



Conference Care Newsletter

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

Editorial

Parenting

The proper role of a parent is to provide encouragement, support, and access to activities that enable a child to master key developmental tasks. A parent is a child’s first teacher and should remain their best teacher throughout life.

Couples that land up being parents generally have the best of intentions as to how they will parent. Some may consider their role a daunting task. They may scour the bookstores for resources, trying to find parenting methods that will make the task successful. Some may have ideals and make efforts to find materials that will support these ideals. Others will operate quite lackadaisically and may come as close to success as the intense parents do. Another may look at the Word of God and find direction to operate by the proverb, “Spare the rod and spoil the child.” There are a host of other methods that implement good points and often bad points; although books can give some direction, some may lead parents astray with the best intentions.

I would like to draw attention to a resource that talks about four types of parenting styles. The material below is taken from *The Attached Family* by Dr. Maryann Rosenthal. It has been summarized. A few sentences are quotes. I would like to suggest that prospective parents and parents in the middle of the task step back and take time to reflect on the below. Thanks to a friend, Syl Klassen, for sharing this with me.

Authoritarian (despotic, dictator). Authoritarian parents are strict and controlling. They have a strong sense of

the need to be obeyed. They believe in clearly stated rules. If their children don’t behave as ordered, they will be punished. Parents like this don’t like to be challenged. Give and take is not popular. Therefore, these parents are not responsive and are demanding. Children growing up under such authority tend to be timid, have lower self-esteem, and rely to an unusual degree on the voice of authority for guidance.

Authoritative (assured, reliable, dependable). These parents maintain authority but are warmer and more communicative. Authoritative parents seek a balance between their older children’s desire for independence and their own desire to be listened to. They are demanding and responsive, assertive but not restrictive. They want their children to be the same—socially responsible, self-regulated and cooperative. Both authoritarian and authoritative parents expect a lot from their children but the authoritative encourage more freedom of expression. Their children will, more than likely, develop a sense of independence and develop into more competent adults than children brought up in the other styles.

Permissive (liberal, broad minded, lenient). Permissive parents are often warm and accepting. They make few demands on their children. They are lenient, avoid confrontation, and allow a fair bit of self-regulation. They tend to worry about thwarting their children’s creativity and sense of self. They are a lot more responsive than they are demanding. These parents tend to be out of touch with the preadolescent and adolescent world, and the best they can do is be pals to their children. They tend to give their children what they want and hope that they will be loved for being accommodating. Some permissive parents want

to make up for what they missed out on as children. Or they look at their children growing up and treat them like mini adults and give them what they want. If the child performs well, like making good grades, they give them freedom and material benefits for their achievement. At its most extreme, permissiveness takes the form of indifference. The parents are too busy with their own things to make any efforts to control.

Uninvolved. The uninvolved parent demands almost nothing and gives almost nothing in return except freedom. This style demands about nothing and responds little. At its worst, it verges on neglect.

So, upon reflection, where do you find yourself? What type are you? Which is the best type? Which type will help your child develop into a person who will fit well into society? Which type will build the best foundation for getting along in the social setting of the school he or she will attend? Which type will best prepare the child to be a good Christian?

Parents may say they have one aim when it comes to training their children. That is that the children will learn to love Jesus and be good, solid Christians. This sounds like the ultimate aspiration. I will write a quick response to the above.

Although it sounds honorable, this method has many pitfalls. It is a misdirected desire. Children are under the authority of their parents and do not answer to God. One of the biggest pitfalls when parents try to make their innocent children into Christians is that they lose sight of their God-given responsibility to teach their children. This subtracts from the authoritative care they need to exercise over their children. It does not lay a good foundation, and it is not following God's plan for parents to teach their children.

The opportunity to take a step back and consider what is happening in your setting and to ask yourself what you want is always there. After reading this, you may say it's just another list from another writer and it's too much like work to take time to consider it. The Bible says, "Let a man examine himself." You do that during revival meetings. It would be of value to do this in parenting as well. Let a couple examine themselves. If the four methods above are not to your liking, what criteria will you use to examine yourselves? Or, maybe, better asked, "Do the above methods hold water?"

