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For our 50 years, let's celebrate and be grateful

By David Lichter
Executive Director

Well, they are all that I hoped they would be and more. That was my response after reading the contributions to this issue of *Vision*. As the posting of this issue coincides with our 2015 50th Jubilee NACC Conference, March 6-9, in Arlington VA, we were hoping for a variety of reflections on the chaplaincy ministry and the NACC. I hope you will experience, as I did, a potpourri of delights and a collage of rich images and impressions of what it means to continue the healing ministry!

They reminded me of a quote from Jodi Picoult's *The Storyteller*: "History isn't about dates and places and wars. It's about the people who fill the spaces between them." We are grateful to our authors, the people who fill the spaces of the '60s, '70s, '80s, '90s, '00s, and now the '10s with reflections on our ministry, our call, and the callings we give to one another to serve God's people and the mission of the NACC.

Not long ago, I was introduced to the book *Unapologetically You: Reflections on Life and the Human Experience* by Dr. Steve Maraboli, who is a motivational speaker and author. His writing can be provocative and insightful. One of his brusque quotes, with a touch of four-letter humor, was "I want to live my life in such a way that when I get out of bed in the morning, the devil says, 'aw shit, he's up!'" It brought a smile to my face, and I thought, "Yes, wouldn't it be nice to know the devil gets nervous knowing we are up and about doing God's work!"

As I read the contributions to this *Vision*, I smiled as that quote came back to me and I thought about each of those who wrote and all those about whom they wrote, each getting out of bed each morning, and the devil saying, "Oh ... he's up, she's up!" I was moved by the passion and commitment of so many members who have brought the NACC to where it is now!

I pray that 2015 will spark in our newer members, and the many who will join the NACC this year, a call to continue the healing ministry, to contribute to this remarkable profession. I pray that our partnerships will expand and deepen with the many professional associations who have collaborated with us for so many years. I pray that each of us might find a way to improve our professional skills, that we not only feel a deeper pride in our profession, but a deeper hunger to live out our profession at the top of our abilities.

We continue the healing ministry ...

Blessings,
[David A. Lichter, D.Min.](#)

Walk through abandoned unit brings memories of ministry

By Mary Lou O’Gorman

At our upcoming conference and all year, we will celebrate 50 years of NACC and of our individual and communal experiences of chaplaincy. For me, this year is filled with personal and professional milestones. My husband and I will celebrate our 50th anniversary in June, marking the same year as the birth of NACC. In addition, I am marking the 30th anniversary of my board certification and 30 years of employment at St. Thomas Hospital in Nashville (now St. Thomas West). As these events coincide, I have found myself reflecting on significant experiences in ministry — especially after a recent visit to an area of the hospital where I spent much of my chaplaincy.

After learning that a long-awaited move had finally taken place, I returned to some vacated critical care units that had been built in 1974. We called them pods: E, F, G, H, and J. Now they were abandoned and soon to be torn down; the patients had been moved to newly renovated units. When one of the chaplains described the emotions of the staff at his blessing of the new units, I realized my own need to go back to an area I covered for 25 years.

When I walked into E pod, I was shocked by the emptiness, the silence. It was nothing like everyday life in critical care. I was ill prepared that Friday afternoon for the flood of memories that had occurred in those spaces: Mrs. W, whose daughter worked hard to process her long-held anger prior to her mother’s death; Mr. C, whose adult children who had all moved back home with their own children, begging him to not to die, for he had assumed the role of their caretaker despite his failing health; Mrs. T, whose family surrounded her and draped a quilt with a cross over her before withdrawing the ventilator; the college student and athlete who lost her legs and parts of her hands to meningitis; the nursing student who died after a sudden cardiac event; the 16 children who surrounded their dad singing in rounds as he died; Dr. D, who asked me to pray at the bedside of a patient whose death he believed he could have prevented; Mrs. S, whose heart had been miraculously rebuilt on the operating room table; Mr. J, who spent six months in critical care waiting for a heart transplant before his death; Mrs. M, who received a heart transplant after a similar wait but never recovered; Mrs. S, who stood outside the closed doors during a code pleading for her husband’s life; the daughter who informed me that she had found 99 messages on her voice mail from her mom who was now dying; the father with whom I connived to get his grade school-children in to visit their critically ill mom; and the faces of so many others, many of whom survived and thrived after devastating illnesses and enabled their caregivers to witness the amazing resilience of the human spirit.

