

# PASTORAL LETTER

*(short version)*

OF

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BISHOP OF GOZO

ON THE OCCASION OF

THE FEAST OF MARY ASSUMED INTO HEAVEN

2013

## **Church close to the Sick**

**While material wealth distinguishes people from each other because some have abundance of food while others do not have a day's sustenance, suffering, on the other hand, places everyone on the same existential level. One kind of suffering that scourges humanity is sickness, particularly incurable and chronic disease.**

### **Persons who are close to the sick**

In my ministry as your shepherd I meet many sick persons or their relatives who ask me to pray for them. Apart from those in hospital, there are others almost hidden in the shelter of their homes. Often, I find that where there is a person suffering through sickness, the whole family is under pressure.

Also close to my heart are all those who offer their service in the health field: doctors, nurses, hospital staff and others. The work of Mgr. Manwel Curmi in "Dar Arka that welcomes in it persons with disability gives me great satisfaction.

I have in mind, also, the hospital chaplains, those priests, religious and lay persons who generously visit the sick. By the service they offer in the parochial community, in institutions for the sick and the elderly, these persons imitate the Good Samaritan, bandaging the

wounds and helping in the healing process. I am grateful also toward those who do their best not to deny their sick relatives of the care and loving attention they deserve.

### **The interior battle of the sick person**

The sick person, particularly if his illness is serious, passes through an “agony”. The word “agony” comes from the Greek “*agone*” which means struggle. The sick person, particularly when his/her sickness is advanced, will have: a *physical struggle* to fight the disease; an *emotional struggle* due to the realisation of impending loss of all that was dear to his/her heart, especially the loved ones; then there is also a *spiritual struggle* regarding certain questions about what sense there is in suffering, what is the meaning of life which is about to end, and other questions. The same existential questions arise in the minds of those close to the suffering person.

### **The Church is close to the sick person**

The Church cannot remain indifferent when faced with this cry of man. When I consider how much this experience of sickness affects so many persons and can shake them strongly; when I consider how much we could reduce this suffering if we choose to be responsible and more careful in respect of this reality, I felt that I should share with you these reflections and proposals in the hope of having a renewal of our pastoral duties regarding the sick. After all, Jesus had a preferential love for the sick. In the Gospel we find a number of events where Jesus himself “healed those who needed healing” (Luke 9,11). He also sent the Apostles to “spread the Kingdom of God and heal the sick” (Luke 9,2).

### **Medicine and Science in the service of mankind**

We cannot but be grateful for the discoveries medicine and science made in the provision of cures for disease. I salute those involved in research because their discoveries help a lot to allay suffering. It is our duty to defend life and improve its condition; however, we cannot but admit that there is a limit to what can be done. When medicine or science give vain hopes, these could have a negative effect on the psychology of the sick person and, instead of being helpful, they would increase sorrow and frustration.

### **An appeal for responsibility**

Today, it is accepted that every person has a right to receive health care. But it often happens that the rights of the weak become weak rights because, although they are documented, they are not easily accessible to those who are weak and have no means, contacts or skill to receive what is theirs by right; very often some come to resemble that sick man who, for thirty-eight years, had been waiting for someone to help him enter the healing pool of Betsada, until Jesus healed him.

No one should be denied the treatment he needs. It is a very positive fact that in our country the state offers a free medical service; but sometimes it so happens that the system is abused. It is a grave moral wrong if one takes free medicine from the hospital and either not use it or pass it on to someone else. One is also at fault if one uses the free hospital and clinic services unnecessarily and thus possibly delaying or depriving someone who really needs the service. One would really have no conscience if one uses the health services for commercial interest. One would be committing a serious robbery if, for personal greed, one exploits a patient's sickness for financial gain. While one recognises the fact that there are many members of the medical profession who, with personal and familial sacrifice offer their service even gratuitously, this does not mean that the temptation to make a market within the health profession does not exist.

### **Care with a human face**

Medical cure is, of course very important, but so is affective care. The sick person continues to enjoy respect even when the body loses its beauty and strength, because the body is that of a human being and never loses its dignity; in fact, the more the patient loses his/her autonomy, the more he/she should be respected. It is a shame when we send the message to the patient that, because of his/her condition, we want to "get rid" of him/her. Cure with a human face implies more sensitiveness towards the patient, more presence with him/her, more generosity and more empathy.

