

HEALTH CARE AND THE CHURCH'S MISSION

*An Australian Bishop Reflects upon the Health Care
Ministry's Role in the Larger Work of the Catholic Church*

In what way is Catholic health care part of the mission of the Catholic Church?

Before trying to answer that question, it is necessary to ask the larger question: What is the mission of the Catholic Church? Nine years ago, I presented a paper at an executive workshop sponsored by the St. John of God Health Care System, which is based in Perth, Western Australia.* In that paper, I suggested the following definition: "The church is a communion, but as such it is a sign and servant of what God is doing on a larger scale, reconciling the whole cosmos in Christ, the coming of the Kingdom of God. The church is always a fragile, ambiguous sign of the kingdom, but also always its servant."

That rather dense theological sentence summarized my understanding of the church and its mission as of 1994. Along with my definition, I offered a warning: "Unless we shape ourselves in the future in terms of our mission to serve the reign, the Kingdom of God—communion/reconciliation among all people with themselves, each other, the whole created order, and God—and with all that such reconciliation entails—then we have little hope of a future to inspire and give life."

I was speaking at that time of the Catholic Church as a whole. But it is also urgent that any particular part of the church, such as Catholic health care, shape itself in terms of the larger mission of God. It must do this if it wants to remain authentically and vibrantly Catholic, if it is to have, as I said then, "a future to inspire and give life."

*St. John of God Health Care, an eight-hospital system, was formed in 1987 by the Sisters of St. John of God. For information about the system, see www.sjog.org.au/about/index.html.

THE MISSION OF THE CHURCH

But before we go too far in analyzing the way in which Catholic health care is part of the church's larger mission, it might be helpful to explore a little more our understanding of that mission. I will begin by trying to "unpack" the rather dense theological sentence just quoted.

The key words for a reflection of this kind are "communion" and "mission." When one speaks of the church as a communion one is describing a way in which those who make up the church belong to each other. They are united to each other in an extraordinarily profound way because of their common belonging to, or participation in, a relationship with God. This relationship is founded upon their baptism. It is a relationship achieved by the Holy Spirit, who unites them to Jesus Christ, and, in doing so, also unites them to each other. They are thereby enabled to participate in Jesus Christ's own relationship with his Father, and to do so with each other. This profound, truly divine foundation for the belonging of the members of the church to each other distinguishes the church from other groups of people and explains why we refer to it as a "communion" rather than a "community." It is not simply a community with a common purpose.

The next thing that needs to be acknowledged is the fact that, although the church has been formed by God as a communion, it does not account for everything that God has done or is doing in our world. Rather, the church can be understood as the most complete historical expression of what God desires and is working toward, in many different ways, for the whole created order. The mission of God, for which Jesus Christ was sent and for which the Holy Spirit came, is a mission of drawing everything that has been created into the deepest possible relationship with the Creator, the source from whom it comes. Everything has been torn away

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from that relationship and damaged and distorted by human sin. But, through the silent working of the Holy Spirit and through the historical activity of Jesus Christ himself and of those in whom he now lives through baptism, all people and all creation are being drawn back into this profound communion. This is the larger mission of God in the world. The mission of the church in some way continues the mission of Christ and so is a participation in that mission of God, as its sign and servant, drawing everything deeper and deeper into a divine, universal communion.

So it is that ecumenical work, which attempts to draw Christian churches back to the full communion they once had with each other, is part of the mission of the Catholic Church. Work aimed at improved collaboration and dialogue with members of the other great world religions, such as Judaism and Islam, is likewise a necessary part of the church's mission. So, too, is work whose goal is the restoration of the integrity of the whole created order, and of harmony between human beings and everything else living in this world. So is work for justice and peace and the overcoming of barriers that keep people apart and destroy the God-willed communion among them. Everything that contributes to the communion of people with God, with each other, and with the whole created world—including, in this case, care for the sick and the suffering—is part of the mission of the church.

