

Sister Mary and the Muslim Doctors (B)

At the Administrative Council meeting of Avera McKennan Hospital, Sister Mary Thomas spoke in favor of providing space in which the doctors could develop a Muslim community center. She pointed out that it would foster stability among the Muslim doctors, which would rebound as a benefit to patients. Just as importantly, the hospital's mission supported this action.

Later, when asked to explain, she said, "Every Monday morning at staff meeting, we recite a simple statement: *We participate in the healing ministry of Jesus*. The statement is from the hospital's Belief Statement, which describes the work of healing in terms of restoring health and wholeness. Wholeness...includes not only the physical and emotional, but also spiritual and social. The spiritual and social needs of Avera's Muslim caregivers were not being met, and here was an opportunity to do something about it."¹

Avera McKennan Hospital's Belief Statement also says, *Our management decisions and delivery of care are motivated by the health and wellness of patients, their families and communities.*² Sr. Mary suggested that the benefits would reach beyond Muslim doctors to the wider Muslim community that was primarily comprised of refugee immigrants from more than a dozen countries. A center's programs could positively impact an entire generation of Muslim children in Sioux Falls. Drawing on her order's experience with the Latino community, Sr. Mary explained, "When the dominant culture can assist newcomers in finding their way in constructive and creative ways in society, they can reduce the chances that immigrants will relate to the dominant culture in negative ways, e.g. joining gangs...or [participating in] other destructive expressions."

Sr. Mary knew they would be criticized for helping an unpopular minority, but that was nothing new to the Sisters. She said, "Jesus had a habit of hanging around a lot of people who others had issues with. And we are taught to welcome the stranger. I had to ask myself, 'How do we do that? How do we make it happen here?'"

Avera Regional President Fred Slunecka told the Administrative Council that he was also inclined to provide space to the Muslim community, but only for a pre-determined length of time and with no cash funding. None of the executives on the advisory council voiced an objection. "If they had, I would have taken their concerns under advisement," he said later. "But it was ultimately my decision."³

Sr. Mary's strong recommendation was the crucial factor in Slunecka's decision. He explained later, "If Sister Mary had been against it, we wouldn't have done it. If I had gotten even a raised eyebrow from her, I would not have done it. My momma didn't raise no dummy—I would not have gone against the recommendation of my Senior Vice President for Mission." Slunecka added, "Sister Mary had much more at risk than I did. She was still fairly new in her position; I wasn't. And she and the sisters want very much to maintain a positive relationship with the Bishop. She truly cares what the Bishop thinks of her."

Slunecka had worked with Sr. Mary only three years but had a high level of trust in her advice. "I'm a huge Sister Mary fan," he said. "She's the perfect example of 'still waters run deep'. She will never make a decision quickly, but when it's made, it will have been thought about from every angle." He trusted Sr. Mary to recommend the best mission decision, and he trusted himself to make the best economic decision.

Avera's Response to the Muslim Doctors

Hearing no objections from his council after some discussion, Slunecka announced: "Let's do this." Later he explained his decision simply: "It was a calculated risk, but it was an economic no-brainer." It would cost little for Avera to let the Muslim community use one of their smaller properties rent-free for one year, and later on at a discounted rental rate. For a minimal investment, Avera stood to save hundreds of thousands of dollars on recruitment if even one or two Muslim doctors chose to stay rather than relocate.

Once he'd announced his decision to the council, Slunecka's next thought was "Who do we send to the Bishop?" Slunecka asked Sr. Mary, "Will you go talk to Jerry? You're a nun; nobody gets mad at you." He was referring to Jerry Klein, the Diocesan Chancellor and right-hand man to the Bishop. Klein had served as Chancellor for nearly 20 years across the tenure of three bishops. He could be counted on to know how the Bishop would respond. If Klein had any doubts, he would take it directly to the Bishop.

Slunecka asked Senior Vice President for Environmental Services Dick Molseed to begin searching for suitable space as soon as they got the OK from the Bishop's office. They would lease it to the Muslim doctors at no cost the first year and then at graduated rental rates until year five, when the Muslim community would need to be completely self-supporting and paying the full commercial market rental rate. "It would be done quietly without making a big deal; hopefully that would minimize the amount of blow back," said Slunecka. And if there was any controversy, he explained, then they'd deal with it.

Sister Mary meets with the Diocesan Chancellor

In early February (2010), Sr. Mary met with Diocesan Chancellor Jerry Klein for what was essentially an information-sharing meeting. Although the Bishop typically does not interject himself into the management of major institutions in the diocese, technically he could veto the plan.

