

CARE VISITOR MINISTRY: COMING ALONGSIDE OUR CAREGIVERS WITH GOD'S LOVE

By Joan Hurlock

Rationale for Development

Every year the Presbyterian Church (USA) designates a Sunday in November as Caregiver Sunday. Many adults in our congregations are likely caring for their loved ones because an estimated 29% of the USA adult population is providing care for someone who is ill, disabled or aged. Does your church support its caregivers in a meaningful way throughout the rest of the year? Having been a caregiver for over the decade as my late husband increasingly depended on my care I wanted to initiate some way that my church, Carmichael Presbyterian Church near Sacramento in California, could support our caregivers over time to maintain their wholeness and church connection. This concept evolved into the Care Visitor Ministry.

Caregivers devote much of their time, energy and resources to their caregiving tasks, resulting in decreased involvement with their community-at-large, including their faith community. Although caregiving over time can be a mostly meaningful experience, it can also be stressful and overwhelming. In the midst of the delights and demands of providing vital support, we know that caregivers must take care of their own health and wholeness in order to be fully able to care for a loved one. This is especially needed when the care recipient has a chronic illness or progressive loss, such as dementia. According to researchers at Yale University School of Medicine, nearly one-third of caregivers with terminally ill loved ones at home suffer from depression. It is understandable when you consider that caregivers are involved twenty-four hours a day seven days a week and are concerned with their loved ones at the same time they take on added tasks and the many financial and behavioral issues that arise. Although the work can be rewarding, often the caregiver ceases to consider his or her own personal needs to maintain health plus social and spiritual connections.

In churches we tend to have ministries that focus on the care recipient rather than the caregiver. Caregivers in our congregations are at risk of drifting away from their church's social and spiritual supports.

Purpose of the Ministry

Our Care Visitor Ministry is designed to focus on congregation members who might easily drift from regular church attendance and programs due to their caregiving responsibilities. The Ministry aims to sustain the caregivers' wholeness and extend the love of Christ into their lives. The Care Visitor Ministry also aims to help meet this growing challenge by maintaining our caregivers' connections with the church body and by prayerfully supporting them as they encounter challenges.

Foundation in Scripture

Scriptural Significance is found in 1 Thessalonians 5:11

“Therefore encourage one another and build one another up, just as you are doing” (English Standard Version)

“So speak encouraging words to one another. Build up hope so you'll all be

together in this, no one left behind. I know you're already doing this; just keep on doing it." (Message)

Role of the Care Visitor

The Care Visitor's Role is to be there to provide:

- Value for the caregiver in his or her life situation
- Listening and to be a confidential and safe sounding board
- Strengthened connections with the church through encouragement and joint prayer
- Support to access church and community resources
- Ways to reach out to share the care burden
- Encouragement to sustain caregiver wholeness

Care Visitors begin to feel called to this service and its ministry. Their role is NOT to be Case Manager, Social Worker or substitute caregiver.

What Made it Possible

Support from Sacramento Presbytery Presbyterian Women and staff of the Carmichael Presbyterian Church helped us to launch the new ministry. A three-year grant from the Hilda V. Thompson Health Ministry Fund, administered by the Synod of the Pacific, sustained development of the model program for use by many faith communities. Our consultant, Taryn Benson, with her background in gerontology, health administration and caregiver services, was funded by the grant. Our Program Team consists of Carmichael Presbyterian Church members. The team developed plans for the ministry, conducted the pilot program and modified it as needed. Now, in the grant's third year, we are disseminating the new ministry model through presentations to groups such as local churches, the Sacramento Presbytery, Health Ministries Association, and Presbyterian Older Adult Ministries Network.

Who Is Involved

Team Members: Associate Pastor Ivan Herman, Len Tozier (Stephen Ministry Leader), Joan Hurlock (Faith Community Nurse and Educator). In addition, Rebecca Cameron (Elder and Psychologist) and Barbi Kerschner (Research Analyst) have contributed to the ministry's development and evaluation. As we complete our early developmental work supported by the grant's third year we are actively recruiting churches to consider adopting the Care Visitor Ministry.

Available Resources

We have produced a 150-page program manual with a DVD (with scenarios we developed for use in training, with actors from our Drama Team, and production by our Audio Visual Team) plus a CD of all print materials we have used in conducting the ministry. The manual is available for a donation of \$25 from Carmichael Presbyterian Church (Care Visitor Ministry), 5645 Marconi Ave, Carmichael, CA 95608. Members of the Program Team are available for more information and support. Please contact the church office by mail; www.carmichaelpres.org or phone: (916) 486-9081.

Care Visitor Training

Care Visitors participate initially in a six-hour training in which they are introduced to the

role of the Care Visitor - an overview of caregiving, confidentiality and prayer with the caregiver. A focus of the training is learning to listen using our model OARS which supports decision-making and change by the caregiver. The components are Open-ended questioning, Affirmation, Reflection and Summary. Participants work in dyads to practice this new way of communicating. Care Visitors do not provide solutions but actively listen to an issue, question what and how the caregivers want to address it and then are supportive for the way the caregivers decides to proceed. This approach fosters caregiver resiliency and does not put Care Visitors in the position of directing decisions.

