



Turning Worries Into Sacraments

BY TERRY WEINBURGER, M.S.

As a mission executive leader for a Catholic-sponsored health care system, I worry about the themes and issues that will inform, form and transform Catholic-sponsored health care systems in the next two or three years. A metaphor emerges as I reflect on these worries — a sea of change or, as a colleague recently suggested, a *tsunami* of change is before us all. In light of this *tsunami*, can we recognize and name our worries, then transform them into 21st century sacraments?

Time shift to a day in July 2012 — Let’s imagine that on this day I turn off my alarm and look at the date on the calendar clock. Shreds of my dream cling as I contemplate today’s “to do’s,” which include a presentation to colleagues on my most pressing worries. I decide to summarize mine like David Letterman’s Top 10 countdown, but I can only come up with eight serious enough to include. That’s fortunate, I suppose:

Number 8: Nearly all leaders of Catholic-sponsored health care systems believe health reform’s insurance mandate will serve to transform the health care delivery system into a more person-centered care delivery model and one that reflects our Gospel values. We also believe the mandate will help address the crisis of 50 million people who lack health insurance. Even so, millions will remain uninsured. Can we not come together as a nation to recognize the *moral imperative* to provide a plan that recognizes the inherent worth of all Americans, which entitles them to health care?

In the early church, sacraments were considered visible signs that brought us together, and they were celebrated.

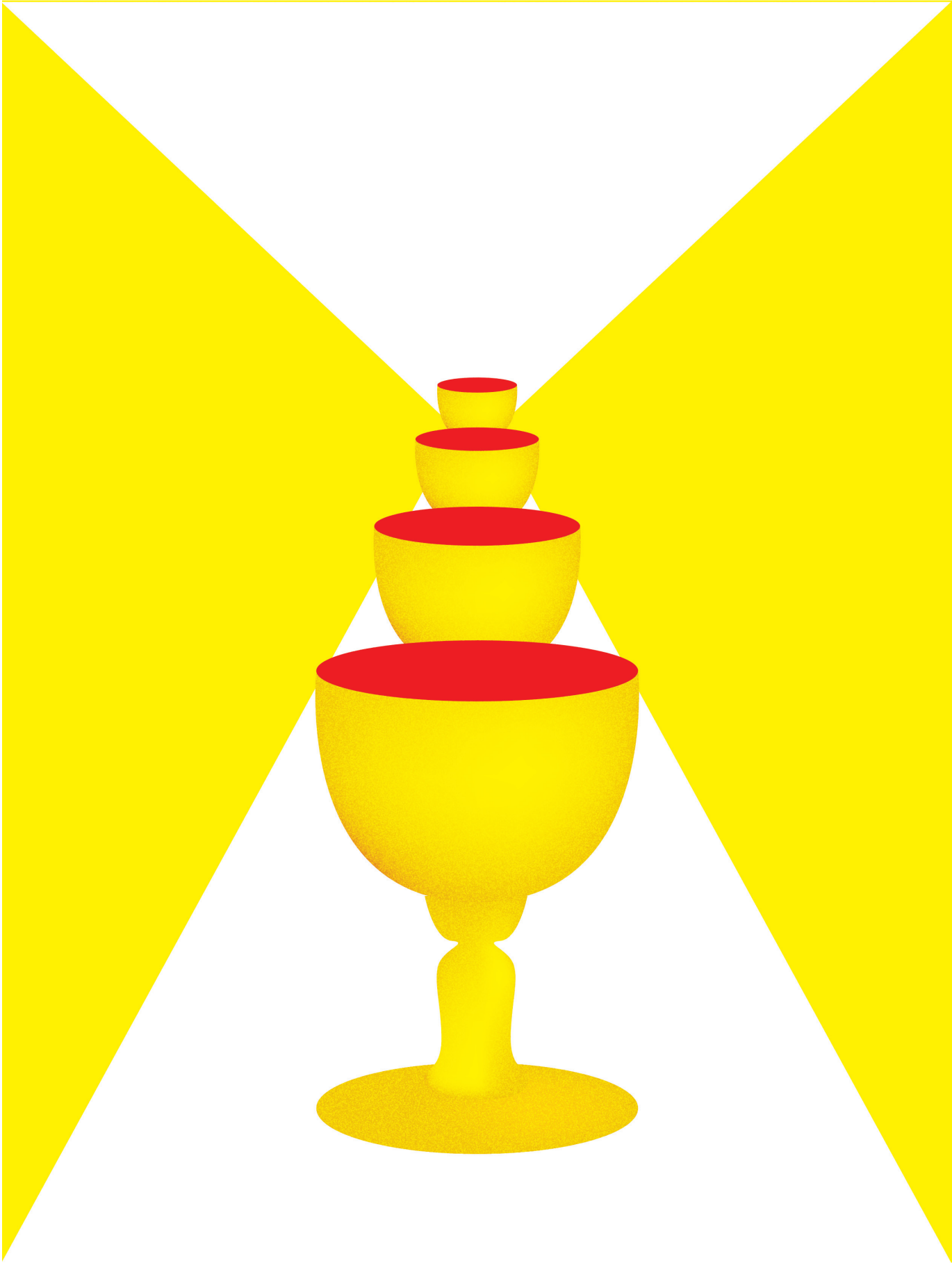
St. Augustine, the 4th century bishop and doctor of the church, talked about sacraments as unifying. He said, “People cannot be united in any religion, whether it be true or false, unless they are brought together through a common sharing of

