 11 am.

Membership reminder

YOUR 2016/17 AFCNA membership is due in June 2016 but why not consider renewing it now while you remember! It's only \$30 for the year but it allows AFCNA to keep you networked with newsletters, conferences, develop resources including our new website which is being upgraded at present. Your fees enable us to provide scholarships to support FCNs, and keep an ecumenical Christian presence in the profession of nursing via CoNNMO membership. Please renew your membership and invite others to join us as we seek to develop pastoral health and care ministry of faith community nurses. Your membership is vital.

Australian Faith Community Nurses Association MEMBERSHIP 2016/17

Name Address

..... Postcode Phone (.....).....

Mobile..... Email

1. I am happy to be included in AFCNA networking via the AFCNA data base Yes ☐ No ☐ (privacy assured)

2. Practising FCN/Health Ministry Yes ☐ No ☐

3. Current AHPRA Registration Yes ☐ No ☐

4. I consent to my details being shared with AFCNA members' prayer network. Yes ☐ No ☐

5. Newsletter: email or Australia Post (please circle preference)

Signed: _____

Full membership (\$30.00/year) ☐ **Concession** (\$20.00/year) ☐ **Donation:** AFCNA General Fund ☐

Electronic transfer: Australian Faith Community Nurses Association Incorporated BSB: 704 - 922; Account No. 100012768 Please insert your name as the reference code

Make cheques payable to: Australian Faith Community Nurses Association

Mail to: Treasurer, Australian Faith Community Nurses Association, PO Box 2707, Kent Town, SA 5071

Resources

What's new in dementia care?

The Australian Government announced a new national approach to dementia services with the engagement of a single national provider delivering streamlined dementia education, Study Centres and Dementia Care Essentials programs, and a range of consumer support programs to help people with dementia across the life-cycle of the disease, improving consistency of support to them and their carers. Ref: <https://goo.gl/YlnCa4>

Dementia and Driving Decision Aid

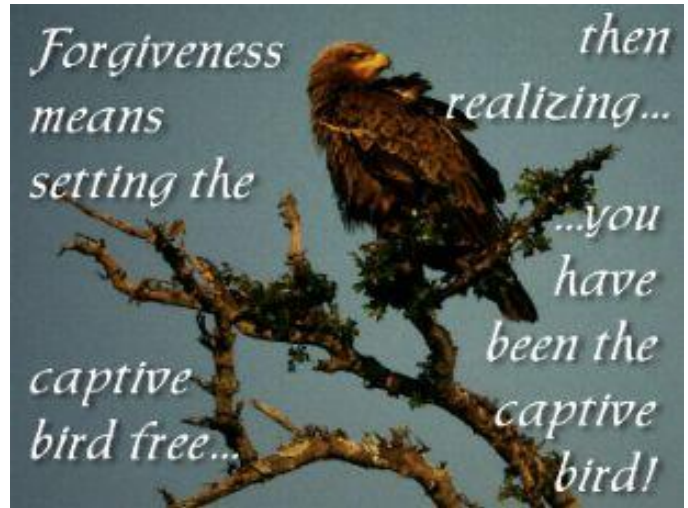
This is a resource designed and developed by the University of Wollongong to help support patients, their families and carers to retire from driving utilizing the Dementia and Driving Decision Aid to guide the process and discussions. It was launched in February 2016. Ref: <http://www.seniors.asn.au/centric/home.jsp>

Diabetes and eye care

Diabetes is a big problem in our Indigenous populations. The 'Check Today, See Tomorrow' resources promote the importance of a YEARLY eye check and seeking and following treatment to prevent loss of vision. The resource kit is available to download: <http://iehu.unimelb.edu.au/diabeteseye-care/resources/resource-kit> or you can order it online.

