

Imagine With Me: Vaccination and Innovation

March 19, 2021

Transcript



Terri Hord Owens: Hello, Disciples. This is your general minister and president, Reverend Terri Hord Owens and I'm so excited to welcome you to another episode of Imagine With Me, as I'm inviting Disciples from across our church to talk with me about how they imagine our new church for this new world, and today I'm excited to have with us the Reverend Doctor Delesslyn Kennebrew, who serves as an associate regional minister in the Greater Kansas City region.

She has just returned from some important work and I'll let her talk about that. But Delesslyn, thank you so much for making the time to chat with me. Why don't you just share a little bit about the kind of ministry that you do in the church and where you serve and then we'll get going with our conversation.

Delesslyn Kennebrew: Okay. Well, greetings to everyone and greetings to you pastor, Dr. Reverend Terri Hord Owens. Thank you for this invitation to share in conversation with you on some very, very important topics. I currently serve, as you mentioned, as a regional minister for ministry innovation here in the Greater Kansas City region, and I will mention our regional minister, the Reverend Bill Rose-Heim, and our regional moderator, Reverend Mary Ann Kegler. I am grateful to be able to serve in leadership here and as you mentioned, I also work for the Federal Emergency Management Agency as a FEMA reservist,

THO: And so that's just an interesting we talk. I'm very familiar with the idea of bivocational ministry. I joke and say that being general minister president it's the first time I've actually worked full time for the church in my entire ministry, so I so appreciate. I understand you just returned from being deployed as a reservist. Would you tell the church a little bit about the kinds of work that you do for FEMA, particularly around the vaccination efforts for COVID 19? I'm sure people would love to hear more about that work.

DK: Yes, well, I'll start by saying I started, I began serving as a FEMA reservist back in 2017, after Hurricane Maria. In Hurricane Irma, I was deployed for about nine months, serving most of my time in the Virgin Islands and in Puerto Rico, where we were helping hurricane survivors. And as a reservist, it is intermittent employment, so it's not like a constant obligation. You're only, you know, you answer the requests as they come. And so last year, I deployed locally in Region 7 for COVID 19 special project for a few months. And then hen this year, I am just returning from a deployment actually in the state of Georgia, helping with the vaccination efforts there. FEMA was not leading the effort but they were partnering with the Georgia emergency management agency,

GEMA, this is what they call themselves. They were partnering with FEMA in order to support that effort along with their officials as well as the National Guard. And FEMA and FEMA representatives.

THO: You look from all over the country, so you know we're just now getting to the point after, you know, we till celebrated, I guess, or marked rather, one year in this quarantine lockdown mode since the global pandemic was declared. And some of us, I've had my first shot. I will get my second shot on Sunday. We're seeing people becoming fully vaccinated. What challenges do you see, just from your experience there in Georgia, with the vaccination process? We're all worried about equity. We're worried about people being hesitant, perhaps, to take the vaccine. What have you seen as the real challenges and and what do you think is going well?

DK: I've noticed several challenges. One, I think people just need to be aware that there are many different ways. In order to, so, like, even in the state of Georgia, I was part of one of the state-run sites. There were four sites that were launched so we were part of like the initial launching of that first round of sites. And this week they're launching five more sites across the state of Georgia, so they'll have a total of 9 sites that are run by the state. But there are also other organizations - hospitals, clinics, churches - hosting vaccination sites. So I think people just need to be clear that there are several options and they just need to know within their city, their state, how they can get vaccinated. And I know that can be confusing for people. The other piece is, where we were located, we were giving the Pfizer vaccine, but literally right across the street there was a group giving the Moderna vaccine, so there were people who registered for the Moderna vaccine who just, you know, just made a mistake and ended up across the street with our site so we had to redirect them, you know, and that kind of thing, and so even people just being mindful, like, I don't know that you want to mix vaccinations, so make sure you stick with what you start with and that kind of thing as it relates to fPfizer, Moderna and now even Johnson & Johnson with just the one vaccine. So I would say, you know, so, of course, like the location and access, but one of the other things that we ran into, because, for the sites that we were working with or the site that we were working with in Georgia, you had to register online and so if you don't have computer access, if you don't have an internet, or if you are a senior adult or elderly adult, your children may be registering for you and your children will give you, like, the, I know we ran into a lot of challenges where the child would give them, or the adult child would give them the appointment time but did not give them all the other information that came in the follow-up email that they needed. So, you know, we had to just spend more time, you know, getting more information from some of those seniors and being patient with them because they didn't know, they just didn't know. So every site very confusing for people. But be patient. I would encourage you, wherever you start, go back there for yourself. That might help you, you know, kind of ease and give you some some comfortability. We also had some very nice medical professionals who were there - traveling nurses, who were, like, from all over the country - who were also there, supporting and actually giving the vaccine, so I was more on making sure folks had their registration, their ID, you know, going through that process with them so that when they got to the nurse, all they had to do was get their shot and keep going.

