



The Holy See

***MESSAGE OF THE HOLY FATHER
FOR THE WORLD DAY OF THE SICK
FOR THE YEAR 2000***

CONTEMPLATE THE FACE OF CHRIST IN THE SICK

1. The Eighth World Day of the Sick will be held in Rome on 11 February 2000, the year of the Great Jubilee, and will find the Christian community dedicated to re-examining the reality of illness and suffering in the perspective of the mystery of the Incarnation of the Son of God, to draw from this extraordinary event new light to illumine these basic human experiences.

At the end of the second millennium of the Christian era, as the Church looks with admiration at humanity's progress in the treatment of suffering and improved health care, she is paying attention to the questions raised by the health-care sector, the better to define her presence in this context and to respond appropriately to the pressing challenges of the time.

Throughout history, people have made the most of their intellectual and emotional resources to overcome the limits inherent in the human condition, and have made great breakthroughs in health care. It is enough to think of the possibility of prolonging life and improving its quality, of alleviating suffering and of increasing a person's potential through the use of good, reliable medicines and increasingly sophisticated technologies. In addition to these achievements are those of a social kind, such as the widespread awareness of the right to treatment and its expression in juridical terms in the various "Charters of the rights of the sick". Nor should we forget the significant development achieved in the area of assistance due to the emergence of new medical applications, of a nursing service which is ever better qualified and of the phenomenon of voluntary service, which has recently reached a high degree of competence.

2. However, at the end of the second millennium we cannot say that humanity has done all that is

necessary to alleviate the immense burden of suffering which weighs on individuals, families and entire societies.

On the contrary, it seems that especially in this last century the river of human pain, already swollen due to the frailty of human nature and the wound of original sin, as well as the suffering inflicted by the mistakes of individuals and of States, has broadened: I am thinking of the wars that have caused so much bloodshed in this century, perhaps more than in any other in humanity's tormented history; I am thinking of the types of disease that are prevalent in society such as drug dependency, AIDS, illnesses caused by the deterioration of the big cities and the environment; I am thinking of the increase in organized crime, both small- and large-scale, and of the proposals of euthanasia.

I have a mental picture not only of the hospital beds in which so many of the sick are lying, but also of the sufferings of refugees, orphaned children and the many victims of social evils and poverty.

At the same time, with the eclipse of faith, especially in the secularized world there is a further serious cause of suffering, that of no longer being able to grasp the salvific meaning of pain and the comfort of eschatological hope.

3. Sharing in the joys and hopes, sorrows and anxieties of the people of every age, the Church has constantly accompanied and sustained humanity in its struggle against pain and its commitment to improve health. At the same time, she has striven to reveal to mankind the meaning of suffering and the riches of the Redemption brought by Christ the Saviour. History records great men and women who, prompted by their desire to imitate Christ through a deep love for their poor and suffering brethren, started countless initiatives of social assistance, brightening the last two millennia with good works. Next to the Fathers of the Church and the founders and foundresses of religious institutes, how can we fail to wonder at and admire the countless people who, in silence and humility, have given their lives in service to their sick neighbour, in many cases to the point of heroism? (cf. *Vita consecrata*, n. 83). Daily experience shows how the Church, inspired by the Gospel of charity, continues to contribute with many works, hospitals, health-care structures and volunteer organizations, to promoting health and to caring for the sick, paying special attention to the most underprivileged in all parts of the world, notwithstanding the cause of their suffering, whether voluntary or involuntary.

This presence should be maintained and encouraged for the benefit of the precious good of human health, looking carefully at all the inequalities and contradictions in the world of health-care that still exist.

4. Indeed, down the centuries, beside the light areas, shadows have obscured and still obscure the overall picture of improvements in health care, many aspects of which are truly fine. I am thinking

in particular of the serious social inequalities in access to health-care resources, which are still present in vast areas of the world, especially in the countries of the South.

This unjust inequality is more and more dramatically undermining the basic rights of the person: entire populations do not even have the possibility of benefiting from primary, basic medicines, while elsewhere even expensive medicines are widely wasted and misused. And what can be said of the many brothers and sisters who lack the minimum to appease their hunger and are subject to every kind of disease? Not to mention the numerous wars which stain humanity with blood and are spreading physical and psychological traumas of every kind, as well as death.

