

NEW HORIZONS

RESOURCES FOR NAZARENE CLERGYWOMEN

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Following the Call in All Avenues of Ministry

Carla Sunberg

Historically, women in ministry have been rather non-traditional. That is, God has called them into ministry, and the doors for traditional ministry have not been open, so they have continued to listen to the voice and calling of God, and have found other avenues of ministry. In this edition, we explore different aspects of ministry, specifically the areas of chaplaincy and healthcare. I began my ministry career as an RN. Today, God has expanded that ministry to provide me with many “New Horizons.”

I trust you will enjoy this non-traditional edition of the magazine. Together we want to celebrate the call of those who began their ministry in healthcare. We want to celebrate the missionary nurses who paved the way for women to be ministers around the world. We cherish the chaplain who is taking ministry out to the streets, into the workforce, or into the prisons and military. There are also lessons we can learn from those in healthcare, lessons to help us become better ministers. There is a connection! I trust you enjoy reading about the connection between ministry and healthcare, including the practical steps we can use in ministry and the option of utilizing parish nursing as a ministry.

Dr. Nina Gunter recently reported that she has seen a large number of women obtaining their district licenses at a number of District Assemblies across the Church of the Nazarene this summer. The number is rapidly increasing as more and more women are being called into the ministry. I believe we are living in the days prophesied by the prophet Joel, who says: “In the last days it will be, God declares, that I will pour out my Spirit upon all flesh, and your sons and your daughters shall prophesy, and your young men shall see visions, and your old men shall dream dreams. Even upon my slaves, both men and women, in those days I will pour out my Spirit; and they shall prophesy” (Acts 2:17-18, NRSV). As more and more women are called, we are praying more traditional avenues will be open to ministry, but until that time, God may want to take us down some of the more non-traditional routes. May God bless you and lead you in your journey of ministry!

NH

Rev. Carla Sunberg is Pastor of Evangelism at Grace Point Church of the Nazarene in Fort Wayne, Indiana, and is the chair of the first USA/Canada Nazarene Women Clergy Council.

Ministry and Healthcare: Connections

Sylvia Whiting

Historical Perspective

Ministry and Healthcare have long been associated, even earlier than the time of Hippocrates in 400 B.C., and women have been the usual providers of care. There were also times when male knights, monks, and brothers of the Church served in this role. For the most part, however, because of the servant nature of the care-giving role, women were assumed better suited to the task, and the title of nurse was generally assigned to them. More recently, men have become more engaged in nursing roles and are filling an important place in healthcare agencies.

Religious societies have long been involved in providing for healthcare, whether through convents, asylums, homes, or hospitals. The sisters and brothers of the Church often were known for their service to the sick and dying. Many hospitals continue to be administered by Christian organizations.

Ministry as a Current Component of Healthcare

Jesus was continuously involved in the restoration of health for the very purpose of ministry to those who followed Him. Knowing, however, that their most essential need was spiritual rather than physical, He provided spiritual healing to reach people's deeper needs, for what would it matter if their bodies were healed and they lost their souls? (Matthew 16:26)

It is impossible to be a minister and not deal with illness. Every minister has to make hospital calls; some ministers are more comfortable than others in this role. Other ministers may even assign the task to associates or others involved in a ministering role, but ultimate responsibility for involvement in helping the sick falls within the realm of ministry.

Variety in Approach to the Need for Healthcare Ministry

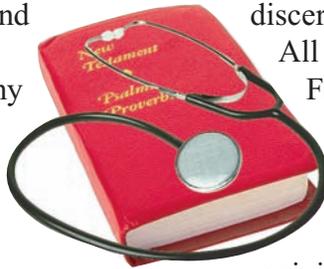
As with any ministry, the sensitive delivery of spiritual healthcare is dependent on spiritual discernment. God provides this discernment to those who know Him,

coupled with educational advantage. The following composite cases help point out ways in which mental and physical care, from a Christian vantage point, combine to help provide healing. One approach is to suggest that everyone needs balance in the areas of Work, Play, Family and Spirituality. Discussion of Spirituality is saved for last, in the same way that dessert follows a meal, in order for the individual to go away thinking about what was last discussed. In the next meeting, the individual is asked to review the previous discussion and to weigh the four areas (work, play, family and spirituality) according to the person's own sense of how important they are. The door is then opened for further discussion and discernment concerning the needs of that person.

All persons are at various levels of readiness.

For those with true spiritual sensitivity, it is possible to approach directly the readily apparent needs. Those with early life spiritual experience can share both positive and negative experiences, assisting the minister in promoting new ways of thinking that may open long-closed doors; generally, these patients are quite amenable to sharing family and background even if they are not Christians. In some instances, the minister is able to share personal spiritual struggles and discuss how God's help overcame them. For those who absolutely refuse to discuss spirituality or who divert the discussion, the best ministerial approach is to pray for personal wisdom in the situation, that the patient might gain spiritual insight and ultimate conviction. In the event that family members are present, the opportunity to minister is enhanced and enlarged for both the individual and his or her family.

In the case of a dying patient, a different approach may be needed. The individual or the family may supply clues as to spiritual readiness. In the event that no one is able to address the matter, the minister can ask an open-ended question such as the following:



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Minister: “Good morning” (introduction proceeds according to familiarity of each with the other). Then, “How is it going?” (Careful listening is very important here.) Then, dependent on response, the minister can continue:

Minister: “I have some time to spend with you. Is there anything you would like to talk about?”

