



National Association of Catholic Nurses-U.S.A.

Where NURSING, MINISTRY and CATHOLIC MISSION meet

“Unity in Charity”



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Fall 2019 Newsletter

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Dear Members,

As Fall begins, I write the President's Letter on the Feast of St. Rose of Lima. In the Liturgy of the Hours today, St. Rose, a mystic, shared some words from Jesus,

“Our Lord and Savior lifted up His voice and said with incomparable majesty: *‘Let all men know that grace comes after tribulation. Let them know that without the burden of afflictions it is impossible to reach the height of grace. Let them know that the gifts of grace increase as the struggles increase. Let men take care not to stray and be deceived. This is the only true stairway to paradise, and without the cross they can find no road to climb to heaven.’*”

This has been a particularly challenging spring and summer for your Board of Directors as we transitioned leadership. In addition, one board member lost a mother-in-law whom she and her husband cared for during her last days. Another's mother is still recovering from an extended hospitalization for what should have been a routine procedure, her daughter also caring for her. And a BOD member was hospitalized in a serious condition which thankfully was caught in time not to be terminal. Ah!!! We have also received prayer requests from some of you going through individual trials and tribulations. May we take great comfort in the words of Our Lord Jesus Christ to St. Rose and “*know that the gifts of grace increase as the struggles increase.*” That being said I do remember a story told by St. Mother Teresa of Calcutta, “*One day I met a lady who was dying of cancer in a most terrible condition. And I told her, I say, ‘You know, this terrible pain is only the kiss of Jesus — a sign that you have come so close to Jesus on the cross that he can kiss you.’ And she joined her hands together and said, ‘Mother Teresa, please tell Jesus to stop kissing me.’*” Sometimes it gets overwhelming and we need to give it (whatever it is) to Jesus and Trust that He will bring us through.

Somewhat along the same lines, I was blessed to attend the Avila Institute Conference at the Shrine of the Most Blessed Sacrament in Hanceville, Alabama this last July. As I was thinking about the rapid changes in health care, I mentioned to the man in front of me, “I’m going to be martyred.” It just seems like our Christian faith is challenged each day and now with the recent 2015 HHS mandate, that went into effect January 1, 2019, requiring the electronic medical record to record patients’ (including children’s) gender identity and sexual preference I wonder what will be next. This gentleman asked if I had read the *Martyrs of the Coliseum* by Fr. A.J. O’Reilly, D.D. It is a translation of first-hand accounts of the martyrs. I had always thought that the Romans converted because they saw how much the Christians loved each other. This amazing book shares the story of how the starving lions would approach the Christians and lick their feet. They would devour a handler who got too close but not the Christians. Cauldrons of boiling water or oil would solidify or not injure that Christian. Death usually came by the gladiator’s sword. Seeing these miracles converted thousands of Roman citizens. Another excellent book is, “*In Sinu Jesu: When Heart Speaks to Heart – The Journal of a Priest in Prayer.*” A Benedictine Monk shared his conversations with Our Lord in Eucharistic Adoration. This is a beautiful book and both reveal that we are really, truly never alone. I strongly encourage you to make the time for an hour of Eucharistic adoration each week.

Courtney Donahue Stathis, DNP, RN, FNP-BC, PCCN who serves as both our newsletter editor and is a youth delegate for the International Catholic Nurses (CICIAMS) to the United Nations has assembled an excellent newsletter with contributions from Committee Chairs and members. Thank you all for your contributions. BTW, Courtney is also not alone. She is with child! We will need to start calling Nadine, her mother and Sarah her sister, both also NACN-USA members, Grandma Nadine and Auntie Sarah. Congratulations to all!

As our student members resume their studies, we thank Fr. Michael Whyte for the Holy Sacrifice of the Mass he offered specifically for our Student Members on August 18. He had nurses bring up the gifts and offered a specific prayer for nurses in the prayers of the faithful. Thank you Fr. Whyte. Nursing Students, May the Holy Spirit lead, strengthen and bless you with wisdom, knowledge, understanding, fortitude and prudence as you continue to pursue your nursing studies.

In Jesus’ Holy Name,

Diana Ruzicka, RN, MSN, MA, MA, CNS-BC
(Nursing Administration & Oncology, Strategic Studies, Theology)
President

“We ourselves feel that what we are doing is just a drop in the ocean. But if the drop was not in the ocean, I think the ocean would be less because of the missing drop.”

– St. Mother Teresa of Calcutta

Blessed Hanna Chrzanowska

By Jeannine Gaudet

Are you as excited as I about the news that a nurse, a registered nurse, has been beatified by the Catholic Church and is headed for Sainthood? I first heard the good news at our NACN-USA Conference last year in San Antonio. One of the speakers was Dr. Gosia Brykczynska, the author of the book “Colors of Fire.” In her book she shared the story of Blessed Hanna Chrzanowska, a registered nurse who died in 1973 and was beatified on April 28, 2018. During the conference several of us joined Gosia for a meal, where she told us about a Pilgrimage she was planning for the following April to honor Hanna on her first Feast Day. My heart soared! Hanna is Polish like myself, her first Feast Day fell on Divine Mercy Sunday, and her beatification took place in Krakow, the home of Hanna’s Shrine and the home of St. Faustina and the Divine Mercy Shrine. My bags were packed before I knew any details.

