



# InterACT

The Newsletter of the Association of Christian Therapists: Healing with the Heart of Jesus

## DATEBOOK...

### ACT Regional Conferences

#### Region 43

Feb. 28-Mar. 1, 2008  
Lake San Marcos, CA  
Contact: Nancy Morgan  
sdact@cox.net

#### Region 10

Apr. 24-27, 2008  
Mt. Carmel Spiritual Life Center, Niagara Falls, ON.  
Contact: K. Kulik  
519-894-1519

### ACT Regional Retreats

#### ACT Northeast

March 14, 15, 16, 2008  
Espousal Center  
Waltham, MA  
With Fr. Robert Faricy and Cheryl Nguyen  
Contacts: Pat Hurd,  
phurd1503@aol.com,  
603-882-1503 or Jackie Sitte,  
jmsitte@verizon.net,  
781-341-6179

#### Region 12

May 30-June 1, 2008  
With Fr. Jack McGinnis  
Benedictine Abbey  
Benet Lake, WI. Contact:  
bjcar60@sbcglobal.net  
or 773-493-4867

#### Southern California

July 18-20, 2008  
Benedictine Prince of Peace Abbey, Oceanside, CA.  
Contact Nancy Morgan  
sdact@cox.net



## Ministering to Mental Health Patients: A Christian Counseling Psychotherapeutic Approach

Cheryl Marsh, APRN, BC

(Excerpt from speech delivered at ACT International Conference '07)

In the midst of the turmoil of placing a young woman in four-point restraints, I heard the directive. It came calmly, with authority and a sense of urgency. "Pray a Prayer of Protection!" I responded silently, "Lord, protect me, the patient and the staff." This directive, intruding into a normal day at an inpatient psychiatric unit, was an invitation to actively integrate my Christian faith with my professional practice.

The dynamic interplay of faith and a professional practice in a secular workplace is an ongoing process, a journey of learning and letting go. It is about planting seeds and searching for fruit.

My cultural, faith and professional formation were rather ordinary. I accepted as natural the mind-body dichotomy, the division between temporal and spiritual matters and the separation of church and

state. Professional nursing care and spiritual care were separate entities. Prayer had no place in the clinical setting.

I learned of alternative practices such as humor, positive attitude and visual imagery, but I soon realized that they were not universally effective. Then a classmate introduced me to the work of Francis MacNutt on healing prayer. His book gave me hope, insight and direction. Seeds were planted, but it would be years before they bore fruit.

I incorporated certain alternative methods into my professional practice, while still maintaining a clear separation of spirituality from my practice. That is, until I heard that directive to pray a prayer of protection. Let me return to that moment.

The patient, a young mother I will call Mary, was admitted in a psychotic, agitated

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## PRESIDENT'S LETTER

Forrest Stewart Yanke, LCSW, PhD



Our ACT International Conference, October '07, "Christian Healing and Mental Health," was full of surprises. Many exclaimed it was the best ever! Thank you, Little Rock Conference chairpersons Dr. Mike White and Dr. Ken Fung, for outstanding work. Both "Healers with the Heart of Jesus," you also have discerning hearts.

When I think of surprises, I think of how the Holy Spirit orchestrates everything so that all the pieces fit together. A chorus of many voices becomes one beautiful sound. Remarkable speakers filled the roster. Fr. Bob Sears, S.J., shared an abundance of knowledge on Christianity and mental health in his inspiring talk. We experienced not only his brilliance, but his humor. With Dr. Carlos Muira, we were led into a psychiatric discussion that included the joy of laughter, and Cheryl Marsh, nurse practitioner, asked us to look at ethics. Through Heather Stewart, social worker, we were challenged to love clients who do not affirm us and to further surrender ourselves to the Will of the Father.

Rev. Russ Parker led us lovingly and dynamically into healing our wounded communities through prayer and forgiveness. It was amazing to me that from this superb talk, not only were hotel staff brought into the healing service on Saturday evening, and prayed for, but the wounded history of that community and of that hotel were addressed by several ACT members. We ended with Austin Joyce's rousing talk, leaving us with much to reflect on in areas of Evangelization and Ecumenism.

Thanks to workshop, specialty group and regional coordinators for thoughtful, heartfelt and relevant presentations. I was impressed by the level of participation, enthusiasm and intimacy that seemed to be the spirit of this conference. There was a peacefulness and good will toward all. Praise God!

## PAST PRESIDENT'S SALUTE

Gaylene Baier, RN



When asked what she remembered most about her presidency Gaylene Baier remarked that she "spent most of her time on her knees." Challenging decisions came before the Board during Gaylene's years as President and she met them, as she always does, with a heart of prayer. Add to that gifts of organization, dedication, humor and humility and you have a snapshot of a gentle giant. Always interested in healing and wholeness, Gaylene felt called to be a psychiatric nurse after having raised her family. She still marvels that she was paid for doing what she loved to do. She followed nursing with certification in Spiritual Direction and works at the parish level with interfaith clients. In ACT she has served as Region 9 Coordinator, Region 16 Co-coordinator, been a leader in Word Gift, and the Spiritual Life Committee, and of course served as President. Currently she is on the editorial board of InterACT, and still contributes as a writer. Gaylene is grateful for her life of many blessings. ACT, in turn, has been the beneficiary of her many skills, talents, gifts in the Holy Spirit, and loving personality. Her first conference with ACT was Mexico and she says it's been a love affair ever since. Likewise, Gaylene!