5. With regard to these scenarios, we must recognize that unfortunately, in many cases, the economic, scientific and technological breakthroughs have not brought real progress that is focused on the person and the inviolable dignity of every human being. Even the achievements in the field of genetics, which are fundamental in health care, especially for the protection of newborn life, can become an opportunity for inadmissible choices, callous manipulation and interests that contradict real development, often with devastating results. On the one hand remarkable efforts are being made to prolong life and even to procreate it artificially; but on the other, birth is not permitted to those who have already been conceived, and the death of those no longer considered to be of use is hastened. Furthermore: while health is rightly appreciated with increasing initiatives to promote it, at times reaching a sort of cult of the body and a hedonistic quest for physical fitness, at the same time we are reduced to considering life as a mere consumer good, setting a new scale of marginalization for the disabled, the elderly and the terminally ill.

All these contradictions and paradoxical situations stem from a lack of harmony on the one hand, between the logic of well-being and the search for technological progress, and the logic, on the other, of ethical values based on the dignity of every human being.

6. On the eve of the new millennium, it is hoped that “the purification of memory” will also be promoted in the world of suffering and health, which will lead to “recognizing the wrongs done by those who have borne or bear the name of Christian” (*Incarnationis mysterium*, n. 11; cf. also *Tertio millennio adveniente*, nn. 33, 37, 51). The ecclesial community is called to accept, in this field too, the invitation to conversion which is linked to the celebration of the Holy Year. The process of conversion and renewal will be helped if we continually raise our eyes to the One who, “in the sacrament of the Eucharist ... took flesh in Mary’s womb 20 centuries ago, [and] continues to offer himself to humanity as the source of divine life” (*Tertio millennio adveniente*, n. 55). The mystery of the Incarnation means understanding life as a gift from God, to be looked after responsibly and used for good: health is thus a positive attribute of life, to be sought for the good of the person and of one’s neighbour. However health is a “penultimate” good in the hierarchy of values, which should be fostered and considered with a view to the total, and thus also spiritual, good of the person.

7. In this circumstance we turn our gaze in particular to the suffering and risen Christ. In taking on the human condition, the Son of God accepted to live it in all its aspects, including pain and death, fulfilling in his person the words he spoke at the Last Supper: “Greater love has no man than this, that a man lay down his life for his friends” (*Jn 15:13*). In celebrating the Eucharist, Christians proclaim and share in the sacrifice of Christ, for “by his wounds [we] have been healed” (cf. *1 Pt 2:24*) and uniting themselves with him, “preserve in their own sufferings a very special particle of the infinite treasure of the world’s redemption, and can share this treasure with others” (*Salvifici doloris*, n. 27).

The imitation of Jesus, the suffering Servant, has led great saints and simple believers to turn their illnesses and pain into a source of purification and salvation for themselves and for others. What great prospects of personal sanctification and cooperation for the salvation of the world does the path marked out by Christ and by so many of his disciples open to our sick brothers and sisters! It is a difficult path, because the human being does not discover the meaning of suffering and death on his own, but it is always a possible path with the help of Jesus, interior Master and Guide (cf. *Salvifici doloris*, nn. 26-27). Just as the Resurrection transformed Christ’s wounds into a source of healing and salvation, so for every sick person the light of the risen Christ is a confirmation that the way of fidelity to God can triumph in the gift of self until the Cross and can transform illness itself into a source of joy and resurrection. Is not this the proclamation that echoes in hearts at every Eucharistic celebration when the people proclaim:

“Christ has died, Christ has risen, Christ will come again”? The sick, also sent out as labourers into the Lord’s vineyard (cf. *Christifidelis laici*, n. 53), by their example can make an effective contribution to the evangelization of a culture that tries to remove the experience of suffering by striving to grasp its deep meaning with its intrinsic incentives to human and Christian growth.

