Welcome to the Project Zion Podcast. This podcast explores the unique spiritual and theological gifts Community of Christ offers for today's world.

Hello, and welcome to the Project Zion Podcast. I'm your host, Carla Long, and I am super excited about the podcast today. It's something that you have probably never heard of before happening. Or maybe you have maybe it's happening other places in the church, I'm not sure. But this idea was told to me by a good friend of mine, who lives in Australia. And she was talking about this really cool project that I have not been able to get on my mind for, like nine months now. So I can't wait to hear all about it, because I really don't totally understand what's happening either. So I'm gonna be learning just as much as you are. So I'd like to introduce Kate Jones and Candice Care-Unger. So Hello, welcome to the podcast.

Hi, thank you.

Hi, Carla!

So Candace, why don't you tell us a little bit about yourself?

Okay, um, my name is Candice. I live in Sydney, Australia. I am a pastor at West Pennant Hills congregation in Sydney. But in my non volunteer church life, I'm also a social worker at a hospital. And that's how Kate and I know each other.

Thank you. Well, that's a really quick introduction.

Sorry, I didn't know what all you wanted.

No, you did great! I actually didn't know you're a pastor at West Pennant. Oh, that's exciting. Uh, Kate tell us about yourself.
Hi, um, so yeah, I'm a social worker, as well as Candice said, that's how we met. I've worked in the field of spinal cord injury since about 2001. But about, oh, gosh, maybe five, six years ago, I sort of ventured into the field of research, and ended up doing a PhD and the PhD was on the topic of spirituality and resilience after spinal cord injury. So that sort of took me on a whole different direction. And I'm currently will be telling you a little bit about the in between years. But currently, I'm working as a early career researcher at the University of Notre Dame Australia, on a project that's funded through both themselves and Saint Vincent's Hospital in Sydney.

That sounds fascinating. Now, I'm even more excited about this podcast. So Candace, why don't you start us off and tell us about how this whole thing happened? And actually what this thing is.

Sure, okay. So a few years ago, we were sitting, doing a budget build up trying to plan what we were going to do for the next financial year. But I think there was those two things. One, West Pennant Hills is very fortunate to have a regular tenant in the building. So we have a preschool that rents it. So we have good financial income, and one of the congregations that is blessed because of regular income coming into the building, the building works hard for us. But we were struggling with like a vision, like what were we doing as a congregation? Where are we putting our energies? There's no point having this big fat bank account if you've got absolutely nothing missional happening. And so I think for us at the time, we were trying to look for where it was that we're being called to have impact in the community? But also acknowledging that we were quite time poor, as a congregation, we were getting more and more numbers small in terms of that demographic that could do something. And I guess we were just really struggling with this whole idea of can the congregation and the church be present in the community without having to do it ourselves. And so I guess we will just sort of let letting that ruminate around where we're being called to be active in the community, and how we could possibly do it when we didn't have necessarily the man hours. But we did have good economic resources. So whilst we were, I guess, kind of thinking about opportunities, the thought sprung amongst the leaders group of what if we partnered with somebody else, like another agency who was doing something awesome, or wanted to do something awesome. And what they actually needed was the economic kind of seed funding. And we could be that little mustard seed, we didn't have to be the one doing it all. We could be the one that let you know, new life breeds. So that's sort of like the background to what was happening in the congregation at the time. And then obviously, Kate and I have worked together for a very long time, like over 10 years. And I knew that she was doing her PhD and, and Kate gonna maybe talk a little bit about how we got to this point?
Yeah. So this could be a very long story, but we'll try to make it short. As a social worker in spinal cord injury, I guess I've always found that people are having coming into hospital or having had a catastrophic injury, that's life changing, it's gonna be with them generally for the rest of their lives. It's changing everything about their life, their family relationships, how they do things, their hobbies, everything. And so as a social worker, I used to, like really want to get that sense of who they were, as really holistically and talk to them about spirituality as well as everything else. How do you make sense of this? What's your bigger picture on life on the world, um, what's happened? But what I was finding, so these things were coming up, they were important to people, whether they had faith or didn't have faith, spirituality was something that was important. But I was sort of picking up that it just wasn't something that as a rehabilitation team, we were really addressing for people. And so that's what led to my PhD research is I just thought, well, I really want to know what this relationship is between spirituality and resilience, especially after spinal cord injury. And we'd already done some resilience building work. Both Candace and I had been involved in that for family members of people after spinal or brain injury. So we knew resilience was a really key concept. And once again, even in that research, spirituality was coming up. But there just wasn't a sense of well, how did these things work together? And so that's what my PhD really set out to find out. And so I managed to do some quite some surveys with people and their family members, as well as some interviews and found that after spinal cord injury, yes, spirituality is really important. Doesn't matter which faith background or no faith background, it really is important. It was helping people find deeper meaning and connectedness, helping them get through giving them hope, after a spinal cord injury. So all these things were really, really important. But then I also did some focus groups of staff, and the staff were saying, actually, we don't feel comfortable with this topic. It's not something we feel confident to talk to people about. So these are physios, OTS, psychologists, or people working in spinal cord injury, and they're saying, actually, this is not something we feel like is something we can address. And they're acknowledging, yes, maybe it is important, but they just didn't know what to do with it. And so after my PhD, Candace and I sat down for lunch one day, and I think her question to me simply was, what are you going to do now? And I was like, Oh, I guess I'll just go back to being a social worker, and you know, maybe try to encourage people to think about this. And then she said, and what would you like to do now? Those are different questions. I'd really love to get in and make a difference here. And let's really see if we can incorporate spirituality into rehabilitation, make it something that's, that's, you know, part of the process. And that's, yeah, where things really started, I guess.

