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What’s Most Important: Starting Older Adult Ministry
By Michele Hendrix

What is the purpose of an Older/Senior Adult Ministry?
- Create an awareness about the value, need, and the role of older adults and older adult ministry with and through older adults
- Advocate on behalf of older adults and older adult concerns
- Strengthen intergenerational relationships among, children, youth, busters, boomers, builders, and elders by participating in their activities periodically
- Help older adults continue to grow in the faith and be actively involved in the life of the church
- Provide opportunities for worship, learning, fellowship, faith sharing and service
- Educate, to raise awareness about positive aging and quality of life issues
- Shed light on the hidden impacts of issues such as family caregiving, elder abuse on the elderly, and the many challenges to their families.

Where do you begin?
To begin you must determine programs currently being offered by your congregation. Also those within your community, then establish a method of sharing this information. Explore ways that the church can expand ministries by, with, and for older adults and pursue ways to connect with one another in intergenerational opportunities.

Our Older Adults are a group of Disciples that are an invaluable resource in the ministry of the church. The practical experience, wisdom, attitude, and example of many older people make them especially valued gifts to the life of the Church.

Now is the time for the church to offer ministry to its increasing numbers of older adults and to benefit from ministry they can offer. God calls all of us – every generation as well as the elderly, which enhances the richness of connection in community life within the church.

Why Older Adult Ministries?
The senior-citizen cohort is growing three times faster than the rest of the American population. Of all those who have lived to age 65 - in the history of the world - two-thirds are alive. As life expectancy has increased (30 years in the past century), the age range of what most churches call older adults can now be 40 years or more.

Older Adult/Senior Adult Ministry has become Intergenerational! The buzzword in the church today!
In addition to extended longevity, there are at least two other dramatic changes occurring in today’s older-adult generation. Forward-looking churches will do well to consider both in their strategic planning. The first change is that today’s “new seniors” are much different from their parents or grandparents in attitude and behavior. The second change is the emergence of an entirely new generational slice of the pie within the traditional older adult population - “middle adults”.

People at each stage in life have unique goals, challenges, and priorities. Some creative churches are restructuring their adult educational ministry around these life-stages with staff, classes, support groups, and outreach targeting each life-stage. The fact is that the church cannot afford to ignore the “hidden treasure” older adults constitute for the completion of the mission of the church.

What are the Demographics?
Today’s demographics and insights are compelling for clergy and lay leaders to consider:
- Today over 14.5% percent of the U.S. population is age 65+
- By 2030, the 65+ age group will comprise 20% of the population
- Within 10 years, the high-risk age 85+ population will increase by 40%, exacerbating a crisis in caregiving and a rise in adult abuse
- For every reported incident of elder abuse, neglect, exploitation, or self-neglect, approximately five go unreported
- A substantial percentage of leadership gifts and services are provided by older adults, the fastest growing age group everywhere
- The unprecedented rapid growth of the older adult population nationwide, and worldwide, and the resultant challenges to the social and economic system, demands responses from the church
- Presbyterian Church (U.S.A) - 2001 the medial age = 58; 2014 the median age = 63.

Who are Middle Adults, Older Adults and Elders?
For the purpose of this article Older Adult Ministry has been delineated into three groups;

**Boomers** - Ages 55-72
This is a time in life of growth and positive challenge, when people devote themselves more directly to their own interests and talents.

**Builders** - Ages 73 and up
This is a time of some general physical slowing down, yet many with minds as sharp and quick as always.

**Elders** - Ages 80++
Those who live very long lives and possibly the wisest members of the community. Many
have experienced some form of physical or cognitive slowing down. They might need our care, but we need their wisdom. As a society, we have the most to learn from this group, because they paved the path where we walk. We stand on the shoulders of giants!

Aging (maturation) is as much a spiritual growth process as it is a psychological and physical growth process. Successful older/senior adult ministry includes:

- A shift in thinking, away from a 'senior group' mentality and toward a ‘maturing adult ministry’ mentality.
- Speaks’ to everyday, real life issues, and to times of personal transition of maturing adults.
- An honor of diversity...of age, stage, personality, ethnicity, and spirituality.

Maturing adults need a new vision of aging that:
- Lifts them up
- Accents the positive purpose of later life and
- Connects them with God’s abundant grace.

The effects of aging encompass the emotional, physical, social, financial, and spiritual aspects of a person. Older Adult Ministry can provide a comprehensive plan to raise awareness and address the emerging crisis in health, caregiving, and faith issues that will cross generational and economic lines with emphasis on support of congregational programs for older adult ministry. As you begin it is a good idea to determine what is already available, and to ascertain what is needed.

According to statistics, the “Baby Boomer” generation is becoming the largest older adult population in world history. Our older adults are living longer and want to maintain their active and productive lives. As this unique generation of Baby Boomers age, and our congregations become grayer, attention is being drawn to both the reality of aging in general and to the implications that aging will have on the importance of all generations within the church.

In our roles as leaders, we are confronting ageism and the perception that those who are aging are mostly a burden on the church. A common stereotype about older adults is that they are caretakers, not caregivers; resource consumers, rather than resource providers. The truth, however, is that older adults represent considerable value to a local church. We must boldly address the moral issues related to caring for them, provide examples of successful older adult ministry and caregiving programs, and challenge the church to restore broken connections across the generations.

Active Older Adults can take responsibility for their own learning and want their life experiences to be valued and integrated into this learning. Frailer older adults may not be able to be active participants in their congregations, but they do have a continuing need, and responsibility to learn and to teach. When planning for an Older Adult Ministry keep everyone in mind.
Older adults have different levels of faith formation just as other ages do. We begin by being open to the Holy Spirit leading us in ministry, and we must not be afraid of where this may take us.

As you begin, ask older members to take on a servant ministry. Find ways to encourage them and give them the opportunity to share their stories with the entire congregation. Seize the moment to reach out and explore, with our older members, ways to continue our life-long learning and faith development pilgrimage. Traditionally, the role of older people in congregations has been limited, either by choice or circumstance. Society has viewed older adults as a liability rather than an asset. Congregations have seen aging as a time of decline rather than a time to see the potential for a renewed ministry. However, many of the myths and stereotypes of aging and older persons are changing.

To begin you must determine programs currently being offered by your congregation. Also those within your community, then establish a method of sharing this information. Explore ways that the church can expand ministries by, with, and through older adults and pursue ways to connect with one another in intergenerational opportunities.

We know that young adults act different from older adults. They think differently; they hold different values; they pursue different priorities. These changes are not generational, but gerontological. Think, talk, and pray about the new opportunity your church may be facing. It is the opportunity of creative new ministry and outreach to the aging Boomers, Middle and Older Adults, and our Elders.

Older adults are here; and more are coming each year. While some senior ministries reflect a culture of bygone years, yours can be a model of invigorating new life and growth. More and more churches are realizing that the graying of America presents new possibilities to influence and reach adults who truly are receptive to the good news. Why not join the excitement? I urge you to invite, ask and encourage our older members into ministry, and I believe you will be surprised and overjoyed!
Caring for a family member or friend with a chronic condition can be physically, emotionally, and financially draining. This highly effective, evidence-based, self-care education program for family caregivers, builds the skills caregivers need to take better care of themselves as they provide care for others. Caregiver participants learn to minimize the potentially negative impacts of caregiving in a six-week program emphasizing self-care and empowerment. Research on Powerful Tools for Caregivers (PTC) has consistently shown increased self-efficacy for caregiver participants.

Become a Certified PTC Class Leader
This two-day leader training prepares and certifies PTC class leaders to successfully co-lead the six-week Powerful Tools for Caregivers class series. The training program includes:

- Scripted curriculum for both the caregivers of adults with chronic conditions as well as the caregivers of children with special needs classes
- Intensive, experiential, and interactive training provided by a team of certified PTC Master Trainers
- Learning and practicing group leadership and facilitation skills
- DVDs used in caregiver classes
- Continental breakfast and lunch
- One-time certification fee

Certified PTC Master Trainers will conduct the class leader training so you may bring Powerful Tools for Caregivers to your community. Class leaders will be fully prepared to co-lead Powerful Tools for Caregivers classes to groups of up to 15 family caregivers.