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## INTERACT

**Submissions for InterACT:** InterACT welcomes articles, poems and photos for consideration. All submissions subject to editing.

**SUBMISSION DEADLINE:** April 1, 2008 (Spring Issue) [storysunday@optonline.net](mailto:storysunday@optonline.net) (Editor's desk)  
Mention ACT in the subject line.

**Theme:** *MARY: "Be It Done to Me According to Thy Word"* Lk.1:38 Surrendering our lives to God's Plan

**Reminder:** Please pay your 08 dues to avoid a lapse in your InterACT subscription!

## EDITOR'S NOTE...

Gloria Doino, MA

From start to finish, the 2007 IC was a hit! As always, there was that deep bond of loving friendship among members. Nothing quite like it. "Love of God appears to motivate love of one another."



Enjoy InterACT's sharing of the Conference bread. We think you will see ACT at its best in Cheryl Marsh's inspiring article *Ministering to Mental Health Patients*; then ponder Mike White's post-conference reflections *Setting the Captives Free*; look to the future with Doug Schoeninger as he updates us on *Growing the Gift of Leadership* and relish the joy of being together through photographs, thanks to Joe Duddie.

"Nuff said." Except to remind you that the media specialists have captured it all. Place your orders, ACT. This is one to remember!

# SCRIPTURE

## A REPRESENTATIVE STORY

Thomas H. Hicks, PhD

She was beautiful. There's no doubt about that – the Bible explicitly says so (Gen. 24:16). I picture her with waist-length pale brown hair and soft Mediterranean skin; I imagine a subtle downturn of her lips. She was a girl poised at womanhood, a flowing picture of feminine grace, when, in the magical light of a later afternoon on the verge of evening, she approached the well where Abraham's servant and his ten camels waited.

### Rebecca

I am speaking of Rebecca, wife of Isaac, mother of Jacob and Esau. The story of her wooing is contained in Chapter 24 of Genesis – one of the longest and most artistic compositions in the Bible.

The charming story describes Rebecca as having the ideals sought in a wife: beautiful, good, and a virgin, “undefiled.” She becomes Isaac's wife, comforting him after the death of his mother, Sarah. We are told that “Isaac loved her” (24:67), and can imagine the early days with Isaac as happy days for Rebecca, as she sensed how necessary to her older husband's happiness she was.

However, things worked loose and became so different from the way she thought they would be. For twenty years Rebecca is barren. She conceives as an answer to Isaac's prayers, but the pregnancy (with twins) is difficult and Rebecca wonders if it is worth all the suffering (25:22). Then her babies are swallowed by the defective young men they become: Esau, indolent and coarse; Jacob, sly and treacherous. Discord comes with these sons. Esau's marriages to foreign wives “made life bitter” for his parents. Rebecca says that she is “disgusted with living” (26:35; 27:46).

### Dysfunctional Family

**The family becomes what we might call today a dysfunctional family, marred by conflict and domestic intrigue.**

Rebecca is the one who conceives the plot by which Jacob deceives his father and betrays his brother by stealing the firstborn's blessing. The effects of the deceit are shattering. Isaac trembles with shock and grief; Esau's anguished cry is haunting (“Bless me, even me also, O my father!” [27:34]). What sort of woman sets up her husband and son in this way?

What kind of woman defeats the dearest wishes of an old and blind man who had been her husband for forty years? Her sons will eventually embrace and make peace, but not for about twenty years to come, and not until they are far from Rebecca's tent.

The entire story involves a Divine decision to select one person rather than another to carry on God's Promise to Abraham. God's choice of Jacob, that mean, false, detestable man, seems remarkable. Jacob, the father of the twelve tribes of Israel, has little to commend him. Yet God chooses him. Even God has His baffling preferences (cf. Rom. 9:13-15).

**I think the story of Rebecca and her family is a representative story. Its crises are familiar. How many parents discover how much their children can hurt them, raise bitter storms, and be a source of heartache? In how many families do jealousies, concealed antagonisms, silent battles go on? Like Isaac and Rebecca, how many parents are working out some problems of their own?**

### Last Days

As for Rebecca, that generous girl who once bloomed and glowed at the well in the mellow evening light, and later could turn brother murderously against brother and trick the old man her husband had become, we can only wonder what her last days with Isaac must have been like.