I found myself looking at the empty nursing stations and reflecting on the men and women who had inhabited them. The weekend staff, the night staff, and the day staff, all with unique characteristics with whom I had shared so much. I also stopped in my tracks at places of significant conversations. It seemed like those occurred just yesterday: conversations of debate, of disagreement, of anguish, of prayer, of struggle, of hope, of futility, of collaboration and support.

As I completed my journey that day, I turned the corner and saw the critical care intensivist leaving his office. He shook his head, and I shook mine. Briefly, we shared some memories. Most of all we pondered the gift of our participation in what had occurred there and of the amazing men and women with whom we shared a commitment to this sacred work.

For me, that day crystallized an intense sense of gratitude for the ministry in which we are engaged as chaplains. Much has changed in the high-tech world of critical care, but the hallmarks endure: compassion; assessment of needs and family dynamics; presence, often in silence; provision of meaningful resources; listening to the story, and listening and listening; building relationships of trust; grief work and so much more.

As we mark this 50th anniversary of NACC, may each of us take time to reflect on our ministry. Whether yours is a journey of two or 10 or 30 or more years, may you find the opportunity to remember significant events and images of those you have encountered on your journey. As chaplains, we confront the mystery and fragility of human existence. We walk into experiences of tragedy and loss, joy and celebration, and meet people at their most vulnerable. May your memories enable you to affirm anew your capacity to accompany another into the narrowest of spaces, to truly bear God’s healing presence to those whom you have touched, and to relish the gift of the ministry we call chaplaincy.

Mary Lou O’Gorman, BCC, is executive director of pastoral care and CPE at St. Thomas Health in Nashville, TN.

Certification in the NACC: From two-week workshop to full professionalism

By Sr. Anita Lapeyre

I was fortunate to be part of a formative era in NACC history, and to work with people with great vision. In the early '70s, I completed my year's course in the Corporate Ministry Program at St. Louis University, where I did my internship under Fr. Tim Toohey. That led to becoming a chaplain at St. Mary's Health Center in St. Louis, where Fr. Toohey asked me to begin with him and Father Al Houser a new pastoral care program based on the new theology of Vatican II.

The wonder of this time was that I became associated with great men and women who were creative and who somehow gathered around Tim and the Rev. Hal Murray and others. There were the VA chaplains, in particular Jim Martin, who were advocating for recognition of our certification, which at that time really consisted of a two-week workshop. That changed as the first women were certified, including Rose Carmel McKenna and several others. No longer was chaplaincy for the ordained only. This forced us to look at what was appropriate training for the profession, looking for federal recognition. This was particularly important to the VA chaplains, who were being passed over for promotions and raises.

The Board of Examiners had been established by the United States Catholic Conference, and they became interested in improving the education of chaplains and of getting recognized by the Department of Education. I happened to be on the Board of Examiners when these various groups began to gather, along with the National Association of Catholic Chaplains and the VA chaplains. There were lively conversations, and from these gatherings some became clearer.

1. There was a need for more and better training of chaplains and supervisors.
2. We needed to clarify whether the authority to certify came from the bishops or from the growing NACC organization.
3. Clear and meaningful standards needed to be written, and approved by the Department of Education.
4. Chaplaincy was no longer only for the ordained, and we needed to educate hospital administrators and bishops of the value of lay chaplains, as well as provide standards of education that would serve those in the field.

During this time, Rev. Paul Henry was the Executive Director of the Board of Examiners. In the late '70s he resigned to enter parish work again. The board, chaired by Monsignor Hal Murray, was meeting shortly after this announcement.

Here is another moment of the Holy Spirit in action in my life. We were riding in the elevator to the meeting room, and Hal turned to us and asked, "Who would like to take over Paul's job?" I didn't stop to think before saying, "I would." It was another answer that led to wonderful, fulfilling years of service.

One of the assigned tasks for this position was to write standards for certification and accreditation as well as run the office for the certification process of the Board of Examiners. Groups formed with many of the wise elders as well as those newly certified. There are too many to recount, but some of the most prominent were Fr. Dick Tessmer, Kevin Tripp, Sr. Julie Houser, Rod Accardi, John Gillman, Art Metello and many others who attended meetings, gave workshops and worked tirelessly to gather ideas and refine these first standards. Education for chaplaincy was changed from a two-week workshop to at least two units of CPE. Most of us knew that we were heading toward four units, but we needed time to educate the laity and others about the need for further education both in theology and in the art of pastoral care.

