

# Toward a Theology of Sponsorship

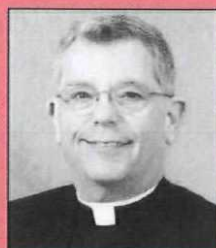
BY FR. MICHAEL D. PLACE, STD

**I**n 1988, the Commission on Catholic Health Care Ministry issued its landmark report, *Catholic Health Ministry: A New Vision for a New Century*. As part of that report, the commission articulated a "Vision for the Future" that had several components. One of them was sponsorship. The vision said:

The health ministry of the future will employ new models of sponsorship to ensure continuity and stability. Canonical models based on lay sponsorship will predominate, and there will have been an evolutionary transfer of responsibility as religious congregations withdrew from sponsorship. While models will differ in particulars of organization or of juridic personhood or in their relationship to religious congregations, all will be held to the same criteria of accountability to the church.

In many ways, the commission's explicit use of the term "sponsorship" helped solidify the relevance of the word for the Catholic health care ministry. This affirmation was important because the concept and word are relatively new to Catholic health care and, in fact, to the life of the church in the United States. Sponsorship emerged, in part, as a response to changes in the way in which what today we speak of as the *health care ministry* was organized and, in particular, to the way a religious institute (religious congregation), apostolic society, or diocese related to the apostolic works through which they enfolded the charism of the institute or society or the ministerial works of a diocesan church. What, from an organizational perspective, had been a fairly simple relationship between religious or diocesan authority and a particular apostolic work (often carried on in an institutional setting and supported by properties that clearly were "church goods") became more complex.

In time, three distinct but essentially interrelat-



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ed dimensions of what today we speak of as "leadership" emerged: sponsorship, governance, and management. As those among us who lived through this evolution can attest, the path to these distinctions was not a simple one and did not occur in an even manner across the landscape of Catholic health care. Although in time a fair amount of consensus did emerge around certain elements of each of these dimensions of leadership, a great deal of variability and distinctiveness also has been present. This combination of consensus and variability should not be surprising, because in many ways such a combination has been a hallmark of the Roman Catholic tradition and, most especially, of "religious life" in the church.

Any scholar of organizational life who attempted to write a history of this evolution would marvel at the courage, ingenuity, and spirit of adaptability that this process of change required of all who were involved. But these developments also were occurring in the context of, and, at times, as the result of, profound transformations in one of the instruments used to carry on the healing mission of Jesus—that is, the "business" and practice of health care delivery—and in the ecclesial context in which what was then called the "apostolate" was conducted. I will leave for another time an attempt to summarize that process of transformation. I trust, though, that all would agree that the "how" of health care was substantially altered in the last half of the 20th century.

As regards the ecclesial context, the Second Vatican Council inaugurated an almost revolutionary reflection among vowed religious and members of communities of apostolic life about the nature and purpose of "religious" life. It is fair to say that—although, for a variety of reasons, the numbers of religious was to decline over the years during this process—the heart and soul of "religious life" is being lived and practiced today in the United States with a renewed intentionality and purposefulness that is a great gift to the life of the church. The vibrancy of this new moment

in religious life is another example of the critically important and essential role of religious life in the family of faith that is the church.

The early years of postconciliar reflection also provided an enriched understanding of the role of the church in the world and of the pursuit of justice as a constitutive element of the church's mission. The phrase "preferential option for the poor" gave new meaning and purposefulness to an already lived experience.

The council also invited the church to embrace a radically new understanding of the role of the laity. By virtue of their baptism, the Christian faithful explicitly share responsibility for realizing the mission Jesus gave to his church. Although early reflection focused on how this was to be done in the family, in the domestic church, and in society, the laity over the years—first at the level of practice and then at the level of theory—assumed many institutional leadership roles previously identified with clergy and religious. The religious women who sponsor Catholic health care have been in the forefront of both encouraging and supporting this transition. Finally, the council retrieved a richer understanding of the nature of the church itself—an understanding that, in postconciliar thought, is understood as a "communion" theology, one aspect of which is that the local or diocesan church is understood as being truly "church" and not just a branch office of the universal church. In such a perspective, the diocesan bishop is truly "pastor" of a local or particular church, with responsibility for "overseeing" and "coordinating" the ministries of the particular church.

Finally, the postconciliar church began to use a new vocabulary, one that sought to organize and give direction to an already lived experience. A word previously associated with the polity of parts of the Protestant tradition, the word "ministry," came to be used in Catholic circles. Although the evolution of its usage has been complex, it has provided a platform for synthesizing certain aspects of the four developments just noted. Whereas previously we spoke of the *apostolate* of health care, we now speak of the *ministry* of health care, as we do of religious education, Catholic education, and forms of Catholic social services. We also are struggling, by using phrases such as "lay ecclesial minister," to articu-

late the role of those members of the laity who exercise real stable leadership and authority.