In our efforts to help parents with special needs children, let us not lose the vision of saving what can be saved. True, there are many children who come from hard places. Parents have a big responsibility here. But people are prone to follow trends, and it may well be that parents too easily categorize their children "special" because of an unwillingness to accept the responsibility of training them.

How to Be the Aging Parents of Children

Christi Toews

We hear a lot these days about Generation X's dilemma of being sandwiched between two generations: your children who still need you and your elderly parents who are beginning to need you. Books are written and wisdom is sought on how to be the children of aging parents. The emphasis is on the challenge of aging, how to respect and honor the elderly and how to give them specialized care. These teachings and encouragements often come with the thought tacked on, "Especially when the elderly are difficult."

Groups of middle-aged folks swap stories in hushed tones. They wish to tell their struggles but are careful who they share them with. They want to speak but do not want to be judged or misunderstood. Often, these conversations end with a helpless shrug and a shake of the head and a little remark, "Oh well, I guess growing old isn't for sissies," "Maybe this is just normal," or, when things get really tough, "Maybe it's dementia."

The ages come and go, and in one form or another, this conversation has gone on from generation to generation. If you let your mind run to many heroes of faith or men of influence throughout history, such as Noah, David, or Jeremiah, and into more recent times and such heroes as Menno Simons, Abraham Lincoln, or Albert Einstein, you can imagine that their children would have had a lot to deal with. These men had to be strong-willed, eccentric, courageous, and adventurous people, leaders, and influencers who won battles, led nations, and changed the course of history. Their strong characteristics could turn them into stubborn old men and the despair of their children.

There are many verses in the Bible about parents' responsibility to children. Here are two basic ones we are familiar with and which are the foundation for many parenting plans: "For the children ought not to lay up for the parents, but the parents for the children" (2 Cor. 12:14). "Fathers, provoke not your children to wrath" (Eph. 6:4).

Somewhere along the road of life, parents tend to drop these Biblical teachings. But wouldn't life be easier and better if the above scriptures were followed by the parents into old age? And is there any reason to believe they no longer need to be followed?

There is a gradual and natural transition that occurs in families. Parents raise their children, and children leave home but continue to come back to their parents for security, food, and fun—the party is always at the folks' place. Then as time goes on, it gradually changes until one day we realize that the folks are now at our place, and the party has switched over to the children's homes. Parents care

physically and financially for their children, but the tables turn gradually. The love and care, however, never change with time.

What can parents do to make the change from young to old pleasant? Perhaps if the Bible teachings were practiced into old age, the transition would be more graceful. Fathers should not provoke their children to anger, or they will become discouraged. What if parents continued to provide for their children into old age, not with money and time but with care and consideration.

Let's take a typical family situation. The parents have had their five children, sons, and daughters. They settled down on a farm and raised animals and crops. They did the proper family thing and raised dogs and cats, vegetables and apple trees. They canned and sewed and butchered. They did a mission service project and gave time to the Lord. They married off their children to other parents' nice, respectable children. They got a little older, sold the farm to their sons, rented out the land, and got an office job. They babysat grandchildren, served the Lord a few more years in a mission post, traveled a little, and mowed lawn and watered flowers.

When a life is condensed into one paragraph, it can sound like the perfect life, full of moderation, normalcy, and proper choices. But needless to say, behind the scenes in every "perfectly normal life" lie many struggles, sorrows, heartaches, and difficult decisions.

At what age is this normal, busy, and productive couple old? At sixty-five, which is typically considered retirement age? Three score and ten which David suggests is a ripe old age? Is it eighty years old, of which he considers the last ten years to be bonus years? And who decides what is old? The parents themselves? Their children? Or do they wait until they break a hip or some day are unable to get out of the chair?

I am nearly fifty, and I am receiving the first hints of age from my children. I can tell that they are beginning to see us as parents in a different way. They are sometimes a little impatient; sometimes they treat us with a care that tells me they see us as weakening. I love that. It's true, we aren't what we used to be, and so why should it bother me? I love the thought of embracing the whole cycle of life.