After three years in the Washington office, the Board of Examiners moved its center to Catholic Charities. It was here that we learned that the hard work of many was not sufficient to merit federal recognition. Their rationale was that ACPE was already recognized to do this same work and this was an unnecessary duplication.

Sr. Kay Sheskaitis then took over my position and moved the office to Milwaukee to be closer to the NACC, which

was growing quickly. They devised a new system of geographical regions, and certification was done in each region. This proved to be a wonderful way for bonding between members, but the certification process and adherence to the guidelines was often sacrificed to the political and local needs of each region. As the NACC continued to develop, regional certification ended, and the national certification committee became responsible for standards.

The relationship between the NACC and the USCC (later USCCB) was often a debated topic. After many conversations, NACC was able to grant certification in the name of the USCCB. This arrangement gave us the ability to continue to update standards and the method of certification, but standards were still to be approved by the USCCB. As I chaired the Certification Commission while we worked through all these changes, I was again blessed to have many dedicated colleagues who made huge contributions. Where we are today is because of these men and women who gave so very much of their time and effort to envision the future and to value the call of each one to serve the Church. There are far too many to name, but I think we all have our heroes and heroines who have worked to establish a truly professional certification process and to change our lives as ministers in the Church. Certification is in good hands.

Sr. Anita Lapeyre, RSCJ, was chair of the Certification Commission from 2000 to 2006.

The NACC in midlife: How do we make it count?

By John Gillman

What if we viewed our association through Erik Erikson's stage development model? As it reaches its 50th anniversary, the NACC is in the thick of adulthood (ages 40-64), where the key question is "How can I make my life count?" Applied to our association, it might be, "How can we make our association count?" For Erikson, the contrasting values for the stage of adulthood are generativity vs. stagnation.

NACC came to birth in the glow of Vatican Council II. In 1965, the council put the church on a new path, with visionary documents such as *Lumen Gentium* (The Church) and *Gaudium et Spes* (The Church in the Modern World). The first of these offered the initial and primary image of the church as the people of God, emphasizing the common priesthood of the faithful. Through our association, board-certified chaplains as well as all members of NACC have found a meaningful way to exercise this priesthood.

Having served on both the Standards and Certification commissions for a number of years, I can recall several conversations with members, especially women, who felt disenfranchised as they struggled to find their rightful place in the church. Coming to NACC, they often found a caring and supportive community that provided a meaningful way to exercise their gifts as members of the Body of Christ. Some of the pain in the past came in dioceses where the local ordinary chose not to endorse as "chaplains" those who sought certification. Thankfully, a compromise was reached wherein endorsement is provided for "lay ecclesial ministry" as articulated in the resource guide "Co-Workers in the Vineyard" (2005) by the USCCB.

Erikson understands generativity as making your mark on the world through caring for others and contributing to the development of future generations. There is no doubt that NACC has been a force for generativity through its certification of chaplains, its promotion of spiritual care, its new certification for palliative care, and the educational opportunities provided.

Personally and professionally, I have experienced this through the support of colleagues on my journey toward certification as a CPE supervisor, through the welcome from Sr. Shirley Nugent to the Standards Commission — my first involvement on the national level — and through the invitation of executive directors Joe Driscoll, Tom Landry and David Lichter to participate on planning retreats, commissions, and the task force that contributed to the Common Standards. I particularly valued serving with colleagues on the planning retreat in 2007 facilitated by John Reid and Maureen Gallagher that brought new vision and energy to our association. I am grateful for the relationships formed and the sense of community that developed among us.

The generativity of NACC has been felt abroad as well, with our supervisors offering seminars and CPE units in such disparate places as Africa, Eastern Europe, and Asia. I have fond memories of working with the chaplains, supervisor, and CPE students sponsored by the Roman Catholic Diocesan Commission in Hong Kong. Their commitment to spiritual care and to bolstering their identity as chaplains in the hospitals where they served was indeed inspiring.

I have also seen disappointments on our journey. At the top of the list for me has been the phasing out of CPE programs sponsored by NACC and accredited by the USCCB. Without these centers, Roman Catholic students can no longer train at centers where the standards unique to our faith tradition are incorporated into the curriculum. Two factors are the declining numbers of supervisors in training and the difficulty in filling openings at NACC centers with qualified supervisors, especially Roman Catholics. These have been significant losses for us and for our church.

A second disappointment has been the gradual decline of membership within our association. I do not in any way want to overlook the vision, energy and creativity of new emerging leaders. I also want to acknowledge with gratitude the tremendous service that our retired members have provided, and applaud the ongoing ministry of those who are still active. Across the country, healthcare organizations, parishes, and urban areas are significantly enriched by our leadership and presence.