Gosia is very dedicated to advancing the Sainthood cause for Blessed Hanna. Her connections to her own Polish heritage and the story of Hanna and her deep love for God became the driving force for the planning and preparation of the Pilgrimage. She worked closely with the nurses in Warsaw and the nurses in Krakow and together they designed a seven day journey titled “A Walk in the Footsteps of Blessed Hanna Chrzanowska.” Four of us from the United States took part in the Pilgrimage; Diana Ruzicka, Ingrid Tegtman, Alma Abuelouf and myself. On the evening of April 22 we joined a group of nurses from Ireland and shared our first meal with Gosia in Warsaw. Our Pilgrimage had started. Early the next day we officially began our “Walk” and attended Mass at the Dominican Church on Freta Street in the Old Town of Warsaw. Several Polish nurses joined as we prayed and then listened to the tragic story of the fate of so many patients, nurses and doctors who died in the very church where we knelt. It was a hospital during WWII that was bombed. We began to feel the spirit of the times that were part of Hanna’s life. After Mass we took a bus ride through the streets of Warsaw to see the places

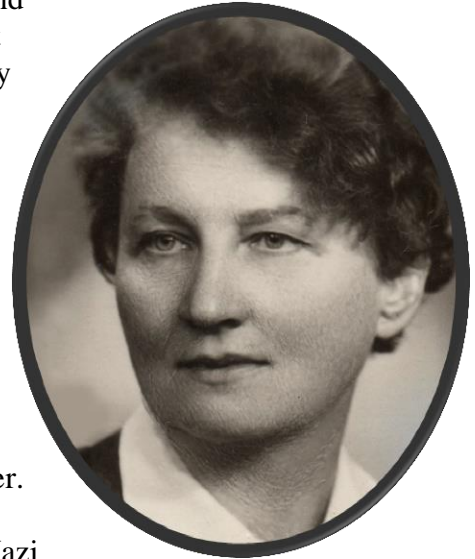


associated with the life of Hanna. We saw her birthplace, the Palace where Hanna grew up, the hospital built by Hanna’s Aunt and where Hanna was a patient as a young girl, the Red Cross Hospital where Hanna was a student nurse in the newly established Warsaw School of Nursing, the new Warsaw School of Nursing where Hanna taught and worked as the editor of the Polish Nursing Journal in the 1930s, and then ended our morning at the Polish Nurses Association Headquarters. We joined a group of Polish nurses who showed us some of the historical archives in the museum of the Polish Nurses Association. We began to gain more of the spirit of the times that were part of Hanna’s life. Our last visit of the day was to St. Adalbert’s Church, where Hanna was baptized. In front of a small shrine for Hanna, we renewed our Baptismal promise.

Wednesday, April 23, found us at Czestoshowa, the home of the miraculous Black Madonna. In 1957 Hanna led the first Nurses’ Pilgrimage to this beautiful shrine. After this pilgrimage, she was dismissed from her job at Kobierzyn Psychiatric Hospital, not the first time this happened to her in Communist occupied Poland. At Czestoshowa, we attended Mass and walked along the Calvary Walk, praying the Nurses Way of the Cross. “With us is Mary, the Servant of the Lord, running in great haste to help the needy, joyfully singing, attuned to the voice of her Son and standing under the cross...Blessed Hanna”

On Thursday, April 25th, we arrived in Krakow. We had a healthy breakfast together and then boarded our bus to the Tatra Mountains and the charming city of Zakopane. Hanna loved to walk and hike in these mountains. Her last trip to Zakopane was three weeks before her death in April of 1973. The hand- built log homes with a backdrop of snowcapped mountains was a delightful surprise for all of us. We visited a beautiful chapel that was built by the local artisans in honor of Our Lady of Fatima in thanksgiving for her intervention during the attempted assassination of their beloved Polish Pope, St. John Paul II.

Krakow is an old town, filled with historical buildings and charming cobblestone streets. Unlike Warsaw, Krakow was not bombed during WWII. On Friday, April 26th, we were joined by Halina Matoga, Vice-postulator of Bl. Hanna's cause for canonization and a nursing student of Bl. Hanna. We visited the main church in the town square and saw the black medieval cross where Hanna started her Parish Nursing project. We visited the Szindler's Factory Historical Museum to better understand life in Krakow during the war. Hanna worked with refugees and destitute people throughout the war. We traveled to the Koblerzyn Psychiatric Hospital where Hanna had worked until she was removed by the Communists. Hanna frequently set up retreats for the handicapped patients and took them to our next destination, the Trzebini Retreat center. Hearing the description of the tragic mass killing of all of the patients at the Psychiatric Hospital on a fateful day during the Nazi occupation, we began to understand why Hanna would find solace at the Retreat Center and would seek the same solace for her patients and nurses. The sadness still hung in the air surrounding the grounds and buildings of this old institution. We learned more of the spirit of the times that were a part of Hanna's life.



On Friday evening we were joined by a group of nurses from England, who would complete the Pilgrimage with us.

On Saturday, April 27, we visited the Carmelite monastery, located across the street from the apartment where Hanna lived after the war. Hanna's funeral Mass was celebrated in this chapel. The celebrant was Hanna's friend and mentor, Cardinal Karol Wojtyla (Pope St. John Paul II).



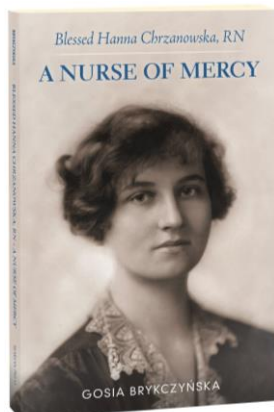
Blessed Hanna photos from <https://hannachrzanowska.pl/en/galeria/>

Hanna attended Mass every day at this chapel during the years she worked to set up Parish Nursing, first in Krakow and eventually across much of Poland. As a young Parish priest, Pope John Paul II encouraged her work and helped spread the acceptance of Parish Nursing. He visited her at her apartment when she was dying from cancer. It is easy to imagine that he is pleased that Hanna will be recognized as a Saint. What a blessing for Poland!

We visited the Ursuline School where Hanna was a high school student and met a nun who served at that time. We also visited the Krakow University School of Nursing where Hanna was an instructor for many years. At the end of the day we traveled to Tyniec Abbey for Vespers. Hanna was a Benedictine Oblate so visits to this old stately Abbey must have been a balm for her soul. We felt the spirit of Hanna on this day.

