



Conference Care Newsletter

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“And went to him, and bound up his wounds . . . and took care of him” Luke 10:34
“But that the members should have the same care one for another” 1 Corinthians 12:25

Editorial

Making Burdens Lighter

“Bear ye one another’s burdens, and so fulfill the law of Christ . . . Every man shall bear his own burden” Gal. 6:2,5). At first glance, these two verses in the Bible seem very contradictory. One person says, “I’ll bear my own burden if others carry theirs.” Another person may say, “I will bear someone else’s burden—it doesn’t look as heavy as mine.” Both efforts don’t work well.

What about my burden? Will someone carry it for me? Probably not. But there is a good chance that someone will help me carry it if I will help someone carry his. There are other verses in the Bible like, Do to others like you would have them do to you. At second glance, the two verses complement each other very well.

There are many circumstances around us that are very sad. There is sickness and aging; there are broken bodies, mental breakdowns, broken homes, handicaps, and many other kinds of special needs. The people who bear these burdens may be part of our church group, our families, or people in our neighborhood. Jesus said to love your neighbor as yourself. We have faith in the Gospel, so we will have to live it. “By this shall men around you know that you are followers of Me if you love one another.”

Have you noticed that it is easy to help someone who helps others? If your burden is heavy, and you seem to need help bearing it, help bear someone else’s burden. Your own burden will become lighter, and you will suddenly notice that others are ready to help you bear yours. Take responsibility for the burden you carry but don’t be so self-regulating that you are unapproachable.

Shared burdens are lighter. You may need to talk about yours, but do so without complaining. Simply and humbly stating what you are carrying will arouse more than just sympathy. Even if it is obvious what the burden is, it may be good to speak about it.

On the other hand, simply listening to someone whose load is great will make the load lighter for that person. This takes effort, and with some reflection, this could easily be elaborated on. For example, a very normal response when someone shares is to talk about your own problems.

What about when the walls are up and a person seemingly is closed to help? That makes it more difficult and often more interesting but, nonetheless, even more important to help, perhaps in a completely different way than you would expect.

The time eventually comes when you will not be able to carry your burden any longer. At that point, it will be a blessing if you have helped carry the burdens of others.

The Pharisee prayed, “I thank you, God, that I am not like the publican here.” That was a mistake. Would he have found someone to help shoulder his burden when he had one? Perhaps no one heard his prayer. But somehow, I think his fellowmen would have felt his attitude.

In the Good Samaritan story, the religious folks walked past the person in trouble, but the Samaritan, whose religion was in question, stopped and helped.

The brotherhood today fields many calls from people needing help—physical, spiritual, emotional, financial, sin sick, confused. Many calls open up uncharted territory. When people come looking for help, dare we turn away or delay? They are beginning to take responsibility in the exercise of bearing their own burdens. And someone must fulfill Christ’s law and help bear those burdens.

Pastoral Work in Elder Care

Tim Penner

Who assumes responsibility for the spiritual welfare of the residents in a care facility? At the 2019 conference, Aaron Koehn, administrator at Oakwood, talked about the challenges residents experience. These are some points he lifted out:

The evil one is alive and well in our elders' minds.
There are no areas that don't affect our elders.

- Fear.
- Jealousy.
- Offense.
- Submission of the will.
- Self-right spirit.
- Emotional issues that affect courage.
- Losses—loneliness.
- Relationship issues.
- Social acceptance.
- Cliques.

Do any of the facilities in our conference have a pastor on regular duty like any other employee? Should pastors be part of the care team officially? Would nursing invite regular inclusion of a pastor into the care planning of residents?

Who will notice the downcast feeling of a resident first? Most likely the care aides. Who is the first one to enter the resident's room in the morning? Perhaps it's the housekeeper. Who is the last one to attend the resident in the evening? Who observes the resident throughout the day? Maybe employees should receive more training on how to provide pastoral care.

Could the pastoral part of the care system be improved? Personally, as a member on a pastoral committee, I often think I should be more engaged in this work. Would more organization, like designating days of the week where a pastor would actually be at work as an employee, be advantageous to the program?