What are the challenges of generativity that lie ahead? One comes from the clarion call of Pope Francis, directed to the world's priests but applicable to all of us, to stay close to the marginalized and to be "shepherds living with the smell of the sheep." Another is to embody the essential role of the spiritual for the well-being of the communities we serve. This means staying grounded in our vocation, remaining close to Christ the healer, and being animated by the Spirit of love and compassion.

An important facet of generativity includes, I believe, an openness to expand our horizons, learning new skills and ways to serve others more effectively. The invitation is to develop our leadership, teaching and pastoral practice with attention to current research. Our association has done well in highlighting new developments through articles in *Vision*.

From those early meetings at the Cousins Center in Milwaukee when I was first introduced to NACC almost thirty years ago, to the collaboration with Sr. Anita Lapeyre in the Center for Urban Ministry in San Diego, to my current responsibilities at the hospice-based CPE program, I am grateful for the multiple ways I have been blessed by so many in our association. I remain confident that while our future story is yet to be told, we can go forward with a spirit of hope and optimism.

John Gillman is an NACC and ACPE supervisor at VITAS Innovative Hospice Care in San Diego, CA.

Companion on a journey to the end of life

By Linda Piotrowski

It was time for our weekly meeting at a large nursing home in Milwaukee. We cared for elderly, developmentally disabled, brain-damaged, and Alzheimer's patients, and had recently added a specialized oncology unit.

The oncologist described a new patient I will call Donny, whom he had met at a homeless clinic where he volunteered. He told us Donny was 61, born somewhere in the South, and had been alcoholic and homeless for most of his adult life, traveling from state to state. He was suspicious of anyone wanting to pry into his life. A slightly built man to begin with, he was now nearly skeletal from the cancer that had metastasized throughout his body.

At that time I had been a certified chaplain for three years. As I did my rounds, I sought out Donny. In the bed I saw a slight black man with huge eyes in a thin face. I could see patches of his scalp. He had long, narrow fingers. I said hello, introduced myself, and asked if I might visit another day. He barely acknowledged me but didn't say no.

Subsequent visits didn't get much further. I tried everything I could think of to engage him in conversation, to no avail. I could only imagine the prejudice he most likely experienced from white people when he was growing up in the South. I decided to tackle it head-on. I wondered aloud if being surrounded by white people when he was sick and vulnerable was hard for him. I asked him if do-gooders like me drove him crazy.

To my surprise, he chuckled. Then he began to laugh. He told me that I was the first white lady to care about what he thought. He said he liked that I didn't give up when he ignored me. He asked me why I cared.

I told him that from the time I was a little girl, I had been taught to love and respect everyone. I told Donny that I could see that he was very sick and possibly dying, and I wanted to be with him as he faced this hard time in his life. He expressed surprise that anyone would care about him. He spoke just a little bit that day. But it was a breakthrough.

On my next visit I took along a Bible. Like a typical Northerner, I thought that being from the South meant he went to a Bible-based church. I asked if he had favorite passages he could remember from his childhood, and he mentioned a couple and asked me to read them.

As time went by I was able to report a developing relationship with Donny at our weekly care meetings. He never shared about his recent or distant past. He did not want to explore where he had been or what his life had been like. I could only report that I cared for Donny and hoped that he was experiencing God's love and care through my presence and caring.

Meanwhile, Donny became weaker and suffered more pain. After about seven weeks, I went into his room and discovered he was in the dying process. I sat by his bedside and asked what I might do for him. He asked me to read the Bible. He especially loved Isaiah 43:4: "You are precious to me and honored and I love you."

The next day, Donny was struggling to breathe. I sat at his bedside and read his favorite Scripture passages. He grabbed my hand. He turned his head toward me and kept pleading, "Linda, come with me. I'm afraid. Come with me."

Within myself I began to panic. I said, "Donny, I can't come with you. When we die, it is something each one of us has to do by ourselves. You are brave. You've been by yourself for many years. I wish I could come with you, but I can't." He continued to hold tightly to my hand and repeatedly begged, "Please, please, come with me."

Desperately, I prayed. I asked God to help me comfort this man I had come to love. Suddenly I heard something deep within me. Still holding his hand, I said aloud, "Donny, remember what Jesus said? 'I am the way, the truth and the life. No one comes to the Father except through me. When I have a place ready I will come and take you

with me. Do not be afraid.'

