

BETWEEN TWO WAVES

*Catholic Healthcare Providers Must Value
Their Tradition and Embrace the Future*

Organizations, like people, are in the process of what Swiss psychologist Carl G. Jung termed "the individuation process"—the process of becoming conscious, a consciousness that leads to questions of meaning and identity.¹ This process

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Summary By paying attention to our personal individuation process, our inner work, we can better deal with whatever the world presents. Much of the chaos healthcare is experiencing today is because we are currently trying to become more conscious both individually and organizationally.

The future of Catholic healthcare is in recognizing the call, the challenge, the moral imperative to facilitate the creation of healthy communities. We must reflect on and understand health not as a commodity, but rather as both a process and a state of being that is at once personal and collective.

In indigenous cultures there has always been an understanding of the deep connection between personal and community health and between spiritual, mental, and physical health. The current synchronistic shift from professional-directed, acute care to an awareness of how the individual psyche and society in general influence health and well-being is spurring Americans to focus on mind-body and healthy-community concepts.

If we can "stay present" to the mission of healthcare—keep people well, prevent disease, deal with the causes and symptoms of illness, create healthy communities—we will have a future in healthcare delivery. We can do this by being healthy ourselves, recognizing our global responsibility for health, and providing direct services.

is affected by inner and outer world events, present day realities and historic mythologies, what we hold in our consciousness and our unconscious. By paying attention to our personal individuation process, our inner work, we can better deal with whatever the world presents. We must listen to the spirit within and around us to hear the future—like the "sound between two waves."²

Jung believed that the goal of being human is to move naturally toward wholeness, to become who we really are. This wholeness is only possible when one's consciousness is in dialogue with one's unconscious. This is not as simple as it sounds because the language of the unconscious does not translate easily. I believe much of the chaos healthcare is experiencing today is because we are currently trying to become more conscious both individually and organizationally. The more inner work we do as part of our personal growth and spiritual development and the more organizational development we do, the more individually and corporately conscious we will become.

The process of individuation demands that we come into balance, a many-layered balance. Individuation can be viewed as the balance between the internal world (subjective) and the external world (objective), the balance between our conscious and unconscious, and the balance between the feminine and masculine sides of our psyche—in essence, the holding of opposites. We must learn to see from a new perspective. Individuation is ultimately a mysterious process of becoming conscious, a consciousness that leads to questions of meaning and identity. As Einstein is often quoted as saying, "No problem can be solved from the same consciousness that created it."

Society—and we in healthcare are a microcosm of that society—is asking itself:

- What is our identity in a pluralistic healthcare delivery system (integrated or not)?
- How can we reflect on our personal and organizational experiences with new images and metaphors so we can truly be "systems thinkers and doers"?

HOPE

When I think of the future—the next 5, 50, 500 years—I have great hope for our world, our human community, and our healthcare system. Why hope when newspapers print headlines such as "Bosnian Conflict Continues," "Crime Bill Scaled Back," "Rwandans Starve to Death," "More Children Are Having Children," and "Healthcare Reform Doubtful"? When all the world's ills—disease, worry, troubles, fear—flew out of the box Pandora opened, only hope remained. It is this hope, this belief, that as a world, a nation, a self that has consumed healthcare, we can now change, grow, and transform.

Our hope is in seeing things differently. Margaret J. Wheatley describes such a hope in *Leadership and the New Science: Learning about Organization from an Orderly Universe*:

I no longer believe that organizations can be changed by imposing a model developed elsewhere. So little transfers to or even inspires those trying to work at change in their own organizations. Second, and much more important, the new physics cogently explains that there is no objective reality out there waiting to reveal its secrets. There are no recipes or formulae, no checklists or advice that describes "reality." There is only what we create through our engagement with others and with events. Nothing, really transfers; everything is always new and different and unique to us.³

I believe we discover the reality in that sacred space and experience which we name spirituality. I believe the future of Catholic healthcare is in recognizing the call, the challenge, the moral imperative to facilitate the creation of healthy communities. We must reflect on and understand health not as a commodity, but rather as both a process and a state of being that is at once personal and collective.

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between spiritual, mental, and physical health. The current synchronistic shift from professional-directed, acute care to an awareness of how the individual psyche and society in general influence health and well-being is spurring Americans to focus on mind-body and healthy-community concepts. In his provocative article, "A Sociological Critique of the Well-Being Movement," Aaron Antonovsky points to a study which found that women's health improved when society treated them more decently. "The study of the macro social is essential to understanding movement toward health," he states.⁴

It is my hope that, as we continue to provide acute care and outpatient services and shift to wellness and prevention programs (motivated by managed care incentives, as well as the desire to "do the right thing"), we also direct attention and resources to the societal causes of disease.