If, as aging people, we want to stay in control and make our own decisions, why not stay one step ahead of our children and make for ourselves choices they might soon wish us to make. Control and decision making are very difficult to relinquish. Why not decide to let the younger help guide us and, in so doing, retain a degree of control. Why not move off the farm a year before the yard work becomes too much instead of three years after? Why not scale down while you are young enough to shop for your own house and take care of your "junk"? Why not re-

tire from work or mission life when you feel your children might wish you to? Why not ask your children what they recommend before they recommend something without your asking for it? Why avoid difficult subjects that do not need to be so difficult? Is it brave or caring to stay on at the old homeplace when it causes your children anxiety and guilt?

It always seems sad to me when a couple who has worked hard, served faithfully, experienced life's hardships and joys, and deserve a dignified and respected old age go struggling and resisting into their next step, leaving a family of worried, guilty children. It would not have to be that way.

I have watched up close and personal how simple and relaxing those transitions can be—when parents have aged keeping their humor intact, keeping active but not risking their health, staying open-minded, respecting their children's opinions. In this way, they provide joy and stability for their children.

When to Medicate Depression

Ben Friesen

One of the more common queries we receive concerns depression. Depression is real, raw, and miserable. To people suffering from depression, life can appear like a meaningless black hole, a hopeless endeavor, and in extreme forms, no longer worth living. Depression, like so many mental health maladies, operates on a continuum—this means the illness can range from mild transient types all the way to chronic and dangerous forms.

Depression, according to one definition, is a medical condition that affects how you feel, the way you think, and how you act. Depression can cause feelings of sadness and produce a loss of interest in activities you once enjoyed. It often produces something called *anhedonia*, which is a loss of pleasure in everyday things.

For treatment to be effective often requires an attempt to identify the type of depression. This helps to determine the disease course and the needed treatment. There are numerous forms of depression: one is major depressive disorder, sometimes known as clinical depression; another is persistent or chronic depression, sometimes called dysthymia. Other common types are post-partum depression, situational and circumstantial depression, seasonal affective disorder, and the profound manic depression associated with bipolar disorders.

Those who have suffered from depression know that there is usually no easy fix for most types; they know that

treatment can be frustrating and time consuming. I run the risk of oversimplifying this complex subject, but in trying to assess the chances of medication helping you, I post a few thoughts.

When assessing a person suffering from depression with no immediate definable cause (such as a recent death in the family) the following questions may help direct therapy and care:

Do you have an intact social structure that provides meaning? Do you have close family ties and multiple friend relationships?

Is your religious structure intact? Do you find your spiritual life fulfilling and inspiring, giving room for life's ups and downs?

Do you have a meaningful career or work you enjoy and find fulfilling?

Do you have hobbies or useful things you enjoy doing in your spare time?

At the risk of overgeneralizing and simplifying a serious malady, these are fair questions to ask. In general, if any of these structures are dysfunctional, lacking, or absent, medication may not be as effective or may not help at all. In this case, begin to reach out beyond yourself to correct and repair the gaps in social structure. Recognize where the void is in your life and actively seek insight into your angst. Then assess its relationship to your depression from a holistic perspective, that is, spiritually, socially, and personally.

Another set of simple questions may clarify the cause and type of depression:

What comprises your usual diet?

Are you sleeping well and getting enough of it?

Do you follow an exercise regimen?

A recent case in point. A young woman in her mid-twenties came to us; she said she felt depressed and discouraged with life in general. She has had a focal headache for the last three weeks and is worried. Her primary care doctor has suggested an increased dose of antidepressants, blood work, and an MRI of her brain. These may all be appropriate, but a deeper look into her life produced the following information: She has not eaten properly in months and has subsisted on crackers and soda. She has no job. Her sleep patterns can only be described as upset (with screen time until early hours of the morning and then sleeping during the day). She has no close friendships and is living in an unstable relationship that has no future. Any semblance of spiritual life is nonexistent.