If we are to understand the current situation of sponsorship in Catholic health care, I would suggest that we need to appreciate these three essentially interrelated change processes:

- The evolution of the modalities of practicing, delivering, funding, and organizing health care in the United States
- The postconciliar dynamics vis-à-vis our understanding of "religious life"; the role of the church in the world, especially with regard to the works of justice; the role of the laity; the nature of church as "communion"; and the ministerial life of the church
- The acceptance, in theory and practice, of the distinction between sponsorship, governance, and management

In fact, the use of the word "appreciate" fails to capture the complexity of our current situation. This is because even though we might be able to identify these distinct dynamics, we never live apart from them. And depending on where we "stand" we can have quite different, if not conflicting, appreciations.

Allow a simple example. Say I am a 40-year-old individual who is a child of a living parent, married to a spouse, parent of a child, and a sibling in a family of three. Using a somewhat technical phrase, the above can be described as the components of the gestalt ("field") that is my "family life." This "field" has five components: self, child, spouse, parent, sibling; and five relationships: self to self, child to parent, spouse to spouse, parent to child, sibling to sibling. Although I live in a "field" with components and relationships, my experience of it will depend on where I "stand" in the field. For example, if my spousal relationship is rocky, the experience of parenting could be affected. If a parent is dying, my parenting could be affected. If I am critically ill, I will have different spousal expectations. But the family "field" is not the only one in which I live. There are also the "fields" of work, of recreation, of neighborhood, among others. These fields intersect with and, at times, penetrate each other and affect when and how I "stand in" or experience life and, consequently, how I describe, understand, and value life.

I use this example in order to propose a hypothesis: How one experiences and (conse-



quently) describes, understands, and values "sponsorship" is significantly affected by where one stands in the "field" or the gestalt that is Catholic health care. Our ministry is a gestalt that, in part, has as its components the triad of sponsorship, governance, and management, the dynamics of health care delivery, and the current theological context, in particular, the themes previously noted. In addition, the field has a depth to it that is one's personal history, as well as the history and traditions associated with all of the above.

As the dynamics noted earlier began to evolve, it seems to me, certain processes simultaneously emerged. For the sake of clarity, I will describe these processes as occurring on vertical and horizontal axes.

**Vertical Axis** As the sponsorship role became distinguished from governance and management, "meaning" issues emerged. This is not to say that meaning had been previously absent, but that as the roles became more distinct, meaning had to be reappropriated in the next context. Critical to this process was the realization that sponsorship itself was about being connected to meaning itself, that is, to the healing mission of Jesus Christ and the bringing about of the Reign of God. Consequently, sponsorship is something dynamic, not static. Historically, this dynamism has been nurtured by the evangelical counsels associated with the religious or charismatic element of church life.

Not surprisingly, this dynamic dimension also had a sense of responsibility not just for connecting with meaning, but also for staying faithful to that meaning. Because, for us as Roman Catholics, the meaning of Jesus' healing mission and the Reign of God is made sacramentally present within and mediated by the church, sponsorship also involves relationships with the church. On the vertical axis, we have been living through various processes and experiences by which we have struggled with meaning, with relationships, with the "why" of sponsorship.

**Horizontal Axis** Because we are enfleshed and social beings living in a church that has an institutional dimension, we also have been engaging what I would call "sociological processes." In other words, even as we sought to understand the "why" of sponsorship, we also have struggled with the "how" of sponsorship. Some would suggest that, in the best of all worlds, one would resolve the "why" questions before moving into the "how." Because of all of the complexity already noted, we have not been so fortunate. In effect, we have not let the perfect get in the way of the good. How could we? It is not as if we

were creating something from scratch—we were already in existence, and in the midst of ministering to those in need.

And so it is that, over the past years, multiple "hows" of sponsorship have emerged. Attempting to categorize them would be difficult, lest the category denote an unintended value judgment. In fact, some forms of contemporary sponsorship remain clearly identified with the charism of a particular religious institute or ministry of a diocese. There is another experience of sponsorship that is a shared responsibility of two or more institutes. Other expressions of sponsorship have utilized the canonical options of *lay association of the faithful*, *private juridic person*, and *public juridic person* as instruments for carrying on sponsorship. Within these modalities, the role of religious varies as does the role of the laity. It is not unimaginable that other "hows" of sponsorship will emerge. Just as the various charisms of religious life have nurtured the life of the church for centuries, so, too, these multiple "hows" of sponsorship enrich our ministry.

Now allow me to bring our reflections on the gestalt or "field" and the two axes together.

First, it should not be surprising that where one stands in the "field" described earlier would impact how one would approach or experience the developments on either axis. A heightened sensitivity to the prophetic urgency associated with the Reign of God would impact values and priorities, just as would heightened attention to the role of the laity. Management might pose questions about sponsorship that would be quite different from those posed by a community historian. Similarly, historical memories, positive and negative, can impact where one will stand in the "field" and how one approaches development on either axis.

