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World Meetings of Families – Philadelphia 25-27 September 2015 (Papal Visit 26-27)

Registration Now Open at: <http://www.worldmeeting2015.org/plan-your-visit/register/>

President's Message

Colleagues,

The Holiday Season is almost upon us. As we face challenges to our Economic Security, International Threats, and differing views on Ebola, Energy, Health Care, Immigration it can be tempting to be preoccupied with current issues. However the season of Advent, which begins on November 30 is a season of Hope. It affords society the opportunity to transcend daily problems and to focus on the Incarnation of Our Lord and Savior Jesus Christ, who is Beauty, Goodness and Truth. Catholic Nursing can be examples of Hopeful attitudes and behavior as an antidote to worldly concerns.

NACN is expanding its boundaries and using our talents well. Alma Abuelouf, Marie Hilliard, Kathleen Kirkpatrick and Marylee Meehan attended a recent CICIAMS International Conference in Ireland. We are looking forward to the Synod on the Family to be held in Philadelphia in September 2015 and NACN will be represented. We hope other NACN members will attend the Synod. We are pleased to announce that new Councils are forming in Maryland and New Jersey. NACN is eager to provide assistance with the formation of new Councils in other states. The newly formed History and Archives Committee chaired by Cheryl Hettman, PhD, RN is working hard to compile NACN History. If you have relevant items please forward them to the Committee. The email address is hettmanca@hotmail.com.

The 2016 conference planning is underway. The topic for the Conference will be the Family. The exact title and location of the conference and call for abstracts will be announced in spring 2015.

With Best wishes for a Blessed and Peaceful Christmas and New Year.

Diana M. L. Newman

Diana M. L. Newman, EdD RN
President NACN-USA

Archives / History Committee
Needs Your Documents & Artifacts!
See the article in this edition. Please email:
Cheryl Hettman, hettmanca@hotmail.com
regarding any items you may have to contribute.



CONNECTIONS: CATHOLIC INTELLECTUAL TRADITION AND CONCEPTUAL NURSING MODELS

by Diana M. L. Newman, EdD, RN
President NACN-USA

Contemporary nursing knowledge benefits from the Catholic intellectual tradition as a foundation for current nursing conceptual models. St.

Thomas Aquinas described the human intellect as a gift from God. The intellect can know what is before it that is what is important to the observer.



For nursing, this provides support for nursing to know and describe its world view that is the focus of nursing. The world view for nursing provides the focus for philosophical and

scientific development of nursing knowledge described in conceptual models of nursing which guide nursing practice. Nursing scholars endeavor to continually develop and refine nursing knowledge. Many nursing scholars come from the Roman Catholic tradition and have made significant contributions to nursing. These scholars include Imogene King the King Systems Framework (King, 1981); Madeline Leininger, Transcultural Nursing, (Leininger & McFarland, 2002); Dorothea Orem, The Self Care Framework (Orem, 2001) and Sr. Callista Roy, The Roy Adaptation Model (Roy & Andrews, 1999) and others. The work of these scholars facilitates the relationship between faith and reason for nursing which enhances the health of society.

Nursing is concerned with the human person. The term humanism is found throughout the nursing literature. Secular humanism can lead to fragmentation, self-alienation and meaninglessness. An industrialized society can lead to atheistic humanism, a nihilistic type of existentialism and tend toward despair, skepticism and relativism. St. Ignatius of Loyola defines humanism



based on the person seeking a spiritual dimension that gives meaning to life. St. Ignatius understands the center of man is God. Secular humanism understands the center of man as man, without God. Religious

humanism sees the person as having purposefulness, holism, subjective and relational, with creative power. Religious humanism posits that people can be guided by something that transcends human life. St. Ignatius described six elements of humanism as follows: classicism, educating the whole person, an active life of civic virtue, individualism within the community, human dignity and human freedom and the unity and universality of truth. The Absolute Truth is God. (Hanna, 2013).



The philosophy of the Roy Adaptation Model (Roy, 1999) is based on the definition of humanism described by St. Ignatius of Loyola. The Roy Adaptation models states that humans share in creative power, behave purposefully (not cause and effect), possess intrinsic holism and strive to maintain integrity and realize the need for relationships. The 21st Century philosophical assumptions of the Roy Adaptation Model are:

1. Persons have mutual relationships with the world and with God.
2. Human meaning is rooted in an omega point convergence of the universe.
3. God is intimately revealed in the diversity of creation and is the common destiny of creation.
4. Persons use human creative abilities of awareness, enlightenment and faith.
5. Persons are accountable for the purposes of deriving, sustaining and transforming the universe.



Sr. Callista Roy

The Roy Model is one example of a nursing conceptual model that is consistent with the Catholic intellectual tradition. Nurses who base their practice on a nursing conceptual model such as the Roy Adaptation Model have the opportunity to advance nursing practice in a manner consistent with their faith. This can also advance nursing knowledge as philosophical and scientific research can yield evidence that directs nursing practice in accord with their faith tradition. Using a nursing conceptual model that is consistent with the Catholic tradition may help nurses cope with situations that involve ethical and moral issues in a life affirming way. This may prevent moral distress in patients and nurses. For further information about the Roy Adaptation Model click on [www. Bc.edu/ /schools/son/faculty/featured theorist/Roy_Adation_Model.html](http://www.Bc.edu/schools/son/faculty/featured_theorist/Roy_Adaptation_Model.html).

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Roman Catholic Nursing Theorists/Scholars



Imogene M. King Madeleine Leininger Dorothea Orem

FERTILITY HEALTH LITERACY

by Mary Lee Barron, PhD, APRN,
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Associate Professor, Southern Illinois
University, Edwardsville



Introduction

In the Catholic worldview fertility is seen as a gift. However, for many, fertility is treated as a disease with suppressing medications. Protecting this aspect of health is sometimes a challenge in current U.S. culture even though there are over a million infertile U.S. couples. There are national initiatives addressing preconception health which aims to identify and modify risks to a woman's health or pregnancy outcome through prevention and management.¹⁻³ However, there is little in the literature addressing preconception issues for men.⁴ But looking beyond pregnancy outcome, reproductive health is also sensitive to behaviors and conditions that are associated with cardio-metabolic disease later in life **for both men and women**. Fertility indicators are another "vital sign".

Fertility reflects a man's "overall" health. Men who live a healthy lifestyle are more likely to produce healthy sperm and better semen quality. An emerging paradigm in men's health is the relationship of sexual function and cardiometabolic risk.⁵ Erectile dysfunction is a sentinel marker for future cardiovascular disease.⁵ This risk factor is as strong as smoking or a family history of myocardial infarction.⁶ Additionally, there is evidence linking testosterone deficiency and metabolic syndrome. Testosterone deficiency affects functioning of multiple organ systems: diminished libido, erectile quality and frequency, changes in mood, sleep disturbances, decrease in lean body mass, increase in visceral fat, hair and skin alterations, and decreased bone mineral density.⁵ Low testosterone predisposes men to insulin resistance, obesity, abnormal lipid profiles, and borderline or overt hypertension.⁷

In women menstrual cycle characteristics are reflective of endocrine function and may indicate risk factors for cardiovascular disease (CVD), polycystic ovarian syndrome (PCOS), and reproductive cancers. Menstrual cycle length is a noninvasive clinical marker of reproductive function useful to the assessment of normal development and the exclusion of pathological conditions. Fertility literacy, as a subset of information in health literacy, is defined as the degree to which men and women understand fertility information. For men, this would include the effect of modifiable lifestyle factors on male fertility factors. For women this would include knowledge of the normal characteristics of the menstrual cycle as well as modifiable lifestyle factors that affect those characteristics. As a first step, the nurse needs a sufficient degree of fertility literacy to be able to educate clients.

The purpose of this article is to provide the nurse who does not necessarily see patients for fertility issues with a concise guide of current information. Nurses are in a key position to educate patients on those issues that not only affect the patient's fertility but his/her general health.

Based on two articles published in the Journal for Nurse Practitioners these are the key points of fertility health literacy education:^{8,9}

Modifiable Lifestyle factors

Semen quality is a surrogate measure of male fertility. Chronic disease risk and poor semen quality are associated with many of the same modifiable risk factors. Menstrual patterns are influenced by a number of host and environmental characteristics. The more common factors would include stress, exercise, smoking, age, body weight, caffeine, and alcohol consumption.

Stress

Adrenal hormones can interfere with hypothalamic-pituitary-gonadal functions resulting in decreased spermatogenesis.⁴ Acute event stress can reduce sperm density, sperm motility, and normal sperm, and increase abnormal sperm percentage. In women, acute or chronic stress is associated with variation in the menstrual cycle and anovulation either shortening or lengthening the cycles.^{10,11,12} High levels of perceived stress significantly increased the probability of long cycles i.e. over 43 days.¹¹ Studies of exposure to stressful work conditions demonstrate alterations in menstrual function, fertility and spontaneous abortion in varying occupations such as nurses and manufacturing workers.¹³ Stressful jobs doubled risk for short cycle length.¹⁴ Stress may lead to poor follicular development resulting in abnormal function of the corpus luteum and thus a short luteal phase.¹⁵

Exercise

The health benefits of exercising are well-known including improving insulin levels but moderation is key. Exercise minimally increased probability of long cycles in a study of college women.¹² This is perhaps age related because physical activity (>4 hours week) increased follicular phase in women under 35 but not in those over 35.¹²

Men should be selective regarding exercise. For example, regular bike riding poses a risk because of pressure and friction against the seat restricting blood flow to the testicles. He should be advised to wear protective gear when participating in contact sports. Overly intense exercise does produce high levels of adrenal steroid hormones that can cause a testosterone deficiency.¹⁶ Use of anabolic steroids suppresses testosterone, decreases sperm count and motility and leads to erectile dysfunction.¹⁷

FERTILITY HEALTH LITERACY (CONT'D)

Body Weight

Obesity is directly associated with increasing male infertility. In women, although it is well known that obesity rates in the United States are problematic, there are fewer studies examining high body weight and menstrual cycle disturbances than studies of low body weight.

