

# Where there's life there's hope

The incredible true story of Ken & Lyn Overton

Paul O'Rourke

WHERE THERE'S LIFE THERE'S HOPE

By Paul O'Rourke

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Ken and Lyn Overton

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kenlyn@miraclerecovery.org

**www.miraclerecovery.org**

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## FOREWORD

I am delighted and feel privileged to write a few words in support of friends Ken and Lyn Overton as they share their remarkable story of hope, healing and faith. My wife Cathy and I have known Ken and Lyn for over 20 years and have developed a deep friendship with them.

Our journey together dates back to early 1994 when Ken came to see me not long after my father, Roelf Vos, had passed away. He shared that he had been challenged by a talk Dad had given to a Christian Business Men Australia (CBMA) function in Burnie in 1991. Dad was one of the founding members of this group in Tasmania in 1960. Ken has also been involved with this group since 1976.

Ken shared how, while listening to my father talk of his personal/business life and faith experiences, he realised he had become too occupied and busy with his passion for opportunities in business, becoming so task-oriented that he didn't give enough time firstly to his own relationship with God, but then also to family and friends.

Ken had a desire to encourage others to realise their full potential, and to see that God has a purpose and plan for us all while here on the earth, and for eternity. He told me it was just after he heard Dad's message that he decided to sell the plasterboard distribution side of his business of 23 years to CSR, to free himself up, and then concentrate on property development and investment, which he had commenced in 1977. This allowed him more time to do what he considered most important.

I believe Ken has achieved this goal. This book is another outworking of that passion as he shares their story, in the hope that God will be honoured, and hurting people will be encouraged. Ken visited me under the guise of telling me how much my father encouraged and positively affected his life. However, I have come to believe that Ken came simply to encourage me while I was grieving my huge loss, and that he certainly did! In fact, that sums up Ken's life; he is an amazing encourager. I consider Ken to be one of my closest friends. We share similar challenges as businessmen, husbands and fathers, and we support and encourage one another along the way.

Ken and Lyn are people of very good character and high morals. They have a personal relationship with Jesus Christ and are committed to living in a way that pleases Him. Next comes their deep love and commitment to one another, followed very closely by their love and commitment to their children and grandchildren. This is very evident when you meet their children. Lyn is a wonderful support to Ken in whatever he turns his hand to. She is also a very caring mother and grandmother. She clearly puts her husband and family first in all of her choices.

Ken is a real gentleman and an astute businessman, but more than that he is a man of integrity. For example, a few years ago he wanted to catch up with me to chat about a business situation. He told me that he had agreed over the phone to sell one of his unit developments, only to find out the next day through a real estate agent, but before signing a contract, that his property was worth considerably more due to a recent property boom of which Ken was unaware.

The difference was a significant amount of money. To make matters worse, the profits were exempt from capital gains tax, having being built before 1984. After hearing his story, I asked him what he was going to do about it, and he replied: "I have agreed verbally on the deal so that is it ... my word is my bond." That true story sums up Ken's character.

He is a person who shares the love of God with those around him. Going for a coffee with Ken in his home town of Devonport is a wonderful experience. On the walk to the café he greets almost every person we meet, often stopping to chat with them. Then upon reaching our chosen destination it seems he not only knows every person who is already seated, but also everyone who comes in as well!

Having walked a part of this road of suffering with them, I find that both Ken and Lyn have bounced back amazingly and are now even stronger in their trust and faith in God.

The medical profession is amazed and has commented that you would go a long way to find two people who have been so close to death, both on life support and yet have survived and recovered as they have done.

They are both a real example of genuine Christianity. While Ken was seriously ill in the Launceston General Hospital, we hosted Lyn, Vanessa, Nick, Justin and Andrew in our home for a time. Witnessing this precious family under such intense pressure, not knowing if their husband and father would survive this ordeal, was both heart-warming and an emotional experience for Cathy and I – particularly

after witnessing them go through a similar ordeal with their mother a few years earlier! They had already been through so much, yet to watch them now was just amazing. Not one wavered in their faith and trust in God or in His purposes for their family. Also, the children's loving care and commitment to supporting their mum and their dad during this time was wonderful. They are truly a very precious family.

Each of the children has made a personal choice to follow Jesus Christ, and is of very good character, well-adjusted and successful in making their own way through life. Lyn's determination to get back to a normal, independent life after her ordeal was just inspiring to watch. She is a great woman of God! Ken is not only a great encourager, he is an absolute gentleman. He always ensures he has time for people whatever their situation in life.

I trust you will enjoy and be inspired by reading their amazing story of faith, hope and love in the midst of enormous challenges.

**Michael Vos**  
Executive Chairman  
Vos Construction &  
Joinery Pty Ltd  
Vos Family Office



## PREFACE

Firstly, and most importantly, we are thankful to God for all that has happened in our lives to this point, and we trust this book will bring Him honour.

We are very aware that this is just another story in life. There are people in far worse situations than ours, with far worse outcomes. We recognise many others have suffered great loss, disappointment and pain, particularly where someone close to them has died or been left with a serious disability or continuing pain that requires ongoing treatment and management. Our struggles, past and present, are minor in comparison. We are very aware that we have only this moment in time, that we are only one breath away from leaving this earth.

We are in a world where all kinds of things happen: there are natural disasters, sickness, death, works of evil, family breakdowns, financial hardship, all of these affecting young and old, rich and poor, Christian or not. We are all part of an imperfect world that presents challenges to which we have to respond. There are many times we don't understand the specific reasons for these trials, which can leave us with some questions.

Over the years, many people have asked us to write a book about our experiences. We have hesitated until now, as we didn't want to profit financially out of our experience or to somehow paint ourselves as heroes or special. However, a "chance" meeting with a journalist and author on a wet Sunday in September 2010 at the Raspberry Farm near

Devonport gave us assurance we could tell our story in a manner that could be an encouragement to others and provide a source of funds to assist individuals who find themselves in an unexpected medical financial situation, and for worthy charities providing medical care for those who do not have the same privilege as we do in Australia. We have chosen to self-publish our story, because it gives us the freedom to tell the journey as it is, enables us to give away free copies and maximise funds that are to be given to two charities providing medical care, particularly life-saving treatment and corrective surgery to impoverished people in developing countries: Mercy Ships Australia and Compassion Australia.

What a great privilege to be able to use our journey if it assists others on theirs. More information on these wonderful charities, together with contact details, is included at the end of the book.

### *A story of hope*

This book has been written hopefully to bring encouragement, comfort, hope and inspiration to others. Our desire is that readers will come to appreciate that life is a gift from God and that ultimately He is in control and has a specific purpose and plan for our lives. He has the ability and can choose to heal instantly and miraculously, over time through the medical profession, or not at all on this earth. In saying that, we understand and recognise the privilege we have in Australia to be cared for by wonderfully-gifted medical staff in well-equipped hospitals. It's amazing how the body is designed to heal

itself, with assistance from the medical profession and the amazing technology at their disposal, during times of crisis and supposed hopelessness. We are fortunate to live in a country where all this is available to us, and it is very easy to take it for granted in this developed nation.

However, at the same time, there is a limit to what can be done, and it is important not to see the medical professionals as god, for the God who gave life in the first place is the one who ultimately decides when our heart will stop permanently and we leave this temporary home for an eternal one. The medical staff with whom we have come in contact often shared with us that patients whose injuries or sickness seemed terminal would miraculously survive, while others whose ailments seemed far less serious would inexplicably die despite the best and most timely treatment. God is ultimately in control. We may not always like this fact, particularly those of us who are used to taking responsibility or controlling things around us, endeavouring to solve all our own problems, but our journey has taught us that in times of desperation and crisis, we must surrender control and allow God to lead and show us the way.

There is a purpose and plan for our lives. We are not here by chance or simply to accumulate as much stuff and have as much fun as we can for ourselves. Life is not about our comfort, but about our character. Who we are is far more important to God than what we do, where we live, where we work, and what we own. Our life is not our own. We have been given opportunities, money, health and gifts to be used for the good of others. Not everything that happens

to us seems good, but God allows certain circumstances beyond our control or desire to develop our character. We have experienced as a Christian that God helps you to cope with whatever He allows, because you are not alone!

We want to thank our family, friends and acquaintances for the huge impact they have had on assisting us through our illnesses and recovery. Without such support, circumstances could have been very different. Their love and care on a daily basis helped sustain us during many dark days. The many prayers, cards, letters, website and voicemail messages, meals and visits are much appreciated and incredibly humbling. Often we don't know what to say to someone facing a difficult time, however just the presence of someone visiting, and brief communication to say they are thinking of you, means a lot. To the young nieces and nephews who we know have simply prayed every night for Uncle Ken and Auntie Lyn to get better ... thank you!

### *Thankful for family*

We are so appreciative of our children, their wives and extended family who put their own lives on hold, showed such great courage, patience, faith and wisdom during these trials. We are thankful for the maturity and selflessness shown to us as we went through our various ordeals. Vanessa, our daughter, did whatever was required to assist her mum in her long recovery, and then supported her when I became ill. She responded magnificently, was always smiling, and serving out of love and not duty.

We also wish to pay tribute to the medical professionals and other hospital staff who tended us during these extended periods of hospitalisation and rehabilitation. These include the surgical and nursing teams, rehabilitation staff and orderlies, as well as those involved in the cleaning and kitchen duties whose work often goes unnoticed but greatly assists the patients and their families. Our long hospital stays meant we felt like we became family to the medical fraternity. Their encouragement, positivity, perseverance and care created a hope-filled environment and a sense of unity and purpose with us and our family that no doubt contributed to our recovery.

While we appreciate surgeons and nursing staff have the latest training and equipment, we want to acknowledge the incredible sacrifices they make in their personal lives in the care of others. It is a vocation that requires both professionalism and skill, but also total commitment to the cause of health and healing. At the end of the day, their skill and gifting has come from a loving God who has gifted them in such a special way to be used by Him to help others.

### *God is CEO of the world*

Whether we like to admit it or not, there is a God of the universe who is providing for us in more ways than we know. It is easy to take for granted that He allows the sun to rise and set each day, to send the rain in season, and to order the days of our lives. We may think God is arbitrary or unfair, but we must ultimately recognise that he is the CEO of the world and has the sovereign right

to do as He pleases. It's amazing to contemplate that the whole world is in His hands, functioning within the gifting of people He has made, who use their God-given talents in creating and building. Imagine what would be missing, and how dysfunctional life would be, were we in control, if that was possible, or if we all wanted to be or do the same thing? We don't always understand what He is doing; how can we? After all, He is God, and sees us and our lives from an eternal perspective, far beyond our thoughts and understanding.

We would also like to thank Paul O'Rourke for all the time and effort in writing this book. His perseverance and commitment in seeing this book represent our story is greatly appreciated.

Our prayer is that you see God's amazing timing in all that has happened, and His incredible love, as we share with you our story.

Ken & Lyn

## INTRODUCTION

When doctors start putting “miracle” and “recovery” in the same sentence, you sense there is something special and extraordinary about Ken and Lyn Overton’s story that cannot easily be dismissed as simply “luck” or “chance”.

It’s even harder to dismiss divine intervention when a series of unexpected, random and unprecedented events repeatedly combined to give the Tasmanian couple access to, and favour with, the best staff, who persisted with treatment long after it was medically warranted.

Lyn was clinically dead for over 30 minutes, CPR pushing precious little air through her body after a 23cm blood clot broke free from her broken leg, punched through her heart and lodged in her lungs. No one would have questioned the decision to pronounce death, yet the medicos persisted. Why?

Two nurses, one of whom had not been at church for several weeks, “happened” to come the morning that Lyn collapsed just before a Sunday service.

A doctor who had only recently joined the church was also available to give emergency assistance to the paramedics and off-duty nurses.

The decision by the medicos to ignore the health department directive to send after-hours emergencies to Burnie proved to be life-saving, as key medical staff including specialists were still meeting at the nearby Mersey Hospital in Latrobe when

the ambulance rolled up. The paramedics, who had been at the meeting when they were called to the church, knew the level of expertise that awaited them when they returned.

The paramedics received a phone call that a woman had collapsed in church. They expected to treat an elderly parishioner who had fainted, but arrived at the church to find a category one emergency that would require all the medical firepower available back at the Mersey.

Lyn went into cardiac arrest twice more, once on her journey to the hospital and again when she arrived. She was given a blood thinning medication to try and remove the clot, but then had a bleed in her brain and suffered a stroke.

Neurosurgeons would have to perform emergency surgery to remove a section of her skull to relieve the building pressure in her brain. However, such surgery needed to be performed in Hobart, if the specialists there would agree to treat the severely brain-injured patient, and if an air ambulance could be found almost immediately for the mercy dash.

As the window of opportunity for surgery opened, an air ambulance landed in Devonport to collect another patient due for heart surgery in Melbourne. Lyn was not only given priority, but joined on the flight by the head of emergency who had apparently never previously accompanied a patient on such a trip. Unexpected and inexplicable favour became normal.

Few gave Lyn a chance of survival; no one expected her to



escape such massive trauma without being brain dead and on life support to keep her breathing, or, at best, sustaining extensive and potentially irreversible brain damage that would severely limit her life, yet she walked out of hospital with nothing more than an elbow crutch, a weakened right arm, and a hand whose fingers don't work.

### *Huge obstacles*

Similarly, medical staff did not expect Ken Overton to survive five years later when a diseased and dying pancreas left him in Launceston General Hospital's intensive care unit for 102 days, 98 consecutively. He overcame multiple organ failure, five different super bugs and numerous infections, internal bleeding and many other setbacks during an eight-month hospital battle in which he shed 30kg and required months of rehabilitation.

A year later, Ken had the medical staff scratching their heads again and looking for textbook precedents when a routine hernia operation revealed his lymphatic system was leaking potentially-deadly fluid into his abdomen. A doctor described Ken's condition as like having a soaker hose inside his body.

The lymph channels had the consistency of soggy tissue paper, making it impossible for doctors to repair the damage. They drained the infection-prone chyle, a milky fluid of fats, as best they could, stitched him up and sent him home. That was in August 2010.

They refuse to either drain the fluid or perform surgery

due to the high risk of infection. Ken has been placed on a special low fat (medium-chain triglyceride) diet and is being monitored. The surgeon treating Ken said it was medically impossible for the body to heal itself of the condition, yet Ken remains fit and well.

The Overtons are testimony to God's grace. They had no greater will to live, or particular genetic disposition to healing powers, beyond other mortals, but they did have an unshakeable faith, and were able to lean on the faith and prayers of an army of people throughout the nation and across the world. A website established by the family to provide daily updates received over 52,000 hits, with many friends and family leaving messages of comfort.

### *Amazing reassurance*

Ken tells of amazing reassurance from God that Lyn would not only survive but experience a measure of recovery after coming off life-support. Lyn also had the same peace, yet both surrendered each other to God and recognised His sovereignty over their lives. They were willing to accept that the outcome may not be of their choosing, but acknowledged God's right to decide if their lives were to end, as He gave them the gift of life in the first place. Theirs has not been an easy journey. There were numerous setbacks during their recoveries when the obstacles seemed insurmountable and their strength and resolve all but disappeared.

The journey has also been testing for their children, daughters-in-law and grandchildren who, along with others, prayed, tended to the family business, domestic duties and

consulted with doctors and updated the hundreds of people following this seemingly never-ending saga. However, they also accepted God's ultimate control over Ken and Lyn's lives, and placed their trust in Him, whatever the outcome.

The experiences have made them closer as a family, more aware of their own mortality, and utter dependence on God, the giver and taker of life.

Their faith has grown as a result.

Ken and Lyn say they are much more thankful, much more aware that every day is a gift, that family, faith and friends are paramount and worthy of their full attention. They know God is who He says He is, and will do what He promises as recorded in the Bible.

Individually, they have learned to live this life more in view of the one to come, and prioritise what's most important.

They have used their experiences to encourage, comfort and share with others, recounting their story in various church and community events, via video, television and in print, as well as in countless one-on-one meetings with hurting people who sense they will get an empathetic hearing from Ken and Lyn.

