

## Religious Sisters in Health Care: The Conspicuous Love of Jesus

Date: 2020 June 23

Interviewee: Marcia Wiley

Interviewers: Beth E. Heinzerth White and Patricia Ringos Beach

0:00 [Beth White]

This is Beth Heinzerth White, and today is June 23rd, 2020. We are interviewing for the first time, Sister Marcia Wiley, a Grey Nun of Montreal. This interview is taking place via Zoom teleconference from Sister's Massachusetts home to the project director's Ohio home secondary to the COVID-19 quarantine recommendations. This interview is part of the Religious Sisters in Health Care: The Conspicuous Love of Jesus Project. And the interview will be archived in the U.S. Catholic Special Collection at the University of Dayton, Dayton, Ohio. Sister Marcia, thank you very much for taking time from your schedule to talk with us today.

0:42 [Marcia Wiley]

Thank you for inviting me.

0:43 [Beth White]

You're welcome. We'd like to start out at the beginning as it were, what experiences led you to the decision to become a religious sister?

0:55 [Marcia Wiley]

I think as a child, I always had a religious, or not a religious bent, a spiritual bent. And it started with the moon. I loved at night as a child to look out the window and see the moon. And I kind of related that to God's gentle love. And from then I went to Catholic school. I had Ursuline Sisters, and I had Sisters of Mercy in high school. And then I went on to nurse's training with the Grey Nuns. And it was the witness of the sisters, their joy, their dedication, their commitment. And then I saw the compassion of the nursing sisters. And it was like a deep call within: Come, follow me. Nothing great, just that impression of these women were dedicated. They had a purpose in life and they were doing something good for others. And I said, I want to do that too.

2:06 [Beth White]

When you think about the early days of your professed life and now, what two things do you think in society have changed the most? And how do you think those changes have affected your life as a sister?

2:21 [Marcia Wiley]

The first big one I would say was, the Vatican II. Because Vatican II was transformational in our Catholic Church. It opened doors and windows. It provided a way to go deeper into education, into Scripture, into what is church, how are we church, and what new ways can we be? And I think religious women overall, embraced that Vatican II challenge. And we went through the open doors and the windows and we renewed ourselves spiritually and ministerially. And we really brought, that was the first big moment, I think, a tremendous moment. And it was, I want to say evolutionary for community life. Because up until that time, we would have been very static. And very, everything had a routine and a time and it was, we follow the rubrics, if you want. And after that spirit, we kind of opened the windows and were freer to explore different ministries. Where is God calling us? And that I think was a transformational moment in religious life, particularly also in our faith communities.

And the second moment I think is happening now with, with Zoom, with, with all of the technological advancements that we have to communicate. So before we, we thought maybe narrowly. Now, our vision in that is broadened globally. And we're speaking up for our global community, and we're seeing it, and I think we're more alive to our planet, Mother Earth, our home as a home for everyone. I don't know, but I think technology is, really I don't know if it's as transformational as, as Vatican II, but it certainly plays a part in all of our lives. For communication, for getting a fresh message out, for listening more to the story of others. And I think broadening and even our, many of our elder sisters are on computers and continuing to learn and grow and expand. And it's a gift.

5:13 [Beth White]

Very well said, thank you.

5:15 [Patricia Beach]

And I think it also allows the news to travel so fast. We cannot be isolated from what happens on the West Coast, let alone in Canada or in another country.

5:28 [Marcia Wiley]

Absolutely, absolutely. Because that's it, we're global. And we must think global, universal, inclusive, united, one. Because now we are seeing in real time how connected our world is interconnected. The virus doesn't know boundaries, it's gone around the world already and it's re-circling. Because we re-circled. So I think in my heart, that this moment is important to, it's hard to imagine what the future holds, because I never thought to communicate like this, you know, twenty years ago,

6:17 [Beth White]

Ten years ago, perhaps even.

6:22 [Patricia Beach]

Last year.

6:24 [Marcia Wiley]

Thank you, I keep thinking I'm old fashioned.

6:29 [Patricia Beach]

You know, Sister, and this probably shouldn't be on the recording, but Sister Jean, as Beth said, is our contact, and we had this, Beth and I were so looking forward to visiting there and we were going to do a social, you know, so this is good, you're right.

