

By Pamala K. McCarver

Nursing...

Focused on Tasks or People?

Abstract: *Through being a patient, this nurse experienced healthcare professionals can be limited regarding the deeper issues within a patient's soul. Nurses cannot give what they do not have; but responding to personal spiritual needs equips nurses to meet patients' soul needs. The biblical account of sisters Mary and Martha (Luke 10:38-42) provides insight on the importance of Christian discipleship and diligent work, suggesting Christian nurses may need to be like Mary—sitting at Jesus' feet, and Martha—working for Christ.*

Key Words: *Christian nursing, discipleship, self-care, spiritual care*



LIFE CHANGING ILLNESS

There were many days in 1995 I thought I would die. During the 3 years that followed, I wondered whether illness would end

my life. I was a 35-year-old mother of three young children and the illness propelled me into crisis. During the course of treatment and, unfortunately, on many occasions, the lack of treatment, I discovered that simple caring is sometimes missing in the nursing profession. As I lay horizontally on my back, I began to think of the vertical dimensions of life. As a patient, I discovered that healthcare professionals are, at many times, limited regarding the deeper issues within a patient's soul.

Once my physical body healed, I began a journey examining the meaning and purpose of my life. The realization that I was physically well was like waking up from a long nightmare. It took time for me to believe I had actually survived. I knew I would never be the same—I'd been given another chance to live. C.S. Lewis wrote, "God whispers to us in our pleasures, speaks in our conscience, but shouts in our pain: it is His megaphone to rouse a deaf world" (2001, p. 91). There was no doubt God had gotten my attention.

Through role reversal—being a patient rather than a nurse, I began to understand why healthcare professionals are limited in caring for the soul: we cannot give what we do not have. Back on the other side of the bed, the challenge I faced if I truly desired to give spiritual care to my patients, was to examine my own spiritual foundations. As I learned how to respond to the spiritual needs of my soul I discovered I was being equipped to meet the spiritual needs of my patients' souls.



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Building a personal spiritual foundation required me to develop patterns of spiritual disciplines for the primary purpose of listening to God and giving back what is God's. I made this choice because I was determined to enter into deeper awareness and relationship with God. Essential spiritual disciplines in growing my spiritual foundation include solitude, prayer, private study, communal study, corporate worship, sacrificial service, and sacrificial giving. All complement my nursing practice in providing spiritual care to my patients.

Provision 5 of the American Nurses Association (ANA) *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2002, p. 18) states, "The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth" (p. 18). Nurse ethicist Marsha Fowler (2008) explains this involves the "increasing concern for competence not only for the sake of the profession, but for the patient as well" (p. 59). Fowler goes on to say that the growth in competence represents a level of practice that is the acceptable practice all nurses should achieve, and that professional growth moves the nurse "toward excellence and this is directed toward an ideal as practice" (p. 59). It is the responsibility of the Christian nurse to integrate our competent practice with personal and professional growth. For the Christian nurse, this means understanding biblical principles of work and spiritual needs.

MARY AND MARTHA

The biblical account of Mary and Martha has always challenged my thinking regarding spiritual care. Luke 10:38-42 states that Martha was head of the household; she welcomed Jesus and his friends into her home. Like most sisters, these two women had conflicts that emerged because of their different personalities, roles, and the simple fact they had a relationship. Relationships are difficult to maintain, especially in a stressful hos-

pital unit caring for the many needs of the sick.

Martha was concerned with household details. She strived for perfection. "But Martha was distracted by all the preparations that had to be made. She came to him and asked, 'Lord, don't you care that my sister has left me to do all the work by myself? Tell her to help me!'" (Luke 10:40, NIV). I cannot count the times I've struggled with the same thought while performing my nursing duties.

Mary often is seen as a more spiritual woman. She sat at Jesus' feet, a scene that means she was his student or disciple. However, the issue was not Martha's job. If Martha and Mary had both sat at Jesus' feet, eventually the house guests would have become hungry. Physical needs persist even while pursuing spiritual needs.

