

## Building a Pipeline

# Connect Young Talent With the Ministry

BY ELLIOTT LOUIS BEDFORD, M.A., and ELIZABETH K. JOHNSON, M.H.A.

*And he said to them “The harvest is plentiful but the laborers are few; therefore ask the Lord of the harvest to send out laborers into His harvest.” (Luke 10:2)*

**F**or the contemporary Catholic health care ministry, the Lord’s words have a special resonance. In recent years, Catholic health systems have become strongly engaged in the development and formation of leaders, yet there will not be enough of them to both carry forward this vital ministry of the church and to fulfill its future growth and transformational demands. A 2009 Catholic Health Association (CHA) survey found that roughly 70 percent of ministry-based health care ethicists and roughly 84 percent of mission leaders with ethics roles were over the age of 50, indicating the critical and growing need to prepare men and women to take their places.<sup>1</sup>

The health care ministry should be tapping as broad and deep a talent pool of vibrant, young, creative potential leaders as possible. It is time to reach out to the emerging generation in order to invest in and cultivate those who can carry Catholic health care organiza-

tions into the future. Where to look? In our current workforce, in related and unrelated fields and in universities across the nation.

A recent study found that graduates from Catholic universities were more likely to report that it is extremely important to integrate faith or spirituality into their lives than did graduates of national flagship public universities and other non-church-affiliated private colleges.<sup>2</sup> Another study indicates that Catholics especially need to understand how the beliefs of their faith connect with the way they live.<sup>3</sup>

The Catholic health care ministry offers a wide range of opportunities for students and young professionals to make connections between their Catholic faith and its practical application — from ethics, finance and human resources to supply chain and mission integration. These connections also

hold true for people with beliefs that align with Catholic teaching and who value the commitment to a faith-based identity. With such a strong need for cultivating young leaders and a potential supply of young talent, the current Catholic health care leadership is faced with significant challenges

of connecting the supply to meet the demand, especially in administrative and operational areas and leadership positions.

The ministry’s main challenge is one of presence. Young professionals in other organizations and fields and students in the classroom are not necessarily aware of Catholic health care as a possible place for spiritually fulfilling employment; a place where they can integrate their religious faith into their daily lives in a uniquely meaningful way. This lack of exposure often means that students are led to the Catholic health care ministry only by circuitous routes.

If the Catholic health care ministry is to grow as a dynamic, authentically Catholic ministry, it cannot rely solely on happenstance. Instead, all leaders, especially those of mission and ethics departments, should actively collabo-

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rate with secondary and post-secondary education institutions to attract and cultivate young talent. This is one of the measures of an excellent ethics program as outlined in CHA's *Striving for Excellence in Ethics* tool.<sup>4</sup>

### INDIRECT PATHS

Developing a steady stream of young talent between higher education and Catholic health care is a long-term process. Diverse avenues of engagement, integration into the fabric of an organization and insulation from budget reductions is imperative to successful, ongoing pipelines. These are some important steps that current health care leaders can take:

■ **Call to Action.** Given the current availability and spiritual hunger of young professionals and students, it is time for health care ministries to more intentionally engage these emerging leaders.

■ **Create mentorship and formation programs.** In many ways, we currently have the tools to cultivate young professionals already active in our ministries. A structural framework is necessary to sustainably cultivate this population. The expertise in leadership formation currently present in Catholic health care can be intentionally shared with high-potential young professionals within our organizations. Formal mentorship programs with clearly outlined objectives and projects that expose our emerging leaders to differing aspects of organizations will add to this cultivation. Mentorship and formation can go hand in hand with the right materials and framework.

■ **Actively seek out young talent.** To reach young professionals in other health care settings and other industries, our presence must be relevant in their world. There are many organizations for young professionals that are eager to expose members to successful leaders. Leaders can seek out these organizations and work to find ways to share our unique ministry and expertise. Internal and external career fairs are excellent opportunities to reach out to young professionals and students on a one-on-one basis and introduce them

to the various roles available in health care.

■ **Offer internships and fellowships.** To truly invest in the cultivation of young leaders, establish internships and fellowships, then renew and

fill that pipeline each year. "Making internships and fellowships available to prospective ethicists is an important contribution to our future," said Ron Hamel, senior director of ethics for CHA.<sup>6</sup>

## Voices



better than just a poster." And so we can.