Dependent on response:

Minister: “Would you be interested in my returning later today (or tomorrow, and so on)?”

Of course, if the individual indicates interest in talking, time must be taken either immediately or as soon as possible, dependent on individual’s condition. The minister needs to come prepared to share scripture, prayer, and personal witness as appropriate. There also must be willingness to lead the patient into a personal relationship with Christ while recognizing this can never be forced.

Rules for Ministering in Healthcare

Inherent in the examples above are certain skills needed to present Christ appropriately. It does not help to pressure one who is not ready, for it may only lead to disgust and anger. Therefore, the following guidelines apply:

- 1) Caution is needed to assess a person’s readiness to discuss sensitive issues of any kind, realizing spiritual discussions may be strictly forbidden for some.
- 2) Time must be made available as and when needed by the individual.
- 3) The approach must be unhurried.
- 4) Open-ended questions are most helpful.
- 5) Spiritual discernment is needed to sense readiness to enter into salvation.
- 6) A set of scriptures must be available, but the presentation should be made in a simple manner, especially when one is critically ill.
- 7) Some scriptures should be left for the person to reference when the minister is gone.
- 8) Early follow-up is needed; continuous presence may be needed if death is imminent.

9) The family is part of the system and also needs attention. This is especially true if the loved one did not accept Christ, if the family lacks understanding about it, or if there are spiritual needs evident. This may be true for the future as well.

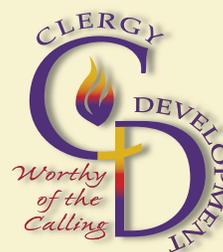
10) Recognize that we are not our own. We are bought with a price (1 Corinthians 6:20; 7:24).

The Privilege of Ministry

Having been called of God to the highest calling possible, ministers must constantly put others before themselves. God has called ministers for a specific purpose. We are reminded that “We who are strong ought to bear with the failings of the weak and not to please ourselves... For even Christ did not please himself...” (Romans 15:1, 3, NIV). Nowhere will there be more demand than in ministry to those who are ailing or dying. How, then, can we consider ourselves privileged when so much is demanded? The answer is that “Now it is required that those who have been given a trust must prove faithful” (1 Corinthians 4:2, NIV). May all the called ones prove faithful to their trust and work to supply care as needed by those who are assigned to them by the Lord. **NH**

Sylvia Whiting, Ph.D. grew up in the Church of the Nazarene. After her last child was born, she entered Northwest Texas School of Nursing in Amarillo, Texas, where she received a diploma and passed the RN board. She also received a Doctorate in Nursing from the University of South Carolina College of Nursing. After being called to ministry and her nursing and ministerial education, Sylvia was ordained Deacon in 2000. She serves as the Minister of Counseling at Charleston (SC) Church of the Nazarene. God continues to bless her ministry after reaching the age of retirement.

Visit
www.NazarenePastor.org



...to find more resources, including archived copies of *New Horizons* and *Soul Care*, links to women clergy information, training events and other helps for clergy.

Called to Wear White, Called to Be Light: Medical Missions

Susan Elliott

A placard in a London museum reads, “Florence Nightingale stated ‘On February 7, 1837, God spoke to me and called me to his service.’” History records that Nightingale responded to that call, served the needs of people in foreign lands, and created modern nursing. Through the years, many others have responded to a similar call from God and served as missionary nurses around the world. There are over 200 nurses appointed for missionary nurse service by the Church of the Nazarene alone. Each nurse goes to share Jesus Christ through the care of pain, through being light in dark places. Each goes because it was the will of God.

Through the profession of nursing, these women lived out the Jesus teacher-preacher-healer model of missions. For “Jesus went through all the towns and villages, *teaching* in their synagogues, *preaching* the good news of the kingdom, and *healing* every disease and sickness. When he saw the crowds, he had compassion on them, because they were harassed and helpless, like sheep without a shepherd” (Matthew 9:35-36, emphasis added, NIV). Jesus said “Go into all

the world and preach the good news to all creation. And these signs will accompany those who believe: In my name they will drive out demons; they will speak in new tongues . . . they will place their hands on sick people and they will get well” (Mark 16:15, 17-18b, NIV).

Like Nightingale, each of the following holiness missionary nurses described a defining moment when God spoke to her heart and made His perfect will known. Each gave testimony to the salvation of Christ’s blood and the sanctification of God’s Holy Spirit. Their calls mirror Matthew 7:7, for as St. John of the Cross wrote, “Seek in reading and you will find in meditation; knock in prayer and it shall be opened to you in contemplation”.

Nurse Jane Tustin spoke of “feeling” called and then testing this call through continued prayer and Bible study. She had a tradition of a Christian home life and exposure to visiting missionaries. When Jane first told her mother of her call, her mother stated “I would rather bury one of my children than have my children out of the will of God.” This validation, along with reinforcing experiences during preparation and service, gave Jane a sense of a divine call that never left her. Her life was centered in God’s will, teaching, farming, and pastoring a church. She quoted the words from a church hymn in the security that “Jesus led me all the way”.

Serving in both Swaziland and Cape Verde, Lydia Wilke Howard secured a hospital-unit home. She led the education and spiritual development of twenty-four orphans. She also raised chickens to provide protein to her patients and held clinics under a shade tree.

