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"St. Mary's Church in Cracow"  
di Jan Samek  
Interpress Publishers, 1990.*



**Saturday, 2 April, at 9:37 p.m.**

**the Lord called to Himself**

**THE HOLY FATHER**

**JOHN PAUL II**

# Funeral Mass of the Roman Pontiff John Paul II

## Homily of His Eminence Card. Joseph Ratzinger

*ST PETER'S SQUARE, FRIDAY, 8 APRIL 2005*

4 “Follow me. “The Risen Lord says these words to Peter. They are his last words to this disciple, chosen to shepherd his flock. “Follow me” – this lapidary saying of Christ can be taken as the key to understanding the message which comes to us from the life of our late beloved Pope John Paul II. Today we bury his remains in the earth as a seed of immortality – our hearts are full of sadness, yet at the same time of joyful hope and profound gratitude.

These are the sentiments that inspire us, Brothers and Sisters in Christ, present here in Saint Peter's Square, in neighbouring streets and in various other locations within the city of Rome, where an immense crowd, silently praying, has gathered over the last few days. I greet all of you from my heart. In the name of the College of Cardinals, I also wish to express my respects to Heads of State, Heads of Government and the delegations from various countries. I greet the Authorities and official representatives of other Churches and Christian Communities, and likewise those of different religions. Next I greet the Archbishops, Bishops, priests, religious men and women and the faithful who have come here from every Continent; especially the young, whom John Paul II liked to call the future and the hope of the Church. My greeting is extended, moreover, to all those throughout the world who are united with us through radio and television in this solemn celebration of our beloved Holy Father's funeral.

Follow me – as a young student Karol Wojtyła was thrilled by literature, the theatre, and poetry. Working in a chemical plant, surrounded and threatened by the Nazi terror, he heard the voice of the Lord: Follow me! In this extraordinary setting he began to read books of philosophy and theology, and then entered the clandestine seminary established by Cardinal Sapieha. After the war he was able to complete his studies in the faculty of theology of the Jagiellonian University of Kraków. How often, in his letters to priests and in his autobiographical books has he spo-

ken to us about his priesthood, to which he was ordained on 1 November 1946. In these texts he interprets his priesthood with particular reference to three sayings of the Lord. First: “You did not choose me, but I chose you. And I appointed you to go and bear fruit, fruit that will last” (*Jn* 15:16). The second saying is: “The good shepherd lays down his life for the sheep” (*Jn* 10:11). And then: “As the Father has loved me, so I have loved you; abide in my love” (*Jn* 15:9). In these three sayings we see the heart and soul of our Holy Father. He really went everywhere, untiringly, in order to bear fruit, fruit that lasts. “Rise, Let us be on our Way!” is the title of his next-to-last book. “Rise, let us be on our way!” – with these words he roused us from a lethargic faith, from the sleep of the disciples of both yesterday and today. “Rise, let us be on our way!” he continues to say to us even today. The Holy Father was a priest to the last, for he offered his life to God for his flock and for the entire human family, in a daily self-oblation for the service of the Church, especially amid the sufferings of his final months. And in this way he became one with Christ, the Good Shepherd who loves his sheep. Finally, “abide in my love:” the Pope who tried to meet everyone, who had an ability to forgive and to open his heart to all, tells us once again today, with these words of the Lord, that by abiding in the love of Christ we learn, at the school of Christ, the art of true love.