So it was that I could in 1994 say, in that rather dense sentence, that the church is a communion, but one that as such is both a sign and servant of what God is doing on a larger scale, reconciling the whole cosmos in Christ. It is also why there was such urgency in the warning I then uttered. Unless we shape ourselves in terms of this mission of serving the divine work of building communion among peoples and with the whole created order, then our work will be pointless because it will be irrelevant to the great drama of this world, which is the drama of what God is doing within it.

Speaking nine years ago, I also said:

Everything that
contributes to people's
communion with God
is part of the church's
mission.

I would hope that you could find a way of doing your work that somehow conveys to all who enter your facilities God's concern for them, God's attitude toward them; so that they will leave not only physically better off but also more deeply aware of how precious they are personally and, at the same time, how they belong to a human family which is in solidarity with them, especially if they are poor or

marginalized; and so experience, even if not with explicit awareness, that God is in solidarity with them, as God has shown definitively upon the cross of Calvary; and finally that the future is good because God has already won the victory.

CATHOLIC HEALTH CARE

At that 1994 conference, Francis Sullivan, the CEO of Catholic Health Australia,* said, concerning the particular contribution of Catholic health care to the mission of the church:

Through the actions and ministry provided in Catholic hospitals, we want people to experience the "touch" of the divine, a sense of the "beyond." In this sense the Kingdom is alive and real in people's lives. If nothing more can be said, the fact that people are enabled to transcend their present realities and be called forth into new dimensions of their personhood, then Catholic hospitals and our healing ministry provide a distinctively valuable contribution to the country's health system. Thus our public image can be far from shallow or prone to being swallowed up in the all-encompassing image of private hospitals per se.

*Catholic Health Australia, that nation's counterpart to the Catholic Health Association of the United States, represents more than 680 Catholic health care sponsors, systems, facilities, and related organizations and services. For more information, see www.cha.org.au/about/index.html.

At the same meeting, Fr. Cyril Hally argued this way: "Mission is . . . seen as a movement from God to the world; the church is viewed as an instrument for that mission, and not the only instrument. To participate in the movement of God's love toward people is to participate in authentic mission." In his presentation, Fr. Hally described the changing nature of our society and culture and, indeed,

of the social and cultural makeup of the St. John of God Health Care System. Within that context, he mapped out some of the contours of the particular contribution of Catholic health care today to the church's mission and so of God's mission in this world. Among other things, he added this specific challenge: "I believe that one of the major justifications for maintaining a strong Catholic health care system is precisely to be able to function credibly as an advocate for public policy changes in line with Gospel values."

In saying this, Fr. Hally shifted the focus from where I and Francis Sullivan had tentatively placed it, on the particular way we engage in health care, to the social and political role of Catholic health care.

TWO ASPECTS OF THE MISSION OF CATHOLIC HEALTH CARE

Already in this discussion, there have emerged two different ways in which Catholic health care participates in the mission of the church.

Revealing the Compassion of God Firstly, Catholic health care ought to offer its services to the sick and suffering in a way that draws them to perceive the presence of God in that experience, with all that that implies. Catholic health care ought to recognize a transcendent dimension in what it does. It ought to offer an interpretation of the experience of sickness and suffering and of dying itself, an interpretation that locates that experience in the hands of God.

Catholics ought to enable the sick and vulnerable to experience health care as consistently as possible with the way God would wish it delivered, as we have come, through Jesus Christ, to understand the divine will and wisdom. This would mean that, even if they are incapable of articulating it, people get a sense of having experienced something of the divine compassion. It is the church's mission to share, through its health

One thing Catholic health care does is reveal God's compassion for the sick.

care ministry, that divine compassion with the sick, troubled, and disadvantaged of our world. This compassion is a hallmark of genuine communion and is integral to the church's mission.

Ultimately, a Catholic health care institution will offer hope to people, even if it cannot offer the concrete healing they desire, because its framework is not limited to the scientific and techno-

logical. Everything, even death, is different because of our faith in Christ's victory over sickness and death in his resurrection.