In one facility, they pay people for doing devotions in the evening. The care committee doesn't mind being a bit surprised at this. So, "You pay your people to come have devotions?" The reply is, "Yes, and it really works well. It's tough for young parents with children to get out in the evening. This way there's a little incentive."

Maybe we should implement that for pastoral work. Traditionalists would hardly think this worthy of consideration. But millennials may have a different mind-set. Let's not be too closed minded. And even if we choose not to be open minded, traditionalists' time is fast coming to an end, and their influence will soon be a vague memory.

Here's an edited illustration that was presented to the care committee.

When Brother John was part of the congregation, there

was a fair bit of accountability for his spiritual well-being: staff contact with continuity through the year, visits, re-proof and encouragement, revivals each year, self-expression and communion. Then he was admitted to a care home, and the revival ministers stop in once a year, shake hands, exchange some pleasantries, maybe encourage him, and then let him know they look forward to meeting him on the other side. How much deeper does it get than that? Who's accountable? Is it the staff of the congregation where the facility is located? Is it a son-in-law? Why does accountability seem to get less as the person ages and has fewer years to live? Perhaps the mind is fairly sound, but maybe he gets frustrated with the nursing staff. Is this acceptable? Who helps him with this? Is there a missing link?

The tendency is there to defend the system that's in place. However, should our minds be more open to the realities of how aging affects spirituality, to the opportunities and responsibilities that may exist and the fact that more could be done to address the most critical need in resident care—the care of the soul.

From My Desk

To the Families, Friends, and Communities of Our Dear Elders

By Gideon Berniko (Administrator, Westview Care Community)

I was visiting with someone of late, and he made this statement, "How can you get me enthused about elder care?" I appreciated his honesty. I well realize that to appreciate something, we have to feel a need for it. I put this communication together as an effort to establish a deeper understanding of elder care. Please take the time to consider the thoughts in this writing. One question I would like to address is why people say, "I hope I die before I need a nursing home." Where is the sanctuary of peace in the sunset glow of life?

I get calls from desperate folks sometimes. They don't know where to go for help because they have never been through this before. Their mother has serious dementia, and their father is struggling to keep it all together. He doesn't get his sleep, because, with dementia, mother's days and nights get mixed up. She ends up in the hospital, comes back home, and that happens repeatedly. Homecare does what they can, but she needs on-call care. The children live a distance away or are working out. Often a fall and possibly a broken bone is what tips the scales and makes the situation impossible to deal with in their own home. When these families call, they wonder if we have

faced situations like theirs before, and if we could actually handle someone like this. We reassure them that, yes, this is our work, and our employees are trained to handle this. However, being trained alone does not fill the need of your parent. The human need goes much deeper than food and shelter.

We speak of child nurture. Do we realize that our elders need to be nurtured—not only a meal and a bed, but nurtured? Nurturing speaks of careful feeding of the spirit, of the mind, and of the body. This is what happens at home with our children. Likewise, that is our endeavor in our faith-based elder-care homes. We would not place our children in a foster home to be nurtured according to that home's standards. Would we do that to our elders? We endeavor to hire carefully because each employee and volunteer is part of this nurturing of our elders. I am warmed in my heart when I observe how tenderly and respectfully the elders are cared for in our facilities, not with perfection but with love. Let's just say it's your mother in the care home, and she is lonely. It's a warm summer evening, and you, her children, are all busy with other plans. The care aide notices her mood and takes her out to see the flowers to lift her spirits (emotional nurture). One of the men folk is restless because he is not sure if all is well with his Maker. Some words of faith are shared. A prayer is offered, and peace is restored (spiritual nurture). It's Saturday, and the care aides have the residents in a circle playing a game of catch; everyone is alert and having a good physical workout (physical nurture). Please don't think that the only needs our elders have are to eat and sleep. They need to be nurtured with TLC.