6:44 [Marcia Wiley]

Absolutely.

6:45 [Patricia Beach]

But I don't even think Beth and I envisioned this six months ago, you know.

6:51 [Marcia Wiley]

It, it's certainly it's not, it's definitely not the same as, as those touchable moments. However, what a gift that we can do this.

7:03 [Beth White and Patricia Beach]

Exactly, exactly.

7:04 [Marcia Wiley]

In a meaningful way, and not to say that next year we'll pick it up, right?

7:08 [Patricia Beach]

Right. Right. Absolutely.

7:10 [Marcia Wiley]

Well, thank you for doing this Zoom.

7:14 [Beth White]

We're really taken with how intuitive Zoom has been. Certainly neither Patti nor I would be able to figure out anything that was complex. And we're - technologically - but we're very happy to be able to see you and actually feel like we're there a little bit.

7:33 [Marcia Wiley]

Absolutely. This makes a whole different dynamism for me. I'm very extroverted, so seeing you, it helps. Relational is key.

7:44 [Beth White]

Now I know that you came to work in health care because you went to nursing school. What did you do in healthcare? Were you ever a bedside nurse?

7:53 [Marcia Wiley]

Yes.

7:55 [Beth White]

Can you tell us a little bit about your work in health care?

7:58 [Marcia Wiley]

I've done, I've done - I had the privilege of doing a little bit of everything. I started out as a registered nurse and was at the bedside most of my younger years. And then I was promoted to, we used to call them head nurses at that time, on 4B at St. Vincent's. So then I became a head nurse and I was at [Edmonton?] General in Alberta. I started out as staff and then became a head nurse of a huge medical surgical floor. And at that time, I realized it was beginning to be the late seventies, I saw a few young nurses that I was hiring, had bachelors' degree. And I spoke with my provincial and said if I continue to be the head nurse, I think my staff nurses are now having degrees. If you want me to stay in this, I should get more education. And that's how I got my Bachelor's of Science degree in Edmonton, Alberta, University of Alberta.

What that door opened up in being a staff nurse, is I was experienced, I had the experience of working as a team, of trying to call forth qualities in the nurses that I saw that were very gifted, in understanding the art and the science of nursing. That the science without the art does not heal. So the younger days were plowing my inner ground, opening myself up to see possibilities. And I wasn't in, it was in, let's see, '83 to '85. My provincial said, well, we think we should have a pastoral care department in our hospital. It was a Catholic hospital. And she said, We want you to go on and do that. I had just gotten my degree in nursing. So I went to school. I went back to university for this degree. And there too, this opened up a whole 'nother door of being able to use the gifts of nursing, the art and the science, and began, began to teach in the hospital, do seminars. We went through, we went through the AIDS in Edmonton. And our hospital was the first hospital to accept a person with AIDS. And I got involved with the AIDS community, the gay community there, and began to apply all the holistic health to the care of a person with AIDS. And that was groundbreaking. That was never happening before. That was, for me.

11:04 [Beth White]

Can you tell us what that meant?

11:07 [Marcia Wiley]

For me what it meant is a new dialogue with the gay community, which I was completely ignorant of. I had never stepped into that community. And there I was invited to gather up community together to talk about care of AIDS. And the first time that it happened, the Jewish church opened the synagogue, opened their doors to host this, this happened, this educational session. And when I went to go there, there was a big crowd. But there was also officers at the door. And I never even thought beyond education, why would there be police officers at the door? And it was for safety and I thought, oh my God. Anyhow, we had - their area was filled with people and we had a really heart to heart look at how do we care for one another as persons with AIDS. That was my first plunge, I think, into that whole area. And that grew in Edmonton through the hospital and, and through the community willing to learn and grow with this.

