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Greeting from the ARCAPPE Chair *Paul Bergen*

*I*t was wonderful to gather last month in Red Deer and reconnect with colleagues from around the province. Our Association Day was full, as usual. Thanks to Steven Hill for his offering of reflective images and music as well as idea-provoking examples of how we can nurture the spirits not only of the clients and staff whom we serve but also tend to and encourage the spirit of the entire institution.

Our College Development sub-committee provided a very thorough yet concise overview of their work and findings to date. Thanks to Philip and his committee for their excellent work, and to Shane for his presentation.

The annual general meeting component went as ever. You'll find reports from various committee chairs elsewhere in this issue. As well, full reports prepared for the AGM will be available with the minutes. I'll repeat here my apology for not facilitating your completion and submission of evaluation forms at the meeting and suggest again that you send me a copy of the electronic version that I emailed you shortly afterwards. The Executive plans to meet in mid-December and would be glad to include your feedback. In

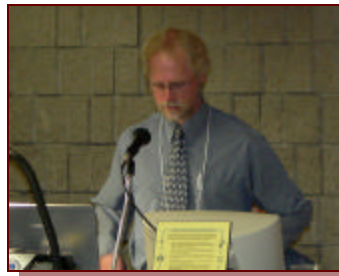
particular, we'd be glad to hear your thoughts on the location/venue, retreat, and possible topics for next year's event.

I'll mention two other items before signing off. First, a motion to establish a Memorial Fund passed by the membership at the 2002 AGM remains to be fully addressed. I hope to be able to bring something to the membership at next year's meeting.

And second, I suggested that our ability to know what is happening with our colleagues around the province could be greatly enhanced were there to be a 'reporter' in each of our province's health regions on whom our editor could call. I know of

one person who offered to serve in this way – could there be more? Contact Marcel to offer your services.

To wrap up, this AGM marks my second and final year as your Chairperson. It has been a privilege to serve you in this capacity. I am grateful for the generosity of spirit that has attended my learning and working. Nicole Imgrund will be taking over as Chair sometime in early January. I look forward to working with her and the other Executive members, both new and continuing.



The Katrina Experience! *Marj Pettinger*

I feel truly blessed to have had the opportunity to spend three weeks assisting victims of Hurricane Katrina. I know those of you who were aware I had gone, held me in your thoughts and prayers. Thank you. There

was, indeed, strength garnered through the energy you sent as I ventured off into unknown territory.

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ARCAPPE Association Days 2005

A Student Perspective *Al Kimmik, CPE Student*

The five chaplains in residence from Calgary, had some misgivings as we traveled to Red Deer to attend the ARCAPPE meetings. The reason was simple. We had just completed the first day of a two-day grief seminar which featured Dr. Rob Neimeyer from the University of Memphis. He was an outstanding speaker with wonderful experience and research on the topic. Would ARCAPPE be a good substitute for the day we would be missing in Calgary?

It didn't take long before the question was answered in the affirmative. The morning speaker, Steve Hill, an accomplished stage and screen actor (on sabbatical for the last 23 years) and currently Director of Mission Integration for the Alberta Catholic Health Corporation, gently, reverently yet powerfully, began his thought provoking, multimedia presentation [entitled "**How shall we serve in a multi-faith world?**"] with Neil Young's song, "When God Made Me".

He shared some of his personal recollections, from his Roman Catholic upbringing in Montreal (only RC's go to heaven) to his experiences with his wife who is of Japanese heritage (life starts at conception, thus miscarriages have grave markers) to his deep involvement with L'Arche (a dying Henri Nouwen asked Steve to spend one of his final days with the renowned author). These kinds of things have led to his strong desire to serve Christ sensitively in a multi-faith world. His mandate is to engage the soul deeply in a community of compassionate care.

To get the audience thinking globally, we were invited to suggest some dangers we see in the workplace and the world. Apathy, terrorism, greed, fear, wealth, disease, busyness, lack of resources, too many resources, intolerance, too much tolerance and globalization were some of the responses. We were also asked to think futuristically and predict what will have the biggest impact on the world in the next 100 years. How we share, how we treat the least fortunate, technology, alternative energy were some of our ideas. Steve presented

Cardinal Francis George's statement as worthy of consideration - "The dialogue between Islam and Christianity".

Canadian statistics were presented to illustrate our changing religious demographics: in 1901 Christians accounted for 99% of the various religious traditions. In 2001 it has declined to 72%. Many other religious groups have seen rapid growth during those same years: Muslims +128%, Hindus +89%, Sikhs +89%, Buddhists +84%; no religion from 0.9% to 16% (1600% increase!!!)

With the stage set, many concepts, ideas and illustrations were presented, including definitions of terms, spirituality, ecumenicalism, multi-faith and inter-faith.

- medical research (eg. Benson, Harvard Medical School) supports the idea that spiritual practices can be medically beneficial.
- sense of "belonging" is a gold mine for us in Spiritual

(Continued on page 5)



Calgary CPE Residents
 Top left clockwise: Al Kimmick, Steve Hill (Presenter),
 Brenda Hammond, Sue Hill, Heather Dobrow,
 Monica Killburn-Smith



Congratulations Darlene & Janet!!



To **Janet Greidanus** and **Darlene Pranke** both Pastoral Care Specialists, who just graduated with their Doctorate of Ministry degrees from St. Stephen's College this fall.

Convocation was held October 17th, 2005!

Darlene is a chaplain at the Misericordia Hospital in Edmonton.

Janet provides pastoral care & counseling to students at the King's University College in Edmonton.

Janet & Darlene's PhD dissertation abstracts can be found on pages 4 & 5.