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some visible signs or sacraments; and the power of these sacraments is so effective that scorning them is considered sacrilegious.”¹

Do we need some 21st century, visible signs for the road ahead?

If we elevate this worry to the notion of a sacra-



ment, would that garner our collective advocacy?

Maybe we need a 21st century sacrament of inclusion — a sacrament that reflects the right of all to coverage in a health care plan. Watty Piper's classic, *The Little Engine That Could*, comes to

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mind as a reminder that we *can* craft national legislation that works for all. We need to keep echoing the mantra, "I think we can, I think we can, I know we can ... a health care plan for all."

Number 7: Is a for-profit structure a viable alternative for our Catholic health care ministry? Can we sustain an increasingly financially strapped, faith-based Catholic health care system, inviting others to join our ministry when they share our values? Recently many nationally recognized contributors from theology, law, finance, academics and rating agencies have come together in various forums to discuss these questions. Against the backdrop of Catholic social teaching, CHA is addressing this topic as part of a three-year study. Can we pray together that the Spirit will guide our continued consideration of these important questions related to membership and take pride in a CHA process that has been inclusive, transparent and civil?

Shall we call this our sacrament of discernment?

Number 6: I'm worried about the way our national public discussions over health care reform dialogue have been reduced in recent months to the singular issue of "contraceptive coverage." A recent article in *Modern Healthcare* by the managing editor, Neil McLaughlin, was titled, "Shaky Outlook — Roman Catholic Healthcare Being Dragged Down by Inflexibility."²

Time shift to 1968 — I recall the enthusiasm about "aggiornamento" (Pope John XXIII's Italian for "updating"). Change was in the air, and a drawn-out debate about the topic of contraception led a papal commission to recommend a change in the church's teaching. When Pope Paul

VI rejected the commission's recommendation and issued his encyclical *Humanae Vitae*, both clergy and laity questioned the church's moral competence in matters of sexuality. The result has been a church "in crisis" for more than 40 years.

Peter Steinfelds, a former senior religion correspondent for the *New York Times*, identifies this singular event as a key contributing factor to the ongoing crisis in American Catholicism.³

In the present crisis, we could benefit from the words of John J. DeGioia, president of Georgetown University. His March 2, 2012, letter to the members of the Georgetown

community called out the lack of civility and less-than-respectful behavior from public and media commentators in response to Sandra Fluke, the Georgetown law student who offered her testimony in Congress regarding access to contraception as part of basic health care coverage.⁴ As DeGioia noted, St. Augustine invited a more civil discourse: "Let us, on both sides, lay aside all arrogance. Let us not, on either side, claim that we have already discovered the truth. Let us seek it together as something which is known to neither of us. From then only may we seek it, lovingly and tranquilly, if there be no bold presumption that it is already discovered and possessed."