"Remember, Donny? I'm here with you now, but when the time comes, Jesus will take your hand and lead you into heaven. You won't be alone and you don't have to be afraid." I kept repeating this to him.

The next morning I went to Donny's room. He had lapsed into a coma during the night and looked peaceful. I sat, held his hand, softly sang some hymns, read his favorite psalms to him, and repeated the Scripture verse. After about an hour and a half, his breathing began to slow. I knew from experience that it wouldn't be long. As I sat there silently praying I looked at his face. He had a slight smile. He dropped my hand. He reached up. He reached out. He grasped for a hand I could not see. Donny died shortly after that.

I have no scientific proof that Jesus was there in Donny's room grasping his hand as he took his final breath. Yet I believe with every fiber of my being that at the moment of his death, Donny saw the face of God and grasped the hand of Christ. It comforts me to this day to know that this man who had been alone and homeless most of his adult life at the end had the comfort and companionship of the One who loves and comforts each one of us.

Linda F. Piotrowski, BCC, is retired from Dartmouth-Hitchcock Medical Center in Lebanon, NH, where she was the pastoral care coordinator for the Palliative Care Service.

The privilege of chaplaincy

By Joseph G. Bozzelli

Almost on a daily basis, a friend of mine remarks how he feels so privileged to be a chaplain. His enthusiasm is infectious because he's so passionate about his ministry. What makes his attitude even more inspiring for me is that he's 80 years old! His spirit reminds me that, as chaplains, we often feel that we get so much more back than we give. It really is a privilege to be in this profession, to be instruments of God's love to those in need.

But I realize that the benefits go far deeper than day-to-day satisfaction. In many ways, the person that I've become and strive to be has been shaped by chaplaincy. In all humility, I hope that I'm a good person, that I'm using the gifts that God has given me to care for others. I'd like to believe that had I chosen another profession, I would have had the same focus to my life, but I'm not certain. I do believe, however, that the experiences and opportunities that I've had through chaplaincy have shaped my life in a deeply positive way.

It starts with the training that it takes to be a chaplain. I don't know if I would have looked as deeply into my life, striving to understand myself and how I relate to others, if it hadn't been for my CPE training. I joked after my first unit of CPE that as a result of so much inward focus, I started questioning why I said "hello" rather than "hi" to my friends, but in truth, CPE has given me valuable insights for personal and professional growth.

As a certified chaplain, the opportunities of service within our organization and as a member of the Red Cross Disaster Spiritual Care Team have been such a blessing to me. It has been so rewarding to serve on certification committees to support and encourage chaplains on their professional journey. Helping people in times of crisis through the Red Cross has not only broadened my awareness of national disasters and tragedies, but gave me the opportunity to extend God's healing love to our community in time of need.

But the biggest impact has been through my ministry to hospital patients and staff. To journey with patients, at often the worst moment in their life, or support a staff member as they sort through professional and personal challenges, has truly been a sacred privilege. I hope I've been of some support in those moments, but what I have received in return has been the real gift. It is indeed humbling when people allow you to share their most intimate moments, and in that encounter, to experience firsthand how they live their lives in hope and faith in a loving God. By sharing their faith, they have nurtured and guided my faith journey, as well.

Although I'm not sure what other direction my life might have taken, I know that my journey with God to be the person God has called me to be has been enriched by this ministry. For that, I give God thanks. And I know in my heart that my friend is right. It is truly a privilege to be a chaplain, for in giving I have been so very blessed by what I've received.

Joseph G. Bozzelli, D.Min., BCC, is director of pastoral care services at St. Elizabeth Healthcare in Edgewood, KY.

Invitations from others led to rich NACC experience

By Jim Letourneau

When I joined NACC as a student member in 1992, I don't think I was convinced that chaplaincy was my calling. However, my membership linked me with many wonderful people who were formative in my life and of my sense of calling. I witnessed creative Catholics called to ministry outside the traditional model of ecclesial ordination. In them, I saw inspiring models of what I wanted to become in my own life: a certified chaplain.

To be honest, I haven't been a consistently active member of NACC. In fact, there was a time when I felt great distance from the organization, and from all that is Catholic. I questioned the value of NACC membership. I struggled to find my way in this formal structure we call "Church" and to discern my own faith identification.

A phone call one day changed everything. My dear friend Bridget Deegan-Krause, who at that time was on the Board of Directors, invited me to consider being a part of a visioning group to discuss the strategic direction of NACC.