On Sunday April 28th the Feast Day had arrived. What a beautiful gathering of events for those of us privileged to be present at the Divine Mercy Shrine where the Beatification of Blessed Hanna had taken place. It was Divine Mercy Sunday and the crowds were unbelievable. We first visited the Convent Chapel and prayed at the Shrine for St. Faustina and viewed one of the oldest paintings of Christ in Divine Mercy. We attended Mass at the Divine Mercy Shrine and then returned to Krakow for a reception and Mass at St. Nicholas Church, where the remains of Hanna are located in a shrine. The Krakow Catholic Nurses Association welcomed us with a program. At the end of the day we attended the official Mass in honor of Blessed Hanna, concelebrated by the Archbishop of Krakow. It was an overwhelming day and the spirit of Hanna was alive in our hearts!

On Monday morning, April 29th, we returned to St Nicholas Church for a farewell Mass in the Shrine of Blessed Hanna. We said goodbye to our fellow Pilgrims and went on our journey back to our homes.



I encourage you to read Gosia's book, "A Nurse of Mercy" to learn more about Hanna and her tireless efforts to serve God through her vocation as a nurse. She was a simple woman who served God in everything and every way. She is a Saint we can follow and turn to for inspiration. We truly spent a week "Walking in the footsteps of Blessed Hanna." We carry a piece of the spirit of what it was like in the times of Hanna.

The Salt of the Earth in Salt Lake City, Utah

The International Catholic Committee of Nurses and Medico-Social Assistants (CICIAMS) hosted an exhibit last month at the 68th United Nations Civil Society Conference in Salt Lake City, Utah, August 26-28, 2019. NACN-USA members Dr. Patricia Sayers, DNP, RN and Maria Arvonio, RN, MA (HCE) who are CICIAMS NGO Delegates to the United Nations and Ellen Gianoli, RN, BSN, PHN, MA (Theology), NACN-USA Pacific Regional Director were in Salt Lake City greeting the public, explaining the role of International Catholic Nurses and communicating live via video chat with fellow nurses around the world.

More than 5,000 people from 120 countries were registered for the conference at the Salt Palace Convention Center. The theme of this conference was “Building Inclusive and Sustainable Cities and Communities”. Nice work CICIAMS and NACN-USA Members!



Maria Arvonio coordinates the communication for a live discussion on Malaria.



Ellen Gianoli talks with local Utah nurses about the prolife message.



Pat Sayers and Ellen Gianoli receive a tour of Wyoming Catholic College from Hannah Glennon, class of 2017 and current NACN-USA Student Member, who attends Central Wyoming College Nursing Program.

Awards and Scholarship Committee

Linda Lopp MSN/Ed., RN, Chairperson

A reminder that NACN-USA offers an annual scholarship award of \$1000 to eligible students. Complete applications must be received no later than **June 30th**.

Scholarship Award Guidelines (As noted on the NACN-USA website)

Eligibility

The Scholarship is awarded to NACN-USA members who are enrolled and in good standing as “pre-licensure” nursing student in an accredited associate, baccalaureate or graduate nursing program. One scholarship of \$1,000 is available annually. The scholarship award application must be submitted by **June 30**.

Applicant Requirements

The following required documents are to be submitted along with the application by email to: CatholicNurses@nacn-usa.org

In order to be considered for review, the application packet must include all five of the following required documents:

1. The applicant shall write and email a **self-assessment letter** addressing each of the selection criteria listed below:

Selection criteria for Self-Assessment Letter

- Financial need
- Academic standing
- Specific nursing education goals to promote moral principles within the Catholic context
- Evidence of nursing scholarship and leadership
- Evidence of nursing service based on the integration of faith and health

2. The applicant shall provide **documentation about the program** enrolled. This may include a website link or other document showing the program name, location, curriculum and accreditation.

3. The applicant shall request that a letter be emailed to: CatholicNurses@nacn-usa.org from his/her **Pastor** stating that the applicant is an active, practicing Catholic.

4. The applicant shall request that a **letter of recommendation from a nursing faculty member** be emailed to: CatholicNurses@nacn-usa.org. The letters should address the applicant's progress in the current educational program.

5. The applicant shall submit the **formal application** using the form located on the website <https://nacn-usa.org/resources/scholarship-award/>



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History in the Making: The NACN-USA

Ad Hoc Archives/History Committee (Brief #11)
Archiving in “the Archives!”



By Cheryl Hettman, PhD, RN Nursing Consultant & Educator;
Archives/History Committee Chair; and Past NACN-USA President, 2010-2012

One of the goals of the Archives/History (A&H) Committee has been to secure a proper location for the permanent storage of the important documents and physical materials (e.g., photos, pins, etc.) of the National Association of Catholic Nurses, USA. Archiving in an official repository for historical items not only permits secure preservation of records regarding the people and work of an organization in times gone by, but it also affords accessibility to these items to the public that otherwise would not happen if we just kept these items in a home or office filing cabinet.

I am happy to report at this time, that, in the future, we will be Archiving in “the Archives” at the Catholic University of America (CUA)! A few years ago, I was able to connect with a couple of the archivists there during one of my searches about The Catholic Nurse journal, published by our predecessor organization – The National Council of Catholic Nurses (NCCN). At that time, I only briefly had the opportunity to mention the desire to find a place to store our current NACN’s archive items. Not long ago, I had a chance to visit the American Catholic History Research Center and University Archives on the CUA campus (and I even got a private tour to the “bowels of the building” where the historical “stacks” are kept – as shown below).