Obese males have lower testosterone, higher estrogen levels, higher risk of CVD, higher risk of erectile dysfunction, poorer sperm quality and reduced fertility. High BMI is also associated with adverse changes in semen quality.^{18,19} The odds of infertility increase 10% for every 20 lbs. overweight.¹⁹ It is also possible that high BMI is associated with higher scrotal temperatures, and this can have adverse effects on spermatogenesis.¹⁹

The influence of body weight on menstrual function is well studied. The longest mean cycle lengths occur with the greater BMI, body fat mass, and body lean mass. That is, women with low BMI or high BMI associated with obesity both have longer than average cycle lengths.²⁰ There is evidence that fertility is decreased by having a BMI of < 20 or $> 25 \text{ kg/m}^2$.^{21,22} The fertility of women with a body mass index $> 25 \text{ kg/m}^2$ is lower than normally weighted women ($20\text{-}25 \text{ kg/m}^2$) and lower in women with long or irregular cycles even when BMI is within normal range and/or cycles were regular.²²

Body weight influences menstrual function in healthy women.

Amenorrhea is the most severe menstrual dysfunction observed in athletes. Less severe

menstrual disturbances include luteal phase defects and anovulatory cycles. There is considerable individual variation as to when the symptoms will occur. The most common menstrual cycle abnormality in female athletes and active women is a luteal phase defect.²³

Smoking, Alcohol, and Caffeine Use

Smoking affects all parameters: semen volume, sperm density, total sperm count, motility, and morphology.²⁴ Chronic smokers show a 13% to 17% decline in sperm counts, according to a meta-analysis of 20 studies.²⁵ Additionally, nicotine and other chemicals in cigarettes cause sperm DNA damage.⁴

In women, smoking is associated with short cycle length and is dose dependent.^{26,27,28} Heavy smoking (≥ 20 cigarettes per day) was associated with nearly four times the risk of short cycle (≤ 25 days). Women who smoked an average of ≥ 10 cigarettes per day had significantly more variable phase and menses lengths than nonsmokers. A greater smoking level increases the risk of anovulation and short luteal phase. Cycle lengths of ex-smokers with ten or more pack-years of exposure were also more likely to be short and have shorter luteal phases than those of never smokers.²⁸

Marijuana reduces testosterone production, sperm count, and semen quality. Cannabis also negatively influences important sperm functions, including motility and acrosome reaction, two fundamental processes necessary for oocyte fertilization.²⁹ Marijuana is known risk factor for primary female infertility as it disrupts LH secretion, inhibits prolactin secretion, and disrupts the menstrual cycle. In animal models it induces implantation failure.³⁰

Alcohol causes fertility abnormalities in men by lowering testosterone levels, lowering sperm counts and impairing sperm motility. Serum testosterone level in alcoholics negatively correlated with duration of alcohol abuse.³¹ It remains unclear as to what level of alcohol has an effect on the menstrual cycle.

Caffeine intake can be difficult to study since intake is often associated with alcohol and smoking. However, several researchers have examined the association between semen quality and caffeine intake. High cola (> 14 0.5-L bottles/week) and/or caffeine (> 800 mg/day) intake was associated with reduced sperm concentration and total sperm count, although only significant for cola. Therefore there is a possibility of a threshold above which cola, and probably caffeine, negatively affects semen quality.³²

There are few studies examining alcohol consumption and menstrual cycle characteristics. It remains unclear from the evidence exactly what level of alcohol consumption has an effect upon fertility. A large study linked high consumption (> 8 drinks/week) but not moderate consumption with decreased fertility.³³ Caffeine intake is not strongly related to an increased risk for anovulation, phase changes, long cycles, or measures of within-woman cycle variability.¹⁴ Chavarro and colleagues also concluded that alcohol and caffeine did not impair ovulation to the point of decreasing fertility.³⁴

Fertility Diet

Chavarro and colleagues (2007-2010) published a number of articles regarding diet and fertility as well as a book "The Fertility Diet". These recommendations were based on a retrospective study of data from the Nurses Health Study II (1991-1999) looking at modifiable risk factors of women who became pregnant versus those who did not. Because PCOS contributes significantly to infertility some of the recommendations are geared to this population. The recommendation to avoid skim milk and drink whole milk is based on the fact that skim milk has a more stimulant effect of Insulin Growth Factor-1, leading to more insulin resistance, which is tied to the pathogenesis of PCOS.³³ Moyad reviewed current issues and published recommendations for the Optimal Male Health Diet and Dietary Supplement program geared to preventing CVD.¹⁸ Trans-fats were present in human sperm and were inversely related to sperm concentration and may



FERTILITY HEALTH LITERACY (CONT'D)

affect spermatogenesis profoundly.³⁶ Similar dietary recommendations can be made for both men and women—see Table 1.

Sleep Hygiene

Melatonin is a powerful anti-cancer hormone through its activity as an anti-oxidant. Although there are no sleep studies examining the effect on male fertility, emerging information on sleep generally lead to the conclusion that nighttime ambient light exposure should be minimized and that sleeping in cool dark rooms is optimal for all.

Light at night may have pronounced effects on the menstrual cycle and symptoms through the influence of melatonin secretion. This hormone may be involved in the neuroendocrine pathology underlying PCOS, hypothalamic amenorrhea and in women who exhibit psychopathology such as PMS.³⁸ Minimizing exposure to ambient light at night can be accomplished by maximally darkening the bedroom and using an alarm clock with red light (humans are spectrally sensitive to light, especially green or blue). This has a positive effect on menstrual cycle parameters including cervical mucus secretion.³⁸

Female shift workers report more menstrual irregularity and longer cycle lengths.³⁸ Findings from The Nurses Health Study II (1993) cohort shift workers, exposed to light at night, showed an association with menstrual function, with possible implications for fertility and other cycle-related aspects of women's health. Women with 20+ months of rotating shift work were more likely to have irregular cycles or short cycles. For irregular patterns and for 40+ day cycles, there was evidence of a dose response with increasing months of rotating shift work.³⁹

For Men:

Scrotal temperature

The Sertoli cells of the testicles are temperature sensitive and must be several degrees cooler than normal body temperature to function properly. Fever, hot tubs, tight underwear, exposure to high-temperature working conditions, and occupations that require long periods of sitting that raise scrotal temperature can depress semen quality. Using a laptop on the knees (heat produced by battery) may also increase scrotal temperature. In general, the more prolonged is the elevation in testicular temperature, then the greater will be the detrimental effect on spermatogenesis.⁴⁰

For Women:

Menstrual Variability

Many women do not understand the concept of “normal” menstrual variability. Indeed, nearly every illustration of the menstrual cycle is 28 days in length. Oral contraceptive pills are packaged as 28 cycles, reinforcing this notion of the 28 day cycle. However, early longitudinal studies on length of the menstrual cycle demonstrate that there is wide variation within a woman and between women.^{41,42,43} Women tend to be “irregularly irregular”⁴³. Cycle length is

least variable in women between 20 and 40 years of age, reaching a minimum for women between the ages of 35-39.⁴¹ Maximum menstrual cycle variation of more than 14 days in about 30% of a cohort of women aged 15-44.⁴⁴ Standard definitions of oligomenorrhea (cycle length 36-90 days) and polymenorrhea (cycle length <21 days) were supported by the results of this study. Nearly half of 130 healthy women aged 18-40 (786 cycles) had cycle length ranges of 7 days or more and 20% had cycle ranges of 14 days or more.⁴⁵ Lengths over 42 days could be considered irregular.

When within-woman variability of >10 days from the usual cycle length, fertility and embryonic loss was approximately 25% that of women who had no variation.⁴⁵ The study sample were couples aged 20-35 years, an age identified with the least menstrual cycle variability. The mechanisms probably are functional disturbances in ovulation, conception, implantation, or sustained pregnancy, linked with variable menstrual cycle length.⁴⁶

Post-contraceptive cycles

Unfortunately, there are few studies examining menstrual cycle variability after discontinuing hormonal methods of contraception. Return of ovulation is immediate in 60% of women. However, cervical mucus characteristics are altered for at least the first two cycles after discontinuation of oral contraceptives (OC), the delay of ovulation and changes in menstrual pattern also occur.^{47,48} Cycle disturbance and insufficient luteal phases were more frequent until the seventh cycle.⁴⁷ Studies of the return of fertility after Depo-Provera (DMPA) are aged and sparse. The mean time for the return of fertility was 260 days.⁴⁸ By 18 months after the last injection, 90% of former users of DMPA have become pregnant.⁴⁹

Other Issues

If the couple is actively seeking pregnancy they should be advised to not use lubricants as these are often spermicidal. Pre-Seed is a lubricant which has a similar pH level and osmotic concentration as semen, providing a healthy environment for sperm to survive.

