

Many Rooms in the One House

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Night unto morning and morning unto night—30 of them to be accurate, on my month-long retreat two years ago—I dozed and rose to the rhythmic roll of the ocean outside my window on the Gloucester coast of my native New England. A tireless motion of this strong woman scrubbing with suds the jagged rocks on the one side of the house, and simultaneously mopping up the smooth sands on the other side. Nature always replenishing, refreshing, and renewing her beauty after men and women scuff the floor, or dirty the walls, in our carefree wandering around this earthly house of God.

The rhythm and the roll of those waves are as universal as the moon behind them. Always moving; always the same. As the psalmist says, “Deep calling deep . . . day unto day takes up the message, and night unto night tells the story.”

But Gloucester is a particular room in my Father’s house. And there are many rooms. On this continent alone, there is the pristine panoply of emerald green of Prince Edward’s Island, or the majestic cascade of cliffs along California’s Big Sur, or the solitary plateau of Padre Island’s gulf beaches, or the necklaces of turquoise jewels in the Caribbean and South American islands. Each place is different; each place is particular.

No wonder water is the essence of life, physical and spiritual. Water in its simple, yet life-sustaining essence is one and the same, and yet this same water in its complex and diverse forms is many and varied.

- A roaring waterfall; a still pool.
- A massive ocean; a beaded raindrop.
- A winding river; a rounded pond.
- And so on.

Water holds life, transports life, gives life, sustains life. Water is universal in its essence; water is particular in its form.

Universality and particularity are two words that we will be hearing a lot about during the next few years as chaplaincy is transported and given new life. Our ministry is being transported into a new and ever-changing environment with potential new life born in the plentitude of opportunity.

We, in the association, are at an historic turning point in ministry, both in our identity as a universal profession, and in our particularity as a Catholic ministry in the Church. The two have been intimately linked from our beginnings; the health care world demanded a specialized minister, the Church world recognized a specialized ministry.

Universality

Last November, in the midst of an animated and engaging discussion among board members, national office staff, and strategic planning task force chairs, Sister Jean de Blois, CSJ, formulated what would be a critical question not only for our association, but in turn, for the other cognate groups in our later discussions. She said, “You claim yourself as a profession, but the question is, ‘Do others claim you as a profession?’”

The answer that came immediately to me was “no.” Why? Simply put, JCAHO—the arbiter of the health care profession in general—does not require certified chaplains in their accreditation review. Physicians, nurses, pharmacists, respiratory therapists, physical and



occupational therapists, social workers, even dieticians need certification or licensure to practice. Spiritual care providers are not required to have professional certification or licensure to operate in a health care institution according to the JCAHO standards.

Jean went on to say, “Nursing went through the same thing years ago. It wasn’t until we had one clear set of agreed upon standards for everybody that we then would be recognized as a profession.” Rev. Walter Smith, SJ, from his own background concurred that same thing happened with the psychologists.

So while it may be somewhat disconcerting to hear that we are not fully a “profession,” at the same time we can take assurance from the knowledge that we are walking a well-worn path that has been trodden by other professionals coming of age.

As a profession, chaplaincy, pastoral counseling, and pastoral education are disciplines that require certain competencies and skills that transcend any or no religious affiliation. When someone is facing a life-threatening illness, for example, there are universal emotional and spiritual “symptoms” that are present, calling for universal emotional and spiritual interventions that are common to all of us in the profession.

The initial response of denial, or anger, or fear, or depression, is the same in the Roman Catholic patient as it is in the Jewish patient. The culture may be different, but the underlying dynamic is the same. Attached to the emotional response at some level, and expressed in some form, is the spiritual question(s). The intervention that the chaplain offers in this pastoral encounter is the same whether or not the chaplain is Presbyterian or Muslim. The culturally appropriate way of approaching the patient may be different, but not the underlying response in caring for this person’s spirit.

The pastoral care, counseling, and education movement has known the truth of universality since our beginnings over 70 years ago. Training of specialized ministers transcended religious denominations, and in fact, it soon became apparent that the learning environment was enriched by the particularity of the different faith traditions.

If you were to look at the current standards of our five or six organizations, it is amazing how similar are the competencies that we articulate, oftentimes borrowing from one another. When looking at the development of our organizations from this historical perspective, it now appears that the next logical step would naturally be the adoption of one set of universal standards.

One of the most exciting aspects of this collaborative venture is the innate treasure of wisdom that will surely be unearthed in the dif-

ferent organizations each bearing the gifts of a particular culture. This wisdom was already evident in the conversations in Toronto, as well as present in the subsequent regular communication of the presidents and executive leadership in our monthly conference call meetings since that time.

We are at this exciting time in history as we are transported along a life-giving journey toward full recognition as a profession in health care.