Sr. Mary explained that the doctors would not be developing a mosque, but rather a community center. Sr. Mary recalls: "He [the Chancellor] thought it would be fine as long as funds from Avera McKennan were not being used to support another faith tradition." Sr. Mary assured him they would not provide any program funding: "We're not providing funding for their Muslim education system. We're providing a location. That's the extent of it. And that's on a graded basis."

The Chancellor's job is to report to the Bishop. "If the Bishop needs more clarification, he will sometimes call in the parties involved for an additional meeting," Sr. Mary said. "But in this case, it wasn't necessary." Since no additional meeting was sought by the bishop's office, they felt ready to move forward with the search for suitable space.⁴

The Search for Space and Informing Avera Employees

Dick Molseed was enthusiastic about helping the doctors find the kind of space they needed. He knew almost nothing about Islam, but he grew up in a small town in rural South Dakota and had a deep appreciation of the Catholic parish as the center of communal life. He recalled, "We had fundraisers together, we prayed together, and we played together. A lot of families centered their interaction around church-sponsored activities. My parish now, as an adult, has the same [importance in my life]." It was a sense of bondedness and community

that Molseed reflected on as he concluded, “I have that, my Lutheran friends have that, my Presbyterian friends have that, [but] the Muslims didn’t have that. And we could help them.”⁵

After considering several properties, Molseed identified former clinic space in a strip mall that was opening up and would need to be repurposed. The location on Western Avenue was ideal, just off the interstate in southern Sioux Falls near fast-growing new housing and business developments on the edge of the city. Avera would pay for simple renovation of the nearly 6,000 square foot clinic to the same extent they would for any other tenant. The Muslim doctors were responsible for purchasing carpet, prayer rugs and all furnishings.

As work progressed on the community center over the summer and fall, Avera undertook a public awareness effort among its employees. A daily devotional and news brief called *The Daily Line-Up* is distributed to the entire hospital staff. During the week of November 14-20, it focused on “Our Mission to Other Faiths.”⁶ On November 16, it explained that Avera would temporarily provide a space that had been vacant to the Muslim community. It specified that this would be “a place (not a mosque) where they could gather to share their heritage and traditions, and educate their children.” It quoted the *Nostra Aetate* of the Second Vatican Council: “Catholic tradition teaches welcome and respect for those of other faiths. It says that while we are to witness to our own faith, we must acknowledge, preserve and encourage the moral truths, social life and culture found among non-Christians.”

On November 18, Drs. Elgouhari and Khan were quoted in *The Daily Line-Up*, expressing gratitude for Avera’s help and sharing four primary goals for the space as a place to: “1) educate our children, 2) gather to pray, 3) meet for celebrations, and 4) build understanding through cross-cultural dialogue with the broader community.”

A few hospital employees asked questions, the basic tone of which was: *We’re a Catholic institution, what are we doing supporting an entirely different religion that doesn’t believe in the same things we do?* The new president of the hospital—Dr. David Kapaska—personally responded to each call. Kapaska replaced Fred Slunecka in September 2010 when Slunecka was promoted to COO at Avera Health System. Kapaska was glad so few people expressed concerns and that everyone seemed to be satisfied after he explained the hospital’s rationale.

The Muslim Doctors Formally Organize

The Muslim doctors applied for non-profit status as a 501(c)3 and recruited a Board of Directors. One of the doctors invited to join the board was Bassel Salem (*Baz’ el Sah lem’*), a young neurologist affiliated with Sanford Hospital. Salem was very enthusiastic about the idea of a community center but was apprehensive about taking a leadership role. When he told his wife about the invitation, she was even more worried. Her first response was, “No way. Don’t do it. We’re still on a visa. When you apply for the green card, you’ll go through the FBI screening, and you don’t want to have any headaches. You just stay away from this.”⁷ Even if they developed an excellent center that demonstrated their desire to be good citizens, she worried that any association with a Muslim organization could dash their hopes to become citizens. Rejection for a green card was serious; it would mean they would have to leave the country.

But the couple continued to discuss the possibility and in spite of having reservations, eventually agreed that he should join the board. A Muslim community center would help them provide a strong faith foundation for their young children. And ultimately, it could lead to an improved representation of Muslims in the community.