The other thing at the [Edmonton?] General was, we built a new wing. We had a whole floor for palliative care, involved with palliative care, and so on, so that whole hospice end of life issues. And there my learning was, we had a gentleman who was Muslim and it was our first Muslim patient. And I never got to share with him because he was almost unconscious for the whole three months that he was there. However, I spent lots of time with his wife and I asked her, What is it like for you and your family to be in a Catholic hospital? How can we help you? What do you need that we could support? And she said, oh, and I remember this forever. She said, You know, we're all going up the mountain, and we're just on a different road. The road leads to the one God. That was a profound learning. One God. And so I said to her Now, what can we do? So talk with me about your rituals, about how you care for your dying. What do we need to know? Okay. She said, yes, I'll share with you. She said, usually our loved ones, at the head of the bed facing the east. And when it comes time for death, we are there, the family. And the sons, the oldest son and the sons, and some men, after death, they wash the body. And then we bring in our homemade coffin and we place the body, the men place the body into the casket, the coffin. And we take that coffin from the room out. And then we have our service at the mosque. Oh, I said okay. I said let me see what we can do. And we did everything, everything that they had asked. Our little palliative care unit did. And it was their holy ground moment. And they were so blessed, they said they were blessed by our care. And all of us were invited to come to the mosque for the funeral and then to join them for their meal after. And I don't know how many of us, we were a group of caregivers that went. What an honor. What an honor to be asked. And we were asked and there we were there and they had a place for us to sit and they told us it was, you know, but it was again, building bridges, listening to the story. Accepting our Mother, Mother d'Youville, mother of universal charity, welcomed everyone. No one was ever refused. We're standing on those shoulders. And I think now more than ever, how do we bring that universal charity, that love, that everyone, all of us are one. So that was my, that was a big moment for me. Let's see. And then the next, the next moment in, in Edmonton, we merged with another Catholic, another Catholic hospital. And so it became Caritas Health Group, that was the first little merging. And so I was director of pastoral care. See at this time I'm in pastoral

care. So as director of pastoral care for three sites, and then and then from that, I think what I learned in leadership of, not necessarily nursing, but I carried all this through the art and the science of nursing and care and compassion. When I got involved in community leadership, but that might be another topic for you.

16:55 [Beth White]

That's a wonderful story. Thank you, Sister. You know, it sounds like you and I went to nursing school and Patti, we all three went to nursing school about the same time, in the seventies, early to mid seventies.

17:09 [Marcia Wiley]

No no, '63 to '66.

17:13 [Beth White]

Oh, okay. And then you practiced in the seventies?

17:16 [Marcia Wiley]

Yes.

17:17 [Beth White]

Okay.

17:18 [Patricia Beach]

Did you go to St. Vincent's?

17:20 [Marcia Wiley]

Absolutely!

17:24 [Beth White]

As did I, as did I.

17:25 [Patricia Beach]

I went to St. Elizabeth's in Youngstown, Sister. You know, not really competition but, you know.

17:34 [Marcia Wiley]

Competition. That's another learning I gotta talk about.

17:37 [Beth White]

Oh, okay, well, you know then that might lead into the next. Because healthcare has changed a lot in the last decades, number of decades. Do you think, or how do you think that those changes have had an influence on Catholic health care?

17:52 [Marcia Wiley]

Yes, I can speak to that. And I want to ground it and the influence in religious life. Because I'm just going to speak of Toledo. Just Toledo. Mercy Hospital, St. Vincent's Hospital, both communities. Both of us, were in our stove pipes. Both of us had marvelous competition, who had the best school of nursing. Of course it was St. Vincent. Oh no, it was Mercy. And we can look across the country, across the globe, religious life itself. We were very individualized, very proud of our heritage, and nobody was better than our group. And we live that fiercely. It also happens in education, in social work, everywhere. So I think hospitals grew up that way. Very independently. Very, we don't need anybody, we're self-sufficient, that kind of mentality. So health care made a journey. I, I believe that health care, in the old days when, when we, when the religious across the country, no matter what community, they were usually invited by a bishop. Because the communities they were in were desperate, either for health, or for social programs, or for somebody to give them a hand at the church. And so the bishops would go to the motherhouses and ask and plead for help. And sisters would volunteer and they would go off. They didn't have training in nursing, they didn't have training and education. We had big hearts. We would roll up our sleeves and we would work all across, it doesn't matter which community.