One administrator from a home in British Columbia referred to his home as sacred spaces—spaces that are a haven to the honorable aged. "Honour thy father and mother; (which is the first commandment with promise)." Take note: It places this commandment way up at the top of the priority list as the first commandment with promise. Leviticus 19:32 says, "Thou shalt rise up before the hoary head, and honour the face of the old man, and fear thy God: I am the Lord." To "rise up" would be to give attendance to, to show deep respect for. Then it says, "Honour the face of the old man, and fear thy God." This puts honoring the aged together with being a Christian. Blessings are upon the generation that honors its elders. Is that us?

Sadly, the affluent North American culture falls far behind many other cultures with honoring the aged. Too often, they are considered a burden and lesser citizens. This results in our elders being among the most isolated population in our nation. One of our residents said, "They don't want our opinion. They think we don't know what we are talking about." Another grandma stated, "You nurses are doing such a good job of being nurses that you forget that we are people." In too many facilities, they are

put in locked units, staring helplessly into space by the hour, a TV screen flashing blue before them; the only interruption is another precooked, tasteless meal. They are forced to sit all day in one position in a wheelchair because no one has the time to help them lie down. Surely, our faith based homes are not like that. Our Godly heritage would not allow that. But I am pursuing something, so let's continue.

To gain some appreciation for the effort that goes into elder care, I would like to give you a little picture of what a day can be like at Westview, long-term care. Most of the community drive by WCC unaware of all the things that are going on inside the walls. Four cooks and assistants are busy in the kitchen preparing lunch for residents and visitors while their manager is ordering and putting away groceries. Three housekeepers are doing their best to not put in overtime again, and then the nurse asks them to clean an extra room for an anticipated admission. The laundry cart comes through the back hallway with another load of fresh, clean linens and clothes. Two more ladies are in the back folding more laundry. The two maintenance men are busy trying to keep the aging facility safe and functioning. Boilers, washing machines and dryers, all kinds of equipment in the kitchen, nurse call bells and door alarms, air mattress pumps and power beds, etc.; not to mention keeping the water flowing in the right direction. The two physio ladies are trying to get their exercise regime done between everyone's schedules. There is a team of three occupational therapists here to fit some residents for wheelchairs. The two office staff are paying bills, invoicing, and pulling multiple projects together for the various meetings and departments. Our off-site payroll personnel pop in for some discussion on what exceptions are permissible or against policy. Recreation is trying to add value to our elders' lives by coming up with something meaningful to do, like peeling vegetables for lunch. Then we have the workforce of care aides, six on days, plus a unit aide to assist them. They are like soldiers on the front lines doing what needs to be done, discreetly and respectfully behind closed doors, and rolling out beautiful elders to the table, smartly dressed and sparkling clean.

It's Wednesday, and the doctor is here. One RN is attending her. There is a family waiting to have a medical review with her. The nurse manager has a line-up at her door of families that need to be listened to and reassured. In her own office, the nurse instructor is proctoring a test with a student HCA. Also, because it is Wednesday, the LPN foot care nurse is doing foot care, with a volunteer bringing in and preparing the residents. The hair dresser goes by with another resident that she has been fortunate to snatch from the doctor, the foot care nurse, the physio ladies, or the recreation activity. The scheduler has a line-up at her door of those who want off for an occasion that

has come up. As the administrator and one of the department heads step out of the board room from interviewing another candidate looking for a job, the schoolchildren come streaming in the garden room doors for afternoon singing. Soon they inhale the goodies sent out by the kitchen, and with a loud round of thank yous, they are off. The floater, as she calls herself, is quietly brushing out the fur of the golden retriever sprawled out on the floor before taking her for her afternoon exercise. This picture is not an exaggeration of some of our days at WCC. Many gears have to match and turn around one another to keep this all going smoothly. Think of all the wages and costs that are paid out in a day. For what purpose? Hopefully, to create a sanctuary that is safe, pleasant, and makes life worth living. Yet something is missing—we haven't answered the question of what people fear about a nursing home.