As an author, this has been the easiest project on which I have worked. Ken and Lyn have kept such detailed records of everything that has happened, just in case it could help others and bring honour and recognition to God.

**Paul O'Rourke**



## CHAPTER ONE

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## Where there's life

***04/04/04 - 9.50AM***

Fittingly, or perhaps providentially, Lyn Overton died in church, dressed in a striking cherry-coloured suit. It was a warm Sunday morning when she arrived with husband Ken at their church, Oldaker Street Christian Centre in Devonport.

After five long weeks, she had become used to the plaster cast on her left leg, but was looking forward to having it removed the following week. They were walking through the front door of the church when the 47-year-old grandmother said she was feeling faint. Their lives were about to change forever. Lyn collapsed into Ken's arms. She was like a fish out of water – blue, frothing at the mouth and gasping for air, eyes vacant and lifeless.

A 23cm blood clot had travelled from her broken left leg through her heart and into her lungs, obstructing her breathing and causing cardiac arrest.

Ken would later consider what could have happened if Lyn had collapsed alone earlier in the morning during the 45 minutes it took for him to drop an overnight guest off at the East Devonport ferry terminal, 15km away.

"I laid her on the floor, thinking she had taken her last breath," Ken said. "I had a flashback to a visit to Ayers Rock some years earlier when a dear old man suffered a heart attack while descending the rock and died at my feet. It was then that I realised Lyn's condition was serious."

A nurse who had not been at church for about eight weeks saw Lyn collapse, and immediately started CPR. Ken remembers saying to the lady's husband, "Does she know what she is doing?" not realising she was a trained nurse. Her prompt action prevented Lyn from becoming brain dead, a condition which takes place within four minutes of the brain being deprived of oxygen. She was soon assisted by another nurse, while a congregant called the ambulance. Meanwhile the congregation was ushered out the back of the main auditorium to pray for the critically-ill member. The ambulance station is located just around the corner from the church, but the paramedics were at the Mersey Hospital, about 10km away. They arrived about 20 minutes later, believing an elderly person had fainted.

A doctor who had been coming to the church for only a few weeks, arrived a little later to find an unconscious Lyn on the floor being treated by two paramedics and a nurse.

"The paramedics were trying to get a drip into your right arm and the nurse was administering artificial respiration," Dr Craig Bowker wrote in a letter to the Overtons. "The cast on your leg and the distended neck veins confirmed the diagnosis of a large and obviously life-threatening pulmonary embolus.

“I introduced myself to the paramedics, who by now had the monitor connected and a drip running. This showed that your heart was not adequately pumping and not in a rhythm which could be treated with defibrillation. This is a very bad sign, medically. It meant that your heart had not been able to pump enough blood to your brain for some time and that the CPR in the church was the only thing getting enough blood to your brain to prevent irreversible brain damage and death. At this time you also had a fixed and dilated right pupil (usually an indicator of brain damage), another very bad sign, medically.”

Lyn was clinically dead – she had no pulse, could not breathe, was unconscious and had a fixed and dilated pupil. She had been down for at least 30 minutes, and Dr Bowker said it would have been acceptable to stop treatment, pronounce death and issue a death certificate.

The paramedics administered two drugs to kick-start her heart while the doctor continued CPR. After a few more cycles, Lyn’s heart rhythm began to improve but remained too weak to maintain an acceptable blood pressure. Just as the team prepared to place a tube into her airway, a lifeless Lyn groaned, indicating some response from the brain. Interestingly, at that same time, the church was praying in another room when a couple there sensed it could have been a clot preventing Lyn from breathing, and asked God to remove any obstruction if this was the cause.

Son Nick recalls the scene at the church when he and his family arrived late after spending the night at relatives, about 1.5 hours drive from Devonport.

“I vividly recall seeing the ambulance in the driveway of the church building, and immediately thought that an old lady or an elderly person must have fainted or something like that. Upon getting out of the car, I noticed that many people had congregated in the room at the back of the church which could be seen through a side door, and then someone said to my wife and I – ‘it’s Lyn’. Going inside and seeing my family there and people weeping, I couldn’t believe what I saw! Mum was flat on her back and not breathing. The paramedics were working frantically to resuscitate her. I just watched on in shock and disbelief. I remember Dad in a despairing state (as you would expect!) saying ‘she’s gone’. In a few minutes they loaded her in the ambulance and rushed her to hospital. It’s difficult to recall now exactly how I felt at that moment – certainly it was a massive shock! Mum was the last person we would have expected to die so young and so suddenly. The family explained to me what happened and I just couldn’t believe it. At that stage, we all believed she had gone.”

### *Brave decision*

Because of Lyn’s response, the medical team made the decision to rush her to the closest hospital. The paramedics were required to transport category one and emergency patients to Burnie instead of the closer Mersey Community Hospital at Latrobe. This was the result of a decision three days earlier to close emergency services at Latrobe outside normal business hours, Monday to Friday. The paramedics ignored the directive, with the support of Dr Bowker, recognising that Lyn would not



survive the longer journey to Burnie, an extra 30 minutes away. The paramedics' brave decision to ignore protocol no doubt saved her life, as Lyn sustained two cardiac arrests on the way to Latrobe and another when she arrived in the intensive care unit.

Providentially, ICU and accident and emergency department staff were meeting at Latrobe to discuss the hospital cutbacks, meaning that Lyn had immediate access to the necessary medical professionals when the ambulance arrived.

They used a defibrillator in an attempt to restart her heart, and administered a powerful blood thinner to shift the clot. However, the thinning medication caused bleeding into her brain and pressure to build in her skull, resulting in a stroke, which paralysed the right side of Lyn's body, providing the latest in a growing list of seemingly insurmountable obstacles.

Ken had prayed as Lyn was taken to the ambulance, asking worried onlookers to do the same. Friends would later remark that he seemed unnervingly calm. "I had this absolute dependence on God for her to live or otherwise, as He saw fit. There was nothing I could do to control the situation. I thought she was gone. It's a powerful thing to realise you are totally dependent on God."

### *Clap of thunder*

A friend, Scott, who heard of Lyn's collapse, recounts that he felt he should go to the hospital to pray for Lyn, but

wanted some confirmation. He asked God to organise a clap of thunder if he was to go. At about 3am the following morning he awoke to a massive bang that sounded like a clap of thunder. He dressed and went straight to the hospital ICU where he prayed for Lyn. Ken, who was resting in a waiting room, saw Scott enter the hospital, and thought he must have been visiting someone else, only to learn on his exit that he had come to support Lyn.

Ken returned home to Hawley Beach the following night to collect clean clothes, tired and very much aware that Lyn could still die or never regain consciousness. "I said to our daughter Vanessa, 'Mum is probably never coming back home'. It's hard to comprehend. I went out into the garden, emotional with the intense grief of the possible impending separation from Lyn, after 29 years of happy marriage and not having been able to say goodbye. As I sat there, I sensed God saying, 'Are you willing to surrender Lyn's life to me unconditionally whether she lives or dies?' Whilst it was so heart-wrenching in the event this could be the end, I answered 'yes'. I recognised there was nothing I could humanly do to keep her alive. Her breath was in His hands. Then probably the hardest challenge and decision in my life was when I felt God saying, 'What if she is disabled, in a wheelchair, or doesn't recognise you?' Well, that was another question, but in a few moments I said I would accept this, reluctantly, if it was His purpose. A peace came. Little did I know then, that God was preparing me for a huge medical decision that was to follow."

Tuesday morning dawned and Lyn's condition deteriorated. The director of intensive care, Dr Stan

Yastrebov, who was caring for her, believed that Lyn had sustained a stroke as a result of the bleeding in her brain. He said the pressure was building in her skull, and that she needed to be assessed urgently by a neurosurgeon in Hobart if she was to have any hope of survival. There were two major problems with this scenario: Dr Yastrebov said a specialist neurosurgeon would first have to agree to treat Lyn in her critical condition, and an air ambulance, of which there is only one in the state and it could be anywhere, was needed almost immediately to transfer the patient south. He explained that she would not survive a three-hour drive to Hobart, and that even a flight gave her only a slim chance of survival, as there could be only about a two-hour window of hope, medically speaking.

### *Family consultation*

“I said I first needed to pray and talk to the family as to what to do. We decided to go ahead and give Lyn this opportunity and I went back into ICU to tell the doctor to proceed. He said, ‘First of all, I have rung the neurosurgeon, who has agreed to assess Lyn. He has just been in theatre and will tell the staff to standby if we can get Lyn there as soon as possible.’ They had both agreed it was contingent on the availability of the air ambulance because time was running out. Moments later Dr Yastrebov discovered the air ambulance was in Devonport and that the stretcher was coming in the door at that very minute.”

The plane collected Lyn and left within 10 minutes, Dr Yastrebov breaking with normal routine to accompany her to Hobart. The family followed by car.

“Halfway through the three-hour trip, I received a call from Calvary Hospital; it was the neurosurgeon, Dr John Liddell, confirming that Lyn was bleeding heavily in her brain, and asking for permission to begin the surgery.

“I said I would still like him to wait until we got there to discuss further with him the implications of such surgery. When we arrived at the hospital, the prognosis was not good. “The neurosurgeon explained, ‘If we do nothing, we don’t believe without a miracle that she will live beyond tonight.’ He explained when there is bleeding on the brain it causes the brain to swell. If the swelling brain is left untreated, it pushes down on the spinal cord causing instant death; hence the need to remove part of the skull to take pressure off and hopefully allowing the swelling to reduce.

“He further explained he could do cranial surgery to remove part of the skull to release the pressure. The piece of skull is then kept in a fridge for up to a month. ‘If we do this, she could still die, but at the same time, this is her best chance to live. We are giving her a chance to live, but in living, you need to know that she could be left with serious mental and physical disabilities ... that it would be very unlikely that she will know you, walk or communicate again’. He then asked: ‘What do you think Lyn would want?’ I said it was not something we had ever discussed. The other consideration of course was whether or not to turn life-support off.

“Then I reflected back to the previous night in the garden at Hawley Beach, when God had asked me if I was willing to trust Him no matter what.

“Knowing what is best when someone is on life-support is not easy, particularly when you are looking at someone seriously brain injured like Lyn, because there is a quality of life issue, which is different to someone being brain dead. You can’t live on a machine indefinitely, but brain injury and not knowing what the outcome can be, makes it very hard for the family involved to make the call on behalf of this person. It must be difficult for the medical team to advise, and we learned of a few cases where machines were turned off and the person stays alive. At the end of the day there is probably no rush to act either way.”

In response to the surgeon’s explanation, Ken asked the Lord to confirm whether to proceed with the surgery or not, by getting a unanimous verdict on conferring with the family.

“Our eldest son Nick referred to several Bible verses, reminding us that God alone has the power over life and death, and that her days are numbered by Him.

“Son Andrew reminded us of the favourable circumstances that had already taken place to date, from the medical staff attending to her at the church, to the availability of a plane to take her to Hobart, and the presence of a neurosurgeon willing to treat her. Daughter Vanessa and son Justin also felt strongly that while there was life, there was hope, and that we should give their mum every possible medical opportunity.

“With all agreeing, the decision was made.”

### *Comforting words*

Ken said he was encouraged but also challenged in the days following Lyn's collapse by several daily devotional readings from *In Touch* magazine.

One entry read:

"In those frightening times when our well-ordered life appears to tumble in around us, what are we to do? The Lord simply says:- Be still and know that I am God. Submission is a difficult response when we are experiencing hardship and pain, because we do not know the end result, and have no control over the outcome. But if we trust that God is in control, then we know submission is the best option. Do we trust God to bring about good from suffering? Whatever the reason for your trial, believe that God has a purpose in adversity and that He has allowed it for your good (Romans 8:28). Adversity will either harden us or soften us. Some people grow hard and resist God in adversity, but those who know how to respond are softened by it and broken. If you are going through adversity it may be that God may be allowing it to occur in order for you to get to know Him or bring you closer to Him."

On the day after Lyn's collapse, he read:

"A wise person will prepare for the inevitable and the most inevitable thing in the world is our physical passing away. We are not designed to live in our earthly bodies forever, rather we are eternal beings with an eternal purpose.

With so sure an outcome, we must spend our time on earth preparing for our eternal future, which we so often neglect. If you have placed faith in Jesus Christ, then you can be confident that you will spend eternity with Him in heaven. Heaven is a reality for which we must prepare. Get ready for it today!"

A third reading in that week also strengthened him.

"Spring, summer, fall and winter ... such are the seasons of life. Some are filled with joy, while others are characterized by difficulty. Take comfort because we can learn that God is faithful to His promises. God will do what He says He will do, and will keep His promises in all seasons (Hebrews 13:5). No matter how deep, how dark, how depressing, how hopeless, or how good things may seem, the Heavenly Father is with you through every single circumstance ... No matter what season of life you are in, no matter how long, short, painful, or easy it might be, God wants you to know you are never alone. He is with you always! God will be faithful to you because this is His very nature (Psalm 36:5). God knows all about your situation, you are never alone in any season of life (Psalm 139:1). You will change and seasons will change, but God is always the same. He won't fail you, He won't waver on you, He won't vary, and won't forget you today. He is with you always. Disappointments do not mean that God doesn't love us. He desires that we gain from hard circumstances and He wants the best for us. God is interested in our spiritual growth, and rest assured that everything He allows is for our good. We are never beyond the reach of God who is full of loving kindness, mercy and comfort. The Lord wants us to acknowledge

He is the source of everything, and to rely completely on Him. This is contrary to our nature and culture. He wants to become our source of strength in every trial. When we come to Him in a sense of dependence, we recognise we cannot manipulate an answer to our requests, but just rely on God's power to change things. He delights in answering our prayers and has provided plenty of promises that should motivate us to talk with him. We are privileged to belong to God who desires a Father-child relationship with us. He could certainly meet our every need without hearing a single word from us, but then we would miss the opportunity to pray and ask and receive His love. Have a wonderful time walking with Him today."



## CHAPTER TWO

## Before the deluge

Lyn Overton remembers feeling faint and then waking 12 days later in Hobart Hospital. She would not be discharged until July 11, 2004, just over three months after collapsing so suddenly and dramatically in church.

“I remember asking our daughter Vanessa, ‘Why am I in hospital?’ ” The family had decided not to tell Lyn what had happened to her until she asked.

Ken answered: “You collapsed in church one morning, as a result of a clot which then caused a stroke.”

“I was in shock. I am 47 years old and I have had a stroke. That only happens to 60 and 70-year-olds. I keep fit and look after myself. I go to the gym a couple of times a week, as well as walk, and generally eat very healthily. I’ve done everything I can to be healthy. I can’t believe I am in this position.”

In 29 years of marriage, Lyn had only spent a total of half a day sick in bed.

Almost seven weeks before her collapse, Lyn was running late and had been rushing to her car to meet Ken to then

attend a funeral in Devonport when she slipped on a slate path wet from workmen washing down the house. She was wearing high heels and fell awkwardly, crashing into a garden bed at the side of the path, cracking her left fibula (the smaller of the two bones in the calf) on the stone border.

She was in agony. A workman helped her inside where she rang Ken, who was at his office in Devonport, about 20 minutes away. He returned home and took her to the Mersey Hospital in Latrobe where her swollen leg was x-rayed and then placed in a cast. Doctors warned her to rest and keep the weight off her foot as much as possible. It was a tough assignment for a busy and active wife, mother and grandmother who spent most of her time caring for her family and others, and who were now caring for her.

### *Domestic duties*

It was also a shock for Ken who had been spared most of the domestic duties all their married life, as he and Lyn had long divided up responsibility for tasks between home-maker and businessman.

He had never hung out the washing, barely cooked and rarely cleaned or ironed. However, never one to shrink back from a challenge, he threw himself into his new role with great enthusiasm and commitment.