**Candice Care-Unger 07:53**

Yeah. So that was after that conversation for us was like, well, this is maybe the opportunity for the church, you know, like that. There isn't a lot of funders around, they're willing to fund spiritual projects in public health settings. Like it's, it's a interesting space, you know, like, we're not making people walk faster, or stand stronger, or go to the toilet quicker, like it's, and I think that could be the story for many social things. It's difficult to find funding, but and the church is definitely not like a research grant agency, so it was new for us as well, like on the church side to be thinking, Well, how do we give money to somebody else? There was a bit of pushback, there was a little bit of negotiation with other people
around, well, why this one project shouldn't be opening it up to like a million projects. And it just really came back to that conversation that we had with our congregation of where can the congregation be present in our local community, and the hospital that Kate and I work out is within, you know, geographically close enough to the congregation to be considered part of our local community. That's going to have value that's going to have meaning that's going to actually bring something to abolish unnecessary suffering. And so for us, that was kind of the match made in heaven.

**Carla Long 09:11**
So let me know if I understand this correctly. So West Pennant Hills congregation funds, your research, Kate, is that correct? And works with you, while you do all of the spirituality work with people with spinal cord injuries.

**Candice Care-Unger 09:27**
West Pennant Hills congregation funds, Kate like, well, while she was working at Royal Rehab, which is a hospital, so the money was given to Royal Rehab so Royal Rehab had could employ her into research officer role. And the research officer role at the hospital was to, you know, she can talk more about that in a second. But really, it was the church handing over money in faith and saying, We trust this is going to be used in the right way. And there were no strings in terms of and now you need the church to be involved in this way or that way. It was completely, I think this is the thing that's kind of different that a lot of people like, "What your church just gave away money?", I don't think people necessarily think about the impact that we can have economically by being generous. And by letting people who know what they're doing, just get on with it. We don't need to be involved with, you know, any sort of strings attached or conditions. I mean, there were definitely conditions about the timelines for how long something would be produced. And there was a clear vision about what that something might be. There was quarterly financial reporting, there was quarterly reporting about what was happening. So there was definitely governance around the money. But it wasn't. It wasn't like a second agenda for you know, converting members or for trying to get the church's name, like backdoor into anything like that.

**Carla Long 10:48**
This is an incredible ministry like this is I mean, I don't even know exactly, Kate, what it looks like, you know, when you're working with people, but this changes people's lives. What a gift the western hills congregation has given? That's awesome. That is awesome. As a bishop in Community of Christ, I am I you know, the money thing, it kind of stresses me out sometimes. But but for the most part, I'm like this, this is, this is the best use of funds ever. So. So what happens, Kate, like, what do you do? How do you work with people? What do you talk about spirituality? Tell me more about this. I'm so excited.