A Tribute With Thanksgiving Ray Suetter

As I write this I feel a depth of sadness that is hard to put into words and it certainly reminds me about how much work the grief process really is. Tears flow very easily and I sometimes wonder how long will it be before I stop feeling this deep, aching pain.

Kristi was always a very special daughter to Marilyn and I in that she was diagnosed at age four with a brain tumor. At that time we did not know how much longer she would live and I recall the doctors talking about a "five year window". However, the trauma of this experience has been both a profoundly painful stressor but also a profound blessing. The painful part was to learn to adapt to the reality that Kristi's life would be forever changed and so would ours. It was extremely hard to accept that the tumor would handicap her and keep her from fulfilling dreams she would have for her life. However, every shadow reminds us that there is also some sun.

Her diagnosis helped us as parents to change our priorities. We both learned how precious and short life really is and to keep the time we had with our children as special. Consequently, we traveled and took trips and did things with the kids that we might have otherwise put off "until we could afford it". This may well have meant that we would have missed vital connection times with them. Work and studies more easily took second place to be with the kids. Attending soccer games, gymnastic and violin recitals, being at parent-teacher interviews and sitting for hours at

baseball games, listening to fumbled attempts on the piano as they struggled to learn to play, all took on special meaning.

I did not just assume that the kids would always be there. I have never had a sense of entitlement that my kids deserve

this or that experience. Both my wife and I have learned to value and genuinely appreciate each of our kids for the unique person that they were. We certainly learned to see the unique person Kristi was. She herself, through many hospitalizations, learned to be a very caring person who was not afraid of hospitals or of being nurturing, kind and gentle with someone who was suffering or disadvantaged in some way.

I am thankful to God for the many happy memories AND for the many painful moments of uncertainty, because through it all Marilyn and I have learned how precious life and children are in helping to make us more fully human. I believe now, that it is IN the shadows that we have learned to wrestle with our faith in ways that make life seem so much more interesting and worthwhile. The reality of God's presence in the middle of this experience has given me an on going sense of hope that is difficult to understand. This whole grief experience also reminds me of how important relationships are. We are thankful to so many who have showered us with their love and care. While we

each have to go through a grief process in our own way, it does help to know that others stand with us.

We wish to extend our sincere condolences to Ray & Marilyn Suetter and their families with their recent loss of their daughter, Kristi Rae.

SEUTTER-BAKER, Kristi Rae On Sunday, July 24, 2005 Mrs. Kristi Rae Suetter-Baker passed away suddenly at the age of 31 years. She is lovingly remembered by her husband Stuart, her parents Dr. Ray and Marilyn Suetter, sister Jaimi Suetter-Cox and husband Brent and their two boys Nolan and Aivan, one brother David as well as two grandmothers Lily Suetter, Grace Lang and numerous aunts, uncles and cousins. In spite of health challenges Kristi Rae chose to live as fully as possible each day that God gave her. Kristi's Funeral Service was held on Friday, July 29, 2005 at McKernan Baptist Church in Edmonton.



Dissertation Abstract

A Narrative Inquiry into the Experiences of Bereaved Children

Janet Greidanus



In my work with bereaved children, I witnessed that children grieve and mourn far more profoundly than most adults acknowledge and more than much of the existing literature suggests. Many agree that children who have experienced the death of a loved one are more at risk for psychological, spiritual, physical, and behavioural difficulties than those who have not experienced such a loss. However, children are often not encouraged to mourn nor provided with alternative ways to mourn when they are unable to do so verbally. In our society children are often “forgotten mourners” (Wolfelt, 1996, p. ix). Grieving children need our care and concern.

In much of the literature children have been put into age groupings with the group’s expected understandings and responses to death. The uniqueness of each individual’s loss experience seems to have been overlooked. I also discovered that, with few exceptions, many researchers have neglected to invite bereaved children themselves to tell about their experiences of loss, grief, and mourning. In many studies parents have

been asked to report about their bereaved children.

How do children grieve? How should we respond to their grief? How can we help children mourn? This study strives to deepen the understanding of a child’s experience of loss, grief, and mourning, and to validate children’s need and right to mourn. This study both critiques and contributes to the existing literature.

The underlying research question in this study was: *What are the storied experiences of children who are bereaved?* Narrative inquiry was the research methodology used because “narrative inquiry is a way of understanding experience” (Clandinin & Connelly, 2000, p. 20). Proponents of narrative inquiry believe that this method captures personal and human dimensions that cannot be quantified into dry facts and numerical data. Narrative inquiry does not consider *the universal case* to be of prime interest, but rather *the person* in context is of prime importance. Data gathering began immediately or within a few weeks after the death and children were invited to give input about their own grief.

Following several chapters constructing a theological and theoretical framework for the study, one will read the stories of many children whose experiences of loss, grief, and mourning were storied on the landscape of an expressive arts grief support group over a period of eight

or, in a few cases, sixteen weeks. These are followed by three longer narratives of three children whose experiences of grief and mourning were followed over a period of from one to three and a half years. Anna-Marie was five years old when her father died from malignant melanoma. Logan was six years old when his father died from a brain tumour. Andrew was five years old when he experienced the death of his best friend. We learn much from these children as they story their experiences of bereavement.

The findings of this study, among other things, challenge the dominant 20th century model of grief currently used by many, that bereaved individuals need to let go of their ties with the deceased, need to reach “closure” and move on. They concur with the findings of some other studies and both their narratives and their art work exemplify that bereaved children make much effort to maintain a connection to the deceased. This study makes a strong case for a post modern perspective of grief that values and encourages continuing bonds with the deceased.

This dissertation can be used as a helpful resource for both parents and professionals and can inform and guide more effective ministry and pastoral care with bereaved children.



