

NEW HOPE IN CHRIST

A pastoral message on sickness and healing

Canadian Conference of Catholic Bishops

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Dear Reader:

To celebrate our redemption through Christ's death and resurrection, Pope John Paul II declared March 25th, 1983 to Easter 1984 as a Jubilee Year. As part of our contribution to this celebration, the Canadian bishops have prepared a pastoral message on sickness and healing entitled "New Hope in Christ".

Though suffering touches all of us, many refuse to accept it as part of life, even part of the process of life itself. In turn this often leads to greater suffering, as they struggle with frustration and despair. Our message is an attempt to help people come to understand the mystery of sickness and healing, and the challenge of bearing illness with faith and humility, while at the same time working to achieve the health and wholeness of the individual and of society.

We chose to issue this message to coincide with the Synod of Bishops' meetings dealing with Reconciliation and Penance. Christ accepted His human suffering and death with faith and humility, so that His Resurrection could be the supreme act of reparation and reconciliation between God and humanity. We can join our suffering and penances to those of Christ, and share in the mystery of His Redemption. We can also link our efforts to achieve personal and collective wholeness to His mission of salvation.

May all of us, the sick, disabled, infirmed, aged, those working for health, and caring for the sick, and those blessed with good health, receive the grace to realize the new hope Christ offers, and the courage to work towards that fullness of life God has prepared for us.

Sincerely yours in Christ,

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President
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INTRODUCTION

1 The good news of salvation, proclaimed to the world by Jesus Christ, sheds its light over the entire span of human history. Nothing, whether it be joy or sorrow, sickness or health, riches or poverty, lies beyond its transforming power. This promise of a new and more abundant life, when all tears will be wiped away and crying and death and pain will be no more (Rv. 21:4), lightens the burden of all who suffer in this world. And yet, freely accepted suffering does not paralyze our efforts for health. The expectation of a new earth, strengthening though it be in time of trial, also calls us here and now to heal people and bring wholeness to God's creation.

2 Jesus, who won the final victory over suffering and death, was Himself born in poverty and abandoned to a criminal's death on a cross. For the rest of us, weak and strong, there is no exception: some degree of suffering will surely mark our lives. We may refuse to accept it, to yield with humility – still it remains as a challenge. How do we bear suffering, and at the same time seek out healing, as we move towards the total, God-given health of eternal salvation?

3 Here, in the two-fold question of why we suffer and how we are healed, is a mystery beyond our complete understanding. Yet we do not know that in attempting to respond to this challenge, we are plunged into the very mystery of salvation symbolized by that life-giving opening in the side of our Saviour (Jn. 19:34), and referred to by St. Peter when he says: "Through His wounds you have been healed" (1 P. 2:24).

4 In sharing these pastoral reflections with you on caring for the sick and working for health, we know that we are speaking to the heart of everyone, for everyone knows suffering and desires healing. If you are sick, disabled, or infirmed by age, we wish to bring you hope in a special way. If you have a special calling to heal or alleviate suffering, we mean to support and encourage your efforts. But we also wish to invite all people of good will to work towards that fullness of life which God has prepared for us.

5 In offering these reflections, we will first draw inspiration from the Word of God as it has been revealed in the Bible. We will then consider how the Christian community has lived out its mission to heal. Finally, we shall offer some guidance on how Christians in Canada today might respond to Jesus' invitation of new life.

SUFFERING AND HEALING IN THE BIBLE

6 The first pages of Genesis present a picture of serene health, whose foundation is intimacy with God. This overflows into the idyllic relationship of man and woman with each other, and with the creatures of Eden. But through sin, suffering and alienation invade that world of peace. However, the Lord does not withdraw his merciful and saving grace, but promises to restore the original wholeness of His creation.

7 The book of Deuteronomy reaffirms that belief in the life and health-giving power of God, who remains faithful forever to the Covenant with His people, and who will place a new law in our hearts so that sin and suffering will be no more. In the Book of Exodus, too, we read that the God of Israel is a saving God, coming freely and sovereignty to the aid of His people. Israel chants, “*Yahweh¹ is my strength, my son... my salvation*”, and God responds, “*It is I, Yahweh, who gives you healing*” (Ex. 15:2, 26). Ezekiel’s beautiful vision of the ever-broadening stream emerging from the Temple, flowing down to the Dead Sea and bringing health and teeming life wherever it goes, speaks of the Lord’s health-giving presence among Israel, His chosen people, and announces His plans to heal all people of the world in the new age (Ezk. 47).