One day about four months after joining the board, Salem picked up his mail and spotted a very official looking letter from an investigative office of the U.S. Department of Veterans Affairs. Glancing at the envelope only long enough to see it was from a federal agency, for one horrible moment he thought, “Oh my God! I was so stupid! I should have listened to my wife! Why did I ever join the Muslim Community Center Board!” But the letter had nothing to do with the Muslim community. It was simply a request for a reference for another doctor applying for a job at the VA.

Five professionals—four physicians and one engineer—made up the first Board of Directors with Khan as president and Elgouhari as vice-president. Only one of them even had a green card; the other four were in the U.S. on J-1 waivers or H-1 Visas. They knew the risks they were taking. Not only would they soon be more visible as Muslims, but they were also assuming a huge financial commitment and responsibility for leadership among a diverse Muslim population. They wanted to develop a much-needed resource for the local Muslim community but at the same time, were anxious to avoid splitting that community.

They decided that the benefits outweighed the risks. A strong sense of great possibilities inspired them, while their faith in the rightness of what they were doing settled them and gave them confidence. Their weekend and evening meetings often stretched late into the night, sometimes after a full day of surgery and treating patients. Excitedly, they strategized and planned.

The Opening of the “Muslims Community Center of South Dakota”

After nearly a year of preparation, the “Muslims Community Center of South Dakota” (MCCSD) opened its doors in December 2010. On the wall behind the former medical clinic’s reception desk are printed these words:

MCCSD
Muslims Community Center of South Dakota
Faith. Knowledge. Humanity.

At the opening ceremony Salem shared a story from the Hadith that he described as important in the history of Islam because it tells of an important early contact between Muslims and Christians:

It was a time of persecution in Mecca, so the prophet Mohammed told the people to emigrate. This was not the immigration from Mecca to Medina. He told them to go to Abyssinia, which is now Ethiopia and Somalia, and the words he said were *go to the land of a righteous Christian king. No one will be wronged in this kingdom.* So the two criteria he picked as a place for his followers to be safe are justice and faith. Because the king is a Christian he will understand when you talk to him. We worship God and [believe in] angels and prophets. He will appreciate these values. And he’s fair, he’s just, so he will not oppress you even though you are not necessarily following his religion.

The Christian king protected our people. And he [the king] said, ‘What you say and what we say are like two beams of light, separate, but yet coming from the same source.’ Today we are grateful to Avera’s executives, who like that king, were willing to help us as we have come to this new town.

Realizing the importance of maintaining positive relationships, leaders from the MCCSD met frequently with leaders from the 6th St. Mosque to keep them informed of their progress before opening. Mohamed Sharif, a co-founder of the 6th St. Mosque, said in a sermon there that the Sioux Falls Muslim community was still “one” but now with two different types of facilities: mosque and community center.⁸ Leaders at the 6th St. Mosque cancelled Friday prayers for the first month that the MCCSD was open, encouraging everyone to pray at the new center. After that initial period, Friday prayers were resumed and continue in both locations; people are encouraged to pray at whichever location is most convenient during the day. Attendance at the MCCSD for Friday Jumu’ah prayers now ranges from 50-150 people.

In the first year, a tremendous variety of other activities took place at the community center, including workshops, weekly fellowship and study for women, and monthly potlucks that drew as many as 150 people. During the entire month of Ramadan, there were nightly potluck dinners, and the center was packed on Eid holidays.

The children’s educational program was by far the most prominent activity at the Muslim Community Center. Directed by Dr. Yamen Smadi, a pediatric hospitalist at Sanford Hospital, and his wife Dania Elshamy, the weekly Sunday School program quickly grew to an average attendance of 70-80 children.⁹ Their families came from Somalia, Ethiopia, India, Pakistan, Syria, Egypt, and other countries, reflecting a range of beliefs and cultures. Many of these families could not afford educational materials, so the center furnished all the needed materials and set up a lending library. In addition to classes, the Sunday program included lunch and time for fun, including games, table tennis, and air hockey. The school’s vision—displayed on their Facebook page and brochures—is to teach students self-assurance as American Muslims, with a commitment to honoring family, community involvement, and respect for others, while instilling ethical values towards becoming productive and responsible members of society.¹⁰

The MCCSD Defines Policies

During the first year of operation, the board set policies that they hoped would encourage all the city’s Muslims to come together in spite of theological and cultural differences. Elgouhari describes the board’s policies as being deliberately “in the middle, and intended to attract, not to repel.”¹¹ Sometimes they found themselves defending those policies.