Lydia’s call was expressed as hearing the voice of God on two separate

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Eighth International Come to the Water Conference

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Come to the Water Conference
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260-241-2984
convener@whwomenclergy.org

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occasions, several years apart. The first was a voice in her thoughts during a Canadian healing service; the second was audible to her in her room. When asked how she knew the call was from God, she smiled and stated that when she said yes to the Lord, “there was just peace.” With her call going from general (missions) to specific (Cape Verde), she continually felt the guidance and leading to prepare and go. At the other end of her life’s journey, Lydia repeatedly shared how the Lord had been with her and helped her through the situations of life. While often serving in isolation, she was never alone.

Elizabeth Cole’s call began with a horse. As a cowgirl in Montana, she asked God for a good fast horse. She promised that should He provide, she would give her life to Him. Age alone would stop her from riding horses. Elizabeth on a horse became a regular sight on the mission station, and a picture of herself astride Lightening Trim hung in her room all of her life.

Elizabeth also experienced a bright golden light and felt specifically called to work with leprosy patients. It would be 13 years before the African Swazi government allowed the opening of Mbuluzi Leprosy Hospital. During those years of waiting, she never lost sight of why she was to be in Africa, who had called her, and whom she was to serve. Elizabeth cared for leprosy patients and pastored their church in the isolation of mountains. Elizabeth so cared for “the thrown-away people,” that the United Kingdom’s Queen Elizabeth II made missionary nurse Elizabeth an honored citizen of England and had a movie made about her work.

Known as “The Mother of Swazi Nurses,” Dorothy Davis Cook raised a nation of Christian nurses, established a church and school, and ran the Sunday School programs across a nation. Her call came as a teenager on a California Sunday afternoon. During her time of private devotion, the Holy Spirit opened Psalm 2:8 to her eyes and heart. “Ask of me, and I shall give thee the heathen for thine inheritance, and the uttermost parts of the earth for thy possession” (KJ). Next to this verse, her well-worn Bible is marked “September, 1928—called.”

In 1935, Dorothy wrote to the Church, “The call to the mission field is still burning in my heart and I

am constantly praying that the Lord will hasten the time I shall have the privilege of giving all my time in His service. Jesus sweetly saves and sanctifies. I am in His hands for whatever He wants. I shall be happy to go any time or to any place that I am needed.” In addition to being a nurse, Dorothy was ordained in the Church of the Nazarene in 1948.

The following was written about Dorothy, but the theme is true about each of these women who wore white. “In her willingness to leave home and go to Africa, [she] personally demonstrated courage, steadfastness, patience, determination, strength, humility, compassion, faith in God, and obedience to God. Every nurse has a philosophy or ideology through which he or she views the world and nursing practice and that view often becomes a central theme of their legacy to the profession. The dedication that [she] brought to her work as a nurse was firmly grounded in her theological call to be a Christ missionary. While nursing was the method through which she cared for others, [she] never lost sight of her primary purpose for being in Swaziland. [She] knew that she had been called by God to go. The missionary message she consistently shared in the classroom, one-on-one with the students and patient, and in the pulpit, was the biblical gospel of Jesus Christ. [She] believed she was empowered by the Holy Spirit, and she accomplished great things in the name of God” (Elliott, 2000). **NH**

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Susan Elliott, PhD is a Family and Women's Health Nurse Practitioner. She has served in various nursing roles on six continents, primarily through the Church of the Nazarene. Susan is a speaker for mission's services, women's retreats and professional conferences.

Nazarene Parish Nursing: RNs Called into Congregational Health Ministry

Ella Mary Poore

Imagine using your professional skills as an RN in ministry within the Church where spiritual care is your primary focus. With appropriate education for the role as a Parish Nurse/Faith Community Nurse, you can assist your pastor, leading a health team of other health professionals and lay people. Together you can expand the ministry of the Church with limitless possibilities.

Pastors with parish nurses appreciate the added depth to their ministry. Parish nurses visit congregates not only praying and sharing scripture with them, but identifying health care needs, providing health education, and being their advocate through the health care system. Not only is the physical and emotional health of the congregates enhanced, but there is a great opportunity to enhance their walk with the Lord. A health care crisis is often an open door for ministry. Referrals to the church and the parish nurse grow rapidly as people realize how comprehensive this ministry is.

The parish nurse may also assist with health issues in the church, nursery, school, or outreach facilities. Community outreach health education programs on specific topics such as diabetes, heart disease, weight control, care for caregivers, and so on often bring in many new people to the church. An elective Bible study class to follow may intrigue a surprising number of newcomers. The health care team may also develop ongoing support groups such as Grief Share, addiction recovery, and living with chronic illness. As the program expands, the RN director may need to train others to be leaders in various areas such as leading specific groups, visiting home-bound parishioners, and organizing support services.

Is parish nursing a calling? It must be. The parish nurse must be able to offer spiritual care and represent the Church and the Lord positively. Is this a rewarding opportunity? Yes. National research shows that in this specialty of parish nursing, nurses felt more professionally fulfilled than in any other specialty. Because this is an internationally recognized specialty in nursing, a licensed RN directing the program needs to take the Basic Parish Nursing Preparation Course of approximately 40 hours. It will greatly enhance the development of the program and offers professional and legal credibility.

