

"Home and Heaven within"

Hymn 287

Gisela Kitchingman

Transitioning our Christian Science nursing practice from facility into the home and vice versa



Gisi Kitchingman

Christian Science home nursing -- Christian Science facility nursing: Different standards? What's more professional? M.B. Eddy gave, through the *Manual* provision for the Christian Science Nurse, the standard for all ages. Thus the basis for Christian Science nursing is the same wherever Christian Science nursing takes place. The same is true for all *Manual* provisions, for example, the Church services. They will always have the same order in any Christian Science church in the world, even when we start our first Christian Science church on the moon. If a Christian Science nurse starts practicing in space she will have the identical standard as on earth. "As in heaven so on earth."

We understand the *Manual* provisions as divinely authorized. Divine authorization is the highest standard there could possibly be. There is no higher than the Most High! Divine authorization does not depend on mortal limits such as time, place, space, and such. We are talking about an absolute! Accepting the divine authorization as fact is the basis we can work with. It is the basis where all forms of Christian Science nursing touch base, whether facility nursing, home nursing, private duty nursing, school nursing, accredited Christian Science nursing facilities, or non-accredited Christian Science nursing organizations. Wherever a Christian Science nurse is using her or his "demonstrable knowledge of Christian Science practice" and using the "practical wisdom necessary in the sick room" and is taking "proper care of the sick" wherever this holy work is done, the Christ is in the midst of it and healing is taking place, is being made apparent. This is the very core of Christian Science nursing, the heart and Soul of it, Love.

In the mid-70's The Mother Church took out of the *Journal* the listings as/for "practical nurse" and would only accept *Journal* listings as "Christian Science nurse." This was an important step in recognizing what Christian Science nursing really involves. Christian Science practical nurses did not fulfill, as yet, all the requirements M.B. Eddy demands of a Christian Science nurse. So obviously, if the requirements were not yet fulfilled, their names had no authorization to appear in the *Journal*. Also in 1989 separating kinds of Christian Science nursing categories within Christian Science nursing were eliminated by The Mother Church, such as custodial nursing, mental nursing, light care, intensive care, and such. Since Christian Science nurses

do not diagnose, nor give a prognosis, nor a history of a "case," (as laid out in the 2011 Scope of Services by The Mother Church) they simply can't nor do they want to label the care they are giving. A Christian Science nurse is always giving Christian Science nursing care. As they work within the Scope of Services, they are professional. Thus they are staying on the ethical grounding of Christian Science practice. They move within the theology of Christian Science. The Christian Science nurse wherever and in whichever capacity she or he works is professional when she or he is upholding the high standard of the *Manual* provision (Man 49:9-16 [Art.VIII, Sect. 31]).

When I first started as a visiting Christian Science nurse, I was called by a lady who was serving as First Reader in a large church in Germany. At the time she was not able to fulfill her post. She needed Christian Science nursing care. The day of my first visit she told me she needed to work this out "hid with Christ." She wanted me to come once a week -- to do what? Everything! Now, I was just out of Christian Science nurse's training school and in my class for Visiting Christian Science nursing I had written a list of things which could be arranged for in a situation like this where no other help was around: get a shopping service, meals on wheels, cleaning lady, nurse/practitioner (of the patient) calls once a week, chiropodist once every 6 weeks, mobile hairdressing service, organizing a wheelchair, wheelchair rides, etc. God told me that none of that would work. "We are hid with Christ forever in the Father's holy plan. / In this pure eternal union we behold the perfect man" Hymn 370. The lady was clear about her need of that. I was adaptable and humble enough to accept this God-given task. Once a week I spent a whole day with her, simply doing everything for her needs of that day and supplying for the other days of the week. She never saw anyone but the Christian Science nurse during that time. It took us nine months to experience and witness this complete healing. She took up her post as First Reader again to fulfill her three-year term.

Later she shared her healing with our Visiting Christian Science Nursing Service at our annual meeting and I was amazed at her clear understanding of what Christian Science nursing is. She commented that it was "Caring Love made manifest for His beloved child."

Transitioning our Christian Science nursing practice

To me this has never been a question. Thinking about the differences, I discovered the mutual basis of the two, the *Manual* standard, as the combining element. It makes the transition as easy as moving someone with a sliding sheet! Differences are only in the outward things. Progressing from that basis, the *Manual* provision, the Christian Science nurse will use all the qualities described in *Science and Health*, 395:17 which are sufficient to supply all manifestations of proper care wherever.

And the patient? He never leaves "home," heaven, his inner state of conscious harmony. That is where everyone wants to be. He is not really yearning for his earthly home -- he is longing for the assurance of being present in heaven, harmony. He might find that at his home or it may be easier sometimes to find in a different, more appropriate surrounding. If we help the guest recognize this fact, he will feel

absolutely homely*, cared for wherever he is staying.

**homely - the house is homely yet elegant: cozy, homelike, homey, comfortable, snug, welcoming, informal, relaxed, intimate, warm, pleasant, cheerful, friendly, congenial, hospitable; informal comfy*

Who is responsible for Christian Science nursing care?

Who is responsible for the Christian Science nursing care? -- the Christian Science nursing manager, the supervisor, the patient, the Christian Science nurse, the Christian Science practitioner, the next of kin, or who?