The old way would have been for the grandparents to live next to their children. The grandchildren would be skipping in and out at their will. The elder's advice would have been sought after. They would have enjoyed familiar foods. Visitors to the home would have come and paid them their respects. The personal items of toileting and bathing would have been taken care of in privacy and with dignity. Did they dread this stage of their life like folks do today when they think of being cared for in a nursing home? I don't think so. The difference is that they didn't need to fear the indignities of public care. This was honorable elder care, as well as economical elder care. (It would be naïve to think that it was all perfect. I am sure there were many stresses as they struggled with providing and accepting care.)

Do we need a vision of how we could put privacy back into elder care? Can we build a "grandparents home" which could continue to include church, children, pets, gardens, food choices, and privacy? Privacy is what we sometimes cannot provide as we would want to in our present homes. In fact, instead of privacy for our married couples, we separate them by care levels. Please don't think relationships are not important or necessary for elderly couples.

Is it possible to feel secure, honored, and at home without privacy? Our own personal homes are private places where we can feel perfectly relaxed and unobserved. No one enters without invitation. When someone comes to visit, the conversation is private, and the visitor is mine. Privacy includes a place to be alone when you want to (not fearing who your next roommate might be) a place to shower in the privacy of your own room, a bathroom where you don't need to be afraid that someone will walk in on you or where you need to clean up after some stranger. Can we allow our parents to live in indignity and often separation while we pursue an ever-increasing comfortable lifestyle?

However, a dream has been born! A home where the elders will be pleased to show off their private suites, and we will hear remarks like "This is my home." This dream starts with vision, which leads to commitment. Our boards have a huge task before them. Continued support is needed. It is going to cost many dollars. "And they offered willingly." The responsibility is not the boards alone, it's ours together.

We know that God put his "bow" in the heavens as a reminder of His promise. Can't it be a reminder of all His promises? "Honor thy father and mother (which is the first commandment with promise)."

Life Can Still Be Good Even If You Have Bipolar Disorder

Name withheld

Many people helped me learn how to live a good life in spite of bipolar disorder. Here are some things I learned. Most of them apply to other "computer problems," too.

The most important thing is to have a good relationship with God. I can't excuse myself by saying, "I have bipolar disorder. I can't help the way I am." If we try our best and leave God the rest, He will fill in the gaps.

I didn't find the answer to my problems till I was willing to go to the staff for help and dump the whole bucket. I found it helpful to open up to the revival ministers about my mental struggles and even share a bit in members' meeting. If you are open about it, you might be surprised how much help and support you get. If people know your struggles, they will pray for you.

I fought with tooth and nail to get rid of bipolar disorder. Finally, it started sinking in that I will have it for life. I couldn't accept that. Someone told me, "I don't think you will get better till you come to accept it." When I did that, I started getting better because I wasn't wasting my energy fighting it anymore. I probably never will be 100 percent better till I get to Heaven, but that is okay. If I choose to be thankful, my cup is half full instead of half empty when I grumble. God fills it to overflowing.

Don't blame yourself if you have a mental illness. I tried and tried to figure out what I had done wrong. Someone told me it wasn't my fault, but I wasn't convinced. Somebody else told me I would get better sooner if I would quit trying to figure it out. Finally, one day my answer came. Some verses in Genesis 45 popped out at me: "Now therefore be not grieved or angry with yourselves . . . So now it was not you that sent me hither but God" (Genesis 45:5,8.). This is what Joseph told his brothers when they came to Egypt. It came so clear to me

that I didn't need to blame myself or anyone else, that God let it happen for a reason, and He would make something good come out of it just like he did for Joseph. My friends taught me that it is no more of a shame to have a mental illness than to have diabetes or cancer. If you accept it, others will, too.

An important key to good mental health is to forgive ourselves, forgive others, and forget the past.

Many times when I was discouraged, Job 42:10 would come to my mind. It says, "And the Lord turned the captivity of Job, when he prayed for his friends." When I started praying for others, it got my mind off my own problems. I think God helps us when we ask Him to help others.