Leadership at the Margins
41st Annual CAPPE National Conference
February 15-18, 2006
York the Hotel
Winnipeg, Manitoba

For more information visit the national CAPPE/ACPEP website at www.cappe.org

ARCAPPE Association Day 2005 Photos *Red Deer, Alberta*

Wishing you were there!!



A Student Perspective cont...

(Continued from page 2)

Care Services.—interfaith means conflict for some people, but consider...

- the Dali Lama's hope for a Christian who has a multi-faith experience, is that s/he becomes a better Christian.
- Steve illustrated some of the items from his "**Best Multi-faith Practices Toolkit**", all of which have been used with success. The finale included an example of how humour can be used in a slide show. We then gathered for a solemn, respectful closing circle prayer.

Interestingly, we returned to Calgary better equipped for holding our region's Spiritual Care Awareness Week which was to start the following week.

ARCAPPE Association Day 2005 Photos cont...



Dissertation Abstract

**Ambiguous Journeys:
Blessings and Woundings in the Phenomenology of Suicide**

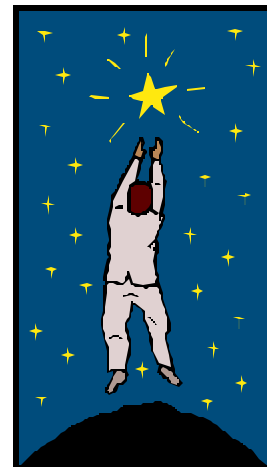
Darlene Pranke

My P.D. is based on the story of Jacob Wrestling with God found in Genesis 32:22-31, where Jacob receives a wound in his thigh during an all night wrestling match with a Divine Being. Jacob is left to limp from that day on; his life, however, is spared. During this wrestling match, Jacob also receives a blessing which comes in the form of a new name, signifying a transformation process he undergoes as he comes to terms with his shady past and rights some of his earlier misdeeds. This story brings us to ponder what it means to live with both a wound and a blessing at the same time. Is it perhaps a misdirected and misleading goal to overcome our wounding? Could a goal for caregivers to the bereaved perhaps be not to encourage overcoming and healing as in the healing stories of the Christian Scriptures, but rather, facilitating the journey to learn what it means to live with both wounding and blessing? In this phe-

nomenological study, I also conducted a series of interviews with four participants who had lost a family member to suicide. I explore in their stories, the theme of what it is like to live with "both," wounding and blessing, the going forward in hope with purpose, direction and some joy, while at the same time, feeling the woundings of their tragic loss.

In my study, I also investigate the topic of suicide from various disciplines which have tended to narrow down and box in suicide as morally wrong and call forth a sense of compassion towards suicide, rather than condemnation. I again use the framework of Jacob wrestling with God, a story that invites us to investigate paradox, ambiguity and complexity. As the Divine seems to have no hesitation in using Jacob's shadow qualities (Jacob's use of trickery to gain the birthright that belonged to his brother, Esau) to fulfill the purpose for the He-

brew people, the reader is called to ponder and hold a moral ambiguity that is introduced into this Biblical narrative. In this narrative, the Divine works in ways that we are not accustomed to and that appear to be perhaps unorthodox. As such, I invite the reader and the care giving community to hold the mystery and complexity of suicide without judgment, but with a compassion that knows there is no satisfactory answer and that the complexity of suicide cannot be unraveled by any one discipline.



Outside of Ordinary: Women's Travel Stories

Janet Greidanus



Outside of Ordinary: Women's Travel Stories

Edited by Lynn Cecil and Catherine Bancroft

Female writers share 32 transformative stories of traveling in diverse locations -- some exotic, and some more familiar.

My travel story is about my trek to

Mount Everest Base Camp in 2000

and what I learned (about myself and life) as I faced various fears, discomforts, obstacles...etc. It has been an awesome experience for me to be included in an anthology with so many renowned, award-winning, women writers. There are five of us from Alberta. The book was launched in Toronto on November 2. Five of the contributors read and launched the book at **Pages on Kensington in Calgary** on November 3. On November 9, we did the same in Edmonton at **Laurie Greenwood's Volume 11 Bookstore**. Signing the many copies that

people purchased made me feel momentarily like a celebrity! I have been inspired to do more writing. The next planned project will be the publishing of my D. Min. dissertation in two formats: a book for grieving children and a companion book for adults with guidelines and resources for supporting grieving children.

Contributors include: Sharon Butala, Charlotte Caron, Amy Coupal, Lorna Crozier, **Janet Greidanus**, Jane Eaton Hamilton, Sarahmaya Hamilton, Ellen S. Jaffe, Aprille Janes, Marion Jones, Jeananne Kathol Kirwin, Shelley Leedahl, Alison Lohans, Holly Luning, Jan MacKie, Cheryl Mahaffy, Chris Marin, Christine McKenzie, Larissa L. McWhinney, Elaine K. Miller, Christina Owens, Angele Palmer, Linda Pelton, Alison Pick, Anne Sasso, Amanda Stevens, Gillian Steward, Kathie Sutherland, Carole TenBrink, and Jody Wood.

If you would like a copy of **Outside of Ordinary**, you can contact **Pages on Kensington** on line at www.pages.ab.ca or you can contact Janet Greidanus at jangreidanus@shaw.ca

(*Outside of Ordinary* is presently listed on the *Pages on Kensington's* best sellers list for November.)

ARCAPPE Executive 2005 AGM Report

Regional Professional Practice

Bert Enns, Professional Practice Chair



1. Provincial Professional Practice Leadership:

- Current Provincial PPC Chair: Bert Enns
- Current National PPC Chair: Case Vink
- Active Provincial PPC Committee Members: Philip Behman, Chair of the College Development Project. Philip was appointed at the ARCAPPE AGM 2004 to coordinate the Professional College Development project for two years. He reports to the Professional Practice Committee of ARCAPPE and the ARCAPPE Executive and works together with Rev. Shane Sinclair and Sr. Elizabeth Lynch.