Along with discussing the prospect of archiving “our archives,” I was able to spend three full days researching at the Archives center. During that time, I “struck gold!” I found original documents of the NCCN, along with communications and other records with or from their oversight groups (i.e., the United States bishops’ organization, then called the National Catholic Welfare Conference, and its affiliated National Organization of Catholic Women - which was a member of the Welfare Conference’s Department of Lay Organizations).

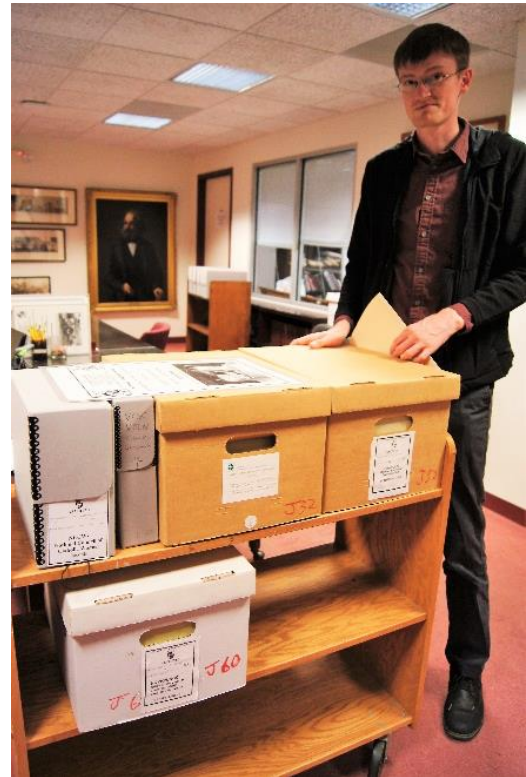
So, how did NCCN historical items end up at CUA, you might ask? First, if you recall from previous A&H Briefs, NCCN came into existence in 1940 under the auspices of the U.S. bishops when they acted upon the request of Pope's Pius XI and XII to establish a national organization of nurses. It seems the NCCN was initially established as a sub-group of the National Organization of Catholic Women which fell within the Lay Organizations department of the bishop's office. Not long after (1947), NCCN became a separate entity under the Lay Organizations department. Second, the U.S. bishops had a religious and teaching relationship with CUA as the primer Catholic university in the country, not to mention the convenient location of CUA in proximity to their office in Washington, D.C.

So, eventually, as the bishop's office document storage space needs increased, and at a period in which there was a change in the organization's focus and even the name of the organization (to the current U.S. Conference of Catholic Bishops – USCCB), most documents that were pre-1970's were moved to the Archives center at the university (personal communication, CUA archivist, Shane MacDonald, 10/2018). Because NCCN fell under the auspices of the bishops, and because the NCCN had disbanded in 1969, the historical records of and about the national nursing organization were moved to the Archives at CUA along with other items from the bishops' office. Not only does this mean these items are in a secure, permanent "home," but because our own NACN-USA is the "resurrected" version of NCCN, we will be permitted to archive our current organization's historical items in the Archives center at CUA. Plus, NACN-USA records will be linked in the Archives database with the NCCN archives so anyone searching for one group will find the other as well! It is very exciting to know that the legacy of our national Catholic nursing organizations will live on in this way! In future A&H Briefs, you will hear more about the specific historical finds that were discovered during my quest at CUA. But for this Brief #11, below you will see a copy of the original 1938 letter I found in the Archives center that was sent to the U.S. bishops by Giuseppe Cardinal Pizzardo on behalf of His Holiness, Pope Pius XI – the one that launched the beginning of the NCCN in 1940, and which, still provides reason for us to keep NACN-USA going today!

Finally, I would be remiss if I did not acknowledge the tremendous support and assistance received from various persons during my visit to the university archives including: Reference Archivist, Shane MacDonald (pictured at right in the Archives center), Collin Molony, Resource Sharing Technician at Mullen Library Reference/Circulation Desk, and Joan Stahl, Director of Research and Instruction, University Libraries. Many thanks and blessings to you!

So, now that you are informed about Archiving in "the Archives" at CUA, please be sure to contact me if you have any items from the past for NACN-USA or affiliated Councils (original items are most desirable, but copies are acceptable in most cases, along with photos of physical materials you prefer not to relinquish). Items best for archiving are important records of the beginning of an organization, special anniversary year celebrations, reports, booklets or other publications, membership and event brochures, pins, photos, annual reports, etc. Once received, I will catalog and process the items so they may be included in the Archives center at the university once that transition begins. Please feel free to contact me through NACN-USA:

CatholicNurses@NACN-USA.org





ACTIO CATHOLICA

Roma, April 8, 1938.
Palazzo S. Callisto

N. 240

(Da citarsi nella risposta)

Received from
Ap. delegate
May 13, 1938

File

Your Excellency,

In the year 1935, as Your Excellency may recall, the Second International Congress of Catholic Nurses was held in Rome. This Congress, which was composed of religious as well as lay nurses, marked the beginning of a new united effort of Catholic nurses to organize themselves better in order to carry out, spiritually and scientifically, their apostolic work in behalf of the sick.

The Holy Father, as a most fitting climax of the Congress and as a testimonial of His deep paternal interest in the apostolate of nursing, accorded to the delegates, more than two thousand in number, an audience at Castel Gandolfo. After describing the important work of the Nurse, her lofty vocation and the preparation so necessary for the successful execution of her mission to the sick, His Holiness told the assembly that it was the duty of every Catholic nurse to belong to Catholic associations of nurses and to promote them in every way possible. Knowing the interest of the Hierarchy in this most important field, I took the liberty, on that occasion, to send to Your Excellency the printed report of the Congress.