So those are a few things that we saw. Also, because people wanted, I think, the stigma, of course, you know, around the vaccination, of that, and then, and this, just the disproportionate numbers of people of color who are impacted by COVID 19. But they are, you know, maybe hesitant about getting vaccinations as well, you know, because I mean, you're injecting something into your body, you know, that didn't grow there, you know what have you. So people are hesitant, but I would just encourage people to, you know, make the best decisions for you. Also be mindful of your underlying conditions, and so talk with your own doctors and medical professionals so that you may have some kind of idea about how that may or may not impact you. I know one of the things that we were able to provide at our site, after you got your shot, there was an observation area where people were, just they would, you know, they would encourage you to wait for like 15 minutes or 30, up to 30 minutes, just to see if you had any kind of immediate reaction to the shots and that kind of thing. And they were nursing, you know, of course, medical professionals available there and then at the end of the day we only had so many shots to give. We only had so many shots to give and so we would encourage people who had not registered but wanted to try to get the shot, "Hey, come back around this time we may have some extras at the end of the day," because one of the things that the pharmacists who are, you know, like mixing the vaccine and keeping it cool, like, you know, they didn't want to make too much but ,you know, if they had any left over, they would offer it to people who didn't have appointments and things like that. So that was, that's what was going on at the site that I served in Georgia.

THO: Wow. So what was the physical location? Was this community center? No. Tell me a little bit about the context.

DK: Pastor Terri, Pastor Terri. Let me, let's just let the saints be clear, I was on my feet all day long. We were at a county fairgrounds.

THO: Oh wow .

DK: So we set it up for the people to be able to do a drive-through opportunity, so think of, think or imagine Chick-Fil-A, you know, and how the young people are out there taking orders. So like we were literally out there making sure: hey, do you have your paperwork? Do you have all of this? Rain, snow, cold, hot, or what have you. And so at our site, you would drive up and the first checkpoint was with the National Guard. They would verify if you had an appointment. And then at the next checkpoint , that's when we would verify all the registration information and then and the number of people who are going to be vaccinated in that particular car. And then at the next checkpoint, which led into, like, the vaccination area, the nurses would verify again and then you would get your vaccination.

THO: Oh wow.

DK: So everything was drive-through at our site.

THO: Well, God bless you. I mean, the facility I was able to get my vaccine at the church that my husband serves in Chicago as part of an equity access kind of program.

DK: Nice.

THO: Which was a real blessing. I've also, as I've shared with you, been part of a group of ecumenical leaders across the U.S. who've been meeting pretty regularly with representatives from the White House Office of Public Engagement, and one of the things that they're talking about and actually working on a draft of an action plan is to sort of mobilize houses of worship. And this is a multi-faith effort - synagogues, mosques, congregations - all across the U.S. - to offer themselves as sites for vaccination, one, to address the fact that, you know, local credibility, in terms of where you get your vaccine, is very important and religious leaders having that kind of credibility with their people. And then we have all this real estate, right, that, even though most of us are not worshiping in person, we have this real estate. What are your thoughts about how a broader network of houses of worship might help this effort? Any thoughts that you have on that possibility and the good that it could do?

DK: Yeah, so, I always think that the church should always be thinking beyond the four walls, you know, beyond worship, you know, and beyond, you know, just the, I guess, the traditional aspects of community service that they may be doing. So I believe this kind of health and wellness effort would be a great opportunity for churches to get involved, because people tend to be loyal to their churches and loyal to their pastor. Or if their church isn't hosting it, they're at least familiar, they have some friends at that church or they've heard about this pastor, you know, over the years and that kind of thing. And so I do think that can definitely help. One thing I will mention, too, as it relates to houses of worship that are not English-speaking. So we had a lot of, several at least, not a lot but several, folks who spoke Spanish who would come through the lines. And thankfully we had few, two FEMA workers who were able, reservists who were able to support a translation. So even making sure that those type of houses of worship, you know, who may not be just English-speaking, will have opportunity to serve that community and, you know, explain it in ways that they can understand. So, I think that it will be helpful as well. But as far as I think the church should always look for ways to be a beacon of hope. And if you can, and be, even if your church doesn't have a capacity as it relates to space and volunteers in order to host, churches can partner with each other, you know. If there's a church that maybe has a larger facility or a larger community center, that they have a gym or, you know, or something like that that they have on their property, and the churches maybe on that street - "Hey, let us all come together and try to figure out how we can work this together." I think that would be a really, really great thing for church.