2. Professional College Development

- See report by Philip Behman
- New Budget item for College Development – A request for \$800 is being submitted for the year 2005-2006 to facilitate the work of this committee.

3. Peer Reviews

- During 2005, there have been 6 peer reviews, 5 for specialist and 1 for supervisor. The spirit of cooperation demonstrated during these reviews reflects a depth of both professional expertise and peer reflection. Thanks to each of you who participated in this significant milestone either in your own ministry or with your peers.
- Specialists and Supervisors are reminded that their peer review should take place during the year prior to their review due date.
- If, for any reason, you were not contacted by the National Coordinator for peer reviews and your review is “overdue”, please contact me or the National Coordinator.

4. Ethics

- An updated Ethics module is available through CAPPE resources. Thanks to John Jansen for his leadership in facilitating a one day workshop at Alberta Hospital for five ARCAPPE individuals. Another group met as peers in Edmonton to work through the module. This is a requirement for individuals facing peer reviews as well as an enriching professional opportunity for all ARCAPPE members given the updated modules.

5. National Professional Practice Highlights

- **AWARD OF EXCELLENCE:** We are pleased to present three nominations for the CAPPE award of Excellence on behalf of ARCAPPE. We will be presenting **Neil Elford** for the category of Institutional Practice; **Lorraine Nicely** for the category of Pastoral Counselling and **Hal Paulson** for the category of Education. The National PPC will be receiving

these nominations and will choose one national recipient for each category for the Feb 2006 National meeting. Thanks to all the individuals who contributed to the nomination process and preparations.

- **PEER REVIEW:** Significant work has been done by the National PPC Commission regarding a number of aspects of process ensuring:
 - that accountability issues are being addressed,
 - that reviewees provide a response to each of the standards of Practice,
 - that continuing education is detailed and
 - that certification and previous review recommendations are made available to current review teams.
- **COLLEGE DEVELOPMENT:** PPC developed a national “College Development Coordinator Position” and Roy Ellis (Nova Scotia) has filled that position. Roy is currently working with the various regions in Ontario around the college development issues. This topic will be a significant focus during our Feb. 2006 National meetings. There will be pre-conference sessions for all regional reps as well as others interested in these developments.
- **ARCAPPE CHAIR:** As your provincial rep, I was able to attend the National Conference in Halifax, N.S. in February 2005. This was a wonderful learning experience for me in understanding my role and the scope of the Professional Practice Commission. Due to personal health issues, I was unable to attend the June meeting in Toronto but plan to attend the National Conference in Winnipeg 2006.
- **PROCESS FOR NOT MAINTAINING STANDARDS - NON PAYMENT OF FEES or NO PEER REVIEW:** PPC Commission is dialoguing about possible protocols to deal with these issues in both a professional and compassionate manner.
- **PROFESSIONAL DESIGNATIONS:** A new piece of work for PPC that has come from the National CAPPE Executive relates to professional designations and how our nomenclature relates to scope of practice.

As your Alberta chair and representative on the National Professional Practice Commission, I welcome your feedback and suggestions regarding issues related to our professional practice as chaplains and pastoral counselors. I am impressed with the commitment within ARCAPPE and CAPPE to continue to strengthen our professionalism and thank you for the opportunity to serve you in this capacity.

The Katrina Experience! cont...

(Continued from page 1)

September 10th, 2005 I flew out of Edmonton International with my ultimate destination unknown. What I did know was that I would be flying into Montgomery, Alabama and from there would go wherever the need was. I am a volunteer with the Disaster Response Team with the Canadian Red Cross. Within the Red Cross I am part of the SCERT team. SCERT stands for Spiritual Care Emergency Response Team and is a relatively new arm of the Red Cross.

My journey took me from Edmonton to Burmingham, Alabama where I met up with two other R.C. volunteers also heading for Montgomery. We rented a car and drove to Montgomery, Red Cross headquarters, and everyone received deployment orders from there. When we arrived we were processed to determine what our skills were and where we would be sent. I was assigned to the mental health team and spent the first three days working with the local chapter of the Red Cross right in Montgomery. The effects of Katrina were wide-spread. Hundreds of victims gathered in line outside the Red Cross building waiting to receive assistance. A team of us, as mental health workers mingled with the victims, offering them a listening ear, supplying stuffed toys to the kids and comforting people in whatever way we could. Albeit the circumstances were very different, the work I did there was not so very different from what I do at the Grey Nuns Hospital on a daily basis. As chaplain I listen, comfort and console people in their journey. It was neat being able to put a smile on the face of a child as I handed him/her a teddy bear or a Mickey Mouse. I discovered, not surprisingly, that if you could put a smile on the face of a child you could talk to their parents. Stuffed animals were a great diversion and a great source of comfort. Even some of the adults asked if they could have one for themselves and would hug it close. All of these were donated to the Red Cross by businesses like Walmart and Walt Disney Enterprises.

A team was put together to open a service area in Tylertown, Mississippi and I was deployed there. Tylertown is a relatively small town located about three quarters of an hour drive north of the gulf. We set up operations in "The Events Center" which was a huge arena area. Twenty-one of us went that first day. We arrived on Thursday evening about 8:00 pm

and by noon the next day we were operational. In other words, we were serving Katrina's victims. The events center had been transformed into a Red Cross Service Center with everything from processing stations (where everyone was given a quick course in case work.), nursing station, computer and phone center, missing persons assistance, and bulk supply (outside). Mental health workers were available as needed. Of course, in addition to all those services there were stations set up to trouble shoot almost any problem that might arise. Over the next couple of days other people were deployed to Tylertown and we wound up with a staff of volunteers in excess of seventy people. There were two salaried employees. Our Operations Manager was International Red Cross and overall supervisor was American Red Cross staff.