Focus on forgiveness and health

Forgiveness plays an important role in our lives relationally, personally and as a society. It can help achieve inner peace, peace with others and peace with God. Sometimes people do wrong to us and this generates anger, blame, resentment and bitterness within us. If we have been a part of the problem we may feel guilt that can lead to self-recrimination, shame and self-loathing. Unresolved, such conflict leads us to distance ourselves from others and if the rift remains un-mended, we can disconnect permanently from people. Resentment builds over the situation (just or unjust) and this eventually leads to intolerance and even loathing or hatred. Forgiveness is an important step to self-love and acceptance. It is a basic building block to the development of loving relationships with others and every human being needs to be able to give and receive love to thrive; it's intrinsic to being human.



Research has found unforgiving people can increase mental illness, heart disease and reduce immunity leading to physical diseases (1). The act of forgiving improves our ability to cope with stress, reduces anxiety and depression and increases self-esteem (2). Studies show people who are able to forgive have better interpersonal function and improved social support which directly correlates with a reduction in cardiovascular risks, faster recovery from illness, and increased survival rates from several types of cancer (2, 3).

The Stanford Forgiveness Project (4) designed six one-hour sessions utilising simple visualisations and behaviour modification that enabled participants to see how their minds created and maintained grievance stories from past negative experiences. Participants learned how they damage themselves psychologically and physiologically when they continued to replay those stories. Finally, participants learnt how to give up their grievances by taking them less personally, and by repositioning the offending person more empathically (4). Those who chose to forgive had a measurable improvement in their physical and emotional health and in their interpersonal relationships (4).

Forgiveness can help people move from avoiding those who hurt them to communicating directly with them, if this is a safe choice (5). Righteous anger helps people create a safe distance from others that can serve as a form of self-preservation that prevents them from being hurt again, which is particularly important for victims of abuse (5). In those situations, closeness involves risk and vulnerability with the possibility of being re-abused. Consequently, in abusive relationships the person forgiving must have the support and the interpersonal skills to prevent them from being vulnerable to being re-abused. Most importantly, forgiveness from the victim does not exonerate the perpetrator of the abuse from the legal consequences of their abusive actions (6).

Victims/survivors of child abuse and domestic violence should know that forgiving the perpetrator in no way assumes you wear guilt in relation to your abuse. Abuse is almost always about power and control, and as a child you were *not* responsible for, or even complicit in, your abuse (5). While Scripture says we should forgive as Christ forgave us, it is important that you do not extrapolate this to mean your difficulty in forgiving your perpetrator/s means God cannot forgive you. You are entitled to righteous anger and to seek resolution to your abuse. Forgiveness is not about condoning or even excusing your abuser, nor is it about denying your abuse ever took place. It is about releasing yourself from the ongoing potential suffering that un-forgiveness can cause. It does *not* imply that you should restore a relationship with the perpetrator, unless that is your desire. In fact, in the case of abusive relationships it may be an unsafe option that should be discouraged (5). You may find forgiveness becomes possible at the end of a process of exploring (preferably with a qualified counsellor) how you want life to be now and what is standing in the way of that happening. It is important to realise the pain of your past abuse may return and this in no way represents a failure to forgive on your part. It is important to keep asking God to work with you to heal this aspect of your life (7).

Well-meaning Christians can inadvertently add guilt to the victim/survivor who struggles to forgive. To blame a victim for having a 'hard heart' or similar accusations continues to heap the burden of shame, guilt and failure on the victim who is already struggling with these emotions due to their abuse experiences. It can effectively re-silence the victim, adding to their anguish (6). Remember Scripture says the offending person should seek forgiveness, acknowledging that we are all guilty of sin in some way. Wherever possible the *perpetrator* of abuse needs to acknowledge, confess, repent, ask forgiveness, offer restitution, and then forgiveness and resolution may follow for the victim (5). As Christians we should channel our energy toward getting perpetrator/s of abuse to ask for forgiveness, while offering support and compassion to the victim of abuse. We should always check the rightful pursuit of forgiveness is not re-silencing or re-victimising the abuse survivor. Even after forgiveness has

occurred the relationship between these people should not continue unless it is safe to do so, and trust has been re-established. This will take time and supported effort from both parties (7).