And how was she after Isaac's death? I give her a face; an aging beauty, lines radiating from her mouth, still carrying herself with grace and the mysterious authority of beauty. But **she must have been hoarding slights and nursing resentments for years and passed them on to her son, Jacob and beyond.** Her death is not explicitly mentioned, but we are told she was buried at Machpelah, with Abraham, Sarah and Isaac (49:31).

## DESERT GIFT

Lynn Campbell

Lent is a time when we are invited to go into the desert, to let the Spirit of Truth minister to our hearts. In the desert of prayer and fasting we open ourselves to God's holy action. The dryness of my soul can relate to the whirling, sifting sand. I must take time here to look with new eyes, to pull away the layers of confusion, hurt and busy days.

I invite the Spirit's presence. It takes time, in the turmoil of my mind, to feel the presence of God's Spirit stirring. As my soul settles, I wonder at the dry vastness, seeing no beauty, no color and no life-giving water. Where is the gift? In the midst of feeling my soul's deepest nothingness, do I feel the first stir of the presence of God's Spirit? Oh, gentle sweet stirring; in the hush did I hear you speak my name? In the stripping down, is it then that I feel, see and hear more easily?



*Continued on page 12*

# GROWING THE GIFT

## ACT LEADERSHIP TRAINING DESIGN

Douglas W. Schoeninger, PhD



### COMPONENTS OF TRAINING

#### 1. Leadership roles, responsibilities and tasks

tailored to each leadership role in ACT, e.g., Board, Board Offices, Council Chairs, Committee Chairs, Regional Coordinators, Specialty Group Leaders, etc., will be considered

- a. Thorough study and owning of job descriptions and responsibilities.
  - b. ACT organizational chart.
  - c. Goal setting and action planning for areas of responsibility.
  - d. Learning delegation and oversight skills.
  - e. Applying the insights detailed in the books *The Seven Measures of Success* and *Leadership and Self-Deception*.
  - f. Using personality assessment resources and understandings, e.g., the Myers-Briggs inventory and Innermetrix Attribute Index.
- Training will be accomplished through conference calls, at Board meetings and at the Spring Leadership Retreat.
  - Trainers: George Degnon, leaders and former leaders.
  - Trainees: All ACT leaders who hold an office, especially those new to the office or in preparation to assume office.

#### 2. Goal achievement skills to be addressed

- a. Learning and practicing specific skills.
  - b. Tapping essential motivation needed to effectively articulate and accomplish goals and action plans.
  - c. These skills are useful personally, professionally and for ACT, and undergird and strengthen the training in specific leadership roles and responsibilities.
- This training will be accomplished through conferences.
  - Trainer: Bonnie Lay.
  - Trainees: ACT leaders who identify their need for this training and who will be in leadership for several years.

#### 3. Relationship ethics and modes of engagement study

- a. Practicing skills that put into practice Shared Wisdom and ACT's Rules of Ethical Engagement (see "Creating a Culture of Trust: Rules of Ethical Engagement and Direct Address in ACT" on the ACT website).
- This training will be accomplished at Board meetings, the Spring Leadership Retreat and in Regional, Committee and Specialty Group meetings.
  - Trainers: Doug Schoeninger and all leaders.
  - Trainees: All ACT leaders.

#### 4. Membership recruitment/evangelization/sales skills

- a. Training in recruitment and evangelization strategies and skills. Implementation of recruitment training at professional conferences, in clinics and hospitals, etc.
- Training accomplished through conference calls using RAC training materials integrated with Scripture and spiritual principles.
  - Trainer: Bonnie Lay.
  - Trainees: ACT members recruited from the Specialty Groups.

#### 5. Spiritual growth and development for leaders

- a. Biblical and spiritual understandings that undergird ethical engagement and ACT's vision and values (e.g., valuing each person's gifts and contributions, shared wisdom, becoming healers with the heart of Jesus).
  - b. Growth in spiritual discernment processes, especially as applied to ACT deliberations, decisions and ethical engagement between leaders and between members, including the methodologies for shared wisdom.
- This training will be accomplished at Board meetings and during the Spring Leadership Retreat.
  - Trainers: Bob Sears and other ACT leaders.
  - Trainees: All ACT leaders.

### Criteria for Leadership Training Design

1. Build on training processes already in use or already designed.
  - a. e.g., build on the decision for Council Chairs, Committee Chairs, Regional Coordinators, Specialty Group Heads, etc. to recruit replacements at least a year in advance of leaving office, who then work alongside the current leader as they prepare themselves to assume office.
  - b. Build on the practice of the former Chairs continuing as mentors for the new leaders after leaving office.
2. As much as possible, use existing meetings and gatherings for leadership training.
3. Keep training processes focused on the knowledge and skills most essential and pertinent for particular leadership tasks.
4. Combine training with team building so that training also serves the building of relationships and that relationship bridges are being established between those who must work well together for ACT to achieve its mission. (For example, small groupings of Regional Coordinators might meet for mutual support and training through periodic conference calls with Chair of Council of Regional Coordinators and George Degnon.)