“Hanging out the washing for the first time, I grabbed a business shirt out of the clothes basket and went to hang

it by the shoulders when I considered there would be peg marks left when the shirt dried. I instead decided to turn the shirt upside down and place the pegs where the shirt would be tucked into my trousers. I remember coming back inside and sharing with Lyn my grand revelation. She replied, 'How do you think I've been hanging out shirts all our married life?' "

They gradually fell into a routine, the broken leg a minor inconvenience in an otherwise near-perfect world. At the time of Lyn's sickness, they had four children, two of whom were married, and two grandchildren. They lived comfortably, had travelled extensively, including overseas, and kept busy with family, business, church and friends. Ken and Lyn have been water skiers and loved the water and beach activities for many years. One of their family highlights was camping in a tent, in the same spot at Port Sorell, every year for 27 years.

"Nick, our first son, was 15 months old when we began, and we camped with several other families, who had children the same age. It developed great relationships, which are still meaningful today.

"We really had nothing worth complaining about," Ken said.

### *Comfortable life*

"Life was comfortable. We were grateful for what we had, and really had not experienced any of the trials and pain that some families face through sickness, death, financial hardship, family breakdown or conflict.

“We loved spending time with each other, worked close to one another and endeavoured to honour and respect God and make Him our highest priority, followed by our family.

Apart from losing their parents, they had so far been spared from the worst of life’s trials: the children and their wives and grandchildren were healthy, happy and close, geographically, spiritually and emotionally.

Ken and Lyn were born and raised in Tasmania. Ken was born in Devonport in 1951, the only year in living memory that it snowed. Lyn was born in Burnie in 1956.

They were raised in Christian homes and met at a church youth group when Ken was 23 and Lyn 17. “My brother Colin said to me, ‘I’ve found your wife at our youth group’. I replied, ‘You wouldn’t know who I am looking for, but I suppose I had better come around and have a look, then!’”

On meeting Lyn, he could see why Colin thought she had potential, and pursued a relationship.

However, at first, Lyn thought Colin was interested in her as he kept asking her friends about Lyn, but it was always on Ken’s behalf.

“I remember him turning up for our first date in a red shirt and a wide, white tie. He drove a noisy panel van,” she said.

“I thought he was good looking and very nice, and after

our first date I was more interested in getting to know him better.”

Wanting to impress Lyn, Ken decided to take her to the Napoli Restaurant in Burnie, a nice venue by North-West Coast standards.

“We both looked at the menu and ordered a meal,” Ken said. The waitress returned after we had eaten and asked what we wanted for our mains. We were shocked. We thought we had eaten our meal, only to be told we had only ordered entrees. We didn’t understand the term ‘entree’.

Lyn had never eaten out in a restaurant, nor tasted tea or coffee, but wanting to be sociable, ordered an Irish coffee, without realising what was in it. She managed two mouthfuls, and hasn’t touched tea or coffee since!

Ken was a keen suitor, driving one and a half hours several times a week from Launceston to Burnie to see his beloved. Lyn said the enthusiasm only lasted a month before he reduced the visits to weekends.

Ken offered to help Lyn’s father Ian Emmerton put up a fence, using the occasion to ask for Lyn’s hand in marriage. However, Lyn’s mother Dorothy, perhaps sensing what was about to happen, came on the scene and said they should wait for 12 months until Lyn was 19, so she could learn to cook.

Ken countered: “If she can’t cook now, she probably never will, so maybe it’s best for me to train her, and the best way

to learn is through practical experience.”

Dorothy conceded, allowing the first of her five girls to marry at age 19.

They became engaged on April Fool's Day, 1975, and married on December 20 the same year, in Lyn's family church in Burnie.

They still live in the first home they built in East Devonport in 1975, although it has been refurbished and renovated several times. The original kitchen was orange and brown, the bathroom purple and white!

Nicholas was born in 1977, followed by Andrew in 1979, Justin in 1982 and Vanessa in 1984. To date they have 11 grandchildren.

### *Fatherly advice*

As a young boy, Ken was shy. “I remember my father, Sydney James, known as Jim, saying to me, ‘Policemen, prime ministers and governors are to be respected, but at the end of the day they are all human, like us all. They clean their teeth and then spit in the sink.’ It helped me to still respect and honour those in power, but I also saw them as normal people and not just men in positions of authority.

“Dad taught us as children that it was important to always smile and say thank you. He'd say: ‘If you do those two things, and you can add up, you have a good opportunity to get work.’ ”

Ken said he was fortunate to have parents who believed in Jesus as the true God to worship, and they treated the Bible as their manual for life.

“Every day, Dad would read something from the Bible and pray. It was obvious he relied on God for daily life, and lived with real purpose and meaning! I soon came to realise that they weren’t just religious people, but had a genuine personal relationship with God and the Lord Jesus Christ.

“I saw them face the death of my youngest sister Gwenda who passed away at the age of six ... and I remember a little of how they coped with that ... they realised, and were grateful to God, that He had given her for that period of time, even if it was only six years, and that she was a gift and blessing to them.

On his father’s death bed, some of the last words to Ken were, “As children you have all had it relatively easy, but I want you to know it may not always be that way.”

“I came to realise their faith was not mine, and that I had to decide for myself what and who I believed in. I realised that Jesus is the answer. He is the light and hope of the world.

“I remember contemplating a story in the Bible of a man called Peter who was talking to Jesus, asking him a question: ‘Some say you are John the Baptist, Elijah or a prophet,’ but Jesus looked for a personal response from Peter and asked him, ‘But who do you say that I am?’ Peter

replied, 'You are the Christ, the Son of the Living God.' That is a question, which I think is the most important one in life. Many people see Jesus as just a good Jewish boy, or maybe a good teacher, but don't recognise Him as the God from heaven. I knew I had to answer this for myself like all of us, because the correct answer to this question determines who is the God to put faith in and worship, and whether I can be in heaven one day or not. I came to understand and believe with all my heart that He is the God and creator of the universe, who came to the earth in human flesh to reveal himself to us. I was also challenged that it is one thing to know about God, but another thing to recognise Him, and all that He does for us, knowing Him personally, and having a relationship. Most of us know about the leaders of our country, but we don't necessarily have a friendship with them."

Over the years Ken has reflected on things his Dad read from the Bible, and what he had heard and seen from childhood which gave him answers for his life. Some of them include:

*"For God so loved the world that He gave His one and only Son, and that whoever believes in Him will not perish but have eternal life." John 3:16*

Putting your own name in that verse, you realise it becomes very personal, and available to everyone in the world who believes.

*"Jesus is the Way the Truth and the Life, no-one comes to the Father except through me." John 14:6*



*“Everyone who calls on the name of the Lord will be saved.”*  
*Romans 10:9*

*“All have sinned and fallen short of God’s perfect standard.”*  
*Romans 3:23*

*“The penalty of sin is death (separation from God), but the free gift of God is eternal life through Jesus Christ our Lord.”*  
*Romans 6:23*

He continued reading the Bible, and going to church. This gave him a foundation for life and increased his faith and knowledge of God, His love and His principles for living; understanding His love for us, and His promises.

“In growing up, I remember Dad showing us from the Bible that we were not just physical bodies but that we were spirit, soul and body. That our physical body houses the spiritual, and that is what is easily neglected, but it is something that lasts forever.

“I remember my father referring to something written in the Bible, probably because he could see my enthusiasm for business, and wanted me to understand this message: ‘What does it profit a man if he gains the whole world but loses his soul?’ He’d say, ‘There’s nothing wrong with working hard, in fact we should, but we can easily neglect what is important, the spiritual, which lasts forever.’

“There was a time in my life when I thought through the big issues of life. Even though it is hard to fully understand, I thought there has to have been someone

who has always been there and started everything off, which I accepted as God, who created the universe. The first verse in the Bible says, 'In the beginning God created the heavens and the earth'.

Consideration of this answered the questions for me: Where have I come from? Why am I here on earth? Where am I going in the future?

"It didn't make sense to me to think we are here somehow, just for a few years, maybe 70, and then we die and there is no afterlife. To answer these questions made sense, gave me direction, purpose and a reason to live. It also made me realise that I am accountable to the creator! It is easy to think the whole world just involves us, but 100 years ago there were another lot of people on this earth. We are all just passing through, yet individually we are uniquely made and special to God and created to live in relationship with Him. He invites us to surrender our life to Him.

"I came to realise I had sinned against God in many ways, and that I was capable of anything by nature, the same as anybody else. No doubt my upbringing in a loving home, with guidance from my parents and the environment around me, helped prevent me from getting into too much trouble." I was fortunate to learn that what you sow you reap, good or bad. There are consequences to all our actions!

"I realised it wasn't a matter with God how much I had sinned, it was the fact that I have sinned, and even though I have thought wrong things without always

wrong action, my heart was not perfect, and I knew I fell short of His perfection and standard. I remember feeling separated from God and lost, and thinking I would face the punishment for my sin.

“I had heard since I was a child that Jesus was the Saviour, and that He had died on a cross for us, to pay the penalty of our wrongdoing. He lived a perfect life on earth and His sacrifice was the ultimate, motivated by love. God planned for Him to be our substitute, but I had to choose to accept He was the way to heaven as He said in the Bible. This led me to a point in time when I called out desperately to the Lord to be my Saviour and to forgive me and free me from the feeling of separation from His love and peace.

“Since early in my Christian journey I have tried to apply the biblical principle: *‘Trust in the Lord with all your heart and lean not on your own understanding; in all your ways acknowledge Him, and He will direct your paths.’*” (Proverbs 3:5-6).

At age 14, after having only just finished Grade 9 at school, Ken became an apprentice in his dad’s fibrous plaster sheet and cornice manufacturing business. He had 6 pounds in the bank from saved pocket money, and his wage in the first year was 3 pounds 5 shillings a week. In 1967, decimal currency was introduced, and it was a great feeling to think you were receiving double the amount of wages for work done.

After working lots of overtime, Ken was able to buy his first rental property when he was 17. It cost \$3900 and he had a tenant paying \$16 per week – a 22% return!

The steady income was helpful as four years later he sold the house to his dad as part payment to buy the warehouse from him, so Ken could grow his business, not only installing plaster products, but supplying tradespeople and retailers.

At 21, after working for himself for only two years trading as K.J Overton selling and installing a product called Villaboard, manufactured by Wunderlich and later James Hardie – a first in Tasmania and still used today – Ken bought the warehouse from his father. There was a great satisfaction in buying the warehouse with his own money instead of being handed it as a gift, although his father good-naturedly would sometimes remind Ken he had bought a bargain!

This exercise helped Ken with regard to his own children and what he did and did not do with them in the future. “For children to appreciate things and develop a work ethic, it is more important for parents to give them opportunity and advice than to make life easy for them from successes of the past. Learning and making mistakes from one’s own experience benefits a person greatly.”

Around the same time that Ken completed his apprenticeship at 19, his then 48-year-old father had a massive heart attack and was advised to retire from work completely. He was then able to drastically alter his lifestyle, but continued to show an interest in what Ken was doing, and would bring the mail into the office everyday at 9am sharp for many years. He went on to live until he was 79.

“At that stage a new product was being introduced in Victoria by CSR. It was and still is known as Gyprock Plasterboard. I was fortunate to be offered to be a CSR distributor of this product, which I accepted. We operated as Overton Plaster Supplies for 23 years in Devonport and along the North West Coast and in Launceston. This area was extremely good to us.

“This was a new plaster product in the market, and my father did show some concern for me taking this on. Change is not always easy for any of us. He would dip the plasterboard in a bucket of water, and show people his concerns, as it would disintegrate; however I would try and convince him, that no-one will go around throwing buckets of water at the walls of their home.”

In 1976, Ken bought in from Adelaide and introduced Stratco Metal Fascia and Gutter into the North West Coast area, revolutionising the industry in Tasmania. The metal fascia replaced the timber fascia which over time would rot and deteriorate. The metal fascia required only a primer and one coat of paint in the desired colour. A few years later it was marketed as a Colorbond product which is still used in building and construction today. To encourage builders to make the switch to metal, Ken would help them install the product on the first house, to show them how easy it was to install and the advantages of the maintenance-free product. He never looked back as they accepted the superior building product. The product worked well in conjunction with the plasterboard side of his business.

In 1977, Ken also became interested in property development and investment. He began building residential units, later a medical centre, and commercial rental properties, as well as growing the plasterboard side of the business.

### *Hi-tech*

Ken was one of the first to have the use of a computer in his plasterboard business. He also embraced emerging mobile phone technology, paying \$4900 for the privilege. He continues to be a fan of technology and is almost permanently attached to his phone and computer.

His brother Colin was keen to write a programme that would help him administratively. Ken said to him, "If you can set me up as if I am putting pen to paper, but give me a machine to do it, then go for it." And so he became a guinea pig for him. Firstly he made a fibreglass case for the screen and used a cassette player. He developed the software to a point where it was used around Australia with plasterboard distributors.

"In 1992 I became uncomfortable that instead of working to live, I was starting to live for my work, and my passion for business opportunities was starting to consume me. My relationships with God and my family were very important to me, and I found myself being too otherwise occupied ... too task orientated, while what really mattered was being neglected.

"I decided to sell off the plasterboard side of our business to

be able to give more time to people and relationships. CSR Ltd always respected the manufacturer and distributor relationship and never sold direct to the public; however, when I offered them the business, they made that change to maintain market share.”

Ken’s faith, together with experience in business over many decades, had taught him many principles. “It’s never about how much money you earn or get, it’s what you do with what you’ve got. We need to use \$10 with the same wisdom as \$1000. Everyone can spend money or give it away without thought, but it’s harder to use it and handle it wisely. Operating his own business, Ken soon learned that you need to know a little about every area of how it works, but don’t necessarily have to be good at any one part of its function!

“Business and being involved in leadership is not always easy. In fact, it can be a lonely road. You feel the responsibility for others, not only your staff but customers as well, and the need to be responsible with the finances with which you have been entrusted. This includes endeavouring to act honestly and with integrity, such as doing work to the best of our ability, striving for excellence, and paying our debts as a priority.

“I remember being at a creditors’ meeting where I was owed money and hearing the owner say he couldn’t pay us because his finances were in his wife’s name, and not the company’s. Thus he could avoid taking responsibility. Thankfully, nowadays, we are protected by banks requiring personal guarantees.

“As a young person, it’s easy to think you are wise in everything, but you learn as you go along, that you become wiser through experience.”

However, Ken also learned from experience that theory is not always matched in practice when it comes to business. “When I was 15 I was interested in cattle and bought a calf from a sale yard for 50 cents. It was tethered around the streets, and at the end of the first year I made about \$60. The next year I found a piece of land to lease that would run 12 cattle. Based on the previous year, I worked out I could make about \$720. However, I didn’t calculate that I would have to buy hay that year. I also needed a veterinary surgeon a few times. One of the cows died, a couple jumped the fence and I never saw them again. The net result was a \$12 loss for the year because of all the overheads.

“I often suggest to younger business people that if your heart is set on being a millionaire, then you will probably never be one, as money will be the focus rather than what is important to bring about that result, like treating staff and customers with respect, being fair and providing the best possible service. Your staff and customers are your greatest asset; working together as a team is so important, with each functioning in their gifted areas and with loyalty and respect. A TEAM effort – Together Everyone Achieves More. Always stay with your core business and what you know best, as a priority.

“Do what you enjoy doing naturally, if possible, then you will never ‘work’ another day in your life. And you will get paid for it. It is not wise to wreck our health to gain wealth,



and then have to use our wealth to maintain our health. We need to keep everything in balance. Pursue vision, and what you are passionate about. Look for opportunities and have a can-do attitude, even in an atmosphere of doom and gloom. That is often the best time to invest and do things when others are not. Maintain an attitude “where there is a will, there is a way.”

### *Success or significance?*

“Over the years I have contemplated the meaning of success. Is it fame, position or financial security, or something broader? Success is determined by what you have, title, position and power, but a greater measure is significance – what influence you have had for good on others, your character, the health of our relationships with God and others. Having our identity in God is so important rather than position and all that we possess.”