**Kate Jones 11:26**
Yeah, it was totally my dream, my dream job. And I guess we should say like, it was a probably three year period in the end, that we worked on this project. And as Candace said, it was beautifully, like, we're so grateful, I think, at row rehab, we were just so grateful for this gift that they gave us, because it
was so open, you know, it's such an open book. And, and so that really gave us an opportunity to go. Okay, let's start at the beginning. When you I mean, my research, when in my PhD had had certainly found some evidence that this was important, but where we were working, sort of addresses both spinal cord injury and brain injury. And so we didn't know a whole lot about spirituality for people with a brain injury, what that research was, let me tell you, there's very little research in that area. Because we did a systematic review, we just said, let's look at the literature in this in this field. Very few, I think we came up with something like nine studies that looked at brain injury and some sort of variation on spirituality. And so that was kind of helpful to know, okay, not much is happening in this space. So that was sort of our first kind of project, then we also did a staff survey. And that was a sort of, basically, with people across Australia. So because one of the people on our team at at Royal Rehab, is a nurse and has connections with nurses around across all of Australia, she was able to send a survey out that way through everywhere, as well as people at Royal rehab and social workers across New South Wales in Australia. So we were able to really say, Well, what do you think spirituality is? And how confident do you feel about addressing it, and people was just like the, I think we got over 100 surveys in the end and they were just saying, actually, we really, really need more training in this area. And the rest of the other things we were reading was saying, actually, that's how you address spirituality, you need to start with the staff, you can't just put something into a program and not have the staff on board. And so I think it was, I can't even think it was somewhere in that first year of the project, we weren't actually what we really need to do, what this project needs to be about is providing some support and education to staff who are working with clients day in and day out. And the thing that I think we all sort of knew, is that if someone has a spinal cord injury or brain injury comes into hospital, they're not necessarily going to talk to a stranger who's a chaplain or even a social worker or psychologist, they may open up to the nurses that one person they see every night in the middle of the night throughout the night, and have built a trust relationship with or it might be the physio in the gym, who they open up to, because they're there every day doing exercise, it's really tough, and everything's very confronting. And so we kind of knew that everybody needs to be able to feel confident in the space, and everyone needed to be equipped to be able to have a conversation in the space, because it could you know, issues of spirituality, meaning making, why why am I here? Why has this happened to me can come up at any point in the rehabilitation journey. So I think that's where we got to we just went Actually, we need to do something here that's going to train staff across the board. And so that's really where we started then developing and building materials for staff, spiritual care training program. Yeah. So I don't know. Do you want me to keep going?