Harbouring resentment and hatred of self or others, blocks our openness to the Holy Spirit's healing and creates a barrier between the person and God, between two people, and between the person and their soul (8). With prayer we can invite the Holy Spirit into the act of forgiveness which brings the hope that gives birth to change. Without hope there is no possibility for change and no future without hope.

Contemplative prayer is a profound communication with God. In that type of prayer, we experience God's mercy and presence in our life. Jesus prayed ... 'forgive us our sins, as we forgive those who sin against us' demonstrating we are all in need of forgiveness, a message that is threaded through Scripture. Reconciliation is the fruit of forgiveness (8). It brings us back together with God, and others, and at peace within ourselves. We need God's help to forgive as He forgives us, particularly if we have been traumatised by another person, but it can be done (6).

'Then Peter came up and said to him 'Lord, how often should my brother sin against me and I forgive him? As many as seven times?' Jesus said to him, 'I do not say seven times but seventy times seven' (Matthew 18: 21-22). Being aware of our own sinfulness is humbling and should lead to a better understanding and acceptance of the fallibility of others (8). Daily confession of our sin before God contributes to inner peace. The knowledge of God's forgiveness of ALL our sins is at the heart of healing. God is merciful and forgives us without limit, and expects us to do this for ourselves and for others.

Forgiveness is the first step toward self-love and love of others, which is a command from God (8). It can result in inner peace, healing of emotional wounds, peace with others and better future relationships. Reconciliation implies the power of love to open the channels that enable people to relate to one another in love (8). Forgiveness is also the building block of loving relationships and in the big picture, a more tolerant and thriving society (8). It might even be summarised—forgiveness is a critical element for world peace.



Anne van Loon
RN PhD

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Anne will present the findings from research on child sexual abuse at the conference and work through with conference participants how the resources can be used in your HCM ministry/FCN practice. All registrants will receive the resources free at this session.

Prayer points

- 'Hope and a Future' Conference/retreat in May 2016: for participants, speakers, planning and a renewal of Christ's hope as we work in step with God's plans for the FCN ministry within this nation and the world.
- Revitalising of the FCN role and ministry in Australia: for inspired, empowered and equipped FCNs across many denominations of the Christian church.
- Thanking God for his work through FCNs worldwide and especially in Australia for 20 years.
- AFCNA Board that our decisions, governance, plans for 2016 have integrity, innovation and be in step with God's plan for FCNs in Australian and internationally.
- Denominational FCN networks (Lutheran Parish Nurse Network and Catholic parish nurses via APNRC and IPNRC in the USA).
- Those like-minded Christian nursing groups will work cooperatively to advance the Christian nursing in Australia and above all the potential of the FCN role in pastoral health and care ministry of the Christian church.
- Australian churches will commence pastoral health and care ministry and include FCNs in their teams.
- That the Christian church across the world would reflect Jesus' compassion servant heart and live in peace being 'salt' and 'light' in the darkest places.

HOPE AND A FUTURE conference/retreat

Register NOW: <https://www.eventbrite.com.au/e/hope-and-a-future-conference-and-retreat-igniting-and-rekindling-hope-in-hurting-people-tickets-19992156077>

Keynote Speaker: Monday 2nd May and Tuesday 3rd May



Rev Dr Lynn Arnold

Rev Dr Arnold is an Anglican priest at St Peters Cathedral in Adelaide. He is a former Labor party politician (1979-1994) and Premier of South Australia (1992-93). After leaving politics, he became CEO of World Vision (1997-2003), and later Anglicare SA (2008 to mid-2012), giving him a unique insight into how to work with the vulnerable people in our community.

In 2004, he was awarded the Order of Australia (AO) for his services to Australia through the South Australian Parliament as Premier, and internationally through development and humanitarian aid assistance. In 2001 he received the Centenary Medal for his services to the Australian community.