Environmental Impact

Over the past century human exposure to environmental chemicals has changed. Some of these exposures are in the work environment, due to hobbies, or found in the home in plastic packaging and personal care products. Electromagnetic field exposure such as cell phone use is another area of active research. It is beyond the scope of this article to discuss this expansive topic.

***Jesus' Cross shows the full force of evil,
but also the full power of God's mercy***

His Holiness Pope Francis

Twitter of 10/25/2014 (@Pontifex)

Conclusion

The key elements to educating men and women about modifiable risk factors as well as their effects on fertility have been outlined. Reproductive health is a sensitive marker for behaviors and conditions that are associated with chronic disease later in life. Fertility literacy, as a part of health literacy, is important for improving reproductive health, pregnancy outcomes, and disease prevention.

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UPCOMING EVENTS 2015

Calendar						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	1	2	3	4	5

Registration is Now Open for
World Meeting of Families
<http://www.worldmeeting2015.org>

Jan 31 – Deadline for May 12-18, Warriors to Lourdes –
57th International Military Pilgrimage (see below).

Mar/Apr, June & October 2015, North American Lourdes
Volunteers, Special Needs Pilgrimage. Nurses,
Physicians, Companions & Caregivers Needed.
www.lourdesvolunteers.org or
info@lourdesvolunteers.org

May 12-18, 2015 – Warriors to Lourdes, A Pilgrimage for
Military Personnel for the 57th International Military
Pilgrimage to Lourdes, France. For more information:
Lourdes@KofC.org; Register by Jan2015-
www.warriorstolourdes.com

Aug 31 – Deadline for registration – 2015 National
Catholic Certification Program Health Care Ethics
(*Bioethics Certification*), National Catholic Bioethics
Center (NCBC), <http://www.ncbcenter.org/certification>

Sep. 25-27 – World Meeting of Families, Philadelphia

Sep 26 & 27 – Papal Visit - The Holy Father is expected
to participate in the Festival of Families, an intercultural
celebration of family life around the world, which would
be held on Saturday, September 26, and a Papal Mass to
be held on Sunday, September 27. Both of these events
will be open to the public. (Registration to World Day of
Families is not required for the Papal visit)

Oct 1-3 – Catholic Medical Association, 84th Annual
Educational Conference, Philadelphia.
<http://www.cathmed.org/>

Oct. 4-25 – World Synod of Bishops, Vatican. Theme:
“Jesus Christ reveals the mystery & vocation of the
family.”

2016:
TBD – National Association of Catholic Nurses-USA
Meeting, Date & Location TBD.

July 26-31, 2016 - World Youth Day, Krakow, Poland

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HAVE YOU READ THE CHURCH TEACHING ON THE FAMILY?



1994 – **LETTER TO FAMILIES** promulgated by Pope St. John Paul II
http://www.vatican.va/holy_father/john_paul_ii/letters/documents/hf_jp-ii LET_02021994_families_en.html

Listen to Francis Cardinal Arinze discuss the document **Letter to Families, Commentaries on CD**. When Pope St. John Paul II wrote his 1994 Apostolic Letter to Families in conjunction with the Year of the Family, he declared his eagerness "to greet you (families) with deep affection and to spend time with you." Francis Cardinal Arinze, who worked closely with the late Holy Father for more than two decades, takes you through an in-depth examination of what has been called "the most personal and heartfelt document of Pope John Paul II's pontificate" (Fr. John McCloskey). Learn about the historical significance of this first Apostolic Letter ever addressed specifically to families. Be inspired by the saint's vision of the family's role as the fundamental unit of the "civilization of love" and its potential impact on the Church and the world. 4-CD set, 4.5 hours, 15 episodes;
<http://www.familyland.org/FLStore/ProductDetails.aspx?productID=12045>

"....When they say this Chaplet [of Divine Mercy] in the presence of the dying, I will stand between My Father and the dying person not as the just judge but as the Merciful Savior".
 Jesus to Sr. Faustina



Cardinal Arinze was born November 1, 1932 in Eziowelle and ordained a priest of Onitsha, Nigeria in 1958, Bishop in 1965, Archbishop in 1967, Cardinal in 1985 and Prefect of the Congregation for Divine Worship & the Discipline of the Sacraments in 2001. He was appointed Cardinal-Bishop of Velletri-Segni, Italy in 2005 and retired in 2008. He is very astute and wise as he explains the Truth of these beautiful documents.

1981 - Apostolic Exhortation – **FAMILIARIS CONSORTIO (ON THE ROLE OF THE CHRISTIAN FAMILY IN THE MODERN WORLD)** promulgated by Pope St. John Paul II
http://www.vatican.va/holy_father/john_paul_ii/apost_exhortations/documents/hf_jp-ii exh_19811122_familiaris-consortio_en.html

Listen to Francis Cardinal Arinze **The Role of the Christian Family in the Modern World Commentaries on CD**. Join Francis Cardinal Arinze as he comments on Pope John Paul II's ground-breaking battle plan to renew the Christian family, in the apostolic exhortation, *On the Role of the Christian Family in the Modern World* (Familiaris Consortio). Listen as the late Holy Father defends the proper understanding of marriage and the family, and emphasizes the dignity and importance of every family member. Learn how the Church and the family can support each other in an increasingly secular and hostile world. Perfect for study groups and while traveling or exercising. 5-CD set, 6 hours.
<http://www.familyland.org/FLStore/ProductDetails.aspx?productID=12352>

1930 – Encyclical - **CASTI CONNUBII (ON CHRISTIAN MARRIAGE)** promulgated by Pope Pius XI
http://www.vatican.va/holy_father/pius_xi/encyclicals/documents/hf_p-xi_enc_31121930_casti-connubii_en.html

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The Ethics and Spirituality Committee of the
National Association of Catholic Nurses

invites nurses everywhere to join in a
Novena to the Immaculate Conception

From:
November 30



To:
December 8
(Feast of the Immaculate
Conception)

Novena Prayer

O Mary Immaculate, lily of purity, I salute you, because from the very first instant of your conception you were filled with grace.

I thank and adore the Most Holy Trinity for having imparted to you favors so sublime.

O Mary, full of grace, help me to share, even though just a little, in the fullness of grace so wonderfully bestowed on you in your Immaculate Conception.

With firm confidence in your never failing intercession, we beseech you to obtain for us the intention of this novena [state your intention here], and also that purity of mind, heart, and body necessary to unite us with God. Amen.

O Mary, conceived without sin, pray for us who have recourse to you.

O Mother of God, by your Immaculate Conception, intercede for us with your Divine Son, and obtain for us from Him, the favor for which we pray. Amen.

Intentions

- For the work of NACN; that it will effectively support Catholic nurses everywhere as they strive to honor their faith in their care-giving work.
- For the members NACN; that they will live their faith joyfully and courageously as they seek to uphold the dignity of human life in their daily work.
- For the nursing profession; that it will be constantly renewed by God's grace and mercy.

REGIONS & LOCAL COUNCIL – NEWS



NORTHEAST REGION

(PA, NY, CT, VT, NH, MA, ME, RI, NJ)

NE Regional Representative

Marie Hilliard, RN, PhD, JCL, Philadelphia, PA

MHilliard@nbcenter.org

Having New York City, NY and the United Nations in the Northeast Region provided a unique opportunity for the Region to assist the International Catholic Committee of Nurses and Medical Social Assistants (CICIAMS), a member of the Pontifical Council on the Laity, to have representation at the United Nations. As a Non-Governmental Organization, CICIAMS has consultative status with the WHO, ILO, UNICEF and the Council of Europe. Four of our Region members have volunteered as CICIAMS representatives for this role with the United Nations, and been approved by CICIAMS, pending United Nations approval: **Dr. Patricia Sayers; Ms. Maria Arvonio; Dr. Marian Nowak;** and **Mrs. Patricia Staley**. We are, indeed, grateful for such dedication to nursing and the health of the international community by these fine representatives of NACN-U.S.A.

NACN-U.S.A. again has been a signatory to an *amicus* brief in support of sound and life giving health care policies. NACN-U.S.A. supports the state of Iowa and the Rules of its Board of Health to protect women from abortions via telemedicine. Planned Parenthood has challenged these safety requirements and the case is before the Iowa Supreme Court. The Regional Chair, **Dr. Marie Hilliard**, is Director of Bioethics and Public Policy for The National Catholic Bioethics Center, and assists the Ethics and Spirituality Committee in fulfilling such critical roles for the common good.

Fall River Council of Catholic Nurses

Betty Novacek, Acting President, Somerset, MA

Dr. Diana Newman, NACN-U.S.A. President has maintained contact with her local Fall River, MA Council. She attended a conference on October 18, 2014 sponsored by the Fall River Council of Catholic Nurses “Entitled How to Manage your Stress.” The speakers focused on the use of brain intelligence and heart intelligence. The speakers suggested that using heart

intelligence before brain intelligence may be more transformative in lessening stress levels. The conference presented many interesting ideas and was well attended. We wish to thank Dr. Newman for her involvement with this local Council.

