Rejuvenating Hospital Hospitality

by Leo F. Klug

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PeopLe frequently remark, with more than a little admi-
miration, that Catholic hospitals are different. From personal ex-
perience I believe it is true. There is something special about Catholic hospitals that sets them apart from others. Although traditional exter-
nals such as crosses and chapels are important, they do not explain the intangible but real difference so many have experienced. One possibility that invites further explora-
tion is the practice of hospitality in hospitals. Is it the consistent practice of Christian hospitality, year in and year out, that explains how Catholic hospitals are different?

Hospitality
In Canada we are rushing to discard the word hospital, which has such rich history and meaning. Like hospitable and hospice, it is rooted in the word host and shares a similar heritage with terms such as holiness and healing. Hospitality in hospitals is thus trace-
able to our very origins and, in fact preceded the focus on health care. Consciously and unconsciously, it was extended to patients, staff and visitors, as an essential part of the health care ministry.

The Meaning of Hospitality
It is important not to limit our understanding of this rich term that has several legitimate meanings. Patten, for example, distinguishes among public, personal and therapeutic hospitality.1 Hospitality transcends the sharing of food and conversation, although these two are its most common expressions. As Morse notes, the word commen-
sality (sharing food) is, in many cases, a better description of cer-
tain activities than is hospitality. Commensality means inviting friends for dinner when you are confident that you will be invited back.2 Hospitality also differs from chari-
ty, which involves giving something to another. Often we give gifts rather than ourselves, we reward people instead of spending time with them.3 Hospitality, on the other hand, means extending to others a sincere, heartfelt wel-
come. It is the most gracious possible reception of guests, especial-
ly of guests who are strangers, in whom we see the face of God. True hospitality implies no expec-
tation of return. It is more con-
cerned with healing than with socializing and conveys to others that they are truly valued.

Hospitality in Contemporary Health Care
Many hospitals, especially in the United States, are currently adopting the customer satisfaction approach to hospitality. Some hos-
pitals have created new positions called hospitality representatives aimed at giving patients a variety of personalized services similar to those offered in hotels. The focus is on bridging the gap between clinical and non-clinical care, and heightening customer satisfaction.4

Similarly, the nursing profession is exploring ways of incorporating customer satisfaction components into the role of nurse-manager, and developing a specific rationale for hospital hospitality. Moreover, it has been noted that the cus-
tomer satisfaction approach to hospital hospitality is “fast becoming the most influential base of competition in today’s healthcare marketplace.”5

As valuable as this approach is, it falls short of the traditional concept of hospitality.

Hospitality in the Christian Tradition
One of the distinguishing marks of all great religions is the central place given to the practice of hospi-
tality.6 Some of Christianity’s greatest moments have revolved around this practice which in ancient times was viewed as a sacramental action. The earliest uses of the word hospital were, in fact, centered more on the church’s ministry of hospitality than on the ministry of healing.

In the Christian ministry of hospita-
lity, special emphasis was placed on extending hospitality to strangers. The New Testament’s Greek word for hospitality is philoxenia, meaning love of strangers. In the Judeo-Christian tradition, extending hospitality to strangers was seen as a God-given obligation and privilege. One rea-
son is the obvious needs of most strangers (foreigners, outcasts, travellers, the sick). Another rea-
son is that God so often comes to us via strangers.
Rejuvenating Hospital HOSPITALITY

Hospitality creates the space and the place for healing to happen, but it must be given a high priority. A conscious, formal commitment to hospitality is required for its potential to be realized. As Haughton notes, “There is a spiritual discipline in hospitality that we need to recover. It is a deeply human and religious concept.”

Looking to the Future

It has been suggested that the spread of Christianity by the first apostles would not have been possible were it not for the hospitality extended to such missionaries. Perhaps this principle is valid in our own day as well. The following are some specific areas of concern to the ministry of hospital hospitality that warrant our consideration.

