

Healthcare Ministries: Crafting Catholic Identity in Postmodern Canada

Gerald A. Arbuckle, sm, Ph.D.

Lecture Summary

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- A person without identity and integrity is a threat to himself or herself. But an institution that loses its moral compass and its sense of identity is a much larger threat to society. (J. Bryan Hehir)¹

- It doesn't seem satisfactory to reduce [Catholic identity] to a few codified essentials – that Catholic hospitals abstain from performing abortions, for example...Nor does it seem satisfactory to recast that dimension in elevated but cloudy terms – respect, personal attention, ethical standards – so religiously neutral that they might as easily apply to the Red Cross blood bank as to the Holy Cross Health Clinic... (Peter Steinfels)²

- The story of CHAC and its mission is really a story about religious communities and lay people dedicated to the health care ministry...It is also a story about Canadian history. The political affirmation of the young Canadian nation, the rise of pluralism in society, church renewal...Within each era, CHAC adapts itself to meet the challenges and trends of an ever changing society under the careful guidance of its founding members...(Andre Cellard and Gerald Pelletier).³

¹ J. Bryan Hehir, 'Identity and Institutions: Catholic Healthcare Providers must Refashion their Identity as Actors and Advocates in the World', Health Progress, November-December (1995), 23.

² Peter Steinfels, A People Adrift: The Crisis of the Roman Catholic Church in America (New York: Simon & Schuster, 2003), 112-13.

³ Andre Cellard and Gerald Pelletier, Faithful to a Mission: Fifty Years with the Catholic Health Association of Canada (CHAC, 1990).

Introduction:

1. Challenges: identity and viability
2. Options:
 - Nostalgic escapism/Inaction/Refounding

Part 1: Catholic Identity: Definitions and Models

1. General definition
2. Specific definitions depend on external context, e.g. postmodernity⁴
3. Postmodernity:
 - 3.1 Negative: Neo-capitalism
 - 3.2 Positive: e.g. power of storytelling as way to identity
4. Models of Catholic Identity: specific definitions

Part 2: The Founding Story of Catholic Healthcare: Good Samaritan⁵

1. Explanation of parable
2. Fundamental truths
3. Potential obstacles to Retelling of Founding Story:
 - 3.1 Downplaying Primary Focus on Jesus Christ
 - 3.2 Uncritical acceptance of management language
 - 3.3 'Addiction to Mission'
 - 3.4 Failure to appoint appropriate personnel
 - 3.5 Over-emphasis on Congregational identities
 - 3.6 Failure to appreciate roles of Mission Leaders and Pastoral Care

Conclusion

⁴ See Gerald A. Arbuckle, *Violence, Society and the Church: A Cultural Approach* (Collegeville, MN: Liturgical Press, 2004)

⁵ See Arbuckle, *Crafting Catholic Identity in Postmodern Australia* (Canberra: Catholic Health Australia, 2007) and A 'Preferential Option for the Poor: Application to Catholic Health and Aged Care Ministries in Australia' (Canberra: Catholic Health Australia, 2008).