"Me?! What can I offer? I'm not really that connected."

But Bridget said she recognized leadership and potential in me. I'm not so sure I was convinced, but because of my love for her, I said yes.

That yes was the start of my active involvement with NACC. In that visioning process, I met chaplains and CPE supervisors from across the country. We gathered several times in Milwaukee to share our passion, our concerns, our pain, and our vocation. Together we created a safe haven, a group rooted in faith and prayer. I found community, fellowship, and the affirmation of my call for pastoral care. These members came to know me and could speak firsthand of our collective experience of ministry. I felt connected; I had found a new experience of church.

My initial yes to Bridget led to other yeses: to lead the Nominations Panel (my heartfelt thanks to the late dear Sr. Norma Gutierrez for that phone call), to interview applicants for chaplaincy certification, to become an interview team educator (thanks, Bob Barnes!), and eventually to have my name on the ballot for the NACC Board (thanks, Jack Crabb!). In many ways, I feel I have been blessed with a gift that is our association, and I am entrusted to pass that legacy on to other members, present and future.

This responsibility is awesome in the best sense of that word. It is also a bit daunting and frightening at times. My prayer is that I can faithfully create experiences of fellowship, community, and "church" for other NACC members — particularly those who may feel on the fringes, as I did when I received that initial phone call. "To the one for whom much has been given, much will be required" (Luke 12:48).

My thanks to Bridget for making that initial phone call, for reaching out to me when I needed someone to reach out to me. My thanks to all our wonderful members who have called me, grounded me, formed me, and supported me for ministry. Let us together joyfully and courageously enter our next chapter for NACC!

Jim Letourneau, BCC, is director of mission and spirituality at Trinity Health in Livonia, MI.

We've come a long way, baby!

By Joan Bumpus

Didn't you just cringe when you heard the older generation say, "I remember when we..." But now I have been a certified chaplain with the NACC since 1978. Your math is correct — 37 years! I have loved being a certified member of this awesome association. I'll never forget my first national conference and seeing Sr. Rosemary Abramovich leading the way. I was awed that we had a female leader at the podium. I remember hoping that someday I would have the chance to serve/lead the NACC in the same way that she was. Of course, I didn't know what any of that meant way back then.

I remember being part of the assembly at our national conventions when we were struggling with whether we should require two units of CPE for certification instead of just one. Look where we are now, requiring four units of CPE and a master's degree.

One of the most memorable national conventions for me was the Symposium on the Sacrament of the Sick. Joe Driscoll, our then-executive director, was instrumental in making that happen. Regional conferences were also a highlight of my year. They were such uplifting and spiritual gatherings with some fabulous speakers. Our region had some wonderful role models and leaders such as Art Metello, the Rev. Dick Tessmer, and many others. Somewhere in this 37-year journey I was asked to put my name on the ballot for regional director. I agreed, but lost to Joan Clarke, another great leader in our profession. Just a short time after the election, Joan fell ill, and I was asked to step in and take her place. I gladly accepted, and thus started my journey of serving on the Board of Directors of the NACC for 12 years, including two as president and chair.

I couldn't even begin to name all the wonderful colleagues I had the pleasure of serving with, but we went through some significant changes during those years. We were then set up in a regional structure, and our members kept complaining that the NACC was not meeting their expectations or needs. The Board took a deep dive into how the NACC was spending its money. While it was all being spent appropriately, we noticed that the funds were being used to support the overall structure of the organization rather than the mission of the NACC. We presented the finding to our NACC members, and they agreed that we needed to tear down our existing structure and rebuild something that supported the mission of the NACC and its members.

Another significant event was forming the Spiritual Care Collaborative with the APC, CAPPE/ACPEP, ACPE, AAPC and NAJC. Several of us from each organization were asked to create a model that would merge these associations together yet maintain our individual identities. No one thought we could accomplish this, but we did. I remember a historic meeting when all of our boards met together and we presented the model. The board members stood and gave us a huge round of applause and congratulations. The daunting task of presenting the model to the membership of all of our organizations was now before us. I guess we were way ahead of our time — our memberships were not ready to consider merging. But there was readiness out of that work to form the Spiritual Care Collaborative.

I believe this also paved the way for our associations to define a set of common standards for certification. That was tough work, but we knew it would serve the profession of chaplaincy in the long run. It was a sight to behold when our collective boards agreed to adopt the standards by which we would certify chaplains.