It is very important to get sleep. If we start losing too much sleep, we start going downhill. Lack of sleep causes mania. The more manic we get, the less we can sleep, so it is a vicious cycle. These are some classic tips on how to sleep well. We need a good sleep schedule. It is important to go to bed and get up around the same time, even on weekends. This trains our body clock that 10:00 is time to go to sleep and 6:30 is time to wake up. Start winding down an hour before bedtime. Turn the bright lights off and use lamps. Turn off all electronic devices because they interfere with sleep; do something like reading to relax. If you can't stop thinking about something, write it down and try to leave it on the paper till morning.

My doctor told me again and again, "You need to have a good schedule!" Always take your medication the same time. Eat three decent meals a day on a schedule. Don't skip meals or just snack around. When things weren't going well, and I couldn't think very well, my schedule was my life saver. I followed it like a robot, and that is how I made it through the days till things got better.

If you can't run, walk. If you can't walk, crawl. Some days things were so bad I hardly felt capable of going to work. I forced myself to go anyway and prayed for God to help me through the day. My throttle was stubbornly stuck in turtle mode, and I couldn't think very well. My smiler needed new batteries, and I didn't talk much, but somehow I faked it through the days till things got better. (And, yes, there were days when I felt like I was going over the edge and needed to stay home. I had to learn to be okay with that, too.)

We need to keep taking our medication faithfully even if we feel so well we don't think we need it anymore. If you want to spend your vacation in the mental hospital, keep forgetting to take your meds or, better yet, quit.

It is very helpful to keep a record of highs, lows, medication changes, side effects, etc. I use a five-subject notebook. Every page has a day of the year on it. I try to write a little bit every day about how things are going. (When it is finished, I will be able to look on one page and see what

July 6 was like for the last five years.) Before a doctor's appointment, I like to look over this diary to get a true picture of how things were going over the last month.

This record shows my cycle. Things are going much better now, but at first, I was very depressed in the winter. Spring was better. Summer I would have highs. Fall was really good. My record told me it was nothing to worry about when the very good fall days changed to the winter doldrums. And when things were at their worst in the winter, I knew if I would just hang in there till spring, things would get better again. If things start going south, a look at my diary might tell me that things weren't going so good at this time last year either, but soon they got better again, so I don't need to hit the panic button. Also, it shows me how far I have come.

It helps to accept ups and downs as a part of bipolar disorder. If things are going south, the more I worry about it, the worse it will get. If I accept that now I am having a bad time, and that is okay, then it is only half as bad. Once we find a medication that works fairly well, it is good to stick with it. It isn't good to keep changing at the drop of a hat.

When I was at Green Pastures, one man liked to say, "We're all in the same boat. Let's go fishing!" And go fishing we did. We changed the definition of "funny farm" to mean a place where there is lots of love and laughter. We even learned to laugh at our problems because people would say funny things like, "Well, if we were all there, we wouldn't be here." If you are in the middle of mental illness and you can find something to laugh about, I think you are going to get better.

In the summertime, I used to have highs. My mind would go hundred miles per hour, and I would feel crazy like I had had too many energy drinks. The best way I found to calm down was to take a hot soak (lying down). This works well for anxiety, also. Another thing that worked well was to harness that energy and throw it into writing. That is when I could write the best. It helped to find some work that takes concentration or play a game.

This is my favorite shortcut on the road to recovery, "You can't help someone up a hill without getting closer to the top yourself"

We usually hear the negative side of bipolar disorder, but I'm going to tell you what it's like for me on the good days. (It might not be like this for everyone, because there are different kinds of bipolar disorder.)

Some days I am gloriously happy, and it is hard to be sad about anything.

When I get really enthused about something, I have the energy and drive to get it accomplished and the bravery to do things I would normally be scared to do.

It is easy for me to see the positive side of negative things.

Having bipolar disorder gives me more compassion and helps me understand others better.

My spring of inspiration of things to write about never runs dry.

And most of all, because of all the bad days, I learned to know God better as my Father and Friend.