So what was Martha's problem? She was guilty of complaining. Jesus replied, "Martha, Martha, you are worried and upset about many things, but only one thing is needed. Mary has chosen what is better, and it will not be taken away from her" (Luke 10:41-42). Jesus did not condemn Martha's activity; he reminded her that she was permitting her job to hinder her spirituality. If Martha's work, preparing Jesus' meal, had centered on his needs she would not have complained about Mary. Instead she would have experienced love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control (Galatians 5:22-23). She could have worked hard, carrying the entire load of meal preparation and managing the household, with a first-class attitude.

WORK OUT OF RELATIONSHIP

In examining this issue I discovered that historically nursing has not always been viewed as a profession or a job, but rather as a relationship with God that developed out of a personal calling. To some, nursing the sick was a religious vocation of sacrificial service supported by their personal relationship with Jesus

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Christ (Shelly & Miller, 2006). I wondered, "How were they able to endure when life seemed so hard and there appeared to be no resolution in the near future?" I found the answer in their sacrifice and devotion. They were able to keep a balance between nurturing their own soul and practical nursing service.

Nursing has been in a state of chaos for many years trying to define the profession and the definition of a "profession." Chitty and Black (2010) define a profession as "an occupational group with a set of attitudes or behaviors or both" (p. 60). Nurses act out of a scientific body of knowledge, as well as with learned skills of communication. As Christians, we are commanded in Philippians 2:3-5 to have the same attitude as Jesus Christ. This involves laying aside our own needs and looking to the needs of others. We are to do our work with excellence and with a spirit of humility as unto the Lord. My work, the healing ministry of Jesus Christ, is sacred and I can either respond like Martha or like Mary. Truth be told, there are days I feel more like Martha, other days I feel like Mary, and some days I feel like both.

On the days I think and feel like Martha, I finish my day distracted and burdened. When I allow myself to be distracted with the physical aspects of patient care and the mechanics of health-care (staff conflicts, changes in procedures, new policies, etc., etc.), I end the day spent, frustrated, and exhausted.

On the days I think and feel like Mary, I have the surprising luxury of

spending time comforting, encouraging, counseling patients, family, and staff on their spiritual journeys. I am determined to attain the mindset of Mary while I do the work of Martha. Martha and Mary; it is not an either or choice. I want to be a disciple like Mary while I do the work of Martha.

SACRED WORK


Is it easy to care for the many needs of my patients, their families, and staff? No, I often fail. Romans chapters 6-8 offer a record of how Paul broke through his circumstances. Paul wrote that with God's grace we develop habits of holiness. He wrote, "I put this in human terms because you are weak in your natural selves. Just as you used to offer the parts of your body in slavery to impurity and to ever-increasing wickedness, so now offer them in slavery to righteousness leading to holiness" (Roman 6:19, NIV). Daily I must choose between yielding to my old ways or following God's Spirit.

The mission of healthcare is to provide physical, mental, and spiritual healing. It is a big responsibility, one nurses enthusiastically embrace. Sharon Fish and Judy Shelly, in their classic book, *Spiritual Care: The Nurse's Role* (1979), state that "listening, empathy, vulnerability, humility, and commitment—the key elements in the therapeutic use of self—are skills which must be acquired through faith, education, and practice" (p. 86). Jesus listened and cared for the whole person, both

physical and emotional, and that is the role we are called to as well. Listening as Mary did is a learned skill, while giving care is the role of Martha. The two aspects of Martha and Mary must be integrated in the care we give.

I am committed to sacred work. It would be nothing less than malpractice for me to give anything less than excellent spiritual care, an important aspect of healthcare, especially when I am caring for patients and their families in crisis situations. As Christian nurses, we must have relationship with Jesus Christ and be nurturing that relationship daily through spiritual disciplines, while we strive to continue our professional growth. As we listen and grow personally, we can provide both competent skilled care and empathetic listening to patients' deeper issues and spiritual concerns.

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