The case study above may be somewhat extreme, but with this lifestyle, I would be surprised if she wasn't depressed. Now, if she has a clinical depression, there is a chance an increased dose of antidepressants would give her the energy and will to find a job. Ultimately however, in order to climb out of this hole, she will have to develop

life habits that tend toward health instead of away from it. She needs to find and have stable relationships and a career. For lasting effect, somewhere in this picture she will need to connect with God. We are spiritual beings, and healing and progress will require addressing this need.

But back to individuals who have all these structures and aspects in place and are still depressed. For them, an antidepressant may be just the thing. It's worth a shot—take two or three months out of your life to give it a chance. The brain is extremely complex and functions through the complicated interplay of billions of neurons emitting neurotransmitters that control and direct our being, not to mention the physiological fundamentals of oxygen and blood delivery. To say this can never go wrong is ludicrous. It's actually more amazing that it works as well as it does!

Once again, depression can be a serious malady. Sometimes, the treatment is simpler than we think (simple does not mean easy). A brisk walk, adequate water intake, and healthy food may be the ticket. Other times, medications can work wonders.

On Moral Purity

Stuart Isaac

“Whatsoever things are pure” (Phil. 4:8). Of his creation, God has placed the highest value on humans. It is an eternal value. When we take something from someone that is not ours to take, like an image we have seen and dwell on it, we begin to lower the value of that person. Even though some people voluntarily flaunt themselves in public, it remains our responsibility to value them in respect to God's eternal value of them.

When a thief takes something from someone, he lowers that person's value by what he has taken. He, also, lowers his own value because he must now protect what he has done. He loses freedom in the relationships he has, and his usefulness to God is diminished.

Recently, a few people met to review an online study course relating to moral purity. The conference care resource team was requesting input as to whether the course was sound in principle and doctrine.

The course addressed the binge/purge cycle (acting out, feeling guilt, acting out, feeling guilt). It explained the pathways that form in the brain after allowing numerous trips down the same road. As opportunity presents itself, the mind turns onto these pathways like cattle onto a cattle trail, only to be followed by guilt.

Trying harder is not the answer. However, over a time

of choosing pure pathways, the impure ones will close off. God is waiting to help as good choices are made.

Satan takes full advantage of the fact that a young man matures physically faster than emotionally. Repeated impure actions begin forming pathways. To correct these pathways, pure actions and choices will need to be made.

Parents need to be aware of this issue. A school-aged boy told his teacher that he entered his parents' bedroom at night, taking a phone and returning it before going back to bed. Another boy reported accessing impure sites on his parents' devices for nearly the entire time his parents were away from home. Repeated impure activities form pathways that will not close off by merely trying hard to make them do so.

People are too often trapped by the evil one. Lust brings forth sin and, when finished, death (James 1:15). If you find yourself trapped and want to be set free, consider reaching out to the resource team or anyone else you trust. The power of God, time, and a dedication to making pure choices can replace guilt with victory. May God help everyone recognize the value that He has placed on men and women. May God bless efforts toward maintaining and restoring moral purity.

Shame

Shame can be very useful. It tells us about the boundaries of appropriate behavior in our culture. However, Satan uses shame to keep us locked up. Shame causes barriers between us and others. Shame is a wall that prevents us from reaching out for help. Shame prevents others from being able to reach out to us.

We visit our doctor, dentist, chiropractor, massage therapist, etc., freely and without shame.

Why then do we feel ashamed about getting help for our emotional needs? We freely visit grocery stores, veterinarians, fabric shops, feed stores, farm and garden shops. However, when it comes to taking care of our psyche, we cringe. We don't go. It's embarrassing.

It's okay for my friends to come visit. Frequently, we stay in the homes of brethren we don't know as we travel. We meet new people and speak with them. But we will feel ashamed and embarrassed if our peers know that we have been speaking to the staff or someone on the counseling committee.

Why is this? Is it productive? Where does this shame come from? Is it different than the shame mentioned in the opening sentences?

