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**What do you get from the NACC?** The NACC is our representative in the larger Catholic healthcare community, and it provides a chance to network with chaplains on a formal and on an informal basis, to continue to share ideas in clinical practice, and to give and get support in a ministry that very often can be very challenging.

**Why do you stay in the NACC?** The NACC remains and continues to grow as a haven where Catholic still means “here comes everybody.”

**Why do you volunteer?** I have lots of reasons to be grateful for the path that’s led me to the present, and I think it's important to pay it forward.

**What volunteer activity has been most rewarding?** In NACC, certification interview team work, standing in respectful wonder of the amazing resilience, at the enduring faith, trust, and hope in God, and at the ongoing personal growth that are a part of the life tapestries of so many of our applicants for board certification. Within my parish setting, my most rewarding volunteer activity is serving as a spiritual director for the past six years for a group that helps women to recognize that they are loved unconditionally by God.

**What have you learned from volunteering?** There are many chances to use and to continue to develop skills that might remain undiscovered if not for volunteer opportunities. Much of the world’s most important work would remain undone if it weren’t for volunteers. I’ve also realized that, contrary to the de-motivation poster, “None of Us is as Dumb as All of Us,” the wisdom of the group is usually greater than the sum of its parts. And very importantly, I’ve learned that the staff members at the NACC’s office in Milwaukee are delightful.

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## Chaplains who encounter those on church margins would find book valuable

By John Gillman, PhD

*Let Your Voice Be Heard: Conversations on the Margin of the Church.* By Joan Hebert Reisinger. Pickwick Publications, Eugene, OR, 2012. Paperback, 208 pp. \$25.

Just one day before Pope Benedict XVI made his momentous announcement about resigning from the chair of Peter, I received a copy of Joan Reisinger's book, the title of which surely echoes the sentiments of many in their hope that the new pope will be open to listening to the diversity of voices in the church, especially those on the margin. The result of her doctoral dissertation from the University of St. Thomas in Miami, FL, this study invites us to listen attentively to the lived experience of 50 people from the Catholic community who reflect on the challenges to live out their faith in an environment that too often does not foster open dialogue. Most of those interviewed still identify as Catholic, many belong to intentional faith communities, and all long to have their voices heard.

The dialogue partners interviewed by the author represent a cross-section of the faithful, lay, religious and ordained, from nine states across the country. Ms. Reisinger, a member of an intentional eucharistic community, engaged each person interviewed in one-hour conversations following a dialogue protocol (Appendix B). What they share in common is living on the margins. Not unlike Jesus, the Marginal Jew (the title of John Meier's multivolume magisterial work on Jesus), these individuals live in the creative in-between space, often straddling both the center and the margin.

In the first chapter, Ms. Reisinger sketches the contours of the phenomenological approach to her research, and then develops a theology of marginality, drawing on the work of Korean-American theologian Jung Young Lee (Ch. 2). In subsequent chapters she lays out a Trinitarian theology and ecclesiology that is relational and dialogical, discusses models of the church from the perspective of marginality, and articulates a practical theology that privileges the voice of the other.

Regardless of our clinical setting or ministerial context, I suspect that many of us spend much of our time listening to and journeying with those who live on the margins of the current culture of the institutional church, yet still within the center of the church understood as the People of God. As we read these pages, a plethora of our one-to-one pastoral care experiences will undoubtedly come to mind.

I believe that members of spiritual care departments and pastoral teams in parishes and other settings will benefit greatly from discussing this book. For those who want to read more widely in the areas of practical theology, there is an extensive 20-page bibliography. My only wish is that the author would have included more about her own personal context and narrative out of which she undertook this project.

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## Gifted journalist reveals inner thoughts at husband's diagnosis, hospital treatment, end of life

By Marilyn Williams, MSHHA, MTS, BCC

*The Cost of Hope: The Story of a Marriage, a Family, and the Quest for Life.* By Amanda Bennett. Random House, New York, NY, 2012. Hardcover, 206 pp. \$17.02.

Amanda Bennett's memoir spans the meeting of her husband, Terrence Foley – "Mr. Bow Tie" in Peking, China, when she was a Wall Street correspondent, to his death from cancer at the University of Pennsylvania in December 2007. As chaplains we have the privilege of seeing and hearing snippets of similar stories, but Bennett's book is unique in letting us know an entire story through the eyes and words of a gifted journalist. Bennett says her story is about marriage and love, about a man and his life, and "about family and everything we did to try to save the husband and father at the core of it" (p.9).