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## *Association of Christian Therapists*

### Call for Workshop Abstracts 2008 Act International Conference

MUNDELEIN, IL  
September 11-15, 2008

#### HEALING THE SHATTERED SOUL: Restoring Hope to those Impacted by Trauma

*“He has sent me to bind up hearts that are broken” Is. 61:1*

The Conference Advisory Committee of ACT is pleased to invite your participation in the 2008 ACT International Conference by submitting an abstract for a workshop presentation with a focus on the above theme.

Workshops provide a valuable opportunity for ACT members to engage in rich discussions about a topic of common interest.

The workshop presenters will be asked to keep their oral presentation to a maximum of 45 minutes and allow 45 minutes for group discussion. A total of 12 workshops will be selected. Six workshops will be presented on September 12th and six on the 13th.

#### **Suggested Topics:**

- Integrated approaches working with traumatized populations
- Death, War, Violence, Sexual Abuse, Post Abortion Trauma
- Case Studies – Research studies – Ethical issues - Spiritual growth

#### **Acceptance Process: Abstracts will be accepted based upon the following criteria:**

- Balance of topics and relevance to Christian spirituality
- Presents clinical experience and evidence-based practice
- Potential to generate stimulating discussion; ability to produce a short article for publication

#### **Guidelines for Abstract Submission:**

- Describe topic and plan for conducting the workshop.
- Be clear, concise and submit no more than 250 words.
- Specify objectives, raise questions for discussion and include one or two take home “pearls”.

Abstracts must be submitted to Conference Advisory Committee by Email: [ACTHeals@degnon.org](mailto:ACTHeals@degnon.org) or  
Fax: 703-556-8729 no later than *March 28, 2008*.

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### **GROWING THE GIFT**

*Continued from page 4*

5. Fully integrate leadership training with ongoing management of ACT tasks.
6. Establish an evolving leadership training design that is updated each year as feedback and experience is gained.
7. Have fun!!!

### **Behavioral Goals for ACT Leadership Training**

Those trained will be able to:

1. Listen to and identify the heart of the matter in others' communications.
2. Articulate proposals clearly.
3. Appreciate the value of diverse gifts and perspectives.
4. Collaborate with others with differing gifts and talents.
5. Facilitate small work groups functioning as collaborative teams.
6. Guide conflict resolution.

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# INTERNATIONAL CONFERENCE 2007

## SETTING THE CAPTIVES FREE

Mike White, MD

The 2007 International Conference provided a comprehensive coverage of the spiritual aspects of mental health, exploring the conditions that bind us and prevent us from achieving our freedom to be a fully functioning Child of God. Beginning with a theological approach on Thursday evening and followed by the sharings on Friday of a psychiatrist, a psychiatric nurse practitioner, and a social worker, we explored the quandary of the state of captivity that binds us.



had in Northern Ireland and Africa in dealing with the bondage of unforgiveness, setting in motion a process to bring forth forgiveness on a massive scale.

Together these presentations provide an opportunity to have a “crash course” on Christian ministering to the captives of unforgiveness so that they may be set free! In audiocassette, CD or DVD, this is the basis of an insightful collection of the Christian therapist at work. Sharing these can be a wonderful way to evangelize friends and colleagues!

Father Bob Sears explored the descending and ascending spirals of depression and other mental illnesses that place us in a state of mental captivity. The next day our speakers shared their experiences as Christians working with people in actual captivity – in prison, in a closed psychiatric ward, and in a voluntary inpatient setting. Doctor Carlos Miura reminded us that Jesus sets us free, even when we are in jail. We do not need to be Jesus, sacrificing ourselves as He did. He has already done that and we can glorify in His triumph! Likewise, we do not need to be God the Creator, trying to create things in our image; we can be ourselves. We are free! Cheryl Marsh, a psychiatric nurse practitioner working with patients in a compulsory inpatient setting, laid out an approach that was both practical and ethical and that achieved integrity in the provider-client relationship. Heather Stewart followed with a candid exploration of the struggles of the Christian healthcare professional to reach and maintain a healthy balance in the relationship.

The following panel discussion provided further integration of the presentations. The next morning, the Reverend Russ Parker shared the experience that he has

## HEALING EXCHANGE

The oft-mentioned use of Blessed Salt at the 2007 International Conference prompted this topic for our new column. (thanks Denise Dolff and friends for suggesting column) BLESSED SALT, Rev. J. Hampsch, excerpt

### Blessed Salt

There is a renewed interest today in the ancient Sacramental of blessed salt, especially in healing and deliverance situations, etc. To understand its proper use, it would be helpful to review the Scriptural and historical basis for it.

Salt in the ancient world was a precious commodity. Roman soldiers were partially paid with packets of salt. Being costly, it was an appropriate offering to God, used in sacrifices by the Israelites (Ezek. 43:24).

Used for over 3500 years to preserve meats from deterioration, it became a symbol of preservation and spiritual incorruptibility when used by someone offering sacrificial worship. Shared at the

sacrificial meal, salt became a symbol of friendship as well.