Rev Dr Lynn Arnold is married to Elaine and they have five children, including two sets of twins, and three grandchildren. Since 2014, he has been working as a priest at St Peter's Cathedral in Adelaide. Rev Dr Arnold says he is excited to share from his knowledge and experience locally, nationally and internationally on the subject of 'Hope and a Future', noting this is a topic that he has been reflecting upon a great deal in recent years. His three keynote sessions are titled:

Mon 2nd May, 9.30 am: How to ignite hope in a hurting world

Mon 2nd May, 7.00 pm: How Christians can become 'Purveyors of Hope' in a hurting world (following dinner/launch of 'Hope Pack')

Tues 3rd May, 9.30 am: Rekindling hope in people who are hurting

We are very privileged indeed to have Rev Dr Lynn Arnold share with us from his extensive life and work experience.

Keynote Speaker: Wednesday 4th May



Rev Jenny Pryor

Rev Jenny Pryor has a background in both nursing and pastoral ministry, having spent over 30 years as an RN/RM with her final years spent in oncology. In making the shift to ministry she is now an accredited Pastor with Baptist Churches of SA and received her formation as a Spiritual Director through Stillpoint Spirituality Centre. She recently completed her season of ministry at Parkside Baptist Church which was her home church for 35 years and the setting of formal ministry for the past 7 years. In February she and her husband Tom will move to Port Pirie where Jenny takes up appointments at Port Pirie and Laura Baptist.

Jenny has a passion for Jesus and longs for people to be transformed into his likeness and to become all that God created and intended us to be. She loves to offer quiet spaces for people to meet with God whether that is in retreats, small groups or spiritual direction.

She enjoys being in creation and is especially nurtured by the sight, sound and smell of the ocean. Jenny has three married children and two grandchildren who are a living reminder that God loves play.

Rev Jenny Pryor will lead three keynote sessions on the last day, aimed at fanning hope into flame within.

Taking good care of yourself (especially when you are in the pastoral care ministry) is important. It is not selfish but good stewardship. We are really thrilled that Jenny will share from her ministry and life experience with us.

Wed 4th May, 9.30 am: How to fan hope into flame when your flame is flickering

Wed 4th May, 1.30 pm: How to protect the flame of hope within ourselves

Wed 4th May, 2.30 pm: Jenny will lead us in a final worship service which will focus on the 'Fresh hope we have in Jesus Christ for an abundant future'.



Give me 5

We are asking everyone to take up the 'give me 5' challenge.

It's simple—during 2016...

- 5 newsletters** Give away 5 copies of the AFCNA newsletter each time it arrives in your inbox. There is a PDF link to the newsletter on our webpage (www.afcna.org.au). You can also print five copies and prayerfully place them into the hands of 5 people or in 5 places such as your church, café, hairdresser, GP waiting room, workplace, library, hospital, university...
- 5 members** AFCNA is asking everyone to invite five people to become members during 2016. You can place the newsletter and a membership form in the hands of another potential member that God lays on your heart.
- 5 minutes** Then take 5 minutes each week to pray for AFCNA, the 5 newsletters, the 5 potential AFCNA members and watch God mobilise people by his Holy Spirit to become faith in action, love in expression and hope in motion in their community.

Please submit your photos and stories for *WholeHealth* to afcna@afcna.org.au or send to chairperson annevanloon@internode.on.net.

Phone (08) 8278 8274. Deadline for next issue: 30 May, 2016

Your snippets and stories are essential for the content of the newsletter to be both informative and share the joys and opportunities of the FCN role.

Disclaimer: In no event will AFCNA be liable to anyone for any decision made or action taken by anyone in reliance on information in this newsletter.

OUR AIMS

- Provide education, resources and networking for nurses working in faith communities
- Provide resources, education and consultancy to faith communities to enable viable health & care ministry
- Liaise with government and other organisations to further the FCN ministry
- Enable FCNs to meet their professional practice requirements

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Faith Community Nurses Associations](https://www.facebook.com/AustralianandNewZealandFaithCommunityNursesAssociations)