

Diaconal Study Tour „Health Care in the USA“

Kaiserswerth General Conference, September 30th - October 7th 2017,
New York

This year’s diaconal study tour of the Kaiserswerth General Conference (KGC) took us, from September 30th to October 7th, to New York. The invitation was issued by Sr. Melinda Lando, member of the KGC presidium, and the ELCA Deaconess Community and the program offered a comprehensive insight into the American healthcare system.



After flying from Frankfurt to New York on the first day of the program, the group visited a museum and the memorial of the 9/11 terror attacks. A guided tour shed light on the fate of the almost 3,000 dead and thousands of other victims and our American hosts recounted their memories of this event, which had such a decisive impact on US society. The exhibition also shows the challenges of the rescue operations in which thousands of police officers, firefighters and first responders pushed themselves to their limits.

We started Sunday, the 1st of October by attending the service at St. John’s Parish in Greenwich Village, in the southern part of Manhattan. This Lutheran parish was originally German speaking and, to this day, the texts in the church and the altar windows bear witness to its changing history. Vicar John told us about the past and, talking to the parishioners, we became acquainted with the present-day challenges of a downtown parish.



The visits to, and conversations with, those providing hospital services started on Monday, October 2nd in the morning with the Bronx-Lebanon Hospital Center. Dr. Peter Shermann, Head of Pediatrics and his team presented to us the work of this hospital, which has 692 beds in two locations as well as 39 out-patient centres in the Bronx. The conversations we had illustrated the multiple health care activities, e.g. in the treatment of asthma and obesity. 70% of the patients live on or below the poverty line. “One needs a big heart in order to survive here” said Dr. Shermann. The collaboration with partners in the



patients' environment is therefore an important part of a successful treatment.

In the afternoon, Dr. Robert Brescia, Director of the Palliative Care Institute of Calvary Hospital offered us an insight into the work of this Catholic hospital, which specializes in palliative care and has 225 beds in two locations. "We take the whole person into consideration", said Dr. Brescia. In his lecture, he placed a particular accent on the role of women in the therapeutic process: "palliative care wouldn't have existed without the women's' commitment." Calvary Hospital is not only a teaching station for about 1,000 medical students each year, but its expertise is shared with doctors and nursing personnel from Japan, South Korea and Israel.



On Tuesday, October 3rd, the group visited one of the 13 highly specialized rehabilitation clinics for children with multiple traumas. Blythedale Children's Hospital, in the New York suburb of Valhalla, has state of the art standards when it comes to rehabilitation following cerebral traumas resulting from bullet wounds and car accidents as well as in matters of months-long treatment of premature babies and care for multiply disabled children in a day clinic. Dr. Jay Selmann, Chief of Neurology, was

our capable interlocutor and described for us the challenges facing children and their families during the therapy, which can take months in some cases.

The Columbia School of Nursing moved to a new building a month ago. It is in its new home that the participants of the KGC Study Tour were received. Nursing formation at Master's Degree and PhD levels is supported here by state of the art video technology. By forming students as Nurse Practitioners - in four different specialities - post-graduate studies offered in the USA are such that, in many cases, nurses can be on equal footing with doctors in diagnosing and providing therapy to patients independently. "We don't treat the disease, we treat the patient" is the way that Prof. Judy Honig, Associate Dean, explains the differences in the approach.

Mergers are – in the hospital landscape of New York as well – more of a rule than an exception. Our visit to the NYU Langone Hospital in Brooklyn on Wednesday, October 4th, clearly showed the challenges existing in a multi-ethnic and multi-religious environment. The hospital in question, originally founded by a Norwegian deaconess, is now part of a joint operation between New York University and Lutheran Health Care with five hospitals, family outpatient facilities in 65 different locations as well



as other services. Virginia Tong, Director of Cultural Competence, told us how the hospital tailors its services to patients with Chinese or Orthodox Jewish backgrounds. Combined, the staff members speak a total of 73 languages, and the hospital offers Study material in five languages.



Medical Director Alan Sickles and his team spoke to us about the developments resulting from the merger process, without overlooking the difficulties entailed by the attempt to harmonize different managerial cultures. Reverend Jon A. Overvold, Senior Director for Mission and Spiritual Care, described the task of the hospital chaplaincy whose team, made up of eight chaplains (Lutheran, Roman Catholic and Jewish), actively reaches out to pa-

tients. Spiritual care plays a part in the patients' satisfaction and this ministry is thoroughly carried out, our interlocutor said.

A visit to the Seamen's Mission in the afternoon helped the group get acquainted with a ministry of the Evangelical Lutheran Church in America (ELCA). Rev. Marsh Drege and his collaborators minister to seamen in New York and New Jersey as well as to asylum seekers. The Seafarers International House merged with the German Seamen's Mission in New York some years ago and a German-speaking chaplain is still part of the team.

On Thursday, October 5th, we got an insight into the recent past of the public healthcare system, by visiting the Ellis Island Immigration Hospital, which, at the time of the great waves of immigration, was the most important hospital for infectious diseases but also for general medicine and psychiatry. Between 1902 and 1930, diseases like tuberculosis and whooping cough were treated in 750 beds, located in two separated buildings. The increased restrictions on immigration led to the eventual closing down of the hospital.

The participants in the KGC Study Tour were able to form a lasting impression about the specificities of the American healthcare system, mainly thanks to Sr. Melinda Lando's many contacts. The health insurance situation as well as the challenges posed by a multi-ethnic society determine what is required of those working in this field. Furthermore, the connection between stationary and ambulatory treatment is much more significant.



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