Improve the Lives of Family Caregivers in Your Community
Powerful Tools for Caregivers has served caregivers of adults with chronic conditions since 1998. After successful pilot classes, PTC is pleased to expand the population of caregivers served to include caregivers of children with special health and behavioral...
needs (including minors and adult care receivers with special needs). Please note separate scripts for these distinct caregiving populations are used. The program’s self-care emphasis remains the same. The examples and scenarios with the tools and a new DVD have been tailored to address the specific needs of each caregiver population.

Caregivers benefit from the PTC 6-week series of classes whether they are:

- Spouses/partners of an adult with a chronic condition
- Adult children of aging parents
- Parents of children with special health and behavioral needs
- Grandparents raising grandchildren with special needs
- Long-distance caregivers
- In differing stages in their caregiving role
- From diverse rural, urban, or ethnic communities
- English, Spanish, and/or Korean speaking

**Powerful Tools for Caregivers is:**

- Proven to produce results
- Easily implemented
- Attractive to funding sources
- Based on solid research
- Comprehensive and well packaged

**What do you have to offer?**

Class leaders may be professionals or volunteers from healthcare, social services, or faith-based organizations. Class Leaders are encouraged to enroll as local teams of two but may also team with previously trained Powerful Tools for Caregivers class leaders to conduct six-week class series in their community.

Potential class leaders must have:

- Excellent communication and organizational skills
- Flexibility, openness, and a genuine interest in facilitating positive change for family caregivers
- A sponsor organization to support ongoing program sustainability
- Commitment to co-leading two, 6-week series of classes within a year of becoming trained
What people are saying about Powerful Tools for Caregivers

“Thank you for having developed an incredibly simple program where family caregivers can find the tools they need to manage their lives and care for those they love!”
- PTC Class Leader

“There was a common bond, we were all dealing with some of the same issues. We shared our stories and learned ways to cope. I learned that it was important to take care of me.”
- PTC Caregiver Class Participant

Class Description

Class #1: Taking Care of You
This class sets the stage for the entire course. It emphasizes that the focus is on “YOU, the caregiver, not on the family member receiving care,” and that caregivers will develop a “box of self-care tools.” The challenges of caregiving and significance of caregiver self-care are dramatized through a video. Beginning in this class, caregivers make a weekly action plan for self-care.

Class #2: Identifying and Reducing Personal Stress
Four steps are presented for effective stress management: (1) Identifying early warning signs, (2) Identifying personal sources of stress, (3) Changing what you can change and accepting what you cannot change, and (4) Taking action. Tools to reduce stress are discussed. Participants learn how to change negative self-talk – which increases stress and erodes confidence – to positive self-talk. Beginning in this class, caregivers learn relaxation activities that are easy to incorporate into their daily lives.

Class #3: Communicating Feelings, Needs, and Concerns
Participants learn how to communicate their feelings, needs and concerns more effectively by using “I” messages. Through brief dramatizations, participants experience the impact of both “I” messages and “You” messages (which tend to sound blaming and put people on the defensive). They practice changing “You” messages to “I” messages, and identifying when statements beginning with the word “I” are actually “Hidden You” messages.
Class #4: Communicating in Challenging Situations
Participants practice two communication tools – assertiveness and Aikido – which are helpful in difficult situations. They learn a four-step process, called DESC (Describe, Express, Specify, and Consequence) for using the assertive style of communication. With Aikido, participants learn how to align and find “common ground” with a person who is distressed. A segment highlights guidelines for communicating with a person who is memory impaired.

Class #5: Learning From Our Emotions
The overriding theme of this class is “our emotions are messages we need to listen to.” It emphasizes that feelings occur for a reason and that feelings are neither good nor bad. Focus is on identifying constructive ways for dealing with difficult feelings – especially anger, guilt, and depression – and resources for professional help.

Class #6: Mastering Caregiving Decisions
Focus is on the internal emotional process caregivers go through when they experience a life change. Tools for dealing with changes and for making tough decisions – including a seven-step decision-making model and the family meeting – are discussed.

For more information about the Powerful Tools for Caregivers program go to their website at: www.powerfultoolsforcaregivers.org

Ms. Michele Hendrix is the President of POAMN, and a Master Trainer for Powerful Tools for Caregivers. She has worked for over 25 years to advocate, educate, involve, and motivate people in the process of aging and self-care; and to recognize the connections among church, health care, non-profit, community, state, federal, and local agencies while encouraging adults of all ages in managing their self-care, chronic conditions, respite, and caregiving roles. Michele has focused her work on intergenerational and interfaith programs for adults, evidence-based health promotion, ministry programming and development, respite for caregivers, and fall-prevention programs. She is currently working as an independent contractor, trainer, and workshop leader for AGE of Central Texas/CaregiverU, health care systems, faith based organizations, churches, senior centers, aging networks, and non-profits. Concentrating her efforts to provide programs and resources to partnerships, continuous quality improvement, and ministry and program development to meet the needs of aging seniors and boomers with an emphasis on caregiving and respite care.
Worship Outline for Older Adult Sunday: May 7, 2017

By Rev. June Begany

Idea:
Match youth or younger members with older members. Find out the Bible verses or stories that have been important to them. Discover the stories and experiences that go with these verses. Then use some of these verses as the basis for the service. Perhaps the older adults could actually tell their stories as part of the service or as a time with children. The special verses might be on the bulletin cover or put up in the fellowship hall. Perhaps later in the year the youth or younger members could be encouraged to share their own favorite or meaningful verses.

Silent prayer before worship: For the gifts of age as well as youth, for experience as well as spontaneity we give you thanks and praise, O God. may we rejoice in the diversity you send this community as well as what you have given to each of us. Amen.

Welcome and community news

( Introit or opening by choir)

Call to Worship
One: I was glad when they said to me “Let us go to the house of the Lord.”
All: We come running and on walkers, with hurried steps and halting to join together as your called together people.
One: This the day you have made for us, our Creator, a day for us to join in praise and worship of you.
All: We give thanks for this day and for this world, for this whole creation which you have called good.
One: You gather us together as our good Shepherd.
All: For your care of us all of our lives we praise your name.
Unison: Let us worship God.

Opening Hymn
#821 How Can I Keep From Singing?
#464 Joyful, Joyful We Adore Thee
Glory to God, or Presbyterian Hymnal

Passing the Peace

Call to confession
O Lord, we know how easy it is to go astray, to depart from your word and your way. Hear our confession and restore us to your family.
Unison Prayer of Confession

O Lord, you have created all of us, but sometimes we want to look only to youth and ignore our elders. Sometimes we act as though only the oldest, the longest standing members have anything to offer. Remind us O God we are all your called out people. Forgive us when we forget that and ignore one group; by age or race or gender or ethnic origin. Help us to see you in each person. Restore us all by your grace into one family.

Time of Silent Confession

Assurance of Pardon

One: This the good news we have received that anyone, no matter what age or origin, or other status is forgiven for when they have strayed from God and are now welcomed by God to the table God has spread before us if they put their trust in Jesus as Lord.

All: Thanks be to God for this good news.

Gloria Patri or other song of thanks and praise

Time with Young Disciples

Anthem

Unison prayer for Illumination

Your word is a table set before us that sustains us all of our lives. May our hearts and minds be open so we will be nourished by these scriptures and this worship and then be ready to be Christ’s disciples, going where you send us. Amen.

First Lesson Psalm 23

Second lesson John 10:1-10, or I Peter 2:19-25, or Acts 2:42-47, or Isaiah 35:3-4, or other choice of the preacher or favorite verses of older adults in the congregation

Sermon

This may be an opportunity to invite a local hospice chaplain or other chaplain or those ministering to older adults to preach.

Middle Hymn #172 My Shepherd Will Supply My Need #803 Glory to God

Affirmation of Faith Apostles Creed or excerpt from Belhar Confession
Prayers of the People and Lord’s Prayer if not included in the communion liturgy

Offering

Doxology

Unison Prayer of Thanksgiving
For all the gifts you give us O God, gifts that come with age as well as those that are part of youth we give you thanks. In response to your greatest gift, Jesus Christ we respond with these gifts we offer. May the gifts and the givers be blessed and may the gifts be used to bring good news to your world. In Jesus’ name we pray. Amen

Communion Liturgy

Invitation

Call to Prayer
One:  Lift up your hearts.
All:   We lift them up to the Lord.
One:  Let us give thanks to the Lord our God.
All:   It is right to give God our thanks and praise.

Prayer of Thanksgiving  (Prayers of the People, Lord’s Prayer and Affirmation of Faith may be included here.)