Ken reveals that in employing people he learned to consider chemistry first, character second and competence and capability last.

“Two people can be trained for something and receive the same qualifications, yet one seems to flourish a little more – often it comes down to attitude. We don’t have rights, but we have responsibilities in all areas of life.

“I’ve learned along the way that generally, leaders lead people and managers manage things.

“I’ve also learned the importance of giving, not just of

your money, but of your time and talent. It has been well said 'we make a living by what we earn, but make a life by what we give.' I learned the importance of being a peacemaker, not just a peacekeeper. Peacemakers try to resolve issues, and peacekeepers usually don't. Face-to-face communication is a key to this happening as well as being prepared to agree to disagree.

"I remember looking at my life at 26, having built and been fortunate enough to own freehold our first home, which we still live in today ... also just starting to build and develop a unit rental portfolio ... I thought, 'Well I suppose I could take it easier now, as we have enough to live on,' but I knew that was not my nature.

"However it was then that I was challenged about the gifts and passions I had been given. I realised that whether I was financially secure or not, and while we can enjoy the fruits of our labour, nevertheless our possessions and money are to be used for others. Life is not just about ourselves. It is about God and what He allows us to have, which is for a greater purpose, to help any in need. In the end we are only caretakers of what we have, and it can all be taken away from us!"

In 1986, Ken had a close friend Maurice Townsend who took him on a trip to New Guinea for three weeks to visit the tribal villages and help build an airstrip in the Sepik area. The experiences of that trip, was the first introduction to seeing another culture in need.

"One thing I always remember is the happiness and

contentment of those people, and yet materially they had nothing. It is so easy to live independently of God, and not see our need of Him, when we live in a land of plenty, with security to at least be able to eat and clothe ourselves. “

### *Raising children*

Ken and Lyn are often asked about what they have learned in raising their four children.

“We are quick to say, we don’t have all the answers, and haven’t done everything right, but there are some basic principles we have applied.

“The first five years is the most crucial time for training. Children learning to say ‘Yes!’ instead of saying by nature ‘No!’ You have to be consistent with love and discipline. Don’t try to train your child as a teenager, because then it can be too late. The training of children is so important, as it affects society and future generations.

“Children don’t always do what you say, but they often do what you do.

“In infancy and early childhood, we are dependent on others. We are generally humble, teachable and vulnerable.

“The second stage of life can be difficult for parents as children become independent. The growing child wants space to be a person in their own right, to express himself, make mistakes, learn from them and live with the consequences of those mistakes.

“Thirdly, we long for interdependence; to relate to others, building relationships where we give and receive.”

In addition to raising their own family, Ken and Lyn have been involved over the years in many community activities involving young people, and been on various boards. Their motivation is to see people’s lives transformed, particularly through the experience and influence of others, as is the case with the men they have been involved with through prison visitation.

### *Lyn’s experience*

Lyn was nine when she realised she had sinned against God and needed to repent and ask Jesus to forgive her and lead her in life. She made the decision in her room to follow Jesus, telling her mother when they next spoke.

Lyn left school at 16, starting as a junior office clerk at Burnie City Council. She rose through the ranks to be secretary to the town clerk (now general manager). She once sent a letter to Ken purporting to come from the town clerk, complaining that Ken’s nuisance calls and requests that she run errands were keeping her from important council duties.

Ken’s dad opened the letter in error and remarked that his son was “in some trouble!”

Before her accident, Lyn was a contented wife and mother who enjoyed spending time in the garden, reading and doing cross-stitch. She made meals for people in the church

and community who were sick, elderly or were celebrating a birth or grieving a loss. She attended a ladies' Bible study and was well known around town, and at the gym where she worked out a couple of times a week.

"She has always been a wonderful wife, mother, friend and cook who has always been hospitable and concerned for the welfare of others," Ken said.

The period of recuperation from her broken leg was a frustration but also a time of greater intimacy with God, as she spent extended times reading the Bible and praying.

She was looking forward to church the morning of her collapse, until a small disagreement with Ken just before heading out the door dampened her enthusiasm.

"Lyn was endeavouring to walk with the crutches and I sensed she was walking a little awkwardly. I said, 'When you get the plaster off, you are going to have to learn to walk a little straighter'. She replied: 'You wouldn't like it if I had a limp', to which I answered, 'It's not that, but if you can walk without a limp, then why not?' She was not too impressed."

The mood between them was cool as they headed into town from their beach house. On arriving, Lyn stopped to pass on her condolences to a couple she knew, one of whom had lost their mother some five weeks earlier. Lyn had been on her way to that funeral when she had slipped and broken her leg.



CHAPTER THREE

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## Touch-and-go

The neurosurgeon delicately removed a section of Lyn's skull to relieve the pressure from the bleeding. She was kept heavily sedated. Everyone waited.

The stroke had left her paralysed on her right side, and a clot remained in her still broken leg.

Within hours of Lyn's collapse, the church family across Australia and even overseas mobilised in prayer. Ken was getting up to 50 voice mail messages a day from friends and family as news spread of Lyn's fight for life.

Two days after Lyn's life-saving surgery, Ken sensed the presence of God when he awoke at around 3am. He was staying at a friend's place when he was roused from a deep sleep.

"I felt God saying, 'I love you, and care deeply for you. I AM YOUR FATHER AND YOU ARE MY CHILD, and I want you to ask me what you want. Ask and you will receive.'

"I went back to the experience I'd had on the Monday night at Hawley Beach when I surrendered Lyn to God and trusted Him with the outcome, no matter what. I replied,

'If you are saying to me, what would I like, this is what it would be: if she is going to live, it is that she will know us and at least be able to communicate with us. ' "

Ken went back to sleep peacefully, with a sense that God was going to do something. He arrived at the hospital ICU about 6am and was urgently summoned to Lyn's bedside by the excited nurses who were attending to her. "Ken, come quickly, we have reduced her medication slightly, and her eyes have just fluttered, and we want to see if she recognises you."

"I bent over and took her by the hand. I could see her eyes moving and said, 'Lyn, if you can hear me, can you open your eyes further?' As they opened slightly, I saw a glimmer of life in her eyes that gave me hope, unlike in the church when all I saw was death. Lyn was then placed in an induced coma, allowing her body time to recover."

Six days later on Easter Saturday, a friend, Judy McCombe, who was coming to Devonport at Lyn's invitation to sing at their church, asked if she could visit ICU and sing and pray with Lyn. Ken first asked for permission from the ICU staff, who agreed. Months later when Lyn was well advanced in her recovery, she recalled her friend's presence and voice on that particular day when she lay in a deep coma.

On another occasion, close friend Michael Vos visited Lyn in intensive care while she was still on life support and not responding. He prayed for her. A tear dropped from the corner of one eye. Both Ken and Michael noticed the tear and wondered what Lyn was thinking. Months later Lyn



remembered him praying, and that he had mentioned Ken and Lyn's two grandchildren, Chelsea and Chloe.

A day or two later, I said to Lyn, 'If you can hear me, would you squeeze my hand'. "She moved one finger, ever so slightly. Of course, I became very excited, and sensed that she was recognising me, and that God was giving me what I had asked for. The nurses mentioned to the neurosurgeon what was happening. He cautioned me that Lyn's response may have been more a reflex action to a command, without her necessarily recognising who was making it. However, a day or so later, Lyn responded by moving her finger when the doctor asked her to register that she was aware that he was her physician."

### *A bigger plan*

On Easter Sunday, Ken had another God moment where he reflected on how God turned a supposed tragedy into triumph when He raised Jesus from the dead. "When Jesus hung on the cross, the religious leaders and other people who put him there, thought, 'This is the end, he's dead.' But as Ken knew from the Bible, God had another plan, a bigger plan, that He would be raised to life.

"As we know, this is an historical fact. I sensed God saying to me again, 'That's what I am going to do for Lyn, I will raise her up to a measure of recovery.'

"Little did I realise the extent of the recovery required to enable Lyn to live a reasonably-normal life again."

It was the same afternoon, Easter Sunday, when the medical staff decided to begin reducing Lyn's sedation in the hope that they could take her off life-support.

"I will never forget the moment, standing beside her, watching the tubes being removed, and keeping my eye on her chest to see if her heart was pumping. It was an amazing experience to see her able to breathe on her own, one heartbeat at a time."

Lyn could not communicate. Though incredibly weak and still very sick, she was somewhat aware of what was happening, and remembers an incredible sense of peace coming over her.

"I knew Jesus was with me," she recalls.

Over the next few days, Lyn became a little more alert and was able to whisper individual letters of the alphabet, which Ken and Vanessa deciphered as "Surgeon wants to see me walking again."

"It was a great day some time later, when I heard her speak again that word 'Kenneth' which told me she was getting back to normal ... wanting me to listen to her."

Lyn's painstaking recovery, the setbacks, joys and frustrations, were recorded by Ken in voicemail updates he made for callers inquiring about Lyn's condition.

***April 16:** Lyn is more alert and her speech clearer. Smiling more freely. Rehabilitation likely to be 2-3 months. Praying her right*

*side will recover from paralysis.*

**April 17:** *Lyn had a good day. Very restful. Her broken leg apparently hasn't healed so well as the body devotes all its healing into areas of most need. This could mean a plate but hoping this will not be the case – that leg is very important to assist walking in the future.*

*Still no movement on the right side, but as we know, this can change!*

*As a family, the Lord is giving us strength to cope – and we hang on to His promises.*

**April 19:** *A bit of a down day yesterday – went in about 8.30am and she wasn't herself and shortly after took a turn, and for me I thought I was reliving the first collapse – thankfully it did not last too long, and being in ICU they get to work quickly.*

*On the positive side, they said the CT scan showed the swelling of the brain had reduced.*

*The orthopaedic surgeon says he believes she will be OK without a plate in her leg.*

**April 21:** *Lyn had a good day yesterday. She is starting to sort me out again which is necessary, of course, so that is a good sign – the Lyn I know and her personality and humour are definitely there, for which we are so thankful.*

**April 23:** *The result of the scan and x-ray on her broken leg revealed there is still a reasonable-sized clot just above the break.*

*They are not able to thin her blood anymore at this stage because of the brain surgery coming up.*

*Lyn is coping extremely well – never complaining about anything and is graciously accepting with a smile what is happening in her life.*

**April 24 and 25:** *The physio said Lyn indicated to him a little sensation in her right leg when there was some weight placed on the right foot. Very encouraging!*

*Last evening Lyn was taken out of the intensive care unit into a ward. Last night she was able to see our two granddaughters and give them a cuddle with her left arm – a bit heart-wrenching when she said: “I don’t look like Nan, I don’t speak like Nan, but I am,” – and then smiled at them.*

**May 3:** *Lyn had a good weekend. Sat up in the chair each day for about three hours. She is talking clearer now – eating more, three times a day, and last night the surgeon asked her to lift, if she could, her right leg which was paralysed and, you guessed it, she did, about two inches off the bed. He was delighted with that response as he was convinced that she would never do that again, with the medical diagnosis. No real movement in her right arm or hand yet!*

**May 6:** *At around noon, Lyn was taken into surgery to have the part of her skull put back in place after being out for four weeks. He said the brain was fairly tight to the skull – maybe it’s that Lyn has too much brain.*

**May 12:** *Lyn is doing well – yesterday for the second time I had her*

*in a wheelchair and the physio had her standing up on a walking frame. Then she walked with taking weight on her left (broken) leg and then shuffling her right leg and foot to take the weight to move her left foot again.*

*I must say it made me realise the reality of how weak Lyn is and that she does have a long way to go if she is to walk again – quite emotional for Lyn as well.*

*The bandage was taken from her head last night and her skull is nearly perfect in shape again – marvellous what the surgeons can do considering nearly half of the skull had been removed and had to be put back in.*

**May 22:** *I am excited to report that on Thursday evening Lyn was able to lift her right arm off the bed towards her shoulder for the first time – a big step earlier than expected according to the physio. Her concentration required is unbelievable to achieve that.*

*Lyn is bright and cheerful generally – not complaining, but has spots of emotional times, being thankful and overcome with all that has happened.*

**June 5:** *Lyn is walking further now with her stick on her left side, with someone at her side at this stage. She is able to support herself well when standing and sitting in and out of a chair.*

*I would say there is slight improvement with her right arm – certainly the swelling has gone down in her hand, but at this stage she is not able to move it independently.*

*Her wounds from the operation to her skull have healed well – her*

*hair is growing back again – she is eating well and putting weight back on after losing 12kg.*

*Last Saturday, for the first time, we were able to transfer Lyn into a car and take her for a drive to the Botanical Gardens where we wheeled her around.*

*On Tuesday, the doctor told her not to expect much improvement in her right arm and hand and to be prepared for that, but yesterday, to our amazement, the physio noticed a change in the response of her muscles near the shoulder which she says is promising, and, as well, Lyn rolled her hand over – so in the end we just keep praying for that arm and hand and also that the clot will dissolve.*

**June 30:** *Lyn progressing well. On Sunday morning she moved significantly her right arm out and then up towards her chest. Mind you, lots of concentration but she did it and the physio picked up on Monday that there has been a change in muscles.*

*A nephew, Joshua McKinney, who is six and lives in Brisbane has apparently been praying for a while that his Aunt Lyn will be able to move her right arm again, and he was in Hobart on Sunday at lunch and saw that happen for the first time. Then he gave Lyn a short note and said 'now I pray day and night for your fingers to move now' – that I think is cute!!*

*Lyn made a quiche with one hand, chopped a potato and carrot and cooked it and had a great feed. We are now on the homeward run and all being well, will be home in July.*

**July 11:** *Well yesterday was a very exciting and sunny day as Lyn was discharged from hospital after nearly four months. She*

*walked out with her stick, smiling, with her right arm in a sling but looking great and ready for home.*

*I said today's update will be a bit special because Lyn will now say a few words to you.*

### **Lyn's words:**

*"Thanks so much for your prayers, messages, cards, flowers and your interest in me and my recovery over the last few months – I know you have been ringing for updates on my progress for a long time now and I appreciate that very much. I am aware that the Lord has done lots of healing in me by means of a wonderful medical system and also miraculously in different ways, for which I am very thankful."*

### **'Whatever' lady**

"Lyn smiled through the whole ordeal. That's not to say she didn't get frustrated, but typically her response to any direction was 'whatever.' She became 'the whatever lady.'"

The day before Lyn returned home, Ken said he learned a powerful lesson while watching the TV show, *Deal or No Deal*. A contestant had the chance to take home \$64,000 but decided to play on and ended up with \$30,000. When the host lamented what she had lost, she replied, "I'm not looking at what I've lost, I'm looking at what I've got."

"Driving home with Lyn from hospital after having been with her every day since her collapse, I looked across at her in the passenger seat and realised there was still a long way

to go in her recovery, and some things may never be the same. Reality struck. It was then I reflected back on those words from *Deal or No Deal* about remembering what you have, not what you don't."

Lyn returned home, still a little underweight, and initially needing a walking stick and the occasional use of a wheelchair. The stroke had left her without the use of her right arm and hand, and only limited feeling on her right side, including her leg and foot.

That same night, Ken and Lyn were watching a video about Nick Vujicic (whom they have since met), the Australian man born without arms and legs who has become an inspiration to millions of people worldwide as a result of his tenacity, faith and optimism.

"I remember Nick saying, 'If you are going through something right now, there's a purpose in it for good, and if you believe, you can be sure God is with you and will carry you through, and will not let you down.'

"It gave both of us, but particularly Lyn, great hope and to be positive in attitude and take one day at a time with God's help."

They admit that adjusting to life at home without the on-call medical help was a challenge. While they had access to community nursing, Ken wanted to care for Lyn himself, as much as possible.

"Our daughter Vanessa, who was still living at home, was





Ken, 2 years old



Lyn, 2 years old



Wedding day, 20th December 1975



1987. Left to right: Justin, Andrew, Nicholas, Lyn, Vanessa and Ken



Start of business, 1970



This has potential!