And so I choose to accept bipolar disorder as a gift; wouldn't you?

Connecting Links

Name withheld

In the following story, God revealed portions of His way to different people so a work could be enabled. No one involved understood His entire plan, only a portion. Several people saw some of their direction utilized and some direction discarded. That did not lessen the value of their input. How would things have developed if even one of the people involved had drawn back and not shared his heart?

The story is about a young boy (we can call him Grant) who suffered abusive behavior during the second and third grade. This resulted in his acting out in various ways, some unacceptable. Over the next year or so, a variety of suggestions to correct the behavior were considered and tried with variable rates of success. By now, Grant was in the fifth grade.

On one particular morning, Grant's behavior at school was inappropriate. The principal called the board chairman (we can call him Tony) who authorized that Grant should be sent home for the day. Friday afternoon and Saturday were a low time for all involved. Somewhere in this time period, God revealed the first link for His way forward. A sister in the congregation called the parents and shared that she had a heart for Grant and offered to help in any way she could. Grant's parents received the offer gladly.

Another link. On Sunday, Tony was out driving when Grant's father tried to call him with that offer, but service was bad, and the calls were dropped. Bad cell service was not a problem for God, and awhile later, Tony got a feeling that it was time to bring in additional help for this classroom. *Another link.* He thought a youth girl would be adequate. (Later this was discarded by the board.)

On Sunday afternoon, the board decided to make it a three-day suspension as outlined in the handbook. This was shared with the parents and brought on additional despair. The family went to an evening singing event but things did not go well for Grant. At 11:45 P.M., a message was put on the board chat that the parents' nerves were shattered. Even at that late hour, the message was read by

all five board members within a minute or so. Everyone was awake. One board member said, "We need to pray earnestly."

Monday started poorly for Grant. He was at home, but, thankfully, his outlook slowly lifted during the day. A caring couple from the congregation who had heard of the situation (*another link*), sent messages to Grant through his mother's phone throughout the day. These were simple messages affirming that he was loved just the way God had made him. Tony spoke with Grant's father, and they discussed their feelings about extra help. Monday evening was regular board meeting, and at the meeting, they voted to move forward with getting extra help. *Another link.*

On Tuesday, day three of the suspension, Tony called Grant's father letting him know the board's decision. Grant's father called the sister who had volunteered to see if her feelings were still the same. In a few minutes, he called back, crying for joy, saying she was willing to come to school and help. Her name was shared (we can call her Pam) for the first time. Tony called Pam at church where sewing day was in progress. Pam shared her vision for helping Grant as well as integrating the whole class in the project. Amazingly, she was prepared to start the next morning when Grant returned to school. That evening, the board shared this plan with the current teacher of the class. She received it without reservation saying that it was her vision as well. *Another link.*

After this meeting, the board met with Grant's father and the staff from the congregation. *Another link.* Everyone felt at rest with the decisions made. During this time, the principal said that for some reason, he felt to offer to teach occasional sessions on trust-based therapy in the class. He did not even know exactly how he would conduct them. However, the idea caught hold, and he was encouraged to move forward. *One more link.* Other ideas he had were discarded. *Also links.*

God is blessing this effort today! His teachers and parents attested to an improvement in behavior within a few days. Grant's self-esteem is improving. Everyone is more relaxed.

Let's be open to the impressions God gives us on different ways to care. May we be willing to have our impressions accepted or discarded and humbly be of service to Him.

Review

There were two special speakers at the senior care conference in Brooksville last fall. One was from an architectural firm in the United States. He spoke on master planning. Among other things, he said that in setting up a

care facility, or any other project, for that matter, it was important that all sectors of the project worked together: planning, financial, building, and management, from the beginning till the end. As a corporation, they had found that the completion of the project was shortened substantially and fewer adjustments needed to be made at the end of the project if this process was implemented.

The second speaker spoke on why employees leave the workplace and how to keep them longer. She stressed the importance of management-and-employee relationships. She talked about how the work force was changing, the differences in mind-sets, and how each generation (traditionalists, millennials etc.) needed to be open to each other and connect.