Consecration of the elements

Sharing the elements

Unison prayer after communion
Good Shepherd, we give thanks for this supper shared with your Son, Jesus. May we remember that you are there to guide us and refresh us all of our lives. You wish to lead all of us to green pastures. For your great love and care we offer you our thanks and praise. In Christ’s name we pray. Amen.

Closing Hymn
#514  Let Us Talents and Tongues Employ  Presbyterian Hymnal
#526  Glory to God

Charge and Benediction

Postlude
Great Prayer of Thanksgiving
(from closing worship POAMN/ARMSS Conference, October 14, 2016)

By Rev. Tom Tickner

Your mouth was filled with laughter, God of our every moment,
as you sang creation into being.
You showered the earth with your peace and kindness,
filling our lives with light.
We grew impatient in the garden,
grumbling that there was nothing for us,
and hearing the cries of seduction,
offered our lives to their deadly songs.
You sent prophets to us,
so we might be drawn to you,
but like disobedient children
we closed our ears to their words.
Hearing the silent cries of our deepest hearts,
you sent Jesus to us, to lift us to your presence.
The heavens rang with shouts of joy.
So with wilderness wanderers
and ungracious grumblers,
with those who have been offered life,
with those who offered gratitude for simple gifts
and all who seek to follow your Son,
we join our voices in praising your name.

All: #552 Holy, Holy, Holy

L: Holy are you, Restorer of broken lives,
and blessed is Jesus Christ, Light and Life of all.
Knowing how we choose the shadows,
he became the Light to illumine the way back to you.
Hearing our hearts breaking in grief,
he became the Love which would defeat sin's evil.
Seeing you weep over your poisoned creation,
he became the Compassion which would save the world,
including your children.

As we remember his life, his ministry, his death;
as we follow him through Good Friday into Easter,
as we shout with joy for his resurrection,
we speak of that mystery we call faith:
All: #553 Christ Has Died; Christ Is Risen

L: Pour out your Spirit.
   Silence our foolish grumbling,
   so we might hear you calling us to the Table,
   where the simple gifts of the bread and of the cup
   are filled with your Spirit.
   As you heal us with the brokenness of Jesus,
   send us to bring hope to the world.
   As you satisfy us with the joyous taste of grace,
   may we go forth to offer mercy and peace to
   everyone we meet.

   And when our pilgrimage has ended,
   when we join our sisters and brothers
   of every time and place around your Feast,
   the redeemed of the Lord will lift their voices
   forever singing of your steadfast love,
   God in Community, Holy in One.

Hymns from Glory to God

Rev. Tom Tickner is Minister of Spiritual Life at Grace Presbyterian Village in Dallas. Rev. Tickner served a Presbyterian Congregation in Oklahoma for 19 years before moving to his current position. At Grace Presbyterian Village, Tom provides opportunities for the community of Grace to continue to grow in faith, to be nurtured in spirit, and to receive God’s care during difficult transitions of life. Tom has served as pastor at Grace for 13 years. Tom has been a part of POAMN since 2003 and has served on the Executive Committee. He is also active in Grace Presbytery, serving on the Committee on Ministry of that presbytery. Tom is married to Susan, who is Director of Music at Oak Cliff Presbyterian Church in Dallas. They have two married boys, one in New York City and one in Austin, Texas and two very smart and beautiful granddaughters.
Walking the labyrinth or walking prayer or meditation has become one of the means of prayer people have been using more frequently in recent years. However, for many this becomes a challenge. Not only may there not be a labyrinth nearby they can walk but the walking itself may be a problem. One way to give people a feel for this type of meditation is to use your church sanctuary for the walk. You could also set up rows of chairs in a fellowship hall or dining room. Using the pews or chairs provides a way for people to sit, or stop their wheelchair at each prayer station.

What is important is that like a labyrinth, the path should lead to a center, such as a communion table or table set up with cross, candles or other pointers to God. A person walking or using their wheelchairs should be able to start at station 1 and move back and forth along the rows going from station to station until they reach they center. The center is a place of rest, of listening to, waiting for God. The person only rests a while. Then they move back out into the world.

To set up the stations you need an odd number, somewhere between 5 and 15 stations. Each station should have a focus verse, 2 or 3 prayer suggestions and possibly a question for further reflection. It is helpful to create a packet with all the stations listed so people can take that with them for further prayer and reflection. When you place the reflections at the particular stations (a pew or a chair) be sure that the type is large enough for those with sight issues to read.

It is helpful to start at the back of the sanctuary or row of chairs and weave back and forth, a bit like stringing lights or garlands on a Christmas tree. The middle number should be at your center – your communion table or cross on a table. As you guide people back out from the center have your stations (numbers) at the opposite ends of the pew or row from the numbers that lead in to the center.

**Example**

```
5
4  ←  6
7  ←  3
  →↑   →↑
2  ←   8
9  ↓   1
```

Enter → ↑
There are any number of subjects or passages one might choose for your meditation: the 7 days of creation; verses from a psalm text; a number of proverbs on a subject; the beatitudes; verses from the Presbyterian Bible study of the year; verses from texts on various subjects of a sermon series. Included here is one meditation series, created as a Lenten experience of looking at how the Bible encourages to treat “the other.”

Station 1
Ruth and Naomi  
_Book of Ruth_
When Naomi and family traveled to Moab Naomi was a stranger. She and Ruth, her daughter-in-law became friends. When they traveled back to Israel, Ruth was a stranger in a new culture.

When have you been helped by someone from another culture or ethnic group? What is your experience of becoming friends with someone from another culture?

Prayer opportunity:
1) Give thanks for people you know who come from a different background than yours. Celebrate the specific gifts they bring to your life.
2) Think of a specific area where friendships across cultural or ethnic lines would increase peace in our world: Israel/ Palestine; Mexicans and US citizens on our southern border.

Station 2
Abraham (Abram) and Sara (Sarai)  
_Genesis 12:1-4_
Abraham and Sara left their home in Haran and journeyed to a new place, unfamiliar to them. When have you moved, or even traveled to someplace that was unfamiliar? What was hardest to get used to in the new place? What did you miss?

Prayer opportunity:
1) Pray for yourself to stay open to the new opportunities in new places.
2) Pray for all people who are moving and facing new challenges.
3) Pray for all refugees who have to start over.

Station 3
God’s instruction to the Israelites after the Exodus and years in the desert.  
_Deuteronomy chapter 6 and 10:19_

God commands the Israelites to love the stranger for they were once strangers. Who is a stranger in your neighborhood? Your church? Your place of work? What would you need to do to get to know them? To welcome them? What gets in your way of extending welcome? What is the difference about this stranger that challenges you?
Prayer opportunity:
1) Pray for particular strangers – for their needs and for your situation.
2) Pray for all strangers who might come to your church in the next week or month – that they may encounter God there and may find a welcome.

**Station 4**
**Elisha and Naaman**  *II Kings 5:1-15*
Naaman of Syria needs to seek help and healing from Elisha of Israel. Asking help from someone of another race or cultural background is often a challenge for us. When have you had to seek such help? What was the outcome? What did you learn about yourself and the other person? Why are we reluctant to seek help from someone who is “different” from ourselves?

Prayer opportunity:
1) Pray that the gifts and talents of people from all cultures and groups may be recognized and any prejudice there might be removed so healing (whatever that might mean) can happen.
2) Pray for a specific situation in your own experience.
3) Pray for someone who needs to seek healing and is afraid or unwilling to do that.

**Station 5**
**Jesus and the children**  *Luke 18:15-17*
Often people dismiss others who are younger or older. Age divisions create barriers for learning, for hospitality, for friendship. Jesus welcomed those excluded by his society.

Prayer opportunity:
1) Pray for one or two people who are either much older or younger than yourself. What might God be wanting you to learn from these relationships?
2) Pray for groups excluded in our society by age.

**Station 6**
**Jesus and the Syro-Phonecian woman**  *Mark 7:25-30*
Jesus tells the woman that she is not worthy to receive help and appears to call her a dog. We know that words and names matter. Such words can hurt. When have you been called a name that really hurts you? How does name calling lead to bullying?

Prayer opportunity:
1) Pray for specific people who have been hurt by name calling or bullying.
2) Pray for people tempted to use violence to strike back at people who have hurt them through their words.
Station 7  
The loving Father and 2 sons  
*Luke 15:11-16*  
Sometimes our divisions come from within our own households. We disagree with siblings or parents. We want things to be different. What is the most difficult thing you have to deal with in your family? Is there one member in particular with whom you have disagreements? What are the possibilities in this situation?