Now I have the pleasure of forwarding to you the enclosed copy of the report of the Third International Congress which was held last year in London, under the presidency of His Eminence, Arthur Cardinal Hinsley. I had the honor on that occasion to address the Congress in the name of the August Pontiff. In my message—which may be found on page 25 of the report—the great desire of His Holiness was expressed “that ways and means may be found to emphasize the necessity

of bringing all Catholic nurses within the influence of Catholic Associations of Nurses.' ' In accordance with this wish of the Holy Father, it is most desirable, Your Excellency, that the Catholic nurses of the United States be gathered into one national association under the direction of the respective Ordinaries and of the Hierarchy.

The Reverend Father Garesche, S. J., who has given of his time and energy to effect such an organization, now realizing the great good that would ensue if this most important work were carried out under the guidance of the Hierarchy, has signified his intention of retiring from the movement. It is proposed, therefore, in keeping with the wish manifested in the above words of His Holiness; that the Archbishops and Bishops should organize local associations of Catholic nurses according to the needs of their respective dioceses, which in due time, under the guidance of the Hierarchy, might be united to create a National Federation of Catholic Nurses.

In submitting this proposal for your kind consideration, I should be very grateful to Your Excellency if, after full examination, you would give me the benefit of your prudent judgment as to its advisability and as to the most appropriate means of bringing it to realization.

Trusting that I will be favored with an early reply, I am, Your Excellency, with the assurance of my sentiments of high esteem and of cordial regard.

Faithfully yours in Christ,

J. Cardinal Pizzardi

ADDENDUM: The following excerpt is what is referred to in the above letter from Page 25 of the report from the Third International Congress:

...The exercise of the profession of nurse is surely one of those which offer the greatest possibility for the apostolate, but we must not forget that the nurse, in the exercise of her profession, has to employ all sorts of technical means, and lives in a materialistic atmosphere, exposed to the danger of a limited interior piety only, dissociated from the profession and exterior practices enjoined by the Church. Furthermore, modern theories seek to penetrate the minds of Catholic nurses and to make them become unconsciously strong agents for the propagation of eugenics and neo-Malthusianism. It is necessary, then, to protect them by means of Catholic Action, which has for one of its duties to sustain and fortify them in their professional and Christian formation.

References

Pizzardo, G. Cardinal. April 8, 1938. Letter to U.S. bishops. Retrieved from the Archives of The Catholic University of America.

ACUA, Aquinas Hall storage. November 2018. Retrieved from <http://archives.lib.cua.edu/recman.cfm>

Records shelved in the archives storage facility in Aquinas Hall. November 2018. Retrieved from <http://archives.lib.cua.edu/infostaff.cfm>

The American Nurses Association New Position on Assisted Suicide

Carolyn A. Laabs, PhD, MA, MSN, FNP-BC

Chair, Committee on Ethics & Spirituality

On June 22, 2019, the American Nurses Association (ANA) adopted a [new position statement](#), "The Nurse's Role When a Patient Requests Medical Aid in Dying." This new statement, written by the ANA Center for Ethics and Human Rights, supersedes all their previous statements on this topic in which they have consistently and staunchly opposed assisted suicide. In this new statement, their stated goal is, "not to frame a stance for or against medical aid in dying but rather to frame the nurse's compassionate response within the scope of practice, based on the Code of Ethics for Nurses with Interpretive Statements." While this statement may seem benign, upon closer examination it is anything but, for to replace a position opposing assisted suicide with one of "no stance," one must now be open to what always had been ethically impermissible. Rather than risk sounding morally depraved and come right out and say they are okay with nurses helping patients kill themselves, they issue this disingenuous statement. The "compassionate response" described by the ANA suggests that the good nurse is the one who supports patients in their request for help to kill themselves and that such nurses are the truly compassionate ones who represent the ideal in nursing. Of course the ANA cautions that the nurse must not break the law in providing such support. In essence then, what the ANA is saying is that, if it is legal to do, then it is ethical to do - a flawed and woefully inadequate rule upon which to base one's moral decision-making. Clearly, not every human law is a just one. Only human laws that are grounded in the natural law are just laws, since it is the natural moral law that is grounded in the Eternal Law which is promulgated from eternity by God and ordered toward the [good](#).

In their new position statement, the ANA recognizes "conscience-based refusals" but warns that these must not be based on "personal preference, prejudice, bias, convenience, or arbitrariness." Of course conscience, properly understood, already excludes such things. Given the formal and illicit material cooperation which the "compassionate responses" described by the ANA would entail, it behooves us to form our conscience properly to avoid illicit cooperation with the evil of assisted suicide. Ironically, the ANA further warns that the nurse who refuses to participate in assisted suicide on the grounds of conscience and is committed to continuing to care for patients in moral ways, must not "abandon" patients who request assisted suicide, when it actually is the nurse who helps patients kill themselves who epitomizes patient abandonment. It has been said that much of the support for physician-assisted suicide and euthanasia comes from the thinking that there really is no proper remedy for pain and suffering other than ending a

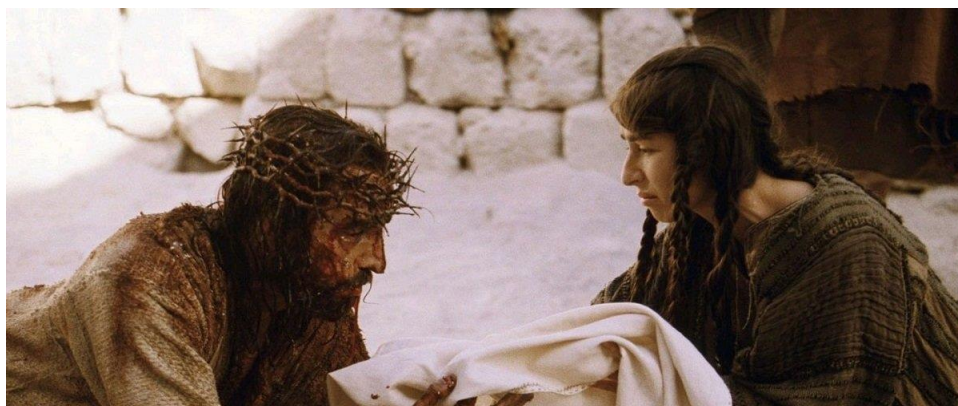
person's life and that patient autonomy reigns supreme. Thus, if the patient requests assistance in killing himself, his request should be accommodated, and done so by a health care professional, such as a nurse, so that it might appear sanitized and legitimate.