Two of the practices that elicited early criticism concerned women: Some women do not wear the hijab (head covering) any place in the community center except the room set aside for prayer. Women are also seated around tables in the same room as men for meals during Ramadan. These practices were a source of early criticism, but board members maintained their “middle way” policies while encouraging respect for individual interpretations of Islamic teachings and cultural differences.¹²

Brief Controversy

Sr. Mary’s fears of violence directed against the center have subsided, although she found herself very nervous the first time the Muslims celebrated Eid al-Fitr at the center. There had been some brief public controversy within three months of the center’s opening, in March 2011, when a local Baptist pastor named Jeff Hayes widely distributed a letter charging that the new Muslim Center was “becoming a mosque” and that officials of the Catholic Church and Avera were “being duped” by the physician leaders of the center.¹³

Hayes made similar charges in a letter he sent to the Bishop. The Bishop had been under the impression that the space functioned as a multi-cultural center and was not exclusively for Muslim use.¹⁴ By now, there were rumors that the Bishop himself had personally approved Avera's decision to provide space to the Muslim community. The Bishop sent a letter to John Porter, President and CEO of Avera Health System, listing this item as one that should be discussed at a future meeting.

Porter talked with Sr. Mary and other leaders involved with the project. Sr. Mary explained that the primary purpose of the center was to provide local Muslims a place to teach their traditions to their children, and although the space was used primarily by Muslims, others in the community were also welcome, e.g. those who wanted to learn Arabic. Sr. Mary had recently come to realize that some people called the prayer room a mosque, but considering the wide range of activities going on, she was satisfied that the facility functioned like a community and cultural center, unlike the 6th St. Mosque where prayer was the primary purpose.

Sr. Mary explained to Porter:

The doctors didn't want to create animosity by creating a second mosque. And when it comes to a mosque...the constitutive parts that I associate with mosque don't seem to be there. There's no imam. And I presume as soon as you get in the door [of a mosque] you're supposed to take your shoes off. When we come into the community center...we walk around just like Americans do in any other location.

These explanations were passed along to the Bishop. The Bishop asked that in the future it be made clear that being *informed* is not the same thing as *giving approval*. But he chose not to intervene.

Pastor Hayes also called Sr. Mary to express his concerns. She recalls, "He presumed I was being hoodwinked, that as a sister I would probably be naïve. I assured him that we were working with our physicians, and we knew them, and yes, there was always an element of risk. Yet we need to be welcoming, and ask: How do we enable people in the best way?" Hayes complained about the treatment of women in Islam, and Sr. Mary pointed to the significant role of cultural expression in these practices.

Kapaska and Sr. Mary discussed how to respond to Hayes and to a local state legislator who said his observers were counting and videotaping Muslims in the parking lot of the MCCSD and could prove that zoning laws were being broken. By this time, the local newspaper had picked up the story. In a private email to Kapaska, Sr. Mary mused about what might be driving the suspicion directed at Muslim doctors and the challenge for the doctors:

Underneath it all may be this dark wondering. When President Kennedy was running for the office of President there was great fear among the masses since he was a Catholic. Would he have greater allegiance to the Pope or to the people of the United States? How does the Muslim community hold in balance their faith tradition and their citizenship in the United States?¹⁵

After Sr. Mary verified that zoning rules were being satisfied, Kapaska called Hayes and asked that he discourage the videotaping in the parking lot, since it was an infringement on the privacy of patients entering the clinic next door. Kapaska went on to say that he had hired many of the Muslim doctors himself and could personally vouch for their character. The videotaping ended after this conversation.

After consulting with Elgouhari, Kapaska directed that an internal hospital briefing be distributed to Avera executives. It outlined Avera's role in the development of the community center, its primary activities, and three traditional characteristics of mosques that the community center did not demonstrate:

1) The sole purpose of the [mosque] building is for prayer and worship. 2) The building would belong to the community. It would not be leased thus communicating a lack of permanence – a mosque today but no longer a mosque when the lease has ended. 3) The architecture would be in keeping with a traditional image of a mosque e.g. minarets. By this one standard no building designated a mosque in Sioux Falls currently meets that criteria.¹⁶

Continuing Confusion over Terms: Mosque and Community Center

Confusion about the function of the MCCSD persisted. Avera executives were surprised to hear that some Muslims referred to part of the community center as a *mosque*. The nicely carpeted but nearly empty room used for prayer did not fit their experience or pre-conceptions of worship space, which they assumed to be the purpose of a mosque.

