



# The Sacred Encounter in Outreach

*"It's so nice that someone from the hospital cared enough to call to see how my son is doing since we were in the ER with his asthma."*

—Statement of a parent who had taken her son to the emergency room at Mission Hospital

**A**t Mission Hospital, and indeed throughout the entire St. Joseph Health System (SJHS), we believe that all encounters can be sacred. This premise is based on the simple definition of *sacred* as “devoted,” “reverent,” “respectful,” and “important.” Thus, in each encounter, our beliefs and values enable us to share many of life’s deepest core values: dignity, justice, caring, compassion, trust, and love. It is our hope that, after each encounter, those we have met will become more healed, more whole, filled with feelings of hope, and convinced that they are being cared for and loved.

As a hospital staff, sacred encounters with inpatients are critical to us, especially as we work to increase the optimal healing potential of our environment. But as part of a ministry, we need to look beyond our four walls and incorporate this belief into all our community benefit activities. By working—through our diabetes, asthma, health ministry, and other community benefit programs—for healthy communities, we ensure ourselves the opportunity to create sacred encounters. I personally am grateful, as the coordinator of Mission Hospital’s asthma program, to

see every day these amazing interactions within the community we serve.

## AN ASTHMA PROGRAM FOR KIDS

Mission Hospital’s community benefit department established the asthma program in 1999. The program was intended to be an educational curriculum involving a few local schools and limited classes. As the new coordinator, I was at an elementary school one day when a mother approached me. She described how, in a class where she was an aide, the teacher was unable to recognize that a child was having an asthma attack. She went on to say that she knew the child’s family had no health insurance and no ability to pay for a doctor. I offered to provide education to both the teacher and family. But the aide replied: “How much good does that do if there is no doctor for the child and no medicines to prevent and treat the attacks?”

I knew she was right. This was a pivotal sacred encounter for me. The aide was a compassionate and caring person who shared with me a different perspective on what community members needed. We both shared a belief in the need for justice and dignity for this child and others like her. I felt energized, hopeful that I could create a program that would provide *both* the education and access to care these underserved children deserved.

I was fortunate that, at about this time, Children’s Hospital of Orange County (CHOC) was helping to support a new program—called the “Breathmobile”—that provided free specialist care for underserved children with asthma in central and northern Orange County. The CHOC Breathmobile is a grant-funded mobile asthma clinic that provides specialized diagnostic testing, medical care, and treatment. Our community benefit department was able to coordinate with the CHOC Breathmobile and create a synergistic partnership. Our asthma program became



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responsible for finding children who needed medical care; the Breathmobile provided the care. We combined our complementary outreach activities of assisting families in accessing insurance coverage, asthma education, medical supplies, home visits, hospital visits, and follow-up with asthma-related emergency room visits.

### CONNECTING WITH POTENTIAL CLIENTS

Once we had our program in place, we asked ourselves how we were going to locate and connect with the children who needed it. Mission Hospital is located in south Orange County, an area of middle-class and affluent families. But there are many pockets of poverty in this mix of shiny luxury cars and grand homes. A majority of residents are Spanish-speaking migrants. Connecting with them wouldn't be a simple matter of calling out: "Here we are! We're going to help you." Nor would it be just a matter of compassion and caring and understanding the need for justice. We needed to build trust through respect and dignity. By doing so, we would provide the basis for sacred encounters.

At SJHS, it is said that the goal of sacred encounters requires cultural transformation. It isn't enough to speak a common language—you must reach others through an understanding of their culture. To reach our target, we employed several field activities, including attending local school fairs. These enabled us to meet potential clients. Our bilingual *promotora* (community

#### A Mission to "Dear Neighbors"

The Sisters of St. Joseph of Orange in California began their ministry in 17th-century France. The sisters were unique in that they left the walls of their convent to seek out "the dear neighbors" in their community and minister to their needs. In 1912, a group of them immigrated to a small town in California to establish a school. When the influenza epidemic of 1918 created widespread misery and death, the sisters again went into the community in order to care for the sick in their homes. Again today, their compassion extends beyond hospital walls to their "dear neighbors" in the community itself.

health worker) conversed with members of these families in their own language, so that they could fully express themselves and their needs. The promotora's understanding of Latino cultures also helped establish a level of respect and trust with these families by helping them maintain their dignity as they made their way through the health care system. The idea of sacred encounters is one that our ministry has adopted and taken to heart—incorporating it daily into our work lives. Through our efforts to make every encounter sacred, we have been able to accomplish many great things. Among these are:

- Spanish-language educational material grounded in an understanding of our clients' cultural outlook.

- Classes with an emphasis on "hands-on" learning that enables people with limited education to deal with sophisticated Western medical concepts.

- Field work for most of our activities. We meet our clients where they are most comfortable.

- Dedicated and personal case management. We walk each family through the steps required to see the CHOC Breathmobile doctor and make sure they are ready to manage the next steps.

- Ensured access to quality care and removal of transportation barriers. The CHOC Breathmobile travels to local schools to see the children; the asthma program conducts visits to the homes, which keeps the point of care on safe ground.

- Flexible directives for families to change their home environment and reduce asthma "triggers." Many families are renters, live one family to a room, and have little disposable income.

- Program adaptation to include cultural influences. Many Latinos do not put an emphasis on being timely. This is taken into account and planned for in our activities.

We respect every parent's love for their children, and their desire and sacrifices to make their children's lives better. Each sacred encounter flows in both directions, and our interactions do not leave us untouched. The families' respect for our caring; the trust we develop; the dignity, listening, and addressing of parental concerns—all have combined to provide for a higher quality of care for our families. It is because we strive to make each encounter sacred that we enjoy success. ■

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