**Carla Long  14:47**

Yeah. So how, like if you're, you're working with people who come maybe from all different types of faith or no faith at all. How do you handle that? Is that is that even an issue or and also, how do you continue to train the staff in that way? You know, like, for instance, I'm a full time minister, but and I perform weddings and stuff, but I can never call myself like do pre pre marriage counseling, because I'm not a counselor. And I never want to say that. So I don't your staff aren't counselors, either. So how do they kind of know what to say and know what to do?
And yeah, I could maybe I'll just describe the program. Because we developed, we developed a very specifically to meet the needs of staff who were from either faith background, or no faith backgrounds, people who are saying, That's not my business, I don't feel comfortable in the space, this was the program for them. So it was literally literally just two and a half hours of their time. The first hour, Candice and I together interviewed a whole range of people who could tell us about different sources of spiritual strength that they draw upon. And so that didn't necessarily have to be faith, or religious faith, it could be the natural world. And so one of the people we interviewed talked about how just how she got had some home like leave going home, for a weekend from hospital, and she come across a bridge being driven home. And the trees were just incredible. And she said, she actually lost, she couldn't breathe properly, because of that experience of seeing trees for the first time in several months. And how profound that was for her and how she realized how to deprive she'd been in a sort of spiritual way, because she hadn't had that connection with the natural world. And yeah, other spoke yeah, just about different ways that they, you know, access spirituality, and how that helped them after their injury. So the first hour for these people and training and the staff is sitting down in front of a computer screen, and listening to several videos and getting a sense of how broad spiritual spirituality can be, and how how important it is, for so many people. And so that was really the first hour. And then second hour is a workshop. And so they come along, it's a noun, so it's an hour and a half, they get a little bit of research. And we tell them a little bit about the research a little bit about what we know about spirituality after traumatic injury. And then, and then we give them a tool, something that they can then use in a conversation at any time, they could use it to document, they could use it in a conversation, they could use it walking in a corridor for someone, and, and it really taps into that idea of what sources of spiritual strength as a person draw on. And they might not use that word spiritual. So we, there's a whole lot of different ways to talk about spirituality. And in Australia, I think one of the ways is what lifts you up, you know, what lifts you. And so if you think about that idea of transcendence, and going above all the things that bother you, day to day, and even now in hospital and experiencing other stuff, there's something for most people that will lift them above all of that. And it might be a connection with another person, like it might be their, their relationship with their children, that is actually a really spiritual connection. And it just means everything to them and get them up in the morning. And that's what lifts them up. Or it might be that the trees that lift them up, or they could be their faith in God is just tremendously profoundly important to them. And that will lift them up above everything. And so we use the acronym SOAR, S-O-A-R, and that sense of lifting, if you can sort of imagine it has helpful, it's just it was just a four letter acronym that they could take away sources of spiritual strength, others that you connect, connect with around that, how you want us to address it. So very tangible sense of what you want me to do about that? And how relevant is that to you right now. So yeah, so that kind of conversation that people could pick that SOAR at any point, talking some in the physio someone's really down or what used to lift you up what used to be really important, meaningful to you, you know, that could be the start of that conversation. But it could also equally be I know that you're, you know, have a Christian background. And I'm just wondering, what's lifting you up at the moment? what's helping you?
And they might say, Well, yeah, we're getting into my Bible, or prayer is something that's fairly written really important and relevant to me right now. Or it might be actually I'm feeling really, like, isolated. And I don't know if God's here for me, and I'm really struggling with that. So that might be the conversation that comes out of that. It's just making staff feel, or helping staff to feel, Oh, actually, I can see with this I can, I can sit here and have this conversation. I don't have to refer this person off. They're trusting me to start this conversation. Okay, here's a few things. I can ask them and get this conversation going at the end of that conversation when they say you know, or how do you want me to address that for you or what do you want me to? How do you want me to assist you right now? They might say, Oh, yeah. Can I talk to someone a bit more? Well, can I kind of refer you to a chaplain? Or you know, or would you like to talk to the social worker a bit about that a bit further, but they've opened up to that first person, and then they're in, that patient or that person with the injuries, then in control of that, they can say, Yes, I'd like you to help me with this, or no, I'm okay. That's fine. I'm okay. I'm good. Yeah. So that's a really, that's the training in nutshell is just the videos, stories, getting a little bit of background and then getting a tool and then we give them a chance to practice it in that workshop. So they have a bit of, you know, role playing and time to practice it. Yeah, very simple. But it made the world of difference.

**Carla Long 20:46**
Yeah, I mean, you have given your staff confidence to talk about this, like that is that is huge. That is huge, because the the S word spirituality scares a lot of people, a lot of people because they're like, I don't know anything about the Bible, I don't know anything about the whatever, you know, and so they don't want to talk about it, they don't want to look silly or whatever. But anybody can talk to someone using SOAR, right?

**Candice Care-Unger 21:16**
I think part of it is that a lot of people don't want to be seen, particularly in like a health setting to be like, you know, maybe trying to convert somebody or crossing some imaginary boundary of like, oversharing around someone's face, or getting too religious. And this kind of draws it out of being religious, and being spiritual and tapping into something that's just a fundamental part of who we are as human beings, you know, with physical, spiritual, emotional, and social beings. So I think this just kind of helps plug that how do we talk about things that are spiritual and important without being completely uncomfortable about it?

**Kate Jones 21:53**
When we talk to the staff after the training, one of the things that really came out, and we actually had it as an overarching theme, and all this thematic analysis was spirituality is everybody's business. And they really grasped that actually went, actually, yeah, a few of them just said, that's why we think. We need to hold on to that, spirituality is everybody's business. And so they got that, and, yeah, it's really exciting.

**Carla Long 22:17**
Yeah, it is. I, one thing I really like about this, is that the vulnerability piece, because when somebody asked the question, they're also being vulnerable to they're saying, you know, like, you know, I really care about you. And I want to know more about you in a very kind, and calm and compassionate way. And if that person is like, No, thanks. You're like, Okay, no problem. But I but when two people are vulnerable together, that connection is, is so so strong. So I love how simple it is. And I also really was taken with your, in your training, how you showed an hour's worth of spirituality like about people talking about because in some ways that really prime's the pump, because of a staff members, like, I'm not spiritual at all. They're like, Wait a second. I like nature too. And I feel something when I'm in nature, too. So I love how that pump was primed, because then they can share to you.