Do we have room in our lexicon for another sacrament called civility?

Our heritage is rich and diverse. Our Catholic social teaching calls us to advocate for justice within the contemporary needs of society. We

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should all be worried about the lack of voices for all the additional issues we espouse as providers, employers, advocates and citizens. As the church's ministry and CHA's "Shared Statement of Identity" proclaim, we are impelled to advocate and defend human dignity, attend to the whole person, care for individuals who are poor and



vulnerable, promote the common good and act on behalf of justice, sharing and stewarding our resources in collaboration with one another. But the blogosphere speaks little of these critically important issues today.

Number 5: I'm worried that we are still looking in the rearview mirror, rejecting ideas without suggesting new ones as we seek to reconfigure the care delivery system from the current hospital-centric model. Change is here to stay, it will not be trouble-free, and leaders will need to lead and have the discipline to rapidly transform our health care systems into accountable care organizations or other structures that will thrive under the quality demands and reimbursement changes of new Medicare rules. Are we moving quickly enough? Are we able to focus on a value-based, person-centered care model, leaving behind the body-shop model of fixing the limbs and repairing organs when it runs down or is broken? Can we quickly transform our systems to a community health model supporting self-directed management of chronic illness and then swim upstream toward a preventive care model? Can we adapt our systems in a sustainable way?

Might this be our sacrament of transformation?

Number 4: I'm worried about the stresses our associates — our employees — experience each day. They journey with individuals who are in pain and suffering. Our caregivers live in solidarity with our patients as they encounter the life cycle from birth to death. They stand on the abyss of despair, giving hope. Can we lead our associates through the necessary transition so that their gifts and talents are treasured and transferred into a new model of care? We all want our associates to burn brightly but not burn out. To sustain them, are we sufficiently reinvesting in training and retooling? Are we nourishing them with meaningful spirituality at work, so they do not succumb to burnout or compassion fatigue? Are we appropriately and routinely recalibrating assignments so that a just work-life balance characterizes our health care environments?

Could this be our sacrament of balance?

Number 3: As we individually bond with our electronic handheld technology to constantly stay connected, I'm worried that we are slipping from the attendant responsibility to stay fully present, in the moment, with each other during our meetings. Have we succumbed to a BlackBerry, Droid, iPod, iPad addiction? I witness many of us bowing to gaze at our laps in order to read yet another text message or email rather than remaining fully engaged and attentive to our colleague who is speaking.

In a spirit of good humor, imagine the disciple Matthew checking his latest tax tables, or Andrew opening an email to check the market price of fish, or Luke getting caught up on the most recent evidence-based medical protocol, all in the upper room at a final meal, distracted and texting while stories are shared, freshly baked bread is broken and new wine is poured out for all. As a student of ancient languages, I know the words *health, healing and holiness* come from the same Anglo-Saxon root word. To experience the blessings of all three, we must remain fully present — and that means we need to pocket our devices and focus on the people around us.

Authors James E. Miller and Susan Cutshall offer us a guide for staying in a caring relationship by suggesting that a “healing presence is most effective when it is least active.”⁵

Do we need a 21st century sacrament of presence?

Number 2: *MAD* magazine has published for more than 50 years. I envision Alfred E. Neuman, the fictional mascot cover boy, dressed in a traditional white physician's coat. Grinning, he asks, “*What, me worry?*” I worry about the shortage of nearly 40,000 family physicians by 2020.⁶

This shortage is augmented by doctors who gravitate to specialty and sub-specialty fields because of increased earnings to be realized. I also worry as we contemplate bringing physicians into our future accountable care organizations. The surge of physicians employed and affiliating with our health care systems deserve a robust mission orientation to assimilate and bond with our ministry, to see their healing work as a calling and extending our healing heritage. A servant physician leader deserves an attendant formation program that many Catholic-sponsored



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systems are recently developing as part of the recruitment and on-boarding process.

We have some sacraments of initiation — might we complement these with a *sacrament of formation*?