Financial rewards will depend upon the resources of the congregation. Often it can assist in paying for the educational preparation and providing some supplies. Parish nurses often begin as volunteers then advance to part-time, and later full-time. The resources can be enhanced by specific gifts from families or friends of families who have received this comprehensive spiritual ministry. **NH**



Further information is available by contacting the Nazarene Parish Nursing International Coordinator, Ella Mary Poore, RN, MSNEd, FCN at JcEMPoore@cs.com. You may also find more information at www.NazarenePastor.org.

Ella Mary Poore, RN is the Coordinator of Nazarene Parish Nursing (NPN) Inc., which began in 1998. NPN publishes a newsletter, *Health and Wellness*, and is in the process of becoming a 501c3 organization. In the 2005 General Assembly, NPN came under the guidance of Clergy Development. NPN currently has 39 established programs in the United States.

Regional Prayer Summits 2007: Simply Being with Jesus

In the summer months of June and July Olivet, MidAmerica and Northwest Nazarene Universities hosted regional prayer summits. The summits have been a profound time of refreshing, renewal, help and healing for many of our clergy. Randy Berkner, district superintendent from Wisconsin said, *“In a culture where one’s worth is often measured in terms of doing, it is somewhat counterintuitive for ministers to temporarily lay aside pressing demands and devote 48 hours for simply **being** with Jesus. I’m so glad that I did!”*

The 48-hour gatherings have been anointed with freedom in the Spirit. The hours were filled with prayer, communion, praise and worship, and life application from the Word of God. At the outset of each gathering prayer summit facilitator, Tom White, promised there would be no agendas and stated, “Brothers and sisters, we are here to let the Holy Spirit lead us.” And at each of the three summits, the presence of Christ was very near.

White is a seasoned veteran to prayer summits. He is a Wesleyan graduate of Asbury, has led prayer summits globally for 18 years and has authored three books including *Citywide Prayer Movements*. Daniel Ketchum, NMI director, has worked closely and internationally with Tom for more than 20 years, co-facilitating pastors prayer summits and citywide prayer movements in Europe, the Middle East, South Asia, and across North America.

Those participating described a profound personal and community encounter with God: Robert Anderson from Three Rivers, Michigan, *“How can we put what we have experienced into words?! I have experienced prayer all my life and throughout my ministry, but the freedom to share in God’s presence goes beyond description.”* Carla Sunberg from Fort Wayne, Indiana, compared the gathering to a spiritual formation retreat, *“This kind of intentional prayer is necessary*

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Olivet Nazarene University Prayer Summit, June 2007.

Regional Prayer Summit Dates:

Eastern (Schroon Lake, NY):
April 28-30, 2008

Trevecca: May 28-30, 2008

Mount Vernon: June 2-4, 2008

Southern: June 25-27, 2008

Point Loma: July 14-16, 2008

Visit the Clergy Development website,
www.nazarenepastor.org,
for more information about the Summits
and to register.



PLNU Spiritual Development Welcomes Rev. Mary Paul

Carol Blessing

The Rev. Mary Paul has been appointed Vice President of Spiritual Development of Point Loma Nazarene University. Paul most recently served as associate professor of Christian Ministry at Olivet Nazarene University, where she had taught for two years.

Originally from East Rockaway on Long Island, Mary Paul received her Bachelor's Degree in Social Work from Eastern Nazarene College, working for two years in the field following graduation. Paul chose that major because she wanted to make a difference in the world, and a sociology professor "got ahold of her," encouraging her to study social work. Paul wonders if she would have been encouraged to go into ministry, had she been a male student. However, it was not long before she returned to school for an M.A. degree in theology, this time at Boston University. Paul began working as a preacher and pastor for sixteen years, work to which she felt a clear calling. Paul credits Rev. Gary Jones, then pastor of the Bethel Church of the Nazarene in Quincy, Massachusetts, for supporting her as a female in ministry; he was the first to hire her, providing a major step in her development. While serving as a staff, senior and co-pastor of Nazarene churches in the Boston area, she ultimately completed her Doctorate of Ministry at Asbury Theological Seminary, as a part of the Beeson Residential Pastoral Program.

Mary Paul needs look no farther than her own family for ministerial mentoring and modeling. Her parents are pastors, her father serving many years as a senior pastor, with her mother Ann later gaining ordination, and now working in chaplaincy ministry. Her husband Bruce, whom Mary met at ENC, is a Nazarene pastor as well, although she entered seminary before he did. The mother of two teenage sons, Mary

Paul shares that they have been remarkably patient with the transitions caused through moving to Olivet and now PLNU, and her husband Bruce "has always been incredibly supportive in times when God has led us in major life change."

When asked about her life's calling and direction, Paul shares: "At every opportunity in ministry, I sought the Lord's help and prayed to do it to the best of my ability." Each position led to other connections, sometimes resulting in new positions. President Bob Brower contacted her to apply for the Vice President of Spiritual Development opening after she was a guest chapel speaker last spring. "It was not even anything on my radar screen," said Paul, who was "pretty content at Olivet." "I have no big life plan, other than being open and being faithful to God's call. I love pastoral ministry and everything that falls under that umbrella."