KJ & DL Overton Plaster Supplies Pty Ltd



Papua New Guinea, 1986



Camping holidays for 27 years, Port Sorell



'Relaxation'



Broken leg just prior to collapse



Mersey Hospital, 4th April 2004



Calvary Hospital ICU, Hobart, 2004



Launceston General Hospital ICU, 2009



Mother's Day celebration, 2004

**THE STATE OF OUR HEALTH**

## Brave decision

Ignoring ambulance bypass of Mersey saves woman's life

**By Mike Hughes**



A "MIRACLE" patient is how paramedic Richard Chapman describes Devonport's Lyn Overton.

"She's the luckiest person I've looked after," Mr Chapman said yesterday after Mrs Overton was presented with a memento of her recovery.

In April last year Mrs Overton had a cardiac arrest while attending a church service in Devonport.

She had a broken leg at the time and a blood clot had formed and travelled to her heart, causing the arrest.

She also suffered a stroke which

caused extensive brain damage. Mrs Overton spent about four months in hospital in Hobart.

A year later she is well on the way to a full recovery.

She was yesterday presented with a lapel pin and certificate by paramedics Mr Chapman and Gayleann Walker who revived her.

"I'm very grateful to them," Mrs Overton said.

The award, created in the memory of the late paramedic Mark Mansfield, recognises people who have been resuscitated and recovered.

"I just take one day at a time," Mrs Overton said.

"You have to accept that life has changed."

**NEWS**

## Miracle recovery

Coastal woman achieves amazing results in fight back to health

**By Andrew Hinch**



When Mr Chapman and Mr Walker arrived, Mr Wilson was sitting up in bed looking not too bad.

Within minutes his heart had stopped and he was on the floor being worked on, Mr Walker said.

Mr Wilson said he couldn't remember a thing.

Mr Chapman said it was a "strange feeling" knowing you had saved a person's life.

"It's pretty special when you help someone, but it helps the family as well," he said.



## Paramedics recognise patients' recovery

**By ELIZA WOOD**

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"I just take one day at a time," Mrs Overton said.

"You have to accept that life has changed."

### Brave decision



**Flashback to last year.**

Devonport's Barney Wilson was also presented with a pin and certificate.

In May last year Mr Wilson, complaining of a pain in his side, asked his wife Elaine to call an ambulance.

When Mr Chapman and Mr Walker arrived, Mr Wilson was sitting up in bed looking not too bad.

Within minutes his heart had stopped and he was on the floor being worked on, Mr Walker said.

Mr Wilson said he couldn't remember a thing.

Mr Chapman said it was a "strange feeling" knowing you had saved a person's life.

"It's pretty special when you help someone, but it helps the family as well," he said.

## 'Precious moments' A grandchild's touch



Lyn with Chloe and Chelsea



Ken with Sophie



New arrivals during 2009;  
Kaitlyn, Judah and Annie



Ken's medical records



Learning to walk again

**'Ready for home'**  
*November 2009*



Time to say 'thank you' and 'goodbye' after eight months



Crutches no longer required, May 2010



Vanessa's special day, 19th February 2011



Front row left: Emily, Chelsea, Phoebe, Jasmine, Chloe, Sophie, Liam  
Back row left: Andrew, Stephanie, Annie, Nicholas, Natalie, Judah,  
Vanessa, Warrick, Lyn, Ken, Justin, Naomi and Kaitlyn.



also an enormous help, allowing a sense of normality within the home.”

Lyn said: “The hardest time for me was the weeks after I first came home from the hospital. While in hospital alongside some others in a similar situation I was working hard on my physio exercises and making small improvements regularly – coming home to my normal living environment and being alone made me realise that things I once took for granted and did so easily I could no longer do. There were times of frustration and I shed a few tears. Of course as time goes on you find new ways to do some things and you also accept that there are some things you may never do again or if you can they may be a long time happening.

I have only the use of one arm even now, which still allows me to live a fairly normal life. I can cook and wash. I have also taught myself to print with my left hand. It’s better having one in use than none!

“I was given my driver’s licence back as well – what a wonderful feeling to be independent again. Later on that same year, after 32 years of driving, I received my first ever speeding ticket.”

Lyn continued to regain feeling in her right side, although at this stage, her fingers are permanently closed. Each morning she stretches her fingers and wrist on a special frame after her daily walk.

Lyn has had to make adjustments as a result of her illness.

She has learned to dress and drive with one hand, and prepare meals. She cannot cut her fingernails, do up shoe laces, open tins with a can opener, scratch an itch or fasten a necklace. Ken has now had to change his grandchildren's nappies, a job he was only called on in an emergency with his own children!

The grandchildren quickly adapted to "Nan's" weakness in her right side – they back up to her left side so she can scoop them up one-handed and sit them on her knee.

### *Further setback*

Nearly a year later in February 2005, Lyn collapsed again, this time at Hawley Beach when, unexpectedly, several clots broke free from her paralysed leg and travelled to her lungs. However, they were small enough on this occasion not to cause a cardiac arrest. She was taken by ambulance to the Mersey at Latrobe for two weeks, one spent in intensive care.

The family were told that the condition, while serious and potentially life-threatening, was nowhere near as bad as the previous collapse 11 months earlier as these latest clots passed through her heart into her lungs without causing a blockage.

A patient in the ward beside her turned out to be the wife of the man who was due to be transferred to Melbourne when Lyn was given priority for her mercy dash to Hobart in 2004. Thankfully, he had survived the delay. The ambulance had dropped Lyn off and then returned to transfer him to the mainland.

The two couples talked about the events of that day in 2004 as they were reunited at the Mersey. The woman shared that while initially she had wanted her husband to fly first, she accepted that Lyn's condition was far more serious.

Ken recalls: "I remember asking Lyn's doctor at the time, what would happen to the patient who was making way for her. He replied: 'Lyn is the priority, and sometimes we have to make these decisions.'

"For some time, Lyn and I had wanted to meet and thank the couple who had to wait as a result of Lyn's emergency, and now they were next to us."

The wife, known as Nan, who had had a stroke, shared with Ken during a subsequent visit that she was scared to die. "I said to her, 'Do you have faith and a belief in God?' to which she replied - 'I've been to church most of my life, and have prayed and sung in the choir.' "I explained to her the difference between being religious and having a personal relationship with Jesus, and went on to explain to her we can be sure of eternal life which is a gift from God, and that this understanding gives assurance and takes away fear. It became obvious, she wanted to know a lot more."

A couple of days later when Ken visited, the woman, who was heavily medicated, and mistook him for a nurse, said, "Tell Ken, it's all about Jesus and the cross!"

She was transferred to a nursing home, where she died a few months later.



## CHAPTER FOUR

## More storms

Ken and Lyn had adjusted to their new “normal” after her crisis, recovery and rehabilitation when another storm hit unexpectedly and sent them back to their home away from home – hospital.

Ken was on a walk in January 2009 with brother-in-law Alan when he suffered some discomfort. He passed it off as indigestion or gall bladder trouble, ignoring the pain in the hope it would just go away. Breathless and bent over, he grabbed on to a roadside post while Alan ran back to the house to get a car.

He was driven home, took some paracetamol and the pain subsided.

It returned March 7 with a vengeance when he awoke at 4am in excruciating pain. He staggered downstairs and rang the ambulance while Lyn slept.

They rushed him to the Mersey, the scene of earlier ‘crimes’, where they did tests. He deteriorated during the day and was placed in the High Dependency Ward. Within hours he was gasping for breath.

Ken was in Mersey Hospital for three days and over that time deteriorated to the point that the doctors decided the only hope for him was to be transferred to Launceston General Hospital. He arrived there in a serious condition, unable to breathe, his lungs collapsing.

The intensive care doctor told Ken they would probably have to place him on life support, temporarily, and that he should not worry as he would see his family again.

"I called our son Nick and told him they wanted to put me on life support for a short time and that the intensivist gave me some assurance that I would see him and the family again. I had a flashback to when Lyn collapsed, and not being able to say goodbye. I also rang Lyn to let her know what was going on without wanting to scare her.

The ICU staff were busily getting equipment together to put Ken on life support as he was struggling to breathe. Ken told them, "Don't bother, it's too late, I'm gone."

From that moment he was unconscious for two months.

Ken was initially diagnosed with acute pancreatitis but was quickly upgraded to the life-threatening "severe hemorrhagic necrotic pancreatitis" in which a blockage in the pancreatic duct, such as from a gall stone, causes enzymes, meant to aid digestion in the stomach, to literally attack and kill the pancreas.

*'Very few survive'*

The surgeon who treated Ken at Latrobe and had him transferred to Launceston ICU, Dr James Roberts-Thomson said: "Extensive pancreatic necrosis which Ken did develop leads to multiple organ failure. Very few survive this serious condition. The pancreas is not an easy organ to get access to for any surgeon or doctor. It is deep within the abdomen with many major blood vessels located behind it (aorta and vena cava), through it (the superior mesenteric vessels going to the intestines) and on top of it (the splenic artery and vein). If a person has appendicitis the surgeon can make a short incision in the right side of the abdomen to remove it, it is easily accessible. The pancreas however, is not easily removed. It is a vital organ, as insulin absence leads to diabetes mellitus (high blood sugar levels), and the body is unable to digest foods adequately if there is absence of the pancreatic digesting enzymes. Hence it is an organ which doctors don't operate on unless absolutely necessary. Pancreatitis has been extensively studied internationally and even in this day and age a small percentage of patients die from the illness, usually from multiple organ failure."

Lyn said she knew Ken's condition was serious, but like many years before, she too surrendered him to God. They transferred him to Launceston for more intensive care.

"He looked shocking. They told me his lung had collapsed because the swollen pancreas pushes on the lungs.

“The doctors and surgeons said to us: ‘I don’t know if you realise how seriously ill your husband is’. The surgeon called a family meeting to say ‘he is a walking a fine line between life and death.’ They never held out much hope of his survival while Ken was in ICU.”

Ken’s kidneys were also failing and he was placed on dialysis for four days. One by one, his vital organs were slowly dying as toxins spread throughout his body. Many times when on life support Ken would stop breathing, and Lyn would shake his arm and say, “Keep breathing Kenny; breathe”.

He would shed 30kg, contract hospital bugs, blood poisoning and require six blood transfusions, 28 CT scans and endure 102 days in intensive care, 98 consecutively, a hospital record. Doctors eventually removed his gall bladder and most of his pancreas, leaving enough to prevent Ken being diabetic.

Ken said the medical staff was evenly divided on whether to continue to treat him, or simply allow disease to take its course.

Lyn said it was worse to watch someone you love suffer than suffering yourself.

“During the eight months I was never given any hope of Ken’s survival ... not even when he was coming home from hospital after eight months ... all they would say is when it’s all over it’s all over, one way or the other.



“I felt like a widow for all of that time – a very emotional experience – however I was very fortunate to have the close support of my family and many friends during this time.

“Our eldest son Nick set up a website which he updated daily, which many viewed and kindly prayed and left messages of encouragement.

“It was unbelievable that so many people visited that website, in fact approx 52,000 hits. I became very conscious of people praying for us.

“I felt God’s amazing peace once again, giving me the ability to cope in very difficult circumstances – there were many words of encouragement and Bible verses and songs left on the website.”

Lyn said she, like Ken, had to surrender her husband to God. “I would love you to heal Ken, but his life in your hands and he belongs to you. I was able to say, ‘Not my will but Yours be done.’ ”

Ken’s long battle is captured in the web updates posted during his fight:

**March 23:** *We have just heard some bad news. A doctor has just informed us that the scan on Friday revealed they can only see a third of Dad’s pancreas, meaning two thirds is dead. The doctor stressed that dad is very, very sick. Please pray! A person can live with less than a third of their pancreas, however this increases the risk of mortality. The plan is to do a tracheotomy tomorrow, and also to bring Dad off the sedation. We are very much looking*

*forward to speaking with him again, even though he won't be able to talk. However we are saddened by this latest news.*

**March 25:** *Right now he is coming around. They have taken him off sedation and morphine, and as this leaves his system he should wake up more and more. Today was an emotional time for Mum as he responded to her talking and half-opened his eyes.*

*Driving to the hospital tonight I was listening to a song, and was uplifted by the truth of the words, "all of my life, in every season, you are still God, and I have a reason to sing, I have a reason to worship." Doesn't mean it doesn't hurt – it does – but often it's in the pain of challenges of life that we truly experience the peace, strength and presence of God. No matter what happens in life, we have a reason to rejoice in and worship Jesus, the giver of life and hope.*

**March 27:** *The consultant intensivist said this afternoon that this is an illness that the body is not designed to survive. Hence all the support they have been giving him. As one doctor said today, "He has a fire in his belly."*

**March 28:** *I have just come downstairs to post this update after witnessing the most exciting thing since last Tuesday week. Mum, me, Andrew and Vanessa just experienced Dad with his eyes open for a few minutes, trying to talk to us (of course discovering and being told by the nurse he couldn't) and raising his eyebrows in a very familiar fashion. Prior to my entering ICU, he also half-smiled at the others twice!*

**April 2:** *At 1pm this afternoon they did another CT scan. Unfortunately this showed that things have got a bit worse,*

*not better. The inflammation of the pancreas seems to be a bit greater, and it's possible more of it may have died. He has fluid around his lungs, liver, intestines and so on, and his stomach is quite large (the reason they decided to do the scan). We are not sure what all this means yet in terms of treatment, the surgeon will be around tomorrow morning.*

**April 4:** *This morning we gathered at the hospital to discover Dad didn't have a good night. And as a result, they decided to give him another small dose of sedation. It is common when people are in ICU for a long period to go through stages of "low spirits, depression, feelings of futility, anxiety, aggression etc etc." While not specifying the details of how Dad went through the night, the doctor's commented this morning was that "he was not himself" and had a bad night with high heart-rate and blood pressure and still battling high temperatures as well.*

*The doctors informed us today that in the first 48 hours of Dad's illness, he ticked all the boxes to be in a category of 30-70% risk of dying. Even now, they say he is 50/50. The surgeon has previously had a patient in ICU with pancreatitis for nine months! Then 6-12 months rehab following.*

*It seems clear at this point that the risk of operating to remove the dead part of the pancreas (which is most of it) outweighs the potential benefits. Not only is there a high risk of mortality with surgery, but once they start it usually means a number of operations over a period of time.*

**April 6:** *The consultant's first words to me were, "Ken is not doing too well." This surprised me a bit, and started another rollercoaster ride. They were saying they were going to do some*

*tests to see if there was an infection.*

*To be honest, it's difficult right now. We're looking at some options that I won't elaborate on at this stage. Emotions are very real right now and Mum and Vanessa are with him.*

**April 9:** *While his chances of recovery are 50/50, one of the head ICU consultants encouraged us yesterday to see the glass "half full" rather than "half empty". He said based on what he's seen of Dad (not having seen him for four or five days), he'd be surprised if he didn't pull through.*

**April 10:** *Liam (his only grandson) saw him for the first time this morning, which was great. Dad exerts himself for his grandchildren and it wears him out! He also does this for visitors, which is why we feel it necessary to continue restricting visitations for the time being.*

*Around lunchtime the doctors became concerned with his breathing. He was breathing at 55 breaths per minute (try it – you and I breathe somewhere between 8 and 16). It took a little while for them to stabilise him again, and unfortunately they had to sedate him heavily to do so. So heavily in fact that he is not breathing on his own.*

*This will give his body a rest and is clearly the best thing for him right now. It's a shame it came right now as it's his 58th birthday tomorrow and we are hoping to celebrate it.*

**April 14:** *Well, it's all been happening this afternoon. We were called to a meeting with a surgical registrar of the surgical team at 3pm. The purpose of the meeting was to inform us that*

*the surgical team and consultant intensivist believe the time is right to remove the necrotic pancreas. And so the operation will begin first thing tomorrow morning.*

*Dad deteriorated over the weekend, with further damage to his lungs and needing a lot of support, as you know.*

*The plan is to remove the dead part of the pancreas (which is most if not all of it) and also his gall bladder if he is stable enough. They will check his colon and, depending on the condition, he may need a bag.*

*The surgery will take between 3-6 hours and the risk is unstoppable bleeding, as there are large blood vessels that run across the top and bottom of the pancreas.*

*Our trust is in God. He knows what he is doing, and He has a plan for Dad. We are also comforted by the fact that if Dad wasn't to pull through (of course we really hope he does) he knows where he is going – into the presence of His Lord and Saviour, Jesus Christ. Not because he's a great bloke (which we think he is), but because he's placed his faith and trust in what Jesus has done for him.*

**April 15:** *Praise God that the surgery went for just under three hours and they are fairly happy with the outcome. They have removed, where reasonably possible, the dead pancreas, which, according to what they can see, is now all dead. They have placed a tube from the remaining dead pancreas into the stomach so that this could come out through his stomach eventually. They have removed the gall bladder, which always would need to be done sometime in the future, now that his pancreas is gone.*

*They have warned the family that there is still a greater than 50% chance of mortality, so we all need to keep on praying and thanking God for His touch this far.*

**April 15:** *Firstly, thank you all so much for praying. We are very thankful that Dad has pulled through the operation, and as far as we know, it went "reasonably well." Dad is still under heavy sedation. The body is probably in shock following surgery, manifesting itself with shaking, so they are monitoring him at present. He is on dialysis for his kidneys, and will remain heavily sedated for the next three to four days at this stage.*

**April 23:** *Today has continued to be another positive day. Dad is quite awake, but is incredibly weak. The only things he can move are his eyes.*

**May 1:** *Once again today has been positive. The big news today is that they've had Dad on a tilt table, which assists him to stand upright, or at least for his body to be upright, and this apparently went quite well.*

*The short-term goal remains to get him off the ventilator, at least for a few hours at a time.*

**May 9:** *Dad is doing well and had another good day. The doctor has said today that he could be out of ICU and in a ward for 3-4 days, which is great news. He's been talking away and quite coherent, so all the signs are good.*

**May 14:** *Today the doctors told Dad about his pockets of fluid and that surgery (a risky procedure) will be necessary at some*

point (short of a miracle). This shocked him a bit initially as he thought he was doing quite well. Over the following hours he came to terms with it.