Jesus referred to this in Mark 9:50. “Have salt in yourselves and be at peace with one another”—that is, preserve that quality (flavor) that makes you a blessing to one another.

Jesus described his chosen ones as the “salt of the earth” (Matthew 5:13).

Elisha in II Kings 2:20-21 was inspired to put salt in contaminated water. This first miracle of Elisha is the primary Scriptural basis for the sacramental use of blessed salt today. For example, Catholics use salt blessed by the liturgical prayer of a priest. It may be used by itself, as in the exorcistic prayer of Baptism, or the priest can mix blessed salt with water to make holy water. In whichever form, it is intended to be an instrument of grace to preserve one from the corruption of evil occurring as sin, sickness, demonic influence, etc.

As in the case of all Sacramentals, its power comes not from the sign itself but by the means of the Church’s official (liturgical, not private) prayer of blessing—a power derived from Christ Himself (Matthew 16:19, 18:19). Sacramentals sanctify us not of themselves, but by the power flowing from the redemptive act of Jesus. It is elicited by the Church’s intercession and directed through those external signs and elements.

They are focal points which funnel one’s faith towards Jesus, as handkerchiefs were used to focus faith for healing and deliverance by Paul (Acts 19:12).

Our faith must be Jesus-centered, as was the faith of the blind man in John 9; he had faith in Jesus and not in the mud and spittle used by Jesus to heal him.

Blessed salt is not a new Sacramental, but the Holy Spirit seems to be leading many to a new interest in this remarkable instrument of grace and healing.

# TOGETHER IN JOY: LITTLE ROCK, ARK



*ORGANIZATION*



*REGISTRATION*



*EDUCATION*



*CLERGY*



*MUSIC*



*DANCE*



*CONVERSATION*



*PRAYER*



*SPEAKERS*



*COMMUNITY*



*WORSHIP*



*TAPING*



*DRAMA*



*CELEBRATION*



*DEPARTURE*

## MINISTERING TO MENTAL HEALTH PATIENTS

*Continued from page 1*

state. Janet, the head nurse, and I went about the routine of meeting her needs and securing her safety. From all outward appearances this episode was no different from any other admission and restraint episode. Yet, for me it was entirely different. The directive to pray came out of nowhere and disappeared as soon as it was uttered. It was so strong I knew I had to obey. After about a week I got up the courage to speak to Janet about it. To my surprise, Janet had heard a similar directive. She, too, had said a simple prayer of protection. Neither of us had ever heard a directive during work to pray. In our respective faiths, we interpreted it as a communication from God.

Mary had been on retreat with her Christian Women's group, praying for someone's exorcism, when the change in her behavior had taken place. Mary and her family spoke with her psychiatrist about the possibility of possession. He dismissed it outright. Testing showed that she was neither delusional nor hallucinating. In my mind, I suspected that something else was at work other than simply mental illness. I sought out Maureen Charron, a fellow nurse and ACT member, to discuss the case. She was most helpful in giving me an alternative context for understanding the experience and direction for further learning. She also invited me to join ACT.

I eventually began working in a community hospital which had a full complement of psychiatric services. At the time I was pursuing my own physical and inner healing. As I learned more about healing, I wondered how I could incorporate healing into my practice. There were no simple answers, only a persistent desire to live a Christian way of life, even in the workplace. When the term "spirituality" is used in my workplace, it usually refers to secular methods, which are beliefs and practices that people do not link to traditional religions. Examples of this might be yoga, Alcoholics Anonymous, and the Concept of Mindfulness.

Clinic patients come from a cross-section of cultural, religious and spiritual traditions; however, during the initial evaluation I will ask patients about their religious affiliation and their spirituality. I am looking for beliefs, stories and practices that help or hinder them in dealing with their presenting problem. For most of my patients, spirituality and religious traditions are separated from their daily living. It is the rare patient who actively seeks healing prayer or a therapist who is sensitive to their religious and spiritual beliefs and practices.

Patients seek treatment because they have a problem and they want to feel better. They are expecting traditional psychotherapeutic and medication approaches. My primary

responsibility is to provide the very best in these areas. As I do this, I try to keep the client-therapist relationship first and foremost. For me this relationship is grounded in my relationship with God through Jesus and the Holy Spirit. I strive to start each day with prayer. I frequently attend Mass before work. This time in prayer grounds me. I offer my professional skills to God and ask for his guidance and the grace to do his will.

On one occasion when I was experiencing frustration with one of my clients, I prayed to myself, "Lord, you know that I am irritated with this person. Right now I do not like her and do not want to help her. Yet I know that you love her a whole lot more than I do. Would you please give me something that I can hang on to so that I can provide her with the care that you desire?" At that point, my irritability melted and I came up with an intervention that calmed her anxiety until our next session. I use a variation of this prayer when I am having difficulty relating to a patient. It never fails to work for me.