At a time when healthcare organizations are expending a great deal of financial and emotional resources to form integrated delivery networks, they are also being challenged to affirm the miracles of high-technology modalities as they trust and recognize the wisdom of mind-body research and noninvasive therapies. These therapies include Dean Ornish's work with cardiovascular disease,⁵ Herbert Benson and Miriam Z. Klipper's research on *The Relaxation Response*,⁶ Deepak Chopra's *Quantum Healing* theories,⁷ Larry Dossey's *Healing Words*,⁸ therapeutic touch, visualization techniques, and our own body's healing (not necessarily curing) processes.

Healthcare providers need, as Wheatley states, "to sit in the unfamiliar seat of not knowing and open ourselves to radically new ideas."⁹ We need to accept the challenge of the spirit as revealed in the Vatican document, *The Church in the Modern World*: "The faithful ought to work in close conjunction with their contemporaries and try to get to know their ways of thinking and feeling as they find them expressed in current culture."¹⁰

TRANSITION

We are experiencing a transition, a time of liminality. As Vaclav Havel, president of the Czech Republic, commented when he recently received the Philadelphia Liberty medal:

There are good reasons for suggesting that the modern age has ended. Many things indicate that we are going through a tran-

sitional period, when it seems that something is on the way out and something else is painfully being born. It is as if something were crumbling, decaying and exhausting itself, while something else, still indistinct, arises from the rubble.

The distinguishing features of transitional periods are a mixing and blending of cultures and a plurality of parallelism of intellectual and spiritual worlds. There are periods when all consistent value systems collapse, when cultures distant in time and space are discovered or rediscovered. New meaning is gradually born from the encounter, or the intersection of many different elements.

Today, this state of mind, or of the human world, is called postmodernism. For me, a symbol of that state is a Bedouin mounted on a camel, clad in traditional robes under which he is wearing jeans, with a transistor radio in his hands and an ad for Coca-Cola on the camel's back. I am not ridiculing this, nor am I shedding an intellectual tear over the commercial expansion of the west that destroys alien cultures. I see it as a typical expression of this multicultural era, a signal that an amalgamation of cultures is taking place. I see it as proof that something is being born, that we are in a phase when one age is succeeding another, when everything is possible.

STAYING PRESENT

So what is possible for healthcare? What can we do to create an integrated healthcare delivery system that will enable us to truly create a healthy community? A healthy world? I believe we must, like the Bedouin, hold the values of our traditional identity, as well as take advantage of the wisdom and the technology of the twenty-first century.

The virtue needed for the twenty-first century is courage. As cross-cultural anthropologist Angeles Arrien states in her book *The Four Fold Way*, we need to:


- Show up, or choose to be present
- Pay attention to what has heart and meaning
- Tell the truth without blame or judgment
- Be open to outcome, not attached to it¹¹

If we can stay in this process while we "manage care," form affiliations and physician alliances, restructure, redesign, reengineer management information systems, integrate our delivery

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systems, and reform healthcare, I believe we might actually create a healthier community and—incidentally—have a positive bottom line.

If we can "stay present" to the mission of all healthcare—proactively keep people well, prevent disease, deal with the causes and the symptoms of illness, create healthy communities and thus healthy people—we will have a future in health-care delivery. We can do this by being healthy ourselves, recognizing our global responsibility for health, and providing direct services. If we can stay present in the tension of transition between what was and what will be and have the courage to trust our intuition and do our inner work, we will create our future. And so, we end where we started, but having journeyed the labyrinth, we know this place for the first time. Perhaps we will truly "manage care," facilitate healing and wholeness, and create healthier communities. □

 Persons interested in further discussing the application of Jungian psychology to organizations should call Bernita McTernan, 916-851-2033.

NOTES

1. Carl G. Jung, "Two Essays on Analytical Psychology," in *Collected Works*, Princeton University Press, Princeton, NJ, 1953, p. 110.
2. T. S. Eliot, "Four Quartets," in *Complete Poems and Plays 1909-1950*, Harcourt Brace, New York City, 1952, p. 144.
3. Margaret J. Wheatley, *Leadership and the New Science: Learning about Organization from an Orderly Universe*, Berrett-Koehler, San Francisco, 1992.
4. Aaron Antonovsky, "A Sociological Critique of the Well-Being Movement," *Journal of Mind Body Health Effect of Attitudes on Health*, vol. 8, no. 4, 1986, pp. 33-47.
5. Dean Ornish, *Dr. Dean Ornish's Program for Reversing Heart Disease without Drugs or Surgery*, Ballantine, New York City, 1992.
6. Herbert Benson and Miriam Z. Klipper, *The Relaxation Response*, Avon Books, New York City, 1976.
7. Deepak Chopra, *Quantum Healing: Exploring the Frontiers of Body, Mind, Medicine*, Bantam, New York City, 1990.
8. Larry Dossey, *Healing Words: Power of Prayer on the Practice of Medicine*, Harper, San Francisco, 1993.
9. Wheatley.
10. Pope John XXIII, "Gaudium et Spes," *Pastoral Constitution on the Church in the Modern World*, December 7, 1965.
11. Angeles Arrien, *The Four Fold Way*, Harper, San Francisco, 1993.