Second, as human beings gifted with an intellect, we have a desire to understand our world, our social space. Although energized for a while by creativity and newness, in time we will seek the security that comes with understanding and, God willing, wisdom. It is not surprising, then, that even as the dynamics we have been describing have evolved, there has been a desire to step back, reflect on our experiences, and provide a base of understanding from which we can approach the future. This desire was affirmed by the CHA Sponsor Special Committee in 2000 when it recommended that "to meet the needs of sponsors as stewards of the Church's ministry," we as CHA should focus on:

- Clarifying the meaning and core elements of sponsorship
- Identifying potential new and innovative

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models of sponsorship

- Developing mechanisms for evaluating various approaches to sponsorship, both before they are adopted and after they are implemented

In response to those recommendations, a process of reflection was initiated that resulted the spring of 2001 in an attempt to provide a “working definition” of sponsorship and to describe its core elements (see **Box**). This effort was quite inductive. In effect, as a ministry we stepped back, looked at what had emerged over the years, and sought to capture our experience in a descriptive definition.

Even as that process was being completed, we began as a ministry to develop a new CHA strategic plan. As part of the planning process, we identified the challenges confronting the ministry as well as our preferred future for the ministry. In discussing challenges and futures, the ministry regularly spoke about sponsorship and of its desire that sponsorship be well prepared for the future.

This energy around the topic of sponsorship was captured by CHA’s Board of Trustees in one of the current strategic plan’s “Measures of Success”: It noted that ministry-wide understanding of sponsorship has deepened and that alternative models of sponsorship—in addition to the public juridic person model—have been articulated.

Clearly, the board wanted to affirm the ministry’s desire that present realities be strengthened even as we would explore new possibilities for sponsorship.

In response to the measures of success and after extensive consultation, a work plan was developed in order to contribute to the ministry fulfilling these measures of success. The plan had three components: the articulation of a theology of sponsorship; the gathering of and reflecting on “leading practices” in the area of sponsorship that have been identified by the ministry; and finally, in light of the theological reflection and practices, collective exploration of future opportunities or modalities for sponsorship.

Why a theology? As noted above, much of what has transpired to date has been the result of evolutionary dynamics and inductive reflection. Consequently, it was felt that sponsorship as both a theoretical category and lived reality had matured to the point that it would be strengthened by a more deductive theological reflection that would provide both context and inspiration for identifying leading practices and future possibilities. Because theology is “faith seeking truth and understanding,” it was hoped that the development of such a theology would provide an opportunity to integrate the richness of our faith

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as appropriated in the postconciliar manner, with the lived reality. The goal was not to develop a normative or definitive text, but rather to have a theological synthesis that could serve as a catalyst for a ministry-wide discernment process on the theological underpinnings of our sponsorship activity. Consistent with the measures of success, the articulation of a theology was the means to the end, or goal, of mutually strengthening our understanding of sponsorship. Perhaps such an approach is best described as the ministry engaged in a process that is working *toward* a theology of sponsorship.

As we know, there have been some unintended missteps and misunderstandings as we have worked toward such a theology of sponsorship. In recent months, important dialogues have occurred, allowing us to hear each other’s concerns and hopes, clarify processes, and establish more effective avenues of communication. CHA leadership apologized for any misunderstanding and affirmed that all forms of sponsorship that have ecclesial recognitions are of equal worth and that CHA’s measure of success is intended to strengthen *all* forms of sponsorship, even as collectively we think about the future. The importance of continuing the process of theological reflection also has been affirmed, along with the other components of our action plan. Sr. Teresa Stanley, CCVI, PhD, senior director, sponsor services, will lead this effort and will be assisted by the wise counsel of our Sponsorship Committee and many others in the ministry. By working together and having confidence in the work of the Spirit, who was given to the church by Jesus to lead, guide, and inspire, I trust we will be able to strengthen both our understanding and practice of sponsorship. □

## Sponsorship and Its Core Elements

In May 2001 CHA issued a “Statement on Sponsorship and Core Elements for Catholic Health Care Ministries.” Sponsorship, the statement said, “is the relationship within the Catholic Church which allows a juridic person to carry on the healing mission of Jesus. Sponsorship of an incorporated apostolic work involves both canonical and civil realities.”

Sponsorship’s core elements, the statement said, are:

- **Fidelity:** faithfulness to the healing mission of Jesus, to the spirit and teachings of the Gospel, and to the teachings of the church
- **Integrity:** demonstrated integration of mission and core values by all persons as in all aspects and activities of the organization
- **Community:** communion of persons committed to a common mission and ministry
- **Stewardship:** respect for, protection, enhancement, and sharing of all the resources used in the ministry for the common good