**Kate Jones 23:15**
That's exactly what someone said. She said that the tree example like I, she just said, I watched that video, and I didn't think I was a spiritual person. But then I went, actually, I love trees, too. She's like, maybe I am spiritual. So it's just like, both moment. It's just like, Oh, yeah, that's me, too. And someone else was just saying, Yeah, you keep seeing it everywhere now. Like, you know, that they kept seeing it. And people even though that they've never really been always previously thought that someone else's business, you know, it's not my area.

**Carla Long 23:49**
Yeah, exactly. It's like that's for somebody else to take care of, actually, it's all about our jobs to take care of each other. Oh, this is so beautiful. You're making me cry a little bit. So So you've trained the staff now staff understand, so how is it going, you know, how's the staff doing working with people and our people?

**Candice Care-Unger 24:10**
You know, Carla, what are the interesting things that's come from it is, um, so we do like, in non Coronavirus days, we would do outings or you go to the shops, that was the major one. And it'd be like, oh, let's go to shops to practice your shopping. And we like go out. And I think through the training, one of the was actually the same lady was like, I hate the shops. I don't know the shops. But if the point is to practice my community mobility, then I'd love to go like out to the beach or out to the mangroves. Or maybe we could go to a musical kind of thing. And I think it's really just helped people go, what was the purpose of those like outdoor activities? It's to practice community mobility. So how can we practice communicability necessarily just thinking, Oh, we just go to the shops. And so I've seen so many people are like, oh, let's do our therapy in the garden. Let's do like we've got this beautiful garden at Royal rehab. Really amazing and we should give a little shout out to Chris White he's like the magical garden fairy. Because it's got this, you know, there's like a water feature. And at the moment, cuz it's spring, I just noticed that this week going, wow, it is just beautiful. And, um, and so people doing like this speech therapy in the garden now and I just kind of think that maybe we've just really gone, "Who said we had to stay in these four walls? Like no one there was going to say these four walls." And there's a better appreciation for things that are that are important, like music and art and some of those more what many
would have said recreational activities, but it's like, what's the purpose of that for this person? And how can we make it work and fit like, particularly people who've got like big family connections, you know, how do we facilitate those in a way that, you know, isn't necessarily going to impact on everyone else when we book a room, and then they can meet out there. But I think it's just a bit more creativity around it. And more than anything, it's given the staff a vocabulary, a shared vocabulary, how to talk about something, which is important, because I think sometimes you can dance around something, and not really know how to talk about it. Whereas what we've done now is by giving everyone a shared vocabulary, they can kind of get to the heart of an issue.

Kate Jones  26:12
I think that's right. I think one of the big things that we got in the feedback that was the language that we're using was really important. And people were saying spirituality, I thought that was just about religion. And now they're going, Oh, okay, maybe I have been taught talking a little bit about spirituality with my clients, but I just didn't realize that was spirituality. And so there's something coming in, there's something about this really broad understanding, which I think is just so helpful, because then they can go Oh, yeah, well, someone who has a faith that might come up there, but that's not something to be scared about. It's just part of who they are. And that's part of that bigger picture. And yeah, another lovely thing that came out was one of the rec therapists that she just said, "Ah, I had forgotten this stuff!!" And she trained, and, you know, spirituality must have been part down in that deep meaning making, why we do rec therapy, why we get people outdoors, you know, we really dig into that. And she said, but I'd stopped asking why that was important to them. And I just been doing it with them in you know, rehab can be a very, you know, discharge focus, kind of get people out the door as quick as possible kind of thing. And so staff can sometimes feel quite stressed about that. And it becomes very functional, very, you know, just like, can they have they got improvements can they go? And she was just saying Actually, no, I can I just concede with this, you know, I can I can have these conversations. This is who I trained to be, I just forgotten it. And yeah, a few people talked about that just this is, this is why this is why I'm doing this, but I'd forgotten it. Because I've just been so caught up in this sort of functional discharge focus kind of rehab thing.