**Elliott Bedford** — As I studied philosophy and bioethics at the Bioethics Institute at Franciscan University of Steubenville, Ohio, I contemplated my future career goals. As a philosophy graduate, I thought my career options in the field were limited to teaching and academia. It was not until I saw a faded poster on the back of the philosophy department bulletin board that my outlook changed. It advertised the health care ethics doctoral program at Saint Louis University (SLU), where I am now studying. I often catch myself thinking back to that poster and how blessed I was to see it. At the same time, I hear the Holy Spirit say, "We can do



health care leaders before I fully understood this ministry. Fortunately, the St. Louis area had ample resources to pursue answers to my questions, including the Aquinas Institute of Theology, Mercy, Ascension Health and the Catholic Health Association. By knocking on enough doors, I was given the opportunity to learn and grow as an intern at Ascension Health and eventually found my home in the Seton Healthcare Family in Austin, Texas. With such vibrant ministries in almost every corner of our nation, Catholic health care has the ability to reach out to students and young professionals before they walk a similar winding road in order to find us.

**Elizabeth Johnson** — During my time as an undergraduate at Saint Louis University, I grew and formed as a Catholic with a strong desire to integrate my faith and studies into a career where I could make a difference. This vocational desire continued through my graduate studies in health administration at SLU. I felt Catholic health care could be a place to blend my beliefs with my passion for health care, but I could not distinguish what made working in Catholic health care different from any other health care organization. Eventually, I looked beyond my university for answers, and for two years actively sought out many Catholic

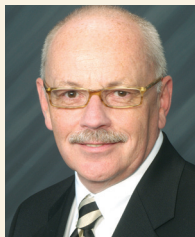


ultimately directed to a higher mission. I am concerned because I do not have a strong background in theology. Nonetheless, I do think that being serious about being Catholic is an important place to start."

**Emily Trancik**, a second-year student in the SLU health care ethics program, is currently exploring the field of Catholic health care ethics. She has reservations about her own theological training, however, and the time, tuition expenses and the availability of future employment are other factors that weigh into her discernment. She says:

"I am drawn to Catholic health care because my Catholic faith is what originally sparked my interest in ethics. As a Catholic health care ethicist, my work would have true value. I would be responding to an important need in the field. Also, I would be answering a call — my work would be

## Voices



**Fr. Charles Bouchard, OP**, provincial for the Dominican province of St. Albert the Great, Chicago, Ill., has spent time in both Catholic higher education and in Catholic health care and understands the problems from both perspectives. He suggests that leaders in both institutions should focus their energies on educating and recruiting.

“The problem is twofold,” he said. “On the one hand, most Catholic colleges and universities have no sense of responsibility for identifying and promoting candidates for church service among their students.

They happily encourage students to consider law school, medical school

and business school, but it would never occur to them that they should also be looking for qualified candidates interested in mission and ethics in Catholic health care.

“The second issue is that Catholic health care systems have not yet developed an adequate career track for ethics and mission that would enable young candidates to find a place in the system soon after graduation.”



**Patrick Lee, Ph.D.**, is the John N. and Jamie D. McAleer Professor of Bioethics and the director of the Institute of Bioethics at Franciscan University of Steubenville, which, together with the graduate philosophy program, offers a concentration in bioethics. Lee noted, “Many students are interested in learning about the most controversial ethical issues of the day, most of which, of course, are in bioethics. I get a lot of undergrads asking me if they can take bioethics classes.”

Lee’s experience also indicates that Catholic health care organizations and Catholic educators must consistently stress that the role of

the ethicist is one that entails responsibilities for upholding the Catholic mission, vision, values and identity of the institution in communion with the wider church. Inconsistent or inaccurate portrayals and perceptions about this role can in fact dissuade students from considering further studies as well as possible careers in Catholic health care ethics. Lee recognizes that tuition costs are another, more practical obstacle for both undergraduate and graduate students. A recent article by Fr. Thomas Nairn, OFM, Ph.D., senior director of ethics for CHA, indicates finances are a significant challenge to the development of a pipeline of young talent in ethics.<sup>5</sup>



**Steve Fowler** is a former campus minister and current director of mission services for Mercy Health Springfield Communities, Springfield, Mo. He said, “Catholic universities and campus ministries are ripe with talented students with hearts for service and skills for organizational advancement in a complex, digital world. Having served in campus ministry at large Catholic and state universities, I have mentored and counseled hundreds of faithful students preparing for professional careers in medicine, nursing, physical and occupational therapy, education, business and law.