Sometimes I pray silently for guidance during a session. Prayer gives me a sense of peace. I seldom pray with patients, but if so, only at their request. However, I always pray *for* my patients. It takes a lot of discernment to decide who to pray with and when. One woman I will call Sadie asked me to pray with her for healing. I did so hesitantly and continued to do so when she requested it. As I worked with Sadie, I gave serious thought to praying with patients. Was it ethical? What are the boundaries? As the therapist in a relationship, I have more power and authority. How do I respect the patients' boundaries, belief and wishes while still providing good clinical care? As a result of this experience, I have spent a lot of time in reflection, prayer and discussion with respected colleagues. I searched the literature about prayer with patients and the ethical issues for praying with patients. Two references spoke to me: one was the work of Blessed Mother Teresa and the other work was a book by Daniel Sumasy, O.F.M., M.D., entitled *The Healer's Calling, A Spirituality for Professional and Other Health Care Professionals*.

Blessed Mother Teresa was a woman of deep prayer grounded in her relationship with God. I don't know if she prayed for individual healing, but I do know that she did what Daniel Sumasy's book stressed. He states that true healing involves three simple human elements: compassion, touch and conversation. I felt that I received the answer as to whether or not to pray with patients. In my own practice, I would concentrate on "compassion, care and conversation" through and with my relationship with Jesus Christ. Prayer with patients, while not totally eliminated, would take a backseat to this approach.

Over the years, I found this to be a good fit for my temperament and workplace. As always, the patient should be

the one to request prayer when it does occur. I have learned to trust my clinical judgment, believing it is grounded in both clinical knowledge and faith in Jesus. Another aspect of praying in a secular setting is to consider how colleagues or supervisors will judge you or the intervention. Will it get you in trouble or even dismissed?

Even if you don't talk about praying with a patient, the patient may talk. If things get worse, will they blame you? God? Or the prayer? There is the risk of being accused by the patients or colleagues of violating boundaries, which is why discernment is of the essence.



*Cheryl and Ben*

There is no one simple approach that I employ. Each session is a combination of questions and choices. The decision to pray for healing is a complex one. I have had to learn how, when, and if to pray. Most of all, I have had to walk in trust that my discernment was God's will for the session. I have had to trust in God and let go of the outcome. If a complaint were to be made, I would have to be prepared to explain my use of prayer.

While I have prayed with very few patients, I frequently engage in discussion about their religious and spiritual beliefs and practices. I often refer them to their priest, minister, rabbi or hospital chaplain. Patients come to know that I value the body, mind and spirit connection and that I recognize that they are interconnected and that healing in one area affects the other two. I support whatever efforts they make to reconnect with their spirituality.

When I look for the fruits of my practice, I look for small things. Patients tell me that they experience peace in my office, that they feel better, that I said something that helped them. I look for small changes in behavior. I look for evidence of God working in their lives and I rejoice with the patients over the smallest changes. It is usually easy to see Christ in my patients, and for me the encounter is humbling.

Over the years, I have become known as a Christian therapist and patients who request a Christian therapist are frequently referred to me. I may have earned this label by speaking up in clinical supervision in support of a patient's religious or spiritual beliefs and practices. Another way that I have earned this label is my association with ACT. I often talk about what I have learned at ACT in the staff room.

Most clinicians have difficulty incorporating the truth that God is alive and well and healing his people today. The challenge is not to respond in anger or to impose one's values, but rather to bring joy and love to the setting. "All the

good that you do will not come from you, but from the fact that you have allowed yourself, in the obedience of faith, to be used by God's love.... The real hope, then, is not in something that we think we can do, but in God who is making something good out of it in some way we can not see..." (Thomas Merton)

*(This speech, in its entirety, can be purchased through our media specialists; see page 11.)*

## plan now...

ACT Pilgrimage

Ireland, May 2008

Father Joe Scerbo, Chaplain. Contact: Jennie Dodson  
jenniedodson@yahoo.com, 905-335-6902

## GROWING THE GIFT

*Continued from page 5*

7. Define goals and strategies.
8. Keep the vision, mission and strategic plan in focus.
9. Prioritize goals.
10. Interpret organizational structure, lines of communication and accountability.
11. Operate with an attitude of service to others and to the mission.

## Leadership Development Goals for 2007 - 2008

1. Continue to implement the training design and ongoing developments itemized in the progress report.
2. Provide updated leadership skill building at Leadership Retreats once a year.
3. Use acquired Goal Achievement Skills to write more effective (short-, medium-, long-term) goals within the Strategic Plan.
4. Identify funding sources and secure grant funding for 2 more Goal Achievement Training classes.
5. Identify participants for Goal Achievement Training classes, specifically other Board members, RCs, Committee Chairs, Specialty Chairs and those being groomed for leadership. Secure participant co-pay (\$425 or portion thereof) where possible.
6. Identify funding sources and secure funding for Member Recruitment Training.
7. Identify and develop 1-2 professional individuals in private practice in each specialty to be developed for conceptual sales through Member Recruitment Training. This includes how to "work" professional (or trade) shows.
8. Board members take and use the INNERMETRIX Attribute Index and the Myers-Briggs Personality Profile for self and organizational reflection.