Candice Care-Unger  27:55
And for a lot of the nurses to Kate, hey, like, going, ah, this is nursing 101. This is like how to have a hard conversation in the middle of the night like, and also the nurses that train like this, the old programmer, you had like an apprenticeship style trainer you learned on the hospital versus learning in the universities, and the ones that learned the hospitals, like, this is exactly what we used to do, like we just had thrown away, which I think probably reflects a little bit on how society has evolved, and how comfortable or uncomfortable we are having conversations, you know, that get to the heart of the matter, and that are more vulnerable that you know, that there's this sort of disconnect between needing other people or wanting to kind of share about who you deep like, honestly are and kind of, you know, unveiled that, but um, that really for some this is just like a wake up call. And for others, it was a
lightbulb moment. And really, I think we're now a year later. Do you want to maybe talk, Kate, a little bit about just some of the different articles as well, in case anyone wants to follow up?

Kate Jones 28:57
Yeah, yeah. So we're going to we've had two articles accepted for publication, and one looking at the quantitative results. So we did surveys with staff before training, after training, and six weeks later. And we actually recruited a control group as well. So we were able to show that in terms of competency, confidence and comfort levels, as well as just knowledge of spirituality is that broad kind of construct? People in the intervention group, which I think we trained about 40-41, maybe staff and compared to the control group, these guys from pre to post, and then even at follow up, were just so much stronger in terms of their confidence, comfort levels. Yeah, all those things. It was amazing. So statistically significant results. So they were just like powering on going. Yeah, we get this and we want to run with it. Whereas the control group was just like this sort of flatline. So that was great for us, because we could say, okay, that's really effective. And obviously, it would be ideal to then keep, you know, testing them later. But we were restricted to the time limits that we had. So that's one of the articles. So that's going to come out in Neuro Rehab, hopefully, later this year. And then the other article was we interviewed 16 of the staff who went through the training and just just ask them about the impact that it had had on their, basically their practice, but also their thinking around spirituality. And that was really rich data. Yeah, I've touched on a couple of things already that came out of that. And that articles just been accepted for the General Disability and Rehabilitation. So yeah, yeah, there. Yeah, I don't actually have the titles of the articles in front of me, but I couldn't get them for you, if anyone's interested. Thank you.

Carla Long 30:58
I'm sure that they're very, very long titles and with really, really thousand dollar words, in them words that I would be like, "What's that mean?"

Kate Jones 31:09
I know, the qualitative one does have spirituality is everybody's business. That is the first part of the article.

Carla Long 31:16
Yeah, well, I would understand that. So I really love what you are to are talking about how, you know, talking about spirituality hasn't muddied the waters, it has made them more focused. And it has found a way to be like, what Candice said, what's important here, music, arts and relationships, I love that you keep going back to relationships, I don't even know if we've mentioned the word relationships, but that's what's happening here. And so can we talk more about how the the people who are have spinal cord injuries? How are they changed by all this? Besides like, are they? Are they getting stronger faster? Or is it changing their medical as well as their, the way they feel?
Kate Jones 32:05
Just the training or spirituality itself?

Carla Long 32:08
Spirituality itself.

