C-Mail
The official publication of New Zealand Healthcare Chaplains' Association

President's Pen

I am writing this on the first day of winter, which also marks the beginning of my retirement from being a Mental Health Chaplain.

Change is inevitable, whether it be in the physical seasons of the year or in the various stages of our lives. Change always brings some sadness as old things fade away; however, many new opportunities arise for the future. As a fisherman, I mourn the close of the summer season and the need to change to winter techniques, but many of my friends who ski are excited about the winter snows.

What does this have to do with NZHCA? The executive committee has been aware for some time that many of our members are asking or having their employers ask, 'what is the value of being an NZHCA member? What do I get out of membership?

We have also had feedback that the current registration and credentialling process is onerous. We have been listening and will address these issues to ensure you get the best out of your membership.

We have some exciting changes and developments to share with you over the next few months. Our goal is to address concerns and establish our membership as a reputable, high-valued organisation focused on professional development and capability-building for its members.

I appreciate your patience as we continue to work towards the best outcomes for our chaplains and spiritual practitioners in New Zealand.

It was with great excitement that I received an email from Hospital Chaplaincy Aotearoa confirming that they will pay members' subscriptions for the 2025/26 year. I encourage all HCA employees to retain their membership for the next twelve months.

I wish you all the best in your chaplaincy ministry and pray that God will continue to bless you as you act as his hands, feet and face in the hospitals and other care facilities in which you serve

Wyatt Butcher
NZHCA President

Quote for this Season

"Action with and for those who suffer is the concrete expression of the compassionate life and the final criterion of being a Christian."
Henri J.M. Nouwen, Compassion: A Reflection on the Christian Life

Kathryn Mannix Speaking Tour

Kathryn Mannix, bestselling author of **'With the End in Mind'** and **'Listen,'** was invited to visit Aotearoa New Zealand on a speaking tour by the Australia and New Zealand Society for Palliative Medicine and Hospice New Zealand. During March 2025 she spoke at eleven venues.

Having read her book, **'With The End in Mind: How to Live and Die Well**,' and loved it, I attended the Rotorua session. Kathryn, a palliative care doctor and CBT therapist, honestly shared touching stories of how she and her team at a British Hospital made terminal patient's decline and death a more pleasant journey for them and their whanau. The book contains many stories like the ones she shared at the meeting. Her second book, '**Listening: How to Find the Words for Tender Conversations**,' gives us many ways of supporting a patient and/or family to find within themselves the ability to talk honestly and make decisions about huge changes in their lives. It too is touching and honest. It's all about using compassionate curiosity.

Many patients are afraid of their impending death. Through their stories Kathryn compassionately reveals the myths the patients and whanau believe about dying or death, and re-shapes their beliefs with scientific truth. She also supports them and their whanau by personalising the journey with memorable activities, leading them towards acceptance and peace. The stories all contain humour, practical wisdom, and of course sorrow. Some are tragic. They are very illuminating for people involved with end-of-life care and contain inspiration for us as chaplains and spiritual carers.

I found this a deeply moving read, and the stories have added to how I see my role in supporting the chronically ill or dying. The books are eloquently written and as there is no scientific doctor-speak, easy to read. It was time well invested.
Gaynor Lincoln

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A Bend in the Road

Helen Steiner Rice *(1900-1981)*

Sometimes we come to life's crossroads
We view what we think is the end;
But God has a much wider vision
And He knows that it's only a bend.

The road will go on and get smoother
And after we've stopped for a rest,
The path that lies hidden beyond us
Is often the path that is best.

So, rest and relax and grow stronger
Let go, and let God share your load,
And have faith in a brighter tomorrow
You've just come to a bend in the road.

https://www.webtruth.org/christian-poems-poetry/the-bend-in-the-road-poem-by-helen-steiner-rice/

Chaplain on a Bike Trip

From Robyn Chaffey (Gisborne)

Before I left for this trip I had a conversation with a patient about faith. She mentioned a definition of what faith was in the Bible.

Hebrews 11:1

Now faith is confidence in what we hope for and assurance about what we do not see.