Mary Paul's new PLNU position will draw heavily upon that enthusiasm, as she heads student ministries and Love Works and coordinates the thrice-weekly chapel program. She will be one of several chapel speakers in regular rotation; currently, the university is looking for a full-time chaplain. As Vice President for Spiritual Development, Paul says, "I hope by God's strength to be able to look deeply at our overall program and find ways in which our services can be offered in purposeful and refined ways. It is also my desire that as we review our program we seek to reach a wider audience of students." **NH**



Rev. Mary Paul

Carol Blessing, Ph.D. is Professor of Literature at Point Loma Nazarene University, where she also teaches in the Women's Studies minor and does research on women in early Methodism. Her chapter, co-written with Lisa Bernal Corley, Ph.D., entitled "Speaking Out: Feminist Theology and Women's Proclamation in the Wesleyan Tradition," appeared in *Being Feminist, Being Christian*, Palgrave Macmillan, 2006.

Inaugural Conference for Women Clergy

Rondy Smith and Heather Daugherty

You Are Called. These three words served as the theme and an affirmation for those attending the first conference of the *Women In Ministry Network* (WIMN) for the Southeast Region Church of the Nazarene, held April 26-28, 2007. More than 30 women clergy and women exploring a call to ministry gathered on the campus of Trevecca Nazarene University for three days of worship, encouragement, enrichment, and resourcing. Sessions focused on celebrating the call, clearing the way, claiming our heritage, and commissioning our future.

The keynote speaker was Dr. Jossie Owens, the first female District Superintendent in the Church of the Nazarene serving the New England District. She challenged participants to receive with joy the call God has placed on their lives and to be obedient to all God might call them to do. Other special guests addressing the conference were Dr. Nina Gunter, the first female General Superintendent in the Church of the Nazarene, Rev. Carla Sunberg, newly appointed chair of the first USA/Canada Nazarene Women Clergy Council, and Dr. Vicki Copp, Assistant Professor of Practical Theology and Director of Supervised Ministries at Nazarene Theological Seminary. Workshop topics included *Take Thou Authority; Kingdom Women; Balancing Ministry, Marriage, Motherhood and Sabbath Rest; and Coaching for Significance.*

The newly formed trio *Sequel and Two Roads Band* beautifully led the conference worship music. Singer/songwriter Dorinda Biggs wrote and performed the theme song for the conference, *You Called Me.*

The chorus became the heart cry of the women present:

To follow with abandon
To live as I believe
To hear every whisper
That you speak
To live a life that comprehends—
Everything that I must leave
I cling to this—You called me, you called me

A highlight of the conference was a Wesleyan prayer and accountability service during which women prayed for one another and shared communion in small groups. What took place during this service characterized the entire conference: women supporting one another and being instruments of God's grace for each other. Participants had the opportunity to share their joys and struggles, reminded that they are not serving in their assignments alone and isolated. One participant from outside our denomination commented that she was extremely impressed by the Nazarene commitment to support women clergy. Another participant shared, "I am proud of my church and the women with whom I serve."

Plans are already being made for the next Southeast Region WIMN gathering in conjunction with General Assembly in Orlando 2009. To stay informed, visit our website, www.trevecca.edu/wimn, or contact your southeast region (TNU) women clergy representative, Rev. Rondy Smith at rondysmith@aol.com, or Director of Church Services at Trevecca, Heather Daugherty, at hdaugherty@trevecca.edu.

NH

Inaugural conference of the Women in Ministry Network (WIMN) at Trevecca Nazarene University, April 2007



Journey to Ministry

Christa Sunberg

“Oh honey, women should not take the place of men in ministry.” Those words spoken to me years ago during my freshman year in high school have long since become a faded memory; although for some, the words represent an idea that has echoed through their minds for years and only recently begun to fade. The idea that women were supposed to keep one step behind the men in ministry has been dominant for so long. To the women who struggled with a possible call to ministry, it served as a fierce reminder that they were to stay out and find an alternate path to ministry that would fit into the Christian culture. Karen Fullerton’s path in discovering her calling and its fulfillment tells just such a story.

Karen Fullerton was born in Quincy, Massachusetts, the oldest daughter of William and Thelma Sunberg. Her parents were attending Eastern Nazarene College at the time, where her father was studying to be a pastor, while her mother was studying music. William and Thelma were continually faithful to the Lord’s leading in their lives, an example they passed onto their five children. Therefore, when Karen felt the Lord calling her to some kind of ministry, she was ready to follow wholeheartedly.

“There were not a lot of options for women in missions,” Karen says. She had felt the Lord’s call to missions early in life, but because there were not many choices, she decided it was a call to be a medical missionary. Karen continued in this belief for many years. When she began college at Olivet Nazarene College in Bourbonnais, Illinois, she started to take classes that would help her. The first year at Olivet brought her plan to a screeching halt. Karen had never enjoyed math much, so when she encountered the required math classes, she realized being a medical missionary was not something she could do. This

realization was something Karen struggled with for some time, making her very unhappy. She still felt the Lord calling her to ministry but did not know what that could mean now that she was unable to be a medical missionary. The climate of the Christian culture at the time kept telling her there were not many options for women in ministry.

Karen decided to take her struggles to one of her advisors in the nursing department; her advisor told her to go where her skills were and the Lord would honor them, no matter what. This piece of advice really helped Karen, so she decided to switch her major to nursing. In her mind, it was the most logical thing to do, because of all the science classes she had already taken. There were other areas of her life beginning to unfold at that time as well. She had been dating Fred Fullerton and knew he felt a calling to ministry, so she

Karen Fullerton’s life is an amazing example of this truth. She followed the Lord and was patient with Him until it led her to a place she never thought she would be.

just figured her call to ministry was supposed to be in the form of a very involved pastor’s wife. Karen continued with her studies until she graduated with a degree in Nursing and married Fred.