COUNCIL(S) IN FORMATION:

Diocese of Trent Council of Catholic Nurses

Maria Arvonio, RN, BSN, MA &

Patricia Sayers, RN, DNP, Trenton, NJ

elishaspirit2003@yahoo.com &

sayers_patricia@ymail.com

The Northeast Region continues with a vibrant interest in growth and support from fellow nurses who see their nursing as a vocation and ministry. The Newark, NJ Archdiocesan initiative has flourished under the leadership of **Dr. Patricia Sayers** and **Ms. Maria Arvonio**. They have conducted four “Meet and Greets” and are approaching the requisite number of members to advance to council status. There also is interest from the Albany area, by the existing local Council of Catholic Nurses, to formalize a relationship with NACN-U.S.A.

2014 National Nursing Award for Volunteerism



Dr. Marian Nowak, DNP MSN

MPH RN, Assistant Professor,

School of Nursing, Rutgers. The

State University of New Jersey –

Camden and a member of NACN-

USA received the 2014 Nurse.com

Nursing Excellence GEM (Giving

Excellence Meaning) Award.

Nurse.com’s prestigious Nursing

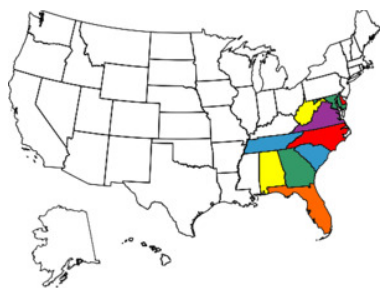
Excellence Awards program honors outstanding nurses in regions across the country leading to the selection of National Nurses of the Year. Dr. Nowak is honored for local, national and international volunteer efforts including:

Local Service: Shelter management during hurricane Sandy, soup kitchen service Camden, NJ, Flu shot administration to disparate population members in Camden, NJ, screening services to migrant workers in central NJ

State & National: Faith Based Nursing initiatives with nursing students, authored disaster triage method adapted statewide, disaster lecture series in coordination with the Surgeon General Office of Volunteerism, Washington, DC, creative solutions to many public health issues over the years **International**

Presentations: Disaster Nursing Strategies - China, Japan, Australia, France, and Ireland.

Congratulations Dr. Nowak!



SOUTHEAST REGION

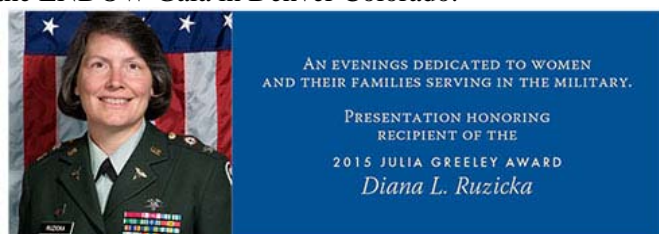
(AL, TN, GA, FL, NC, SC, VA, DC, WV, MD, DE)

SE Regional Representative

Judie Boyle, RN, MSN Baltimore, MD,

tbboyle@aol.com

COL Diana Ruzicka, U.S. Army Retired and NACN-USA Newsletter editor will be honored February 7th at the ENDOW Gala in Denver Colorado.



ENDOW (Educating on the Nature & Dignity of Women) is a lay apostolate of the Catholic Church. Endow offers small study groups as a primary means of connecting women and girls in faith and friendship while exploring Catholic teachings. After learning what the Church truly teaches about the dignity and genius of women, three women of the laity began developing these studies under the guidance of Sr. Prudence Allen, RSM, PhD world renowned philosopher in Catholic feminism. Groups begin with Pope St. John Paul II's 1995 *Letter to Women*. A beautiful sequel study is his 1988 Apostolic Letter "*On the Vocation & Dignity of Women*" (*Mulieris Dignitatem*). All nurses would benefit from the study *On the Christian Meaning of Human Suffering (Salvifici Doloris)*. Diana has a great appreciation for the two studies on the work of St. Thomas Aquinas and the CD set by Sr. Prudence Allen on the *Anthropology of the Human Person*. She wishes that, in addition to the psychology classes she took to prepare her for her nursing career, she'd also studied the Church's teaching on the Truth of the human person. Diana has facilitated 18 studies within the military community at Redstone Arsenal and has grown immensely in her understanding of Church teaching through these beautiful studies. Become an ENDOW facilitator: www.endowgroups.org.

Mid-South Area Association of Catholic Nurses (MSAACN)

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COUNCIL(S) IN FORMATION:

Baltimore Council of the NACN

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MIDWEST REGION

(ND, NE, OK, MN, WI, IL, KY, MO, AR, SD, KS, LA, MI, IA, IN, MS, OH)

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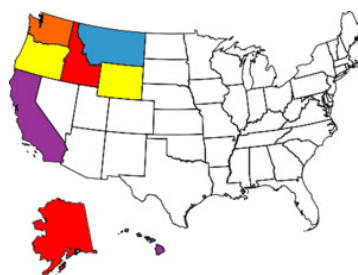
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Council News

Let us know what is happening with your council.

Next newsletter deadline

February 15, 2015

NORTHWEST REGION

(WA, OR, ID, MT, WY, AK, HI, CA)

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Resources for starting a local council are at www.nacn-usa.org under: "About Us" / Local Councils

SOUTHWEST REGION
(NV, UT, CO, AZ, NM, TX)
SW Regional Representative
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**ADDRESS OF HIS HOLINESS POPE FRANCIS FOR THE CONCLUSION OF THE THIRD
EXTRAORDINARY GENERAL ASSEMBLY
OF THE SYNOD OF BISHOPS**

Saturday, 18 October 2014, Synod Hall



Dear Eminences, Beatitudes, Excellencies, Brothers and Sisters,

With a heart full of appreciation and gratitude I want to thank, along with you, the Lord who has accompanied and guided us in the past days, with the light of the Holy Spirit.

From the heart I thank Cardinal Lorenzo Baldisseri, Secretary General of the Synod, Bishop Fabio Fabene, under-secretary, and with them I thank the Relators, Cardinal Peter Erdo, who has worked so much in these days of family mourning, and the Special Secretary Bishop Bruno Forte, the three President delegates, the transcribers, the

consultors, the translators and the unknown workers, all those who have worked with true fidelity and total dedication behind the scenes and without rest. Thank you so much from the heart.

I thank all of you as well, dear Synod fathers, Fraternal Delegates, Auditors, and Assessors, for your active and fruitful participation. I will keep you in prayer asking the Lord to reward you with the abundance of His gifts of grace! (cont'd)

"Now I would like to recommend a medicine to you. Some of you may be wondering: "Is the Pope a pharmacist now?" It is a special medicine which will help you to benefit from the Year of Faith, as it soon will come to an end. It is a medicine that consists of 59 threaded beads; a "spiritual medicine" called Misericordia. A small box containing 59 beads on a string. This little box contains the medicine, and will be distributed to you by volunteers as you leave the Square. Take them! There is a rosary, with which you can pray the **Chaplet of Divine Mercy**, spiritual help for our souls and for spreading love, forgiveness and brotherhood everywhere. Do not forget to take it, because it is good for you. It is good for the heart, the soul, and for life in general!" *Pope Francis, 17Nov2013*



Pray the Rosary Daily
Rosaries distributed at Pope Francis' Angeles Address on November 17, 2013.
The rosary is "spiritual medicine" "spiritual help for our souls and for spreading love, forgiveness & brotherhood everywhere."



**FREE CONSULTATION SERVICES ON BIOETHICAL ISSUES
AVAILABLE THROUGH THE
NATIONAL CATHOLIC BIOETHICS CENTER (NCBC)**



The NCBC offers a free consultation service, by a credentialed bioethicist, who can share with you the Catholic principles for addressing an ethical dilemma involving health care or the life sciences. If you have a specific time-sensitive question concerning such a matter that cannot wait until regular business hours, please call: **(215) 877-2660, 24 hours/day, 7 days/week**. Follow the prompts to leave a message and an ethicist will be paged and respond to your call as soon as possible.

If your question is not related to a time sensitive matter please call the same number during regular business hours 9am - 5pm Eastern Time or use the [online Consultation Request Form](http://www.ncbcenter.org/page.aspx?pid=1174): <http://www.ncbcenter.org/page.aspx?pid=1174>.

NOTE: The National Catholic Bioethics Center (Center) is a non-profit research and educational institute committed to applying the moral teachings of the Catholic Church to ethical issues arising in health care and the life sciences. The Center provides consultations to institutions and individuals seeking its opinion on the appropriate application of Catholic moral teachings to these ethical issues.

Neither the Center's moral analyses nor any other project of the Center should be construed as an attempt to offer or render a legal or medical opinion or otherwise to engage in the practice of law or medicine, or other health care disciplines.

RELIGIOUS LIBERTY UPDATE

NATIONAL CATHOLIC BIOETHICS CENTER BIOETHICS AND PUBLIC POLICY REPORT - NOV2014



Dr. Marie Hilliard, RN, PhD, JCL

The National Scene: As laws to legalize *physician assisted suicide* continue to be proposed at the state level, the tragedy of the death of *Brittany Maynard* by this means has occurred. For the NCBC's response see:

<http://www.ncbcenter.org/resources/physician-assisted-suicide-and-the-death-of-brittany-maynard>. ♦ Also see:

Recent Good News and **The State of Conscience/Religious Liberty** concerning the *Contraceptive Mandate*.

