

CAN WE STILL HEAR THE CALL?

What It Means to Be Catholic

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an we still hear the call?” The question is simple, but the answer is complex.

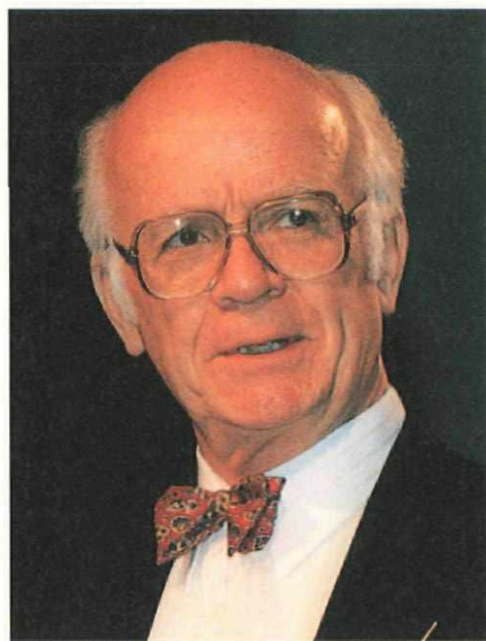
The complex, one-word answer—“Yes”—becomes interesting when we ask what is meant by each word in

the question:

- *Can* means, Do we have the ability? No capacity of previous generations to hear has disappeared from the individuals who now make up the Catholic healthcare ministry.

- *Still* can be lethal: It gives away a philosophy of history and suggests that every time the call comes, it will be harder to hear—until silence follows. One would prefer words like “now” or “already.” But “still” reflects new situations posed in society that immensely complicate the attempts to hear the call.

- *Hear* must mean recognize that there is a call, have some sense of what it includes, and



Rev. Marty

Summary

Despite the drastic changes occurring in the world today, certain elements of the Catholic tradition and communion can make the transition into a world colored by merger and shaped by governmental concerns for the general, not the particular. If Catholic particularism to many degrees and in many ways has been lost, the “loss” occurred before, apart from, alongside, and in many ways independent of merger and governmental contexts. “We gave it away.” These are days for retrieval.

The Catholic response to “the call” has been complicated by the following forces: bureaucratization of the world, acceptance of the terms of a liberal (i.e., “open”) society, pluralism, and governmental involvement. These factors are formidable, and they do change

contexts for response to the call. But they need not stifle the response.

The following are some of the elements in “the call” that the Catholic “we” can hear and respond to, while they are also graspable and transmittable by non-Catholics in merged, governmentally related institutions and associations: Catholic holism, concern for the soul, a sacramental view, attention to human dignity, the quest for meaning, the value of ritual, human exemplarity, responsibility to community, the call to justice, and a special ethos.

This sampling of elements could be debated within Catholic and in pluralistic contexts. But rather than debate, I would picture a value in conversation in each institution, system, association, or network. This conversation involves Catholics and non-Catholics alike.

have some impulse and way to respond and put the response to work.

• *The* is a definite article. Not just any old call will do, but one that reflects a specific tradition, a community that can provide identity and mission. It will be important to explore what that is.

• *Call* reflects "vocation," the whole of a life and a way of life. In this case, "call" must mean that which gives coherence and mission to Catholic healthcare ministries. All responsibility, "response," is somehow an answer to the call. The call may come from many sources, usually in blurring combinations: from God, conscience, self, community, religious order, voluntary society, fellow citizens, previous generations, employer, trustees, fellow employees, and patients. Who could ever sort them out? Who needs to?

That leaves *we*. Who are the "we"?

WHO "WE" ARE

Once upon a time it would have been easy to define the "we" in Catholic healthcare organizations: They would all have been Roman Catholic, obedient to the ecclesial canons, and positioned under a hierarchy. They would probably have been professed in religious orders or taken their signals from such.

In our time, we all know that society is pluralistic. Catholic healthcare facilities ordinarily include lay (and "nonordered") people in management, administration, and policy setting. Their medical and other staffs include Catholics and non-Catholics, with Catholics often in the minority. Governmental, insurance, and other networks represent the population diversities in respect to religion, race, class, ethnicity, expertise, and outlook. There is no point in talking about the "call" without understanding that the "we" is complex.

The complexity of the "we," however, does not mean that there is no call and no response group. It means that selective elements from the substance of Catholic charters and missions are transferable to non-Catholics—and have to be, if there is to be a distinctive identity, character, and ethos.