Particularity

We belong to one universal profession, but each organization has its particularity. For us, the particularity is our Catholic identity that is core to our mission. Catholic identity is who we are, and why we exist as an association of those sharing in the healing ministry of Jesus Christ, founded out of, and ministering by, the authority of the United States Catholic bishops.

Until very recently, we were pretty much alone in our denominational identity. Historically, the Association of Professional Chaplains was affiliated with the American Protestant Health Association, and was viewed as the traditional "Protestant" organization, though in fact the then College of Chaplains, and later APC, was interfaith.

Newer to the professional pastoral care, counseling, and education movement has been the National Association of Jewish Chaplains (founded in 1987). After the early years of forming its own identity, the NAJC emerged as a collaborative partner in the white paper project on chaplaincy written by the major North American pastoral care, counseling, and education organizations. Now we had a sister organization who likewise had a religious identity rooted in its own faith tradition. We were not out there alone.

The presence of the NAJC the last few years as a collaborative partner has, I believe, challenged us to claim our own Catholic identity in a new and more vigorous way. For a while it seemed that we felt a need to downplay our particularity, in order to emphasize our common identity with the other organizations. And while this was, and still is, important to our collaborative work together, the presence of NAJC affords us an opportunity to celebrate our particularity, not only for and among ourselves, but more important, to share that gift with others.

At the Toronto meeting, the NAJC had select workshops open only to their members. Many of these workshops sounded great and conference participants were initially disappointed that they were closed. The Jewish chaplains explained that they did not intend to exclude anyone, but rather they needed time together to dialogue about common concerns. If they opened those workshops, they would be explaining the Jewish customs and religious practices to participants rather than deepening their own understanding and practice.

A few of the NAJC leaders told me that they assumed that we would be conducting our own closed sessions for Roman Catholics to dialogue on internal concerns. I smiled when I heard this, and thought to myself, "We would never have imagined such a possibility," but you know, in a world of particularity and universality, why not have some time to process our own internal issues?

Particularity, our Catholic identity, is very important to our mission, and very important to our bishops who mission us. This clarity of our identity will be even more important as we move toward

one set of universal standards for the profession of chaplaincy, for supervised pastoral education, and for one code of ethics. Attention to both will in fact strengthen both.

During the last few years, the bishops have become more aware of the NACC, our extensive training and professional certification processes, and the reality that this one time priestly ministry has evolved into an impressive ecclesial lay ministry. In the words of one of the nation's most prominent leaders among the bishops to me, "I know your organization prepares for, and judges competency for the profession, and rightly so. But how can you assure me as a bishop that these men and women have been through a formation process for ministry in the Church?"

I thought his question was excellent. My response is that our standards do attempt to identify personal, theological, and professional competencies that I would hope ascertain whether or not the person has responded to, and been formed in a call to ministry. But I do think this archbishop poses a challenging question to us as we move ahead in a universal profession conducted by chaplains and supervisors who understand and appreciate what is particular to a Catholic identity ministering in the name of the Church.

The identification of universal standards for the profession may indeed result in a shared certification process for the profession. If this turns out to be the case, then we will need some sort of process to ascertain the readiness and call to be not only a chaplain for the profession, but also a Catholic chaplain for the ministry of the Church. This need not be burdensome as an added challenge, but rather this may be an opportunity to strengthen our particularity alongside strengthening our universality.

In many ways we are already about strengthening Catholic identity. Six or seven years ago we began an official commissioning ceremony at the annual conference presided over by the Episcopal Liaison of the United States Conference of Catholic Bishops. This past fall, with monies donated by individual bishops through our donor drive, we incorporated the handing over of the Church's official ritual to the sick to the newly certified as part of the Eucharistic Liturgy commissioning ceremony.

Like the evolution of the profession, we are evolving into a formidable, and more recognizable, specialized ministry in the Church. Again the question asked of us about the profession can be applied to the Church: "You claim yourself as a specialized ministry in the Church, but the question is, 'do others (the broader Church) claim you as a specialized ministry?'" In other words, do the people (of God) know who chaplains are, that ours is a call to ministry that is fully commissioned by the Church, what that ministry entails, where the ministry is found, and how that ministry contributes to the overall healing ministry of Jesus Christ in the Church?

Toronto in 2003 will forever mark the turning point in this final coming to age of chaplaincy and supervision as a profession in the health care world. So too, Washington, D.C., in 2003 may very well mark the turning point in the coming of age of Catholic chaplaincy in the Church, if, as we hope, the bishops choose to commission a national pastoral plan for comprehensive spiritual care for our sick and dying.

Many rooms in our Father's house may look quite different after this historic year in health care and the Church. ▼

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