Environmental advocacy is personal. It’s a calling to divinity, a personification of a great sacred story. Environmental advocacy also is our business. The sustainability of the health care mission is dependent on it. As leaders of a healing ministry, our voice matters — it’s the presence that gives evidence to who we are; it’s the meaning-making that further advances our commitment to eco-justice; and it’s the breath — in the mystery, whisper, silence — that tells us more must be done to protect human health and the environment.

**FINDING MY VOICE**

As long as I can remember, I’ve had this wish to be a singer, for song to come from deeply within me and to come easily out of me to touch others, somehow to heal this way. And should no human stand within audible distance, I have imagined other living creatures, and things all around, rapturously listening as if life would have it just so. If I could reach that highest, sweetest note, everything would somehow show up as beautifully as it was made, in harmony — singer, songwriter and audience connected, lyrics translated in the language of nature, and precisely at that moment, words and meaning fall away, only sound making its way in the world. It’s a tall order, I know (my kids could vouch for this). The reality is, I will not be the next American Idol. Thankfully however, wishes have a way of turning into something else, especially when one doesn’t have a made-for-the radio singing voice. But, one has a voice, nonetheless.

Over the years, I’ve come to find my voice, discovering themes of healing working its way.

I came to the United States from the Philippines when I was 5 years old. Before landing at the Los Angeles airport, I held within me three distinct languages: the languages of my native past, so primitive my family narrowly escaped telling its own stories of oppression; the language of a present for which a few English words inside a Pan Am Boeing 747 could satisfactorily describe “America”; and the language of a voice in waiting.

Early in life, I learned how big Planet is, and how small everything is from a 30,000-plus feet view. Kids and grown-ups, buildings, the tallest trees, the highest mountains, the island that

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*We live in stories the way fish live in water, breathing them in and out, buoyed up by them, taking from them our sustenance, but rarely conscious of this element in which we exist. We are born into stories; they nurture and guide us through life; they help us know how to die. Stories make it possible for us to be human.*

— DANIEL TAYLOR, PhD
was home — all became a mosaic of earth tones. Pacific seemed endlessly Blue. At day, Sky played mimicking moods of Earth, Water and Air. At night in twinkling glitter, Sun held firm its promise, “I am here, still with you.” As that little girl, my story of life in America began.

Sun has been unrelenting, keeping its promise for about 5 billion years before that first flight of mine. As I reflect on environmental advocacy, I think about the story I was born into. Who are we to have entered into this divine relationship that has been revealing itself for so long?

OUR PLACE IN THE ORDER OF THINGS
In the history of life, simple cells entered the scene 3.6 billion years ago. Sexual reproduction of complex cells (eukaryotes) first occurred around 1.2 billion years ago. And when you consider the proliferation of varying life forms since that time — fish (at around 500 million), insects and seeds (at around 400 million), reptiles (at around 300 million), mammals (at around 200 million), birds (at around 150 million), primates (at around 60 million) — anatomically modern humans arrived only 200,000 years ago. A discovery of a 45,000-year-old leg bone from Siberia has furnished the oldest high-quality modern human genome sequence yet produced.

Knowing what we know today about humankind and the world around us, what is the significance of our story now — how we assign our place in the order of things, what meaning do we give to our relationship with the environment? Where do we go from here?

PENCHANT FOR KNOWLEDGE
Five billion years is a lot to take in. Let us consider our presence on Earth in the last 200 years, couple of decades, today. Humans know more now than at any other time in history. A penchant for knowledge has undoubtedly produced a great many discoveries and approaches, thoughts and expressions, facts and data from across the globe. The various disciplines we’ve bitten into — philosophy, religion, science, law, technology, commerce, culture, the arts — have been a bite of everything under the sun to help us see more clearly our world and how to adapt to changing times.

Yet, enough attention has not been given to the most pressing issues of our planet and the need for collective action. There is genuine struggle and discord on the one hand, and apathy and ignorance on the other. It’s as if humanity keeps the Earth “out there,” at arm’s length, comfortably distancing itself from the ecological changes that are occurring. Resignation to describing climate change as merely a natural phenomenon ignores mounting evidence of how human this problem is and how truly (super/un)natural it is for Earth to be ignored. Failure to accept our contribution to the acceleration of global warming is, in every sense, betraying our own nature. During this moment of crisis for Earth and for us, urgency is not greatly felt.