The question of "who is responsible" is as old as the mortal history. When the Lord asked Cain, "Where is Abel thy brother?" Cain answered, "I know not: Am I my brother's keeper?" (Gen 4:9). Whenever people come together, from kids at the playground, to people at work, up to people in politics -- whenever something good was done, everyone wants to be the one who is responsible for it. But as soon as something unpleasant happens the finger points to the other one: "He is responsible." Why do we not point to God as the source of all good and "undisguise" the bad happenings as illusionary evil?

Remember: The reason for throwing off the rider is not the disobedient horse, but the snake which bit the horse in the heel. When the Christian Science nurse stays within her or his Scope of Services, only doing what she or he is guided to by God, she or he can take the responsibility of her or his actions and is safe.

A legal example of this is stated by Judge Cardozo, *People v. Vogelgesang*, 221 N.Y. 290, 292-93 (1917):

"The profession and practice of the religion must be itself the cure. . . . While the healer inculcates the faith of the church as a method of healing, he is immune. When he goes beyond that, puts his spiritual agencies aside and takes up the agencies of the flesh, his immunity ceases. He is then competing with physicians on their own ground. . . . without the same training."

The different capacities a Christian Science nurse can work in

What about the different capacities a Christian Science nurse can work in? As we saw earlier the basis for Christian Science nursing is always identical, but the actual work, hands on, might differ, although it never differs in value. When the disciples were fighting over "who shall be greatest" Jesus presented to the disciples a child -- presented the childlike quality -- which he considered greatest.

I have worked in many different offices as a Christian Science nurse. Sometimes I

was the one who had the say in how things were to be done, sometimes I was on my own with God and the patient. One day I was at the highest social court in Germany representing Christian Science nursing, the very next day I was cutting someone's toenails. When I am working in a Christian Science nursing organization I respect the offices and tasks of my team colleagues, but our work is always done at eye level because God is always our boss. Principle is Love which does not value according to levels of responsibility. In His eyes a task done as an expression of Love, is the acme of "well done," whatever that task might be called or seen as.

Now there are diversities of gifts, but the same Spirit. And there are differences of administration, but the same Lord. And there are diversities of operations, but it is the same God, which worketh all in all. But the manifestation of the Spirit is given to every man to profit withal.

(I Cor.12:4-7)

Inspired Moving practices

"The Spirit moved upon the waters" Genesis.

We consider Christian Science "a movement." I love that expression! It includes so much flexibility and lightness although grounded on the rock, Christ. How do we bring this basic attitude into Christian Science nursing? How can we express it in practical ways?

In many countries manually moving a patient has become a "practical science." Heavy manual lifting of people is abandoned and actually becomes unnecessary through applying intuitive moving practices. Since it is a natural desire of a living being to be active, to move, the need became apparent to help a patient move without simultaneously making him passive. A balance has to be achieved (in all nursing areas, including movement). Nurses are no longer seen as the one having to be "Martha" nonstop, or acting because of a "helper syndrome." They recognize their place as more as mentors for a patient. Their main concern is to help the patient help himself, thus activating his resources. Doing this they help a patient to progress in a natural way, sometimes slowly, back to independence. This is real "mothering" (the smothering is out). The more you can keep yourself out of the way, the better.

We quickly realize that the patient should be at least as active physically as the Christian Science nurse. The Christian Science nurse should only be a helper, standing back wherever possible, observing, assisting lightly, advising with practical ways, sometimes a gentle touch, or a gentle word. The most unobtrusive helper is the most effective one! Yes, to start off with it takes longer than doing the job of lifting someone yourself. Take that time. Make room for progress! In the long run, progress will come sooner than if you do too much for the patient and leave him passive as the recipient. Let's move it! Moving is "in." This way you not only help someone to get up but you help him to rise. You not only help him move from A to B but help him to go forward, to progress. Movement is an activity, a mutual activity. It requires teamwork from Christian Science nurse and patient. It is a mutual, light, uplifting task!

Since the patient's abilities need to be determined, he has to set the pace. The nurse has to be the observer. Attempting to teach a Christian Science nurse to be of

maximum help when moving a patient, all one can do is make the Christian Science nurse aware of her or his role as observer and listener. Through prayer you and the patient will use inspired moving practices.

The way a nurse can help a patient move depends on many elements. Mainly it depends on the abilities of the patient, but also on the situation. Helping a patient this way is not a certain "technique" nor is it possible to learn or teach beforehand. Therefore receptivity to inspiration and intuition, to be able to discern the patient's need, is your sole necessary technique in this area! That "technique" enables you to give "proper care" which M.B. Eddy requires of a Christian Science nurse!

Moving with inspired moving practices is a "moving task!" Let's move it!

It is important to keep our focus on the real, good, and true. Everything else will fall into place. The human need will be met, because God cares for man. It is not our task to know the specifics of how God is doing it, but "Faith in divine Love supplies the ever-present help and now, and gives the power to 'act in the living present.' " (My 12:26)

Reprinted with permission
From www.csnetwork.org
Vision Now!, November, 2015
2015 ICSNC Post Conference Issue I