Evangelization through Institutional Sponsorship

Education and Experience in the Congregation’s Tradition Can Move the Laity to Full Partnership in the Ministry

By Sr. Mary C. Hauke, OSF

Sponsors’ efforts to help lay leaders become full partners in Catholic healthcare have been critical to the preservation of the ministry. Introduction to a congregation’s charism and tradition teaches lay leaders to see their work as a contribution to an ongoing ministry. For sponsors, the challenge to educate the laity has forced them to think about and more clearly articulate their beliefs.

The overall goal has been to empower lay leaders to carry on the sponsoring congregation’s mission and preserve its heritage. This in turn has meant providing the laity with education and experience that would enable them to continue revealing the healing presence of Jesus through Catholic healthcare. From this perspective, sponsors’ work with lay leaders can be understood as a process of evangelization.

What Is Evangelization?

Drawing from Pope Paul VI’s apostolic exhortation On Evangelization in the Modern World, one can define evangelization as the proclamation of the Gospel to Christians and non-Christians in order to awaken and nourish faith. It includes activities directed toward building up the Church and transforming prevailing values and attitudes in accordance with the Gospel and God’s will.

Evangelization’s goals are both internal and external. “While the Church is an evangelizer, . . . she begins by being evangelized herself.” Hence those who evangelize are required to be attentive to God’s message in their own lives.

The purpose of evangelization is to bring the good news of Jesus to “all strata of humanity, . . . transforming humanity from within and making it new.” Evangelization is the central mission of the Church because Jesus himself was called. “I must proclaim the Good News of the kingdom of God. . . . That is why I was sent” (Lk 4:43). Much more than an educational ministry, evangelization is the Church’s effort to give birth to a new age and a new world.

The Church traditionally understood evangelization as planting the seeds of Christianity among people and groups within whom it has not taken root. However, the Second Vatican Council (1963-65) placed evangelization in a wider political context, calling on Church mem-

Summary

Sponsors’ efforts to empower lay leaders to carry on the Catholic healthcare ministry can be understood as a process of evangelization, or the proclamation of the Gospel to Christians and non-Christians in order to awaken and nourish faith.

By involving the laity in the operation of their institutions, sponsors assume an evangelizing posture. To ensure the continuation of their ministry, sponsors share with the laity their history, charism, and values. They thus set a standard on which institutions can base their own mission and values. Cathechetics, or religious instruction, is another aspect of evangelization. For sponsors, catechesis takes place through governance and mission integration activities.

The sacraments are also important to evangelization. Through prayer before a board meeting, the use of paraliturgy during the commissioning of new board members, or the eucharistic liturgy, sponsors raise people’s awareness of the sacred even in the midst of workplace routine.

Sponsors themselves need continual evangelization. As congregations help the laity carry out the Church’s healing mission, they are also called to examine how they sponsor.
embers to look outward and become part of the world so that the message of Christ could influence society and the common good.

Vatican II documents, such as *Dogmatic Constitution on the Church* and *Constitution on the Church in the Modern World*, noted that mission encompassed preaching the Gospel through word, sacrament, witness, and service to the whole community. The *Decree on the Apostolate of the Laity* called the laity to participate in evangelization. United with Christ through their baptism, the laity share in the Church's mission. Through confirmation they are called to assume active stewardship within the Church. Those joining the Catholic health ministry who are from non-Christian traditions are expected to adopt, and act in concert with, Catholic values and philosophy.

**SPONSORSHIP AS EVANGELIZATION**

By involving the laity in the operation of their institutions, sponsors assume an evangelizing posture. Sponsorship is an evangelizing ministry because it invites people to join in proclaiming and living out the Gospel and calls those who hear the message to become witnesses. Through sponsorship, congregations can influence the mission, philosophy, values, and governance of institutions. “While the Church can proclaim through writings,” Sr. Melanie DiPietro, SC, reminds us, “institutions can pragmatically make the teaching a reality in people’s lives.”

**Witness** The process of evangelization encompasses a wide range of activities, but the key ingredient is personal witness. As Patrick Brennan has written, “Words about faith are empty if not joined to actions and behaviors that incarnate the values of the Kingdom.”

To ensure that their ministry continues in the spirit of their founders, sponsors share with the laity their history, charism, and values. They use a variety of programs—in-services, retreat days, and visits to the congregation’s motherhouse—to help board members, administrators, managers, and other employees integrate the Gospel message and Church teaching into their work.

By sharing who they are and what they stand for, congregations set a standard on which institutions can base their own mission and values. The congregation then holds the organization accountable for exhibiting the mission and values throughout the institution—from the boardroom to the kitchen.

Personal contact in evangelization is invaluable. For example, in their mission integration program, the Franciscan Sisters of Perpetual Adoration, La Crosse, WI, share personal faith experiences among sisters and lay board members. Such experiences help lay leaders relate faith and values to the work setting. They also help sisters understand and feel comfortable with how the laity are ministering.

