

EDITOR'S NOTE

Lately I've been following the misadventures of wrestling legend Hulk Hogan, whose well-oiled gift for spectacle and merchandising seemed fairly benign. Recently the Hulkster was booted from WWE (World Wrestling Entertainment) for wildly racist comments leaked through sex tapes. Just two months later, Hogan was named brand ambassador of the fantasy sports website Fan Picks. He is, apparently, an eminently transferrable brand.



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STEINER

The cynical among us — sometimes within us — may take a jaded view of branding and its relationship to identity. After all, we have witnessed the recent diesel emissions dupe by Volkswagen, the fall from grace for the mother of home cooking Paula Deen, and the debacle of the Lance Armstrong Foundation/Livestrong Foundation after Armstrong admitted, finally, that he used performance-enhancing drugs. We feel betrayed when a dissonance between identity and brand is revealed.

Yet brand is crucial to the success and integrity of any good business, institution, campaign, legacy, venture, mission or ministry. Not that there isn't plenty of hard work, creative energy and ongoing discernment, but the best application of brand to identity appears as seamless and inseparable as body to soul.

In recent years, Catholic health systems have spent hundreds of millions of dollars on branding efforts to better reflect their identities, as well as the changing realities of U.S. health care. Re-branding addresses the centralization of a system's identity and the many hospitals, medical practices and long-term care facilities that reflect its brand in local communities or across the country. For example, a number of systems have changed their names from "Health Care" or "Health System" to simply "Health," in a ministrywide commitment to supporting the healthy individuals and communities envisioned for population health and encouraged by the Affordable Care Act. Personally, I miss the "Care," both because compassionate care is an important element of many of our ministries' mission statements and because the word resonates with the meaning and utterance of *caritas*.

Vatican II provided its own motivation for branding activities. The council sent powerful messages about identity and ministry to religious and laypeople alike. Religious congregations were challenged to re-evaluate the meaning of their religious service, and some sisters left the increasingly corporate world of health care for

other avenues of ministry. At the same time, laypeople were encouraged to take on roles of leadership and service in many areas of the church's apostolate. It has taken a while, but the logos and language of congregational charisms have transitioned into new forms of expression that convey the broad mission of Catholic health care and the inclusiveness of the ministry. We are still in transition, so who knows whether we have gone too far or far enough?

To find out, we have newfound interest in ways to measure and evaluate Catholic identity. We have designed formation programs and mission integration practices rooted in Catholic tradition, Scripture and theology to ensure that what is Catholic about our health care services and institutions is so much more than compliance-deep. At the moment, we have a pope who personifies Catholic identity in a way no one has in a very long time.

There isn't an issue of *Health Progress* that hasn't given the factors of change and challenge in health care their due. At the same time, any professional communications expert will tell you the first commandment of building successful brand identity is consistency: message is consistent, images are consistent, actions are consistent. The particular genius of Pope Francis in joyfully carrying his daily cross into the culture of encounter is that he consistently clings to his Catholic identity, invites everyone he meets to cling to what most defines them, and then personally and persistently finds the common ground on which to have a dialogue.

The pope's example is good model for expressing and enhancing Catholic identity in the rapidly changing health care environment, where consistency can be mistaken for intolerance, or compliance can be taken for identity. There are very important questions to work out here and every good reason to get it right.

Fortunately for the readers of this issue of *Health Progress*, we have gathered some especially wise and practiced voices in Catholic health care to lead us through the discussion. We hope you find their articles thought-provoking and inspiring.

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