

Repositioning Mission For the Twenty-first Century

BY SR. MARYANNA COYLE, SC

Recently, someone quoted a line from Christopher Fry's play, *A Sleep of Prisoners*: "Show me an ending great enough to hold the passion of this beginning and raise me to it." In anticipating the twenty-first century—only about five years away—I believe we are living through the dynamic of an ending and a beginning. Whether our mission will transcend the upheaval of an ending in one expression and inspire a beginning in a new expression hinges on the degree of *passion* we bring to the transition.

Wherein do we find this passion?

In the stories of the pioneers of our Catholic healthcare ministry, predominantly women religious in the nineteenth and early twentieth centuries, we glimpse such passion for the healing ministry—a passion that enabled them to endure tremendous hardships. We must not forget their spirit of compassion fueled by love of God for all people, which urged these women to respond to the healthcare needs and to imprint history with the fruits of a passion that transcended the boundaries of geography, tradition, and role.

The heritage of our Catholic healthcare ministry was born in passion and nurtured by a passionate response of people from generation to generation. Is there enough passion among us to be the pioneers of healthcare for the twenty-first century?

We have tried to capture the lived experience of furthering the mission of the healing ministry in our statements and philosophy. Our mission statements express clearly and concisely the "why" of our existence and the "who" of our service. They are rooted in the heritage of our healthcare ministry and express our commitment and fidelity to the ministry. In considering their relevance for the future, we need to critically examine how they come to life within our organizations and how they give life to each of us, to people serving and being served.

In recent years our commitment to the Catholic healthcare mission has inspired us to



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name a new vision for a new century, as outlined in the 1988 document by the Commission on Catholic Health Care Ministry, *Catholic Health Ministry: A New Vision for a New Century*. That vision calls on the whole Church to accept responsibility for the healing ministry. In that report and in our healthcare reform efforts, we have enthusiastically named a new paradigm of healthcare that focuses on persons as the center of our efforts and wholeness as the outcome of our presence and service.

I doubt that in the present environment, shrouded with the uncertainties and fears of change, there is a "commitment" and sense of ownership of this vision at all levels within the organization, much less within the communities in which we serve. This observation brings me to the first direction necessary in repositioning mission for the twenty-first century.

THE CONTEXT OF MISSION

In recent years Catholic healthcare organizations have expended significant effort in articulating their mission and in developing an awareness of it throughout the organization. We have attempted to reinforce its meaning with symbols, ritual, stories, celebrations.

But moving our mission beyond the institutional paradigm requires its integration into the development of healthy communities. Communities are not just geographic boundaries. They are the populations we serve: people of vast diversity; people struggling to survive and thrive among myriad societal problems; people with many and few resources; people who often do not experience the purpose of community, the sense of connectedness and interdependence.

If our mission is to extend our presence and our resources to promote health within our communities, we must broaden the meaning of community, modeling the connectedness and interdependence that steward the common good.

In the daily struggle to maintain our Catholic presence in the marketplace and in the challeng-

ing efforts to form secure partnerships, it is extremely difficult to translate the words of such a mission into productive actions.

On your daily agendas, have you set aside time for reflection on your mission and your vision for the future? Do you care about it passionately? Does it release a surge of enthusiasm that is contagious and captivating? Or are your internal management agendas shrouding the passion and overlooking the opportunities for community integration?

THE SPIRIT OF MISSION

We have named a new paradigm of healthcare for a new century. What is the word of hope that we find in this paradigm? Enkindling hope begins with our own inner work. When I think of the tremendous impact we can have as stewards of the Catholic healthcare ministry, I am filled with hope. When I name as partners in the continuation of our healthcare ministry thousands of men and women who live our mission in their daily service, my hope is renewed. When I listen to the voices of those who need our presence and service, our compassion and care, I know that we are still called to be signs of hope.

Where uncertainty and lack of information about change and restructuring within our institutions prevail, fear, suspicion, and lack of trust drive out the hope. I suggest that we initiate a quality check regarding the spirit of hope among those who carry out our organizations' mission. We might discover that rumors abound, that suspicions surface when certain management positions are eliminated, that spirits deflate when cutbacks require harder efforts without understanding why.

Prompt and open communications, with dialogue about the impact of changes on everyone in the organization, undoubtedly will change people's perceptions and engender more ownership and cooperation.

And what is the sign of hope we communicate to the communities we serve? Local newspapers present statistics about occupancy rates, increasing costs, and service cutbacks. Such information fuels the perception that hospitals are too costly, too numerous, and too inefficient. To change that perception, we need to focus on our mission of furthering the healing ministry of Jesus. We need to creatively explore how we can be signs of hope for our communities through our presence and our service.

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THE HEART OF MISSION

The very source of our mission challenges us to look at our present reality in light of the words of the Gospel and through the eyes of the poor.

In the Gospel stories we discover that compassion was the fire of Jesus' ministry. Time and again Jesus was moved with compassion and responded. In Mark's Gospel, we meet Jesus traveling through Galilee. A leper came to him and said, "If you choose, you can make me clean." Moved with compassion, Jesus stretched out his hand, touched him, and said "I do choose. Be made clean."

Compassion leads to works. In *A Spirituality Named Compassion* (Winston Press, Minneapolis, 1979), Matthew Fox offers this quotation from St. Thomas Aquinas: "Compassion ought to be spoken of at the same time as passion. Compassion is a certain kind of passion because no one becomes compassionate unless he suffers. Compassion springs from a love of God and of neighbor which is a consuming fire."

Compassion is the light that stirs into flame our passion for the healing ministry. The light of compassion is revealed in and through eyes of the poor. Through the eyes of the poor, look at our present reality. How healing is our mission if it does not extend direct service to the poor? How liberating is our mission if it does not raise our voices to be advocates for those who are excluded from access to healthcare in our society?

In the eyes of the poor, see their suffering. Feel their longing for a sense of hope that raises them up with reverence and compassion. Release the passion of anger and say "no more" to the structures that keep the poor oppressed and diminish their human dignity. Embrace the passion that speaks God's love and promise to be with us in our love of neighbor.

Compassion is the fire of love and of hope. It is also the spirit of joy and celebration. Find joy and satisfaction in the richness of our mission and in its sustenance from generation to generation. Celebrate the compassion of those who have served so faithfully because they have cared so passionately.

In these transition times, keep alive the passion that forms the bridge to the future. Trust in that passion. It will blossom as the fruit of the passionate men and women who, two millennia ago, pioneered our ministry. It will endure as the vision of the passionate men and women who are pioneering our future. □