I recently joined Facebook, the online social networking website with more than 150 million users worldwide (www.facebook.com). I set up a personal page and have reconnected with many old friends — from childhood, from college, from previous jobs.

For many people, in particular those in generations X and Y, Facebook is more than a website or a social networking tool. It is a phenomenon. It is a way of life. Many people check the website constantly, obsess over the messages they receive (as if e-mail, BlackBerrys and iPhones weren’t enough), and spend more time than any of us probably should perusing its pages.

For those not inclined to this kind of communication, it might be easy to say “not my thing” and move on. And for many people, that’s fine. But it would be a mistake to ignore the social networking phenomenon, because it is playing a growing role in the political process. The Internet and networking sites provide a venue for people to express themselves in a way that was not previously possible. And, like sharing personal videos on YouTube, blogs and Facebook offer a way to make available to millions what used to stay locked on our laptops.

For purposes of advocacy and awareness, the Internet and social networking websites connect people with causes and one another in a powerful way. President Barack Obama effectively tapped these resources in his bid to build grassroots support for his campaign and, now his administration is using them to build support for policies. From Facebook conversations to text messages sent by the campaign to every cell-toting supporter, Obama figured out how to reach the fast-growing generation of online organizers and advocates.

In a similar way, we can tap into the power and the numbers in Catholic health care to be sure that our vision, our values and our expectations are reflected in the health reform dialogue that is upon us.

Type “health care reform” into the Facebook search engine and more than 500 results appear. Some are groups devoted to the cause, like “Reform Health Care with your VOTE in ‘08,” and “Individuals for Free Market Health Care Reform in the USA.” And hundreds more are individuals and small groups conversing about health care reform. These conversations are taking place not in living rooms and high school hallways, but on the Internet, which has a convening capability unmatched in human history.

“The Internet is the greatest organizing tool ever invented,” says Andrew Rasiej, founder of Personal Democracy Forum, an organization working to harness and expand the connection between the political process and networking technologies. Rasiej is also founder of TechPresident, a group blog (www.techpresident.com) that covers how the 2008 presidential candidates used the web, and how content generated by voters affected the campaign — and now affects the administration.

Rasiej said engaging the American public in a dialogue — whether it is about health care, energy consumption or any topic in between — “is easier now because the networking tools allow not only for distribution of information at very little cost but also allow for feedback loops so that people can be validated in the process of offering their opinions or participation.”

With an application the website calls “Facebook Causes,” for instance, users can create or join online advocacy campaigns to build communities of support, increase awareness, raise money, summon celebrities to their cause and collaboratively develop messages and strategies.

With nearly 1 million employees spanning all 50 states and the District of Columbia, the Catholic health ministry can and should similarly unite on blogs, Facebook and elsewhere in the electronic realm to broaden and target its reach.

It would be a mistake not to leverage these innovative tools to magnify our message, to reach a greater number of people in a way that millions obviously find compelling.

Rasiej provides a small-scale example of how networking technology can work in health care: A nurse in the Bronx is concerned about the...
From Facebook conversations to text messages sent by the campaign to every cell-toting supporter, Obama figured out how to reach the fast-growing generation of online organizers and advocates. In a similar way, we can tap into the power and the numbers in Catholic health care to be sure that our vision, our values and our expectations are reflected in the health reform dialogue that is upon us.

quality of asthma care available in her hospital. If she can connect with another nurse in Queens concerned about the same thing, the two can reach out online to find colleagues facing similar challenges. In short time, 30 nurses from the five boroughs of New York get organized and attend a city council meeting on hospital funding. “Now there’s a good chance they are not taken lightly,” Rasiej says of the nurses’ new ability to influence public policy.

Expanding this example to the Catholic health ministry’s influence on federal health policy, it is not difficult to see how a few voices can become a hundred, and then a thousand, and then so many more, all saying that we want health care reform and we want it to be compatible with the values and principles established in CHA’s Our Vision for U.S. Health Care.

“If the American public is invited to participate in crafting legislation to revolutionize the health care system, they are much more likely to adopt the new system once it’s put into place, as opposed to a system that was imposed on them,” Rasiej says, adding that Catholic health care providers can play a major role in demanding the reform process is transparent and driven by public dialogue.

Many organizations within Catholic health care have organized community forums, held panel discussions and facilitated dialogue among staff, patients and local residents. Those conversations can and must continue. Taking a next step to share the results of those discussions on social networking sites, and by extension with the Obama administration and the general public, gives greater voice to every individual who attended that meeting at the local church or hospital.

Organizations sponsoring community forums and offering web-based opportunities for exchanging dialogue and gathering ministry support for action in Washington include Resurrection Health Care in Chicago; St. Joseph Health System in Orange, Calif.; Trinity Health in Novi, Mich.; Ascension Health in St. Louis; and Catholic Healthcare West in San Francisco.

With social networking capabilities, no longer are money and high-level connections the most effective way to affect the political process. It may not come naturally for all of us to set up a Facebook page or visit a blog every day. But if we step out of our comfort zones even a little bit, I think we will be elated by the results.

Watch the CHA website, www.chausa.org, in coming weeks for our new health reform blog and, in time, additional social networking tools. In setting up an online ministry forum to advance our health reform hopes and expectations, I believe we can be a visible and powerful force for change.

Together we can be sure not to miss the opportunity offered by social networking and the Internet. Together we can make sure reform happens — and that it happens in the right way.

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