White Mass for Health-Care Personnel

St. Augustine’s Church 26 October 2018

Dear brother priests and dear friends in Christ who bring his compassionate care to the sick and suffering:

Introduction

It is always a joy for me to celebrate with you this Annual White Mass sponsored by the Catholic Physicians’ Guild. This association brings together professionals and others who are interested to reflect on the spirituality of their vocation and to consider the increasing number of ethical questions which confront the contemporary practice of medicine. Before our social gathering we come together in this Eucharist to implore God’s grace upon all those engaged in health care in the Archdiocese of Vancouver.

I extend my profound thanks to each and every one of you – physicians, nurses, medical students, pastoral care workers and volunteers – for the ministry you offer so generously to your brothers and sisters who are in need of your compassionate assistance.

Thank you for caring for and soothing their wounds in our hospitals, residential care facilities or in their families. You are truly “guardians and servants of human life.”1 In the faces of those whom you serve you know how to see the face of faces – that of Jesus Christ. Your

1 St. John Paul II, Evangelium Vitae, 89.
“hands touch every day the suffering flesh of Christ, and this is a great honour and a serious responsibility.”

You are each carrying on in our own day what the Lord did in his: he tended and often cured the sick to manifest God’s closeness and merciful love, which heals the mind, the soul and the body (cf. Mt 4:23).

Indeed, time and time again, and over many years, you fulfill what Jesus said to the Apostles at the Last Supper, just as we heard in the Gospel: “This is my commandment, that you love one another as I have loved you. No one has greater love than this, than to lay down one’s life for one’s friends” (Jn 15:12-13). The reward for your service is clear, as Jesus says: “You are my friends if you do what I command you” (Jn 15:14). And so you are doing – and for this we give the good Lord thanks and praise.

**Palliative Care**

What Jesus commands us with regard to the intrinsic dignity of human life from conception to its natural end must be taken with the utmost seriousness. Despite its legalization in Canada, we need to be clear that euthanasia and assisted suicide are direct contradictions of the central Christian belief in the value and beauty of life as a gift from God. The Catholic Church, drawing on the deepest sources of its tradition,

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2 Benedict XVI, Address to the Plenary Assembly of the Pontifical Council for Health Pastoral Care (22 March 2007).
remains strongly opposed to every action which compromises the right to life. Such compromises are signs of a “throwaway culture” which considers the dying as nuisances to be disposed of as quickly as possible. Besides opposition to deliberately taking life, the Church is also strongly committed to attending to those who are dying with palliative care.

The objective of palliative care is to alleviate pain in the final stages of illness and at the same time to ensure the patient appropriate human accompaniment3 at this stage of life. “It opposes what makes death most terrifying and unwelcome – pain and loneliness.”4

Any strategy on palliative care – and we need a national one that is adequately funded – must deal with the dying person in a holistic manner, attending to the spiritual, psychological, and material needs of the ailing person, as well as the needs of the caregivers who, in addition to the healthcare professionals, include family and friends.5

3 Cf. St. John Paul II, Evangelium Vitae, 65; Francis, Address (5 March 2015).

4 Francis, Message to the Participants in the European Regional Meeting of the World Medical Association (7 November 2017).

5 Cf. CCCB, Letter in Response to the Public Consultation on Palliative Care (23 July 2013).
Palliative care embodies the deepest vocation of those involved in health care. Their task is always to “care for,” to attend to the needs of another person, even when healing is impossible. Such care bears witness to an important fact of life – and death: that human existence is ultimately limited, and that these limits are to be recognized and accepted. This means accompanying the sick in the burdensome trials that so often mark the sunset of earthly life. At this stage, when healing is no longer possible, health care has a different purpose. Being present, being close and being welcoming emerge as what is of primary importance; that is, sharing in the powerlessness of someone whose life on earth is ebbing away.  

We know that when we accompany gravely patients in the terminal phase of life, they recognize this presence. In these circumstances, if the person feels loved, respected and accepted, “the negative shadow of euthanasia disappears or becomes almost non-existent, as the value of his being is measured by his capacity to give and receive love and not by his productivity.”

Just as the time of our birth, the end of our life is a time of great

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7 Francis, Address to the 4th Seminar on Ethics in Health Management (1 October 2018).
vulnerability. It is at such times that we are entrusted to one another more than ever.

The attentive presence to someone who is dying can often be a trying experience. Those who have overcome their fears and have made themselves available in this way nevertheless know that they receive more than they give. Such presence is one of the highest forms of human solidarity, of being a good Samaritan.

**Suffering and Redemption**

While providing palliative care is a great gift to those who are dying by relieving their pain and accompanying them, we cannot expect that it can remove all suffering, a spiritual reality that goes deeper than physical pain. Medicine can give great assistance to pain and other physical distress of the sick and the dying but there is no prescription for spiritual suffering. Finding meaning in the reality of pain and suffering is the most important challenge for a dying person and for those accompanying them.\(^8\)

We are called upon to recognize that the person who is suffering in body and/or spirit has, for that very reason, a unique dignity. Knowingly or unknowingly, he or she is united to Christ in his Passion, where human suffering – and pain – reached its culmination, but also acquired

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\(^8\) Cf. Sister Nuala Kenny.
a new meaning. With the eyes of faith, suffering is rescued from meaninglessness, and it is now linked to love and salvation.

God became incarnate in Jesus Christ, drawing close to every person, even in the most trying human situations. He did not eliminate suffering, but in the Crucified and Risen One, in the Son of God, who suffered death on the Cross, he revealed that his love also descends into man’s deepest abyss in order to bring him hope.\footnote{Cf. Benedict XVI, Address to an International Conference Organized by the Pontifical Council for Health Care Workers (26 November 2011).}

In the twelfth century, St. Bernard wrote: “God cannot suffer, but he can suffer with” us. He who is Love in person wanted to suffer for us and with us. Into every human suffering, then, God has already entered. Thus he can offer consolation in all human suffering as one who knows its reality in the flesh. He lifts it up and enables the suffering person to participate intimately in his work of Redemption.\footnote{Cf. Benedict XVI, \textit{Spe Salvi}, 39.}

We need faith to grapple with the mystery of suffering. But we should also remember, as Pope Francis has written, that
Faith is not a light which scatters all our darkness, but a lamp which guides our steps in the night and suffices for the journey. To those who suffer, God does not provide arguments which explain everything; rather, his response is that of an accompanying presence, a history of goodness which touches every story of suffering and opens up a ray of light.\textsuperscript{11}

\textit{Conclusion}

For believers, the answer to the mystery of suffering is found in Jesus Christ. By participating in the Eucharist, as we are now doing, we are immersed in the mystery of his Death and Resurrection. He defeated suffering and the power of death with the omnipotence of his love. It is therefore in this “school” of the Eucharistic Christ that we made capable of living our ministry of accompanying the sick and the dying with hope in the fullness of joy of the world to come.\textsuperscript{12}

\textsuperscript{+} J. Michael Miller, CSB
Archbishop of Vancouver

\textsuperscript{11} Francis, \textit{Lumen Fidei}, 57.

\textsuperscript{12} Cf. Benedict XVI, Address at the Conclusion of Mass for the World Day of the Sick (11 February 2009).