Statistics today indicate that over half of the homes in the country are single-parent homes. A point to consider is the fact that more than 50 percent of employees in the church-run facilities are not members in our church. This puts the onus on management to understand what is happening in the work place and in the work force in the country and make adjustments if retaining employees is important, and who would say it isn't.

Feedback indicates that both speakers were appreciated. They did a great job of understanding our community culture enough to adjust their presentations so they were informative and motivating.

- Baby boomers—born 1946-1964: Attitude: If I work harder, I can have more. If I start my own business, I can improve. They were workaholics, they worked hard for their children, they wanted to be middle class, and they had the trophy mind-set. (They had only prizes for first, second, and third places)
- Generation X—born 1965-1980: They were more formally-educated people, more than half of the women population went into the workforce at this time, and baby boomer women went into the workforce at this time, as well.
- Millennials (Gen Y)—born 1981-1996: As this generation grew up, they were monitored heavily by their parents. The parents of these children were afraid for their children largely because media explosion broadcasted bad news and danger. No more bike rides for children to Dairy Queen—too dangerous.
- Generation Z—born post 1997: These people are just starting to hit the workforce.

The above is very brief coverage of the generational mind-sets. Do they fit into our Church culture? My thinking was that they did surprisingly well. However, I also found that many of the points are influenced positively because of our Christian standards and Biblical beliefs. For example, the Bible teaches subjection to one another; hence the differences between traditionalists and millennials are lessened. I found it revealing as I analyzed my attitudes and mind-set during her presentation.

Review—Generational Mind-sets

At the fall elder care conference in Mississippi, Cara Silletto did a seminar on employee retention. She covered many interesting points. In her book, *Staying Power, Why Your Employees Leave and How to Keep Them Longer*, she has a chapter titled, “The Evolution of Our Workforce by Generation” with a subheading, “It’s not about birth year; it’s about mind-set.”

Below is the suggested breakdown of generations used by Cara Silletto in her presentation.

- Traditionalists (silent generation)—born pre-1945:
They wanted safety and security for their families; very basic, no frills necessary.

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A Star

Tim Penner

Who has the most important position in a care facility or on a church committee? Who is most important on the board of directors? Who is the most important person in the congregation?

The search for position and recognition tends to play around in peoples' minds. If it's actually a pursuit, it's most likely mixed with a search for honor. Then when the other person gets a position, envy creeps in easily.

The mind-set that I am only a cleaner or a health care aide is another angle of the thought pattern. Also, people standing by observe and influence the mind-sets by what they say or imply.

Charles Swindol writes: “When I was in high school, one of my favorite courses was drama. On our drama team, we had a young red-haired fellow whose name was Sam, who was so good in every part he took that he easily outshone the rest of us. He was so good, in fact, that he

soon became the object of much jealousy among many of the other budding actors. This became such a problem that, when it came time for the senior play in Sam's senior year, the director, who was getting so much flak, finally said, 'Okay, I'm just gonna give him the part of the butler.'

"Now the butler did not have one spoken line in the play. The only thing he had to do was stand in the same place in every act, every scene, throughout the play. Not much you can do with a part like that, right?"

"Well, guess what. Sam still got the award for the best actor in the senior play. He didn't have one line, but what a range of expressions he gave the audience—such caricatures, such faces, and such movements. In fact, the play was a flop except for him. Even as butler, without one

line, he did not blend into the scenery of nothingness." No matter what your position or what role you play in life, you're not unimportant. What role has God given you? Whatever it is, God says, "You're standing before Me, and I want to use you at this moment."

God needed someone. He found Elijah, a man from nowhere, an unknown man, but a man committed to God. And, today, God is looking for such people, people to play a role in the great play of life. And no matter what role you are given, in God's eyes, you are a "best actor" or a "star" if you give your best. Sometimes you choose what part to play and sometimes situations put you in a part that is not your choosing, but in both situations, there is always grace to be a star. Not for your own glory, of course, but for the honor and glory of God.