Prayer opportunity:  
1) Pray for that member(s) with whom you disagree. Ask God to show you a new path.  
2) Pray for all families, especially those where disagreements have led to violence or estrangement.  
3) Pray for groups or individuals who try to bring reconciliation.

Station 8  
The Good Samaritan  
*Luke 10:29-37*  
Often there are situations which need attention but from a stranger – a stranger who is different.  
When have you been helped by a stranger? How were they different from yourself? What did they do? Why do you think they acted as they did? What would have happened to you if the stranger had not stepped in to help?

Prayer Opportunity:  
1) Give thanks for specific strangers who have helped you.  
2) Pray for those waiting for help when no one comes.  
3) Pray for those hesitating to give help when they could.

Station 9  
The woman at the well  
*John 4*  
Jesus often encountered people who came from a different religious tradition as well as a different cultural tradition.  
What religious differences have you encountered in your life? Were there any similarities you saw? Why did these religious differences matter?

Prayer opportunity:  
1) Pray for someone you know who is of a different religion.  
2) Pray for God’s spirit to come into the world to heal these differences.  
3) Celebrate that so many people of faith are praying for peace.

**Rev. June Begany** served as an Associate Pastor for 24 years at a downtown Cleveland church, as an interim pastor for 2 years and is now retired. She is also a licensed social worker, has taught history in the Cleveland school district, and is certified to administer the Myers Briggs Type Indicator. She has an interest in Celtic spirituality and in the use of labyrinths. She completed her capstone project for certification in the Older Adult Ministry program in 2014. She currently serves as secretary to the POAMN Board.
The Importance of Spirituality and Aging

The aging process, our journey and experiences while moving into and through the many different phases of later life has an effect on our life expectancy, our strength, our health, our emotions, and our spiritual life. Too often we encounter these experiences as roadblocks or detours rather than treating the process of aging as an opportunity for inner transformation. Our early and middle adult years do not adequately prepare us for the new role of being an older adult.

Shifting out of the role we are groomed for (work, family, etc.) and into the unfamiliar role of retiree and then healthy aging or elderly person can be a challenging transition. This may, at times, produce feelings of apprehension and concern in the ongoing adventure of living a full and complete life. For many, the focus on production and accomplishments held throughout young adulthood and middle age gives way in later years to a concentration on the interior life, and it places the emphasis on making spiritual connections grow.

Spiritual experiences are those events in life and moments in relationships that attune us to that vital or animating force within and which give greater meaning and depth to our day-to-day living. Research shows that people with an active involvement in church or spiritual community live, on average, seven years longer than those who don’t. As the increasing population of older adults continues, I wonder why we are not increasing the role of our elders in our communities, churches, denominations, and society? These relationships should be encouraged as an opportunity to enrich and give meaning to the lives of our aging citizens who have a wealth of wisdom and life experience to contribute and pass forward.

For many, spirituality is key to a vital old age. Staying centered in our faith as everything is changing through advancing age, chronic illness, or deteriorating health makes accepting these changes a little easier. Having this faith - trust without reservation – makes it easier to live with the unknown and face the ups and downs of life as we are aging. The process of aging at every life stage brings about changes in one's spiritual life.

Change is inevitable, continuous, and unavoidable. Everything changes. We may not be in control of situations around us, but we are in control of our reaction towards them. A spiritual perspective on aging is not just for personal transformation; it is a medicine for longevity and health.

Spirituality is difficult to define and describe. It is a concept that is highly personal, often private, and hard to put into words. For most, spirituality is an inward experience. Our spiritual practices (meditating, walking a prayer circle, making a pilgrimage, taking sacraments, singing with a choir,
going to a retreat, saying daily prayers, etc.) are just some examples undertaken by many of us in our daily lives. What they have in common is that they assimilate different aspects of our experiences while connecting us with others who share similar beliefs and seek out these experiences.

Our spiritual practices offer us a sacred time; a time we set apart from the everyday rush of our lives on a daily or weekly basis. Spiritual and religious practices have their own inherent value and are sufficient as ends unto them and can contribute positively to living healthier, happier lives.

We should be able to enjoy our spirituality and aging; it is our just reward, which comes from gaining wisdom, insight, and experiences on the aging journey. Spirituality doesn’t stop the aging process but it will provide hope, and hope will strengthen your spirit and your faith. It will help us spiritually to cope with whatever may come our way.
Defining the Last Third of Life

By Quentin Holmes

[Author’s Note: The following article draws heavily upon an Older Adult Ministry “Dimension”[4] written by Rev. Dr. Henry C. Simmons of Union Theological Seminary/Richmond, Virginia]

The later years are gift, not burden. Not everyone who lives them understands them or welcomes them. This article is about the enterprise of embracing the blessings of this time and overcoming the burdens of it. By necessity, it will also touch on the spiritual tasks of later life.

Death and old age are not synonyms. Death can come anytime. A long life comes only to the truly blessed. The last third of life is a special period of life. But with it come all the fears and hopes of a lifetime. Growing older gracefully is about living into the values offered in every stage of life. We must be willing to let go of the life we have planned, so as to have the life that is waiting for us.

One of the problems is that we don’t have a standard vocabulary to describe the events, and changes that can be expected if one lives a full life from the time one retires until one dies. Unlike childhood, youth, or young adulthood, older adults cannot be meaningfully categorized by their age. It is useful to move away from chronology toward a vocabulary that identifies the transition or stable period that a person is living through. If we say that a person is in the process of retiring, or coming out of the dark times surrounding a spouse’s death, or is struggling with a loss of independence we do get a lot of clarity. We may not know the person’s age, but we have a good starting point for connecting with that person. The predictable transitions and stable periods which we will likely share in the last third of life are:

- Retiring (a transition)
- Extended Middle Age (a stable period)
- Uncertain Journey (a transition)
- The New Me (a stable period)
- Unwelcome Journey (a transition)
- While the Light Last (a stable period)
- Dying

Granted, there will still be individual differences. The differences stem primarily from factors such as: length of life, available patterns of relationships, year of birth and the social attitudes one carries from that era, personal and financial resources. We will cover each of the transitions or stable periods in turn.
Retiring

"Retiring" is the transition that marks the beginning of the last Third of Life. It is an active word and denotes a relatively short period of one’s life of about a year’s duration. Retiring has a before, a during, and an after. There is a before: the time of planning, meeting with the human resources staff, tidying up projects, etc. There is a during: the actual retirement event itself, perhaps with a festive lunch, and promises to colleagues that you will keep in touch. And there is an after: the weeks and months following when one starts to build a new rhythm of life, finds new things to do and people to do them with.

Retiring is not a small or insignificant transition. It involves life decisions about who I am now that I no longer am defined by my job, what I will do, and with whom I will do that. Nothing can minimize the psychological adjustment of leaving the world of work for the retired life. Work not only provides a sense of worth and prestige, but also valued friendships and opportunity for self-expression. The shock when that is gone cannot be measured. The transition from work to redirection can be one of life’s great challenges.

Opportunities for Spiritual Growth:

In the losses that accompany retiring, we struggle to redefine life’s agenda in light of some new and compelling vision. Retiring can be a spiritual event. It can be a moment that sets us on a new course toward wholeness of self and relationship with God. But where there is potential for growth, there is also peril. Personal length of days is an absolutely non-renewable resource. The awareness that we do not know our length of days brings the reflective person up short. Retirement makes us realize that we are dependent on God in ways we have not hitherto experienced. It is by faith that we will cope and grow.

There is little religious education for retiring. Retiring may bring with it a sense of uselessness, often marked by great bursts of activity. Retiring does not mark the end of human growth. A person has greater voice now than at any other time in life about how his or her time and resources will be used.

Women and men in peer relationship need to support each other in arriving at understandings of retiring that raise up a sense of promise, of vocation, of responsibility, of giftedness. Communities of faith need to take seriously the possibilities and importance of this doorway into the last third of life.

Extended Middle Age

Although it often takes nearly a year, people do get through the transition of retiring. They then embark on a time in life that we call “extended middle age.” This is a stable period of life – with its ups and downs, and with its challenges, promises, hopes, dreams, and losses. This stable period of life is of indeterminate length: six months, five years, fifteen years, or twenty-five years. The
Indeterminacy is unnerving to many people. There are few or no clues about one’s length of days in this period of life. There is a common wisdom that one ought not to waste these precious days. The day will come when you can’t travel, or volunteer, or whatever it is you like to do. “Do it while you still can” is sort of a mantra for this time of life.