8 **Yeshe**, the Hebrew word for “salvation”, sums up this life and health-giving vision of God. Literally, it means being brought into the open, being rescued and liberated, whether from sin or slavery of the heart, from prison or poverty, from sickness or death. However, this salvation implies a faithful relationship with a protector, a liberator who restores to freedom and wholeness of life. This healing Saviour is the Lord Himself, who gave the law to the people of Israel saying: “*I am Yahweh your God who brought you out of... slavery*” (Ex. 20:1). Thus, according to the Bible, salvation is a movement of total healing, where both sin and suffering are taken away by God’s health-giving power for those who follow His Word.

9 In the prophet Isaiah we learn for the first time how God often heals and brings fullness of life, in ways that go counter to our own expectations. The remarkable Servant Songs show the Lord’s chosen servant as someone who gives witness to God by his very sufferings, and brings healing even to those who afflict Him: “*On Him lies a punishment that brings us peace, and through His wounds we are healed*” (Is. 53:5).

10 Throughout the New Testament we find the same unity of salvation announced in the Old Testament, where God's saving word is joined by His healing action. Jesus' very name speaks of healing: "*You must name Him Jesus, because He is the one who is to save His people*" (Mt. 1:21). The healing ministry of Jesus commands a place of great prominence in the Gospel. Matthew affords a good example of this emphasis on healing in Jesus' mission: "*That evening they brought Him many who were possessed by devils. He cast out the spirits with a word and cured all who were sick. This was to fulfill the prophecy of Isaiah: 'He took our sicknesses away and carried our diseases for us'*" (Mt. 8:16-17).

11 With Jesus, healing of mind and body becomes the clear sign that the Kingdom of God is already present. When Jesus heals a leper or proclaims the parable of the Good Samaritan, it is an obvious sign of His compassion for those in suffering. But even more, it points to the new life of the Kingdom: the total and permanent healing of the human person in all its dimensions and relationships. Jesus' healing Word of power reaches the whole person. It heals the body, but even more important, it first restores those who suffer to a healthy relationship with God, and with the community. Many of the healing miracles have this double perspective: "*Your sins are forgiven*" and "*pick up your stretcher and go home*" (Lk. 5: 23, 25)

12 Nevertheless, Jesus does not remove the impenetrable mystery of suffering, even the suffering of the innocent. When asked about the man born blind, whether his sin or his parents' had caused the blindness, Jesus replied that it was neither, but "*so that the works of God might be displayed in him:*" (Jn. 9:1-3). The story of the rich man, and the poor Lazarus, helps us understand that suffering is not necessarily a result of our own wrongdoing, but a condition of our broken human existence. Suffering offers to Lazarus the opportunity for personal acceptance of God's will, and to the rich man the opportunity for a concrete expression of love. Lazarus lived up to his vocation, and the rich man did not (Lk. 16: 19-31).

13 Jesus' own life was interwoven with many forms of suffering. He knew fatigue, hunger and thirst. He experienced opposition, rejection and loneliness. He not only tolerated, but freely entered into, the hidden design of suffering and healing foretold by Isaiah. He accepted suffering, while turning in humble submission and trust to his beloved Father (Heb. 5: 7-9). Peter was rebuked and called "Satan" for seeking to dissuade Jesus from suffering, and told, "*The way you think is not God's way but man's*" (Mk. 8: 33). In the high point of the Last Supper, linked indissolubly with Calvary, Jesus' own spirit of voluntary sacrifice was summed up in stark simplicity: "*This is my body... given for you. This cup is the new covenant in my blood... poured out for you*" (Lk. 22: 19-20).