One could also say something here about the way individual workers in Catholic health care institutions treat patients and the families of patients, and about the respect health care workers have for patients as their equals—even, at times, as privileged—because of their suffering. Workers in Catholic health care recognize that patients have a spiritual dimension, not just physical, intellectual, and emotional ones. Such workers treat people as if they have a relationship, not just with each other and with the practitioners of health care, but with God. One could mention also the way workers in Catholic health care approach the practice of health care—as a service in the Christian sense of that word, not simply as a commercial activity.

Acting as an Advocate for Equitable Health Care Secondly, because of its interpretation of the human person, its commitment to justice, its preferential option for the poor, and other dimensions of the vision supplied by the Catholic faith, Catholic health care is also an advocate for whatever system of health care turns out to be the most equitable. If there are practices, procedures, or policies that disadvantage some people and favor others, that disenfranchise people or even oppress them, then Catholic health care, witnessing to a better way of doing things, must make whatever contribution it can to changing those practices, procedures, and policies.

The church's mission is never limited to seeking a response to God in individual human hearts, or to caring for individual human beings. Its concern is equally about culture and all that is involved in culture—economics, politics, social structure, and other dimensions. The church's mission is to offer the transforming vision and

power of God as revealed in Jesus Christ to the whole of the human community in all its aspects.

I began this article by describing the church's mission as *communion building*: aiming to draw everyone into communion with God, with each other, and with the whole of God's creation. To the extent that it is capable of doing so, Catholic health care has a responsibility of ensuring that everyone in our society, and in the larger global arena, is served equally and with equal compassion. This is a major responsibility and a delicate one, deserving much more reflection than can be offered here.

THE CODE OF ETHICAL STANDARDS

Another dimension of the mission of Catholic health care is found in the *Code of Ethical Standards for Catholic Health and Aged Care Services in Australia*. There one reads the following, quite simple sentence: "Catholic health and aged care is called to respond to a person's health care needs with compassion and in fidelity to the healing mystery of Jesus Christ."¹ The text then goes on to quote St. Luke's Gospel, in which Jesus tells his disciples, "Whenever you enter a town and its people welcome you, eat what is set before you; cure the sick who are there, and say to them, 'The kingdom of God has come near to you'" (Lk 10:1, 8-9). The *Code of Ethical Standards* makes the simple point that the healing of the sick was one of the major signs which accompanied Jesus' own proclamation of the reign of God, and that his example has inspired people over the centuries to reach out to those who are sick or disabled, to those who mourn the death of loved ones, and to all who are forced to the margins of society. The *Code* does not endeavor to explore the church's mission or to analyze more fully the role of health care in that mission, though it clearly locates in that mission the carrying on of Jesus' compassionate ministry to the sick and suffering of this world.

If one looks at the basic principles listed at the beginning of the *Code of Ethical Standards*, one sees that each is prefaced by a quote from the Scriptures (such as that from St. Luke), and that each of these reinforces the image of a compassionate Jesus reaching out to the sick and to those in need. The section ends with these words, which illustrate the distinctive approach that Catholic health care should offer, because of its commitment to carrying on the mission of Jesus Christ: "Catholic health and aged care services should be marked by a material and spiritual solidarity with people who are sick, disabled, frail, elderly or dying which is not governed primarily by economic considerations. We should never harm or abandon a fellow human being, but like

the women who waited by the cross of Jesus (Mt 27:55) strive to accompany those in need, no matter how distressing or disadvantaged their circumstances may be."²

ECCLESIA IN OCEANIA

A fuller articulation of this vision of Catholic health care can be found in the apostolic exhortation *Ecclesia in Oceania*. In it Pope John Paul II says to the peoples of the South Pacific, "Jesus came to heal the sick and comfort the afflicted. As the risen Christ, he continues his ministry of healing and comfort through those who bring God's compassion to people in their weakness and suffering. The ministry of the Church of Oceania is for many people the most visible and tangible proof of God's love. The messianic mission of mercy, of healing and forgiveness, must be continued unstintingly and accomplished in new ways that respond to current needs."³

Pope John Paul II sees Catholic health care not simply as a response to the example of Jesus but as Christ himself continuing to work through us. Catholic health care is the working out of the Risen Christ's own compassionate ministry to people who are weak and suffering, thereby revealing the love of God for them. It is said to give them a "tangible proof of God's love for them," which is a very powerful recognition by Pope John Paul II of the force of such witness in the lives of people who are sick. Finally, the paragraph describes Catholic health care as a "messianic mission of mercy, of healing and forgiveness" that must be "continued unstintingly." The church's commitment in this area of health care is called by the pope a "fundamental" commitment: one, he says, that must not be compromised, despite the current crisis in providing and financing medical care and the severe strain that has occurred as a result of this crisis.