**May 21:** I've just returned home from Launceston. When I arrived this morning, Dad was a little emotional. He hasn't had a good cry since it all started, but this morning he fought the tears back (and let a few flow) as he said, "It's a hard road."

**May 27:** When I arrived this morning to see Dad, he was struggling with his breathing again, but they didn't think it was fluid and were a bit puzzled as to the issue. Tonight they will be sedating him again when he goes back on the ventilator to give his body a good rest.

**June 1:** Dad has now moved, for logistical reasons, back into the main section of ICU (out of his own room). He continues to be on the ventilator, having real trouble breathing without it.

**June 8:** Pus is still coming out of the drain in his side. The surgeons don't want to go in because of how difficult the surgery is, and therefore the risk involved. Dad is on four different lots of antibiotics, and wouldn't have much good bacteria left to fight infection. Please pray he doesn't get pneumonia, and that these pockets of fluid would heal up. The reality is that things could still go either way, but we continue to put our hope in God and His purpose.

For a couple of weeks there, Dad seemed to be heading forward in leaps and bounds, but has not really improved much for close to two weeks.

**July 2:** Thank you for your prayers and, if I may ask, that you

*continue praying for Dad's healing. Just now they have measured his temperature and it's high again. He's got a long way to go, and I know he'd really appreciate being raised up quickly. The hard work in front of him is quite daunting.*

**July 27:** *Last week we discovered that he has a nasty bug (similar to golden staph). Please pray for his emotional wellbeing too as it's hard for him to see a light at the end of the tunnel at this rate.*

**August 7:** *Over the weekend, Dad has passed a lot of blood, as well as coughing up a small amount. This has caused the doctors and surgical team to assess him today to try and ascertain where the bleeding is coming from. Internal bleeding can be serious of course.*

*During an endoscopy on Wednesday they didn't find any bleeding initially. As they were removing the light they noticed his stomach filling up with fresh blood. They acted quickly to prevent the blood from going into his lungs, hence the need for putting him back on a ventilator.*

**August 17:** *Thankfully there have been no further issues with the internal bleeding. And today, he spent his first time outside in the sun for five months. Talk about the simple pleasures of life and creation.*

**September 7:** *Unfortunately Dad has landed himself back on antibiotics and back upstairs out of the rehab ward, as being off antibiotics for a few days, the bugs resurfaced.*

*A highlight for him yesterday was being wheeled down to the cafeteria to find all of us (his kids and grandkids) waiting with a Father's Day afternoon tea.*



*A couple of people have suggested we have a day of prayer and fasting for Dad's healing which we are happy to do. For those of you who would like to join in, we thought we'd set aside this coming Friday, September 11 and really seek the Lord, asking that in His grace and power he might restore Dad to full health and strength.*

**September 21:** *Today we have had some positive news. Dad moved back to rehab last week and they've told him they are happy with the blood tests.*

**September 29:** *We have some fantastic news for you tonight. Dad could be home for good in 2-3 weeks. This Saturday we are planning to bring him home for the day and he will probably stay for the night.*

**October 19:** *Dad came home again over this long weekend, and got on well. Today he has to have a procedure under general anaesthetic to sew up the hole in his neck from the tracheotomy. It never healed over properly. He had an 80mm straight cut to his throat opened up so they could stitch the hole from the inside out. Not an easy operation, but it was a success.*

**November 2:** *He's home for good! Dad was discharged on Friday and, subject to him going well over the weekend, he was to phone them today and say he's staying home – which he did. Next week, Dad will write a message to everyone.*

**November 9:** *It's been great to be home this last week after nearly eight months in hospital. As you would understand, it is difficult to personally thank you all, but I wanted to thank you sincerely for all the love, care, support, prayers, visits to the hospital, cards and messages on the website etc. I have read*

*many of them but still have a few more to go yet. I have found it amazing that you have all been interested enough to follow my progress for eight months.*

*Unfortunately I still have a way to go, but I will do all I can to aid my recovery, relying on God to see me through. I am so grateful to Him at this point as he has spared my life and given me the strength to help me through this very difficult time. I have had to learn patience, perseverance and realise that my life belongs to God.*

### ***Weak and delirious***

Ken said he was too weak during his 102 days in intensive care to pray, relying totally on the prayers of others and the commitment of the medical staff and their technology.

At times he was delirious. "At one stage I thought someone was trying to kill me and wanted to know about hospital security. Another time I thought I had bought a new Audi and became angry at my son Andrew when he wouldn't agree to go to Brisbane to collect the car.

"I also dreamt that there was a patient in the bed across from me who had died and was being propped up inside a cream Morris Minor. Turns out he was not in hospital, had not died, but had owned a cream Morris Minor, which I didn't know."

When he was unconscious and on life support, Ken vividly remembers hearing son Nick encouraging him they were doing everything medically possible, and not

to be concerned with business affairs as these were being taken care of.

After weeks on life support, Ken would try to talk, but couldn't make any sound. Vanessa became an expert at lip reading and interpreting to others. As he was making progress, a small device was screwed onto his voice box enabling him to be heard. However, it would inhibit Ken's breathing, so could only be used when visitors came, or to communicate with nursing staff.

Nurses have said that Ken would think or dream something as a result of the drugs, and try to relate the incident to them. "They have since said that it was hard to convince me that it was not happening or true." Ken thought the device had just been invented and being trialled on him. He commented that he was amazed at how clever the doctors were, and that they should be congratulated, not knowing it had been around for years.

There were also times of intense frustration and torment, such as when Ken was desperate for water but was instead given a single small shard of ice to suck. "It made me think of the Bible story when a rich ruler is in hell and is in such torment that he asks Abraham to allow Lazarus, who is in heaven, just to put a drop or two of water on his tongue."

Ken said the rehabilitation process was slow, frustrating and exhausting at times.

"The weakness that comes in the body is unreal ... the loss of muscle tone and weight. To try and hold anything, sit

on a bed for more than half a minute was a huge effort.

“It took five months to talk again properly, 11 months before I could keep down food and 14 months to walk unaided.”

While in hospital, two new grandchildren were born, and another arrived after he returned home.

“What a boost and joy to be able to nurse three of them as little babies on returning home. During the times of intense weakness, when I couldn’t move or communicate, some of the most precious moments were the regular visits of the grandchildren who would rub my arm and look into my eyes or sit on my knee. That gentle touch helped me mentally with all that was going on.

“I so value the daughters-in-law who brought them in regularly to see me. Ken recalls that it seemed strange that patients were always coming and going, spending what seems only a short time in hospital. After around five months, when he felt some improvement, Ken remembers asking a doctor, how much longer he would have to remain in hospital. He was shocked by the reply: ‘At least two to three months.’

“It’s hard to comprehend, now, as I look back, how Lyn coped, and the load she carried watching all that happened, and being involved in all the decisions that had to be made, on top of all that she had already been through herself.

“I appreciate her so much in view of the fact that she has

suffered so much, yet she was always there for me, offering her love and care. She would regularly read comments that were left on the website to inspire me that others were standing with us.

“When I first recognised Lyn was there, after more than two months, I had the audacity to ask with the help of the special talking device, ‘Where have you been?’ She answered: ‘I’ve been sitting by your bedside all this time.’”

### *Complications*

In August 2010, Ken returned to hospital to have surgery on three hernias. They made the first incision and discovered his abdomen was full of fluid. His lymphatic channels damaged by the pancreatitis, were leaking like a sieve.

The surgeon said it was like having a soaker hose inside his abdomen. His insides were like saturated tissue paper.

They drained the fluid (he lost 15kg in one day) and sought advice from a professor in Melbourne who said the condition was both rare and extremely dangerous. He said bacteria thrive on the protein-rich fluid (chyle) that breaks down fats, and that infection and death were inevitable if they operated. He added that it would be impossible to repair the shredded tissue through surgery.

They pumped him full of antibiotics and waited. Inexplicably, within a few days, the discharge stopped and Ken returned home. He remains on a strict, low-fat diet, but doctors continue to be amazed at his overall health.



## CHAPTER FIVE

## What really matters

Ken and Lyn have been challenged through their experiences to reconsider what's really important in life. They are much more gracious and thankful as a result of their ordeals, and less task-focused.

They are much more aware of the fragility of life, and that many events are outside our control. Their practical faith has been an anchor and a guide in navigating uncertain waters.

They say their suffering has brought about opportunity to relate to others in similar circumstances.

"We should live to make every day count, as if this were out last, but plan as if we are confident there are many more days to come," Ken said.

"Life is fragile. It is hard to comprehend sometimes that both Lyn and I have been spared from death, and this has challenged us in our thinking.

"We are very aware that we are guaranteed only this moment. Despite our remarkable healing, one day we are still going to die, but it's not all over until it's all over.

“The disagreement before church on the day of Lyn’s collapse has made us realise that it’s important to try and resolve issues and conflicts before the end of each day, as it says in the Bible.”

Both said their experiences had drawn them closer to God and increased their faith. “It’s one thing to know theoretically what God says in the Bible and believe in it, but it’s another thing to have real life experiences that test your faith,” Ken said.

In reflecting on her long, painful and often frustrating trial, Lyn said she had learned many important lessons. “Firstly, that God is faithful to His promises in the Bible; secondly to appreciate each new day as a gift from God; thirdly that I am not in control of my life - God is. I would say that prior to 2004 I relied pretty heavily on my healthy diet and fitness, to hopefully give me many more years of an illness-free existence and quality of life. While that probably helped me come through my surgery so well, it was God who held my breath, and He still does.

“A couple of quotes from a book I have recently read by Elizabeth George have been helpful. God knows that trials will be for your ultimate good, that they will contribute to His purposes and that they will bring Him great glory. God is faithful and His timing is perfect. He knows what He is doing and how He will perfect us, strengthen us, and make us whole. Today I thank Him for His love and faithfulness to me over 54 years and I know He is with me as I face the future with all of its joys and challenges.”



Ken notes that while the Bible says we are to be joyful in the midst of our circumstances, it doesn't say we have to be thankful for them. "Not everything that happens to us is good. We shouldn't deny that, but we can have a peace in the midst of trials of any kind when we recognise someone bigger than us is ultimately in control and has what's best in mind at all times.

"The Bible also says we will have trouble, but Jesus said not to worry because He has overcome the world and its troubles, and that He will give peace to those who believe in Him.

"Trials come upon us whether we are Christians or not, young or old, rich or poor. We live in an imperfect world because of sin. The challenge is how do we respond to trials? Some respond by relying on themselves for strength, sadly others escape with drugs or through suicide, but we have endeavoured to rely on God for our strength through prayer.

"We have experienced God's love, hope and peace in our lives. As a result, our faith and trust in Him have increased. This is something that nothing else in this world can give: money, possessions, other people, power or position. They may satisfy temporarily, but will not go the distance in the darkest days of the soul.

"Being a Christian makes such a difference because you are never alone. We may not always feel His presence when things are going well, but we know in our hearts that He is there, and hears us when we call on Him, particularly

in times of need. He is dependable, not to necessarily do what we would like, but that He can be relied upon to help us through a difficult time, when we trust in Him. While people have concern and care, humanly-speaking, you can suffer very much alone!

“Some people say, ‘Where is God?’ when this or that has happened. He is in the same place as He has always been, and wants us to recognise and acknowledge Him.

“We felt as if we were carried, like a parent carrying a child, and experienced God’s love like never before. We learned patience, and that life itself is not within our control.

“We don’t choose when we die or how (who would want to?) but if we wake up, we can choose how to live.

“We can live only for ourselves, or we can live for God and serve and give to others. We need to be thankful for what we do have, instead of being concerned about what we don’t. Often we don’t give credit to God for what He has done and is doing, remembering He doesn’t owe us anything.

“We need to put our faith and trust in God no matter what the outcome, and accept that His ways and what He allows are far beyond our understanding.

“And faith is hearing and believing, not proving and seeing. It’s not the amount of faith you have. The important thing is who and what your faith is in.

“An illustration of faith is flying. We know there is a plane

available to take us to our destination, and a pilot with the skill and ability to get us there but it takes a step of faith to get on the plane and actually entrust our life to a pilot few of us look for when we climb the steps and take our seats. We go along for the ride; sometimes it's smooth and sunny, other times there is unexpected turbulence or the threat from volcanic ash or thunderstorms, but in all circumstances the flight is out of our control and we have to entrust our lives to someone else.

### *Manual for living*

"We believe the Bible is the manual for living and is where our beliefs come from.

"When we accept the authority of the Bible as God's word to us written about life, then we are not easily persuaded by just people's views and opinions, which sometimes don't have any substance or foundation, and can lead us astray.

"When you purchase a new car, there is a manual in the glove box from the maker of the vehicle. Like the Bible in regards to life, the manual will give you every bit of information and detail in regards to the car, that we need to know. When there is a problem with the car, often we try to fix it ourselves with little knowledge, but how much easier it is to take the time to find out information recorded in the manual, rather than use it as a last resort?"

In 1990, the family did a trip to the Middle East. They found it interesting that geographically and culturally everything aligned with the biblical accounts.

They followed the journey of Paul, a follower of Jesus, when they caught a bus in Macedonia from Philippi to Thessalonica.

“As we travelled along, the signs would come up for each town, and the distance to the next town, exactly as the Bible had recorded. We didn’t need this to believe the Bible to be true; however to experience this in real life was confirmation of what we already believed. In the end it ultimately has to be faith to believe the Bible is absolute truth!

“There are different interpretations around, hence the different religions, but one thing is clear and that is what Jesus said, often the words in the Bible in red.

“We need to understand that Christians are not exempt from trials that afflict humanity. If we live thinking we are exempt, then when something happens, we don’t cope very well, and can think that God has let us down.

“What makes the difference being a Christian is in the way we endeavour to accept whatever comes, although it is hard sometimes, and trust God to be with us in those circumstances and to carry us through. He has promised never to leave us or forsake us.