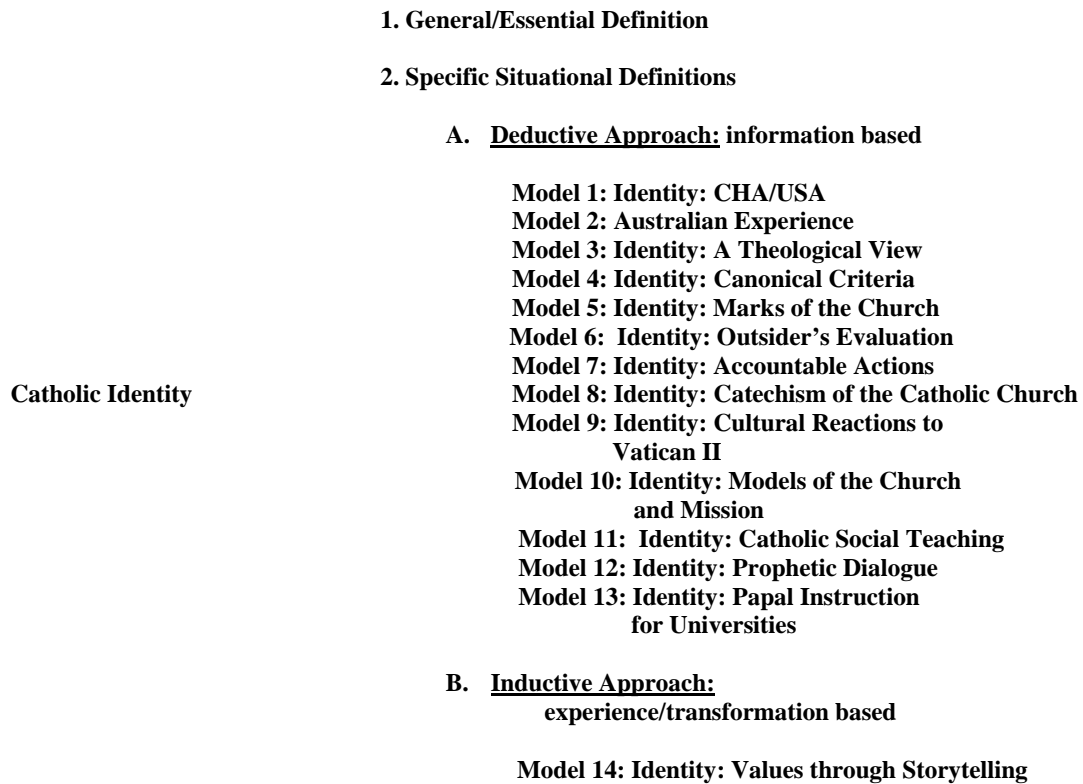


Fig. 1: Clarifying Catholic Identity

Parable of the Good Samaritan (Luke 10: 29-37)

But the man was anxious to justify himself and said to Jesus, “And who is my neighbor?”

In answer Jesus said, ‘A man was once on his way down from Jerusalem to Jericho and fell into the hands of bandits; they stripped him, beat him and then made off, leaving him half dead. Now a priest happened to be travelling down the same road, but when he saw the man, he passed by on the other side. In the same way a Levite who came to the place saw him, and passed by on the other side.

But a Samaritan traveler who came upon him was moved with compassion when he saw him. He went up to him and bandaged his wounds, pouring oil and wine on them. He then lifted him onto his own mount and took him to an inn and looked after him. Next day, he took out two denarii and handed them to the innkeeper and said, “Look after him, and on the way back I will make good any extra expense you have.”

Which of these three, do you think, proved himself a neighbor to the man who fell into the bandits’ hands? He replied, “The one who showed pity towards him.’ Jesus said to him, ‘Go, and do the same yourself.’”

- Good Samaritan Parable:
Foundational truths of Catholic Healthcare
1. Creation: Gift of God
Core Values: love, respect, hope, justice, hospitality
 2. Commitment to Stewardship
Core values: mercy, compassion, social justice, excellence, simplicity
 3. Commitment to Community Building
Core values: mutuality, dialogue
 4. Commitment to a Preferential Option for People who are Marginalised
Core values: love, justice, compassion, humility
 5. Call to Holistic Healing
Core values: justice, compassion, mercy
 6. Call to Prophetic Leadership
Core values: memory, imagination, courage, trust in Divine Providence, hope

Fig. 2: Founding Truths and Values of Catholic Identity

Books/Articles on Healthcare Mission

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Books:

Healthcare Ministry: Refounding the Mission in Tumultuous Times

(Collegeville, MN: Liturgical Press, 2000)

(An award from Catholic Press Association USA, 2001)

This book applies cultural anthropology and Scripture for the non-specialist to contemporary healthcare issues in USA and other Western countries.