And so from that heritage, if I look at the hospitals, the hospitals often were the place where the sisters lived. They would have a floor in the hospital, at least the Grey Nuns did. And so the hospital was home. So that has the sisters and the hospitals. And I think this is probably general. If they weren't in the hospital, they were living right next door. Same with the schools. They were right next door in there all the time. When it's your home, you walk by and you adjust the picture on the wall. You pick up the paper, you want it to be clean. There's a spirit there of welcoming, of hospitality. And remember even in our days, Sister, oh I just went blank. Sister Edith Hartman, She was the one that had the vision of organizing an intensive care. We didn't even have intensive care at St. Vincent's. Just think how basic our training was. Everything was basic and it was centered around the patient and the patient's needs. There we really talked about the art of nursing, the care of the individual, compassion, values. It was grounded because we didn't have, you know, we had IVs that we hung as a bottle and with a piece of tape to mark the time, what time that had to be down by. We didn't have any gadgets to measure the drops. I mean, that was another world. So things were basic.

And I think the spirit of the religious communities, no matter which one they were, Mercy's included, filled the house. They wanted their nurses to be excellent in care. They, they were strict on that. They were strict on sanitary, washing hands and giving injections and all the, everything was, I wanted to say perfect. There was few things that we had to do, but what

we had to do was perfect. Even the beds and the mitered corners and the rooms that were cleaned by the nurses, tidied up. Well, move forward over time, and it was so needed. And I wanna say this on the tape. The sisters ran the hospitals, we ran each unit. There was a sister in charge of each unit. By that time, a lot of sisters had their RN, but sisters were in charge of everything. And so it was run almost like a convent, if you will. It was very routine. Even, they would hold on to the linen. You only got one sheet, one pillow, I mean, everything. And they were, we had to reuse a lot. I remember in training, this is in '63, sharpening the needles on a little emery thing or whatever. We had that stone and put it through a cotton ball to make sure there was no hook on it before it went down to be sterilized, to be reused again. Do you remember that?

We have come a long way and the amount of sisters - so we ran the board, we didn't even have a board, the sisters ran the hospital. And also we started to run into financial - we were never rich. We were never rich. And we took in everybody and their dog that came, and weren't paid. And we were never rich. And there came times in Saint Vincent's, in all of our hospitals that we would have to, we didn't know what to do. We were almost, today we'd say bankrupt. We were borrowing, we were paying the egg man first and then we repay the meat man and then we would pay the - It was, they were moving money all the time. They didn't have enough. And finally, they began to get laymen, at that time was men, to be advisors. To say, how can we, what can we do? We need help. That was an awakening for us. We can't do it alone. Then became, we the sisters lessened in the hospitals, because we didn't have replacements. We started to work much more closely with laymen and women, putting them in charge of units instead of the sisters. And also the formation of a board for the hospitals. And that got lay people really involved, and we've been blessed that the choice of men were businessmen, they were physicians, they were lawyers, they were competent. Most of them probably were church people, dedicated. They shared the vision, the values. And I'm going to say the competence or the, the, they were competent. And they joined us. And there we linked our arms together. I'm doing it like this. So we began to link arms with men and women to help us. That was the first movement out. We always worked with people but we were in charge, we were in control. It was ours. And the Spirit finally moved. And we saw, together we were stronger than alone. And we bloomed. The communities bloomed, the hospitals bloomed, they grew. Everything happened. And, you know, the history, you've lived it. So, you know the progression.

But that takes us to less religious presence in the hospital. And more administrative staff and boards run by laymen and then finally lay women. And we were, we were, I want to say transferring this charism, this gift. And at that time it was very intentional about teaching. Not only they would see us live how we lived, with the passion and the commitment of care and equality and justice and fairness and competence. They would see that. Then we became more intentional about passing on our spirit, our legacy, our, our values, mission, vision, values, go together. Ethics, they're all part of it. And I think

that's why Catholic health care for a long time became very strong. Because we had such a dynamism. There was layman and women, wanted to join. They wanted to be part because we somehow, we were gifted to see some of the future. I mentioned, I mentioned Sister Edith Hartman with the ICU. So if you go back in our archives, she started, she sent two nurses to University of Michigan for the burn unit. She was the one that had the vision of the burn unit. Then you'd have Sister Ketterer. We're doing more and more in mental health. So we've had among ourselves, we've had sisters who were very talented. And the leadership we had, we had great leaders. Women of vision. Also another, another equality for the religious women. Pioneering spirit, risk-takers, bold, daring, and, and a passion to pass on. This commitment to care for the sick at the beginning and end and all through life with, with great care and dignity and compassion.