Extended middle age is much like middle age, except that work has been replaced by another set of activities. People see themselves as still in their middle years, but with opportunities for leisure they did not previously have. They do not relate to those further ahead on the journey of life. They look back to middle age rather than ahead to the uncertainties that will certainly come. People in extended middle age both are, and are not, the people they were in their work years. To the extent that retiring was a deeply successful transition, they are engaged in a spiritual quest that makes this a new part of the human journey.

Opportunities for Spiritual Growth:
The meaning of this part of the journey emerges best through conversation among thoughtful, supportive, and highly-motivated peers. Those who have left behind the world of paid work are liberated to read, to learn, to develop, to strengthen social relationships. They can adopt a lifestyle of choice and chose to slow down. Devoid of the social pressures that once pounded upon their lives, they are free to think for themselves and to challenge the prevailing ethos of endless consumption.

Some might argue that communities of faith have no particular responsibilities to structure opportunities for such groups — individuals have their own responsibilities and opportunities for insight and faithful service. This sounds plausible. However, it misses the complicity of communities of faith in devaluing aging. For example, many ministers come to retirement with a great sense of failure and guilt because they failed to “grow young churches.” This reflects an unspoken assumption in churches that church growth is only valid when there are increasing numbers of people under thirty-five years of age, not increasing numbers of people of any age. Unfortunately, most churches opt into a very socially specific view of the last third of life.

Uncertain Journey
Extended middle age ends in a loss. With or without warning, one begins, unwillingly, an “uncertain journey” whose outcome cannot be predicted. A major loss interrupts one’s life. Your world is turned upside down. Typical losses are: death of a spouse, disabling illness of self or partner, a one-sided divorce, a dulling of cognitive ability, or a realization of the need for a more supportive environment.

During extended middle age people sometime worry about what this transition in their life will look like. There may be a sense of dread: “What will happen if my spouse dies first?” Yet when reality hits there is an element of shock or surprise. “Just yesterday we seemed to be doing so well…”
The uncertain journey is very much a betwixt and between experience. In a year or less one goes from a sense of self that is clearly consistent with one’s previous life, to a sense of self that is forced to look forward to the real limits of one’s future. It is a threshold experience. And the threshold is not a threshold one would willingly choose. But there is no choice. There is only the struggle to cope, to stay strong, to hold true to one’s core values, and to grieve one’s losses in a healthy way.

Opportunities for Spiritual Growth:
The wilderness of change that is the uncertain journey can reveal the shallowness of a socially sanctioned death that denies spirituality. A community of faith can be powerfully supportive if it is able to walk with individuals in that wilderness – but only if it recognizes the absolute mystery of loss and death. This is a puzzling and painful time. It can feel as if there is a great emptiness at the very center of one’s being.

Loss and death are not subject to logical explanation because they are part of the awesome mystery of creation. When we attempt to alleviate their terror by rationalization and analysis we destroy the possibility of a personal encounter with God because neither God nor God’s creation can be reduced to a logical formula.

The uncertain journey must be endured. Life will not return to what it was. There may be light in the future, but the person who comes to that light will find their former sense of identity must be renegotiated. From outside the uncertain journey we can only stand in awe at the resilience of the human spirit during this transition.

The New Me
There is nothing to do but pick up one’s losses and begin to build a new stable life structure that has its own sense, its own integrity, and ultimately its own joys and sorrows. There are new routines to set up, new or renewed relationships to be formed, new tasks and projects to be fulfilled, and above all a new sense of self, a “new me,” to be discovered. For example, if one’s partner has had a debilitating stroke or injury life does not simply go on. Every facet of every day has to be invented anew.

Even when there is a clear sense of consistency and continuity with the goals and commitments of one’s earlier life, these goals and commitments will be shaped differently. What was “normal” cannot be reclaimed and a new sense of “normal” must be constructed. When the loss that creates the uncertain journey is one’s own health, or the loss is the incapacity of a spouse who will now need constant care, there are limited resources left to turn outward. For some, this is a time of a new sense of the spiritual. The shock of loss breaks open a lifelong belief in the importance of the physical, material world. As patterns shift, reconfigure, and develop, there can be a new awareness of the Unknown, the Mystery, the Divine. It can be a privileged moment of grace – painful, costly, but ultimately rich in mercy.
Opportunities for Spiritual Growth:
The “new me” phase of life is a stable period that can last for years. Chronology doesn’t help much. For months, and years – in some cases twenty or more years – people will create new visions of themselves and live within these visions, intentionally making and keeping promises, honoring themselves and others, and finding life-sustaining relationships. A deepening love affair with God is part of the abundance of life-sustaining relationships.

A community of faith has a role to play – providing opportunities for people in this stage of life to flourish and contribute. To do so it must move from being focused on the problems of aging to a dawning sense of agency for individuals in this group. It is only when a community of faith grasps and lives the truth that God’s promise and human vocation is for the whole of life that this time of life can be seen as a time of growth, freedom, and responsibility.

Reluctant Journey
The “reluctant journey” from independence to dependence is the third transition in the last third of life. The reluctant journey may take as long as a year as people teeter on the edge of not being able to make it on their own (physically, emotionally, or mentally). The actual tipping point can often be identified: a sudden fall, an accident, stove-top fire, getting lost close to home. The previous stable period of a revised lifestyle has come to a dreaded point: coping with the ins and outs of daily life is no longer possible without help. Some ordinary task of life can no longer be accomplished on one’s own: toileting, eating, bathing, getting from bed to chair – all are activities of daily living that we mastered as very young children.

Home may become a strange place. One gets turned around going to the bathroom. Or the basement stairs may seem too steep. Control of bowels and bladder becomes unpredictable, and going out becomes unthinkable. A walker or cane is no longer enough help to get from bed to chair. Preparing meals and even the act of eating becomes arduous. Taking a bath or shower is felt to be dangerous and lifelong habits of hygiene give way. However it plays out, persons in this stage of adulthood cannot get by on their own. They are going through a transition that we can hardly imagine for ourselves.

Some have adult children, grandchildren, or nieces or nephews to ease the terrors of this reluctant journey. When the burden falls on a spouse this may tip the balance for that person. Some few plan, and execute, a move ahead of this transition to a life-care community or other place of assisted living.

More likely, however, people hold on well past any reasonable hope of being able to manage on their own. Fierce independence can lead to a downward spiral of increased immobility, poor nutrition, or poorly-monitored medications. Family members who get called in at the last minute to help are often appalled at the filth and squalor people endure rather than accept help or move to a care facility. This is especially true for a generation that prides itself on self-sufficiency. However,
for those who do plan ahead and accept care, there are more options than were available even a
decade ago. This is the good news. The bad news is the cost of care – frighteningly high for those
who do not have insurance or personal wealth.

Opportunities for Spiritual Growth:
This transition tests faith. The later years, however, reveal the paradox at the heart of the gospel:
“that in losing our lives we somehow find them, that loss can be gain, and weakness, strength; that
death is the path to life.” A stark example of how difficult this paradox is to live is seen in the lives of
those whose reluctant journey ends in a nursing home. Whatever the benefits of physical care, the
human spirit is likely to be stifled by anger towards one family and God, a sense of uselessness, and
a highly personal feeling of loneliness. Anger toward family and God is almost inevitable. Anger
towards the family comes from a profound sense of abandonment.

And yet the new nursing home resident has to adapt – has to come to the point of being thankful for
being in this facility. This is an arduous and lonely struggle. It involves a new relationship with self
and new ways of relating to others. It involves making new friends – quite unlike any friends the
person ever knew before. And it involves learning how to relate to God all over again. These are
tasks accomplished in the depths of one’s heart and soul.

All too often the community of faith is too threatened to interact appropriately with people going
through this transition because “any one of us could someday end up in this same place.” The
truth is these people do have a future in the last stable period of life we call “while the light lasts.”
And they have a final journey to take, dying, without which the whole human project is not
understandable.

While the Light Lasts
This stable period of indeterminate length has stark
boundaries; the reluctant journey into dependence,
and dying itself. It is a period of life with a beginning,
a middle, and an end. One enters in dependency
and frailty, one ends in dying. Between, there may
be months or years – even many years – of a life
that needs its own goals, promises, struggles and
hardships, joys, friendships, freedoms and meaning.