The State of Conscience/Religious Liberty: After the 7th U.S. Circuit Court of Appeals denied the *University of Notre Dame* injunctive relief from the U.S. Department of Health and Human Services' (HHS) *Contraceptive Mandate*, the University has petitioned the United States Supreme Court for relief from this violation of religious liberty.¹ ♦ A regulatory change in *California* has placed *elective abortion* in the category of 'basic health services' which all insurance plans, including those of churches, must cover.² ♦ *Houston, Texas* subpoenas, issued to pastors on behalf of that city's openly lesbian mayor, *demanding all sermons* and correspondence dealing with homosexuality, gender identity, have been withdrawn.³ ♦ Also see: **The State of Marriage**.

The State of Marriage: Six county magistrates have resigned in *North Carolina* rather than honor a court order requiring them to perform wedding ceremonies for same-sex couples.⁴ ♦ *Couer D'Alene, Idaho* City officials have told ordained ministers who run *Hitching Post Wedding Chapel* that they are required to perform same-sex marriages or face months in jail and/or thousands of dollars in fines.⁵ ♦ The *State of New York* has leveled heavy fines on Liberty Ridge Farm in upstate New York for declining to host a *lesbian wedding service*.⁶ ♦ See also: **Recent Good News**.

State by State: Despite the fact that in 2007, and for the sixth time since 1988, *California's Compassionate Choices Act Assisted Suicide* failed in that state's Legislature, the initiative has gained momentum again.⁷ ♦ A U.S. District Court has issued an injunction against a *Louisiana* state law that protects woman seeking an *abortion*, by requiring abortionists to have admitting privileges to local hospitals.⁸ ♦ Similarly, the *Oklahoma* Supreme Court has temporarily blocked a state law requiring all *abortion providers* to have admitting privileges at a hospital within 30 miles of the abortion center.⁹ ♦ The citizens of *North Dakota* rejected in that state's referendum a constitutional amendment which would have given to all human beings "the inalienable right to life of every human being at any stage of development."¹⁰ ♦ The citizens of *Colorado* rejected a similar measure which would have protected the unborn child from

criminal assaults on the mother that led to a *wrongful death*.¹¹ ♦ The U.S. Supreme Court refused to hear an appeal of a *Colorado* law creating a floating "*bubble zone*" of eight feet around any person entering an abortion center.¹²

Recent Good News: The full panel of the 5th U.S. Circuit Court of Appeals upheld the court's ruling that the *Texas* safety requirements for telemedicine medical *abortions*, and the requirement for abortionists to have admitting privileges to hospitals be upheld.¹³ ♦

Tennessee's citizens passed *Amendment 1* which changes the state constitution to assert that nothing in it "secures or protects a *right to abortion*."¹⁴ ♦ The *North Dakota* Supreme Court has ruled that a state law restricting *medication abortions* is constitutional, thus preventing such abortions from occurring in that state.¹⁵ ♦ A U.S. District Court judge has ruled that the federal government cannot force *Johnson Welded Products* to comply with the HHS *Contraceptive Mandate*.¹⁶ ♦ The U.S. District Court for the Middle District of Florida has ordered that *Ave Maria University* not be subject to fines for non-compliance with the HHS *Contraceptive Mandate* while their case continues in court litigation.¹⁷ ♦ The U.S. Court of Appeals for the Sixth Circuit reversed lower court rulings in *Ohio, Michigan, Tennessee, and Kentucky* that struck down *same-sex marriage* bans.¹⁸

Sharing Your Good News and Your Efforts: If there are public policy advocacy strategies which you wish to share with others, please e-mail

mhilliard@ncbcenter.org.

Sharing of Resources: The web page of the National Catholic Bioethics Center is a significant resource in the realm of bioethics: www.ncbcenter.org. Also, bioethicists are on call twenty-four hours a day, every day of the week, for consultation by calling 215-877-2660.



¹ http://go.nationalpartnership.org/site/News2?page=NewsArticle&id=45027&news_iv_ctrl=0&abbr=daily2.

² <http://thefederalist.com/2014/10/22/california-orders-churches-to-fund-abortion-or-else/>.

³ <http://www.foxnews.com/opinion/2014/10/29/houston-mayor-drops-bid-to-subpoena-pastors-sermons/>.

⁴ <http://www.thenewamerican.com/culture/faith-and-morals/item/19447-more-judges-resign-in-n-c-over-order-to-perform-gay-marriages>.

⁵ <http://www.adfmedia.org/News/PRDetail/9364>.

⁶ <http://nypost.com/2014/11/10/couple-fined-for-refusing-to-host-same-sex-wedding-on-their-farm/>.

⁷ <http://www.catholic-sf.org/ns.php?newsid=7&id=62777>.

⁸ <http://go.nationalpartnership.org/site/News2?page=NewsArticle&id=45462>.

⁹ <http://newsok.com/oklahoma-supreme-court-temporarily-blocks-enforcement-of-new-abortion-laws/article/5363467>.

¹⁰ <http://www.usnews.com/news/articles/2014/11/05/colorado-north-dakota-reject-personhood-while-tennessee-approves-anti-abortion-measure>.

¹¹ *Ibid*.

¹² <http://gazette.com/court-wont-hear-dispute-over-colorado-abortion-clinic-law/article/1540710>.

¹³ http://www.nytimes.com/2014/10/10/us/texas-court-refuses-request-to-reconsider-abortion-restrictions.html?partner=rss&emc=rss&_r=2.

¹⁴ <http://www.usnews.com/news/articles/2014/11/05/colorado-north-dakota-reject-personhood-while-tennessee-approves-anti-abortion-measure>.

¹⁵ http://go.nationalpartnership.org/site/News2?abbr=daily2_&page=NewsArticle&id=45945&security=1201&news_iv_ctrl=1.

¹⁶ <http://www.daytondailynews.com/news/news/national-govt-politics/urbana-company-does-not-have-to-provide-birth-control/nhtBG/>.

¹⁷ <http://thehill.com/policy/healthcare/222113-catholic-college-wins-temporary-relief-under-birth-control-mandate>.

¹⁸ <http://www.cnn.com/2014/11/06/us/same-sex-marriage-ruling/>.

THE NATIONAL CATHOLIC BIOETHICS CENTER



ETHICAL ISSUES REGARDING SAME-SEX PARENTING

PREPARED BY THE ETHICISTS OF THE NCBC
FEBRUARY 2013

“Heterologous fertilization . . . is contrary to the covenant of marriage, the unity of the spouses, and the dignity proper to parents and the child. . . . Because of the dignity of the child and of marriage, and because of the uniqueness of the mother-child relationship, participation in contracts or arrangements for surrogate motherhood is not permitted.”—USCCB, *Ethical and Religious Directives for Catholic Health Care Services*, 5th ed. (2009), n. 40 and 42.

❖ SUMMARY ❖

- Marriage is the privileged context that safeguards the dignity and identity of children in their origin and development. Couples of the same sex are incapable of the direct, mutual, and exclusive acts of marital self-giving love that are open to generating new human persons. This faculty is necessary for a marriage. • Same-sex couples who want children turn to adoption or artificial fertilization. The former exposes children to a harmful vision of human sexuality and consequent psychological difficulties, and the latter reduces the child to a product of third-party contrivance understood as a “right” rather than a gift. • The concept of same-sex marriage and parenting undermines the complementarity of male and female: distinct yet equal in dignity, different yet equally essential to the structure of the family, reflecting the image of the Trinitarian God who is himself a community of distinct but equal persons.

Same-Sex “Marriage”

- Legal recognition of unions between homosexual persons undermines the common good of society by distorting the structure of the family, which is the basic unit of society. If the family is unstable, so is the society. • The fundamental structure and purpose of marriage can be found in the natural moral law and must be acknowledged by civil law. Marriage is not an exclusively “religious” concept or right with no civil bearing. • Legal recognition of same-sex marriage would be based on the understanding of marriage as only the fulfillment of a mutual desire for companionship, without any implied or expected responsibilities for child-rearing. Such “companionship” could take many forms, opening the door to polygamy, incest, pederasty, and other forms of deviance.

Same-Sex Parenting

- Studies have long demonstrated the strength and stability of the traditional family structure, which is grounded in marriage between one man and one woman. Children in traditional families have statistically significant advantages in concrete adult outcomes (such as salaries, healthy habits, and education levels) when compared to children raised in alternative family structures (such as those involving divorce, single motherhood, or multiple partnerships). Socioeconomic factors aside, children in traditional families also have greater emotional, psychological, and relational stability. • A recent study by Mark Regnerus confirms the concrete advantages of the traditional family structure over alternative structures, specifically those with same-sex parents (*Social Science Research* 41.4 [July 2012]: 752–770). • A recent study by Loren Marks debunks studies with severe methodological flaws that have been used to support the claims that persons with homosexual inclinations are just as well-adjusted as heterosexual persons and that same-sex parenting is just as effective as traditional heterosexual parenting (*Social Science Research* 41.4 [July 2012]: 735–751).

Same-Sex Adoption and Catholic Institutions

- Catholic institutions may not allow same-sex couples to adopt children. Same-sex adoption puts the desires of adults over the needs of the children and creates scandal with regard to the Church’s teaching on marriage and family.