Follow me! In July 1958 the young priest Karol Wojtyła began a new stage in his journey with the Lord and in the footsteps of the Lord. Karol had gone to the Masuri lakes for his usual vacation, along with a group of young people who loved canoeing. But he brought with him a letter inviting him to call on the Primate of Poland, Cardinal Wyszyński. He could guess the purpose of the meeting: he was to be appointed as the auxiliary Bishop of Kraków. Leaving the academic world, leaving this challenging engagement with young people, leaving the



great intellectual endeavour of striving to understand and interpret the mystery of that creature which is man and of communicating to today's world the Christian interpretation of our being – all this must have seemed to him like losing his very self, losing what had become the very human identity of this young priest. Follow me – Karol Wojtyła accepted the appointment, for he heard in the Church's call the voice of Christ. And then he realized how true are the Lord's words: "Those who try to make their life secure will lose it, but those who lose their life will keep it" (*Lk 17:33*). Our Pope – and we all know this – never wanted to make his own life secure, to keep it for himself; he wanted to give of himself unreservedly, to the very last moment, for Christ and thus also for us. And thus he came to experience how everything which he had given over into the Lord's hands came back to him in a new way. His love of words, of poetry, of literature, became an essential part of his pastoral mission and gave new vitality, new urgency, new attractiveness to the preaching of the Gospel, even when it is a sign of contradiction.

Follow me! In October 1978 Cardinal Wojtyła once again heard the voice of the Lord. Once more there took place that dialogue with Peter reported in the Gospel of this Mass: "Simon, son of John, do you love me?"



Feed my sheep!" To the Lord's question, "Karol, do you love me?," the Archbishop of Krakow answered from the depths of his heart: "Lord you know everything; you know that I love you." The love of Christ was the dominant force in the life of our beloved Holy Father. Anyone who ever saw him pray, who ever heard him preach, knows that. Thanks to his being profoundly rooted in Christ, he was able to bear a burden which transcends merely human abilities: that of being the shepherd of Christ's flock, his universal Church. This is not the time to speak of the specific content of this rich pontificate. I would like only to read two passages of today's liturgy which reflect central elements of his message. In the first reading, Saint Peter says – and with Saint Peter, the Pope himself – "I truly understand that God shows no partiality, but in every nation anyone who fears him and does what is right is acceptable to him. You know the message he sent to the people of Israel, preaching peace by Jesus Christ – he is Lord of all" (*Acts 10:34-36*). And in the second reading, Saint Paul – and with Saint Paul, our late Pope – exhorts us, crying out: "My brothers and sisters, whom I love and long for, my joy and my crown, stand firm in the Lord in this way, my beloved" (*Phil 4:1*).

Follow me! Together with the command to feed his flock, Christ proclaimed to Peter that he would die a martyr's death. With those words, which conclude and sum up the dialogue on love and on the mandate of the universal shepherd, the Lord recalls another dialogue, which took place during the Last Supper. There Jesus had said: "Where I am going, you cannot come." Peter said to him, "Lord, where are you going?" Jesus replied: "Where I am going, you cannot follow me now; but you will follow me afterward." (*Jn 13:33,36*). Jesus from the Supper went towards the Cross, went towards his resurrection – he entered into the paschal mystery; and Peter could not yet follow him. Now – after the resurrection – comes the time, comes this "afterward." By shepherding the flock of Christ, Peter enters into the paschal mystery, he goes towards the cross and the resurrection. The Lord says this in these words: "... when you were younger, you used to fasten your own belt and to go wherever you wished. But when you grow old, you will stretch out your hands, and someone else will fasten a belt around you and take you where you do not wish to go" (*Jn 21:18*). In the first years of his pontificate, still young and full of energy, the Holy Father went to the very ends of the earth, guided by Christ. But afterwards, he in-

creasingly entered into the communion of Christ's sufferings; increasingly he understood the truth of the words: "Someone else will fasten a belt around you." And in this very communion with the suffering Lord, tirelessly and with renewed intensity, he proclaimed the Gospel, the mystery of that love which goes to the end (cf. *Jn* 13:1).

He interpreted for us the paschal mystery as a mystery of divine mercy. In his last book, he wrote: The limit imposed upon evil "is ultimately Divine Mercy" (*Memory and Identity*, pp. 60-61). And reflecting on the assassination attempt, he said: "In sacrificing himself for us all, Christ gave a new meaning to suffering, opening up a new dimension, a new order: the order of love ... It is this suffering which burns and consumes evil with the flame of love and draws forth even from sin a great flowering of good" (pp. 189-190). Impelled by this vision, the Pope suffered and loved in communion with Christ, and that is why the message of his suffering and his silence proved so eloquent and so fruitful.