And so we have the health systems we have today, with hardly, probably no sisters involved. Few on any boards. Boards, hospitals that were simple, were very local, gone into systems. And systems have grown and expanded. And I think right now, Catholic health care, is at a, is at a stepping stone. We either claim who we are and live it deeply, or we pass it on. Because there's so much - demands right now, if, I think I feel, at least in my humble experience, that the bottom line is the driver and not the patients nor the residents, and their needs. We've lost focus. We've lost that, that ability to say, Why are we here? Let's refocus. I bet most of board meetings are focused on finance with very little being talked about mission, vision, values. Where do we want to be in five years, three years? How do we want to be right now? What do we want to be known for? What kind of quality of healthcare providing are we giving? These are burning issues on my heart. The - what is the essence of the quality of care we are giving? In some places, it's beautiful.

30:41 [Beth White]

What are those places, what makes them different, Sister? Is it the continued presence of sisters, do you think?

30:48 [Marcia Wiley]

No, absolutely not. That is gone. That ship has left the dock a long time ago. Okay. It's, it's passing on the legacy, the heritage, the gift of our founding. They're standing on our shoulders and we're going to be soon, somebody's gonna stand on their shoulders. What kind of a foundation do they want to pass on? What is it? What's the essence of, we're talking about Catholic health care, what is the essence? And, and how do we form, help educate this passion to all those who are working in the healthcare, or leading the healthcare. If it's only a job. If it's only a job, if I only work because I get more money - that's needed. I don't deny that, we and we even need more money for many of our health care providers. They're at the lowest end of the scale and they're doing the grunt work. I think of that in nursing homes right now. In all of our caregivers. How do we treat them? So I might have, I might have gone too far in my passion.

32:17 [Beth White]

No, you haven't. In fact, in fact your, your thinking is so spot on that I'm feeling a lot of gratitude right now that you agreed to be interviewed. If you could give advice -

32:31 [Patricia Beach]

I just wanted to ask one follow-up question with that, Sister. You said that, you know, like we are at a, a marker, a step - stepping stone. And what do, what needs to, like you said, we have to support not only financially, but how do we make sure that that Catholic essence, that foundation that the sisters built, what do you think needs to be done?

33:01 [Marcia Wiley]

I believe it's, it's having leaders and leadership teams and all levels of participation of men and women. Not Catholics, but those who believe that their ministry is the healing ministry of God. And that they can be healers and accompaniers of the sick. And they can do it with excellence and care. It's all of us together -

33:40 [Patricia Beach]

And it's believing.

33:42 [Marcia Wiley]

Yes, it's, it's coming out of a value system of justice and fairness and equality. It's, it's, it's what makes all of us the best human possible. It's not to do with religion per se. And I really, you know what I realized at one point, because I was in the Catholic system a long time, many of our Catholic parishes and people have no clue about making a choice to go to a Catholic hospital or the public hospital. They don't, they don't, and they haven't supported us. And neither have the bishops and the church authority for many years, many years. So it's, it's, they support when it has to meet the letter of the law of their, of the doctrine. And we try to be faithful to our church beliefs. And most of those are basic human beliefs. It's the Gospel, it's the Beatitudes. How are we living those? All of us, Muslim and Jew, Greek, Catholic, it doesn't matter. We're all one. God's in all of us. Every one of us.

35:14 [Beth White]

If you could give advice to lay leaders, what would you tell them? To make sure that the values of justice and fairness and equality are essential to pass to all levels of healthcare workers so that they can commit their work to the Ministry of God. What advice would you give them?

35:38 [Marcia Wiley]

I don't know if it's advice. I cannot - I can't really give advice, but it has to come out - I think as each of us, as individual persons, become the gift that we're meant to be, whatever our God given gift is, if we can become our best selves, our best selves, and know ourselves. What are my values? My principles? What's my driving force each day? And is it, is it care of the sick and healing and providing what is needed. Those are the kind of people we need. We need leaders that are ethical, that are honest, that are transparent, that have at their heart, we need, we need integration of the, of the wonderful genius of the mind and the breadth of the heart. Together. It has to be together. Because we're in, we're the healing hands of God if you want. That's what nursing's about.