For further information, visit the NCBC website at www.ncbcenter.org.
To request a consultation, go to www.ncbcenter.org/page.aspx?pid=1170 or call 215-877-2660.

❖ FAQs ❖

Question 1. Currently, same-sex couples are denied legal recognition, so their relationships are less stable than those of heterosexual couples, and stability is a key predictor of good outcomes. Same-sex couples in legally recognized relationships who want to raise children would be more affluent, stable, and serious about a long-term relationship than those without legal recognition, and could therefore provide the same benefits that opposite-sex married couples provide: good schools, a stable place of residence, emotional stability and encouragement, medical insurance coverage, regular supervision, healthy eating habits, and so forth. So in comparable socioeconomic conditions, why would children raised by same-sex couples be at a disadvantage compared with those raised in traditional families?

Reply: There are no study data available on parenting outcomes for the same-sex couples in legally recognized relationships, since same-sex unions have been legalized only recently in just a few states. Studies that are available indicate that same-sex relationships, especially those between men, do not tend to last very long. Given the legality of no-fault divorce, this does not bode well for stability even if legal recognition is granted. More important, socioeconomic indicators alone cannot predict or account for psychological consequences and identity issues. It may be possible for a person to achieve great socioeconomic success despite unresolved personal identity issues and serious emotional and affective imbalances. Indeed, in an essay published in the wake of the Regnerus study, Oscar Robert Lopez, a successful intellectual raised by lesbian mothers, expressed his painful difficulty with understanding and relating to both genders and himself well into adulthood. The good of the whole person goes deeper than material success.

Question 2. If God has created persons with homosexual inclinations, and God does only good, then how can it be wrong to act on those inclinations?

Reply: Creation is fallen because of original sin, which is not God's doing, and all persons experience inclinations and desires of various sorts that would cause harm to themselves or to others if acted upon. Such inclinations and desires are temptations. The actions are objectively wrong and the inclinations that drive us to them are disordered. Our lives involve a constant effort to preserve mastery over ourselves and to properly order our passions so that we can exemplify God's love in all we do, and His grace can aid us in this effort.

Question 3. Are persons with same-sex attractions “born that way”?

Reply: This is a scientific question, not a moral one. Regardless of the origin of the inclination, human persons are free to choose how to act in response to the passions they experience. However, the strength and depth of an inclination may affect the degree of culpability for individual immoral acts. There is no scientific evidence to date for a “gay gene” that deterministically sets a person's sexual orientation. The vast majority of evidence points to the importance of more malleable factors such as temperament (which is only partly genetic in origin and is certainly not limited to a specific gene), relationships with parents, hormone exposure, birth order, peer influences, experiences such as sexual abuse, and so forth. Many persons with same-sex attractions have successfully “reoriented” through counseling and therapy.

❖ RESOURCES ❖

Robert Oscar Lopez, “Growing Up with Two Moms: The Untold Children's View,” *Public Discourse*, August 6, 2012, <http://www.thepublicdiscourse.com/2012/08/6065/>. Reproduced by permission.

Dale O'Leary, “Challenging the No-Difference Myth,” *Ethics & Medics* 37.10 (October 2012): 3–4. Reproduced by permission.

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www.ncbcenter.org

ARCHIVES / HISTORY COMMITTEE NEEDS YOUR DOCUMENTS & ARTIFACTS!

HISTORY IN THE MAKING: THE NACN-USA Ad Hoc ARCHIVES/HISTORY COMMITTEE (BRIEF #1)



by Cheryl A. Hettman, PhD, RN
(Past NACN-USA President, 2010-2012)

As any of us would agree, our “history” – be it personal family history or historical aspects of other important undertakings in our life – always sparks interest and a desire to know more about who we are and where we have come from. With that same desire, and at the appointment of the NACN-USA president, Diana Newman, an ad hoc committee has been formed to explore and to archive the rich history of our Catholic nursing association. This charge came on the heels of the 60th Anniversary of the Catholic Council of the Archdiocese of Chicago, held in July, for which initial efforts took place to learn the history of the Chicago council and its ties to the national organization. The exploration uncovered a truly remarkable history of the role that Catholic nurses in the Chicago region have played in the United States and internationally.

These initial findings now serve as the launch pad for our continuing inquiry into the history of the current NACN-USA, along with its interconnectedness with other Catholic nursing organizations. For example, a nursing pin (shown below) that was found on the internet has since led to finding out about what seems to be the earliest Catholic nursing organization in the U.S. - the Guild of St. Radegonde (Cokal, 2014). It was formed in Boston for the alumnae of Catholic nursing schools in that region in 1908. The group was associated with Boston College. Ironically, our current president, Diana, is a graduate of “B.C.!” She recalls there being a beautiful stained glass window of St. Radegonde in the Connell School of Nursing (personal communication, August 27, 2014). St. Radegonde (587 A.D.), was the daughter of a king in Germany, who then became the wife of a king in France. During that period, there were no physicians in that region, and she was moved to serve the poor sick right in her own palace. She became an example for other noble women and taught them how to care for the sick and needy (Shields, 1911). She went on to found a religious settlement with a focus on nursing (Goodnow, 1916).

So, did you know that the Guild of St. Radegonde can, therefore, be considered a forerunner to our formalized Catholic nursing organizations in the U.S. and even some groups on the international level? Well, you do now! Do you also happen to know about any historical aspects of nursing groups or events related to our Catholic nursing



organizations – be they local or regional councils/guilds, or national or international groups? If so, our Archives/History Committee invites you to share any documents or other artifacts with us to help put the pieces of our historical puzzle together before existing items are lost forever. And this really can happen - for example, we recently learned of an entire set of the official *Catholic Nurse* journal (published between 1952 and 1970) having been thrown away by a Catholic university library because of “needed space!” Fortunately, there are some copies in a few other locations, but for who knows how long. We cannot afford to lose the opportunity to preserve and tell our story!

Our committee will greatly appreciate your help with this tremendous project. All information will be archived in a newly created database and excerpts will be shared through this column and various other means with our members, affiliated councils, etc. Please email to: Cheryl Hettman, at hettmanca@hotmail.com regarding any items you may have to contribute. Provide an initial brief description of the item(s), including specific events, locations, etc., and dates, if possible. Also note your name, email address, and phone number. One of the committee members will get back to you. We are interested in either obtaining the original item/document (if you are willing to part with it) or a copy or photograph of any documents or other artifacts. Even if you do not have specific items but you have information to share, or know other contacts we can get in touch with, these things will also be helpful. On behalf of the Archives/History Committee, thank you in advance, and may God bless you for your assistance!

Ad Hoc Archives/History Committee Members:

- ❖ Cheryl A. Hettman, PhD, RN (Committee Chair) – Independent Nursing Consultant/Nurse Educator, P.R.N., Inc, Washington, PA
- ❖ Jennifer Cook, PhD, RN, MBA - University of the Incarnate Word, San Antonio, TX
- ❖ Margaret M. (Peg) Olson, RN, BSN, CHTP/I - Illinois Center for Therapeutic/Healing Touch & Holistic Nursing, Chicago, IL
- ❖ Karen J. Egenes, RN, EdD, CNE - Loyola University Chicago, IL
- ❖ Marcia Stout, DNP, APN, FNP-C, CWON - Rosalind Franklin University, Chicago, IL

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2. Editor. (1911). Editorial Comment. *The American Journal of Nursing*, 11 (10), 773.
3. Goodnow, M. (1916). *Outlines of nursing history*. Philadelphia, PA: W.B. Saunders Company.
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CICIAMS UPDATE

(Comité International Catholique des Infirmières et Assistantes Médico-Sociales=International Catholic Committee of Nurses and Medico-Social Assistants)

The CICIAMS XIX World Congress on *PROTECTING FAMILY LIFE: THE ROLE AND RESPONSIBILITIES OF NURSES AND MIDWIVES* was held September 23-26, 2014 at the All Hallows College, Drumcondra, Dublin, Ireland.



Our Immediate Past President, Alma Abuelouf represented the National Association of Catholic Nurses, USA and spoke on "Families as Carers of the Elders in Pan America." Our NE Region Representative, Dr. Marie Hilliard represented the National Catholic Bioethics Center and spoke on "Protecting Family Life in Pan America." Dr. Marie Hilliard reported, "Over 200 nurses from 22 countries gathered in Dublin last week for the meeting of the International Committee of Nurses and Medical-Social Assistants (member of the Pontifical Academy of Health Care Workers). It was an incredible meeting. The program as well as my slides are posted to the NACN-USA website. The slides indicate the epidemic of single parenting and STDs in our hemisphere, despite a drop in teen pregnancy (for obvious reasons). This is very tragic. The meeting was excellent. Alma did a phenomenal job of representing us. I presented on issues of the young family and she presented issues on the care giver of elderly. It all was terrific. Marylee Meehan was there as was Kathy Kirkpatrick and Lorette Tierman. One thing we became aware of is that a number of nurses living in the USA belong to their Catholic Nurses Guild in their home country. We need to get a list of delegates from other countries and send them our newsletter so that we can recruit members, with their help."