## SPECIALTY GROUP LEADERS MEET



There was a tremendous energy present at the Little Rock meeting of the Specialty Group Leaders. Led by Djohariah Toor with Doug Schoeninger as guest speaker, those in attendance were asked to review the year and share the most significant finding along with their greatest need. Contributors, Gail Paul, Clergy, Charles Zeiders, Therapists, Royce Johnston, Associates, Lenonard Bourgeois, Physicians/ Dentists, and Mary Jo Duddie, Nurses each spoke to the heart of the matter. Brainstorming followed. Then Doug Schoeninger gave an update on Leadership Training, holding out great promise for the future of ACT leaders.

NEXT MONTH look for READERS WRITE when member, Anne Cronin Tyson will update us on Healing Hearts Ministries, a ministry for survivors of suicide loss.

## THE ASSOCIATES SPECIALTY GROUP

Royce Johnston, MEd



The gifts of the Spirit and the Body of Christ were present in abundance at our Associate's group meeting in Little Rock, AR. We represented a wide variety of ministries, from Christian radio to a retired teacher working on healing the sins of poverty to an engineer with a prayer ministry. We expressed our appreciation for membership in ACT because of the inspiration, fellowship and scholarship we receive from noted speakers and prophetic ACT members.

Ecumenism, honest discussion about the Holy and real differences of theology were shared with the forgiving and loving heart of Jesus. We introduced ourselves to one another by asking, "Who are you?" Then we practiced listening while our partner responded. This led to more discussion about common ministries and new insights. Book titles were

## REGIONS REPORT ...



REGION 10 reports a successful year with a 23 annual conference, White Mass, Generational Healing Workshop, active SEW group, over a dozen new members and a pilgrimage to Ireland in the Spring. Plans are set for the 2008 conference, April 24-27 in Niagra Falls. Members, Ruth Oliver, MD

(Vancouver) and speaker Carlos Muira, MD (Ottawa) report meeting at Little Rock after years of not seeing each other (see photo). REGION 29, comprising all of the Caribbean, had half of its members at the '07 IC. Regional Coordinator, Bonnie Lay, came with nurse, Molly Arjune and mental health worker, Margaret Lewis also brought along her spouse. Molly, the director of the largest Community Clinic on the island credits her membership in ACT as giving her the spark she needed to take on the responsibilities of the clinic. She opens the day at the clinic by inviting the workers of different denominations to start the day united in prayer. Molly feels that the workers are not there by chance; that they each have a mission. The difference since Molly took over is best described by a patient's comments. "What have you been doing? I feel the peace." REGION 5's Rev. Dr. Gail Paul and Rev. Larry Carew will lead a retreat for Survivors of Sexual, Physical, Emotional or Spiritual Abuse on Apr. 1-2, 2008 in Conn. oratory1@sbcglobal.net Regional happenings are listed in Datebook (page 1).



exchanged with a promise to share our favorites some time in the near future.

We agreed to try to attend at least two ACT meetings a year and keep in touch through email. Since our group is quite geographically scattered, SEW groups will be offered via the Internet in place of in our homes. Gloria Doino (Editor, InterACT) encourages us to tell our stories, write them down and mail or email them to her for future publication. Our stories and insights carry wisdom from one town to another, one nation to another. As a specialty group of Associates, we are grateful to ACT for the everyday caring and love-without-reservation that we experience as members.

Royce Johnston is the new coordinator for the Associates Specialty Group. She is a retired teacher who currently coordinates volunteer tutors for the Marion Sterling Elementary School located in the inner city of Cleveland, OH. Royce also works with her parish church in ministering to the poor.

# A SPECIAL REMEMBRANCE

## THE HEART OF ACT: THE PASSING OF FATHER PAUL R. SCHAAF, C.P.P.S.

Bob Rohde, PhD



On Sunday, September 16, 2007, one of the four founders of ACT, Father Paul Schaaf, passed away after concelebrating Mass at the St.

Charles center infirmary. The cause of death was an aortic aneurysm, the presence of which had been identified about a week before, after Paul had complained of chest pains.

His funeral was well attended, not only by the priests in residence, but by family and others who knew Paul. In particular, there was a contingent of 10 who flew in from Minneapolis from the parish where Paul had substituted for many years for the pastor while he was on vacation each summer.

Many of those present had also made his pilgrimages to the Holy Land and elsewhere. I was fortunate enough to attend the wake and funeral as the sole ACT member present and was invited to speak after the Eucharist by Paul's brother, Br. Donald Schaaf, S.M. After introducing myself as the ACT secretary, and on behalf of ACT members and the current board, I spoke about how I met Paul. I lived on the Jersey

Shore and in the summer of 1977, I met him in Spring Lake, where he was visiting a friend who was a member of our local prayer group. I had begun a healing ministry in the prayer group and was introduced to Paul. He suggested that I join this new organization called ACT.