“Being a Christian means trusting God with the result, whether it’s to our liking or not, like the story of Shadrach, Meshach and Abednego who would not bow down to a statue of the king and were thrown into a furnace. They defiantly told the king that their God could save them (which he did when they were neither burned nor their

clothes singed). They said ‘We know our God can deliver us from this furnace, but even if He doesn’t, we will still trust Him and will not worship a false god.’ “

Ken said God allows suffering to achieve His purposes that are not always evident to us.

“Jesus explains this in the story of the blind man who was healed ... it wasn’t his sin or his parents’ sin that he was born blind, but that the works and glory of God would be seen in these circumstances.

### *More good than bad*

Ken says some people think that being acceptable to God is about getting a tick for doing more good things than bad, going to church or living a life of integrity. “While all these things are good in themselves, they will not make us Christians or get us to heaven. Going to church does not make you a Christian, just as going to McDonald’s doesn’t make you a hamburger. It’s important because we have to deal with a God who requires perfection. Most of us have to admit we are not perfect. So that means none of us are exempt, and all are in need of a Saviour. Thankfully, God has provided the opportunity of eternal life for all who believe in His Son Jesus Christ who died on a cross 2000 years ago to pay the penalty for our sins, our failure.

“At a funeral, often you hear a long list of a person’s wonderful achievements which is great ... It’s good to do good deeds, but these won’t get us into heaven. It’s like trying to get into Pakistan with an Indian passport.

“It is not the way that God requires. Jesus said ‘I am the way, the truth and the life, no one comes to the Father but through me.’

“Some people think they aren’t as bad as the next person. God makes it clear in the Bible that all have sinned and fall short of his standard. If we break one of his 10 commandments we are guilty and there is a price to pay. Imagine you have been driving for 10 years and have never been booked by the police. Perhaps you have sped or broken other road rules but never been caught. The time you are caught, you have every right to talk about your great driving record. However, the police officer doesn’t care about your past great driving record, only that you have broken the law on this occasion.

“Imagine you have to go to court to deal with an infringement. Imagine that the magistrate in that area happens to be your father. We would all agree that he has to ignore the fact that the person charged is his son and will deal with his son according to the law, so as to be just and fair.

“He finds you guilty and dishes out a penalty of \$200. If I am the son, I can think at that moment that it is unfair, he is my father, but I have to remember he is also the magistrate and therefore has the right to impose a penalty for my wrongdoing. During the course of the day, I might think to myself, ‘Well, I don’t have \$200.’ I have a dilemma because I can’t pay the debt. I may think of other alternatives to pay the debt and satisfy the law. I might offer my car or some other possession which is worth more, but it’s \$200

cash that is required, not what I deem to be an acceptable substitute. However in the evening the magistrate, who is also my father, can offer me the \$200 cash that will pay the debt should I choose to accept it. The son has a choice, to appreciate the gift and the giver and accept it, or refuse and face the consequences. It is the same with us. We can accept that Jesus paid a debt for us that we couldn't, or face the eternal consequences."

Ken said the Christian faith differed from other faiths because it is based on a personal relationship with God, and not impersonal religious rules and rituals. Christians worship a living God who died on a cross for our sins – past, present and future – and who came alive again, a fact we remember each Easter and which history records. It was Jesus' sacrifice, and not our good deeds, which make us acceptable to God. Without His death and resurrection, our faith in Him would be in vain.

It is interesting to note that it was religious people who put Jesus on the cross.

"This world is not our final destination. We are just passing through; eternity is a long time compared to the relatively few short years we will spend here. It's easy to live for this life only instead of preparing for the one after.

"It's amazing how many people put off thinking about their relationship with God and where they will spend eternity. Because we are made in God's image as eternal beings, we are all going to live beyond this life, either in a place with God, or without Him. We can live without Him

now, but can't afford to die without Him. Don't wait until your death bed!

"It's wonderful to experience God now in this life, and have hope that whether you live or die you know you belong to the family of God because of what Jesus did. Nothing in this world can separate you from His love. We are His now and forever.

"Sometimes it seems that people who budget well, and have enough money to meet weekly commitments often don't see their need of God, as do poor people who realise their material needs are not met, and rich people whose inward needs are not satisfied.

"A man said to me that Lyn and I are favoured to be alive, and while that is right, anyone who is alive is favoured ... once we die physically, our destiny has been determined by our relationship with Jesus. While living, we still have the opportunity to first of all get to know Jesus as Saviour and Lord and if we already do, we have the opportunity to get to know Him better.

"We are made as eternal beings. God said that He has put eternity into the hearts of men. We are body, soul and spirit. In the end we have been created to love and be loved, and to worship someone or something.

"We all live forever, but we need to be aware that after we leave this earth we will spend eternity in heaven or hell. These are not my words, but the Bible's."



Ken and Lyn have taken comfort from various Bible verses, stories, poems, songs and letters during their respective ordeals. Some of their favourites are listed below:

*“For you created my inmost being; you knit me together in my mother’s womb. I praise you because I am fearfully and wonderfully made; your works are wonderful, I know that full well. My frame was not hidden from you when I was made in the secret place. When I was woven together in the depths of the earth, your eyes saw my unformed body. All the days ordained for me were written in your book before one of them came to be.”*  
Psalm 139:13-16

*“There is no man who has power over the spirit to retain the breath of life, neither has he power over the day of death.”*  
Ecclesiastes 8:8

*“And we know that in all things God works for the good of those who love him.”* Romans 8:28.

*“Never will I leave you; never will I forsake you. The Lord is my helper; I will not be afraid.”* Hebrews 13:5-6.

*“I can do all things through Christ who gives me strength.”*  
Philippians 4:13.

*“God is our refuge and strength, a very present help in trouble.”*  
Psalm 36:1

*“Cast all your anxiety on Him because he cares for you.”* 1 Peter 5:7

*“Do not be anxious about anything, but in everything, by prayer*

*and petition, with thanksgiving, present your requests to God. And the peace of God, which transcends all understanding, will guard your hearts and your minds in Christ Jesus.” Philippians 4:6-8.*

*“For I know the plans I have for you,” declares the LORD, “plans to prosper you and not to harm you, plans to give you hope and a future. Then you will call upon me and come and pray to me, and I will listen to you. You will seek me and find me when you seek me with all your heart.” Jeremiah 29:11-14*

*“You will keep him in perfect peace whose mind is stayed on you.” Isaiah 26:3.*

*“May the God of hope fill you with all joy and peace as you trust in Him, so that you may overflow with hope by the power of the Holy Spirit.” Romans 15:13.*

During Lyn’s sickness, Ken came across an interview with Pastor Rick Warren whose wife Kay was battling cancer. An excerpt follows:

*“People ask me, what’s the purpose of life? And I respond: In a nutshell, life is preparation for eternity. We were not made to last forever, and God wants us to be with Him in Heaven. One day my heart is going to stop, and that will be the end of my body – but not the end of me. I may live 60 to 100 years on earth, but I am going to spend trillions of years in eternity. This is the warm-up act – the dress rehearsal. God wants us to do on earth what we will do forever in eternity.*

We were made by God and for God, and until you figure that out, life isn't going to make sense. Life is a series of problems: Either you are in one now, you're just coming out of one, or you're getting ready to go into another one. The reason for this is that God is more interested in your character than your comfort; God is more interested in making your life holy than He is making your life happy. Rather than being a series of hills and valleys, I believe (life) is kind of like being on two rails on a railroad track, and at all times you have something good and something bad in your life. You can focus on your purposes or you can focus on your problems: If you focus on your problems, you're going into self-centredness, which is, my problem, my issues, my pain. But one of the easiest ways to get rid of pain is to get your focus off yourself and onto God and others. When I get up in the morning, I sit on the side of my bed and say, 'God, if I don't get anything else done today, I want to know you more and love you better'. God didn't just put me on earth to fulfil a to-do list. He's more interested in what I am than what I do. That's why we are called to be human beings, not human doings."

Happy moments, PRAISE God.

Difficult moments, SEEK God.

Quiet moments, WORSHIP God.

Painful moments, TRUST God.

Every moment, THANK God.

The following poem is called *The Way to God*

If my days were untroubled  
And my heart always light

Would I seek that fair land  
Where there is no night?  
If I never grow weary  
With the weight of my load  
Would I search for God's Peace  
At the end of the road?  
If I never knew sickness  
And never felt pain  
Would I reach for a hand  
To help and sustain?  
If I walked not with sorrow  
And lived without loss  
Would my soul seek solace  
At the foot of the cross?  
If all I desired was mine  
Day by day  
Would I kneel before God  
And earnestly pray?  
If God sent no winter  
To freeze me with fear  
Would I yearn for the warmth  
Of spring every year?  
I ask myself this  
And the answer is plain –  
If my life were all pleasure  
And I never knew pain  
I'd seek God less often  
And need him much less,  
For God's sought more often  
In times of distress  
And no one knows God  
Or sees Him as plain

As those who have met HIM  
On THE PATHWAY OF PAIN.

The following songs also have great significance for Ken and Lyn.

### *Through it All*

#### *Chorus*

Through it all, through it all,

I've learned to trust in Jesus;

I've learned to trust in God.

Through it all, through it all,

I've learned to depend upon His Word.

#### *Verse 2*

I thank God for the mountains

And I thank Him for the valleys;

I thank Him for the storms He brought me through;

For if I'd never had a problem,

I wouldn't know that He could solve them;

I'd never know what faith in God could do.

### *He Knows my Name*

I have a maker,

He formed my heart.

Before even time began,

My life was in his hand.

*Chorus*

He knows my name,  
He knows my every thought,  
He sees each tear that falls  
And hears me when I call.

I have a Father,  
He calls me his own;  
He'll never leave me,  
No matter where I go.

The following letter from an acquaintance is testimony to the impact of Ken and Lyn's story:

Dear Ken and Lyn

I just wanted to let you know how much your recent challenge has inspired me and, I am sure, many other people.

Lyn, I do not know you, however, I have spoken to Ken before and he has helped my husband and I to overcome some challenges of our own, and so I have followed your journey with much interest, and you have both been in my prayers.

I cannot begin to understand the level of faith and trust that it would have taken for Ken to get through the dark hours he faced with you in a coma, and not by his side in the way he was accustomed, to help him make the

enormous decisions he faced. The strength he would have needed could only have come from God himself.

The fact that you survived, and made such progress is truly a miracle, and proof to me that God had plans for you. Maybe this has happened to you to inspire people like me to become closer to God and to know that the small things we think are giant challenges are not really so huge in the scheme of things.

Yours is truly a love story. Your love for each other must be so strong and pure, and has obviously given you the strength to come as far as you have. So many people only dream of having that, and I know, as I work with lonely people searching for love and happiness.

As I face a challenge at the moment myself, I will use my inspiration from you to help me overcome it. When my world seems too dark and hopeless, I will remember that my love for my husband and my faith in God, will also see me through this hardest of times.

Thank you for sharing your story and for letting others see that there is hope when it really seems it would be easier to just give up. Your story would have touched others in different ways as well I am sure.

I wish you the very best and pray that you will make a full recovery and continue to share the love that you have for each other for many years to come, and that one day soon, you will see why God has chosen you to be proof of his love for us.





## CHAPTER SIX

## Expert opinion

Ken and Lyn made miraculous recoveries according to the biggest sceptics – the medical profession.

They are careful with their words, but have to admit they have not seen such recoveries from catastrophic medical conditions.

“A miracle patient” was how paramedic Richard Chapman described Lyn’s return from being medically dead.

“She’s the luckiest person I’ve looked after,” Mr Chapman told Tasmania’s *Advocate* newspaper in July 2005 at a ceremony to commemorate Lyn’s recovery.

Speaking on a video organised by the Overtons, the paramedics went into greater detail about how Lyn beat the odds and cheated death.

“This was a one in a billion job that you are involved in,” Mr Chapman said.

“Everything went to plan. We were close by, there were nursing staff administering CPR when we arrived, a doctor from the congregation was in attendance.

"I gave Lyn a 0.1% chance of surviving. It's extremely rare. I will never see this again." He said if patients did survive, they usually sustained irreversible and severe brain damage.

Paramedic Gayleen Walker, who was at the scene of Lyn's collapse, said, "I believe things happen for a reason. You are giving people hope through what has happened to you. You have been given another chance."

The doctor who treated Lyn at the church, Dr Craig Bowker, said she was the first patient he had seen to have survived such serious complications from a blood clot causing heart failure and a stroke. "I have done a lot of accident and emergency work over the years, and of all the times I have been involved in the resuscitation of people in a similar situation, nobody has survived and lived to tell the tale," he said.

"I can recall only two patients regaining heart function previously; one died a few hours later, one died three days later without regaining consciousness. These people did not have repeated resuscitation attempts as you did, nor did they have bleeds into their brain or major neurosurgical procedures. Your recovery, Lyn, has therefore been to my mind miraculous, of that I have no doubt."

Surgeon Dr James Roberts-Thomson said Ken's recovery was miraculous. He said Ken only had a 10% chance of survival when he was first diagnosed, and that his chances of recovery halved as a result of the many complications he encountered.

The surgeon gives the following assessment of Ken's condition:

“Ken was calculated to be in the severely ill and critical group, actually the worst! This is not related to anything about his past health, it is simply related to the amount of damage associated with a severe attack of pancreatitis. Often pancreatitis is said to be a disease of five to seven days. Most patients get better by this time but if improvements have not been made, this is another factor predicting a less favourable outcome.

Actually Ken started to deteriorate very seriously between the second and third days after the onset of his illness, mainly because he was developing respiratory failure and also becoming slightly confused. At this stage we predicted a severe attack of pancreatitis and opted to refer him to the Launceston General Hospital intensive care unit (ICU). Soon after he arrived in Launceston his lungs collapsed, and he thought he was taking his last breath; it was then decided by doctors there that Ken needed respiratory support and he was put onto a ventilation machine (or ventilator). This was because he was not managing to maintain satisfactory oxygen levels in the blood. This is what is often referred to as a life support and involves sedation (keeping Ken asleep) and relaxed (partly paralysed). Ken remained in the ICU on a ventilator for several weeks seriously ill, in fact literally fighting for his life at times. He had continued respiratory and renal failure.

A CT scan (computed tomography scan) was performed regularly with the addition of an intravenous contrast

agent given just prior to the scan. From this it was possible to estimate from the scan that about 70% of his pancreas had died. Doctors still debate on what should be done in this situation. On one hand it is good for the body to be rid of any dead tissue, which activates this inflammatory response syndrome and multiple organ failure as we have spoken of above, but on the other hand surgery is difficult. The pancreas gland is deep within the abdomen, and as mentioned, surrounded by large vital blood vessels and other structures such as the stomach, colon, kidneys and spleen. Massive and uncontrollable bleeding can easily occur with surgery. Eventually though a situation was reached where it seemed the balance fell in favour of doing the surgery. The effect of having this dead tissue was becoming a major threat to the chance of Ken's survival. By this stage much time, money, effort and emotion had been put into keeping Ken alive. It was estimated that Ken had approximately 28 CT scans of his abdomen during his entire hospital stay. Each CT scan delivers about 400 times the amount of radiation to the body as one chest x-ray, so Ken's body has received the equivalent of about 11,200 chest x-rays! When the pancreas gland or part of it dies, the dead tissue usually is sterile (contains no bacteria or other infectious agents). In time, however, virtually all dead tissue in the body becomes colonised by bacteria, and the possibility of infection arises. Ken had been receiving antibiotics, but whether the dead pancreatic tissue was infected or not we will probably never know. Possibly it was and this was another factor leaning towards a surgical option.