“While the light lasts” has its own integrity, variations,
and distinctiveness. It has integrity because it is a
human life, lived in continuity with the whole of life.
It has variations because the losses that shape this
period may be physical, cognitive, or emotional. It has
distinctiveness because it has moved beyond the normal process of aging and is dominated by
some biological or mental pathology. Giving and receiving care are the realities of this period.
Some environments of care – individual or institutional – are person-friendly, some are simply
dreadful, and most fall somewhere in between.
Opportunities for Spiritual Growth:

“While the light lasts” can only be understood in the context of a whole life, and it is most certainly best interpreted to us by people who are themselves in this stable period. There are two psychological mechanisms that people use to keep themselves “okay.” The first mechanism is selecting goals that are realistic in relation to their present lives, and by getting help for tasks they cannot do on their own. The second mechanism involves learning new ways of managing. Instead of choosing a goal and going for it no matter what, they leave more time for tasks, changing tasks, or letting someone help them with things like bathing and dressing. The spiritual dimension of these strategies goes to a core belief, namely that one is okay, not because of what one does but because life, God’s gift, is worthwhile and precious. Paradoxically, even in the face of diminishing time, people in this time of life can take time. In accepting help where needed, they let go of that icon of adulthood, independence, and point toward the truth of adulthood, interdependence, and where necessary, dependence with dignity. It is a wonderful basis for healthily reaffirming one’s dependence on God. There is no time in one’s declining years when the human growth process is at an end.

Communities of faith can learn from the spiritual struggles of people in this period of life. The astonishing reality of this stable period of life is this: While the light lasts is not as dark or as bleak as we might expect or dread. Indeed, some people who are quite sick, frail, and dependent are nevertheless happy, committed, generous, satisfied—in a word, “okay.” This is a word of witness and good news that needs to be heard and believed by the community of faith.

Dying

Dying refers to the actual transition from life to the silence of death. Unlike all other transitions and stable periods of life, no one can tell us about the experience of life’s denouement. Dying is a process, a transition that ideally takes time.

It is not always clear when life’s balance tips irrevocably toward change. Something happens. For reasons that may not be physically clear a person is “unto death” and the final transition has begun. There is a series of developmental tasks that begins with completion with worldly affairs and ends with surrender to the transcendent, to the unknown, to God. The business of life—the focus of so much energy until now—is handed over to others, and formal social and legal responsibilities are brought to a close. Only a clear sense of the approach of death could bring a person to give up what has been worked for so hard all life long.

The person turns inward to try to come to a sense of meaning about life. Failures, wrongs, and things left undone may take on power. But so also may a sense that much good has been done. The individual needs to own the good and forgive the bad. This requires the experience of the love of others. People can only truly forgive themselves when they know forgiveness from others.
person must then bring to completion relationships with family and friends. This is a time to ask forgiveness, accept forgiveness, express love, acknowledge self-worth and say good-bye. The final steps involve acceptance that it is okay that one’s life is coming to an end because there is a transcendent. In the surrender to the transcendent, to the unknown, the final task is completed: one lets go actively. Here, little remains of the ego except the volition to surrender.

Opportunities for Spiritual Growth:
The task of the community of faith is to reclaim dying as “sacred dying.” Mainstream American culture no longer thinks of death as “sacred dying.” Nor are people who are dying treated as if they were in the midst of an important, life-defining spiritual journey. Death is either medicalized, or death is secularized so that the good death is one that is simply quick, uneventful, and painless.

The spiritual nature of dying is transparent. Worldly goods were never meant to be the be-all and end-all of life. There is much in each life to celebrate and to regret; there is an irreplaceable need for forgiveness and the expression of love. When all is said and done, it is only the Transcendent, the Mystery, God who can draw us, in love, into the surrender of our ego. Death is ultimately too deep for tragedy. The “dying of the light” can be a dawning, a requiem, a rainbow. We do not rejoice in some starless night, but suggest that one cannot see the stars save by night.

Conclusion
These then are the transitions and stable periods that give shape to the last third of life for those who do not die an untimely death.

“Aging is a moral and spiritual frontier because its unknown, terrors and mysteries cannot be crossed without humility, and self-knowledge, without love and compassion, without acceptance of physical decline and mortality and a sense of the sacred.”

(Rev. Henry C. Simmons)


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Insights and Implications of Aging
By Michele Hendrix

At one time or another, each one of us ask ourselves the question; “How long will I live - 70, 80, 90?” Aging is not always easy but it is often thought provoking. Now is the time to adopt a lifestyle so each of us can be the best we can be as we age, to continue to contribute to our communities and be seen as a solution rather than a cause of problems.

“70 percent of physical aging and 50 percent of cognitive aging is every day — what we eat, whether or not we exercise, to what extent we are make a difference, to change the downward slope of the aging curve.”
(Dr. John Rowe and Robert Kahn, Successful Aging)

Change is part of the story of aging. That’s why as we are aging we must take ownership of our health. As we look at Insights into the Later Years we recognize that today people are living longer and have healthier lifestyles. With the many advances in medicine and medical treatments our views on aging are also changing. Increased longevity can be attributed to improved screening methods, surgical procedures, devices and medications – as well as better access to health information. We must also remember that tending to the spiritual needs of those who are aging is just as important as maintaining their physical health. Very simply, the aging process can also affect the spirit and therefore one’s spiritual life.

Still, living a longer life doesn’t necessarily mean enjoying a better quality life. About 30 percent of our health and wellness is genetic and about 70 percent is due to lifestyle. Thinking there’s nothing you can do about the rest of your life is not true. For years we have heard about healthy eating, exercise, and physical activity. We now understand that how we choose to age can put us at greater risk for health issues. That is why today many boomers and older adults recognize and strive to be active, engaged, involved, and healthy well into their advancing years.

There have been many advances in studies that examine ways to support healthy aging and prevent or delay the onset of the many age-related diseases that can lead to a diminished lifestyle. These ongoing
studies help to promote the increase in longevity and an active life expectancy free of disability in our latter years. It is up to the aging individual to apply that to their current lifestyle.

In the past our early and middle adult years did not often effectively prepare us for becoming an older adult. The unfamiliar role of retiree and then later transitioning into a senior was often viewed as another challenging task confronting many seniors. Now retirement is viewed as the time to begin identifying what gives meaning and satisfaction to our lives. Identifying new sources of fulfillment, happiness, study, reflection, prayer, and opportunities for service, as we are aging. Then taking action to develop and define a new role and purpose for our lives in an active and appealing aging process.

The world is facing a situation without precedent: We will soon have more older people than children and more people at extreme old age than ever before. A better understanding of the changing relationship between health with age is crucial if we are to create a future that takes full advantage of the powerful resource inherent in older populations.

Roy Buchinsky, MD Internal Medicine Specialist and the Director of Wellness at University Hospitals Case Medical Center, February 2016
McArthur Foundation, Insights on Aging and Health, Successful Aging of Societies, John W. Rowe, Spring 2015
Engaging in Aging that is Changing

By Michele Hendrix

In the span of 25 years serving in Older Adult Ministry, I have a longstanding history and experience of advocating for older adults and developing leaders for this growing ministry, now multigenerational – think about it, GI/Greatest Generation, Mature/Silent, and Boomers are all older adults, and now Generation X is knocking at the door and not that far behind. That is three, and now nearly four, of the six living generations in the U.S. today.

We now have six living generations in America today that are considerably distinct groups. Each group usually has different likes, dislikes, attributes, and characteristics. They have had collective experiences as they age and therefore have similar ideas. The person’s date of birth may not always be indicative of their generational traits or characteristics, but as a shared group they have common similarities.

GI/Greatest Generation: Born 1901 – 1926
Mature/Silent: Born 1927 – 1945
Baby Boomers: Born 1946 – 1964
Generation Z/Boomlets: Born after 2001

I often find it ironic that as we are growing older, our culture and churches are always looking for ways we can become younger! If your congregation is older you may be looking for ways to attract younger families, however, the reason the congregation is older is because often it has few or no younger families. In POAMN we are often asked how churches can reach younger families. Below are several ideas that some churches and POAMN members have used to accomplish this goal. Many of the ideas shared in this article come from current and past issues of the *POAMN Older Adult Ministries Planning Guides* and can be accessed at www.poamn.org under the Planning Guide tab.