The local Baptist church graciously opened their doors to us and we slept with cots and sleeping bags in the auditorium of the church. Make-shift showers were set up in a trailer outside the church. Accommodations were really quite sufficient, although nothing like home.

Tylertown was perhaps more fortunate than many places and we set up there because it was central to many of the counties/parishes and accessible to victims from some of the more devastated areas, such as New Orleans, Gulf Port and Biloxi. However, this little town certainly felt the effects of Katrina. Power lines were strewn all over

the place. Many buildings were mere shells while others had the roofs torn off or the siding ripped apart. Billboards were blown down. Trees were uprooted and many houses had trees strewn on roof tops or through the walls. One family said they were living in one room because that was all that was left of their home. Family and friends simply moved in with one another as those from the gulf areas, with no homes, took refuge with friends and relatives. An elderly couple was in tears as they spoke of the stresses, both financially and emotionally, of having their adult children and grandchildren all living with them. A household of two had become a household of twelve overnight and was being stretched beyond its means. The effects of the hurricane

(Continued on page 13)



The devastating effects of Hurricane Katrina in Tylertown

ARCAPPE Executive 2005 Abbreviated AGM Report & Update

Regional Admitting Chair *Meg Jordan, Regional Admitting Chair*

The following is a copy of the Regional Admitting Committee (RAC) report to the AGM, reprinted in the newsletter for those of the ARCAPPE membership who were not able to be at our AGM on October 21, 2005. At the AGM, Meg Jordan and Bonnie Herring-Cooper were acclaimed as co-chairs of the Regional Admitting Committee for 2005-2007. The other hardworking members of the RAC are listed in the text of this report and they continue to serve on this committee.

The work of the Regional Admitting Committee for 2004-2005 included the on-going tasks of facilitating consultations for Advanced and Provisional Supervisor education. During the past year there were no Appendix V reviews. Between the date of the last AGM and early December 2004, Margaret Clark (former co-chairperson) provided leadership in the transition to the new Regional Admitting chairperson, Meg Jordan.

After the dissolution of the previous committee effective at the 2004 AGM, a new RAC committee was formed in January 2005. This new committee includes: John Carr (CPE & PCE), Margaret Clark (CPE), Marcel Leffelaar (CPE), Meg Jordan (CPE) and Bernice Vetter (CPE & PCE).

In the course of our committee meetings we have had fruitful conversations which gave rise to recommendations for needed changes to the CAPPE/ACPEP standards some of which were incorporated into this year's edition and some will be forthcoming in May 2006. We brainstormed the best term(s) to indicate the broader theory bases that our professions of pastoral care and counseling draw upon and integrate with theology. We suggest 'the human sciences,' but continue to discuss what is included in that broader category.

[It seems that it would be important

to speak about the integration of personal spirituality, theology and religious traditions, and the human arts and sciences. The traditional phrase that we use is "integration of psychology and theology." In actual fact, we draw upon theology, religious traditions, personal spirituality, and cultural/subcultural resources, on the one hand, and psychology, anthropology, sociology, biology/neurobiology, systemic theory, even quantum physics, and who knows how many other disciplines, on the other. We need other language to describe the integration about which we are talking. J Carr.]

We invite the membership to join in our brainstorming and contribute your thoughts on this subject. These will be conveyed at the bi-annual meetings of the Education Standards Commission. We are also in the process of drafting a letter to supervisors addressing concerns arising from our review of Advanced report forms.

Regional Consultations: congratulations to the following people who were recommended by our RAC and ratified by the ESC for Advanced Education, Provisional Supervisor Education. or Appendix V, at the February and June 2005 meetings of the ESC.

- **Trevor Ellerby**, Royal Alexandra Hospital (Debbie Everett), August 2004 (Advanced CPE)
- **Rajakumar Vannadil**, Royal Alexandra Hospital (Debbie Everett), August 2004 (Advanced CPE)
- **Bonnie Bucher**, University of Alberta/Stollery Children's Hospitals (Margaret Clark) May 2005 (Advanced CPE)
- **Nathram Jagnanan**, University of Alberta/Stollery Children's Hospitals (Margaret Clark) May 2005 (Advanced CPE)

- **Teresa Kellendonk**, University of Alberta/Stollery Children's Hospitals (Margaret Clark) May 2005 (Advanced CPE)
- **Anne Hemstock**, Foothills Medical Centre, (Rosemary von Keitz) May 2005 (Advanced CPE)
- **Susan Hall**, Foothills Medical Centre, (Rosemary von Keitz) May 2005 (Advanced CPE)
- **Curtis Passmore**, Foothills Medical Centre, (Rosemary von Keitz) May 2005 (Advanced CPE)
- **Meg Jordan**, University of Alberta/Stollery Children's Hospitals, (Margaret Clark), August 2004 (Provisional Teaching Supervisor, CPE)
- **Kim Do Bong** (Do Bong Kim), University of Alberta/Stollery Children's Hospitals, July 2004 (Appendix V, Ready for Specialist).

[Please be aware that there may be people who have been through an Advanced consultation, whose names do not appear above. Those people will be recognized in a future report, when all the steps in the process are completed.]

Many thanks to those Specialists and Supervisors of our region who have agreed to act as consultants and sit on committees for those going through Advanced, Provisional and Appendix V reviews. Your contribution of time, energy and experience is highly valued. And yes, all that is true, and I am buttering you up to ask again!