The Holy Father concluded his treatment of Catholic health care in Oceania as follows:

Faith in the redeeming Cross of Christ gives new meaning to sickness, suffering and death. The Synod Fathers urged support for those who own or sponsor facilities which bring the compassion of Christ to those who suffer, particularly people with disabilities, HIV/AIDS, the elderly, the dying, indigenous peoples and those in isolated areas. They were particularly conscious of those who provide these services in the most remote areas: the jungle, small islands or the Australian "Outback." Working often with scarce resources and little financial support, their dedication gives powerful testimony to God's love for

the poor, the sick and the deprived. Those working in hospitals, caring for the aged or offering other forms of health care to the least of their brothers and sisters (Mt 25:40) should know that the Church highly esteems their dedication and generosity, and thanks them for being in the forefront of Christian charity.⁴

The pope has added another dimension to the way in which we understand the participation of Catholic health care in the church's mission. It is the way in which Christ himself continues his ministry in the world today. Not only must Christians inspired by Christ's example act with his compassion toward the sick and suffering; it is Christ himself who continues, through the church's health care ministry, his own work of compassion and healing.

The church exists in Christ. It is a communion brought together in him by the Holy Spirit. Because his followers actually live in him, his attitudes slowly but surely take over their attitudes. Therefore, his own attitude to the sick or suffering finds a home in the hearts of his followers. This transformation of attitude has been in constant evidence in the church through the centuries; it grows in each Christian's life, so that his or her approach to the sick and suffering is increasingly the same as Jesus Christ's approach to the sick of his day.

The approach of Catholic health care today is both an attempt to follow Christ, and thus be faithful to his teaching and example, and, at the very same time, an expression of his presence and his actions continuing in the world. This is true of every dimension of the church's life, including its care for the sick and suffering.

Catholics must care for the sick and suffering. They have no alternative, and, in fact, we can see how they have been driven to it throughout history. It is an unavoidable consequence of both their following of Christ and their Christian existence in Christ. That they do so through hospitals and other health care and aged care institutions is almost an inevitable historical consequence of that attitude. It is not the only consequence, because Catholics working in all kinds of other health care institutions are similarly fulfilling their discipleship of Christ; and he continues to exercise his ministry through them.

But, given the complexity of health care and the particular approach that followers of Christ (and, specifically, Catholics) might take, it is nonetheless inevitable that they will express this through health care institutions that can exemplify that ethos and be faithful in every way to that discipleship. As a result, there will be no disconti-

nunity between Christ's presence in his followers and the way their institutions function.

THE ETHICAL DIMENSION

In *Ecclesia in Oceania*, the pope drew attention to the need for formation of administrators and staff in Catholic health care so that they would be able to apply Catholic moral principles in their professional lives. He acknowledged that not everyone involved in the work of Catholic hospitals is familiar with these principles or necessarily agrees with them. However, he believes that, because the principles are true, they would, if properly presented, bring peace to those who accepted them. This, given the relatively recent (2001) publication of the *Code of Ethical Standards*, is an important insight. At times, some are a little shy about the ethical standards that the Catholic Church asks its institutions to apply in practice. The attitude of those who drew up the code, which is certainly consistent with our Catholic tradition, was that the vision contained in it is very positive and life-giving when properly understood, a vision that should ultimately be liberating for professionals in our health care system.