First recognize that all seniors aren’t seniors. Older adults are living healthier, more active, more productive, and longer lives. What does this changing demographic landscape mean for the church? It means that the old ways of doing senior adult ministry must be transformed and reevaluated. Over time even the phrase "senior adult" has become a subject of concern. As more and more Baby Boomers have reached age 65 the stigma attached to the word senior makes it a liability to effective ministry with Boomers. Currently we find that when churches offer a "senior adult" program, at most, only 10 - 15 percent of church members who qualify to be there actually are. Research shows that
most do not want to be lumped into the category of senior citizens. New and emerging strategies necessary for effective ministry to "middle adults" and "Boomers" have many implications for programming, evangelism, and scheduling of church activities. The church that is "age-sensitive" will provide a variety of programs to appeal to the diversity of interests, needs, and activities of each age group.

Let's begin our efforts on Engaging in Aging with the "C" word – Change, and a willingness to change. There is often a resistance to change, as we get older. Rather than embrace change, some older adults tend to disparage the idea of change. When we embrace the idea of change in relation to what attracts younger people into our congregations, we soon find that it is not impossible to let go of some of the things that were simply our preferences. The added gift of accepting change is being in relationship with multiple generations and the richness that adds to our faith community and our faith walk. Is your heart being "me-focused" or "others-focused"? Change is inevitable, misery is optional, and it is all about perspective.

The "P" word - Prayer. Do not neglect the most important source for your need - prayer. Are you undergirding your efforts in prayer? Is there a group who prays to help accept and welcome change in your congregation; prayers to bring younger people into the church; prayers to change and expand your focus from a "me" ministry to an "others" ministry, prayers for those in leadership who are providing a basis for change. Gathered together in prayer and Bible study, people can be invited and guided to look at themselves as they practice hospitality with one another, newcomers, young and older members of the communities in which their church is located, and sisters and brothers throughout the world.

The "R" word - Relationships are intentional. You cannot simply ask younger generations of people or families to join you at church. You must be willing to listen to them and act on many of the changes they suggest. Who is in your social circle? Have you thought about expanding your social circle to younger people? Who are you inviting to visit your church? We know that relationships are key to reaching people. If we are intentional about connecting with younger persons in our social circles those relationships may soon transfer to the church. If there are already some younger persons or young families in your church, have you made the effort to connect? Are you a hospitable congregation that receives and welcomes others?

Develop an Intentional Lay Ministry. Senior citizens have wisdom, truth and humility. Yet they are often neglected. They like to tell their stories, sharing from the heart. They appreciate visiting and enjoy the company of younger people. Focus on being willing to listen to someone who longs to be heard. There are many models that are available as a person or group seeks to be more intentional and to become better-trained caregivers and listeners to others in their congregation. You can find alternatives to Stephen Ministries, including one grounded in Benedictine Spirituality.
Within congregations there are many compassionate lay-persons who with appropriate training and guidance can develop competent and compassionate ministries such as grief groups, divorce support groups, caregiver support groups, support groups for those who care for those special needs children or adults, support groups for adoptive parents, hospital and home visitation groups, calling groups to check on older or frail congregational members, cancer survivor groups, Parkinson or cancer support groups. There are many little support groups and/or communities that can develop around a variety of needs and concerns. These groups offer the opportunity for a depth of sharing and intentional community.

Another “C” word - Care. Are you a caring congregation? Through leadership do you nurture a shift toward emphasizing the importance of ordinary care?

The caring congregation is a place, a sanctuary, where our human stories are connected with God’s story, and where our puzzling narratives find a place in the presence of the One who heals and sustains, guides and reconciles, liberates, empowers and nurtures. In the caring congregation, each person is called to such participation. Caring congregations will discover themselves engaged in God's mission - not only “doing” mission programs, but also being missional at its center.

Mission and Outreach. Many of the ministries I listed above are outside the walls of the church. Older and younger adults can and should be involved in the mission of the church. This is where multiple generations can connect and serve together. There is no doubt that those saints who came before us who are aging in our congregations should be recipients and part of the mission and outreach of the church. How are you making these connections? Many churches are training older volunteers to engage in a unique ministry of mission and outreach.

Younger adults are asked to be “missionaries” to the older congregation by pairing up young families with an older adult for a two-year period. As a result of the success of this ministry many of the younger families were highly intentional about inviting their peers, and the number of younger people and families in the church grew. Create an Adopt-A-Senior program, engage and invite young families whose grandparents do not live close by into ministry by pairing them with an older adult. It will enrich everyone’s life.

Or try a new mission adventure by paring Children’s ministry with a one-week visit to group of people at a care facility who are members (and non-members) of your home congregation. Plan a week’s activity during the summer months or holiday season and spend an hour where both the residents and children give the gifts of their ministry and both the children and the residents would receive the gifts of their ministry. The day can consist of worship, a gifts hour, quiet time, recreation and food. Both groups grow
to appreciate each other and both groups find a way to enrich their own lives. Strangers become friends. A dream becomes a reality. Mission takes on a new face!

These shared ideas are a wonderful picture of ministry to and with older adults and one that becomes intergenerational. Presbyterian Older Adult Ministries (POAMN) mission is to support ministries on aging in our congregations, senior centers, and care facilities that are becoming community focal points that not only provide helpful resources to all generations of older adults, but serve the entire community with information on aging; support for family caregivers, training professionals and students; and development of innovative approaches to aging issues. The church now faces the enormous task of addressing escalating needs, challenges, and changes faced by an aging society in aging congregations; issues such as elder abuse, fraud, loss, caregiving, transportation, finances, chronic illness, and a myriad of many others encountered on the journey of aging.

These are days of tremendous opportunity in the community of faith. People of all ages can worship, serve, and work together side by side, and draw from a rich mixture of skill and experience. Churches that cast a vision for ministry with older adults, middle adults, and boomers will find renewal springing up in the church and subsequent numerical and spiritual growth. Now is the time to make the most of the incredible capacity of the new kind of mature older adults, middle adults, and boomers who are becoming the dominant fabric of our nation.

Church leaders of the twenty first century, perhaps more than at any time in history, must reach out to a variety of age groups. The church should be one of the best sources for volunteers to serve in our communities. If we are to break down the barriers that divide us, we will need to put forth effort to understand the make up of every generation, to dispense grace, and to determine common purpose and mission. Transformation requires intentionality. The church should be at the forefront of being a part of this whole educational and transformation process.
God the What?
What Our Images for God Say About God and Us

By Rev. Lynn Fonfara

I often think and preach in images and stories. Scripture uses stories and metaphors – or images – to describe one or more aspects of God. One of my favorite images of God is as the owner of a vineyard who hires all the day laborers at different times during the day. At the end of the day, they all receive the same very generous wage. This is an image of God as caring for all people in the same way, and blessing every one of us with divine abundance.

Some people speak and think of God as only Father, Son, and Holy Spirit. And sometimes, we think of God as only Father, or only Son, or only Holy Spirit. There is nothing wrong with these names or images or metaphors for God. It's just that there are so many more.

In Scripture, God is described as mountain, smoke, and fire; mother hen sheltering me under her wings; she-bear, fiercely protecting her cubs; shepherd; king; lamb; lion; eagle; fortress; husband; owner of the vineyard. How many more can you name?

I have also been intrigued with non-scriptural images of God, and how they challenge me to think about God in new ways: Something; Collective Unconscious; Luminous Web; Ground of All Being; Source of all that Is; Mind of God; Womb; All; Jazz-Band Leader. What other images do you use to describe God?

When we use images to describe God, we tell ourselves and others what God is like, although any image is an imperfect description. God is as strong as a mountain, but God is not a mountain. God is like a mother hen, but God is not a mother hen.

Images for God also say what we believe about God. If we believe God is like a mother hen, we believe God will shelter us from the storms of life. If we believe God is our father, we may believe God has a powerful presence as well as a tender side, as do many fathers. If we believe God is a Jazz-Band Leader, we envision God guiding us with the main theme of love and grace, but allowing us to play our own riff.

If we listen to culture, we may believe that God only watches “from a distance” instead of being ever present through Jesus and the Holy Spirit. We may also believe that God as father is a strict disciplinarian who is more likely to criticize us than praise us.
Older adults have had many years for reflection about who God is and how we can relate to our amazing, mysterious, multi-faceted God. We know we can allow the Spirit to spark our creativity and increase our faith by using many images and metaphors for God. The more we use our imaginations to describe and image God, the more we will be able to grasp the fullness of who God is.