Fred and Karen Fullerton moved into the next phase of their lives together. Karen worked as a nurse to support Fred but continued to feel a call deep in her heart to be involved in ministry. Therefore, she not only was a nurse, but also

Fred’s “right-hand man,” as she called it, putting as much of herself in helping him as possible. Their lives continued like this for years; as a nurse, Karen was learning many new people skills she did not feel she had before, and she was able to help in ministry. Later, Fred and Karen moved back to Karen’s first hometown, Quincy, Massachusetts, so Fred could assume the pastorate at Wollaston Church of the Nazarene on Eastern Nazarene College’s campus.

Karen explained that moving to the Wollaston Church made a major impact on her. It brought her call to the front of her mind again. Fred had never really pastored a church before, but had been involved in

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Sally Miller: An Interview with a Nazarene Hospital Chaplain

Nazarene Chaplaincy Services Staff

NCSS: How did God call you into Chaplaincy ministry?

SM: I was working in a nursing home as an activity assistant. Because of my faith I was in charge of religious activities, including weekly services and Bible studies. Another of my responsibilities was to do room visits. As I visited and prayed with the elderly, ill, and dying, I realized I was doing the work of a chaplain. One day, when I left the room of a lady who had just gone home to be with the Lord, I was overcome with God's presence. I heard a voice as clearly as if someone were right behind me saying, "This is what I want you to do." I knew God was saying, "You can do this. You can help them to come to Me. I want you to do this for Me." I went home and called the local hospital chaplain: "I believe God is calling me to be a chaplain. How do I get there?"

The hospital chaplain told me I needed to be ordained. I was already on a Deacon ordination track and a few courses away from the educational requirements. He recommended I join the Massachusetts Chaplains Association and told me I needed to take Clinical Pastoral Education (CPE). So I continued my education, joined the Chaplains Association, and signed up to take CPE at a medical hospital in Worcester. I also registered with the Chaplaincy office at Nazarene Headquarters in Kansas City. I was ordained Deacon at the Nazarene New England District Assembly of 1994.

I took a second unit of CPE while applying for every chaplain job available within driving distance from my home. Two issues were keeping me from securing a job: the ordained title Deacon, because hospitals assumed that I was not ordained or part of the clergy; and my degree was a certificate, not a diploma. They would say thank you for applying but we have chosen someone with more education. I called our District Superintendent to ask how I should go about applying for Elder's orders and was able to complete those requirements, becoming an ordained

Elder in 1999.

During this time I had been volunteering at our local hospital and nursing homes, while continuing to apply to hospitals. One day I received a letter from the Chaplaincy office of Nazarene Headquarters stating there was an opening at Falmouth Hospital on Cape Cod, two and a half hours away. Wishing it were closer, knowing I would never ask my husband to move, I regrettably tossed the letter away. Then another letter arrived from the Nazarene New England District Office. And the Lord began to speak to me. I showed this to my husband and told him that it was the second letter that I had received regarding this position. My husband told me he thought it would be good for me



Left to right: CH (LTC) Dwight Jennings, USA (Ret), Nazarene Chaplaincy Services Administrative Director; Sally Miller, New England District Chaplain Director; Esther Bowen, New England Region Chaplain; Barry Cook, Eastern Regional Chaplain Coordinator

to apply for the position because interviewing would be a good experience. After a phone interview, I received a call to come for an in-person interview. When I was asked to come for a third interview, my husband and I talked seriously. We agreed if I were to be offered the job we would move part way between our jobs and both commute. I was offered the job, and a few days later my husband came home

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Book Review

Elaine M. Flake, *God in Her Midst: Preaching Healing to Wounded Women* (Valley Forge: Judson Press, 2007)

Reviewed by Stefanie Hendrickson

Rev. Elaine Flake describes her journey to a Womanist Theology as one that began at the “St. Jude Missionary Baptist Church in Memphis, Tennessee, where my mother and I and all of my maternal relatives were very active members.”¹ Importance placed on the conversion experience, along with a high-spirited personality, ensured Flake was properly guided to the “mourner’s bench” to experience her conversion. Growing up in this Southern black church environment, Flake participated in various avenues of church life—Sunday school, youth choir, and so on. The church shaped her beliefs and understanding of the world around her.

Flake didn’t question the role of women as taught to her in her home church—it simply was the way her church, family, and community believed. Once she moved to Nashville to attend college, she began to hear other African American preachers, such as James Cone and Gayraud Wilmore. The idea of God being the liberator of all people, no matter what race or gender began to fill her mind. Flake realized the potential of the church to be an institution of change. Eventually Flake began attending an African Methodist Episcopal church and discovered a “nonliteral” interpretation. This led to the discovery of,

“...biblical scholarship as a discipline. As I uncovered historical information from various biblical commentaries, I found new meaning in Scripture and began to abandon many of the misconstrued teaching of my childhood.”²

Flake was awakened to the special word that the Scriptures and God had for women, particularly the African American woman.