This seemed to resonate with us the whole trip.

The Sounds-to-Sounds bike trail is tough and has parts that are not for the faint hearted. It is a mixture of tracks form Ships Cove up from Picton to either Mildford or Doubtful Sound. It is a no small miracle that we managed to complete this with a little help. On my way to Picton in the book I was reading was a statement that "a coincidence is only a small miracle where God choses to remain anonymous." Small miracles happened all along the way, and this is just an account of a few. We felt that they were not from an anonymous source but a presence that looked after us the whole way.

The Queen Charlotte tramping track that starts this adventure certainly was not built for bikes. Wet slippery rocks, boulders and sticky clay do not make for a smooth transit. Add a steep gradient and a cliff on the tracks edge you have a mild description. We were so amazed that we made it and had come out on the road. As we were dealing with a lack of air in a tyre a couple walked past and stopped to chat.

When talking I mentioned we were heading for Picton and gestured down the road. They looked at me and said" that is not the way." We assumed wrongly were on the right road. In fact, the junction was a kilometre back. No one else was around. If that couple had not come past, we would have gone the wrong way. That interaction saved our tired bodies more punishment and set us going in the right direction. Coincidence?

Feeling very tired while walking up a steep hill and pushing my bike a voice behind me said" let me do that for you" A young male takes charge and pushes my bike to the top. Coincidence that he appeared at just the right time.

Continuing up the Awatere Valley where there are no shops. My cycling buddy was a little concerned she did not have enough lunch. Her reading for the day was about not worrying, God will provide. Sure, enough we come to a mailbox with pears from a hundred-year-old tree for sale. Problem solved. Coincidence?

While in that valley we had anxiety about the Molesworth Muster's tack which is a long stretch with no power. We were on electric bikes. Spending the night at Muller Statin we ran into some hunters with trailers. They offered to give us a lift to the top of Ward's Pass which once the one big hill that would eat up our battery power. That meant we could never say we did the whole lot, but it did relieve the anxiety of running out of battery. Strange they were staying at that station and leaving the same day as us.

Further down the South Island we did manage to get lost. We found we were on the wrong side of the Rakaia River. We were sure there would be a bridge somewhere but in fact there are only two bridges over the river. With the help of a local we headed in the right direction. Stopping for a cup of coffee a gentleman came up to say hello. The loaded bikes gave the story away and he was curious to find out if we were doing the Sound to Sound as he had done it a couple of years earlier.

After he left, we had our coffee and studied google maps to decide the next move. We headed for the bridge which was part of the state highway and not appropriate for bikes. We stopped at the bridge looking down at its two-kilometre length wondering how we were going to achieve transfer from one side to the other. Just then a car stopped in front of us. The same gentleman from the coffee shop asked did we need help. He told us to go ahead, and he followed with his emergency lights on so no traffic could pass. The timing of that encounter and knowing what to do had to be more than coincidence.

By Twizel, my bike had problems and needed a new cassette and chain. The local bike shop is a hire outfit for those doing the trails. But because their hire bikes were the same type as mine, they had the spare parts and could do it straight away (my local shop must order them in). A cup of tea while we waited then we were on our way. We were getting used to being looked after by this stage.

However, we came to Omarama where the next bit was over the Omarama saddle which included the need to push your bikes several kilometres. It also includes over thirty fords, is 1,250 metres high, and a very steep gradient. I said all along I was not doing this due to an old shoulder injury which made pushing a loaded bike over this hill not realistic. I did not have a plan of how to get around the problem.

While sitting in the only café, another group of riders came along. They were doing the Sounds to Sounds but had supporting vehicles. They remembered us from 2023 when we all were doing the length of the South Island. A conversation was started, and it turned out the men of the group were keen to go over the hill. The women were like us; they intended riding so far up then coming down and around that hill to the other side in the vehicles. They offered to take us and our bikes.

Nearer our destination there was an accommodation bottle neck, and we could not find anything available. We were phoning every possible lead including those mentioned on the face book page of the Sounds to Sounds. An answer came from one source that their accommodation was not suitable for a couple of ladies so they gave us the phone number of a couple who might help. This couple had built on a small unit for family and friends.