It indeed was a great joy for me to work with so many wonderful colleagues from the NACC as well as from the other associations. It was also a great joy to work with the dedicated staff at the NACC. You could see and feel their passion for the organization and its members. I count my time of service to the NACC as a great blessing for me.

We have indeed come a long way!

Joan Bumpus, BCC, is vice president of mission and ministry at Providence Hospital in Columbia, SC, and was chair of the Board of Directors from 2004 to 2006.

Leading NACC was unexpected challenge and blessing

By Fr. Thomas G. Landry III

How passionate about, how committed to the care of the sick are you? Will you leave the context and all that is familiar about parish ministry as priest to focus your life and ministry within a healthcare setting? So came the question and began the journey that would challenge, guide, and sustain me for fully a third of the 32 years it has been my privilege to share in the life and ministry of the Church as priest.

Through a decade of being blessed and being called to proclaim the many blessings of our God in the midst of the sick and those who sought to serve them, from hospital rooms to boardrooms, the members and the leaders of the NACC accompanied me to deepen my journey with and into Christ. A website and documents became the gateway to an encounter with women and men of passion. Guidelines and standards created an arena in which I discovered the powerful witness of individuals and communities of faith and a professional commitment in ministry.

At a regional celebration in Worcester, Massachusetts, Fr. Joe Driscoll, then executive director of the NACC, handed me the certificate that formally designated me a chaplain certified by the NACC. Little did I know that in a few years I would be called to Milwaukee to fill the need for an interim executive director! Little did I know that the next certificate, indicating that my certification had been renewed, would bear my own signature!

During my time to collaborate with the national office of the NACC, with the Board of Directors, and with the many committees that serve the NACC's members, you helped me to discover my gifts, to find a new measure of my hope and creativity in the face of challenges. You revealed to me your faithful devotion and your persistent dedication to the development of each one's gifts and to the courageous transformation of communities of faith and of service. I witnessed the development of relationships among members and leaders in our association. I witnessed the relocation of the national office. I witnessed the deepening mutual respect among the various professional certifying bodies across faith groups that would ensure greater strength for all professional chaplains. I witnessed the voice of chaplains' experience addressing in print and in face-to-face encounters the needs, the shortcomings, the potential, and the ever-higher calling of every organization and entity that cares for the sick.

From hospital and medical associations to institutions of advanced education, from state and national healthcare regulatory bodies to the United State Conference of Catholic Bishops, you have reminded us all that Christ is to be found and served in the poor, the sick, and the suffering. You have called us all to share in the discovery anew of the ways in which the gentle yet strong hands, face, and voice of Christ can and must be known in us. You call us to be courageous in the will to remove barriers to ministry. You call us to be open to the Spirit to see not as we see, but as God sees.

In the years following the Second Vatican Council, new questions were asked and new answers were explored. New light shone in dark corners, and new vistas of hope and promise established a broader and deeper vision of what and who it means to be Church. In our 50 years, the NACC has become a gift we rightly honor. In our labor and laughter together, in our moments of quiet retreat and vigorous discussion, in our prayer and professional practice, God weaves a consistent fabric of our many lives to give comfort and warmth, to claim, and to proclaim.

My tremendous privilege to explore my own journey of faith with the NACC through formation and certification, and my time to serve in a leadership role at the national office, were surprises God had held in store for me, and cause in me now a profound gratitude. The tremendous witness that you continue to offer calls forth in me now a true Spirit of rejoicing!

Fr. Tom Landry was interim executive director of the NACC in 2006-07. He serves currently at St. Cecilia Parish in Leominster, MA, and at Health Alliance Hospital in Leominster.

A personal Egypt: Passover offers chance to seek other freedoms

By Charles W. Sidoti

In my daily work coordinating a hospital spiritual care department, I provide for the spiritual needs of all faith groups among patients, their families, and staff. The hospital's lack of an official religious affiliation has been a blessing for me. Although I am Catholic, I have learned about many spiritual traditions in order to serve each of them well. One of the most powerful involves the Jewish Festival of Passover, also referred to as the "Festival of Our Freedom."

I have found great spiritual meaning in seeing Passover as a distinct action and gift of God in human history. The festival is a joyful time, primarily retelling and remembering the exodus of the Jewish people from both the physical and spiritual slavery of the Egyptians thousands of years ago. The story is symbolically retold in the Seder meal that is observed with the whole family.