“The potential for cooperative efforts between Catholic health care and Catholic higher education is limitless. The current state of the matter suggests limited relationships exist between the two. It seems that our shared foundations of faith and values could open doors to further collaboration. Both institutions are faced with the decline of religious and clerical presence on their campuses. Advancement of the Catholic identity and mission of these institutions are now the responsibility of lay leaders, many of whom do not profess the Catholic faith.

“Universities offer us something desirable in our ministry — access to our future leaders and workforce. Aware of our current and future challenges, we should be engaged in the development of curriculum, personal, vocational and leadership development programs and moral and ethical training of our emerging leaders, physicians and other providers. In terms of mission advancement, the power of partnership would allow us to increase the pool of desirable recruits and have folks on fire for mission before we even start employee orientation.”

Traditional administrative internships and fellowships as well as area-specific (e.g. mission integration and ethics) experiential pipelines move in the direction Fr. Charles Bouchard, OP, indicates is necessary for health care and higher education. (See *Voices*, at left.) For example, since 2000, Saint Louis University and Ascension Health have supported a graduate assistantship collaboration that has produced such professionals as John Paul Slosar, Ph.D., Ascension’s senior director of ethics, whom CHA honored in 2011 as one of Tomorrow’s Leaders in Catholic health care.

Recently in Milwaukee, Marquette University and Columbia-St. Mary’s established a model for a master’s-level fellowship in ethics that integrates theological coursework with practical application in both clinical and organizational settings and cultivates the character traits of an ethicist as recommended by CHA.<sup>7</sup>

In an effort to facilitate more collaborations like these, CHA has recently developed a Web page, “Exploring a Career in Catholic Health Care Ethics.”<sup>8</sup> The page offers valuable resources, such as a robust list of potential internships for graduate students, to help set the groundwork for developing the outreach necessary for cultivating tomorrow’s leaders in ethics. Innovative efforts such as this can be replicated for the myriad disciplines that make up the Catholic health care ministry.

■ **Reach out to universities.** Ask, “What can we do to help your students pursue a career in Catholic health care?” This simple question can serve as the starting point for developing the type of relationships you need to engage students. Senior leaders can offer to give lectures in classes or on campus to give students insight into the Catholic health care ministries. Especially good settings include campus ministry departments, campus volunteer groups and academic departments of business and of theology.

Health care leaders also can use the knowledge and resources from current leadership formation programs to offer universities an excellent tool to





develop and form students interested in Catholic health care careers. By connecting 21st century issues with the centuries-old, well-established missions of our ministries, students would be provided with a platform to apply their own internal faith within the modern world of health care. One example is sharing Catholic social teaching on the prioritization of care for the poor and the vulnerable and the connection to upholding human dignity.

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The true value of this information would come from a health ministry describing its policies and programs to care for people regardless of their ability to pay and the process by which individual leaders prioritize these values in their decision-making. Well-designed course projects created in collaboration between health ministries and universities provide real-life, tangible growth opportunities. Given the academic nature of such relationships, these projects can provide strong research and fresh ideas applied to any area of need or issue within the strategy and operations of a health ministry.

■ **Open some doors and provide experiences.** If Catholic health care is serious about cultivating young talent, young professionals and students need exposure to the Catholic health care ministry. They need some hands-on experience. Fowler suggested the ministry do some creative thinking based

on popular post-graduate volunteer year models like the Jesuit Volunteer Corps and Vincentian Service Corps. Devise some programs that put graduates to work in Catholic health care — reach out to meet them on their journey, open doors for them and let them contribute to one of the church's most important ministries. Show them that by choosing this career, they can live out their Catholic faith and beliefs that align with Catholic teaching.

Outreach will take time and financial investment from Catholic health care organizations, and like health promotion and education for patients, the full effects of investment may not be felt for many years down the road. It is an investment not only worth making, but one that must be made.

As always, Jesus provides our clearest example. In stories like that of Zacchaeus (Luke 19:1-10) and the woman at the well (John 4: 1-42), the Lord consistently engages people from all walks of life and shows them the greater possibilities that come from faithfully following him. In order to act as responsible stewards of the Lord's own healing ministry, current leaders of Catholic health care must follow the example of Christ by meeting new generations on their journey and showing them the many fulfilling possibilities that Catholic health care has to offer.

By opening doors and providing clear pathways into Catholic health care, leaders can show these emerging generations how their gifts and talents can contribute to creating an even stronger healing ministry of the church. With mission-empowered leaders of all ages and levels of professional maturity to thoughtfully attend to the needs of the communities we serve, our organizations are well positioned to continue carrying out our ministries for centuries to come.

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**NOTES**

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