8. The Jubilee also invites us to contemplate the face of Jesus, the divine Samaritan of souls and bodies. By following the example of her divine Founder, the Church, “from century to century ... has re-enacted the Gospel parable of the Good Samaritan, revealing and communicating her healing love and the consolation of Jesus Christ.... This came about through the untiring commitment of the Christian community and all those who have taken care of the sick and suffering ... as well as the skilled and generous service of health-care workers” (*Christifideles laici*, n. 53). This commitment does not derive from specific social situations, nor should it be understood as an optional or fortuitous act, but is an intransgressible response to Christ’s command: “he called to him his twelve disciples and gave them authority over unclean spirits, to cast them out, and to heal every disease and every infirmity” (*Mt 10:1*, cf. 7-8).

The service rendered to the person who is suffering in body and soul takes its meaning from the Eucharist, finding in it not only its source but also its norm. It was not by chance that Jesus closely united the Eucharist with service (*Jn 13:2-16*), asking the disciples to perpetuate in memory of him not only the “breaking of the bread”, but also the “washing of the feet”.

9. The example of Christ, the good Samaritan, must inspire the believer's attitude, prompting him to be "close" to his brothers and sisters who are suffering, through respect, understanding, acceptance, tenderness, compassion and gratuitousness. It is a question of fighting the indifference that makes individuals and groups withdraw selfishly into themselves. To this end, "the family, the school and other educational institutions must, if only for humanitarian reasons, work perseveringly for the reawakening and refining of that sensitivity towards one's neighbour and his suffering" (*Salvifici doloris*, n. 29). For the believer, this human sensitivity is expressed in the agape, that is, in supernatural love, which brings one to love one's neighbour for love of God. In fact, guided by faith and surrounding with affectionate care those who are afflicted by human suffering, the Church recognizes in them the image of her poor and suffering Founder and is concerned to alleviate their suffering, mindful of his words: "I was sick and you visited me" (*Mt* 25:36).

The example of Jesus, the good Samaritan, not only spurs one to help the sick, but also to do all one can to reintegrate him in society. For Christ, in fact, healing is also this reintegration: just as sickness excludes the human being from the community, so healing must bring him to rediscover his place in the family, in the Church and in society.

I extend a warm invitation to those involved professionally or voluntarily in the world of health to fix their gaze on the divine Samaritan, so that their service can become a prefiguration of definitive salvation and a proclamation of new heavens and a new earth "in which righteousness dwells" (*2 Pt* 3:13).

10. Jesus did not only treat and heal the sick, but he was also a tireless promoter of health through his saving presence, teaching and action. His love for man was expressed in relationships full of humanity, which led him to understand, to show compassion and bring comfort, harmoniously combining tenderness and strength. He was moved by the beauty of nature, he was sensitive to human suffering, he fought evil and injustice. He faced the negative aspects of this experience courageously and, fully aware of the implications, communicated the certainty of a new world. In him, the human condition showed its face redeemed and the deepest human aspirations found fulfillment.

He wants to communicate this harmonious fullness of life to people today. His saving action not only aims to meet the needs of human people, victims of their own limits and errors, but to sustain their efforts for total self-fulfillment. He opens the prospect of divine life to man: "I came that they may have life, and have it abundantly" (*Jn* 10:10).

Called to continue Jesus' mission, the Church must seek to promote a full and ordered life for everyone.

11. In the context of the promotion of good health and quality of life correctly understood, two

duties deserve the Christian's special attention.

First of all the defence of life. In today's world, many men and women are striving for a better quality of life with respect for life itself and are reflecting on the ethics of life so as to dispel the confusion of values that sometimes exists in today's culture. As I recalled in my Encyclical *Evangelium vitae*, "significant is the reawakening of an ethical reflection on issues affecting life. The emergence and ever more widespread development of bioethics is promoting more reflection and dialogue - between believers and non-believers, as well as between followers of different religions - on ethical problems, including fundamental issues pertaining to human life" (n. 27). However, beside these there are many, unfortunately, who are engaged in promoting a worrying culture of death, spreading a mentality imbued with selfishness and hedonistic materialism, and with the social and legal sanction of the suppression of life. At the root of this culture there is often a Promethean attitude which leads people to think that "they can control life and death by taking the decisions about them into their own hands. What really happens in this case is that the individual is overcome and crushed by a death deprived of any prospect of meaning or hope" (*Evangelium vitae*, n. 15). When science and medical practice risk losing sight of their inherent ethical dimension, health-care professionals "can be strongly tempted at times to become manipulators of life, or even agents of death" (*ibid.*, n. 89).