A simple exchange in a non-Catholic context can help us understand this. In the 1950s, in a series on American faiths, *Look* magazine asked a Lutheran editor, "Do Lutherans believe that theirs is the true faith?"

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Answer: "Yes, but they do not believe that they are the only ones who hold it." By analogy, we ask, "Do Catholics think theirs is the only true response to the call?"

Answer: "Yes, but they do not believe that they are the only ones who can hear it, respond, and put its substance to work for

human good."

Guarding the Positive Dimensions The question is, then, What is integral to the Catholic call and vision that is translatable, transferable, and graspable by non-Catholics who also make up part of the ministry? Our efforts to reflect on this usually get blocked because the public, including healthcare delivery leadership, tends to see Catholic distinctives only negatively. The way they usually put it is, What are you not allowed to do because you have Catholic ties?

I leave that question and its answers—most of them revolving around issues like abortion—to others, not because such issues are not urgent but because they preempt the moral and intellectual space that other equally urgent issues demand in the present setting. Let me say, however, that whether one agrees or disagrees with these strictures, they should properly be seen not as arbitrary, negative ecclesiastical impositions but as attempts to "guard" the positive dimensions, such as the dignity of the human person.

Retrieving Catholic Particularism When we talk about the Catholic "we" in the context of the pluralistic "we," the usual way to avoid the point of the question is to blame everyone around for the diffusion of Catholic identity, the loss of particularity, and the muffledness of response. Of course, "everyone around" represents forces that are presenting drastic change today as a result of (1) mergers between Catholic and non-Catholic institutions made for survival and so that they might better serve publics, and (2) governmental injunctions that show no mindfulness of particular traditions.

Despite these forces, certain elements of the Catholic tradition and communion can make the transition into a world colored by merger and shaped by governmental concerns for the general, not the particular. If Catholic particularism to many degrees and in many ways has been lost, the "loss" occurred before, apart from, alongside, and in many

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COMPLICATING FACTORS

The Catholic response to "the call" has been complicated by the following forces:

- Bureaucratization of the world—all worlds, including the healthcare delivery worlds and Catholic worlds. The impulse to reduce everything to efficient rational grounds, to mesh everything, to breed sameness, militates against the differentness and specialness of Catholic or other responses.

- Acceptance of the terms of a liberal (i.e., "open," and thus, for me and most of us, a general good) society, which includes resorting to secular rationality for most decision making, religious tolerance or even indifference, and extreme individualism. All these factors can make Catholic modes seem or be exceptional, misfitting, though not necessarily antiliberal (i.e., "closed").

- Pluralism, the voices of other respondents to other versions of the call.

- Governmental involvement, which is usually oblivious to "descript," as opposed to "nondescript," respondents.

These factors are formidable, and they do change contexts for response to the call. But they need not stifle the response. Indeed, these are days in which the rationale for the liberal society and its norms are being called into question as they have not been for a third of a century. Catholics and others are learning to retreat from and then reengage that society. The public shows hunger to transcend its boundaries. Code words like "the spiritual search" suggest some dimensions of this quest. It would be ironic if the Catholic one-fourth of America would throw away the gifts it could bring at the very moment when one can discern hunger for such gifts.

THE MEANING OF BEING CATHOLIC

The following are some of the elements in "the call" that the Catholic "we" can hear and respond to—while they are also graspable and transmittable by non-Catholics in merged, governmentally related institutions and associations. Yes, Catholics believe these are elements of "the true faith," but they do not believe they alone hold and have it. Yet if they do not have and hold dimensions like these, will someone else? Will anyone?

Catholic Holism Being Catholic in the Greek sense of *katholikos*, which means that all dimensions of being are penetrated by the call

and vision, poises Catholics to be pioneers and custodians of all those who speak of the "holistic." It is ironic that the restoration of the concept of "the whole" has often come from alternative medicine and "new religions," while it was the central gift of Catholic faith all along. "The principle of totality," "the good of [a person's] being as a whole" (as Pius XII noted), is central. The Catholic call never allows for the "chopping up" of the elements of personhood in society, though a bureaucratized world tends to do so. The patient needs Catholic holism wherever people can respond to the call.

Concern for the Soul Being Catholic commends concern for "soul." We assume bodily existence if we speak in terms of *katholikos*, but whoever keeps the whole patient in mind deals with soul in a soulless world. I am not speaking of anything spooky here, but referring to a reflection of Aristotle by Leon Kass: Soul is the integrated vital power of any naturally organic body and suggests possibility, openness, and freedom. Individuals have "soul," but, I argue, so do institutions, organizations, and associations. They have to ask how they can manifest and put to work "soul" in a time when patients hunger for its expression and the system is unconcerned about it.