And so I did and became a member in 1978. We became friends and that friendship lasted until the present, exchanging Christmas cards and notes, occasional phone calls, etc.

I thought of Paul as the 'heart' of ACT, exemplified by his great love for the organization and its members. And to confirm this, I related a vignette at the funeral of great importance to ACT, and how I felt that incident was a symbol of Paul's life as well. In *The History of ACT* we read the story about the Burlington, VT Conference 1980, in which Paul had prayed prior to Mass and felt that the liturgy should be that of the Sacred Heart rather than the liturgy of the day.

While Paul was saying Mass, one of the candles dripped onto the altar cloth. When he finished the Mass, it was noticed that the dripping wax had formed a human heart both in shape and even with ventricles. This heart became the background for the ACT logo and is displayed in a glass case at each ACT conference. ACT was dedicated to the Sacred Heart of Jesus and the Immaculate Heart of Mary. Not only is the wax heart a symbol of Jesus and Mary's love for ACT, but also, I contend, that of the Mass celebrant, Fr. Paul Schaaf.

I thought that this symbolism was again confirmed by the circumstances of his death. His heart, full of love for his friends, simply overflowed and could not be contained.

In speaking to the wife of the St. Charles administrator, who had talked to Paul the day before his death, I learned that Paul, knowing his time was short, expressed concern not so much for himself, but for those who would be left behind; those he would miss, and those who would miss him.

Paul's love for his friends, which mirrored that of Jesus for us, was also the theme of the Gospel reading at his funeral Mass. *John 15:11-17*, "I call you friends... Love one another." We have lost a dear friend but we have gained an intercessor in the heavenly courts. May he rest in peace in the hearts of Jesus and Mary.

His sisters have provided me with holy cards commemorating Paul's life. If you wish one, please send a Self-Addressed Stamped Envelope to: Bob Rohde, 1319 Kingston Avenue, Alexandria, VA 22302.

ACT extends deepest condolences to Norman Wright on the loss of his wife, Joyce, last fall. Joyce frequently accompanied Norman to his many speaking engagements for ACT, San Diego. Norman may be reached at 6812 Palm Tree Circle, Bakersfield, CA. 93308 (hnormanwright@lycos.com).

## SIGHTS & SOUNDS

### ACT INTERNATIONAL CONFERENCE '07

Be inspired by the "Sights & Sounds" of the ACT International Conference by ordering DVDs and VHS tapes through Robin Caccese: 137 Proudfoot Drive, Birdsboro, PA 19508 or [rcaccese@enter.net](mailto:rcaccese@enter.net) and Audio Cassettes and CDs from Vince Kirton: 160 Gibson Drive, Unit #8, Markham, ON L3R 3K1 Canada or by e-mail, [ykirton@sympatico.ca](mailto:ykirton@sympatico.ca). Order forms available upon request.



# nuggets...

*Forgiveness...is giving someone what they need not what they deserve.*

Paul Carrier, S.J.

# miscellaneous...

*Blessed are the flexible for they shall not be bent out of shape.*

Anonymous

## A-M-E-N!

### NETWORKING

With tiny stitches like a quilt,  
invisible to the naked eye  
but infinite in number,  
the net is woven

silently  
it winds round you,  
this unseen web of prayer;  
a gossamer circle,  
its strands shining and  
strong.

Spun  
as with the quilt,  
by many anonymous hands,  
a gift of strangers

to buoy you,  
lift you up  
above the abyss  
of pain and desolation.

Rest easy in your silken net:  
You are not alone.

Mildred Collier  
Philadelphia  
NCR Nov. 2, 2007

## DESERT GIFT

*Continued from page 3*

Unburdened by the past or future, am I free to see the delicate flower on the needle spine, the shifting of the clouds moving in the lazy sky, the sun's casting of color on the mountain as it descends?

Is it only in the desert vastness that I can make room for You, oh sweet Teacher, to create change and room for movement in me? Is it only in the cleansing of my soul's unnecessary clutter, that I can feel your presence more clearly?

It is a bittersweet place, this desert of yours, sweet Spirit; an ever-changing place where my soul may experience you more fully, which is sweet indeed. Oh, that I may give up that to which I cling with so much passion and learn instead, to look in the shadows, to see the colors and watch for new life to come forth after the storms.

The desert is the gift. It is here that the Spirit is given free rein to touch my soul more deeply within the mystery of God in my world.

## the webwatch...

[www.comedycures.org](http://www.comedycures.org). Provides people living with illness the opportunity to integrate joy and laughter into each day.



The new issue of *The Journal of Christian Healing* is now online at the ACT website

# keep connected

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**REMINDER:** Use your member number (DIRECTLY next to your last name) to access the members only section of the ACT website at [www.actheals.org](http://www.actheals.org)

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