12. In this context, believers are called to develop the insight of faith as they look at the sublime and mysterious value of life, even when it seems frail and vulnerable. "This outlook does not give in to discouragement when confronted by those who are sick, suffering, outcast or at death's door. Instead, in all these situations it feels challenged to find meaning, and precisely in these circumstances it is open to perceiving in the face of every person a call to encounter, dialogue and solidarity" (*ibid.*, n. 83).

This task especially involves health professionals: doctors, pharmacists, nurses, chaplains, men and women religious, administrators and volunteer workers who, by virtue of their profession, are called in a special capacity to be guardians of human life. However, it also calls into question every other human being, starting with the relatives of the sick person. They know that "the request which arises from the human heart in the supreme confrontation with suffering and death, especially when faced with the temptation to give up in utter desperation, is above all a request for companionship, sympathy and support in the time of trial. It is a plea for help to keep on hoping when all human hopes fail" (*ibid.*, n. 67).

13. The second duty which Christians cannot shirk concerns the promotion of a health worthy of the human being. In our society there is a risk of making health an idol to which every other value is subservient. The Christian vision of the human being opposes a notion of health reduced to pure, exuberant vitality and satisfaction with one's own physical fitness, far removed from any real consideration of suffering. This view, ignoring the person's spiritual and social dimensions, ends by jeopardizing his true good. Precisely because health is not limited to biological perfection, life

lived in suffering also offers room for growth and self-fulfillment, and opens the way to discovering new values.

This vision of health, based on an anthropology that respects the whole person, far from being identified with the mere absence of illness, strives to achieve a fuller harmony and healthy balance on the physical, psychological, spiritual and social level. In this perspective, the person himself is called to mobilize all his available energies to fulfill his own vocation and for the good of others.

14. This model of health requires that the Church and society create an ecology worthy of man. The environment, in fact, is connected with the health of the individual and of the population: it constitutes the human being's "home" and the complex of resources entrusted to his care and stewardship, "the garden to be tended and the field to be cultivated". But the external ecology of the person must be combined with an interior, moral ecology, the only one which is fitting for a proper concept of health.

Considered in its entirety, human health thus becomes an attribute of life, a resource for the service of one's neighbour and openness to salvation.

15. In the Jubilee year of the Lord's favour - "a year of the remission of sins and of the punishment due to them, a year of reconciliation between disputing parties, a year of manifold conversions and of sacramental and extra-sacramental penance" (*Tertio millennio adveniente*, n. 14) - I invite pastors, priests, men and women religious, the faithful and people of goodwill courageously to face the challenges that threaten the world of suffering and health.

May the International Eucharistic Congress, which will be celebrated in Rome in 2000, become the ideal centre, radiating prayers and initiatives that can make the divine Samaritan's presence alive and active in the world of health care.

I fervently hope that through the contribution of our brothers and sisters in all the Christian Churches, the celebration of the Jubilee of the Year 2000 will mark the development of ecumenical collaboration in loving service to the sick, so as to witness clearly to everyone to the search for unity on the concrete path of charity.

I address a specific appeal to the international political, social and health-care organizations in every part of the world to be convincing promoters of concrete projects to fight all that is harmful to the dignity and health of the person.

May we be accompanied in the process of active participation in the lives of our sick brothers and sisters by the Virgin Mother who at the foot of the Cross (cf. *Jn 19:25*) shared the sufferings of her Son and, with her expert experience of suffering, offers her constant and loving protection to those who are suffering in mind and body the limits and wounds of the human condition.

I entrust the sick and all those who are close to them to her, Health of the sick and Queen of peace, so that with her motherly intercession she will help them to build the civilization of love.

With these hopes, I impart a special Apostolic Blessing to everyone.

From Castel Gandolfo, 6 August 1999, the Transfiguration of the Lord.

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