14 Thus, both through healing and sacrifice, Jesus triumphed over suffering and rose to new life in glory. The startling feature of the Good News is therefore that suffering has become a way to overcome suffering. God shows His power over suffering and death not only by taking it away, but by entering into our suffering and thus overcoming it from within. By taking it upon Himself, He heals it. The cross now signifies victory over evil, rather than its passive acceptance, and death has become the gateway to new life. Such a message presents an insurmountable obstacle to some, to others it is pure madness, but to those who have faith in Christ, it is central to understanding Him as *“the power and the wisdom of God”* (1 Cor. 1: 23-24).

15 The Gospel’s emphasis on new life and health continues to mark the days of the infant Church. From the very moment of their first mission by Jesus, the Apostles shared in His authority to heal (Mt. 10:1). At the time of their final sending, Jesus confirmed this power as a witness to the truth of their proclamation (Mk. 16:17). At the temple gate from which Ezekiel saw the life-giving river flow, Peter invoked this healing power of Jesus, when he said to the lame man: *“I have neither silver nor gold, but I will give you what I have: in the name of Jesus Christ the Nazarene, walk!”* (Acts 3:6). Twice Paul lists the charism of healing among God’s gifts to the people of Corinth (1 Cor. 12: 9, 28-30), and James includes anointing and prayers for the sick among the official actions of Church authorities (Jm. 5: 14-16).

16 But suffering too is always present. St. Paul begged three times with the Lord to remove *“a thorn in the flesh”* but the Lord did not remove it (cf. 2 Cor. 12: 7-10). However, suffering has received a new meaning in the image of the cross. Freely accepted suffering participates in the work of redemption. *“It makes me happy to suffer for you, as I am suffering now, and in my own body to do what I can to make up all that has still to be undergone by Christ for the sake of His body, the Church”* (Col. 1:24). Thus, in their trials as followers of Jesus Christ, Peter and the other Apostles rejoiced *“to have had the honor of suffering humiliation for the sake of the name”* (Acts 5:41).

THE HEALTH-CARE TRADITION OF THE CHURCH

17 The powerful concern of the Bible for healing of the whole person, and of all persons, has been present throughout the history of the Church. It is impossible in this short message to give a full account of this proud tradition. We simply wish to highlight a few examples that show how caring for the sick, and curing illness where possible, are an essential dimension of Christian service.

18 Hippolytus, writing in the second century, testifies that Christians continue to exercise the gift of healing just as they did in the time of the Apostles. The Apostolic Constitutions, a fourth-century liturgical record reflecting much earlier practice, provide for the installation of exorcist and healer, and include a prayer for the power of healing in the ordination of the presbyter.

This concern for health that brought about physical restoration, but more often the inner healing of love, made the emperor Julian the Apostate exclaim in grudging admiration in the fourth century: *“Now we see what makes Christians such powerful enemies of our gods. It is the brotherly love which they manifest towards strangers, and towards the sick and the poor”*.²

Among its manifold actions of healing, this love led the Church to establish the special ministry of deacons for the service of the Eucharist, and of the sick and underprivileged. The shrines of Aesculapitus, the ancient god of healing for the Greeks, were re-dedicated to Saints and their tradition of service to the sick, continued in the name of the Lord. The Church’s mission to heal inspired St. Basil the Great, in the fourth century, to found and maintain at Caesarea a vast charitable institution, which became the model of Christian hospitals. His contemporary, Gregory of Nazianzus, refers to this institution as a place where illness becomes a school of wisdom, where disease is regarded in a religious light, where misery is changed to happiness, and where Christian charity shows its most striking proof.³

19 This marvelous synthesis of holistic healing, left with the Church by Jesus, continues through the centuries. Throughout Europe, and later on in the New World, we find special places of devotion where weary pilgrims search for spiritual as well as physical healing. Many early hospitals were associated with cathedrals and monasteries. This pattern of helping service is a significant sign in itself. Hospitals were built near the cathedral, as if with facts bearing witness to faith in the two-fold presence of Christ: the real one under the Eucharistic bread and the mystical one in needy or sick brothers or sisters.