**Catechetics** Catechetics, or religious education, is most often associated with the parish church and the formal learning of doctrine. But a related idea is catechesis—the oral instruction of those desiring to become members of a church. In sponsorship, catechesis takes place through governance and mission integration activities.

Learning about a sponsor’s history and charism enables the laity to identify with the congregation’s heritage and adopt policies, make decisions, and implement programs that make a redemptive difference in society.

**Sacraments** The sacraments, which stress the significance of life experiences, are also part of evan-
EVANGELIZATION

Sponsors see themselves as stewards. In light of Vatican II directives to influence the world by becoming part of it, sponsors seek to empower laypersons for institutional stewardship.

The steward, characterized in Scripture as trustworthy and reliable, relies on an inner authority, especially in the absence of the master (Lk 12:35-48). Concrete examples of the laity's stewardship within sponsored institutions are abundant:

- At Clement Manor, Greenfield, WI, nursing staff rearrange their schedules to attend to a confused resident recently admitted and recovering from a stroke. To prevent the 49-year-old resident from wandering out of the building, the nursing home staff spend time playing darts with him.

- Out of concern for her staff's educational and professional development, Chief Executive Officer Joanne Wall of Maryhill Manor, Niagara, WI, brings instructors into the rural nursing home so employees can obtain their graduate equivalency diploma (GED) certificate after work.

- Programs begun by Villa Clement Health Center, West Allis, WI, improve employee interaction and service to patients. The administration chose programs that would help staff appreciate and understand each others' culture and assist them in developing communication and problem-solving skills. As a result, staff are more caring not only of patients but of each other.

- The laity's concern and care for the poor is cited by the Sisters of the Sorrowful Mother in 26 projects developed and implemented locally by institutional personnel using "care of the poor" monies from the health system's ministry fund.

The fruit of governance and mission integration comes from the laity themselves—in attitudes, in the quality of interaction between patients and staff, in management decisions that affect the work environment and the patient care, in policies established by an institution's board. All these factors fashion an optimal environment for the healing mission of Jesus.

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facilities to shared stewardship responsibilities with lay administrators and board members. Religious women are preparing the laity to accept their role in institutional ministry. As a result, congregational sponsors now minister through influence rather than through presence.

An increasing force in Catholic healthcare will be lay men and women who wish to join their values and life experiences with institutions having like values. Religious sponsors continue to face the challenge of empowering the laity to take the Gospel message beyond the church doors into everyday life. If congregations meet this challenge, a prepared Christian laity will emerge as equal partners with vowed religious and clergy in institutional ministry.

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3. On Evangelization, para. 18.
6. Before Vatican II many people viewed sacrament as something done to them. Post-Vatican II teaching emphasizes sacrament as a sign of God's care for us. Tad Guzie writes: "A sacrament is a festive action in which Christians assemble to celebrate their lived experience and to call to heart their common story. The action is a symbol of God's care for us. Enacting the symbol brings us closer to one another in the Church and to the Lord who is there for us" (The Book of Sacramental Basics, Paulist Press, Mahwah, NJ, 1981, p. 53).

The program ads reached 7,000 high school students in the state.

Heads Up! a newspaper public service project," says Slaughter. "We converted one of our posters into a smaller ad and asked the newspapers to print the ad and a corresponding story. We also sent their staffs T-shirts and posters and asked them to wear the shirts and put up the posters the day their paper was published."

Seven high schools responded, reaching more than 7,000 students throughout the state. "We will continue this effort and send the newspapers a new ad and article early next fall," says Slaughter. "The cost is minimal and we're hitting the bull's eye in reaching our target audience."

PROGRAM RECOGNITION
The public relations campaign has received six awards from Healthcare Marketing Report, four Touchstone Awards from the American Hospital Association, and numerous other awards from local and regional organizations. It has been featured in Advertising Age's Creativity and Art Direction magazines, and the national office of the American Red Cross recently requested permission to use the ad featuring the diver in some of its safety information brochures.

"But the best reward we could receive would be to hear the state department of health report one day that Mississippi's incidence of spinal and brain injuries is well below the national average," says White. "That is our ultimate goal."

the congregation's spirituality, community life, and mission. These might be adaptable to the needs of leaders who express a desire for a deeper inclusion in the congregation's life and mission.

WINDOW OF OPPORTUNITY
A hospital system I work with holds their CEOs, at their yearly performance review, accountable for their personal growth in mission consciousness, and for how they have moved to implement mission development in their organizations. The ultimate goal is to move toward an organization in which a broad ownership of leadership for mission exists, in the same manner that a total quality perspective might come to permeate an organization. Such initiatives are critical at this point in our history.

A window of opportunity exists to develop a mission-conscious and mission-driven lay leadership for our healthcare institutions. In 10 or 15 years, this opportunity will have passed because the sponsoring congregations that must lead the process will have fewer religious available. If we fail to take up this challenge, the Catholic identity of our healthcare institutions will be diluted to the point where it might be difficult to call them Catholic. This would be a tragedy in a society so in need of strong, values-driven institutions.

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