

## EDITOR'S NOTE

**F**ocused on Faith & Medicine, this issue of *Health Progress* takes a closer look at how faith, reason and science work together as part of patient care in Catholic health environments and celebrates some of the groundbreaking therapies and treatments provided in these settings.



**BETSY  
TAYLOR**

We certainly know spirituality is important to many patients. CHA has been paying close attention to research that shows spirituality can play a significant role in medical decisions, that unaddressed spiritual needs are associated with poorer patient quality of life, and that wellness includes a spiritual dimension.

Both the *Journal of the American Medical Association* (JAMA) and *Health Affairs* have explored these issues in recent years, and CHA continues to educate about them.<sup>1</sup>

If you work in Catholic health care day in and day out, *Health Progress* aims to advance your knowledge of topics that may already be familiar to you or provide a fresh take on them, with authors from both Catholic and secular care systems. This exploration includes physicians writing about how they are transformed by their calling to care, and experienced chaplains and other care providers discussing what they've learned from their own work with patients that may provide some new learnings for those engaged in pastoral and end-of-life care.

This Faith & Medicine issue also nods to the current moment in U.S. health care. As we publish quarterly, I certainly encourage readers to visit our website for the latest articles and developments and to explore the fine work being done by our advocacy colleagues. That's not simply a plug for [www.chausa.org](http://www.chausa.org), but a reminder for readers that is where CHA's latest and updated content lives.

The opening article of this issue, by Caterina Baffa, explores social forms of displacement, noting that it's something immigrants and migrants may experience, and then more broadly focuses on medical displacement — how people with illness or chronic conditions may feel separate from themselves and their communities. It suggests a

theological response to these realities to promote wholeness and connection.

CHA's Senior Director of Ethics Brian Kane provides a historical perspective of how the concept of sanctuary has roots in the Gospel teachings of compassion and mercy. "The historical development of Catholic churches and hospitals as sanctuaries and places of refuge reflects the enduring Christian commitment to mercy, justice and care for the marginalized," he writes. He reminds us of the Catholic Church's vital role of protector and provider for society's most vulnerable members.

For the Faith & Medicine issue, we also wanted to provide an update on care approaches for aging vowed religious with two articles, one that includes a framework for healthy aging for all people, and continues with a discussion of psychosocial needs special to aging religious. The companion article takes a snapshot of some of the approaches to care for aging religious. So many *Health Progress* readers are vowed religious or work and live alongside them. We hope these articles provide thought for how we can both celebrate their ongoing ministries and help readers to think about how these efforts can be supported.

It is also a time when we are reminded again of Pope Francis' repeated call for Catholicism to be a field hospital, about the need for closeness and proximity with those we serve and the need to heal wounds. The hope is that this issue gives you some inspiration to meet needs starting from, as he advocates, the ground up.

### NOTE

1. Valerie Schremp Hahn, "Researchers Analyze Hundreds of Articles on Spirituality's Role in Health Care," *Catholic Health World*, August 2024, <https://www.chausa.org/publications/catholic-health-world/archive/article/august-2024/researchers-analyze-hundreds-of-articles-on-spiritualitys-role-in-health-care>.

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