36:51 [Beth White]

I want to repeat what you said that we are, that we use the genius of our minds and the breadth of our hearts. That is a beautiful way of describing the art and science, isn't it?

37:09 [Marcia Wiley]

Yes. That, that, that came I didn't think that, that's, that, that came from the spirit that just came out.

37:24 [Patricia Beach]

Beautifully. Beautifully said.

37:26 [Marcia Wiley]

I think, I think I think it's a lived, I know, excuse me, I know, that healthcare is a lived reality. It has to, it has to come from the inside out. And we have to be moved from the outside in. It's both/and. And how we serve, how we treat one another. That's how God heals. How else is God going to heal if it's not through you and I? I don't know. But I do know I get passionate about this.

38:09 [Patricia Beach]

Sister, you made the point that sometimes other Catholics and bishops even may not support the Catholic healthcare system. What do you think though, when, do you think that there is anything that a patient in a bed at a Catholic hospital, how do they know they're in a Catholic hospital?

38:33 [Marcia Wiley]

Oh, you know, only on a personal level. I know in our hospitals we have symbols and signs. We have crosses and crucifixes. We often will have - Mother d'Youville's at the front door welcoming everyone at St. Vincent's with their arms out, she's not standing there or holding up, she's, come on in. You know, you're welcome. The signs and the symbols, the prayer. Oftentimes there's prayers being said on the intercom morning and night. And, and I used to, when I was, when I was a chaplain, the government in Alberta gave to the Grey

Nuns, they built the Grey Nuns Hospital out in a new area in Millwoods. And they said, If we would administer it, they would build it and call it the Grey Nuns Hospital, which which, which happened. I was there at that time. And the theme of the hospital was love at work. And yeah, I think we might have been on our third anniversary and we had big banners, "Love at Work," and that was the theme, with a big Marguerite on it. And Marguerite was welcoming. There was a lovely statue at the front door of the hospital and her picture was all over.

And anyhow one morning I prayed on this feast day of the opening, on the anniversary of the opening. Just to show you how I would make spontaneous prayers all the time, every morning on the intercom. Morning prayer. And this one day, I said to everybody at the end. I said, Now today, make love at work.

*[laughter]*

That's how I ended it. And all of a sudden the phone is ringing and people are knocking on the door and I went out and oh my God, the whole place. And I said, and I was not conscious nor aware of what I had said. They said that I set a new bar. And I had to laugh because I said, oh, so you folks tune in in the morning.

40:59 [Beth White]

And now you know, people are listening too.

41:05 [Marcia Wiley]

All of that creates - and together there's so many wonderful men and women who right now, this very minute, and we see it through the corona, they go in every day. They, they help, they give of themselves. They risk - they're pioneers. They're risk-takers. They're bold. They're putting their life on the line, just like our pioneers did. Today, it's happening. And there are people like you, committed to carry the spirit forward. There's lots of good out there, lots of people. And it's to - what do we do to be attractive to that kind of person that we want to work together. And how do we capture, how do we make our hospitals, our nursing homes, the place where people want to be. Wanna work there, wanna die there, Wanna be healed there. What will it take? It's all of us. But it's with that. Is it vision, is that commitment? Is it that personality? Is it people wanting their lives to be, to make a difference? Maybe that's it. We want our lives to make a difference.

42:26 [Beth White]

Sister, I have no more formal questions. Patti, do you have anything else?

42:39 [Patricia Beach]

You know, Sister, I did interrupt you, even though I promised not to interrupt you, I did interrupt you along the way and, and I appreciate that answering our questions. Is there a

way to get to that point where people are living the mission? I mean, so what I'm asking you for is, I, I agree that you know, the values, the vision, the mission. How do we get the bedside staff there? You, you said the leadership, what should the, what should the lead - are like, are there certain things that we should do? Or is it like you said, finding the right people? Is there anything else to say about that?

43:31 [Marcia Wiley]

It's probably difficult in a large institution, I'll speak of, let's say nursing homes or care facilities, where there's more human interaction between the staff and administrative CEOs. And it's all relational. Do the staff see the leaders living what they hold the staff to? Do they see the leaders rolling up their sleeves in times of crisis? Do they see a role model in the leadership?

44:16 [Patricia Beach]

That's a good point about size matters, so to speak, because, and Beth and I have talked about this too, how the different leaders that we have worked with or known over the years - do they leave their offices or not?