The great Jewish phrase that captures the spiritual meaning is "We were slaves to the Pharaohs in Egypt, but the Lord led us out of there with a mighty hand and an outstretched arm" (Deuteronomy 6:21). I have learned that the message of Passover, "God leads his people," is not only about what happened then. Instead, Egypt is in our own hearts. Each one of us has our own personal Egypt. The inner slavery of loneliness, depression, anxiety, addiction, jealousy, lust, hate, anger, prejudice, violence, abuse, and countless other chains can hold us in bondage. We are enslaved by whatever negative power grips our hearts, preventing us from becoming the people God calls us to be. The same God who led his people out of Egypt with a mighty hand and an outstretched arm wants to lead us out of the Egypt of our own closed hearts today so that we may live in the freedom of the children of God. With God's help we can open up and allow ourselves to be led.

One key to a more peaceful life is learning when to be led and when to take life by the horns. As we reach the middle, between the tensions of when to relinquish control and when to assume it, real spiritual growth becomes possible. We discover a kind of rhythm or dance of life in which we sometimes follow and sometimes seem to lead. In both actions, we are active participants in life.

As a Christian, I have found it helpful to observe that the Last Supper actually occurred on the first day of Passover. I feel a special connectedness with my Jewish brothers and sisters as I wonder if Jesus was observing the Passover meal, sharing the Seder with his friends for the final time. Opening my heart to Passover has been powerful and insightful. It has been and remains a tremendous source of comfort and healing in my own spiritual journey.

Charles W. Sidoti, BCC, is coordinator of spiritual care at South Pointe Hospital in Warrensville Heights, OH. He is the author of two books, "Living at God's Speed, Healing in God's Time" and "Fortune Cookie Wisdom: A Contemplative Perspective."

Book review: Aging parents, ancient wounds come to life in cartoon memoir

By David Lewellen

Vision Editor

Can't We Talk About Something More Pleasant? By Roz Chast. Bloomsbury, 2014, \$28.

Watching your parents age, decline and die is hard — the grime, the clutter, the reminders of your own mortality, the unattended relationships. Cartoonist Roz Chast, like many of us, has lived that reality; but unlike almost anyone else, she managed to find some humor in it.

The result is her book-length cartoon (or graphic memoir, as aficionados say), “Can’t We Talk About Something More Pleasant?” In the distinctive drawings and spidery handwriting that have graced *The New Yorker* for years, Chast sketches her parents’ history, her own unhappy childhood in Brooklyn, and the harrowing last decade or so of her parents’ lives. But, like so many other sad comedians, she transmutes her pain into something that draws readers in and leaves them, if not exactly uplifted, at least nodding in recognition.

Chast is very funny about day-to-day oddities and neuroses. To describe her parents’ aversion to discussing death, she draws a Grim Reaper: “What’s THIS???. The Chasts are talking about me! Why, I’ll show THEM!!!!”

But of course, conversations had to happen and things had to change. Along the way, the Chasts see plenty of doctors and nurses, hospice volunteers, the occasional social worker — but no chaplains that we are told of. Maybe a trained professional could have helped the parents’ tight twosome and the awkward triangle their daughter formed. More than senility, more than incontinence, the greatest pain in the story is Chast’s relationship with her mother.

As Elizabeth Chast clings stubbornly to life in her 90s, her daughter narrates, “I wanted to have a final conversation with my mother about the past, and finally worked up the courage to say something: ‘I wish we could have been better friends when I was growing up.’”

“How I hoped she would respond: ‘Me, too.’”

“Actual response: ‘Does it worry you?’”

“No. Does it worry you?”

“No.”

(A panel of silence.)

“It was time to go. ... I walked to my car,” Chast continues. “When I got in, I cried. The bellowing quality of the sobbing and the depth of the sadness I felt surprised me. I was angry, too. Why hadn’t she tried harder to know me? But I knew: if there had ever been a time in my relationship with my mother for us to get to know one another — and that’s a very big ‘if’ — that time had long since passed.”

Maybe so. But ... what other people resolve through prayer or therapy or spiritual direction, Chast resolves through drawing funny pictures. Courageously, she lets the world watch her pain, and some good ripples out.

“Even though he often drove me bats, I remember my dad with great affection,” she writes on the next-to-last page. “I’m still working things out with my mother. Sometimes, I want to go back in time and warn her: ‘Don’t do that! If you’re mean to her (me) again, you’ll lose her trust forever! It’s not worth it!!!’ Obviously, I can’t. Maybe when I completely give up this desire to make it right with my mother, I’ll know what to do with their remains. Or, maybe not.”