What will happen if I "open up" to someone? Will they judge me? Will I be seen as unclean by my peers? Will

they laugh? Will they say it was my fault that this trauma struck me?

They did that in Jesus's time. "Who has sinned that this man is blind?"

Maybe other questions should be: Am I feeling ashamed? And of what? How much should I share with my friends? Will they understand my pain? Do they want to hear about it? Should I feel ashamed of trauma that was inflicted upon me? Was it my fault?

Just because I feel pain and shame doesn't mean that I did something to cause the trauma or that I could have avoided it. Tamar felt the shame of her brother's actions. Did she take that shame into her being and let it eat away at her soul? Praise God that through Jesus Christ, we need not let this be the case! Christ died so we could have life. Through Him, we can live a life of freedom.

How do we attain this freedom? The shame is still there. What do we do with it? We can give it to Jesus. He will cleanse and make us whole.

I need to be cleansed? That means I'm dirty. That means I could have prevented this trauma. I did something wrong. That's why I feel ashamed. Right? No, not right.

I need to be cleansed every day just because the dust of this earthly life gathers on me. The cares of this life want to pile up and weigh me down. Satan wants to keep me down. Satan wants me to feel ashamed, embarrassed, marred, judged, and guilty. That's the prison he wants me to be in.

When I open my heart and let Christ in, the healing can begin. Healing is a positive thing. It's something to rejoice about! We rejoice to know that cancer has been conquered for someone. We love to hear that a premature baby is growing and healthy.

Lift your heads, ye wounded, weary, and worn! God is on his throne. Healing is in his wings. He has sent angels to help the downtrodden and traumatized. Find those angels. Seek them out. Speak to them. Utilize their anointing from the Lord in your healing process. We expect preachers to preach and deacons to speak to us about financial matters. We see no shame in them working according to the Lord's anointing.

Some people have been anointed to help victims find release. There's no shame in letting someone work with you as you find God's healing and draw closer to Him. It's okay if your peers know that you are working through this process. There is no hope of having a healthy, loving, happy life without the healing.

You can stay away from the church if you are afraid of others' reactions. You can find a spouse out in the world and try to be satisfied. You can tell yourself that this was your only option. But God knows. He has something better for you. He has a healing for you. Will you allow Him to give you that gift? Will you open your heart and

receive his healing touch? Will you let the brethren whom He has anointed help you on your journey?

Jesus performed healings in the open. He did not hide in a corner to perform miracles. Let those who can and want to help you embrace you. Sometimes it's a painful journey. We all need help on the way.

Sharing our problems with others allows the light of Jesus into our lives. Where his light shines, there can be no darkness.

Opportunity in North Idaho

Sunset Home Assisted Living, a home serving an aging generation in Bonners Ferry, Idaho, has an immediate opportunity for a brother to train for and serve as an administrator.

This beautiful home, nestled among the pines in the Kootenai River valley, offers a unique chance to ease the path for our elder brothers and sisters while exercising the conviction for mission work among our friends from the community who are gratefully filling available rooms.

If this appeals to you, perhaps you should seize this opportunity to serve others while enjoying the pleasant climate and beauty of North Idaho!

We urge those who are interested to take this to the Lord in earnest prayer. If He moves you, contact Ron Peaster at 208-290-7611; ron.peaster1@gmail.com; or, Mathew Holdeman at 208-946-9007; mbholdeman04@gmail.com.

Change and Emotions

Tim Penner

(Adapted from an administrators annual facility meeting presentation)

From time to time, all of us look at the past. We evaluate ourselves and our activities. Have we made mistakes? What have been our successes? What has changed? Did we plan the changes, or did they just happen? Have we learned from the past?

What about the future? Will we make fewer mistakes? What needs to change? Should we plan to make changes? Needless to say, "Nothing is certain." We know that everything is in God's hands. However, what influences change?