44:34 [Marcia Wiley]

Absolutely. Do they go to the cafeteria? Do they just roam the cafeteria for two hours? Go to every table? How are you doing? Sit down, have a cup of coffee. How are things? Do they really know the suffering?

44:51 [Patricia Beach]

Yeah, that's a rare leader. You're right, Sister.

44:56 [Marcia Wiley]

But imagine how the staff feels. Imagine how we all feel when somebody comes and says, how are you doing? Just, just now. Just now with this corona. I'm in the Boston area. So we've been really diligent and it's been really rough. And many of our nursing homes here, like everywhere else, have lost loved ones, wonderful, dear people. And the staff have gone in and given their utmost every day, every day, every day, every day, every day. At great risk. Now, where are the leaders? Where are they? I don't know. I haven't, I haven't been in. I have no idea. But the leader that will attract, the leader that will call forth, will be the ones that are down there in that, in that house every day. Going around dressed up with their helmets and their shields and their mask, going around and looking into somebody's eyes and saying, How are you doing? I'm grateful, I'm thankful you're here, that we couldn't do it without you. How many have said that? And what does that mean? It's about being human. I don't know how we're operating today. We've got, we've got like a valley. We're in a pyramid in most, in most institutions. And what we need is a circle with arms linked. And it doesn't matter where you stand together. If we, that's how we are

getting through this. I put it, it turns the pyramid around. And that's exactly how religious life is today. We started out with a very humble base with few people. Marguerite, Mother d'Youville, she had a call - not to start a community, but a call to help the poor. That was mission, that's all she did. And other women saw it, and they came around. And one thing led to another thing and other people were attracted. They saw their life meaningful and they started to join. And those, those early years were rough. The religious, religious sisters of all communities were poor, we were, we were risk-takers, we were pioneers, we were adventuresome. We went where nobody had gone before. And we gave ourselves without ever thinking that they would go back home. They would go to strangers. And they did that, just like, just like our heroes today are doing the same thing. But now, now you have to hear, you know for most religious, for most communities, not all, there are some that are flourishing. But most have run their course. We've run, we've run a race and we're passing the baton to you. I give it to you. Carry on. Be passionate, be committed, be compassion. Be the Beatitudes, and our world will change.

48:54 [Beth White]

This has been one of the most enjoyable interviews we've had. I think I can say that without reservation, is that right Patti?

49:03 [Patricia Beach]

Yes, and you had said before we started on tape, about where most religious women are now?

49:14 [Marcia Wiley]

Yes.

49:15 [Patricia Beach]

Did you want to repeat that so others will hear that?

49:20 [Marcia Wiley]

I'll speak for my own community. But I can, I can expand the struggle to include many other religious communities in that today, our average age is probably 81, 82. In the United States, we were 120, maybe, in our prime. And now we're fourteen, fourteen sisters. I'm the youngest and I'll soon be 75. And this reflects the reality. We're living the reality of life right now that we've come to the end of religious life, as we've known it. We've been transformed from pre-Vatican, to post-Vatican, to Zoom. And pretty soon we'll be zoomed into paradise. And what I would like to see us leave is the mission. You have the mission. My passion is that the mission goes on in a new way, in a twenty-first century way, with men and women committed to gospel values or to, or to live their beliefs faithfully, for others, the common good. And then we religious will, will be able to look and say hoorah. Our journey, our journey is complete and it still goes on. And yet it's, it's, it's a reality check

for all of us religious, men and women. To now, how do we, with integrity and dignity, live our last years? How do we live in hope, in faith, trusting, Mother d'Youville, always, it was Jesus Christ and the poor. And she trusted in Divine Providence to provide perfectly. And that's what it's about.

51:36 [Beth White]

Thank you, Sister. Is there anything that we didn't ask that you think we might, we might have or that you wanted to say to help us understand?

51:48 [Marcia Wiley]

I'd like you to, I'd like you to hear this piece of music. And then you can ask me something. If it speaks to you, let me know. Okay? This song is "Because We Love God." It's on YouTube. It's Kathleen Sherman's. Just a second. I gotta, I gotta get through the - Can you hear it?

52:29 [Beth White]

Yes.

*[Music plays]*