Flake outlines several key factors in her embrace of Womanist theology, which came about when many

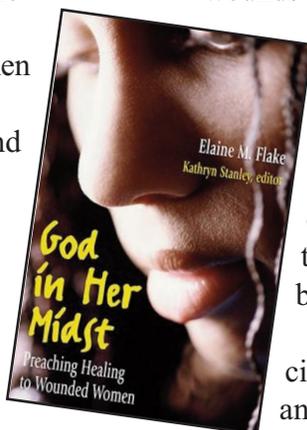
African American women recognized that the balance of power in society, along with feminist theology and black liberation activities overlooked the African American woman. Flake acknowledges the oppression that has developed and been maintained over African American women both by the American society in general and the patriarchal organization of African American society. Abuse, oppression, and cultural norms have led to a lack of power in society, homes, and churches for African American women. Flake and fellow Womanist theologians seek to heal the wounds of African American women through the life of

the Church, as understood in “rethinking” and “reshaping” of the “stories of biblical women in ways that uplift and remove the taint of traditional interpretations.”³ Answering traditions that ignore the unique circumstances of the African American woman, Womanist theology is “reconceptualizing traditional biblical interpretation.”⁴

Flake elaborates on both the unique circumstances of the African American woman and addresses how an Womanist approach to biblical interpretation, biblical scholarship, and preaching can heal the wounds inflicted upon the oppressed. Her personal experience and work with this community (she and her husband co-pastor a large A.M.E. church in New York) allows her to speak to the issues raised.

While a traditional, literal interpretation of women in the bible may not be true to the Scriptures, care must be given to how our perspectives color our own interpretation of Scripture. The issue of liberation from oppression goes deeper than our social interactions and communities—although this is indeed important as Christ demonstrated throughout His life and ministry.

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God's give of liberation frees us to be in relationship with Him. Through that freedom and relationship our live, families, churches, and communities are changed.

Rev. Flake offers several examples of her Womanist theology and biblical interpretation influencing and shaping her preaching. Part two of *God in Her Midst* contains several sermons addressing the stories of women in the Bible and the circumstances of the African American woman.

We all can learn from Rev. Flake's Christ-like attitude toward those who hold power over African American women. Flake does not isolate African American women in those freed from oppression—she includes all who are lacking freedom to come and understand the freedom of God. She demonstrates how spiritual freedom gives us the ability to move beyond focusing on ourselves and our hardships to sharing with others the grace of Christ. **NH**

Notes: ¹Flake, x; ²xi-xii; ³13-14; ⁴15

Rev. Stefanie Hendrickson is Co-pastor of the Drexel Church of the Nazarene in Drexel, Missouri. Stefanie also serves as a liaison for women clergy in the office of Clergy Development.

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if we want to see real change in our churches and communities."

The Board of General Superintendents (BGS) is providing leadership to this refreshing movement. The BGS has appointed a global prayer initiatives leadership team comprised of lead facilitator, Daniel Ketchum, director of Nazarene Missions International; Dan Copp, director of Clergy Development; Larry Dennis, district superintendent of Central Florida; Steve Weber, director of Stewardship Ministries; Dan Boone, president of Trevecca Nazarene University.

The next five prayer summits will be held in April – July 2008 on the following educational regions: ENC, TNU, MVNU, SNU and PLNU. To request a prayer summit brochure call the Clergy Development office at (800) 306-7651 or view details on www.NazarenePastor.org. **NH**

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many different ministry opportunities, such as serving as General Director of Nazarene Youth International. When the couple moved to Wollaston, the experience Karen was receiving helped her realize that being a pastor's wife was not enough. She was beginning to feel that her call to ministry, retained for so many years, meant for her to become a minister herself. After this decision, Karen started on a new journey that ended with her becoming Rev. Karen Fullerton.

Karen's life and experiences up until this point had not made her bitter or angry at the Christian culture she had grown up in. Rather, she was thankful because the Lord had used her experiences to mold her into someone better equipped to be a pastor. The skills she had received from nursing had been a wonderful progression to learning better ways of interacting with the people around her. "God never wastes anything," she said, while listing some of the people skills she learned from being a nurse. She explained how nursing had helped her to better read body language, spot people who were in pain, deal with death and dying, and help families and women in crisis. It had taken her awhile to get over the fact she was not supposed to be a medical missionary, and nursing was not something she had expected. Along with her education for nursing, however, she was able to experience opportunities that helped her on her journey to becoming a pastor. She had been able to work with migrants and serve as a jail nurse. She explains that she did not regret being a nurse in the least, for the Lord had been leading her on a journey. He was helping her to step out of her comfort zone by turning her life upside down and discovering women could be in ministry on their own. They did not have to be pastor's wives.

Karen is now on-staff with her husband, Fred, at Wollaston Church of the Nazarene and is involved in many different ministries. She primarily works with women and families who are in crisis. She enjoys this ministry as she also helps with one-on-one discipleship for women. Karen has reached a place in her life where she is content in what she is doing, because she feels she is in the Lord's will. She ended by telling me that

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as people following the Lord, we always need to be open because we never know when we may miss an opportunity.

Karen's life is an example of how her faithfulness and patience with the Lord helped lead her to where He desired her to be, a lesson of faithfulness and patience many have yet to learn. "I still hear of women who have trouble breaking into the ministry, and it can be discouraging. If the Lord has placed a calling on one's heart, however, we just have to wait and follow Him. He most certainly has a plan for us. This plan may be different from the one we imagined for ourselves. However, if it is the Lord's plan and we are earnestly following Him, I truly believe it will be better and more exciting than anything we could ever imagine, no matter how many bumps we encounter along the way." Karen Fullerton's life is an amazing example of this truth. She followed the Lord and was patient with Him until it led her to a place she never thought she would be.

