Wedding showers are not my favorite social events, but one stands out in my memory because of a lesson I learned there. The bride’s grandparents had immigrated to the United States from Europe to start their families in this land of opportunity. They had struggled through the Great Depression and World War II, and this young woman, a promising attorney, represented the culmination of their hopes. Her elderly grandmother, living on a fixed income, had chosen to give her a family treasure, a large, ornate cut glass serving bowl. The bride, recognizing that this was a cherished object, protested to her grandmother, saying, “I can’t take this from you!” Her grandmother replied, “I received this when your grandfather and I married. Now that you are making a new life, I want you to have it so that you never forget who you are or where you came from.”

I was reminded of that incident recently when I read these lines by the 17th-century Japanese poet, Basho: “I do not seek to follow in the footsteps of those of old. I seek the things they sought.” The grandmother did not expect the well educated and accomplished bride to replicate her parents’ or her grandparents’ lives. But she did hope and pray that the young couple would remember their roots and face the future with the deeply embedded faith and values of her forebears. For her part, the bride realized that the bowl represented the hard work, sacrifice, pride and commitment of those who loved her.

Within contemporary Catholic health care, formation programs (formerly often called leadership development programs) have popped up like mushrooms during the past 10 years. Aimed at preparing the next generation of executive, governance and sponsorship leaders, these programs vary greatly in content, length and process, depending upon the needs and resources of their respective systems. This issue of Health Progress reviews some formation-related issues, reports on one specific program, and dares to prognosticate about the contribution of these programs to the future of the ministry. It also features an article on a notable exhibition focused on the contributions women religious have made, not only to health care, but also to every imaginable aspect of American life.

That article brings me back to the poet Basho’s words. Today’s leadership formation programs were never intended to replicate religious novitiates. Heaven forbid! We neither want nor need people trying to imitate religious founders of health care. Instead, formation programs propose to shape today’s health care leaders into true disciples of Christ.

As Sr. Joan Chittister, OSB, has noted, “Christian discipleship is not about doing what Jesus did, it is about living in this world the way that Christ lived in His.”

Today’s formation programs afford contemporary leaders the opportunity to examine their own experience in light of current cultural and health care contexts and in accord with our faith tradition. These programs enable them to express their lived spirituality through the ever-changing ministry of Catholic health care.

It is only in this way that we can authentically remember who we are, where we have come from, and know where we are going as we carefully treasure the gift we have received.

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