“...it behooves us to form our conscience properly to avoid illicit cooperation with the evil of assisted suicide”

However, this is a farce and disregards the long-standing tradition of nursing in which we are never to be involved in killing - not to mention the fifth commandment grounded in natural law and knowable by all morally serious persons. Rather than allow ourselves to be confused by distorted thinking, we must fully educate ourselves on the proper meaning and application of relevant principles such as double effect, ordinary and extraordinary means of treatment, the proper distinction between killing and morally legitimate allowing to die, and on the Christian meaning of human suffering, as grounded in the moral law and informed by Catholic teaching.

It is unfortunate that the ANA has taken this new position. The ANA reminds the public that it is a reflection of their opinion only. That is important to remember. Although the ANA may carry influence among persons who value their opinion, through this new position statement they essentially have relinquished ethical decision-making to the individual nurse and to the state. No need for the ANA. In a culture that embraces moral relativism in which ethics is nothing more than opinion or dictated by the laws of the state, this is not surprising. However, in the end, and I doubt this was their intent, the ANA made itself obsolete.

But the teachings of the Catholic Church are not and never will be obsolete. Catholics have a long-standing moral tradition which is grounded in absolute objective moral truths which inform our decision-making that some things ought never be done, such as killing and being complicit with evil, and some things we ought always strive to do, such as love our neighbor as ourselves. In our efforts as nurses to do precisely that in our care for the sick and dying, the Church offers us a [wealth of resources](#) at our fingertips. So, let us recall the parable of the Good Samaritan ([Luke 10:25-37](#)). Using that example of a genuine compassionate response, Jesus instructs us to, "Go and do likewise" (37), and so, with the grace of God, we shall.



The Passion of the Christ. © 2003 Icon Distribution Inc.

"Amen, I say to you, whatever you did for one of these least brothers of mine, you did for me."
(Matthew 25:40)

A Nurse's Reflection of a Gleaming Staircase: Caring for Christ in a Fading Christian Culture

By: Dianne Johnson

I dropped my bus fare into the box. Thankfully, the ride to Our Lady of Good Counsel, a home for dying cancer patients run by the Dominican Hawthorne Sisters, only required one bus transfer. That meant I did not need to be in downtown Minneapolis too long. Make no mistake: even though it was the mid-1960's, and I was a bit adventuresome for a fifteen-year-old girl, I knew I was not volunteering at the cancer home as result of some high virtuous feeling. Truthfully, I am not sure why I even started to go. My younger sister Kris thinks I went because an older neighbor girl told me it was "cool." Most likely it was my unconscious attempt to get away from my six brothers and sisters for a few hours. What I do know is that it changed the rest of my life.

The tall square red brick building had two floors and was close to the freeway being built. I remember on my first visit walking up the large ornate staircase to the second floor where the women patients were cared for. But I don't remember visiting the first floor where the men were. I don't think it was permitted.

Sister Ruth Anne showed me around and introduced me to the other sisters and the patients. Her smile was infectious and worth the bus ride. Her joy was palpable.

Eventually, the Sisters who ran the home put me in charge of the industrial dishwasher and the mangle iron you ran with your knees. I remember a lot of white sheets and pillowcases. I will never forget the smell of hot sheets as they rolled through that big thing. Secretly, I wished they would teach me how to help feed some of the patients. That was reserved for the sisters. Through my high school years I would go to the cancer home about every other Saturday, but stopped for a time once nursing school started. After I began working it was difficult to find the hours to volunteer. Before I knew it, I was married with three kids, working as a coronary care nurse, and helping out in my parish. But I did manage to visit now and then. I even scheduled several events—Mass and picnics—in the early days of Curatio, an apostolate I began for Catholic health care professionals in the Archdiocese of Saint Paul and Minneapolis. During this time, the Sisters moved to a newly remodeled building on the same property.

It did not matter that the new building looked different. When I visited, I still experienced the same palpable joy, everywhere. It hit me then. All the patients were dying. And still, there was this unexplainable, touchable joy. I yearned for this joy. I had from my earliest days working in the laundry. But I couldn't quite figure out how to capture it.

It was on one of those later visits that I understood it better. A Dominican Hawthorne Sister, also a nurse, gave my sister and me a tour of the new building. This time she took us to both floors, the women's and the men's. I remember there was an elevator, but Sister took the staircase. When we got to the landing I stopped, just taking it all in. That staircase landing was incredible. In fact, you could say it was gleaming. A handsome statue of St. Joseph stood in the corner. There were a few highly polished, green leafy plants. But the floor! The floor was so shiny you would think you were standing on a mirror. And in a home for the dying! Reflective shining beauty in the midst of sorrow, right in the chaos of death.

This staircase landing memory came tumbling back to me after reading an article in *First Things* by John Waters, entitled "When I Met Christ." Mr. Waters had a partial laparoscopic nephrectomy to remove a slow-moving carcinoma and he wrote about the night nurse who cared for him. He pauses in the midst of his story to tell the reader about how the nurse cared for him that night despite the overwhelming bureaucracy and charting required. But interestingly he also writes that in "the old days it was an honor, in the hospital, to keep the floor cleaned."