20 The Knights Templar, and later on many other orders of religious men and women, both Catholic and Protestant, were founded to nurse the sick. St. Catherine of Genoa (1477-1510) is considered a founder of modern hospital work. More humane treatment for the insane was innovated at St. Boniface Hospital in Florence in 1784. The hallmark of Christian missionary efforts was, and continues to be, medical service to the people of other countries. Great Christians – John Wesley, Louis Pasteur, Florence Nightingale, Albert Schweitzer, Tom Dooley – have led the way in the healing arts and in caring for those who suffer. Charismatic figures such as Mother Teresa and Jean Vanier continue to emerge from within the Church today, responding with new insights to the health-care needs of our time.

In our country as well, many outstanding Christians have worked in the health apostolate – Catherine de Saint-Augustin, Jeanne Mance, Mère d'Youville, Father Albert Lacombe, and others. Many Canadian cities owe their first medical services to a religious order or movement.

21 These great individuals and the communities they founded reveal for us the source and power of Christian service to the sick. They responded to Jesus' call for new life, and served the suffering and deprived through healing and compassion.

Their concern for the wounded, however, was often the result of a life-long struggle to cope with suffering in their own life, and to transform it into an experience of growth. In this way, the lives of these eminent men and women show us how suffering can help us to accept God's healing influence. They do not teach us to find happiness in pain. Suffering remains a sign of brokenness that should be resisted. However, when it is recognized and accepted as a basic condition of life in this world, we can integrate it into our search for wholeness and spiritual growth, as many Christians before us have done.

MODERN ATTITUDES AND PRACTICES AS FOLLOWERS OF THE SUFFERING HEALER

22 The history of Christianity is a record of service to the sick and of commitment to health. How are we today to accept that tradition, to assume it as our own, and to pass it on enriched by our own contribution?

For Individuals

23 The Bible has clearly taught us that our God is a God of life, who desires healing and health of our body, mind, and soul. Thus, all of us are called to preserve, protect and even enhance our health. In this way we will not only avoid being an undue burden on others, but more importantly share in restoring the original goodness of god's creation.

This responsibility for our own health includes our duty to care for the well-being of others, and thus for the social, political, and economic actions that make personal health possible. More will be said about this global challenge later. Suffice it to say for now, that many illnesses today are a direct consequence of our lifestyle, such as excessive use of tobacco, alcohol, drugs and junk foods, a lack of exercise, over-activity causing stress – all of these factors that are under our immediate personal and community control.

24 Even if we are sick, we maintain particular and even privileged responsibilities with the Church and society. For one, we always remain to some degree responsible for our own health and healing. Thus, in as much as possible, we should participate through action or attitude in our own integral healing, rather than submit passively to treatment.

More important, suffering people, including the chronically or terminally ill, can give a special service to others if they learn how salvation, the unalterable fullness of life for ourselves and for others, is mysteriously bound to the way of sorrow. Many people who suffer or have suffered are richer and wiser for it, experiencing the truth of St. Paul's word that we become "*heirs of God and coheirs with Christ, sharing His sufferings so as to share His glory*" (Rm. 8: 17).

Thus if you are presently sick or infirm, you can, in your newfound wisdom of always being loved by God, inspire others and give them courage to assume their own burdens. Still more, in your own body you can share in the great mystery of suffering for the sake of Christ's body, the Church (cf. Col. 1: 24). In your very suffering you can bring healing to others. For us Christians, you can paradoxically be at once cared for and caring for, ill and yet life-giving.

25 To all of you who are called to a special ministry of healing or caring – physicians, administrators, nurses, people in paramedical services, hospital chaplains, pastoral-care workers, and volunteers –we wish to express our special gratitude. We encourage you always to deepen your compassion in Christ, and at the same time to increase your professional competence. As Pius XII said so beautifully in an address to health-care professional: *“To recognize Jesus in the invalid and to act yourself like Jesus with Him – here is the ideal of every Christian nurse! In this way, it will come about that the image of Christ will be reproduced twice by every bed of pain: in the sick person, the Christ of Calvary expiating and resigned; and in the one assisting, the compassionate Christ, divine doctor of soul and of bodies”*⁴.

Such service will let you see and accept your own vulnerability and need for healing. This sharing in suffering will strengthen your resolve and ability to give and heighten your sensitivity for the dignity of the people entrusted to your care. In this way, you will ever more enter the life-giving mystery of human suffering.