Working My Way through the CAPPE/ACPEP Education and Specialist Certification Process (CPE)

Academic Requirements	CPE/Clinical Requirements	CAPPE/ACPEP Handbook	Time Frame			
			Academic	CPE		
			& What time frame is realistic for me?			
			Degree?	Time Estimates		
Preferred: Evidence of graduation at the bachelor's degree level from a duly recognized college or university	Basic Unit #1	201.0 & following	Yes <input type="checkbox"/>	Basic 1 Yes <input type="checkbox"/>	3 months full time 8 months part time	Plus needed academic courses
	Basic Unit #2 ↓		No <input type="checkbox"/>	Basic 2 Yes <input type="checkbox"/> No <input type="checkbox"/>	3 months full time 8 months part time	Plus needed academic courses
Evidence of graduation at the bachelor's degree level from a duly recognized college or university, & Evidence of completion of the first year of a theological degree at the master's level	Advanced Review Process	202.0 & following	1 st year of theology degree? Yes <input type="checkbox"/>	Advanced 1 Yes <input type="checkbox"/> No <input type="checkbox"/>	3 months full time 8 months part time	Plus needed academic courses
	Advanced Unit #1 ↓ Advanced Unit #2 <i>Note: Additional Basic and/or Advanced Units may be needed</i> ↓		Yes <input type="checkbox"/> No <input type="checkbox"/>	Advanced 2 Yes <input type="checkbox"/> No <input type="checkbox"/>	3 months full time 8 months part time	Plus needed academic courses
Evidence of a qualifying graduate degree (i.e. Master's) in theology or a clinical related field, from an accredited educational institution. Note: This graduate degree shall include or be supplemented by one year (or equivalent) of graduate studies in foundational courses in the major theological/religious education disciplines and the academic foundations for spiritual and religious care.	Accumulation of 2,000 hours as a post-advanced practitioner Preparation for Specialist review (consultation and papers)	203.0 & following	Graduate degree? Yes <input type="checkbox"/>	Hours accumulated ----- [number?]	Equivalency of one full-time year	Plus needed academic courses
	Specialist Review Process – including the following Steps ↓ Step One: Formal Requirements Step Two: Papers Reviewed Step Three: Collegial Interview		Yes <input type="checkbox"/> No <input type="checkbox"/>	Added year of theology [if needed] Yes <input type="checkbox"/> No <input type="checkbox"/>	Expect from 4 – 6 months time for completion of Step One through Step Three	
NAME:			My Estimated Time Line for Certification in Pastoral Care			
START (year):			Year 1	Year 2	Year 3	Year 4
COMPLETION (year):						Year 5

Working My Way through the CAPPE/ACPEP Education and Specialist Certification Process (PCE)

Academic Requirements	PCE/Clinical Requirements	CAPPE/ACPEP Handbook	Time Frame			
			What do I start with? ✓ & What time frame is realistic for me?			
			Academic	Time Estimates		
Preferred: Evidence of graduation at the bachelor's degree level from a duly recognized college or university	Basic Unit #1	201.0 & following	Basic 1 Yes <input type="checkbox"/> No <input type="checkbox"/>	10 months part	Plus needed academic courses	
	Basic Unit #2		Basic 2 Yes <input type="checkbox"/> No <input type="checkbox"/>			10 months part time
Evidence of graduation at the bachelor's degree level from a duly recognized college or university, & Evidence of completion of the first year of a theological degree at the master's level	↓	202.1 & following	Advanced 1 Yes <input type="checkbox"/> No <input type="checkbox"/>	5 months full-time 10 months part time	Plus needed academic courses	
	↓		Advanced 2 Yes <input type="checkbox"/> No <input type="checkbox"/>	5 months full-time 10 months part time	Plus needed academic courses	
	↓		Graduate degree? Yes <input type="checkbox"/> No <input type="checkbox"/>	Graduate degree? Yes <input type="checkbox"/> No <input type="checkbox"/>	Hours accumulated ----- [number?]	Plus needed academic courses
	↓		Accumulation of 250 hours in addition to 1 st 2 Advanced Units Preparation for Specialist review (consultation and papers)	Added year of theology [if needed] Yes <input type="checkbox"/> No <input type="checkbox"/>	Expect from 4 – 6 months time for completion of Step One through Step Three	
Evidence of a qualifying graduate degree (i.e. Master's) in theology or a clinical related field, from an accredited educational institution. Note: This graduate degree shall include or be supplemented by one year (or equivalent) of graduate studies in foundational courses in the major theological/religious education disciplines and the academic foundations for spiritual and religious care.	↓	204.0 & following	Specialist Review Process – including the following Steps			
	↓		Step One: Formal Requirements			
	↓		Step Two: Papers Reviewed Step Three: Collegial Interview			
			My Estimated Time Line for Certification in Pastoral Care			
			Year 1	Year 2	Year 3	
			Year 4	Year 5		
NAME:						
START (year):						
COMPLETION (year):						

ARCAPPE Executive 2005 AGM Report

Regional Ethics Committee *John Jansen, Ethics Chair*



This is my last report as the regional ethics chair. My term as chair is up at this AGM. Although I was originally reluctant to accept this position, I found that I gradually grew into the role and have been enriched by my involvement in it.

I remain very pleased that I have not been contacted by ARCAPPE members to investigate any allegations of violations under CAPPE's Code of Ethics in the Alberta Region. This suggests that you are all seeking to conduct yourself ethically in keeping with the profession of pastoral care workers. I applaud you all for that and encourage you to keep up the good work.