Care Visitors learn about the resources of the church and community that may become useful for their caregivers. Our church has Deacons who communicate with our many homebound persons and communion is available in their homes; a DVD of church services can be sent to homes each week; a monthly Mission Bell publication is mailed to all members, prayer shawls are provided for many in need; our Stephen Ministers are available for individuals in crisis; Pastors visit members in their homes and in hospital and are available in many other ways for support and the Faith Community Nurse is available for consultation and provision of donated home health equipment.

Although the Care Visitor Ministry does not focus on care recipients, there are many ways that our church can be involved and the Care Visitor can help to make these connections available. Groups, such as Presbyterian Women's Circles and Mariner Ships, reach out to their members who may be unable to attend and provide social support in many friendly ways. Often flowers from the Sunday services are delivered to our members who are ill or frail.

The Care Visitor training consists of listening techniques, maintaining confidentiality, adapting to changing needs of caregivers, practical ways to promote wholeness, prayer and strengthening church connections. The program is designed to be evidence based with ongoing measurements of progress. Using simple tools we assess the caregiver stress level, physical health, social support, spiritual support, quality of life overall wellbeing, purpose, and self-esteem. Care Visitors are monitored on their confidence rating of ministering to someone (i.e. prayer), learning in the training, and the support from the monthly team meetings.

How the Ministry Functions

The Care Visitor Ministry recruits and trains Care Visitors who are each matched with one caregiver. Once a month the Care Visitor meets with his or her caregiver and attends a monthly Care Visitor Team Meeting led by the Program Leaders. Sometimes visits are conducted by phone. Over time the visits evolve into a state where the caregiver is comfortable and brings up many confidential issues that he or she may not have shared with others. Thus confidentiality is critical and although underlying themes may be addressed at Team Meetings there is no leak of personal identification. Team Leaders are available for consultation when critical issues need to be addressed. Potential caregivers for the Ministry are identified by the Pastor and invited to participate. Over the first two years of implementation seven recipients of care and one caregiver have passed away. The feedback we have received gives evidence that visits by our Care Visitors were helpful to the caregivers. We have incorporated grief and dying into the monthly Care Visitor Team Meetings.

Considerations in Adopting the Ministry

A church considering adoption of the Ministry will need to assess the time commitments. After the 6-hour training of Care Visitors, Program Leaders will be involved 1 hour a month, Care Visitors will have 2 hours a month commitment (the visit and the meeting); caregivers will be involved 1 hour a month (the visit).

Initial costs are minimal. The manual, CD and DVD cost \$25 and some print materials will need to be copied for the participants. The coordinator will need to market the Ministry, the Pastor will need to identify potential caregivers, and the coordinator (with a ministry, health or social service background) will visit potential caregivers to further explain the Ministry and assess the situations and thus become able to match Care Visitor with caregiver. (Our Care Visitors have a security check and are fingerprinted prior to their first assignment.) Our consultant, Taryn Benson, may be able to provide training for a fee. She can be reached by phone at (916) 201-5357 or by email at taryndbenson@hotmail.com.

Closing Remarks and an Invitation

Having a Care Visitor Ministry is a humbling experience as you become aware of the many hurdles and issues involved in caregiving. Care Visitors are able to give of their time and presence to another child of God during a stressful and challenging time during which they give so much of themselves. These lay visitors fulfill a vital service and make it possible for a church to “be there” over time. Care Visitors do not need to be health, social service or ministry professionals. They can be just fellow church members who care enough to “be there”. As Care Visitors learn listening skills and other means to cope, they add value to their own lives and situations. They do not suddenly leave when a death happens -- our Care Visitors continue to care and “be there”. When the caregiver has begun to adjust after the loss of a loved one and resume his or her roles in the church it may be time for closure. Although Care Visitors do not go through the extensive training of Stephen Ministers, they are indeed able to “be there” to actively listen and use the support and guidance of the Team Leaders.

I enthusiastically support communication with persons from other churches who would like to consider adopting the Care Visitor Ministry. If you adopt the ministry you will be able to share and grow along with us. We are considering a website and periodic ways of sharing and growing together. Please consider adoption of the Care Visitor Ministry and contact us!

Ms. Joan Hurlock is a ruling elder and the lead for Fellowship and Nurture Division, the Health Ministry and the Care Visitor Ministry of Carmichael (CA) Presbyterian Church. She is a member of the Health Ministries and Older Adult Ministries Task Force of the Sacramento Presbytery. Also, a retired Nursing Consultant for California Department of Health Services (Cancer Detection Section) and the Public Health Branch of the Ministry of Health, Ontario (Canada), and Professor Emeritus of the University of Northern Colorado School of Nursing with experience coordinating the graduate program in nursing education with a clinical focus in gerontology.