

EDITOR'S NOTE

In a year of relentlessly terrible international news, no wonder so many of us were taken by the story of the Refugee Olympic Team during the 2016 summer games. Each with an improbable chance to compete, none with flag or anthem, 10 world-class athletes strode into Rio de Janeiro's Maracanã Stadium during the Opening Ceremony to a long and rousing standing ovation. Everyone was rooting for Team Refugees.



MARY ANN
STEINER

It is the kind of story we all want to embrace: unlikely Olympians dedicating their competitions to raising awareness of the international refugee crisis; journalists pursuing an inspiring lead instead of a negative one; the rest of us celebrating what we believe about the best of the human spirit.

We'd be naive to ignore other facts and motives. It is no secret that the International Olympic Committee needed exactly such a human interest story to distract attention from concerns about doping, Zika and biased judging. There is the irony that the city of Rio de Janeiro displaced almost 70,000 of its own citizens to accommodate Olympic facilities. And the uncomfortable fact that warm feelings for 10 athletes doesn't alleviate the plight of more than 63 million other refugees around the world.

In less than a week, the story of the refugee team all but disappeared. No medals, no against-all-odds performances, no more coverage. The only news to surface was that Team Refugees now has an unofficial flag. Although they entered the stadium together under the Olympic flag, in individual events they were raising a banner of a bright orange field with a horizontal black band, evoking the life jackets so many refugees have worn in search of safety. That was not a look or meaning my hopeful little heart wanted for them. But, I remind myself, it's not my call to make, not my history to carry, not my story to tell.

As Catholic health care moves into more international ventures, it, too, has had to adjust its lens and become more mindful of what are its calls to make and what are its stories to tell. There is growing awareness of the values and possibilities for global interconnectedness, and ministries are focusing substantial effort and resources on partnerships of right relationship. Global health leaders are committed to listening and learning from the people whose health they hope to improve. They are adjusting strategic

priorities and asking difficult questions to make sure these are sustainable inroads to a healthier world.

It is crucial that Catholic health care get the answers to those questions right. For example, when do medical mission trips help steadily improve a community's health, and when are they junkets that do more harm than good? Can entrepreneurial business plans support nonprofit partnerships for better medical services? What ethical considerations should direct the selection and training of medical mission teams? When is it good stewardship to use offshore sourcing, and when is it one more compromise down the slippery slope? How does an understanding of right relationship guide decisions about immediate aid and long-term sustainability?

We are grateful to our authors, who pursued the ethical, practical, relational and ministerial questions with vigor and humility; special thanks to Bruce Compton, CHA's senior director of international outreach, for his helpful guidance. Throughout, we have been fortunate to rely on CHA's 2015 resource for best practices, *Guiding Principles for Conducting International Health Activities*, which was mailed to readers with the January-February 2016 issue of *Health Progress*.

In addition to our focus on globalizing health care, there are some very special features in this issue. Most Reverend George Leo Thomas, bishop of Helena, Montana, graciously allowed us to publish his homily from the closing liturgy at the 2016 Catholic Health Assembly in June. A learned and inspiring look at the lessons of the Second Vatican Council, Bishop Thomas' insights into the council document *Lumen Gentium* (Light of the Nations) meditates on the seven lights shining from Vatican II.

Sr. Patricia Talone, RSM, PhD, vice president of mission, retired from CHA as this issue of *Health Progress* left for the printer. *Health Progress* and Sr. Pat have had a long and happy relationship, and we are honored to feature her 49th publication in the magazine with her farewell article on page 61. Thanks, Sr. Pat. We will miss you.

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