A Sacramental View Being Catholic means having a sacral and even sacramental view of the world, including the world of illness and well-being, the patient, and the professional. Not only Catholics stand in awe of creation and nature; but if they do not, we lose a vital agent who has a particular view as to why we regard life, especially human life, as sacred and the goods of the earth—including research, discovery, and care—as positive goods, even if they are obscured or tainted by human corruption and the mysteries of finitude, contingency, and transience. Catholics are custodians of the sacred, thanks to their praise of God in Jesus Christ, but their response of praise is to be expansive, not limiting, as they work to enhance the sense of the sacred among others.

Attention to Human Dignity Being Catholic means being most attentive to human dignity—a favorite phrase of recent popes. There is no question that the medical and healthcare delivery fields are not innately and assuredly concerned with human dignity. Catholics have special reasons for being thus concerned, and they can retrieve these reasons and relate them to others' ways.

The Quest for Meaning Being Catholic means being alert to the human quest for meaning.

Again, efficient, managed, bureaucratized, governmentally related, complex systems are not automatically alert to this quest. It may look like a luxury, an extra. Yet whoever has been a patient, whoever is a good listener and is empathic, knows that this search is primal. Catholics who hear the call can

arrange a medical response in such a way that it is taken seriously, in ethics, moral choice, and coping with suffering or enjoying well-being.

The Value of Ritual Being Catholic means knowing the value of the ritualization of passages and experience of crises. The rites of passage (such as at baptism, confirmation, marriage, and death) connect with many other kinds of ways in which people cope with crises and opportunities. Catholics know that life's sorrows and joys are too complex and rich to take matter-of-factly; the Eucharist and other rites are responses. Catholic-based healthcare institutions have provided these for Catholics and analogous ones for non-Catholics. They can be on the front line of those who seek to ensure that the ritualized, rited life is part of healthcare.

Human Exemplarity Being Catholic means knowing the importance of human exemplarity in healthcare delivery. The medieval dictionaries say that *exemplum* meant "a clearing in the woods." Exemplum defined the woods and was the place where light fell, paths started and ended, and cultivation went on. Catholicism claims to help develop motivated personalities. It does not do so alone, but Catholicism has special reasons for emphasizing, for example, the Christian concept of the professional as "minister and servant" in a time when such defining exemplars are too rare.

Responsibility to Community Being Catholic means being responsible to community; one hears the call in the context of some sort of community. The non-Catholic may have other religious communities, but may share elements of the Catholic sort and will correspond with Catholics in many other kinds of community. Catholic exemplarity, "still" represented in many orders and lay voluntary associations, can be a model in a time when hyperindividualism can be detrimental to well-being.

The Call to Justice Being Catholic means being

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moved by the call to justice. There may be nothing particularly Catholic or Christian or biblical about "being just." One can be well served by political figures who are not moved by a particular faith and badly served by many who are. But the Catholic has to be responsive to a prophetic

word, to hear its call, and to put the response to work in company with others who may hear the call in other terms.

A Special Ethos Being Catholic means knowing that a special ethos and ethic inform the different communities and persons that make up a society like ours. I used the word "descript"—not in the dictionary—in contrast to "non-descript," which means "neither here nor there." We are relearning that descript institutions have a greater power for survival and effectiveness than do "efficient," homogeneous ones. The Catholic call is "transcendent," and that is different from calls which are self-generated in an imminent world. But it is heard among others who are particular human beings with particular life stories in particular contexts, and they are best served when their "descriptness" is taken into consideration.

THE CONVERSATION

These 10 elements of what it means to be Catholic are only samples. One could add many more, and debate these endlessly, within Catholic and in pluralist contexts. But rather than debate, I would picture a value in conversation in each institution, system, association, or network. This conversation involves Catholics and non-Catholics alike. Conversation implies having something to say and "hearing the call" of the other, the conversation partner. It does not represent defense of positions already known. It is, like all conversation, guided by the questions—and we have plenty of them today—and by an awareness of conversation's main feature: You never know where it will go.

For such a conversation, the issue is not, Can we still hear the call? but rather, since the context has changed so vastly so recently, Can we already hear the call? The Catholic one-fourth in America will not lack respondents in the other three-fourths if it hears and speaks with openness, alertness, and what Marcel called "creative fidelity" to the best in its tradition and community. □

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