Karen's life is one modeled much after the faithfulness displayed in her parents' lives, and I am proud to be able to call this remarkable woman my Aunt. For the women struggling with a call and not knowing yet where they may fit in the world of ministry, here is a verse taught to Karen and her siblings by Thelma Sunberg, her mother, and taught to me by Karen's brother, my father. "Trust in the Lord with all your heart and lean not on your own understanding, in all your ways acknowledge Him and he will make your paths straight" (Proverbs 3:5-6).

I am proud of my aunt, as I am sure her parents were, and the rest of her family continues to be. She, through faith, trust, and patience, became the Reverend Karen Fullerton. NH

Christa Sunberg is a junior at Olivet Nazarene University. Raised as a missionary kid in Russia, she is studying History and Political Science and is seeking God's leading concerning ministry.

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and told me God wanted both of us to work on Cape Cod because he had been laid off from his job!

NCSS: Would you share a recent experience from your Chaplaincy ministry?

SM: There were twin sisters who were regular visitors to the hospital. The health of one twin began to fail: she came into the hospital slowly declining. One day she asked me to make sure the song *Jesus Loves the Little Children* was sung at her funeral. I promised to tell her parents. Then I began to sing it for her. She sang with me as best she could. She told me that she was not always a nice person and was afraid God wouldn't let her into heaven. I reminded her God forgives, and she prayed receiving forgiveness. I was out of state when a nurse paged me stating she didn't think the ill twin would live through the night. I told the hospital I could be there in three hours. The family had all gathered. The healthy twin sat by her sister's side and was saying, "Don't go; don't go." I put my arm around her and told her it was time for her sister to go be with God. It would help her sister if she told her it was okay. She leaned back over her sister and whispered in her ear, "I know you have to go. It's okay." Leaning against a wall, she fell into a restless sleep. About ten minutes later she jumped to her feet and grabbed balloons she had brought for her sister. She headed out the door. "Where are you going?" her brother asked. "I have to let the balloons go." She ran outside, let them go, and returned to tell her sister to go catch the balloons. Then she ran out the door again. Minutes after she was gone her sister died. I suggested someone go and find her so we could all be together for prayer. We gathered around the bed and I asked God to receive this lady's spirit. I helped them with the funeral; the closing song was *Jesus Loves the Little Children*.

NCSS: Describe the scope of your Chaplaincy ministry.

SM: Let me first say how I feel about the ministry of hospital chaplaincy. Chaplaincy is the front line of

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spiritual battle. Every patient in the hospital is in a life-changing situation. Some are facing death. Some are facing life-changing illness. Some are having a baby and feel the awesome responsibility of guiding this new little life. Even if a patient is in for something minor, the hospital stay has taken them out of their everyday routine. The chaplain has the privilege of bringing God's love and light to the patients. Every room entered has a person who needs God's help. I start my day with prayer. I ask God to go before me into each room and prepare the heart of each patient to receive something from Him. Then I ask God to help me, to give me words of compassion so they see Him.

A great deal of ministry happens with the hospital staff. They have very stressful workdays. They see pain day and night. Their personal lives can also be stressful. One morning I was stopped four times before noon by staff who needed encouragement. I thank God for the staff. They are wonderful caring people who give of themselves day after day. What a privilege it is to be there for them with a listening ear, hug, and a prayer.

I tell the local pastors I am their extended arm. I pray with and encourage their people who are in the hospital. Often those who have not been regular in church attendance or don't go anywhere tell me they need to get back to church. I encourage them to return. If they don't attend anywhere I tell them about the churches in their neighborhood. With the patient's permission, I call clergy to let them know a parishioner is in the hospital. One day when I was filling in for a Sunday morning service at a Congregational church a man came up to me and said, "Thank you. When I was in the hospital you introduced me to this pastor. My family and I have come here ever since."

As a chaplain I pray with people on their deathbed, support grieving families, serve communion, and baptize. I have renewed the wedding vows of two

couples and have officiated one wedding. At times I officiate at funerals. I am often asked to fill the pulpit for vacationing pastors of many different denominations. I have spoken at a variety of community gatherings. I facilitated a faith and prayer learning session at the Massachusetts Pain Initiative Workshop, which heightened the awareness for nursing staff at several Massachusetts hospitals of the effectiveness of the chaplaincy ministry in pain management for patients. I have facilitated workshops for several Nazarene churches in the area on how to make a hospital or nursing home visit.

I would like to tell you how important CPE has been to my ministry. Understanding how to visit effectively is only a small part. Learning about other faith groups through the other CPE students and learning to defend your own faith without offending others was the greatest learning experience for me. You are forced to "firm up" your beliefs. This helps you to help others use their beliefs to reach out to God without compromising your own beliefs.

The only other thing I think I should mention is the importance of being a team player, especially for the staff. Only then will you be really effective in a hospital. I have utilized interoffice email to send encouraging messages each week. They have come to know I am there for them and the patients.

I am so blessed to be God's servant and to have the assurance I am right where He wants me to be, in the center of His will for my life. I can't thank Him enough. Praise the Lord!

NH

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