The method by which the pancreas is approached,

and the dead tissue removed, again is still debated by expert doctors and surgeons! Sometimes a simple drain directed by CT scan is performed and helps, while elaborate surgical procedures coming in from the back of a patient have also been described; however, surgery is usually done through the front of the abdomen. Because the pancreas is directly behind the back wall of the stomach, surgeons often approach it by going through the front wall and then the back wall of the stomach! As much of the dead tissue as possible is aspirated, often literally pinched off, some excised and then washed out. As mentioned, doctors and surgeons like to wait about six weeks from the onset of the illness 'til this procedure is done for several reasons. Firstly it allows the pancreas to 'wall itself off' and not leak its juices (enzymes) when opened. Secondly it allows the body to separate off dead tissue from viable tissue which will recover. Lastly, the dead tissue can degenerate to become fluid-like and more easily removed. This operation is called a pancreatic necrosectomy (removal of dead necrotic pancreatic tissue).

This procedure was done on Ken and appeared to help; the features of his multiple organ failure (mainly lung renal, blood and gut failure) began to improve. However more drama was in store! A couple of weeks later Ken had a major bleed from his stomach. This was determined by Ken passing altered blood from the bowel and a falling haemoglobin level. A gastroscopy was ordered (a telescope was passed into the stomach), and on searching around the back wall, where the opening to remove the pancreatic tissue had been made, a large bleed was encountered

which could not be stopped. The gastroscope was removed and blood transfusions were administered. Attempts were made to control this bleeding by passing fine catheters into the artery feeding at this bleeding point, but this was technically not possible as the artery was very twisted and could not be reached easily. Amazingly it stopped anyway.

There was not a major recurrence of bleeding so Ken's vital organs including his heart, lungs, kidneys, liver, stomach, intestine, bone marrow and brain could start to recover again. Ken, however, was very weak after all this illness, had lost about 30kg in weight and struggled to find appetite for eleven months. During a prolonged major illness, such as Ken had, major changes occur in the intestine. We all have three metres of intestine under normal circumstances from which we absorb food. Food includes water, protein, salt, energy in the form of carbohydrates and fat, and vitamins. However, the mucosal lining of the intestine atrophies (becomes smaller) and loses much of its capacity to absorb food. As well as this, during prolonged illnesses, the small bowel (which is usually sterile in normal circumstances) becomes colonised with bacteria. Some of the bacteria and bacterial break-down products (called endotoxins) can leak through the atrophied mucosa and complicate the situation with multiple organ failure. This all takes time to recover.

One of the late problems Ken faced was fluid accumulating in his abdomen. Under normal circumstances all of the fluid produced by the pancreas passes by way of the pancreatic ducts (of which there are usually two: the major and minor pancreatic ducts) into the duodenum.

As much of the middle section of the gland was damaged by the necrotic (dying) process, it seemed that either the pancreatic duct or lymphatic channels were also damaged. This means fluid produced eventually found its way to accumulate freely within the abdominal cavity. Ken, in fact, a year or so after his illness had an impressive 15 litres of fluid drained from the abdominal cavity, when he went in for hernia surgery. We are not sure where this came from – I did suspect it might have been pancreatic fluid which escaped into the abdominal cavity. Other doctors tested it as chyle lymphatic fluid collection.

Despite all these problems Ken appears to be improving. All in all he had approximately eight months in hospital; about four of these months were in intensive care.”

**Dr James Roberts-Thomson FRACS**  
General Surgeon, North-West Regional Hospital

Intensive Care specialist Dr Vikram Patil recounts his experience with Ken Overton at Launceston General Hospital:

“I met Kenneth Overton in early 2009 when he was admitted to the Intensive Care Unit at the Launceston General Hospital with the diagnosis of acute pancreatitis, a particularly nasty illness, of which Ken unfortunately had the most severe form.

I was the specialist on duty when Ken arrived in the unit.

Despite being severely unwell and struggling to breathe, he remained calm and composed as best he could. Ken had to go on life support that night after exhausting himself trying to breathe. Ken himself thought this may well be the end of his life and said ... "It is all over" ... he thought he had taken his last breath, just before going into a drug-induced coma. This was the beginning of over three months on life support in the ICU struggling with severe necrotic pancreatitis.

Over the next few weeks Ken and his family faced a series of setbacks. Because the pancreatitis affected his vital organs, Ken required treatment which ensured he remained on life support in an induced coma. Ken subsequently faced multiple complications which included bleeding, infection (requiring two operations), as well as kidney failure (requiring dialysis). Indeed there were times when Ken's treating team, which included Intensive Care doctors, nurses and surgeon were concerned Ken may not survive.

However, despite the series of bad news, Ken's family never gave up hope, keeping vigil at his bedside and supporting him with total devotion. Later I learned that Ken's wife, Lyn, had gone through a similar life-threatening illness in the recent past. It seemed the entire family had the belief that, through their strong faith and prayers, another miracle would occur.

During his entire stay in hospital battling his life-threatening illness, Ken showed remarkable courage, patience, dignity and inner strength, which is deserving



of the highest praise. I was told that Ken was a gentleman in health and certainly found him to be a gentleman during illness.

Three months after he had been in hospital for nearly eight months and discharged, Ken revisited the Intensive Care Unit. To see Ken looking so well was one of the finest moments of my specialist career at the LGH. In my medical career of 20 years I have seen few miracles; however, I have no doubt that this was one of them. It was my pleasure to have had the opportunity to look after Ken and get to know his family.

I wish Ken and his family all the best.”

**Dr Vikram Patil MBBS, FCICM**

Intensive Care Specialist, Launceston General Hospital.

Another surgeon who regards Ken’s recovery as miraculous, is Professor Ian Hardie, Associate Professor of Surgery at the University of Queensland.

While not directly involved in Ken’s treatment, Professor Hardie has followed the case closely. He comments on Ken’s journey.

“I had heard about, and followed, Ken’s long journey though his severe, life-threatening illness and eventually to an amazing recovery, through a mutual friend of his sister. Then, quite unexpectedly, I met him in November

2010 when he and Lyn called with his sister on our friends while we were visiting them. I enjoyed a lengthy chat with Ken, about his illness, his current health and his reactions to these events. Subsequently, I have had several extended discussions by phone with him about pancreatitis and its effects. Ken is a most delightful, sincere Christian gentleman, and I am privileged to have come to know him.

Having cared for other patients with pancreatitis of various degrees of severity as a general surgeon, I am aware of the major risk of death from severe necrotising pancreatitis, such as Ken had. In addition, my experience in caring for patients with potentially fatal or terminal illnesses, including my work in kidney transplantation, has made me well aware that there are times when a disease defeats the best medical and surgical care we can provide. In such cases, it is most important to recognise when this has occurred so that our focus can move to palliative support, relieving pain and distress, and assisting both patient and immediate family through the final phase leading to death. I also know from experience the value of prayer at this time, both for myself (and my colleagues) in providing appropriate, compassionate care, and for the patient and family during their journey.

But I also know that sometimes, despite all the medical evidence that this illness will be fatal, the course of the illness may change and a miraculous recovery occurs against all the odds. This, I believe, is what occurred in Ken's case. Despite the high quality of medical skill and care, it appeared on several occasions that his

pancreatitis was too severe for him to recover. But he did recover – miraculously.

I am in awe of his recovery and the way in which he has dealt with his near-death experience and all that has come his way. The combination of his strong faith, the perseverance and diligent care of his medical team, and the prayerful support of his family and friends has been a major factor in his recovery from a severe illness that showed so many indications it would kill him.”

**Associate Professor Ian R Hardie MB, BS; FRACS**

Associate Professor of Surgery

The University of Queensland



## AFTERWORD

Ken and Lyn continue to enjoy life and are thankful for the God who watches over them, their growing family and friends. They have four married children and 11 grandchildren. Eldest son Nicholas is married to Natalie. They have three daughters; Chloe, Jasmine and Sophie, and one son, Judah. They currently live in Vancouver, Canada, where Nick is attending Regent Bible College. Andrew is married to Stephanie. They have four girls; Chelsea, Emily, Phoebe and Annie. They live in Devonport where Andrew is involved in property development. Justin is married to Naomi. They have a boy and a two girls, Liam, Kaitlyn and Ella. They live in Latrobe. Justin is also involved in the building industry. Ken and Lyn's daughter Vanessa married Warwick McConnell in February 2011.

Vanessa's wedding was particularly special, as there were times when it looked highly improbable that either of her parents would be alive to see her married. In fact, Vanessa had remarked to a family friend when Lyn was on life support, "Mum will probably never see me married." The friend reminded Ken of this comment during the wedding reception.

"It was a great privilege to have been able to walk Vanessa down the aisle, and for Lyn to witness this special occasion," Ken said.

"Vanessa had loved and cared for both of us during our rehabilitation, while still holding down a fulltime job.

“She did it out of love and not duty, working alongside family and friends, always smiling regardless of what had happened that day.

“She was so accepting of all that had happened and relied completely on God. She had an amazing ability to see what had to be done without being asked.”

Ken and Lyn have always placed a high priority on family life and bringing up their children. “The way the children and their wives went beyond the call of duty, sacrificing their life’s own plans to care for each of us out of genuine love and concern, their prayers, informing others of what was happening, bringing grandchildren for visits, no doubt helped hugely in our recovery.

“As a Christian you are not alone, but to have that added benefit of family and friends with you, and who do whatever is necessary, is something we will never forget.”

Ken is not one to sit around now, having spent eight months on his back in hospital. He has renewed enthusiasm for going back into the office, not to make more money, but to take an interest in what is happening in business and community affairs. He places a high priority on people and relationships, resulting in a stream of impromptu meetings over coffee or lunch.

Lyn still takes responsibility for running the home as far as she is physically able, cooking, washing and spending time with the children and grandchildren. She has a renewed interest in providing hospitality and care to others,

particularly to widows for whom she feels an affinity having felt widowed herself for a season. She remains an avid reader, filling any spare time in the company of books. She is also very disciplined in her diet and exercise regimes, and maintains a balanced lifestyle.

People are intrigued and inspired by their experiences, giving them regular opportunities to share their story or, more importantly, to offer a word of encouragement and hope to others in similar circumstances.

Ken and Lyn have realised that some people find it difficult to visit or make a phone call during a crisis because they are not sure of what to say. Now having been through this experience, and on the receiving end, the very presence of someone who cares is invaluable.

Lyn says, "At the same time, when friends visit, and choose to encourage you by reading a verse from the Bible and praying and showing empathy for your situation, that often comes at the very time you need to hear it, which is appreciated.

"We have felt encouraged by the medical staff to return to the hospital at times because we have noted their genuine interest and excitement at our recovery, particularly the ICU staff at Launceston as Ken had been there for a long time, and, as they have commented, 'You were part of the furniture'.

"We will be forever grateful to the medical profession for pursuing our lives with such determination, and

never giving up – from the paramedics who performed CPR long after it was medically expected – to those who persisted with me while I was in intensive care for almost four months.”

Ken and Lyn have had many opportunities to address groups about their journey, in person, on a DVD they produced, on television and in newspaper interviews.

Suggestions that they write a book, initially about Lyn’s journey, continued to grow following Ken’s ordeal.

This is the result.



## FINAL ENCOURAGEMENT

You may be experiencing something in life right now that seems difficult to bear.

Lyn and I would like to encourage you not to give up, seek professional help where necessary, try and be positive, and do all you can with the strength that you have.

Recognise your limitations, face reality, however, look for steps of improvement daily, be thankful, be patient, realising it can take time for a situation to change, and especially the body when healing.

For stroke victims the brain can make new pathways and the body functions can change in time with lots of perseverance and hard work, however the measure of recovery is different for everyone, but it is worth the effort.

We will all go through bad days as well as good ones, and that is where we learn through adversity, things that we don't learn through prosperity.

While God never promises to remove us from all our struggles, if we ask Him, He can help us through, and change the way we look at them.

Consider your daily life and endeavour to keep stress to a minimum as it often affects our health and wellbeing. Live a balanced lifestyle, taking time to spend with family and friends.

You may have read this book and are now wondering how you can also be part of God's family and enjoy the same relationship that has been portrayed in our story.

It is available to anyone who believes, regardless of who they are and what they have done. We can come just as we are, and admit to God our failings and He will accept us, forgive us and change us. Thankfully we are part of God's family, not by any merits of our own, or any good things we may have done, which we should endeavour to do, but it is because of accepting the greatest gift that has ever been given: the Saviour of the world, Jesus Christ.

For us to join this family, we had to get to a point where we recognised we had fallen short of God's perfect standard which none of us can achieve, and that our failing had separated us from God, because He is a Holy God.

His Son Jesus Christ, born of a virgin, the only one who has ever lived a perfect life on earth, is the only acceptable sacrifice to God for our sins and the sins of the world. He was crucified for our wrongdoings, past, present and future, and took the punishment we deserved, and then showed His power and authority by rising from the dead.

We acknowledged our wrongdoing, asked God's forgiveness, and desired to live a life for Him and walk His way, on his terms, not ours! We asked Jesus to be our Saviour and to be Master of our lives. Some people find it difficult to consider their relationship with God because they have met some Christians who do not live what they profess. This is sad, for the only appropriate response to what God

has done for us, what we call grace, or undeserved favor, is to live a life that pleases Him. In saying that, we also need to recognise that only Jesus lived a sinless life, and that He is our ultimate example, and not people.

Over the years we have grown in our relationship with Jesus, trusting him more and more, and using the Bible as our manual for living. We came to believe this book has authority, and is God giving us and the world, instructions about life.

Our heart's desire is that you will have the opportunity to experience this same hope, joy, peace and certainty, now and forever.

Below are some of the things written in Bible that have brought us to recognise God's love and purpose, and His way of living to be satisfied and live life to the full.

*"The Son of God Jesus Christ has come and given us understanding, so that we may know Him who is true. He is the true God and eternal life." 1 John 5:20.*

*Jesus said: "I am the way and the truth and the life, no-one can come to the Father unless through me." John 14:6.*

*Jesus said: "I will never turn anyone away who comes to me." John 6:37*

*"It is by grace that we are saved by faith, it's not a result of our own efforts, but God's free gift, so that no one can boast." Ephesians 3:6-8.*

We each have to decide what we believe, but we have opportunity only while we are on this earth. We can decide to accept this gift, just ignore it, or reject it, which sadly at the end of life results in separation from God forever. When we are in the family of God, we are His children and God is our Heavenly Father, We can feel secure and be sure of His promises if we belong. It is in His character to show love, to care and be with us in the trials of life. He is interested in every detail of what happens, and particularly when we are in trouble, and He will be with us, and won't let anything happen to us, unless it is for our good ... there is a reason why, which we may not always know or understand, as we have never been promised an explanation.

Finally we would like share part of our experience of someone who wrote a well-known poem, *Footprints in the Sand*.

"LORD you said that once I decided to follow you, you'd walk with me all the way. But I have noticed that during the most troublesome times in my life there is only one set of footprints. I don't understand why when I needed you most you would leave me. The LORD replied, 'My precious, precious child, I love you and I would never leave you! During your times of trial and suffering when you see only one set of footprints, it was then that I carried you.' "

Where there is life there is hope, and our prayer is that you will receive this wonderful gift of God's love and forgiveness today.

**Ken and Lyn**

Funds from the sale of this book will be given to Mercy Ships Australia and Compassion Australia. You can also make a direct donation online and receive a tax receipt.

Mercy Ships Australia has well-equipped hospital ships staffed by volunteer medical and development specialists and support staff to provide life-saving surgery and treatment to the poor of West Africa. Mercy Ships provides a range of treatments from dental care to removing tumours, correcting cleft lips and palates, treating leprosy and removing cataracts. Mercy Ships also provides community development programs including small business training, water and sanitation projects, and agricultural initiatives.

**[www.mercyships.org.au](http://www.mercyships.org.au)**

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Compassion Australia is a child development and child advocacy organisation. Compassion, with its international partners, assists more than one million children living in extreme poverty in Africa, Asia, Central and South America, through individual child sponsorship, early childhood programs for mothers and infants, leadership development training and community development programs such as providing clean water and sanitation, and disaster relief. In addition to education, basic health care, Compassion provides emergency and corrective surgery and treatment to sponsored children and their families.

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