Kate Jones 32:10
Okay, I can try to touch on some of the results that I found in my, in my PhD, which was that, um, yes, their spirituality had a tremendous impact on people's relationships, after spinal cord injury. So that was one of the ways that one of the sources of spiritual strength I think people identified so there's like the the natural world faith in God, something within themselves, that was a really strong thing, and then a connection with others. And so that connection could be with a husband and a wife, with their child. So like one of this mom whose son had had a spinal injury in a car accident, just said, of her two boys, she said, they are my life, you know, that's my life. That's, that's why I live and this has happened to her son. and I both both her son and herself spoke after the injury, that he just said, "That's why I'm alive now." You know, that's his, what has given me a reason to live. He also spoke about his brother. So I said to him, I think my question was something like, What does spirituality mean to you? And he was like, spirituality like religion, and I'm going, he goes, Mom, I'm an atheist or something like that. And I said, I know like, like, what gets you up in the morning? Like, what's helping you just to give meaning to your life so that you keep living? You just said, Oh, that'd be my brother and my mom. Yeah, that's easy to answer. Like, you know, that they're, they're my life. That's, that's gets me out in the morning. They, they're the ones who would sitting with me, they were the ones that were there for me during this time. And one of the outcomes of like, one of the things I found is people, so they had these different sources of spiritual strength that they drew upon before injury happened. They went through a lot of questioning about that, like, is that person gonna be here for me? You know, this, this was sort of sort of these relationship relationships were tested in some way. And then there was this deepening of those relationships. So like another son with his mom just said, she used to be my mom. Now she's my best friend. So yeah, just this entire experience had just incredibly deepen those relationships. And so one of the other things was gratitude, like people were just so grateful for the people that they had in their lives. And what I think when I was looking at these relationships and what was happening, spinal cord injury in itself is a shared experience. I get something it doesn't just happen to an individual. It does physically, but the whole experience actually happens to a family. You know, to a whole group, family, friends community, you could say that everyone is impacted by that. And they all embark on that journey together. And so, you know, in those interviews that I was doing with my PhD was talking to the person with the injury and their family member, they're going we're in this together. This is what we're holding on to together. We're hoping moving forward together. And it was all about this being in this together. So, yeah, I think it's just profoundly important. I mean, you can say relationships, like one of the thing
that we how we describe spirituality to people, especially those from a non faith background, as we said, it's about connectedness. So whether you're connected with the natural world, and you see yourself as part of something bigger, so like, for one lady was just looking at the stars and going, actually, I'm part of something bigger. And so I feel okay, by that. But for others, that person that is a person, that's something bigger is a person, and they're connected to God. And they go, yeah, this is who I'm on the journey with. And I know he's gonna be with me no matter what happens. And part of it is connectedness with other people. So yeah, that's really you know, you have to spiritual well being is about being well connected. Yeah. So we we do talk about that quite a bit.

Carla Long 36:15
Thank you so much for taking that jumbled question and answering it beautifully. I really appreciate that. It's like you could read my mind. Thank you. That that was beautiful. So this project is just, it's just mind blowing what you're doing. And like, I know, there's so so much work that's going on behind it from you, Kate, and you Candice, but it just, it does sound so simple, and something that everyone could actually do the people listening to this podcast, you don't need to be working with spinal cord injury people like you can just ask, you can use sore in your everyday life, right? And what can you say one more time what SOAR means what it stands for.

Kate Jones 36:54
SOAR S meaning sources of spiritual strength, or whatever that look like, just be spirituality that works for you. Others is the O. So what others do you connect with? So to going back to that idea of connection? So it could be people in a walking group, you know, that you go out on weekends with? Who do you connect with around that source of spiritual strength? A, how do you want us to assist you we really wanted to get the staff something that was really practical. And they could just say, how do you want me to assist you with this? And R how relevant is this to you now, because obviously, people going through all kinds of questions often, after such an injury. We just want to get a sense of where does that sit with you right now. So SOAR.

Carla Long 37:42
Perfect. Thank you so much. So listeners if you want to use that in your everyday life, I don't know if Kate and Candice give you permission, but I think that they would is important stuff. So Candice, I kind of want to bring it back to you and the West Pennant Hills congregation. So now that this has been going on for you said a year or so how are people feeling about it? What are they thinking?