Any care home experiences losses. Residents pass into

eternity. However, as time moves along, relationships develop between residents and care givers. Each resident becomes part of the daily routine. And then in a moment, life departs. This is change, and it is interesting how it affects care givers. Sadness, surprise, joy, acceptance, and other emotions stir in the mind. As the end approaches, it may become clinical. But the personal, emotional impact death brings is always near the surface.

Lena was a health care aide. Despite a few health issues, she was a strong, dependable caregiver. Her health deteriorated, and she terminated employment because of it. She dropped in sometimes and tried to do some volunteer work. One day, she came to the office and asked if she could be put on the casual list. She phoned the following day and asked if we had decided, and I told her, "Yes." A few days later, she passed away. She was a good-looking twenty-two-year-old girl. She was an only child of a widow. One day after we had considered the whole thing regarding Lena once more, I brought up some business the board wanted us to consider. Someone said, "Please, not this week." I think that statement embodied our emotions exactly.

I want to expand the emotion topic a little. Here is a quote from Dr. John McFerran: "In recent years, there has been an about face when it comes to emotions in the workplace. The old concept was, 'There's no crying in the board room.' It was important to keep the lid on raw emotion when there was a job to be done. There is an increasing awareness of the link between employee emotions and decision making, creativity, teamwork, and, yes, job performance. When you think of it, this shift makes much more sense than expecting workers to leave their emotions at the door each morning. It is much more reasonable to accept that people will come to work as whole beings complete with personal traits, quirks, attitudes, experiences, and moods—both good and bad."

The so-called negative attitudes of frustration, anger, sadness, and uncertainty are appreciated from the angle that they are normal and that they can be motivating forces in improving service to our elders.

We are faced with change on every hand. Businesses face change, and the farming industry faces change. Businesses that suppress emotions have disinterested employees. An edited quote from the same source as before: "Disinterested employees are resistant to change and tend to cling to obsolete practices. Those workplaces that encourage the expression of emotions have secure and committed employees. These facilities are not afraid of change but are motivated by it because they see it as energizing and exciting. This increases productivity. The happier the employee, the more productive (caring) they become. This has more spin-offs. It improves recruitment and retention of workers. Companies that are known as being

fun places to work because their workers are happy, treated well, and proud and passionate about the work they do will attract talent and reduce the costs associated with employee turnover.”

In one way or another, everyone in an area that operates a personal care home is involved in the effort. There is evidence of a lot of generosity, and everyone deserves recognition for what this generosity achieves. At one point, the board of directors increased wages so they would fall in line with other care homes in the community. One rate payer said, “It was high time.” One employee said, “It is actually, finally, making a difference for me.”

A new resident had been admitted, and a daughter of the resident was asked to join the staff at a care conference. At a care conference, care givers meet and review care plans for specific residents. In this case, it was more a getting-acquainted conference. There was laughter and some tears. It was a special privilege to be allowed to enter the life of a family where mother loved her children and where children loved their mother. Emotions again.

It’s wonderful to hear laughter or harmony coming from a room where someone is taking time to sing for a resident.

I remember the day the care home was introduced to some folks who were considering the facility for their parent. A husband and son toured the care home, and the weight “of the decision that was in the making” in the husband’s and son’s hearts was palpable. They had questions, and it was wonderful the way the nursing staff responded to these folks. When they submitted the application, they especially mentioned the kindness of the nurses.

When I cite anger as an emotion, I am not thinking about loss of temper. I am thinking of questions like, “Do we have to put up with this? This equipment is pretty outdated. Are we using computers, or aren’t we?” Sometimes, there is input from families who are frustrated and concerned. This is an alert to situations employees have become used to. “It’s about time to think seriously about correcting this problem.” Everyone knows that this type of input is needed to get ahead. Indifference creates a dispirited climate. Regard for peoples’ input makes them feel they are important players on the team.

Whether we are employees or elders, time and circumstances bring change. Let’s not resist change, but let’s be realistic. Some change is difficult. When peoples’ bodies

fail, when the decision is made to take the care home route, a course is set that affects the emotional constitution of the strongest. Let’s commit ourselves to ease the journey, to lighten the load for our elders.

