

Some Themes/Hints for Our Reflection

From the message of the Holy Father for the XXIX World Day of the Sick 2021

***You have but one teacher, and you are all brothers (Mt 23, 8)
A trust-based relationship to guide care for the sick.***

1. Learning from the Teacher's example:

Considering the needs of his brothers and sisters, Jesus offers his disciples a behavioural model to follow: the *Good Samaritan* embodies the attitudes of proximity and care:

- Stopping by, being close, becoming a “neighbour”,
- Listening,
- Forging a direct and personal relationship with the other,
- Feeling empathy and compassion for the other (have compassion),
- Letting the suffering of others enthrall us to the point of taking it upon ourselves as we serve them (cf. *Lk 10, 30-37*).

“Go and do likewise” (*Lk 10, 37*) –cf. *Salvifici doloris* nn. 28-30

2. Acknowledging our vulnerability, our condition as creatures dependent on God

The experience of sickness makes us realize our own vulnerability and at the same time our innate need for the others and even more so, our dependence on God.

- What are our feelings towards God in times of illness and/or suffering?
- Sickness can help us get closer or move away from God (a time of grace or a time of misfortune),
- Sickness prompts a question for meaning, a search for a new meaning and a new direction for our existence (cf. *Salvifici doloris*, nn. 9-13),
- Besides medical care, recovery and pain relief, we owe the sick and suffering person meaningfulness, compassion, consolation and hope (The deepest questions of humankind, cf. *Gaudium et Spes*, n. 10),
- Friends and family can be a help or a hindrance (the biblical figure of Job).

3. The faces of many sick and suffering people who feel ignored and rejected

Sickness has the face of every sick man and woman. Unfortunately, some feel ignored, excluded, victims of social injustices that deny their fundamental rights, including the right of access to the necessary care (cf. *Fratelli tutti*, n. 22):

- How is access to healthcare/treatments and other fundamental services granted to the vulnerable people in our society?
- How were the elderly assisted during the pandemic?
- What could the State/policy makers do to promote health as a common primary good? (Political choices, administration and resource distribution in healthcare),
- What can the Church, the civil society, our community do for the care and assistance of the needy who live among us (as they are alone, or physically, morally and spiritually challenged)?
- How many of us devote some of their time to volunteering for our brothers and sisters in need?

4. Health care workers serve human life that is sacred, and the human person, whose dignity is inalienable

During the pandemic, we have observed the dedication and generosity of health care professionals, volunteers, workers, priests, men and women religious: they revealed to us important aspects of their profession:

- They worked with professionalism, self-giving, sense of responsibility and love for their neighbour,
- They have treated, comforted and served many sick people and their families,

These aspects remind us that:

- In their profession, they are called to guard and serve human life that is sacred (cf. *New Charter for Health Care Workers*, n.1),
- They serve the human person, whose dignity is inalienable,
- Prompted by the Christian spirit, health care professionals can rediscover the transcendent dimension of their profession. This goes beyond the merely human aspect of serving the suffering person and takes up the dimension of Christian, and therefore missionary, witness (cf. *New Charter for Health Care Workers*, nn. 8-9),
- Mission equals vocation, therefore a health care worker responds to a transcendent call, which is revealed in the suffering face of the other. This activity is an extension and the fulfilment of the charity of Christ, who “went about doing good and healing all” (*Acts*, 10, 38),
- It is also charity towards Christ: he is the patient- “I was sick... you did it to me” – the care for our brothers and sisters (*Mt* 25, 31-40).

5. Fraternal solidarity is expressed in various ways to support our neighbour

Caring for our sick and suffering brothers is not a task only for health care/pastoral workers. To all the disciples, closeness is a precious balm that provides support and consolation to those who suffer in sickness:

- We are all urged to live in closeness and compassion, as expressions of the love of Jesus Christ, the *good Samaritan* (cf. *Salvifici doloris*, n. 30),
- Called to be merciful like the Father and to love our sick, weak and suffering brothers (*Jn* 13, 34-35),
- We live this closeness personally, but also as a community. Fraternal love in Christ generates a *healing community*, that does not leave anyone behind, is inclusive and welcomes the most vulnerable brothers (*to treat, care, help, console and comfort*),
- Hence, the importance of solidarity that is concretely expressed in the service for the others. “Service in great part means “caring for vulnerability, for the vulnerable members of our families, our society, our people” (*Fratelli tutti*, n.115).

6. Enhancing a trust-based relationship in caring for the sick

For a therapy to be effective, it must include the relational dimension, a good, caring relationship, because it provides a holistic approach to sick persons, and aims at their integral wellbeing.

- The care for the sick is best performed in a daily interpersonal relationship (cf. *New Charter for Health Care Workers*, n.4),
- A person experiencing suffering and sickness trusts and has recourse to knowledge and conscience of health care workers,
- Health care workers reach out to sick persons to help, and treat them with compassion,
- An interpersonal, trust-based relationship based upon the *dignity* of the person and the *respect* for any situation that the other is going through. Therefore, in the full *respect* of the person’s autonomy, it demands *availability, attention, professional skill and awareness*,
- It must express a deeply human engagement, not only a technical activity, but also dedication and love for our neighbour,
- Promoting a holistic or integral treatment for the sick requires the collaboration of various stakeholders (medical staff, health care assistants, pastoral workers,

volunteers, families and friends) and an integrally human view of illness (cf. *Dolentium hominum*, n.2),

- This interpersonal, trust-based relationship enables the health care personnel to care for those who suffer, accompanying them along a journey of healing. It offers the ideal atmosphere to better treat, help and accompany the person along the journey towards the full recovery of his/her integral health.