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Andrea M. West

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Faith Community Nursing – A Specialty within the Profession of Nursing

Many years ago Edmund D. Pellegrino (1983) published an article in the *Journal of Allied Health* titled “What is a Profession?” He explored the discussion at that time about what distinguishes the “traditional professions”, i.e. physicians, lawyers, nurses, clergy, from business, trades or crafts. He answers by saying “… there is such a justification and that it can be found in the nature of the human needs the professions address and the human relationships particular to them” (p. 169). He goes on to write that “professions” are grounded in the interpersonal relationship between the practitioners and those who seek their assistance. He lists four characteristics:

1. “Professions deal with humans in special existential states of vulnerability in which there is some wounding of the very humanity of the person in need.

2. The needs of the professions address are of the most personal kind.

3. In order to be helped, the patient or client must open up the most confidential aspects of his or her life, revealing all its weaknesses, foibles, improprieties, and sins.

4. The person who seeks help must trust that the physician, lawyer, or minister has the knowledge he or she claims to have and will use is in the best interest of the client.”


With these thoughts in mind, we can all agree that nursing can legitimately be called a profession.

Other characteristics that have been attributed to a “profession” include:

- Study or mastery of specialized knowledge;
- Training or education to apply the knowledge;
- Adherence to a code of ethics;
• Representation by a professional association which maintains self-regulation, self-governing and self-policing authority;

• Obtaining a certificate or licensure showing mastery of the knowledge; and

• Maintaining standards through the professional organization.

Professional organizations have been a part of the nursing profession in the United States since the National League for Nursing was organized in 1893 as the American Society of Superintendents of Training Schools for Nurses; the name was changed in 1912. The American Nurses Association, holding its first meeting in 1896 as the Nurses Associated Alumnae of U.S. and Canada, was the organization that represented all nurses; its name was changed in 1911. Both of these organizations continue to represent the nursing profession to the public. Today, there are over 100 nursing organizations and many other international nursing organizations that represent specialty practices within our profession (Matthews, 2012).

So what are the functions of a professional organization? Matthews (2012) provides an excellent history of professional organizations in our profession. Her major focus in this article is on their role in advocating for the profession and for nurses. She points out that they “speak for nurses and nursing, based on their mission and vision statements that are specific to their specialty interests, goals, and purposes” (p. 4). In this role of advocacy, the specialty organizations educate the public, policy makers, and healthcare professionals on specific issues related to the specialty. In addition to an advocacy role, the organizations disseminate professional knowledge and engage in professional development. Matthews states “when greater numbers unite in one voice, stronger and more powerful arguments can be advanced to achieve advocacy outcomes” (p. 9).
It was with these thoughts in mind that a group of faith community nurses began discussing the possibility of a professional organization solely for faith community nurses. As a result of these discussions, Faith Community Nurses International was conceived in the fall of 2013. Initial presentations were made at the Westberg Symposium in 2014 and 2015. A vision statement, guiding principles and goals were developed that focused on faith community nurses. Memberships were accepted starting in 2014 at Westberg. Since that time, the members have ratified bylaws for the organization. The initial Board of Directors has been selected and will be meeting in late October, 2015, to move our new organization forward.

Wait, I know what your next question will be – Why do we need another professional organization for faith community nurses? We have the Health Ministry Association. In answer to that, I would suggest you access the Health Ministry Association web page. It is clear what the focus of this organization is: “The Health Ministry Association (HMA) encourages, supports and empowers leaders who integrate faith with the promotion of health and wholeness in local communities” (http://www.hmassoc.org). HMA was founded in 1989 as an organization that would combine all the professions involved in health ministry in a congregation, nurses, clergy, and health ministers. It worked with ANA to develop the Scope and Standards of Practice: Faith Community Nursing and with American Nurses Credentialing Commission (ANCC) to initiate a portfolio process for certification for our specialty. But the membership is not solely nurses and the stated focus is not nursing.

Your next statement may be “But I’m a Friend of the Center (Church Health Center) so I don’t need to join another professional organization.” The Church Health Center in Memphis is not a professional organization for this specialty. It serves as a Resource Center responsible for developing, among other things, the curriculum for the practice and resources to assist faith
community nurses in their practice. Your membership provides copies of the quarterly newsletter *Perspectives: A Newsletter for FCN* and other benefits such as lower cost for educational activities and materials (Church Health Center, 2015).

This brings us back to Faith Community Nurses International, a new organization for faith community nurses. The goals of our organization are:

- Advance faith community nursing as a nursing specialty.
- Connect faith community nurses worldwide.
- Promote financial sustainability of the specialty.
- Support research in faith community nursing.
- Provide continuing education for FCNs.
- Develop an on-line, peer reviewed nursing journal.
- Advocate for FCNs locally, nationally, and internationally.

These goals coincide with the role of a professional organization discussed by Matthews (2012). While the organization is just starting, the free on-line journal, *International Journal of Faith Community Nursing*, has already published two issues. You can access the journal at [http://www.digitalcommons.wku.edu/ijfcn](http://www.digitalcommons.wku.edu/ijfcn). There are research and practice articles you will want to read!

So why do we need another professional organization for faith community nurses? Because only by speaking with one, unified voice can we move this specialty practice forward in the health care of our congregation, our communities, our country and our world.
References


http://www.churchhealthcenter.org/fcnhome


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