See the summer 2014 NACN-USA newsletter for a synopsis of their presentations and the NACN-USA website for the slide presentations. An article on the event is available on the Diocese of Memphis website: http://www.cdom.org/CatholicDiocese.php?op=Article_141270266220404. The next congress will be in Malaysia. All presentations from the CICIAMS XIX World Congress are available at <http://www.ciciams.org/ciciamsreports.html>



U.S. delegation with Sister Ann Marie John, International President of CICIAMS - Lorette Tierman, Kathy Kirkpatrick, Marylee Meehan, Marie Hilliard and Alma Abuelouf



U.S. delegation with Monsignor Jean Marie Mupendawatu, Secretary of PCHCW - Alma Abuelouf, Marie Hilliard, Kathy Kirkpatrick, Marylee Meehan & Lorette Tierman

See the summer 2014 NACN-USA newsletter for a synopsis of their presentations and the NACN-USA website for the slide presentations. An article on the event is available on the Diocese of Memphis website:

http://www.cdom.org/CatholicDiocese.php?op=Article_141270266220404. The next congress will be in Malaysia.

All presentations from the CICIAMS XIX World Congress are available at <http://www.ciciams.org/ciciamsreports.html>



HIS HOLINESS POPE FRANCIS (CONT'D)

I can happily say that – with a spirit of collegiality and of synodality – we have truly lived the experience of “Synod,” a path of solidarity, a “journey together.”

And it has been “a journey” – and like every journey there were moments of running fast, as if wanting to conquer time and reach the goal as soon as possible; other moments of fatigue, as if wanting to say “enough”; other moments of enthusiasm and ardour. There were moments of profound consolation listening to the testimony of true pastors, who wisely carry in their hearts the joys and the tears of their faithful people. Moments of consolation and grace and comfort hearing the testimonies of the families who have participated in the Synod and have shared with us the beauty and the joy of their married life. A journey where the stronger feel compelled to help the less strong, where the more experienced are led to serve others, even through confrontations. And since it is a journey of human beings, with the consolations there were also moments of desolation, of tensions and temptations, of which a few possibilities could be mentioned:

- One, a temptation to hostile inflexibility, that is, wanting to close oneself within the written word, (the letter) and not allowing oneself to be surprised by God, by the God of surprises, (the spirit); within the law, within the certitude of what we know and not of what we still need to learn and to achieve. From the time of Christ, it is the temptation of the zealous, of the scrupulous, of the solicitous and of the so-called – today – “traditionalists” and also of the intellectuals.
- The temptation to a destructive tendency to goodness [it. *buonismo*], that in the name of a deceptive mercy binds the wounds without first curing them and treating them; that treats the symptoms and not the causes and the roots. It is the temptation of the “do-gooders,” of the fearful, and also of the so-called “progressives and liberals.”
- The temptation to transform stones into bread to break the long, heavy, and painful fast (cf. Lk 4:1-4); and also to transform the bread into a stone and cast it against the sinners, the weak, and the sick (cf. Jn 8:7), that is, to transform it into unbearable burdens (Lk 11:46).
- The temptation to come down off the Cross, to please the people, and not stay there, in order to fulfill the will of the Father; to bow down to a worldly spirit instead of purifying it and bending it to the Spirit of God.
- The temptation to neglect the “*depositum fidei*” [the deposit of faith], not thinking of themselves as guardians but as owners or masters [of it]; or, on the other hand, the temptation to neglect reality, making use of meticulous language and a language of smoothing to say so many things and to say nothing! They call them “byzantinisms,” I think, these things...

Dear brothers and sisters, the temptations must not frighten or disconcert us, or even discourage us, because no disciple is greater than his master; so if Jesus Himself was tempted – and even called Beelzebul (cf. Mt 12:24) – His disciples should not expect better treatment.

Personally I would be very worried and saddened if it were not for these temptations and these animated discussions; this movement of the spirits, as St Ignatius called it (Spiritual Exercises, 6), if all were in a state of agreement, or silent in a false and quietist peace. Instead, I have seen and I have heard – with joy and appreciation – speeches and interventions full of

faith, of pastoral and doctrinal zeal, of wisdom, of frankness and of courage: and of *parresia*. And I have felt that what was set before our eyes was the good of the Church, of families, and the “supreme law,” the “good of souls” (cf. Can. 1752). And this always – we have said it here, in the Hall – without ever putting into question the fundamental truths of the Sacrament of marriage: the indissolubility, the unity, the faithfulness, the fruitfulness, that openness to life (cf. Cann. 1055, 1056; and *Gaudium et spes*, 48).

And this is the Church, the vineyard of the Lord, the fertile Mother and the caring Teacher, who is not afraid to roll up her sleeves to pour oil and wine on people’s wound; who doesn’t see humanity as a house of glass to judge or categorize people. This is the Church, One, Holy, Catholic, Apostolic and composed of sinners, needful of God’s mercy. This is the Church, the true bride of Christ, who seeks to be faithful to her spouse and to her doctrine. It is the Church that is not afraid to eat and drink with prostitutes and publicans. The Church that has the doors wide open to receive the needy, the penitent, and not only the just or those who believe they are perfect! The Church that is not ashamed of the fallen brother and pretends not to see him, but on the contrary feels involved and almost obliged to lift him up and to encourage him to take up the journey again and accompany him toward a definitive encounter with her Spouse, in the heavenly Jerusalem.

This is the Church, our Mother! And when the Church, in the variety of her charisms, expresses herself in communion, she cannot err: it is the beauty and the strength of the *sensus fidei*, of that supernatural sense of the faith which is bestowed by the Holy Spirit so that, together, we can all enter into the heart of the Gospel and learn to follow Jesus in our life. And this should never be seen as a source of confusion and discord.

Many commentators, or people who talk, have imagined that they see a disputatious Church where one part is against the other, doubting even the Holy Spirit, the true promoter and guarantor of the unity and harmony of the Church – the Holy Spirit who throughout history has always guided the barque, through her Ministers, even when the sea was rough and choppy, and the ministers unfaithful and sinners.

And, as I have dared to tell you, [as] I told you from the beginning of the Synod, it was necessary to live through all this with tranquility, and with interior peace, so that the Synod would take place *cum Petro* and *sub Petro* (with Peter and under Peter), and the presence of the Pope is the guarantee of it all. We will speak a little bit about the Pope, now, in relation to the Bishops [laughing]. So, the duty of the Pope is that of guaranteeing the unity of the Church; it is that of reminding the faithful of their duty to faithfully follow the Gospel of Christ; it is that of reminding the pastors that their first duty is to nourish the flock – to nourish the flock – that the Lord has entrusted to them, and to seek to welcome – with fatherly care and mercy, and without false fears – the lost sheep. I made a mistake here. I said welcome: [rather] to go out and find them.

His duty is to remind everyone that authority in the Church is a service, as Pope **Benedict XVI** clearly explained, with words I cite verbatim: “The Church is called and commits herself to exercise this kind of authority which is service and exercises it not in her own name, but in the name of Jesus Christ... through the Pastors of the Church, in fact: it is he who guides, protects and corrects them, because he loves them deeply. But the Lord Jesus, the supreme Shepherd of our souls, has willed that the Apostolic College, today the Bishops, in communion with the



HIS HOLINESS POPE FRANCIS (CONT'D)

Successor of Peter... to participate in his mission of taking care of God's People, of educating them in the faith and of guiding, inspiring and sustaining the Christian community, or, as the Council puts it, 'to

see to it... that each member of the faithful shall be led in the Holy Spirit to the full development of his own vocation in accordance with Gospel preaching, and to sincere and active charity' and to exercise that liberty with which Christ has set us free (cf *Presbyterorum Ordinis*, 6)... and it is through us," Pope Benedict continues, "that the Lord reaches souls, instructs, guards and guides them. St Augustine, in his Commentary on the Gospel of St John, says: 'let it therefore be a commitment of love to feed the flock of the Lord' (cf. 123, 5); this is the supreme rule of conduct for the ministers of God, an unconditional love, like that of the Good Shepherd, full of joy, given to all, attentive to those close to us and solicitous for those who are distant (cf. St Augustine, Discourse 340, 1; Discourse 46, 15), gentle towards the weakest, the little ones, the simple, the sinners, to manifest the infinite mercy of God with the reassuring words of hope (cf. *ibid.*, Epistle, 95, 1)."

So, the Church is Christ's – she is His bride – and all the bishops, in communion with the Successor of Peter, have the task and the duty of guarding her and serving her, not as masters but as servants. The Pope, in this context, is not the supreme lord but rather the supreme servant – the "servant of the servants of God"; the guarantor of the obedience and the conformity of the Church to the will of God, to the Gospel of Christ, and to the Tradition of the Church, putting aside every personal whim, despite being – by the will of Christ Himself – the "supreme Pastor and Teacher of all the faithful" (Can. 749) and despite enjoying "supreme, full, immediate, and universal ordinary power in the Church" (cf. Cann. 331-334).

Dear brothers and sisters, now we still have one year to mature, with true spiritual discernment, the proposed ideas and to find concrete solutions to so many difficulties and innumerable challenges that families must confront; to give answers to the many discouragements that surround and suffocate families.

One year to work on the "Synodal Relatio" which is the faithful and clear summary of everything that has been said and discussed in this hall and in the small groups. It is presented to the Episcopal Conferences as "lineamenta" [guidelines].

May the Lord accompany us, and guide us in this journey for the glory of His Name, with the intercession of the Blessed Virgin Mary and of Saint Joseph. And please, do not forget to pray for me! Thank you!

[The hymn *Te Deum* was sung, and Benediction given.]