26 The healing gifts in the Church are thus varied, but all are needed to bring new life in Christ. Some people bring wholeness through carrying their own suffering. Others, building on nature, have brought their medical skills under the aegis of Christ. Still, others have received the rare gift of charismatic healing. All of these gifts are celebrated and summed up, as it were, in the sacrament of the Anointing of the Sick, where the Church’s ministry of healing is joined with its ministry of reconciliation. *“By the sacred anointing of the sick and the prayer of her priests, the whole Church commends the sick to the suffering and glorified Lord, asking that He may lighten their suffering and save them”* (Lumen Gentium 11). In this sacrament, the Christian community brings sick people the healing reassurance that they are not abandoned, but supported in their time of trial by the life-giving presence of the Lord and His people. In this way the anointing of the sick helps Christians in spite of, and through their illness, to follow and identify with the suffering and risen Lord.

The Family

27 A special word must be said about the family and its role in health-care. The family is the source of a joyous and healthy attitude towards life. It is also a well-spring of courage in the face of trials, and of Christian compassion towards others who suffer. Modern research indicates that many illness are caused or aggravated by strained and tense relationships, especially in the family setting. Conversely, peace and harmony within the family encourage health. Health too can be contagious. Healthy communities, especially families, make for healthy persons and they in turn strengthen the well-being of a community.

28 With the healing power of the family in mind, more emphasis is being placed in recent years on home-centred, rather than institution-centred care. Being cared for at home, where possible, enables sick people, and even patients for whom there is little or no hope of recovery, to enjoy the immediate support of their family and friends. At the same time these opportunities for loving compassion and reconciliation can bring new wisdom and love to everyone involved, gifts that may be more difficult to acquire in the less personal surroundings of a hospital. In addition, the immediate contact with suffering can remind family and friends of life's true meaning and strengthen their humility and desire to grow in the Lord.

The Parish

29 The whole Christian community is called to overcome the burden of suffering in all its forms, not only to alleviate it but to prevent it where this is possible. All of us are gifted with the responsibility accepted at Baptism to continue Christ's healing mission. But parishes also have a major role in helping people to understand accept and transform their suffering. As an extended community of support, the parish must seek to integrate in its worship and its activities the suffering of its members so that it becomes authentically life-giving. Those who are well thus enable the sick, disabled or infirm to feel needed and to experience their suffering as life-giving.

30 The sick and suffering people in our communities can be prayed for by name at the Sunday Eucharist and through the help of special ministers can even participate in the same Eucharist by receiving the Lord's Body. These ministers become visible signs of the community's concern for the infirm when they join the priest in the final procession at Mass as they leave to take communion to the sick. In this way, all of us are reminded of the sick, both home-bound and hospitalized, and made aware and responsible for their spiritual, physical and emotional needs.

31 The Sacrament of Anointing of the Sick might be celebrated at least once a year during the Sunday Eucharist. This enables all to appreciate the community nature of the Sacrament as the whole parish realizes its own need for healing and its ministry to heal others. These parish celebrations should not be merely isolated events when the community passively waits for God to heal. They are really opportunities for the whole parish to renew its commitment to be God's healers. For to be healed it is important to know that the community needs and cares for us.

32 Pastoral care for the homebound or hospitalized makes this concern real. Fortunately, many parishes are already setting up pastoral-care teams whose members – clergy, religious, or lay – are given special formations in ministry and training in listening skills. These volunteers can do much through careful listening to make available the professional help that is needed. Moreover, through their

words and actions they can help the sick to see their situation in the light of Christ and to be nourished by His sacraments.

Another type of parish service in this regard is that of accompanying the dying in their final journey and helping them to experience their death as the gateway to new life. The recently bereaved, too, need the support of the community. Grief-recovery teams help people move through the stages of grief so that the process can be one of growth in faith, rather than crisis. They can also help to plan funerals as authentic Christian celebration.

33 Finally, amidst the wide-ranging parish or diocesan responsibilities for health-care that we carry collectively, we must not forget the structured and legislative changes necessary to help the sick and infirm, especially those who are poor or marginalized. Working together to reduce high entrance fees for nursing and other homes, or to strengthen in practice the principles of Medicare, are but two examples of such involvement. Making parish churches and other public buildings fully accessible to the disabled is another way of making this commitment real.