These lovely people agreed to host us. When we arrived, we found a friendly welcome and a lovely self-contained unit. On the wall of the bedroom was a small plaque with the words that went something like this. “Turn off the screen, close the paper, go outside and connect with Jesus.”

I remember thinking we were just meant to be there. Things we hoped for happened and gave us assurance that reinforced our faith.

Psalm 84:11

For the Lord God is a sun and shield; the Lord bestows favour and honour. No good thing does he withhold from those who walk uprightly.

Webinar Reports

Advanced Care Planning Webinar

For those of you that missed our webinar concerning having an Advance Care Plan presented by Sean Thompson who is an Advance Care Planning Quality Improvement Advisor at Health New Zealand, I recommend you view the recording; the link for it has been forwarded to you. Even if you have thought of having an Advanced Care Plan or people you visit have talked about their wishes this very professional presentation is extremely valuable. So here are a few pointers that were highlighted by Sean Thompson during the webinar. Sean’s presentation centred around three questions;

Who would you like to speak for you if you couldn’t?
Have you spoken to them?
Have you put your wishes down on paper?

Personally, this year I have had at least three people who have opened up to me about their wishes but haven’t told anyone else, this is important as statistics say that 32% of people die in hospital whereas only 18% of people with an ACP die in hospital, quite a significant difference I think you will agree.

As chaplains, on many occasions we have quite personal conversations on the wards and most people I come across have quite definite opinions about what they want, but statistics say that very few have ever committed it to paper let alone talked to family, so when the time comes others who are critical to your treatment need to understand your wishes.

One unexpected benefit of having an ACP is that when the time comes, all know your wishes and consequently the stress of your passing is reduced.

I heartily recommend this webinar to you.
Peter Lindop (Rotorua)

Article in Stuff about the necessity for an ACP:

https://www.stuff.co.nz/home-property/360597111/last-hurrah-what-older-people-should-be-doing-take-weight

The Heart of Connection:
How Emotions Shape Healthy Relationships

I recently participated in a webinar hosted by **Spiritual Care Australia (SCA)** titled **"The Heart of Connection: How Emotions Shape Healthy Relationships,"** facilitated by Dr. Lynn Moresi.

As the Program Director at the Heart of Life Centre for Spiritual & Pastoral Formation, Dr. Moresi brought a wealth of experience and insight to the session. Renowned for her contemplative approach and practical wisdom, she engages audiences both in Australia and internationally. As an accomplished Enneagram trainer and speaker, Lynn effectively weaves together various spiritual traditions with applicable, real-world insights.

Lynn explained how emotions play a fundamental role in human connections, influencing our self-perception and interactions with others. By gaining insight into our emotions, we can approach people and challenges of our work with enhanced clarity and empathy.

There were three 5-minute breakouts where we were encouraged to discuss our personal responses to challenging reflective questions. Our group of three, filled the whole five minutes easily and there were no empty silences one can experience in breakouts.

To finish, we reflected on the transformative influence of faith, hope, and love—essential virtues that anchor us and lead us toward more profound and healthier relationships.

It was an excellent webinar, with the impactful PowerPoint Lynn created, made available to us to review what we had learnt.

Gaynor Lincoln (Rotorua)

AHANZ (Allied Health Aotearoa New Zealand)

Report on AGM and Quarterly Meeting 26 March 2025
Attended by Gaynor and Jacqui

NZHCA has recently become a member of AHANZ. This collective of allied health works to ensure professions are recognised and contribute to their full potential to enable New Zealanders to enjoy health and wellbeing.
AHANZ has a number of workshops that are free to members, and these include a number by Heather Came in relation to Te Tiriti, responding to racism and so on. Full details on their website https://www.alliedhealth.org.nz/
Members were welcomed to AHANZ by president.
Member updates – most member organisations working on their constitutions to make sure they are compliant with 2022 Incorporated Societies Act. Some also working on Te Tiriti Policy statements. One member calling theirs a "Cultural and Diversity Statement" which has a section on Te Tiriti in addition to other aspects.

