



HEALTH MINISTRY VITALIZES PARISHES

When asked how parish-based health ministry (PBHM) contributes to the life of her parish, Deborah Zatkowski, a member of St. Mary's parish health team in Franklin, MA, responded, "It enhances relationships within the local community and shows that our parish has a substantial, serious commitment to its people, truly valuing each part of a person's life." To the same question, Rev. Tom Walsh, the pastor at St. Mary's, replied, "PBHM offers an excellent opportunity for staff and other ministries to reach out to the parish family with compassion in ways that often lead to spiritual healing. Parish health ministry is in the nature of what a parish is." Both responses evince an expansive and integrated vision of parish in which health ministry adds to the vitality and well-being of its community.

Over the past few years a convergence of factors—including changes in healthcare delivery, in parish demographics, and in generally accepted ideas of what constitutes healthy living—has presented a wonderful opportunity for churches to reclaim the connection between health and faith and make it operative in the everyday lives of parishioners. The parish community is the ideal setting in which to address health issues, because:

- It is the only remaining institution in our society which gathers together all socioeconomic strata of people from birth to death, and as such

*Health
System Helps
Parishes
Add
Meaning to
the Parish
Community*

BY ROBERT
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can become a voice for those who have fallen through the cracks of institutionalized healthcare.

- It is a place of trust and caring relationships that will support behavioral changes needed to stay healthy. (Up to 70 percent of health outcomes are within the control of the individual and the community.)

- Communities become more vital and enlivened when parishioners care for one another in a health ministry. Trends indicate that health ministry attracts a new group of volunteers to parish activities.

- Most significantly, the parish setting follows Jesus' own healing mission, restoring people to wholeness. PBHM is as integral to parish life as teaching and preaching are.

OVERCOMING OBSTACLES

It must be pointed out that many churches—pastors, staffs and parishioners—neither share this vision nor fully understand the value of connecting health and faith on the parish level. While their numbers are increasing, to date only a few parishes have begun to address the health needs of their communities in any comprehensive, integrated way. Obstacles can diminish, or even eliminate, the possibility of starting a parish-based health ministry. Also, as often happens when change and innovation are on the horizon, fear and misunderstanding may inhibit development of a PBHM.

Fear surfaces over issues of liability, cost, and what might be called psychic exhaustion. Liability and cost are important considerations and need to be addressed. However, parish health ministry is primarily holistic and pastoral, not clinical, which reduces the risk of liability and litigation. Parish nurses, if part of this ministry, usually carry their own liability insurance. As for cost, PBHM can be supported either by volunteers or salaried personnel paid by funds at the disposition of the



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pastor or the pastoral staff. So neither liability nor cost presents notably different concerns than other parish ministries.

Psychic exhaustion is almost endemic in present-day parishes. In response to proposals for PBHM, it is commonplace to hear, "Our plate is full. We cannot take on another thing." But PBHM does not create new needs. It responds to needs already present. In fact, if well conceived, PBHM provides a way of integrating and consolidating related ministries so as to reduce the workload, not increase it.

In large measure, misunderstandings are attributable to how "health," "healthcare," and "parish" are defined and understood. If "health" means only the absence of disease, "healthcare" means treatment of disease, and "parish" means a place of sacrament, ritual, and catechetics with little community outreach, then the connection between health, healthcare, and faith makes little sense. When our idea of health moves beyond clinical definitions to one that embraces the healing and wellness of the whole person—body, mind, and spirit—and when "parish" integrates sacrament, prayer, and teaching with a genuine commitment to engage and empower the community to respond to its identified needs, then health ministry will take root and succeed.

THE OFFICE OF PBHM

The leaders of the Caritas Christi Health Care System and the Archdiocese of Boston have embraced a vision that promotes and sustains parish health ministry. Long before coming to Boston as archbishop, Card. Bernard Law's pastoral vision for parishes incorporated health and social ministries as integral components. In 1988 at the Eighth Synod of this archdiocese, the leaders stated, "[P]arish community members must feel touched by health care and social services concerns, and be linked to one another and to those who are served" (Archdiocese of Boston, *Pastoral Plan for Mission*, Boston, 1989, p. 40). In February of 1996, the chief executive officer of Caritas Christi, Michael Collins, MD, established the Office of Parish Based Health Ministry. It has become a significant part of Caritas Christi's commitment to extend its mission of caring into local communities.

Through the Office of PBHM, Caritas Christi

serves parishes by providing a resource to help them establish and maintain an effective health ministry. Emphasis is on concrete, self-sustaining approaches which minimize demands on parish staff. The office collaborates with parishes to establish health teams or parish nurse programs; to recruit, screen, and train volunteers; to coordinate a parish health-needs assessment; to design and implement a pastoral health plan; and to connect with external and community resources. We then remain available for consultations, evaluation, and ongoing training. A quote from the Catholic Health Association publication *Partners in Healing* comes to mind: "What is needed is a partnership in which health ministry organizations and parish churches combine their resources to create a healthy living environment." (St. Louis, 1995, p. 7).

In the three years since the Office of PBHM was established, 45 parishes/congregations have initiated a health ministry, and over 60 parish nurses (more than double that number if St. Anne's Caritas Christi Hospital in the neighboring Fall River diocese is included) have begun serving their local communities. Most important, parishes have found a model that helps them to compassionately and effectively address the needs and hopes of their people in this area.

BEGINNING A PBHM

Once parishes understand the basics of health ministry, many begin by undertaking a holistic health needs assessment of their parishes. After the parish has identified and prioritized needs, a health team and/or a parish nurse can begin to develop a plan to address them. The needs and resources of each parish are different and each ministry evolves and takes on its own identity in its response. A verse from the Spanish poet Antonio Machado gives insight about the process: "The path is made by walking" ("Caminante"). It is interesting, though, that when health needs assessments are done, inevitably loneliness, stress, and issues concerning the homebound and their caregivers emerge as priorities in all parishes, no matter what their economic or cultural composition.

The relevancy and sacred nature of PBHM becomes most visible as the ministry is practiced—when parish nurses or other health ministers (not

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