Pope John Paul II sees as a distinctive role of Catholic health care its position at the forefront of the church's promotion of human life from the moment of conception until natural death; he notes that the bishops who in 1998 gathered in the Special Assembly for Oceania "recommended that to counteract the influence of a 'culture of death,' all Christians be urged to help ensure that the great heritage of Catholic health care not be jeopardized."⁵ The pope was referring to a proposition passed by the Oceania bishops at the 1998 assembly as a recommendation to himself.*

Catholic health care contributes to the church's mission by witnessing to the particular understanding of the human being and the ethical stances that flow from it, which are integral to the Catholic tradition. This is sometimes a difficult area for participants in our institutions, if they do not understand or appreciate the church's approach or in fact disagree with it. So we have to offer people every opportunity to see that our ethical positions are based on a particular understanding of the human person, an understanding that is valuable, enlightening, and liber-

*The text of the special assembly, *Jesus Christ and the Peoples of Oceania: Walking His Way, Telling His Truth, and Living His Life*, can be found at www.vatican.va/roman_curia/synod/documents/rc_synod_doc_24081998_oceania-instrlabor_en.html.

ating. There is, in this regard, a great deal of work to be done in Catholic health care institutions in the next few years. We will be well served in this by the *Code of Ethical Standards*, which has been produced by the labor of so many of our best ethicists and through the review of so many clinicians and practitioners.

CATHOLIC HEALTH CARE AND EVANGELIZATION

At the ninth World Day of the Sick, held in Sydney, Australia, in February 2001, a letter

from Pope John Paul II was read. In it, he called for a new evangelization. And, indeed, the ninth World Day of the Sick had as its theme "The New Evangelization and the Dignity of the Suffering Person." The pope called for a new approach to the mission of Catholic health care as part of the church's evangelizing mission. Given the contemporary world, he said, it is "more urgent than ever that the Gospel of Jesus Christ should permeate every aspect of health care."⁶

At the World Day of the Sick celebration, Fr. Gerald Gleeson of the Catholic Institute of Sydney gave a paper entitled "Evangelization and Catholic Health Care—Ethical Issues." Exploring the link between evangelization and Catholic health care, Fr. Gleeson focused on the witness that the latter offers. Catholic health care witnesses to the dignity and worth of every human person, the sanctity of human life (especially when life is most vulnerable), the value and dignity of a person's body, and God's love for each person, so that no one is ever abandoned, no matter how distressing his or her circumstances may be. Fr. Gleeson said, "These are some of the great truths to which our health care ministries must give witness, and the quality of our witness should be such as to prompt questions in the minds of others, so that—when appropriate—we have the opportunity to articulate the convictions that sustain the Gospel hope which motivates our ministry."⁷

Fr. Gleeson was, I think, touching here on another role that Catholic health care plays in the church's mission: exemplifying for others the compassion and the vision of humanity that has been revealed by Jesus Christ, thereby revealing Jesus Christ himself to them. Because

Catholic health care is a response to and continuation of Jesus' healing ministry.

Catholic health care has a particular way of responding to the sick and the suffering, which it has learned from Jesus Christ, it bears witness to Jesus Christ himself, a witness that would not be offered were we not to have health care institutions that are publicly and fully part of the Catholic Church.

If the greatest contribution the church can offer anyone is to facilitate for them a relationship with Jesus Christ, then its approach to health care will be one of those

signs that can cause a person to ask the deeper questions that lead him or her to discover Christ as the way, the truth, and the life that he or she had been seeking. Those engaged in health care would need to be willing and able at times, as Fr. Gleeson indicated, "to articulate the convictions that sustain the Gospel hope which motivates" their ministry.⁸ When we see Catholic health care in this way, we understand it as essential to the church's mission, because, without the health ministry, a part of that to which the church's mission must bear witness would be lacking.

THE MISSION OF CATHOLIC HEALTH CARE

After rereading the papers from the 1994 workshop and reflecting upon the 2001 apostolic exhortation of Pope John Paul II, the *Code of Ethical Standards*, and the papers presented at the ninth World Day of the Sick, I see that there are a number of ways we can look at the participation of Catholic health care in the mission of the church.