THO: Great. I think the exciting thing about this plan is that it's designed to be a tool kit and I've heard from several Disciples congregations that they have partnered with their local health agencies or they're working in ecumenical spaces to partner with other congregations, just as you say, so I'm hoping. And what was really be needed is you might have the space but you may not have all the hands that you need to

participate and you'll need the medical professionals to come in and maybe we're just supporting the logistics or doing things similar to what you were doing - registration and hospitality and just making sure that that everyone is moving along. So I'll be eager to share more about that as that work continues and I hope that you'll maybe be one of the people I can turn to help think about how we communicate that opportunity across the Disciples. We've been talking a lot about this, you know, even the idea of churches being used as vaccination site. I mean, we're already outside the bounds of what we normally would think about, so how do you see, let's talk a little bit about your work in the Greater Kansas City region, and this word that you use - innovation. We've been talking about imagination and we've been talking about it in terms of our understanding ourselves as a covenant church, understanding ourselves in terms of the stories that we tell and the broader narrative that we have as a church, which we're giving some real thought to, and even some of the tools that we use. And, of course, I'm always talking about just grounding everything in prayer and bible study, its spiritual depth and development. So talk a little bit about the work that you're doing with innovation. I love that word - innovation - and you are so energized when you talk to me about it, so share a little bit about the world that you have in ministry and in your region.

DK: So when I was hired here, my title was regional minister for new and transforming churches, and over the, I guess, of the first two years of my tenure here I began to read more and more about design thinking. And in design thinking, it really is a process that you can learn from, you know, most business schools and I began to read about, it take various classes, seminars, workshops on design thinking and began to think about how innovation is just a broader word that can capture new church, transforming church, and even innovative efforts of ministries of churches. And so I appreciated, like, the design thinking process because I think it is a way for churches to be innovative and what that can lead to. Our understanding, here in this region is that innovation can be, you know, may not be like the full transformation, where you're doing vision and all of that, because a lot of times churches don't have the energy to engage in the depth of transformation as we understand it here, but perhaps you can select one aspect of your ministry and innovate the music ministry, innovate the children's ministry, innovate your outreach ministry, innovate your worship, what have you, and just pick one aspect. And our desire, our goal, myself, as along with the commission on ministry innovation, is to use innovation as a way to lead into transformation for those churches who then want to go a little deeper because when we only focus on new church or transformation, that's all people, that's all that church has heard and so, like, if you don't see yourself as a new church, if you don't see yourself as a church that needs to be transformed, then you you're not going to reach out, you're not going to reach out, you know, because you're not going to have the conversation. And the other piece is with the transformation piece, like, we were we were clear that we want that to be like, that deep dive so, you know, you do a few things that will help them to lead into that deep dive and network that can look at all aspects of the ministry, whereas innovation, we give you the freedom to be able to just say, okay let's just get one piece. And we hope that that will help you, you know, go a little deeper in the future. But I think innovation is a way for all of us to begin to, as you said, imagine and be creative and think outside the box.

THO: Yeah. In the last couple of minutes that we have here, Delesslyn, could you say a little bit about how you see this process? To me, that would fall under the tools. One of the tools this design thinking innovation those, it's one of the tools, the frameworks, for thinking about who we are as church. How do you see this strengthening our understanding of what it means to be a covenant church within your region? What are you seeing there?

DK: Yeah, so one of the things that I most appreciate about design thinking, it is focused on the user experience, in business language, so to me, I translate that into the church realm by saying it is important for us to hear the voices of the community in order for us to begin to assess the needs. A lot of times leaders will just say, "Well, I know what needs to happen and I know how to do this," without even consulting the people with whom you lead, the people whom you serve, the people with whom you worship. You haven't even asked them what their feelings, what their thoughts are. And so I think being a covenant church, you know, on the local church being in covenant with the region, the region being accompanied with the general church, I think it is important for us to create space for genuine dialogue, you know, authentic dialogue, that can help us as a launching pad to begin to brainstorm new and revolutionary and revelatory ideas for the work that God is calling for us to do.

THO: Amen, amen. I think I couldn't agree with you more. It's that relationship, right, the dialogue across so many different contexts and experiences, and hearing one another, and reminding ourselves that we are indeed part of that one body of Christ and we have different stories, but we do this work together in covenant. And I'm excited. I hope to, both you and Bill Rose-Heim, are very active in some of the more innovative thinking that's happening in the church now. And so I'm grateful for your ministry, grateful for your time with me today, and I can't wait for future conversations. Thanks for talking to us, not only about your work with FEMA but about the work of innovation as you see it, and the tools that you're using to help strengthen the covenant that we have. And I know you're a woman a great prayer and a woman of the Word so thanks for letting that light shine as well. Thank you so much, Disciples, for listening to our conversation today. I've been in conversation with the Reverend Doctor Delesslyn Kennebrew, the associate regional minister in the Greater Kansas City region for innovation and ministry. So we're just grateful to her also sharing her work with FEMA.

Disciples, God loves you so much - if we could just all even just imagine how limitless God's love is, and then be committed to bearing witness to that limitless love, we can go some places. So thank you for listening. Again, we'll be seeing sometime soon, and in this Lenten season, remember that God loves you and so do I.