General Activity Report—Conference Care Committee

From Financial and Activity Reports Book

Hebrew history recounts the story of David and Goliath. Goliath challenged the armies of Israel. The young man David accepted the challenge. The challenge was not the battle.

Today, the Church faces many challenges. Conference Care often feels much like the armies of Israel. We are too small. We have too little knowledge. We are afraid. The challenges funneling onto the table are huge, at times overwhelming.

You are wondering what kind of challenges we are facing. We will tell you. But before we do so, we want to make it clear that the Care Committee is very indebted to the Resource Team. People on this team are brothers and sisters chosen from among the members of the Church. We periodically discuss if we are using the best method to find these people. Till now, they have been picked with this in mind that there must be interest and competency for the special needs work. These people are vetted carefully. Staffs are called and references are checked. It is clear to both the committee and the resource team that new members will join existing members and face big challenges.

Back to what kind of challenges they will face. We will simply use terminology that presents a picture of what lands on the table. Marriage problems, relationship problems, troubled teens, same sex attraction, behavioral issues, depression, suicide threats, OCD, autism, learning disabilities, and more.

Just as challenging is trying to understand why these problems come to the attention of the Resource Team and the Care Committee. Also challenging is if it is appropriate to become involved in some of these problems. Is it the Team’s responsibility?

When David accepted the giant’s challenge, he testified that he was going in the name of the God of the armies of Israel. Then the fight began, and he conquered.

The Care Committee has, in part at least, accepted the challenge, but the battle has not come to an end. Some giants have been vanquished, and if the work is done in the name of the Lord, there is usually progress. It is doubtful

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Send change of address or quantity to Gospel Publishers, P.O. Box 230, Moundridge, KS 67107; Ph. 620-345-2532; e-mail: info@gospelpublishers.com.

whether the battle will ever be over, especially for many individuals, but in faith we move forward.

Current activities that have taken time and money are Sleepy Creek Boys Camp. There is not space to report in detail. However, the effort is running and developing. We are in discussions with Raising Hope Ranch. They would like to be under the canopy of the Conference.

The above covers some of the special needs work. There is, also, the senior care work. The care facilities are operating. Unfortunately, the fall conferences have been cancelled the last two years because of Covid challenges.

The committee has split up into two sectors, the special needs group and the elder care group. This was done on a trial basis. Whether this is the course to take in the future is up for discussion.

New facilities are being built. Expansions are in the works. The challenge of finding employees for the facilities is real. Discussions are being held regarding retirement plans and worker incentive programs.

There is one thing that is steady and positive. The elders in the facilities are being cared for with love and compassion.

Today the cry rings out in the hearts of our elders and in the hearts of troubled people, "Who will come and battle with us, not against us in this case, but with us?"

Notice and Invitation: Detroit Care Meeting

The Conference Care Committee is planning a Care Meeting on July 21-22, 2022, to be held at Detroit, Texas.

We, the Red River Valley Congregation, extend a welcome to anyone interested in attending this meeting. It will begin on Thursday, July 21, with registration at 8:30

A.M. (There will be an evening meeting this day.) The care meeting continues through Friday, the 22nd, closing at 5:00 P.M.

Recommended airports: Dallas/Fort Worth International or Dallas Love Field.

Please contact the courtesy committee at 2022conferencecaremeeting@gmail.com if you plan to attend.

Tentative topics for the agenda are as follows:

- Seminar on Parenting Children from Hard Places based on the Empowered to Connect and Trust-Based Method of Parenting.
- Personal sharing of experiences
- Effects of trauma
- Developmental Disabilities
- Guest speaker, Thursday evening
- Teen Mental Health
- School Issues

The care committee and resource team are open for more agenda item suggestions. Please contact Patrick Hanes: patrickhanes@outlook.com or any other members of the care team you are familiar with.

Conference Care Committee
Resource Team

ATTENTION

Check out the Resource Team's website:

cccresourcesteam.com

Information for all kinds of challenges

A featured topic, currently FASD

Contact info for resource team members

Upcoming events

And more!