As you are aware, CAPPE requires all certified members who are up for a peer review, to attend a workshop on Professional Ethics. Last year, I offered to provide such a workshop both in Edmonton and Calgary. I conducted a workshop in Edmonton on September 23 at Alberta Hospital Edmonton. (I thank Barbara Meyer for providing the facilities for the workshop). Five ARCAPPE members attended. There were a number of people who contacted me to say they wanted to attend but were not able because of

scheduling or other conflicts. I am prepared to offer the workshop again. I am still waiting for an ARCAPPE member in Calgary to step forward and work with me to arrange a similar workshop in Calgary.

It is important to attend such a workshop not primarily because of peer review requirements but because we need to be in constant dialogue about the ethics of our profession. In a workshop we have the opportunity to engage one another about what constitutes good pastoral care work, about the ethical principles that under gird our work and what some of the pitfalls of our work are. If we stay isolated from one another, we can easily lose perspective and develop our own private kingdom with no accountability with other members of the organization. So I encourage you all, regardless of whether you have a peer review coming up, to attend a workshop on Professional Ethics.

The NEC has been active nationally. There are always investigations in process with various people involved in these processes. Some of the issues can be very challenging, others are clear-cut, while most fall somewhere in between in the grey areas of life. But more to the point, the NEC has been instrumental in working with our USA counter parts to develop a common code of ethics. This code

has been accepted by CAPPE at its last annual meeting in Halifax and is now the operative code of Ethics. All supervisors are encouraged to present this code to their students and all ARCAPPE members are encouraged to acquaint themselves with this code. (Attending an ARCAPPE workshop on professional Ethics is a good opportunity not only to become intimately acquainted with this code but also to discuss its strengths and weaknesses with other ARCAPPE members).

While CAPPE has adopted a new code of ethics, we are still working under the old procedures for complaints lodged against the code of ethics. The NEC is working on developing new procedures that are in harmony with the common code of ethics. These procedures will come down sometime in the future.

A major concern in CAPPE has been the length of time it takes NEC to begin and complete investigations. NEC is considering to appoint a committee of CAPPE whose task it will be to respond promptly to allegations of violations under the common code. Terms of references for such a committee are being drafted as the entire idea is under consideration. Some input from ARCAPPE members is appreciated.

The Katrina Experience! Cont...

(Continued from page 9)

were far outreaching.

I heard many stories. I cried with people, I laughed with them and I prayed with them. I handed a Mickey Mouse to a little boy of about two. He grabbed it with glee and started to dance and sing. I asked his mom if I could take his picture and she said I could. That was a special moment for me. I was bringing a

small measure of happiness to a child.

A young single mom had come for assistance and then asked if she could volunteer. For the next couple of days she gave back to others because she had received assistance and was so grateful.

Our Tylertown Operations Manager, (International Red Cross) approached me the first Saturday of our operations. He knew I was a chaplain and asked me

if I would consider putting together an Ecumenical Worship Service for Red Cross staff (volunteers) on Sunday morning. This, too, is something we do on a regular basis at the Grey Nuns Hospital. Recognizing spirituality is a huge step for the Red Cross and it was an honor for me, both to be asked, and then to offer a service each Sunday morning.

(Continued on page 16)

Giving Bad News: Practical Advice for End of Life Situations

This video portrays two dramatic healthcare professional/patient meetings where grave news is given. The first situation involves a family physician meeting with a long-time patient – the second involves a meeting between the health care team and the family of a dying person. After each meeting an expert panel discusses how these meetings went and what can be learned from them. And for workshop presenters the video is divided into sections to facilitate its use in workshops.

The expert panel discusses what the healthcare professionals say to their patients and also consider issues such as:

- what emotional perspective the doctor carries into the room,
- what the patient's needs are and what the response might be
- what the family's needs might be and how to address those needs
- how to organise the meeting, and
- how to follow up

HOST: Russ Froese is a veteran television news anchor with an extensive background in international journalism and documentary production.

The Expert Panel includes:

David Kuhl, MD, PhD

Dr. Kuhl has been involved in providing care for persons at the end of life for many years and has recently published a book -"What Dying People Want"- presenting his research into the topic of death and dying. He is working to enhance communication skills, and decision-making processes involving patients, families and care providers.

Paddy Rodney, RN, MSN, PhD

Dr Rodney is a nurse ethicist who is an Associate Professor at the University of Victoria School of Nursing and who is affiliated with Providence Health Care Ethics Services as well as the W. Maurice Young Centre for Applied Ethics at UBC. Paddy has a particular interest in end of life issues and the moral climate of health care delivery.

Harvey Bosma , MSW

Harvey is a clinical social worker who works on a 12 bed Palliative Care Unit at St. Paul's Hospital, an inner city hospital in Vancouver. Harvey works with an interdisciplinary team that provides palliative care to a diverse population dealing with a wide range of terminal illnesses.

Culleen Bryant, M.Div., D.Min.

Culleen is a pastoral care worker and teaching chaplain who practices at Providence Health Care in Vancouver.

Bashir Jiwani, MA

Bashir is a clinical ethicist with Providence Health Care and a Special Projects Consultant with the Provincial Health Ethics Network of Alberta.