Earth’s average temperature has risen by 1.4 degrees Fahrenheit over the past century, and it is projected to rise by another 2 to 11.5 degrees over the next 100 years. The 14 hottest years on record all have occurred during the last 15 years, with 2014 marking the Earth’s hottest year since

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human dignity, preferential protection for the poor and vulnerable, stewardship, common good — are embedded in our health care mission and the values that define who we are as a ministry. They are not only instructive but are also at the core of why we exist as organizations. Our organizations embrace a commitment to mission as an expression of deep reverence for life and our relationship with it. Every day in our hospitals, we bear witness to human suffering — that of our mothers, fathers, brothers, sisters, children, neighbors.

How does the creation story unfold in the faces of our patients and those with whom we work? Environmental advocacy is fundamental to who we are and what we do to know Christ intimately, to unearth humanity and bring compassion and change in the world. Environmental advocacy must be personal this way. We must see ourselves in the story.

**SUSTAINING A HEALTH CARE MISSION**

Much of health care today is defined by the Affordable Care Act (ACA) and its “triple aim” of lowering health care costs, elevating quality of care and improving population health. Nearly five years since the law’s passage, the nation continues to wrestle with ACA economics and politics; legal challenges; continued promulgation of regulations; growing demands on plans, providers and suppliers; coverage expansion and enrollment; and — still — the many Americans who are uninsured and those locked out of the health insurance marketplaces. The health care industry is faced with issues challenging the bottom line of hospitals: reimbursements, operations, infrastructure, capital and human resources. The list goes on. Understandably, these issues top the headlines and management agendas.

For Catholic health care, reform is this and more. This time, as it was in the beginning, is about the transformative nature of a healing ministry and the continued formation of our organizations, communities and those touched by our health care mission. However, unlike any time before, business cannot be as usual. Leaders are at a significant juncture. A deepening, broadening and integration of sustainability and environmental initiatives is critical.

Our day-to-day experiences tell us a story: Competing priorities are real. In this context, how is it possible to talk about transformation and ecology in the same breath? As leaders of Catholic health care, how do we articulate and integrate our values in ways that will further the healing ministry?

As providers, our voice bears great weight. The public at large looks to our expertise and authority to help make sense of climate change and other eco-justice concerns in language that’s real and tangible. We need answers to explain what’s making people sick and why, and what can be done to protect families and communities from harm.

The poor, elderly and weak, especially, are disproportionately affected. They contribute far less to the climate problem, but they are hit hardest. Advocating on their behalf is essential. We need more caregivers and health care administrators to give voice to this growing list of climate-change-
related health impacts:
- Asthma and respiratory diseases from air pollution
- Cancer risk from UV radiation
- Cardiovascular diseases and stroke from heat stress, airborne particulates
- Neurological diseases and disorders associated with toxic chemicals
- Food-borne diseases and poor nutrition from food shortages and food contamination (chemicals, biotoxins, pesticides)
- Waterborne diseases due to increase in water temperature, precipitation frequency and severity
- Mental health and stress-related disorders due to geographic displacement, property loss, loss of loved ones
- Injuries and death caused by extreme weather events

**With increasing rigor, hospitals are looking more closely at the impact of hospital operations on the environment.**

Leaders are connecting the dots between sustainability and transformation. They ask:
- What are we doing to advance community health?
- How are those who are poor and vulnerable affected by our decisions regarding our use of natural resources?
- How much greenhouse gas do we emit?
- How are we improving our energy and water efficiency? How are we disposing of our waste?
- How are we designing, constructing and renovating our buildings?
- How are we sourcing food and promoting healthier foods?
- What products and materials are we purchasing? How are they made, and what are they made of?
- Are we publicly reporting our sustainability efforts — our metrics, successes, challenges, improvement plans?

Without meaningful answers to these questions, hospitals will not be well-adapted, much less survive in this era of reform. The answers will not come all at once, but they must be asked and asked again. The financial bottom line is real for hospitals, and so is the return on investments that sustainability initiatives can bring to strengthen the balance sheets.

There is joy in celebrating successes, encouraging others, building coalitions, sharing best practices. When faced with setbacks or roadblocks, honesty in expressing challenges or disappointments is necessary if leaders are to learn from one another, see things differently and work to create common ground. The integrity of the health care mission requires diverse voices to make vivid the story.

Transformative leaders are emerging, but more must come forward. There is much to be done. The magnitude of the crisis we are facing today warrants a business response of equal proportion. Catholic health care cannot alone solve the various problems. But, our creation story will be sufficient when we have done our part to lead by example.

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**NOTES**