Martin Chadwick, Chief Allied Health Professions Officer from MOH spoke. Shared that the new MOH is very focused on health targets and that any advocacy from AHANZ or members needs to relate to the targets, and focus on outcomes, particularly preventative outcomes. He indicated that there is some regulatory reform in the pipeline and that would be the ideal opportunity to feed into the process. He pointed out that Simeon Brown has three portfolios, with health one of these, so is a very busy minister. He noted that about 50% of allied health is not funded by Te Whatu Ora. Martin is using LinkedIn as a channel to communicate about allied health. Martin referred to the MOH Allied Health Development Framework Te Awa Tarai as a useful tool.

Poornima Ramjee from the ACC System Peformance and Commissioning Team spoke to address concerns about recent changes for allied health professionals who submit claims to ACC on behalf of consumers. Not so relevant for healthcare chaplains – although it got me thinking that now that spiritual harm is recognised in the National Adverse Event Policy 2023 that potentially chaplains could submit claims in the future!

Max Harris from Action Station (an independent, crowdfunded, community campaigning organisation) spoke about how to do a good parliamentary submission.
I felt the meeting was really good. It was great to hear what other members are up to – similar things to us and similarly marginalised in the health system – and to hear the speakers to the AGM. I think NZHCA and its members will benefit a lot from being part of this bigger group of allied health professionals going forward and also be able to educate them about what healthcare chaplains do and what we have to offer in the healthcare context.

Jacqui Tuffnell (NZHCA Committee Research)

Research Links

From John Ehman (Pennsylvania Medicine) Retired Chaplain
john.ehman@outlook.com

White, K. B., Sprik, P. J., Jones, B. and Fitchett, G. "**Spiritual care in outpatient oncology: a qualitative study of focus groups with cancer centre chaplains**." *Supportive Care in Cancer* 33, no. 4 (March 26, 2025): 322 [electronic journal article identifier].
This is a qualitative, thematic analysis of data collected from three focus groups that occurred in November-December 2023 with chaplains representing 13 unique cancer centres in the US, eight of which (61.5%) reported that they provided spiritual care exclusively and in a full-time capacity to a cancer centre; the remaining 5 (38.5%) had additional inpatient responsibilities. Chaplains visited between 4-10 patients per day, depending on departmental policies and case acuity. Respondents primarily identified patients/families through verbal referrals from the multidisciplinary team or automated referral mechanisms. Many discussed the challenge of how to increase referrals, while others noted that they were too overburdened by current work to identify new referrals. Many centres wanted chaplains to schedule appointments with patients like other psychosocial services, but patients preferred conversation at pre-existing appointments (like in infusion) rather than scheduling additional appointments. Short appointment times complicated the provision of spiritual care, as it was difficult for chaplains to find and provide care for patients in short appointment time frames. Respondents frequently reported conducting telephone or virtual visits. Most spiritual care relationships were long-term and often focused on medical decision-making. Chaplains spoke of numerous organizational challenges but also of key facilitators of outpatient work. Three tables of extensive primary quotes, organized by themes/topics, address the logistics of spiritual care, the spiritual care provided, and operational insights. An appendix gives the focus group

script and questions. [This article is available online at https://link.springer.com/article/10.1007/s00520-025-09369-x]