He continues:

In the old days, the nuns had one boss, and knew what He demanded. There was relatively little call for paperwork. We might say, after Péguy, that the floor needed to be cleaned because it was natural, understood, an honor. The floor did not need to be cleaned in order to get paid, or in proportion to how much one was paid. It did not need to be cleaned for the government, nor for the inspectors, nor for the hospital's board members. It needed to be cleaned for itself, in itself, in its own way. A tradition that came from, went back to the depths of the human race; a history, an absolute, an honor required that the floor be kept clean. And every part of the floor that was not visible was cleaned with the same perfection as the parts that were visible.

Mr. Waters goes on to say that one of the nurses tried to "explain her own kindness to him," in terms of what she had learned of "interpersonal skills." Then he adds knowingly:

"This is the bureaucratic explanation. The deeper one is that, at the frontier of a system creaking at the seams, one human being still looks upon another with affection, pity, and mercy, Heart of Jesus to Heart of Jesus, whether we know it or not, whether we admit it or not." I believe Mr. Waters experienced the dedication of a night nurse who reflected the mercy of God, whether she

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The
gleaming staircase
landing at the
cancer home and
the hospital floor
Mr. Waters wrote
about symbolize a
priority to me that I
experienced as a
nurse.

There was
an order of things,
especially where a
lived-out Catholic
anthropology
existed in the very
structure of the
place and within the
heart of the nurse. It



was exemplified in the excellent nursing care the nuns and we nurses gave. Patients were not viewed as customers, but rather were recognized as other Christs, who therefore had great personal intrinsic dignity. The care delivered to patients in their illness and dying was in the context of a loving God who cared for them personally. The very source of hope and strength for caregivers and families as well as for patients was seen in both the exterior of a Catholic hospital, with its devotions, statues and sacramental graces, and the interior Catholic culture that was lived. But holiness is not only something we see exteriorly. Both a religious nun and a dedicated Christian nurse may strive for holiness, the nun may wear a habit as a visible sign as the bride of Christ and the nurse may wear her scrubs, but both through the grace of the sacraments may possess a Christian joy and care for the sick with the same Christian hope. Both continue Christ's mission to heal. Both strive to give the best care they can for the glory of God even in the midst of great suffering.

I have now come to understand that the beauty of that gleaming floor and the polished leafy plant in the cancer home was a visible symbol that represented a deeper reality of order, truth and beauty. It was, as Mr. Waters wrote, “an honor to keep the floor cleaned” because keeping the floor polished was for the glory of God. Although Christ was invisible in the person of the sick and the dying, a polished floor, too, honored Him. The nuns understood this. They also understood Christian healthcare to mean what it has always meant; love for a stranger who is sick and in need of help and hope. They knew the suffering and eventual death of the patient was not the final word. They cared for the patient with this palpable joy because they embodied the commandment to love one’s neighbor as oneself. They knew the patient was created and destined for eternity.



It is clear the Sisters cared for patients fueled by this Christian love. Today healthcare is running on fumes and a dimmer light of this love. Nonetheless, this love, this felt grace, is real and it still seen in some dedicated Christian healthcare professionals today. What post-Christian healthcare does in various ways is to try to capture this love. The nurse who talked to Mr. Waters even tries to capture it in terms of “interpersonal skills,” “excellent customer care,” and various other programs. But often the well-intentioned programs are ill-fitting and miss the mark. Patients, nurses and doctors know when they hit it, though. Nurses and doctors know it when they sacrifice automated efficiency for human touch and love and are thus open to the graces of the moment. Then they prudently offer the patient the time to really listen to his or her heartfelt concerns, loves and worries, despite the pressures of relentless administrative bureaucracy. Of course, all good nurses and doctors attempt to complete these tasks in a timely way. But they are keenly aware of the immediate needs of other patients. This balancing of needs requires the singular virtue of patience from both the patient who is waiting and the healthcare professional who is trying to act in the best interests of the patient in a timely way.

But even in these situations, I knew as a nurse that it was possible to witness to love in the grace of a single moment. Often it was when the patient and I shared a deep human heartache, profound sorrow, or great joy. The encounter left my heart enlarged, softer, stronger; I would even say it was other-worldly, as though I was standing on holy, gleaming ground, interiorly transformed with an invisible and real movement of shared hearts, Heart of Jesus to Heart of Jesus.

When I began nursing in the 1970s, everything seemed to be in place to serve that end. Even a clean sparkling floor seemed to serve that end. When I volunteered in the cancer home, pain assessments, medications or massages were done frequently and often in order to alleviate pain and discomfort. Water pitchers were always near to the patient and filled with cool water. The customized televisions were hung above the patient to allow easy viewing for an occasional diversion and a glimpse of the outside “normal” world. Families were allowed to come freely, as often as they wished, but were encouraged to stay home and rest during the evening hours knowing that their loved one was cared for exquisitely. And yes, the floors were gleaming! As a sign of the ordinary being extraordinarily lived out, dying patients would often chat with the nun who cared for them about this trivial matter and that, carrying on a rather humdrum chatter of things in the midst of dying. And into this ordinary moment it sometimes felt as if you could touch the graces being poured out all around. Maybe that was the joy I could feel. The priority was obvious: order, virtuous order, was everywhere. Perhaps it was a priority that was unstated. But that was the purpose; that was the whole point. Caring for the patient was everything, as though we cared for the King Himself.

Perhaps healthcare today runs on the fumes of what sustained it in the past. Nonetheless, among some dedicated Christian healthcare professionals, it remains a Holy Fragrance, and always will.