Catholic and Other Health-Care Institutions

34 Catholic health-care facilities – whether hospital, nursing home, personal-care home, or long-term care in general – fulfill a unique role in witnessing to the Christian attitude toward suffering and healing. Catholic institutions share goals similar to non-denominational health-care facilities. However, the institutional approach to the ministry of healing offers Catholics a privileged opportunity to supply the best possible care in a manner and atmosphere fully inspired by the Gospel and to work for exemplary standards of hospital care.

35 Traditionally these facilities were seen as religious institutions expressing a particular charism of the founding religious congregation. More and more, they are seen today as Church communities participating in an integral way in the apostolic responsibilities of the whole diocesan Church. We encourage this shift in perception and we call upon all the baptized working in these institutions to continue to develop in them this Christian attitude of concern for the whole person. The entire staff, professional and volunteer skilled and unskilled need constant growth in spiritual maturity for this service. Thus both patients and staff should receive ongoing pastoral care and education in faith.

In recent years, governments have assumed increasing responsibilities for health-care. However, caring for the sick remains an important Church service as a witness to Christ's life-giving message and as a sign of His healing presence. Moreover, there remain sectors in our country and elsewhere, where public care is incomplete. In line with the Church's preferential option for the poor, Catholic

health-care facilities should continue to serve especially the most needy, the most vulnerable and the weakest.

36 We also encourage Catholics working in non-denominational health-care institutions. We urge you to reflect prayerfully alone or, better still, together with other Christians in your daily work, on being with the suffering and with other healers. Always remember how closely your daily concerns touch on what was at the heart of Jesus' ministry: to heal the sick and to comfort the suffering. Care for all people equally, according to their need but independent of creed, colour or income. For each person is created in God's image, and has unique importance within His creation. In your reflections, you will draw even deeper inspiration from the knowledge that it is Jesus Himself who comes to meet us in the sick and suffering: "*I was sick and you visited me*" (Mt. 25: 36). "*Our Lord, the sick*" they used to say in the medieval Hotel-Dieu institutions. What better way to instill profound respect and love for the suffering?

37 All people of goodwill working in health-care facilities hopefully would see their work as a most noble calling. It carries with it the responsibility to ensure that the principle of loving concern for people, flowing ultimately from God's design for humanity, should penetrate this most privileged work place. Such love is always patient and kind. It is never rude nor selfish. It is always ready to excuse, to trust, to hope, and to endure whatever comes (cf. Cor. 13: 4-7).

Hospitals and other health-care institutions should always serve the sick and never the other way around, as is done when sick people become cogs in an impersonal machinery of medical technology or helpless victims of labour conflicts. In an age when the technological is often placed before the spiritual, when efficiency takes precedence over true compassion, it is vital to recall the supreme importance of person-centred care. Such care should include consideration for the spiritual needs of people. Healing best takes place in an atmosphere of love and understanding which includes reconciliation with oneself and with others. Thus, to rely on faith without medicine would be irresponsible, but to rely on medicine without faith would be also inadequate.

The Social, Economic and Political Community

38 Certainly, today there are new marvels of the healing arts, but there are also new dimensions of suffering which the world has never known before. Science and technology, especially in the field of biogenetics, continue to make dramatic advances in the diagnosis and treatment of illness. The new discoveries, it is true, can open the door to unpermissible manipulation of human life and lead to the false expectation of a man-made world without suffering. Yet, there is also much promise for the control and even elimination of many diseases, in a way not dreamt of only decades ago. Public health services prolong life. Infant mortality has

decreased in most countries and even the unborn child can be treated for certain deficiencies.