1. What would be the impact on our hospitals if our senior administrators were required to have a deep understanding of our hospitality tradition, a sincere commitment to be hospitable, and the skills for its realization? What would happen if we had similar expectations for all admitting clerks and receptionists, and paid them accordingly? What would be the impact if a hospital’s hospitality budget matched, for example, its security services budget?

2. Volunteer Services are unpolished gems in the hospitality ministry. Our volunteers are selected and screened with great care and discernment, and rightly so. But, perhaps we could put more resources into calling forth these dedicated people into a more intentional practice of the ministry of hospitality.

Revitalizing the Ministry of Hospitality

Revitalizing our tradition of hospitality is a challenge we need to consider if Catholic hospitals are to remain different. No less an authority than St. Paul tells us to look for opportunities to be hospitable (Romans 12:13). In our mission statements we typically proclaim that we are as committed to caring as we are to curing. Extending hospitality to our patients is one profound way of caring for them, of healing them. Christians claim that authentic healing is holistic, and that the experience of hospitality is an essential part of that mystery.
3. Competent, dedicated pastoral care staff are an inestimable blessing in any health care facility. Today, lay people provide most of our pastoral care services. Often they have undergone more rigorous and demanding training for their ministry than the ordained and religious chaplains of the past. But have they been imbued with a deep understanding of our tradition of hospitality? Do they truly believe that the practice of hospitality is the heart of the Gospel and the sine qua non of their ministry?

4. Theologically and sociologically speaking, hospitality is a natural offshoot of the experience of Christian community. The beautiful hospital hospitality practiced by previous generations of religious women was largely the fruit of community life. Can we do more, in our modern hospitals, to enhance a sense of community among our staff? The lived experience of community nurtures the ministry of hospitality, and vice versa. In a recent article, Wittberg argues convincingly that a major reason for the declining presence of religious women in hospitals, and other institutional ministries, is precisely the issue of ineffective community life.11

5. What can we learn from the hospitality industry, despite its superficial focus and profit-based motivation? Could we use some of their approaches for our own purposes, extracting and implementing those components that are in harmony with Christian hospitality?

6. In the Christian tradition local bishops have had a particular responsibility for the ministry of hospitality. This mandate is affirmed, for example, in St. Paul's letter to Titus. We still believe, and include in our mission statements, that our hospitals are directly linked to the church's mission via the local bishop. In practice, what does this mean in terms of the ministry of hospitality? Are bishops ever asked, by the Catholic hospitals in their areas, for input on hospitality as they often are on medical ethics?

7. Many of our Catholic hospitals have recently experienced rapid and profound changes, and some of them have not survived. Those that have are very different facilities, still struggling with identity and mission. In a second major article on hospitality Haughton explores the complex relationships between physical structures and the activities they house. She suggests that hospitality provides us with a criterion for understanding change, and for deciding what changes are essential and healthy.12 It appears that health care reforms in Canada are increasingly focused on home care and community services. I believe that this offers exciting challenges to many Catholic hospitals. Haughton warns us that "...the penalty of not exercising hospitality is that you begin to be afraid and to withdraw into yourself, to lose touch with the mission, to lose touch with other people."13

Conclusion
The Christian tradition affirms that there is a special obligation to extend hospitality to strangers. In so many ways the sick who come to our facilities are truly strangers, away from home. Yet we speak to them in barely understood medical language, using unfamiliar ideas. Whatever their illness, patients are affected spiritually when their meaning systems are disrupted. The sick are strangers, often masking visits from God. Hospitality is not so much a response of virtue as an obligation of the Gospel. If Catholic hospitals are to be different, let us ensure that the difference is significant and valid. The energy that will vitalize us and sustain our quest for relevance is our spirituality. Nouwen names the challenge beautifully when he calls it a movement from hostility to hospitality.14

References
5. Ibid., p. 30.
8. Rolheiser, op.cit.
9. Ibid.