Flint, T. and Ronel, N. "**Post-Traumatic Stress Disappointment: disappointment and its role in PTSD**." *International Journal of Offender Therapy & Comparative Criminology* 69, nos. 6-7 (May 2025): 835-852.
This qualitative interview study, out of Israel, involved fifty individuals (26 men and 24 women) of varying backgrounds who had been diagnosed with PTSD and experienced recovery, and who attributed their recovery to spirituality. Participants underwent a variety of traumas, had different piety levels, and used different recovery methods. One participant is identified as an American Catholic chaplain with combat PTSD. Findings revealed how individuals diagnosed with PTSD may experience three-dimensional disappointment with Self (e.g., self-disappointment in their inability to defend themselves or avoid the harm they experienced, self-disappointment for not seeking help, disappointment that their spirituality -- whether religious or not -- failed to protect them as they thought it should have, and self-disappointment among the non-spiritual with their lack of spiritual connection which they felt could have helped them); with Others (e.g., disappointment with people whom they felt were aware of event but did not prevent it, and disappointment with their community, significant others, and authority figures for not helping them overcome their PTSD symptoms); and with the Sublime (e.g., in a neglect/loss of spiritual connection for religious participants, in feelings of loneliness, and by an unexpected sense of disappointment in the Sublime among the self-identified non-spiritual). The authors note how disappointment can breed a sense of disconnection and helplessness, and they address the role of disappointment and disconnection in spiritual recovery. Chaplains are not mentioned explicitly as care providers. [This article is available online at https://pmc.ncbi.nlm.nih.gov/articles/PMC12009453]

Quote

Words are seeds that do more than blow around.

They land in our hearts and not the ground.

Be careful what you plant and careful what you say.

You might have to eat what you planted one day.

Unknown

Professional Development Study Opportunities

From Hub of Hope

https://www.hubofhope.nz/elearning-course

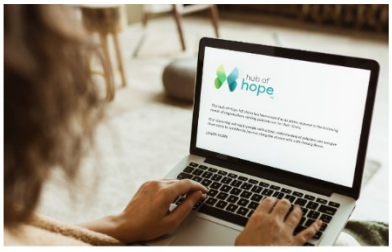
Our vision is to equip people from all around New Zealand to feel empowered to journey alongside anyone with a life-limiting illness, offering Christian spiritual support which is full of hope for them and their whanau.

You will learn how to grow bolder in your conversations when engaging with the dying, asking empowering questions, increasing your listening skills, and shown techniques to encourage your client in their journey to find the everlasting hope and peace that Jesus can bring.

You will also help unpacking their fears, and work through the practical activities that help their families once they are gone, while inspiring them to live the best life with passion and legacy in mind.

Choose your plan

Hub of Hope is currently offering you to undertake this e-Learning course two ways:



PERSONAL DEVELOPMENT

You will have full access to the entire E- learning Course that you can study at your own pace. This version is for personal development purposes only and excludes the access to Hope Champions, ongoing network membership options (and associated annual fees).

There is no requirement for Police Checks, Pastor References or Interviews to take this version of the course.

- ✓ Over 20 hours of instruction
- ✓ No Hope Champion tutoring
- ✓ 1 Year Course Access

~~$569.00~~

INTRO OFFER: $349.00

AVAILABLE UNTIL 30 JULY 2025

NETWORK BUILDER

This option help build the Hub of Hope network. You will have full access to the entire E- learning Course that you can study with a managed network group at an agreed pace of learning and review - you will work on the content of each module for a week, with facilitated review over Zoom or in person.

You will be required to undergo an entry interview, Police check, and a reference from your Pastor

- ✓ Over 20 hours of instruction
- ✓ 9 hours of group Hope Champion tutoring
- ✓ Unlimited lifetime access (with annual membership)
- ✓ Organisational Opportunities

$199.00

2026 Annual Membership $49.00

from Otago University

Websites of Interest

ERIC: https://www.pastoralezorg.be/page/erich/

Transforming Chaplaincy: https://www.transformchaplaincy.org/

Chaplaincy Innovation Lab: https://chaplaincyinnovation.org/

Nathaniel Centre: The NZ Catholic Bioethics Centre: http://www.nathaniel.org.nz/

Spiritual Care Australia: https://www.spiritualcareaustralia.org.au/

The views and opinions expressed in C-Mail are those of the authors and do not necessarily reflect the views of the editorial team. Articles submitted for publication are subject to editing. Submissions of material for C-Mail can be sent to gaynorlincoln@gmail.com Deadline for next issue is 1st August 2025.

We are looking for the following types of material;

book and article reviews, ministry updates, anonymous patient stories, what's happening in your setting, professional development courses you have undertaken, articles you have written and inspirational material. Thank you to the contributors for this current issue.

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