What images and metaphors for God are helpful to you today?

For more on this topic, these two books and many more will provide food for thought and creativity.


*Rev. Lynn Fonfara lives in Beverly Hills, Florida, with husband Rev. Mike Fonfara and two cats, Miss Kitty Russell and Marshall Matt Dillon. Lynn is a retired Evangelical Lutheran Church in America (ELCA) pastor. She is studying to become a Lutheran Franciscan friar, and doing interim ministry as opportunities arise.*
Developing a Partnership Between Faith Communities and Healthcare Systems

By Rev. Melanie Childers

Once inseparable and inextricably interwoven, medicine and religion took widely divergent paths during the Enlightenment period of the 1700’s. Medical interventions were based more and more on evidence-based science, and religion was relegated to a back burner when it came to matters of health.

However, a number of contemporary partnerships are beginning to emerge to rebuild bridges between these two disparate fields. Healthcare institutions are being pushed by greater and greater expectations to keep healthcare costs down and keep people out of hospitals as much as possible. Hospitals are faced with financial penalties if a patient returns to the hospital within thirty days of discharge with the same diagnosis. Healthcare leaders are left to figure out how to effect change in their patients’ behavior when they are at home in their communities.

Meanwhile, faith communities are continuing to do many things they do well - developing communities of people who are bound by similar beliefs and who respond to each other based on webs of trust and respect. Faith communities are still the group that can be counted on to bring food to bereaved families or to recovering patients; to offer rides without fear of being held liable if something should go wrong in the vehicle; to provide respite to family caregivers; to run errands. This is especially true of our most vulnerable congregation members, many of whom are also our seniors. All of these acts are considered expressions of our spiritual commitment to be the hands and feet of God in the world when someone is experiencing a crisis or a life challenge.

Recently, progressive thinkers in a number of healthcare institutions have realized that in certain sectors of the country, faith communities are the natural partners to healthcare for providing the ongoing support that individuals need in order to keep them on the path to recovery once they leave the hospital. Several organizations highlight the benefits of such a partnership.

At Methodist Lebonheur Hospital in Memphis, TN, the Congregational Health Network began in 2006 when the healthcare system reached out to congregations traditionally underserved by healthcare. It now includes nearly 500 congregations who have agreed to partner with the hospital. The hospital allows congregation members to “pre-consent” to having their clergy called if they are ever admitted to the hospital. The hospital also offers training to lay leaders of each partner
congregation so that congregations are equipped to provide basic care and service to one another in times of need. These educational seminars include Mental Health First Aid, Congregational Care and Visitation, Aftercare Training, and Caring for the Dying. For their part, the congregations designate lay leaders who help lead the charge for the multi-layered health needs of their congregation, and who will receive training. The Congregational Health Network also includes health navigators who work in the hospital planning for patients’ discharge, and they include the congregations as a resource for the patients’ discharge needs.

Since 2006, the Congregational Health Network has shown remarkable evidence that people tend to stay healthier and stay out of the hospital even with simple interventions that faith communities offer - because it helps people feel connected and cared for after they are discharged from the hospital.¹

“FaithHealthNC” was developed at Wake Forest Baptist University Medical Center in Winston-Salem, NC, in 2013. Wake Forest has used the concept of partnering with local congregations, but with a focus on the ways congregations can reach out to those in their community who do not have support and who are not members of their congregation.²

Borrowing from and adapting these two models, a small healthcare system in the Appalachian Mountains has developed its own unique version of this partnership. AppFaithHealth is a service offered through Watauga Medical Center in Boone, NC. So far, fourteen congregations have joined the partnership. Congregational leaders are receiving training, clergy have greater ease of access to the healthcare system, congregations are hosting blood pressure screenings provided by healthcare staff, congregation members are being more quickly connected with their clergy when they arrive at the hospital, and discharge planners are working with the congregations as one resource for potential discharge needs. In addition, high-needs / low-support patients are being paired with congregations who want to extend their hand of hospitality beyond their own congregation to those in their community who are unaffiliated with a faith community.

This program is still in its infancy, and it is too early yet to determine statistics of how individuals in these partnering congregations will thrive in comparison to patients/congregations who are not involved in the partnership. But one of the most exciting features of this partnership is that it has offered a clear statement to the faith communities: Western scientific medicine is not the exclusive domain of modern-day healthcare institutions. Health includes physical, social, mental, spiritual, and other dimensions. Healthcare recognizes that faith communities are the experts in compassionate care to community members, and in this way is beginning to bridge the gap between faith and medicine carved out centuries ago.
If your congregation is interested in participating in an innovative partnership to generate health and wholeness in your communities, consider initiating conversations with your local healthcare community to find areas of common ground and develop vibrant partnerships that might just make a substantial difference in your members’ ability to navigate the healthcare system and optimize their health outcomes.

“Church-health systems partnership facilitates transitions from hospital to home:”
https://ptochotrophia.files.wordpress.com/2014/10/cutts.pdf
https://faithhealthnc.org/

**Rev. Melanie Childers, MA, MDiv, LPC, is Director of Pastoral Care at Watauga Medical Center in Boone, NC, where she has served for 18 years. She is a board certified chaplain, ordained and endorsed by the United Church of Christ. She attended an adaptation workshop at Methodist LeBonheur, was a founding fellow in the FaithHealthNC movement, and leads the AppFaithHealth partnership at Watauga Medical Center.**

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**AppFaithHealth is a dynamic partnership between faith communities, Appalachian Regional Healthcare System, and other community providers focused on improving health. The partnerships are built on webs of trust, combining the caring strengths of congregations, the clinical expertise of the healthcare system and a network of community resources.**

**Three Tiers of Partnership:**

- **Tier One:** A clergy person receives hospital orientation, badge, and parking access
- **Tier Two:** A congregation becomes a partner with the hospital by signing a shared commitment form and encouraging members to register
- **Tier Three:** A congregation agrees to reach beyond its own building by offering tangible care to others in their community identified by the healthcare system who desire assistance (within parameters set by AppFaithHealth)

For more information, call the ARHS Pastoral Care Department 828.266.1178

AppFaithHealth
Inspiring health in the High Country
AppFaithHealth Partner: Rumple Memorial Presbyterian Church, Blowing Rock, NC

By Anne Tarbutton

At Rumple we have a Congregational Care Team that serves our members in a variety of ways. We have individuals who volunteer for weekly time frames to visit ones who are sick and recovering and offer support to their families, send cards, make phone calls, deliver meals, provide respite, recommend resources when needed, provide worship/spiritual practices, etc. Additionally, we minister to the bereaved with receptions, food, memorial donations, bereavement baskets, cards, and visitation. Also, we welcome new and visiting members to our congregation. Last, we have offered specialized training to our church community in compassionate caregiving, grief, and hospital visitations.

It's important for us to be a partner and member with AppFaithHealth for many reasons. First, there are evidence based numbers of partnerships like this that reflect decreases in mortality rates, decreases in hospital readmissions and reduced medical costs for those served. Second, we have a “direct” relationship with App Regional Healthcare. This allows us access to support from the health provider when a patient is admitted and in a “care plan / follow up” when a patient is released. This provides better communication with our pastor and Congregational Team and helps us coordinate our ministry to others in an organized, patient specific needs approach. Third, we have an opportunity to network and collaborate with other local faith communities. This is valuable for all as we learn from each other ways to carry out this important outreach. Last, we benefit from continuing training in resources from App Regional Healthcare. Recently, I attended a Virtual Dementia Tour at a local Medical Center. It was an eye opening experience for me as I gained an understanding of what persons with dementia may experience, and how I may better serve them as a member of Congregational Care.

Ms. Anne Tarbutton, “Annie” is the proud, new “Gannie” of her first grandson, Ellis Tilghman Sandrock. Living almost 6 hours away, she has spent much time in her Airstream Travel Trailer visiting to bond and be with him. Annie is a member of the Congregational Care Committee and Choir at Rumple Memorial Presbyterian Church in Blowing Rock, NC. She also serves as POAMN Conference Chair and is taking classes in Older Adult Ministry Certification with POAMN.
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☐ New Member   ☐ Renewal

Membership Type:

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To continue POAMN’s ministry to older adults and those engaged in ministries for older adults, additional gifts are welcome including those in honor or memory of someone.

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Please enclose membership fee with this form and return it with your check payable to:

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