

## EDITOR'S NOTE

Lent is upon us — the season of prayer, penance and almsgiving. Penance and prayer usually get the lion's share of pulpit time, but this issue of *Health Progress* invites us to consider the third leg of the stool — almsgiving. It's an outdated word, but I like it because it incorporates "giving." Mostly now we use the term charity to refer to giving with mercy to someone poor or needy, often on the spur of the moment. Philanthropy — our special topic for March-April — is a more contemporary word that speaks to intentional generosity directed to solving the long-term problem that is causing the immediate need. When you slip a few bills to the panhandler under the viaduct, you're practicing charity. When you make a five-year pledge to a hospital's capital campaign, you are participating in philanthropy.



MARY ANN  
STEINER

Charity and philanthropy are terms defined and debated by several authors in the following pages. But they all agree that almsgiving, charity and philanthropy have three essential and sacred elements — asking, giving and receiving.

The poet Rainer Maria Rilke wrote my favorite fairy tale about who can ask, who can give and who can receive in his short story, "The Beggar and the Proud Young Lady." She is a very young philanthropist who daily gives to the beggars in her town, all of whom she knows by name and situation. The Beggar is a brash young man who means to embarrass her by dressing in rags and extending his unfamiliar hand for a coin. His plan works, and she runs, flustered, to evening prayer without giving him anything. She is not stingy, but she understands the intimacy of asking, giving and receiving and doesn't want to insult him.

Then she thinks of a way to give to him without humiliating him: Slipping out of church, she finds him still at the beggars' gathering place. She concocts a story about his father being a workman who left his money purse at her parents' house and explains that she is just returning to him what is rightfully his. He is so touched by her willingness to create an intimacy between them that he takes the money, gives it to the poor and becomes a mendicant himself. If you'd like to read the beautifully written version, instead of my clumsy re-telling, you can find it in Rilke's book, *Stories of God*.

Giving, at any scale, can be transformational for everyone involved. However, large-scale, long-term, strategic philanthropy — the kind that contributes to the mission and the margin in Catholic health care — has the challenge of building intimacy and personal relationship into every interaction between fundraisers, donors and ministries. The need to ask for funding always will be there — costly equipment and procedures, upgrades of technology, memory care wings — all those elements that make the healing ministry vibrant and capable of rendering excellent care. But the need to give and the need to be able to receive also are part of the equation. I think the articles that follow give ample evidence that those needs are understood and upheld in Catholic health care philanthropy.

Our guest editors for this issue — Laura Richter of Mercy St. Louis and Dan McCormack of Hospital Sisters Health System — were very helpful in determining specific topics and helping to identify potential authors. Each also wrote an insightful article. Thanks to each of this issue's authors for broadening our understanding of how philanthropy works and why it is such an integral function of Catholic health care.

Several writers mentioned Henri Nouwen's seminal book, *A Spirituality of Fundraising*, which seems to be a point of reference and inspiration for fundraisers of faith-based organizations. Thanks to the Henri Nouwen Legacy Trust and Upper Room Books, we are able to reprint an excerpt from that book on pages 42-43.

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