Candice Care-Unger 38:02
So we've just paid our last final installment of the project, it was split over a couple of years, I guess, like, we'll be totally transparent, we're talking about about $100,000 over a couple of years. So it was a sizable investment. But sometimes, you know, big bang, big buck, that's kind of my thinking on this one.
And it's good to be able to have had an impact in the community. And so I guess, like we were just talking before Carla. The thing that I'm hoping that other congregations or members of the community might just want to reflect on is that the congregation could have an impact in your community. That doesn't always have to mean the members of your congregation are doing these activities, you know, we can have amazing impact, like what happens at Royal Rehab, through the generosity of what our congregation is able to do. I guess the other part of this is it also gave our congregation clear vision and purpose. Whilst you know, our fundraising activities were to raise funding for the spirituality project out when we're doing budget, and we're talking about what it was that we were prioritizing this year. It was the spirituality project at Royal Rehab, when we were talking to other people about oh, you know, what's your congregation about it? Yeah, sure. We do kids ministries, and we do church on a Sunday. But we're also invested in our local community in a way that is generous and open hearted, and also trying to improve the world in some way that we can. And I think that the bit that took us a little bit to get our head around is that we don't have to be the ones doing the work. We can be partnering with people who know how to do the work and still have an amazing impact or outcome. And I think this is just like one example of how the church can have an influence through generosity through strategic vision and and partnering with others agencies. So you know, in this in this project, I did have the two hats, and I'm very conscious of that. And that was a conflict of interest that we were upfront about at the very beginning, you know, I'm a pastor at a congregation, and I'm a social worker at the same hospital. And so we put checks and measures in place that there were other people during the financial side. There are other contacts within the hospital as well. So it wasn't just like, all through me. But it's, it's not a bad thing for us to use our personal relationships, in our influence and our workplaces, and all of those to share this opportunity. So I think sometimes you just need to be willing to let your worlds collide. Because it can be a little bit embarrassing and awkward to be like, "Oh, my gosh, this the money in my workplace, maybe I'll do this research project, and can I bring it all together? Or Is that weird? And is itself like serving?" And, um, and just kind of being willing to say, people could say, No, I don't like this idea. That's okay. You know, I'm just introducing people. In this case, it was introducing a hospital in a, you know, congregation, but being, I guess, generous enough to let your world come together, to be able to have these sort of very beneficial relationships. They just do need a little bit of creative thinking and vulnerability.

Carla Long 41:26
And Candice, I would say, Community of Christ, you know, we call ourselves a peace church. Are we always working towards peace? Not always. But we try, we try really hard. And I would say that, however, and whenever we can help someone find their spiritual home, in whatever way shape or form that looks, we are creating peace in the world. And so if the spiritual home was with Community of Christ, awesome, we'd love to have you but if that spiritual home is out in nature, and you feel at peace with yourself, and that helps you create peace in your family, in your neighborhood. That is awesome. That is what we are put on this earth to do. So it sounds like to me that you're doing exactly the work that God is calling you to do. And I'm starting to cry.
Candice Care-Unger 42:12
That was much more eloquent, Carla, thank you. Yes.

Carla Long 42:18
Go ahead, Kate.

Kate Jones 42:19
I was, I would just say, from my perspective, like, as I said earlier, like, so grateful for just the creative thinking, not only for of Candice, but the willingness of that congregation to step outside of the box, and think, you know, let's dynamically, how can we do this, how to trust us to trust us to do the work. I think Royal Rehab was very grateful for that. But also, like Royal Rehab has gained so much from it, because there really are leaders in this space now. And, and I, what I took from the project is now going on to other like, to other hospitals. And in places in Sydney, I just, there's so much that we've learned, and it's going to keep giving and giving and giving in different ways. Like it's going to change this space, really this rehab space, I think, because rehab had forgotten about spirituality. And so it's just been tremendous what they've started, so I just take my hat's off to the church and to their to their courage, I think for being willing to fund this project, because I think it will just change the lives of so many people.

Candice Care-Unger 43:33
Yeah, I think you're right, Kate, you know, we've done spirituality and death and dying. You know, it's very well done in death and dying. But I remember hearing one of our colleagues say, why don't we need to wait to a dying to be talking about issues of spirituality, meaning a purpose, like, you know, there's other life changing time, there's other times in your life to be having these big, existential crisis questions. And we don't need to wait until we're dying. So it absolutely naturally fits within rehab, to be exploring issues of spirituality. I think Kate and I were in the right place at the right time. And, you know, the congregation was looking for something at the right time. And for all of those reasons, I would say that it's, you know, being divinely lead, but also being willing to listen to that small still voice is a big part of it.

Carla Long 44:19
I absolutely agree. And I agree with what Kate said, It takes courage to step out and to do something different and to spend that kind of money. That is, that's hard to do that and to say, we trust you. That's really hard to but look at the changes that have been made. And it's just so exciting to hear about it. So thank you, Kate, and Candice, for being on this podcast and for telling us about this incredible ministry. I am. I'm so inspired and I'm so well for me. It's like 930 at night, but I'm so revved up right now about all of these possibilities that could happen. Oh and FYI, 930 is super late for me. That’s why it’s surprising but thank you so much for being on the podcast. I am. I'm really grateful to both of you.

Candice Care-Unger
Thank you so much, Carla for the opportunity.

**Kate Jones** 45:13
Thank you.

**Josh Mangelson** 45:23
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