### **Exploitation of the sick**

The more a sick person becomes physically and psychologically fragile, the more he/she should be protected from any form of abuse or conditioning. We must not play about with their will, and any manipulative practice in this context goes against charity and justice. Greed for possessions could be a temptation for one to influence sick and elderly persons to change their testamentary will. That which is legitimate is not always morally sound.

### **Education of the heart**

Therefore, every form of the health system demands not only a change of structures or technological instruments, but a change of heart in the health operatives. The medical profession requires academic formation and also education of a heart that loves patients.

### **Sickness raises big questions**

Our society is progressively becoming beguiled by the brilliance of what is material and is besotted by what gives immediate satisfaction. This type of society is uncomfortable when faced with suffering, and so it tries to hide it. But whenever we hide suffering we would just be placing it on a shelf. Although it becomes invisible to our eyes, suffering remains extant and raises for us grave questions, so much so that we would not be surprised if someone were to ask: *"If God exists, why is there suffering?"* (Saint Augustine).

## **Sickness through the eyes of faith**

In this situation, we need to show the sick person the light offered by what Edith Stein calls *scientia crucis* (wisdom of the cross) that the Crucified Christ teaches us. Instead of a beautiful sermon to explain the meaning of suffering, Jesus “learned from his suffering the meaning of obedience, and because he reached perfection” (Hebrews 5,8-9) became the Saviour of humanity. Jesus suffered a lot because he loved a lot, so that what we called *scientia Crucis* becomes *scientia Amoris* (wisdom of love). Thus he shone a new light on the mystery of suffering. As Pope Francis wrote in his first encyclical, “believing is not just looking at Jesus, but also seeing things as Jesus sees them, with his eyes” (*Lumen Fidei*, 18). Therefore, it is necessary for us who believe to look at suffering with the same vision the Divine Master had.

Driven by love, the suffering person can embrace the cross of the Redeemer and, that way, his suffering would be an act of love for Jesus and mankind. It would be truly a blessing if, like our father Paul, we manage to say: “I welcome my sufferings for your sake, because through them I complete in my body what is lacking in the suffering of Christ in his body which is the Church” (1 Col 1,24). In this manner, human suffering, illuminated by the Crucifix, becomes a resource that can change the history of many.

## **Spiritual companionship of the sick**

The sick bed is an altar, not only because on it we offer ourselves together with Christ to God, but also because around it the liturgy is celebrated – as when we bring the Eucharist to the patient, when we give the sacrament of the Anointing the Sick, or when, together with the sick person or in his name, we call for God’s and the Saints’ help by prayer. Experience teaches us that when we do things in prudent measure, the prayers with and for the sick person are well appreciated by sick people.

## **Pastoral proposals**

With regard to all the foregoing, it is my wish that in the diocese we increase our commitment to the pastoral care of the sick. In the next few weeks I shall be appointing my Delegate who will be responsible for this purpose. It is my wish that the “Day of the Sick”, which the Church celebrates annually, is given more value. Currently, we are working on reforming the pastoral services we offer in our hospitals. In my view, our General Hospital is another parish, but distinct from the other parishes because of the sensitivity of the human and spiritual experiences it offers.

I invite all the parochial communities to reinforce the works already established in regard of the sick and to increase the initiatives in this field so that the Church would be truly close to the sick and their relatives. I recommend that the parochial *Caritas* shows solidarity with these persons, while scrupulously protecting confidentiality in these cases. I ask the parishes

to study how they could help to ensure that the proposal of *parish nursing* is established for the benefit of our sick.

### **The intercession of Our Lady**

As indicated by the assumption of Mary into heaven with body and soul, the feast of Saint Mary reminds us that this body of ours, although vulnerable to illness, has an eternal value. But the *Assumpta* is also the *Addolorata* – that woman who, with great love, stayed with her crucified Son and consoled him during his sorrowful passion. Since Mary had the experience of sickness and death, she understands when we pass through difficult moments like these. Mary, *Health of the Sick*, fills us with courage to live the experience of illness in the light of the Good News.

With the intercession of The Assumption and Saint Joseph, patron of the dying, I pray for God's blessings on you, particularly on our sick and elderly, and on those who work in the health field.

**+ Mario Grech**

Bishop of Gozo

**Mons. Salv Debrincat**

Chancellor