Giving Bad News is available in two versions:

- A shortened 46 minute version dealing with the one-to-one doctor/patient meeting only available on VHS video – \$120.00 CND.
- A full version – one hour and 50 minutes – dealing both with the one-to-one doctor/patient meeting and the family/health care team meeting available in VHS video or DVD – \$180.00 CND.
- All prices include shipping and handling. For Canadian orders add 7% GST, except NF, NS and NB add 15% HST. For B.C. residents add 7% PST.
- For more information, or to order, call 604-806-8170; fax 604-806-8474; or e-mail dni-colle@providencehealth.bc.ca; mail to Media Services, Room 1400, St. Paul's Hospital, 1081 Burrard Street, Vancouver, BC, Canada V6Z 1Y6

The Journal of Pastoral Care Publications Annual Report *John Carr, President*

It has been my privilege to serve on the JPCP Inc. Board since Fall 2001, the last three years as President of the Board. In that capacity, I join with colleagues from NAJC, APC, ACPE, CPSP, and NIBIC to oversee the work of publishing and distributing **The Journal of Pastoral Care & Counseling** and several monographs and books in our field – as well as the distribution of **The Journal of Supervision & Training in Ministry**. The actual work of JPCP Inc. is carried out by salaried staff: Orlo Strunk (Managing Editor) and Janet Emerson (Associate Business Manager). We contract with ACPE for its Executive Director, Teresa Snorton, to oversee the business end of our work (in the role of Business Manager). All staff are part-time. Some services are contracted out (audit, accounting, printing, some mailing, etc.).

JPCP Inc. has been in a state of constant financial crisis since I became President in January 2003 – as a result of the withdrawal of AAPC from sponsorship. We finally were able to achieve a balanced Budget for 2005 and it looks as if our budget predictions were reasonably accurate – although we will not know for certain until the financial year has come to an end and the audit is complete. This level of stability has been achieved by changes in the paper and ink used for **JPC&C** and in the publishing schedule for the latter, as well as increases in the assessment fee to the sponsoring associations. The latter decision was painful both for the Board and the Associations, and we appreciate the support that the associations have provided for our work.

Unfortunately, the 3 years required to regain stability have seen the erosion of our small surplus and the shelving of several projects designed to continue the improvement of the quality of our products. I hope that we will soon be able to make some progress in the direction of increased electronic publication and publication of **JPC&C** in French and Spanish, revision/updating of some of our books and monographs, and publication of new books and monographs.

One of the benefits of CAPPE/ACPEP participation in the sponsorship of JPCP Inc. is that CAPPE/ACPEP members receive **JPC&C**.

In my (obviously biased) opinion, we have continued to maintain a high standard of articles in **JPC&C**. We have received a large number of critical letters in response to one of the articles in the most recent issue from members of the USA associations. I have not received any from our CAPPE/ACPEP members. We discussed editorial policy related to the feedback concerning this article at our Annual Meeting in Decatur on November 10-11 and made some changes in the editorial policy that we hope is responsive to the feedback we have re-

ceived. Decisions concerning the articles that are accepted for publication will continue to be made by the Managing Editor based on the recommendations of the members of the Editorial Committee who have reviewed the articles submitted decisions that will be guided by the new policies that are in place.

Two Albertans, Jean Waters and Neil Elford, serve on the Editorial Committee of **JPC&C**. The Managing Editor is looking for persons interested in doing this work (which involves reviewing and assessing 4-8 manuscripts yearly). Anyone interested in participating in this way can send me a copy of their CV, which I will pass on to Orlo – who tries to maintain a balance of interest, expertise, etc. on the Editorial Committee.

At its June 2005 meeting, the Society for Pastoral Theology (SPT) concluded the negotiation process in which it has been involved with JPCP Inc. – the result of which is that JPCP Inc. has taken on responsibility for publishing and distributing SPT's journal – **The Journal of Pastoral Theology**.

A year ago, I was elected President for a 2-year term. If CAPPE/ACPEP appoints a new representative to the Board of Managers, I will continue on the Board in an at-large position for the balance of my term as President. (There are two at-large positions available to allow for continuity or specialized qualifications.) I am happy to be involved in whatever way this happens because I have a longstanding and strong commitment to the work of JPCP Inc., and have benefitted from that work in my own ministry over the years.

Please feel free to contact me if you have any questions or suggestions. (phone: 780-554-7678; email: pthyanded@shaw.ca)



ALBERTA REGION OF
CAPPE/ACPEP

Please send any news items or articles you would like to have included in the next newsletter to the newsletter editor:

Marcel Leffelaar
Phone: 403-943-2906
Fax: 403-228-5938
Email: marcel.leffelaar@calgaryhealthregion.ca

*On-Line section of the
ARCAPPE Newsletter
available as download on the Web*



Your 2006 ARCAPPE Executive

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The Katrina Experience! Cont...

(Continued from page 13)

Five of us went to Gulf Port and I gained profound insight into what people meant when they said, "I have nothing left but faith." There is a reality that touches the heart in seeing the devastation up close and personal. And then to be with the people whose lives have been so ravaged gives a new perspective to life.

I returned home October 1st, 2005, exhausted but with a feeling of having been part of something much bigger than my usual world. Thanksgiving Day this year took on a deeper meaning. We have much to be thankful for.

As we move into the Christmas season may this be a year in which we take time to reflect on the true meaning of Christmas. Let us rejoice as we celebrate the birth of Christ, spend precious time with family and friends, and give thanks for the many blessings bestowed upon us.

I am reminded that we are part of a larger family which extends beyond our immediate families. We are part of many families. We are part of the family of God and we are part of the family we call CARITAS. In the spirit of giving, which is part of our tradition at Christmas, may we give to others out of our abundance. May we rejoice in that giving, knowing that "it is in giving that we receive." God Bless you all!



NEWS BULLETIN!!

It has just been reported by Revelations Book Co-operative in Edmonton, Alberta that two books have been discovered to be missing from the box of books that they provided to our association for sale at the ARCAPPE annual meeting in Red Deer, Alberta.

The names of these two internationally known books have been released in order to aid in their speedy recovery. They are "Understanding Islam" and "A Hundred and One Questions on Confucianism."

If you have any information about the whereabouts of these two lost books, please notify your association's detective, Ruth Stevenson, at 780-407-3287 or at ruthstevenson@cha.ab.ca

Thanks in advance for helping to solve the mystery of the missing multi-faith missives. There is a reward!!

