

FORMATION, MISSION MEET IN TIJUANA

At the invitation of Sr. Colleen Settles, OP, chief mission integration officer for Providence Health & Services' California region, I joined a group of senior leaders from her system for an international mission immersion experience in mid-October 2013. Providence California has taken groups of 16 of its system leaders to Tijuana, Mexico, for the past several years in a program structured to afford a variety of opportunities for interaction with the people there. I wanted to see what adding an international immersion experience can mean for a Catholic health system's model of senior leadership formation.



BRIAN SMITH

During our five days in Tijuana, we worked side by side with families and communities building safe and sturdy homes to replace their shanties. We talked with people who are the faces of immigration: migrants recently deported from the U.S., workers employed in American-owned factories and those with green cards who

cross the border daily for work. But what gives this international experience a formation dimension is the way reflection, journaling and group interaction is woven into the schedule. The model reminds me of a statement often attributed to St. Ignatius of Loyola: "Pray with one foot raised." Time must be taken for contemplation and prayer, but with one foot raised, you will be ready to move to where God is calling you next.

Providence has developed the program in partnership with Esperanza International, Inc., an organization that makes the immersion experience extremely easy for groups coming from the U.S. Esperanza has an experienced and knowledgeable staff, provides safe, comfortable accommodations and collaborates with a variety of health and social service agencies in the region. The cost of the program is approximately \$300 per person, which covers all costs from the time a participant is picked up at the border to his or her return five days later.

An effective formation tool used in the Providence program is a journal organized around the system's five core values: respect, compassion,

excellence, justice and stewardship. Each day, participants are asked to reflect on journal questions relating the day's activities to one of the core values and relating the day's experiences and insights to qualities of health care leadership. I observed how leaders were experiencing the core values of their system at a new level, both personally and professionally. The opportunity to view these values through the international experience brought the words to life. It was as if we needed to be in an unfamiliar space, a pilgrim place, in order to reconnect to these core values' deepest meaning.

Let me give a few examples of how the immersion experience and formation process work together. Day 4 is viewed through the lens of justice. On that day, we visited *Albergue Las Memorias*, (The Memories Hostel), an AIDS hospice which currently has 85 residents. It is a place where people who are HIV-positive or who have AIDS come for medications, food, housing and emotional support. The hospice motto is, "We live with dignity."

We were told that the health system in Mexico has given up on this population. The Mexican government supplies the medications needed for the hospice residents, but it is difficult to find hospitals or long-term care for them, because there is still a stigma attached to AIDS. This, the only place in Tijuana where this population feels welcomed, is a holy place where memories of judgment, rejection and scorn are being healed and replaced with love, acceptance and community. Many of the residents are doing well and help care for the ones who are not.

That same day, we were brought to a section

of the border at the Pacific Ocean. On the Mexican side of the border are beautiful monuments commemorating the day the international commission approved the boundary, and there is a boardwalk along the beach with shops and restaurants. However, the view from Mexico to the U.S. side is a prison yard. There are two walls along a stretch of desolate beach, punctuated with high-powered lighting and guard towers and vehicles on patrol. Art and messages are painted on the Mexican side of the wall. One painting is an upside-down American flag signaling distress. A message in Spanish proclaims, “Mr. Obama, tear down this wall!”

That evening, we visited the guests of *Casa del Migrante*, a refugee center in Tijuana that helps people who are deported from the U.S. Sharing a meal and hearing the stories of these individuals was a life-changing event for me, and I look forward to sharing their stories in greater detail in the next issue of *Health Progress*.

By the time we gathered for group reflection on the evening of the fourth day, we were more exhausted from the emotional and spiritual work than from the previous two days of physical labor — which included lifting concrete blocks and cement to build new homes.

The formation piece of the day involved talking about our feelings of hopelessness and helplessness in dealing with issues of immigration reform, border safety, cheap labor and what the Gospels and our Catholic heritage and social justice tradition can teach us. Seeing the faces of real people and talking to those who are living through these injustices gave a whole new meaning to “acting on behalf of justice.” No presentation on social justice has ever had as deep an impact on me as that fourth day in Tijuana.

On the morning of our last day, we visited a clinic built on one of Tijuana’s trash dumps. *Centro de Promocion de Salud Esperanza* (Hope Center for Promotion of Health) was built in 2007 and is part of Serving Hands International.

This local center is administered by the Sisters of Santa Marguerita and Mary of the Poor. The sisters told us they serve here because this is where the poorest of the poor in Mexico live — people with tremendous social and health-related needs.

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The people who live in the dump are called “trash pickers.” They wait for the garbage trucks to arrive so they can sort through the trash to find food they might be able to eat or items they might be able to use in their homes or sell. High rates of birth defects and disease, encounters with rats and occasional explosions caused by methane gas seeping from the dump are ordinary realities for these people.

Stewardship was the core value for reflection on this last day. One of the journal questions asked, “What did the clinic teach me about stewardship?” The clinic currently serves between 20 and 24 people on an average day, helping them with a variety of medical needs including diabetes, hypertension and prenatal care. Yet, the sisters feel they are not utilizing the clinic to its full potential. The executive director told me, “We could see 50 people a day, but transportation is a problem for our patients. It is dangerous to walk through the dumps, and there is very little pavement to allow our van to navigate through the mountains of trash to pick up patients. We are working on other models to bring the care to the people through community health workers, *promotores*.”

In our age of cutting operational expenses in our hospitals and clinics to meet declining reimbursements, it occurred to me that we may need to

be asking a different kind of stewardship question. Sometimes stewardship may be not only about belt-tightening, but also may be about recognizing areas in which we have the capacity to serve more people or to provide more resources, and finding ways to do that.

The success of this Providence California experience is in the way it links formation to powerful encounters with people and their needs — helping build homes for people who lack adequate housing, visiting those who daily experience the injustices of our political and economic systems, meeting inspiring individuals who are doing their best to serve the needs of the poor and marginalized. Through well-crafted questions, time for prayer and reflection and opportunities to build relationships through sharing these powerful moments, the process helps health care leaders reconnect with their system’s Catholic heritage and values and to the Gospel stories foundational to both.

AN INVITATION

I realize there are other health care systems that incorporate into their formation programs experiences of service to the poor in their city or region. I am aware of only a few, though, that offer international immersion and outreach. I would be interested in learning about more.

I also would like to extend an invitation to all mission leaders to join me next year in Tijuana. If you would be interested in experiencing an international immersion trip with an eye to incorporating such an experience into your senior leadership formation program, please contact me, bsmith@chausa.org. *Esperanza* can accommodate up to 70 people, so let’s think big! After I gauge the level of interest, we will look for dates to share this special formation experience in fall 2014.

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