Thank you, and rest well, eh?

http://www.vatican.va/roman_curia/synod/

MESSAGE OF THE III EXTRAORDINARY GENERAL ASSEMBLY OF THE SYNOD OF BISHOPS

Saturday, 18 October 2014, Synod Hall



We, Synod Fathers, gathered in Rome together with Pope Francis in the Extraordinary General Assembly of the Synod of Bishops, greet all families of the different continents and in particular all who follow Christ, the Way, the Truth, and the Life. We admire and are grateful for the daily witness which you offer us and the world with your fidelity, faith, hope, and love.

Each of us, pastors of the Church, grew up in a family, and we come from a great variety of backgrounds and experiences. As priests and bishops we have lived alongside families who have spoken to us and shown us the saga of their joys and their difficulties.

The preparation for this synod assembly, beginning with the questionnaire sent to the Churches around the world, has given us the opportunity to listen to the experience of many families. Our dialogue during the Synod has been mutually enriching, helping us to look at the complex situations which face families today.

We offer you the words of Christ: "Behold, I stand at the door and knock. If anyone hears my voice and opens the door, I will enter his house and dine with him, and he with me" (*Rev* 3:20). On his journeys along the roads of the Holy Land, Jesus would enter village houses. He continues to pass even today along the streets of our cities. In your homes there are light and shadow. Challenges often present themselves and at times even great trials. The darkness can grow deep to the point of becoming a dense shadow when evil and sin work into the heart of the family.

We recognize the great challenge to remain faithful in conjugal love. Enfeebled faith and indifference to true values, individualism, impoverishment of relationships, and stress that excludes reflection leave their mark on family life. There are often crises in marriage, often confronted in haste and without the courage to have patience and reflect, to make sacrifices and to forgive one another. Failures give rise to new relationships, new couples, new civil unions, and new marriages, creating family situations which are complex and problematic, where the Christian choice is not obvious.

We think also of the burden imposed by life in the suffering that can arise with a child with special needs, with grave illness, in deterioration of old age, or in the death of a loved one. We admire the fidelity of so many families who endure these trials with courage, faith, and love. They see them not as a burden inflicted on them, but as something in which they themselves give, seeing the suffering Christ in the weakness of the flesh.

We recall the difficulties caused by economic systems, by the "the idolatry of money and the dictatorship of an impersonal economy lacking a truly human purpose" (*Evangelii gaudium* 55) which weakens the dignity of people. We remember unemployed parents who are powerless to provide basic needs for their families, and youth who see before them days of empty expectation, who are prey to drugs and crime.

We think of so many poor families, of those who cling to boats in order to reach a shore of survival, of refugees wandering without hope in the desert, of those persecuted because of their faith and the human and spiritual values which they hold. These are stricken by the brutality of war and oppression. We remember the women who suffer violence and exploitation, victims of human trafficking, children abused by those who ought to have protected them and fostered their development, and the members of so many families who have been degraded and burdened with difficulties. "The culture of prosperity deadens us.... all those lives stunted for lack of opportunity seem a mere spectacle; they fail to move us" (*Evangelii gaudium* 54). We call on governments and international organizations to promote the rights of the family for the common good.

MESSAGE FROM SYNOD FATHERS (CONT'D)



Christ wanted his Church to be a house with doors always open to welcome everyone. We warmly thank our pastors, lay faithful, and communities who accompany couples and families and care for their wounds.

*** There is also the evening light behind the windowpanes in the houses of the cities, in modest residences of suburbs and villages, and even in mere shacks, which shines out brightly, warming bodies and souls. This light—the light of a wedding story—shines from the encounter between spouses: it is a gift, a grace expressed, as the *Book of Genesis* says (2:18), when the two are “face to face” as equal and mutual helpers. The love of man and woman teaches us that each needs the other in order to be truly self. Each remains different from the other that opens self and is revealed in the reciprocal gift. It is this that the bride of the *Song of Songs* sings in her canticle: “My beloved is mine and I am his... I am my beloved’s and my beloved is mine” (*Song of Songs* 2:16; 6:3).

This authentic encounter begins with courtship, a time of waiting and preparation. It is realized in the sacrament where God sets his seal, his presence, and grace. This path also includes sexual relationship, tenderness, intimacy, and beauty capable of lasting longer than the vigor and freshness of youth. Such love, of its nature, strives to be forever to the point of laying down one’s life for the beloved (cf *Jn* 15:13). In this light conjugal love, which is unique and indissoluble, endures despite many difficulties. It is one of the most beautiful of all miracles and the most common.

This love spreads through fertility and generativity, which involves not only the procreation of children but also the gift of divine life in baptism, their catechesis, and their education. It includes the capacity to offer life, affection, and values—an experience possible even for those who have not been able to bear children. Families who live this light-filled adventure become a sign for all, especially for young people.

This journey is sometimes a mountainous trek with hardships and falls. God is always there to accompany us. The family experiences his presence in affection and dialogue between husband and wife, parents and children, sisters and brothers. They embrace him in family prayer and listening to the Word of God—a small, daily oasis of the spirit. They discover him every day as they educate their children in the faith and in the beauty of a life lived according to the Gospel, a life of holiness. Grandparents also share in this task with great affection and dedication. The family is thus an authentic domestic Church that expands to become the family of families which is the ecclesial community. Christian spouses are called to become teachers of faith and of love for young couples as well.

Another expression of fraternal communion is charity, giving, nearness to those who are last, marginalized, poor, lonely, sick, strangers, and families in crisis, aware of the Lord’s word, “It is more blessed to give than to receive” (*Acts* 20:35). It is a gift of goods, of fellowship, of love and mercy, and also a witness to the truth, to light, and to the meaning of life.

The high point which sums up all the threads of communion with God and neighbor is the Sunday Eucharist when the family and the whole Church sits at table with the Lord. He gives himself to all of us, pilgrims through history towards the goal of the final encounter when “Christ is all and in all” (*Col* 3:11). In the first stage of our Synod itinerary, therefore, we have

reflected on how to accompany those who have been divorced and remarried and on their participation in the sacraments.

We Synod Fathers ask you walk with us towards the next Synod. The presence of the family of Jesus, Mary, and Joseph in their modest home hovers over you. United to the Family of Nazareth, we raise to the Father of all our petition for the families of the world:

Father, grant to all families the presence of strong and wise spouses who may be the source of a free and united family.

Father, grant that parents may have a home in which to live in peace with their families.

Father, grant that children may be a sign of trust and hope and that young people may have the courage to forge life-long, faithful commitments.

Father, grant to all that they may be able to earn bread with their hands, that they may enjoy serenity of spirit and that they may keep aflame the torch of faith even in periods of darkness.

Father, grant that we may all see flourish a Church that is ever more faithful and credible, a just and humane city, a world that loves truth, justice and mercy.

<http://press.vatican.va/content/salastampa/en/bollettino/pubblico/2014/10/18/0768/03043.html>

NURSES ARE HEROES

by Jeannine Gaudet, RN, BS, MSSW, FCN



Taking care of critically ill people with illnesses that pose a threat to their caregivers is not new to nurses. We have risen to that challenge throughout history. Today, nurses are

responding to victims of the deadly virus, Ebola. We are all concerned. We want to help in some way. It is our nature. Today in Dallas, TX, a young nurse is fighting for her life. Her Catholic family is asking people to pray to Our Holy Mother, Mary, on behalf of this brave young woman. As members of the National Catholic Nurses Association, let us all join this family in prayer as we place our trust in Jesus, asking for strength and healing for this young nurse, and for all nurses around the world who have become infected with Ebola or are facing the threat of Ebola. Please take a moment to say a Hail Mary...and perhaps make a commitment to say a Rosary or some other form of prayer every day on behalf of our fellow nurses. Additionally, here is a prayer that can be placed on your desk, or anyplace where you will see it and pray. Share it with your fellow nurses. Thank you from NACN-USA

(Posted on website & sent to all members in October 2014)

Prayer for Nurses Facing Ebola

Jesus, we trust in you who are the source of all healing. Be with the nurses who are caring for those who are suffering from Ebola. Give them the strength to carry your love to their patients. Protect them from harm and embrace them with your love and mercy. Give all of us who serve as nurses in your name, the courage to trust that you are always at our side. You will not abandon us.

Composed by Jeannine Gaudet



National Association of Catholic Nurses-USA
c/o Diocese of Joilet
Blanchette Catholic Center
1655 Weber Road
Crest Hill, IL 60403

*****Please share this newsletter with nurses in your diocese.**

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:

- 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 professional who support the mission and objectives of the NACN-USA
- To advocate for those in need through efforts which integrate faith and health



*Our Lady of the Immaculate Conception,
Our Patroness, Pray for Us!*

EDITOR'S NOTE: We invite you to submit manuscripts, news briefs, prayer requests, poetry, anecdotes, photos, and/or articles that would be of interest to Catholic nurses across the United States.

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

Winter (published in December): November 15

Spring (published in March): February 15

Summer (published in June): May 15

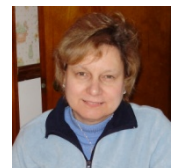
Fall (published in Sept.): August 15



Please send your submissions by e-mail to:
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USA (Ret.) Newsletter Editor at DianaRuzicka53@aol.com,
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on the check. Thank you for renewing. Welcome for those
joining.



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