Divine Mercy: the Holy Father found the purest reflection of God's mercy in the Mother of God. He, who at an early age had lost his own mother, loved his divine mother all the more. He heard the words of the crucified Lord as addressed personally to him: "Behold your Mother." And so he did as the beloved disciple did: he took her into his own home" (*eis ta idia: Jn* 19:27) – *Totus tuus*. And from the mother he learned to conform himself to Christ.

None of us can ever forget how in that last Easter Sunday of his life, the Holy Father, marked by suffering, came once more to the window of the Apostolic Palace and one last time gave his blessing *urbi et orbi*. We can be sure that our beloved Pope is standing today at the window of the Father's house, that he sees us and blesses us. Yes, bless us, Holy Father. We entrust your dear soul to the Mother of God, your Mother, who guided you each day and who will guide you now to the eternal glory of her Son, our Lord Jesus Christ. Amen.





# In Union with Pope John Paul II

## 1. As a Privilege

I experienced the last moments of the life of the Pope in a privileged way. The month of March 2005, indeed, for me too was a delicate moment because of the malaria that I had contracted and which had caused me for the first eight days of the month to be admitted to the resuscitation unit of the hospital on the Tiber Island in Rome. This was then followed by a period in the medical ward and, as a final stage, by a period of rest, principally to take care of my health under a regime of 'surveillance' and control when I was unable to go back to work until I received new orders from my doctors. The whole of this period coincided with the repeated admissions of the Pope to the Polyclinic Gemelli and with his last moments in the Vatican that I, in a 'privileged' way because I was resting after my illness and had still not returned to work – and so had time on my hands – was able to follow through the mass media, especially during the last days of the Pope's life.

## 2. A Pope of Witness

I saw in this Pope a witness; I saw the strength of God that was at work in weakness; I saw the hand of God sustain a body marked by illness, a body that was tired and in pain. The last moments of this Pope were moments of great emotion and great solidarity: in everyone, both believers and non-believers, they generated a river of prayers and testimonies about what he had done and had been for the Church, for society, and for people. A Pope who had suffered, who had not concealed his illness but who had borne it like an athlete until the end. He gave a great lesson on life to all of us. Nothing was improvised; his was a coherent ending that followed a more

than logical path in his life. A Pope who not only came from far away but who came from the suffering bound up with his life as a part of that life: in the family in which he had grown up as an orphan, in the society of his time in which he had to undergo very hard work interchanging that work with his preparations to become a priest. Once he had become a priest he was attracted in his ministry by three loves, loves that he cultivated to the end: the family, young people, and the sick.

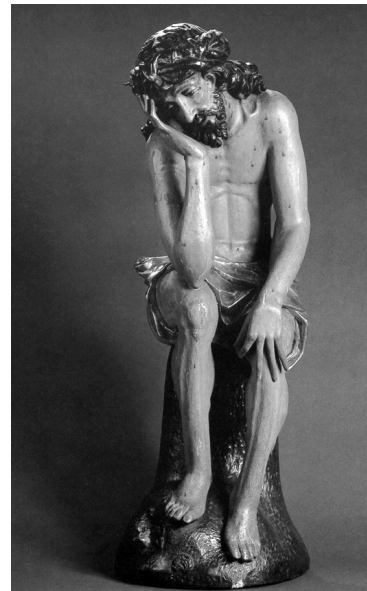
## 3. A Sick Person amongst the Sick

The visit that the Pope made to the then Archbishop (now Cardinal) Deskur at the Polyclinic Gemelli the day after his election as Pope was significant. On that occasion he recalled what he had said to the Cardinals that morning and he said that he wanted 'to rest his papal ministry above all on all those who suffer and who unite prayer to their suffering, passion and pains...very dear brothers and sisters, I would like to entrust myself to your prayers'. And in taking his leave the Pope added: 'Christ is amongst you, in the hearts of the sick, in the hearts of the 'Samaritans' who are at the service of the sick'.