Number 1: As we live in the tension of the sacred and the secular contemporary American culture, I'm reminded of the Franciscan priest Richard Rohr's description of our dualistic thinking resulting in our judging and succumbing to the notion that "one is good and the other is less good or even bad." He labels this "stinking thinking" and includes religious imperialism as one of the "isms" we are susceptible to — even among nice people (which we all are, right?) He offers us the "both-and" model, also called nondualistic or contemplative thinking. We more clearly recognize this model as we mature during the second half of life.⁷

In the organizational development literature, Rohr's model is akin to polarity management. I worry that we may become too wrapped up in our ethnocentric Catholic identity. While rich and robust, we need to celebrate the concept of service as taught by most major religions.⁸ There is a common attribute in the definition of service that connects us all with the Divine and threads together a confluence of religious beliefs systems:

In Christianity, it is *agape*, charity and brotherly love — being motivated by love, acting humbly and surrendering unconditionally to God, as in "love your neighbor as yourself."

Judaism calls it *hesed*, being kind to others, showing love for and serving others, even if such actions are inconvenient, inspired by the belief that it is God's will to be of service.

Hinduism advocates *Karma yoga*, acting without being attached to particular results, to serve God and enhance the well-being of others.

Islam requires charity and brotherly love, helping to lift the burden of those who are less fortunate, treating others with dignity and courtesy

and appropriately sharing wealth.

These common beliefs emanate from a moral philosophy of altruism — serving others without the expectation of personal gain. In contemporary time, it was the 20th century, German-American Protestant theologian Paul Tillich who wrote: "Any object or event is sacramental in which the transcendent is perceived to be present. Sacramental objects are holy objects, laden with divine power."⁹

Could we call this our rediscovered 21st century sacrament of service, as we experience the Divine in others during our caregiving encounters?

Time shift to around 33 AD, a banquet room in Jerusalem. I peeked into the upper room and noticed that the festive meal was finished and most had departed to the streets to join the crowd. The tax collector Matthew remained alone in the room. He mentioned the Master's comments earlier that night hinting at his pending departure.

"We have to remember the stories, the stories will help sustain us all if he leaves us; and we must proclaim his message to others," Matthew shouted. He was writing down details of a story the Master told some months ago when everyone paused to rest along a hillside. As I scanned the parchment spread out across the banquet table, I saw the ink was still wet on eight pithy statements. Each started with the words, "Blessed are"

July 2012: Returning to the present "to do" list and my presentation for my colleagues. I decide to transition my worries into the suggested sacraments — and start the meeting with a reading of Matthew's Beatitudes (*Matthew 5:3-12*).

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NOTES

1. Quote taken from: *Doors to the Sacred: A Historical Introduction to Sacraments in the Catholic Church*, by Joseph Martos (Garden City, N.Y.: Image Books, 1982), 9.
2. Neil McLaughlin, "Shaky Outlook: Roman Catholic Healthcare Being Dragged Down by Inflexibility," *Modern Healthcare*, 22 (March 5, 2012): 25.
3. Peter Steinfels, *A People Adrift: The Crisis of the Roman Catholic Church in America* (New York: Simon &



Schuster, 2003), 6-7.

4. John J. DeGioia, "Messages to the Georgetown Community on Civility and Public Discourse," letter from the president, Georgetown University, March 2, 2012.

5. James E. Miller with Susan C. Cutshall, *The Art of Being a Healing Presence: A Guide for Those in Caring Relationships* (Fort Wayne, Ind.: Willowgreen Publishing, 2001), 46.

6. Tim Drinan, "Medical Home Model for Improved

Patient Care," *Health Progress*, 93, no. 2 (March-April 2012), 10.

7. Richard Rohr, *Falling Upward: A Spirituality for the Two Halves of Life* (San Francisco: Jossey-Bass, 2011), 146-147.

8. Robert A. Giacalone and Carole L. Jurkiewicz, *Handbook of Workplace Spirituality and Organizational Performance*, (Armonk, N.Y.: M.E. Sharpe, 2003), 448-449.

9. Martos, 9.

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