



THE VOYAGE OF DISCOVERY

Mr. Seidl's article serves as an introduction to this special *Health Progress* section on pastoral care in today's healthcare environment. We asked people from a variety of settings to write about how spiritual care is being delivered in their organizations. Their responses can be found in the following pages.

The real voyage of discovery consists not only in seeking new lands but in seeing with new eyes.

—Marcel Proust

Pastoral care, a time-honored tradition within the Catholic health ministry, still has its fundamental responsibility: to offer patients and clients religious and spiritual support. As Abp. Daniel E. Pilarczyk states, "Our ecclesial credibility as Catholic institutions demands that we provide the best pastoral care we can get. With fidelity to the traditions of providing holistic and complete healthcare, pastoral care has taken a rightful and respected place within the health facility."

As delivery of healthcare services has expanded

Today's Pastoral Care Professionals Find Many New Roles

BY LAWRENCE G.
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and diversified, pastoral care has adapted to serve changing needs and settings. In some cases the implementation of new services has raced ahead of an understanding of pastoral care's role within those services.

Pastoral care professionals have a variety of roles, including pastor, clinician, ethicist, educator, and worship leader. These roles and the expectations associated with them must be clear to everyone involved. Unclear or confusing roles result in decreased use of pastoral services, fewer referrals, less participation on committees, and diminished credibility within the institution.

This article describes how pastoral care professionals can clarify their roles as they minister to older persons and others and seek to strengthen pastoral care in a diverse healthcare system.

PASTOR: SPIRITUAL UNDERSTANDING

As pastors, pastoral care professionals most often serve older people, who frequently ask why they are ill—in the sense, that is, of what the illness *means*, rather than what caused the illness. This may be an essentially theological question in which they are attempting to clarify and understand their primary relationships within the context of being ill. Other caregivers can help aging persons answer questions about financial security, housing, and illness, but they do not deal with the issue of human suffering on the spiritual level.

Older people welcome the availability of someone who can process these questions and offer insight, and the most qualified person may be the pastoral care professional. These issues are resolved not in the medical realm but with a spiritual understanding. Trained in listening and assessment, a pastoral care professional can facilitate a person's deeper search for life and its meaning, a search that goes beyond body scans and tests. The pastoral care professional as pastor



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consoles the diminished human spirit and brings to people a sense of hope and connectedness. The pastoral professional understands the value of touch and presence, treatments that other caregivers may ignore.

Because healthcare providers struggle with many of these same issues in caring for their patients, they may well ask the pastoral care professional to counsel them as well; in this way, the pastoral professional becomes a pastor to the healthcare community. Staff members' constant interaction with suffering and pain may challenge their belief systems and compromise the quality and productivity of their work. The pastoral care professional as pastor can often help staff reassert their effectiveness as caregivers.

CLINICIAN

Many pastoral care professionals today seek a more clinical image and want to participate more fully in a team approach to the care of aging people. As part of a more clinically focused team, pastoral care professionals must assess older people's spiritual needs and write care plans that seek to improve clinical outcomes. Through a pastoral assessment process, the pastoral care professional translates the elderly person's history into a theological framework and shares this insight with other healthcare professionals. This helps reveal the relationship between medicine, illness, and people's spirituality.

A care plan makes concrete pastoral care's critical contribution. As a healthcare team member, the chaplain offers direction to people confronting loss, a sense of purposeless, or a confused perception of God.

ETHICAL FACILITATOR

In the past the presence of a pastoral professional on staff conveyed an implied moral authority to the institution. The pastoral care professional clarified and translated the Church's position as necessary and often became the final moral authority.

Today pastoral care professionals serve on ethics committees, but they are more likely to serve as facilitators than as moral experts in resolving issues involving the patient, family, and healthcare providers. The pastoral care professional does not make ethical decisions for the family, but rather raises unspoken issues while encouraging honest and open communication.

The pastoral professional also serves as advo-

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cate for the organization's medical-moral climate. As such, he or she should be versed in policy formation, patient or resident rights, and formation of institutional values as well as medical ethics.

EDUCATOR

Increasingly important is the pastoral care professional's role as educator to the aging community and the local church community. As healthcare shifts to a disease prevention and health promotion model, pastoral care professionals must identify their role in such a model.

As employees and community ministers seek to better understand the patient's or resident's spiritual health, the pastoral professional can offer training through in-service sessions or specific courses. Such a role is important because people must have a healthy mental and spiritual outlook in order to make lifestyle changes that can enhance their physical health.

The educational challenge for pastoral care professionals is to educate others about how they interact with people on a spiritual level. Because pastoral care professionals can minister to only a limited number of people, other caregivers can when necessary offer spiritual support while alerting the pastoral care department about individuals with deeper needs.

WORSHIP LEADER

Prayer is the bridge in the relationship between the person and God. Catholic clients' expression of prayer is built around the sacraments, which they expect to be always available in a Catholic healthcare organization. That expectation still exists, but the sacraments are not always available.

Pastoral care professionals, in response to aging persons' needs and frustrations, have begun to experiment with alternative forms of worship, not to compete with the sacraments but to complement them. Rituals, blessings, and other forms of prayer, including in-house television programming, are offered. Pastoral professionals' creativity is essential in finding appropriate ways to enhance the prayer life throughout the organization.

The various roles mentioned here affirm pastoral care's traditions while pushing pastoral professionals to explore new ways of ministering to older people. Of course, the elderly themselves will help shape the functions of tomorrow's pastoral professional. The voyage of discovery has just begun. □