Telling of the evolving of their improbable love, Bennett remarks, "we fight constantly, we fight from the moment we meet..." and "we spend hundreds of dollars on calls. We talk. We fight. We make up" (pp. 24 and 32). In telling of the early days of their love, one can also see and taste the China of the 1980s as well as their fascination with it. In speaking of Terrence Bryan Foley's death at 67, Bennett reminds us that he was a father of two teenagers, a Chinese historian who earned his doctorate in his 60s, and a man who played more than 15 musical instruments, and spoke six languages.

However, "The Cost of Hope" is also about the diagnosis of kidney cancer at the end of 2000, 76 scans, procedures and hospitalizations, drug trials, and three end-of-life warnings within seven years, as well as the thinking reflective of let's see if the new drug will buy more time and "keep him alive if you can." Somewhat unique due to the mobility of Bennett's journalistic career, this story also included four insurers and countless numbers of doctors and facilities from the time of diagnosis in Oregon to Terrence's death in Pennsylvania in 2007. Moreover, their story is also about life despite cancer – about work, family, and friends.

In reading this story of diagnosis, treatment, and quest for life, I found myself asking: where are the chaplains? What pastoral or spiritual care did Bennett and her husband receive throughout the years? Finally in the book's last pages there are two references to chaplains – neither unfortunately would make a hospital chaplain proud. The first reference is one name from pastoral care in a list of the 27 providers of care from the medical records of Terrence's last hospitalization – a time, Bennett stated, that she couldn't keep track of everyone who entered their hospital room. Then there is the following statement from Bennett saying after I signed the papers for hospice care: "A chaplain stops by to pray with us. She and I chat. She confesses that she does not like her work much. It leaves her exhausted and hopeless." One can only surmise and hope that this woman was not a board certified chaplain!

In addition, although a story of the quest for life, Bennett's book is also about looking back for answers to a number of questions. Why did I do what I did? Did I do the right thing? Why did the doctors do what they did? Why did Terrence do what he did? What were the medical costs or what Bennett calls the cost of hope? It is also a story of what she and Terrence did not know about the disease itself, as well as the costs. For example, Bennett writes early in the book about their blind trust regarding the first surgery, saying they knew little about the surgery or its cost and had done more research regarding their real estate purchase.

Bennett's search for these answers led to meetings with the physicians around the country who provided her husband's care as well as review of his medical records and bills of \$618,616 of which almost two-thirds were for the final 24 months. She concludes that the system was designed for everyone but for

Terrence and her, and that their quest cost more than it should have. She also wonders if they would have made wiser, less expensive choices if they could have more clearly anticipated the costs.

Nonetheless, she writes: "Did I do the right thing? I'm not sure I found the answer, or that I ever will. What I found instead was the cost of our hope. Was that hope good for us? Without question. For us the fight for life, with all its frustration, confusion, and failure, changed what should have been the seven most dismal years of our lives into the seven most wonderful" (pp. 197-8). Also, in speaking of the last clinical trial, which gave them 17 more months (versus 14 months for the average patient), she reflects that it gave them an afternoon of looking at the Mediterranean with their daughter, the day of moving their son into the college dorm, their 20th wedding anniversary carriage ride through Philadelphia's cobbled streets, and a final Thanksgiving with family.

Yet she also writes, "Surely we must come up with a better way of helping ease families to gentler and less costly transitions" after saying of herself and Terrence, "we knew neither of us would want to push on past the inevitable," noting that both had living wills but "neither of us could clearly see the inevitable until it was absolutely unavoidable" (pp.199-200). The unavoidable for them was Terrence's return to the hospital with a stroke on Dec. 7, 2007 – hospitalization in intensive care and ultimate transfer to hospice. Bennett writes of this time: "Later, looking back, I will realize once again that the way I feel at this moment is one of the keys to the end-of-life debate: I still honestly don't believe that it's the final battle. Despite the overwhelming evidence, I believe only that we are facing long odds. Not hopeless odds" (p.188).

Not long before this, Bennett notes they were hoping for more time with one more drug. In reviewing the medical records of this hospitalization a month before Terrence's death, she writes that she felt there was a silent battle being waged over the question of "Is Terrence dying or not" with her and the oncologist on one side and the other physicians and nurses on the other side. Bennett and the oncologist acknowledge that Terrence is dying on Dec. 10, 2007, after scans showed cancer in Terrence's brain and a "cascade of hundreds of tiny strokes." The discussion shifted to hospice, but even then Bennett said she still emotionally hadn't grasped that Terrence would die in six months or less – he actually died Friday morning of that week.

In conclusion, I would say that every chaplain should read "The Cost of Hope" and reflect on what effective spiritual care could have offered Amanda Bennett and Terrence Foley as well as countless others as they journey with cancer or any other life-threatening or life-altering illness.

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