Some Muslims were equally confused about what the phrase *community center* implied. One of the first complaints against the new MCCSD came from Muslims who were upset because the main fellowship room was used for the birthday party of a 5-year-old. They charged that this type of social activity was inappropriate for a mosque. The MCCSD Board responded by stating unequivocally that the MCCSD was a community center, not a mosque, and one of its primary intended functions was for social activities.¹⁷

The Muslim physicians generally refer to the prayer space as *musalla*, or place where you pray. Occasionally one hears the word *masjid*, meaning place of prostration (in prayer). Among the public, the word *mosque* is frequently used to refer to the congregational prayer space. The doctors continue to emphasize that their primary objectives are education and fellowship. They point out that the prayer rooms in the new center are actually the least used rooms in the building and are dual purpose when needed for other activities besides prayer.

Some Muslims criticized the doctors for developing a community center rather than exclusively a mosque. But Elgouhari defended their position: “We had some strict Muslims who said, ‘The reward we get for praying in your space is less than the reward we get for praying in our own *masjid*.’ But we said, ‘No, we want to incubate all Muslims, not just the ones who pray, we want to provide place for people who want to play table tennis, teach kids, and all of that.’” Elgouhari does not mind if people call the prayer rooms *masjid*. “Because” he adds, “in Islam the whole earth is *masjid*.”¹⁸

Expanding Program and Increased Outreach

Within two years of opening, the children's program grew to nearly 100 children for weekend events ranging from Quran memorization to bowling and Lego tournaments. Dr. Salem took over as Director of Education when Dr. Smadi left to pursue fellowship training. Under Salem's leadership, programming continued to expand, and in 2013, the center held its first week-long summer camp, where 27 children studied astronomy, Greek mythology, and science. They dissected frogs, went fishing, and took field trips to the zoo and to the local arts and science center. As always, families were encouraged to send their children whether they could pay the suggested fee or not. By 2014, the board was able to hire a full-time imam to teach Arabic, Quran, and

other classes, adding four nights a week to the educational program. The center has been the site of graduations, weddings, birthday parties, funeral prayers, annual blood drives, health screenings, and other charitable activities.

In 2012, Elgouhari was invited to join the Board of Directors of an interfaith group of religious leaders called South Dakota Faith in Public Life. Together they co-sponsored an open house at the MCCSD for 60 community leaders, which led to numerous speaking engagements for MCCSD board members in local churches and civic gatherings.

Elgouhari, who is now board president, keeps up with an exhaustive schedule. After treating patients all day, he frequently attends meetings or events at the MCCSD in the evening, and again on the weekend with his family. This is true of all five board members. They not only manage all administrative and programming aspects of the center, but they are also committed to personally hosting outside groups who come to learn about Islam. Every visiting group is served food and invited to ask as many questions as they wish, sometimes late into the evening. As a result, the center has built a reputation for hospitality, for which Elgouhari is glad. Elgouhari plans to stay in Sioux Falls permanently. He values the chance to demonstrate that the Islam he knows is a religion that calls him to live in harmony with his neighbor.

Elgouhari says softly, “The prophet is our example. Actions are more important than talk. [And] integration into the community, helping people even if they are not Muslims, even if they are against you, even if they are even advising people to be away from you; helping them and being close to them is the best thing we can do.” In 2013, the MCCSD Board expanded their goals to include building more relationships with non-Muslims, helping non-Muslims who are needy, and serving the entire city through social and medical activities.¹⁹

Relationships with Avera continue to grow. Recently, as Sr. Mary blessed the new Liver Transplant Clinic with a sprinkling of holy water, she looked out at the crowd and spotted a smiling Elgouhari, the person primarily responsible for the clinic’s development. Each year during Ramadan feast, it is Elgouhari who looks out across the crowded community center and sees Sr. Mary and other Sisters who are their guests for the feast. Members of the MCCSD speak of Sr. Mary with great affection and respect and credit her with making that first crucial decision to recommend their request to the hospital’s president. Sr. Mary prefers to stress the multidisciplinary nature of the entire project that involved the efforts of executives in areas of recruitment, mission, environmental services, and administration, along with the hospital’s president.