Mary Roch Rocklage, RSM, Chairperson of the Board of Sisters of Mercy Health System, St Louis, USA, writes of this book:

'It is hard to encompass in a few lines the scope and challenge of the text. It is truly a handbook for refounding...[It] offers a mini-encyclopedia of information on how institutions and individuals can reclaim and refound themselves in the midst of chaos and change.'

Confronting the Demon: A Gospel Response to Adult Bullying

(Collegeville, MN: Liturgical Press, 2004) USA Edition

Analyses adult bullying in health care facilities and other organisations, with particular reference to the power of cultures to support this social problem.

Violence, Society and Church: A Cultural Approach

(Collegeville, MN: Liturgical Press, 2004)

Analyses cultural causes of violence in modernity and postmodernity and the challenges this presents to healthcare and other services. This is written for the non-specialist in theology, sociology and cultural anthropology.

Anthony J. Gittins, Professor Missiology, Catholic Theological Union, Chicago, USA, writes of this book:

'Arbuckle levels his powerful binoculars carefully looking at society and the Church through the tightly-focused lens of violence. The view is always revealing and sometimes shocking: clarification and clarity offer astounding perspectives, and cannot fail to evoke a response.'

Laughing with God: Humor, Culture and Transformation (Collegeville, MN: Liturgical Press, 2008)

This explains through the Scriptures and cultural anthropology the important role of humor in developing and maintaining holistic health.

Peter C. Phan, Professor of Catholic Social Thought, Georgetown University, Washington, D.C., writes:

'Don't be fooled by the slim size of this book and the levity of its title. With his characteristic theological depth and "shaking-the-status-quo" insights, Arbuckle, internationally known for his work on inculturation and church reform, offers us a genuine "tract for the times" when we are tempted by the world and church affairs to sink into despair. And if you are angry or despondent at what has been happening in the church, read Chapter Seven. You will be able to laugh with God, hear God's chuckle and even roar, and recover our common humanity. We owe Arbuckle a great debt for showing us the human face of God.'

Crafting Catholic Identity in Postmodern Australia (Canberra: Catholic Health Australia, 2007)

The book focuses on the urgency to foster Catholic Identity in healthcare facilities in a postmodern world. It explains that the more appropriate way of clarifying this identity is to involve people in analysing the parables of Jesus Christ, especially the parable of the Good Samaritan.

A 'Preferential Option for the Poor': Application to Catholic Health and Aged Care Ministries in Australia (Canberra: Catholic Health Australia, 2008)

This book analyses the scriptural foundations of a preferential option for the poor. This option, as applied to Catholic healthcare facilities, means that all decisions must be made through the lens of this option; organizations must be prepared, where necessary, to give not only from their surplus funds but also from their capital resources; and aid is to be based on the principle of mutuality, that is people who are poor have much to teach the well-off and must be involved in decisions and actions to remove their poverty.

Articles:

'Culture, Chaos and Refounding', **Health Progress**, March 1995.

'Organizations must Ritually Grieve', **Human Development**, Spring 1991.

'It's Time to Refound Health Care Ministry', **Human Development**, Summer 1996.

'Mergers in Health Care', **Human Development**, Summer 1999.

'Mission and Business: Resolving the Tension', **Health Progress**, October 1999

'Leadership, Change, and Resistance', **Human Development**, Summer 2000.

'Ministry and Postmodernism: The New Age has both Positive and Negative Implications for Catholic Health Care', **Health Progress**, March-April 2001.

'Nine Axioms for Success in Mergers', **Health Progress**, January-February 2003.

'Leadership in Healthcare: Fostering Prophetic Cultures', **Health Progress** (September-October 2005)

'Theological Roots of Sponsorship', **Health Progress** (September-October 2006)

'Retelling "The Good Samaritan"', **Health Progress** (July-August 2007)