I Am Not Alone: Catholic Nursing and Gender Identity

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I recently felt deeply alone and separated during a summer camp, where I worked as a nurse alongside 10 other nurses, to a group of 1000 all-boy campers and counselors. While the majority of the nursing care involved pulling splinters and providing emotional support for homesickness, there was a troubling situation that required storing and administering a weekly injection of testosterone to a young girl who was transitioning to a boy. This type of nursing moral dilemma was the farthest subject from my mind when I applied for this short summer contract. It certainly took a few days for me to develop a fuller understanding of what was being asked of me and the other camp nurses. This child was born with hormones, genitals and chromosomes of a female but the family, her personal medical team and now camp staff was supporting her in the untruth of gender dysphoria. This situation parallels somewhat the circumstances that a Catholic Nurse in Vermont experienced which was highlighted in a recent NACN-USA global email (Good News for Nurses' Conscience Protection, 8-31-2019) as she was directed by her employer to participate in an abortion.

As nurses, we are employees and are subject to what our employers ask us to perform. This can put us in unethical situations making us morally complicit in grave matter. I'm not sure if the Vermont Catholic nurse belongs to NACN-USA but I'm 5 years a member and will remain for the rest of my life. Just as I can't image my life without Christ in the sacraments, I also cannot image my life without NACN-USA and the amazing Catholic Nurses I've met.

From this organization, the fruits have been deep friendships and amazing ethical resources that speak precisely and boldly of the Catholic Nurses' unique calling in the healthcare team today. I am not alone in my nursing. I belong to an organization that wants me to become a better nurse, by becoming a better Catholic.

I am forever, profoundly blessed from this organization and its roots that date back to the early 1900s. Back at the summer camp, when my interior discernment began to more acutely form my conscious, I had to remind myself that I was not alone in this battle. I had the power of my personal prayers and of intercessory prayers by my friends and family. I also had advice and resources from Catholic groups such as NACN-USA, National Catholic Bioethics Center and my Catholic parish at home. Thank God for technology to bring all of those resources quickly and accurately to my situation. The remaining weeks at camp still included lots of vocal prayers, many tears and pleadings toward God to direct me, but ultimately I did not participate. It was the grace of God, the intercessory prayers of mighty warriors and the Nursing resources lavished upon me from my fellow Catholic Nurses that kept my conscious formed properly. Thanks be to God, the courageous discernment that He gave us, and the bold leadership of Catholic Nurses in the United States.

The New Frontier of Gender Identity

Carolyn A. Laabs, PhD, MA, MSN, FNP-BC

This problem of gender identity is a new frontier that we must learn to navigate with the grace of God who is working through good people in the Church and elsewhere. Even though there are laws on the books protecting conscience with regard to abortion, sterilization, and assisted suicide, to date there are no laws that specifically protect conscience with regard to transgender issues. That is why it is so critical that the proposed revisions to section 1557 of the Affordable Care Act are passed into law. Recall that without the revisions, the definition of "sex" will include "gender identity" and "termination of pregnancy" and there will be no conscience protection for those who object to participating in furthering the deception of transgenderism.

REJUVENATE YOUR SOUL ON RETREAT

25-27 Oct – **2nd Annual Catholic Women Nurses' Retreat** sponsored by the Nashville Dominican Sister of St. Cecelia at their beautiful Bethany Retreat Center near Dickson, Tennessee. (Prayer, Eucharistic Adoration, the Holy Sacrifice of the Mass daily, Confession, Silence and Sharing for nurse practitioners, clinical nurse specialists, registered nurses and licensed practical/vocational nurses). \$225 inclusive of meals, dinner Friday to lunch Sunday. To register email: BethanyRetreat@OP-TN.org

15-17Nov – **Curatio Fall 2019 Retreat** in Buffalo, Minnesota. Theme: The Blessed Virgin Mary Compared to the Air We Breathe with retreat master, Monsignor James Patrick Shea, President of University of Mary, Bismarck, ND. All health care professionals – revitalize your spirit with the Holy Sacrifice of the Mass daily, Eucharistic Adoration, Confession, personal prayer and talks. Location: Christ the King Retreat Center, 621 First Avenue S. Buffalo, MN. Register at: www.CuratioApostolate.com/2019/02/Curatio-Fall-2019-Retreat

For a listing of upcoming Catholic Conferences and Retreats for healthcare professionals see 9/1/2019 Press Release at: <https://NACN-USA.org/News-Events/News/NACN-USA-Press-Releases/>

TRAVEL THE WORLD WITH CATHOLIC NURSES

7th CONGRESS OF THE ENGLISH-SPEAKING AFRICAN REGION OF CICIAMS SEPTEMBER 2020

On behalf of CICIAMS, the Catholic Nurses Association of Kenya herewith invite you to register for the 7th Congress of the English-Speaking Region.

Theme: Embracing Nursing Leadership in
Non-Communicable Disease Management to Enhance Holistic Care.

Congress Dates: 9, 10, 11 September 2020, Nairobi, Kenya

Excursion Date: 12 September (Optional)

More information at <https://NACN-USA.org/News-Events/NACNUSA/>





Our Mission

The National Association of Catholic Nurses, U.S.A. gives nurses of different backgrounds, but with the same Roman Catholic values, the opportunity to promote moral principles within the Catholic context in nursing and stimulate desire for professional development. This approach to Roman Catholic doctrine focuses on educational programs, spiritual nourishment, patient advocacy, and integration of faith and health. As we continue to share our faith and values with each other, and with other healthcare providers, we simultaneously reach outward to the larger Church and also our communities, as we offer support to those in need.

Objectives of NACN

- To promote education in Catholic nursing ethics
- To nurture spiritual growth
- To provide guidance, support and networking for Catholic nurses and nursing students, as well as other healthcare professionals and non-healthcare professionals who support the mission and objectives of the NACN-USA
- To advocate for those in need through efforts which integrate faith and health



Articles must be received by the following deadlines to be considered for the newsletter:

Winter (published in Dec.): Nov. 15
Spring (published in March): Feb. 15
Summer (published in June): May 15
Fall (published in September): Aug. 15

Please send your submissions by e-mail to:

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