Each year, Avera takes a new group of emerging young leaders to visit the MCCSD. When Dave Flicek accompanied a group recently, he recalled his skepticism about helping the doctors when they first approached him several years earlier. Now an enthusiastic supporter of the center, he told the Muslim leaders in the room, “Now I know many of you as friends, and I think of all of you as adopted South Dakotans.”²⁰

Marrying Economics and Mission

Physician retention of Muslim physicians has gone up dramatically. Ann Burns, Director of Physician Recruitment at Avera, credits the MCCSD for that improvement.²¹ Burns reported that before the center opened in December 2010, the turnover rate of Muslim physicians at Avera in Sioux Falls was 63%. Between January 2011 and June 2013, the turnover rate dropped to 11%. Burns said, “The new Community Center absolutely is a meaningful factor in recruitment too. I introduce recruits to the Muslim physicians there, and I

even try to time their visit with a Muslim celebration at the center.” She is particularly pleased that women can interact throughout the space and do not have to enter by the back door, like they did at the 6th St. Mosque.

Sanford Health—the other large hospital in the city, which declined to assist the doctors—has also saved money on physician recruitment and retention. In 2003, there was one Muslim physician at Sanford; by early 2013, there were fifteen.²²

In June 2013 Dick Molseed of Avera said:

We know that our competitor hospital has recruited two physicians *specifically* because of the center... We are told that at least five physicians have decided to stay in Sioux Falls because of the center. For a couple thousand dollars’ worth of rent... there are at least seven [more] physicians in Sioux Falls, which would equal hundreds of thousands of dollars of recruitment costs.

It surprised some people that a Catholic-sponsored organization would do this. But it didn't ever surprise me. It is a function of what the community needed. It is a function of what Avera needed. It is a function of what the medical community needed. So this is one of those opportunities where we could marry economics and mission.

Addendum:

In 2015, the Muslim Community Center purchased the building in which it is located.

Endnotes

¹ Sister Mary Thomas, Interview by author. Sioux Falls, SD, Sept. 21, 2011.

² Excerpt from *The Belief Statement of Avera McKennan Health*, <http://www.avera.org/experience/ah/> (accessed Aug. 28, 2014).

³ Fred Slunecka, Interview by author. Sioux Falls, SD, Nov. 14, 2014.

⁴ Bishop Swain was not interviewed for the purpose of composing this case study. Neither the Diocese of Sioux Falls nor Bishop Swain have endorsed the representations of the views of the Bishop or members of the Diocesan staff.

⁵ All quotes from Dick Molseed, Interview by author, June 11, 2013.

⁶ “The Daily Line-Up: Avera,” Nov. 14-20, 2010. Provided to the author by Julie Ward, Vice President of Innovation & Strategy, Avera McKennan Hospital.

⁷ All quotes from Bassel Salem, Interview by author, Sioux Falls, SD, Oct. 4, 2011.

⁸ Mohamed Sharif, Interview by author, Sioux Falls, SD, Dec. 30, 2014.

⁹ Dr. Yamen Smadi, Interview by author, Sioux Falls, SD, Sept. 28, 2011.

¹⁰ From the brochure entitled MCCSD, available on the Facebook page of the Muslims Community Center of South Dakota. <https://www.facebook.com/MCCSD.sf/photos/pb.356113574401692.-2207520000.1409941474./454719041207811/?type=1&theater> (accessed Sept. 5, 2014).

¹¹ Dr. Hesham Elgouhari, Interview by author, Sioux Falls, SD, Nov. 16, 2014.

¹² Ibid.

¹³ Jeff Hayes to Area Clergy, letter inviting the public to view the film *Iranium* and hear a panel of speakers discuss the threat of Islam, March 12, 2011, furnished by Attorney James Abourezk.

¹⁴ Fr. Charles Cimpl, Vicar General of the Sioux Falls Diocese, Interview by author, Sioux Falls, SD, Apr. 24, 2013.

¹⁵ Sr. Mary Thomas, email to Dr. David Kapaska, March 27, 2011.

¹⁶ Briefing circulated internally among Avera executives, March 29, 2011.

¹⁷ Dr. Bassel Salem, Oct. 4, 2011.

¹⁸ Dr. Hesham Elgouhari, Interview by author, Sioux Falls, SD, Oct. 7, 2013.

¹⁹ Dr. Hesham Elgouhari, “Avera Health & Muslims Community Center of South Dakota: A Model Relationship,” Presented at the Annual Meeting of MCCSD Board & Avera Leadership Program, MCCSD, April 27, 2013.

²⁰ David Flicek, Annual Meeting of MCCSD Board & Avera Leadership Program, MCCSD, April 27, 2013.

²¹ Ann Burns, Interview by author, Sioux Falls, SD, June 21, 2013.

²² Dr. Jawad Nazir, at the Annual Meeting of MCCSD Board & Avera Leadership Program, MCCSD, April 27, 2013.