Making Present the Compassion of Christ It is clear that everyone recognizes that Catholic health care is both a response to and a continuation of the healing and compassionate ministry of Jesus Christ. This is perhaps the most fundamental dimension of the contribution of Catholic health care to the church's mission. Catholic health care is a public, historical, and social articulation of an integral aspect of the corporate life of the church as it exists in Christ. Health care is not just the church's responsibility; it is also an inevitable expression of its relationship to Jesus Christ, both as follower and participant in his own life. It is clear that the church needs Catholic health care, if

it wishes both to follow Christ faithfully and not to inhibit his desire to continue to care for the sick and suffering of the world.

Evangelization or Witness to Christ

Given the unique relationship of Catholic health care to the mission of Jesus Christ, people ought to be drawn to him because of what Catholic health care represents. It could be argued that the church cannot fulfill its mission of revealing

him to the world in a complete way without Catholic health care. Therefore, Catholic health care is also integral, even essential, to the evangelizing mission of the church.

Making Present the Transcendent Dimension in Health Care

As a consequence of the presence of Christ's ministry in the mission of Catholic health care and the desire of its practitioners to be faithful disciples of him and witnesses to him, those practitioners will perform health care in a particular way. They will enable God, or at least spirituality, to be recognized as part of the total experience of sickness, suffering, healing, and, at times, the end of life. Unless we have Catholics and other religious believers involved in health care, this possibility will often be lacking. Again, Catholic health care is essential to the mission of the church.

Advocacy Once Catholics, in response to Jesus Christ's compassion for the sick, come together to form Catholic health care institutions, they are present in the public arena and the political arena. This means that they not only ought to conduct their institutions in a particular kind of way, but that they also ought to work to influence the delivery of health care in the larger society. This broader social responsibility is also part of the church's mission.

Witness to Catholic Ethical Standards Catholic health care will bear witness to the particular ethical approaches that flow from our understanding of the human person. Our experience of humanity in Jesus Christ, our respect for human life from conception until the last moment of the experience of dying, our respect for human bodily integrity, and our respect for human freedom and responsibility—all these will lead to a particular approach to a whole range of medical and genetic questions in Catholic health care institutions. Again, this contribution is an essential element of the mission of the church, one that would be seriously lacking

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without Catholic health care institutions.

THERE MUST BE NO COMPROMISE

Of course, individual Catholics, working in any type of health care institution, can bear witness to Christ and personally contribute to the mission I've mapped out here. But Catholic institutions of health care are uniquely posed to do this; the full witness outlined in this article would not

be possible without them. Both forms of witness are integral to the church's mission.

At the same time, we have to acknowledge that these great goals of Catholic health care will only be reached if we ensure that our planning, our formation of staff, and our policies are directed toward these goals. If that be true, it is clear why Pope John Paul II would say to us that no crisis in providing and funding Catholic health care can be "allowed to compromise the Church's fundamental commitment."⁹ □

NOTES

1. Catholic Health Australia, *Code of Ethical Standards for Catholic Health and Aged Care Services in Australia*, Red Hill, Australia, 2001, p. 3. The Australian Code of Ethical Standards is similar to our own *Ethical and Religious Directives for Catholic Health Care Services*.
2. *Code of Ethical Standards for Catholic Health and Aged Care Services in Australia*, p. 9.
3. Pope John Paul II, *Ecclesia in Oceania*, 2001, para. 34. The exhortation was given in Rome, November 22, 2001, to the Special Assembly of the Synod of Bishops for Oceania. In it the pope specifically addresses "the Melanesian, Polynesian, and Micronesian peoples; the Aborigines of Australia; the Maoris of New Zealand; and the many immigrant peoples who have made Oceania their home."
4. Pope John Paul II.
5. Pope John Paul II.
6. Pope John Paul II, "Letter to the President of the Pontifical Council for Health Pastoral Care on the Occasion of the Ninth World Day of the Sick," which can be found at www.vatican.va/holy-father/john_paul_ii/letters/2001/documents/hf_jp-ii_let_20010211_pc-health-pastoral-care_en.html.
7. Gerald M. Gleeson, "Evangelisation and Catholic Health Care—Ethical Issues," which can be found at www.cha.org.au/events/Gleeson.pdf.
8. Gleeson.
9. Pope John Paul II, *Ecclesia in Oceania*.