39 Here again, however, there are new threats of illness and harm as nuclear radiation and industrial wastes menace the air, soil, and water of our planet and new technologies are employed to kill the unborn. Often enough the curious paradox arises where people try by all means to prolong the duration of life, while on the other hand they hasten to eliminate it at its beginnings and sometimes at its end. One could well ask then whether advances in healing have kept pace with the growth of suffering especially if we consider that improved methods of health-care are often unavailable in poor and developing countries. As Pope John Paul II reminds us in his 1980 Advent Encyclical “On the Mercy of God”: *“The state of inequality between individuals and between nations not only still exists, it is increasing. It still happens that side by side with those who are wealthy and living in plenty there exist those who are living in want, suffering misery and often actually dying of hunger; and their number reaches tens, even hundreds of millions.”*⁵

40 The pace and demands of modern life have given rise to a tide of emotional and nervous disease. Medical services are strained to the limit because of the way we organize our lives, individually and collectively. Doctors report that many patients require medical assistance for problems that relate more to their social or physical living environment than to their own body structure. Small babies and children are admitted to hospital for days at a time, not because their physical condition is so severe but because their families cannot cope or there is no extended family to give support. Some hospitals have wards filled with elderly patients left on their own. Sometimes their families fail to care; in other cases, there are not enough senior citizens’ homes available or else we fail to provide the collective support that would allow elderly and infirm people to remain in their own homes.

41 Christian health-care must include a critical analysis of our attitudes, life-style and of the structures of society that inflict suffering on powerless people. For instance, are vast expenditures of money on remedial medicine justified, when basic housing, nutrition, education and sanitation policies multiply unnecessary illness, especially in Third World countries? Christians need to explore and change the roots of ill health found in the way we organize our society. For example, inadequate and expensive housing endangers the health of the poor. In the field of education we find exaggerated competition among students and staff that places needless strains on people. Unfair and unsafe labour practices threaten the health of workers and of their families. Economic policies that increase

automation at the cost of rising unemployment neglect people's basic need to find recognition and dignity in work.

The healing of these social ills and the equal provision of health services to all people in our country and elsewhere may be beyond the reach of individual persons, but they are not beyond the reach of people working together. They are within the reach of governments and therefore of the political process. This process involves everyone of us and thus calls for our active and untiring participation, be that at the parish, diocesan, regional or national level.⁶

CONCLUSION

42 We have tried in this pastoral message to probe the hidden meaning of suffering, but even more to see through it the healing light of Christ's victory over evil in His cross and resurrection. Just as the self-giving life and death of Jesus Christ was taken up and transformed in His risen state, so we too as persons and as a people pass through the way of service and suffering to a new and fuller life.

43 This hope for final healing, far from diminishing our concern for health, stimulates our individual and collective efforts to overcome suffering in this world "*for it is here that the body of a new human family grows, foreshadowing in some way the age which is to come*" (Gaudium et Spes 35). It calls us to love and serve our suffering brothers and sisters in the image of our Lord Jesus who gave His own life to save us, who "*did not cling to his equality with God but emptied himself to assume the condition of a slave... even to accepting death, death on a cross*" (Ph. 2: 4-8). When we follow the example of the Lord Jesus who "*went about doing good and curing all*" (Acts 10: 38), we obey His command to cure the sick (cf. Mk. 16:18).

44 In this way, the new life in Christ is already made manifest through our own manifold efforts for personal and social wholeness. But even where our efforts fail, we do not lose heart but are encouraged by St. Paul's admonition: "*Though this outer man of ours may be falling into decay, the inner man is renewed day by day. Yes, the troubles which are soon over, though they weigh little, train us for the carrying of a weight of eternal glory which is out of all proportion to them*" (2 Cor. 4: 16-17).

Notes

¹ Today there is debate whether the Divine Name should be pronounced in this way. Without taking sides in this discussion, we will nevertheless make use of the translation of the Jerusalem Bible.

² Quae Supresunt Praeter Reliquias apud Cyrillum: Omnia, 1:391 ff.

³ Cf. On St. Basil 63. In: *The Fathers of the Church: A New Translation*, Vol. 22. Washington: Catholic University of America Press, 1953, 80.

⁴ AAS 45 (1953) 726. English Text: *The Pope Speaks*, 1 (1954) 55

⁵ *Dives in Misericordia*, No. 11. See also what our Labour Day Message "*Sharing Daily Bread*" had to say about this injustice and our role in it (Nos. 6, 13 and 15).

⁶ See our 1976 and 1977 Labour Day Message "*From Words to Action*", No. 9, and "*A Society to be Transformed*", Nos. 5 and 16.