For this Pope hospitals were the best teaching chairs: to see him in hospitals, a 'sick person amongst the sick', for us was a lesson so great that no written text or journey could have imparted it. To see him at the final stage of his life was the richest and most sublime catechesis of this Pope. His serenity, with trust in Providence, seeing him so prepared for death which he looked at without fear, without hiding it, and then reaching the final embrace with peace and trust – all of this is a lesson that we learnt from this Pontiff, a lesson that the mass media en-

abled us to live through in a profound way. On one of these occasions, at the Polyclinic Gemelli, the Pope provided the world with the following testimony: 'During these days of illness I have had an opportunity to understand better the value of the service that the Lord has called me to render to the Church as a priest, as the successor to Peter: this service also takes place through the gift of suffering'. And he also exhorted the sick 'to be generous witnesses to this privileged love through the gift of your suffering, which is of great importance for the salvation of mankind'.

These expressions of courage and hope John Paul II always applied to his practical



life but this was particularly the case after the attempt on his life of 13 May 1981 and on all the other times we saw him ill at the Polyclinic Gemelli until the end. For everyone he was a teaching chair, an example of wholeness and faith in suffering, an exceptional witness. His witness is worth more than a thousand books, and for this reason he is admired and listened to, because before being a teacher he was a witness, and for this reason he attracted and evangelised.

#### 4. A Legacy for the Church

People will speak about this Pope because of the many things that he achieved during the course of his long pontificate but above all he will be remembered as the Pope who spoke to us about pain and suffering. This was because he experienced them personally like no one else.

Together with this great person of witness, there is also the legacy that this Pontiff left to the Church: the Apostolic Letter *Salvifici doloris* (of 11 February) on the Christian meaning of suffering; the *Motu proprio Dolentium Hominum* (11 February 1985) by which he established a Commission that would later become the Pontifical Council for Health Pastoral Care; and lastly the creation of the World Day of the Sick (13 May 1992), which greatly increased the attention paid by the universal Church to the sick. With these 'instruments', with these 'mediations', the Pope wanted to strengthen the care and concern of the Church for those who suffer and to encourage the army of 'Good Samaritans' that serve them.

#### 5. In Union with John Paul II

Nineteen years ago John Paul II appointed me Secretary to the Pontifical Council for

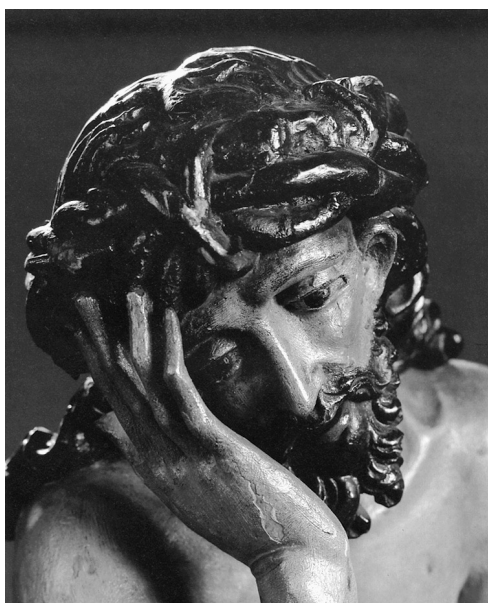
Health Pastoral Care, a body that he himself had set up. For this reason I feel privileged to have had many contacts with him because of my work. I go to my personal archive and I see in my photograph album dedicated to the Pope the photograph of my first contact with him in 1979 at the time of the General Chapter of my Hospital Order, and the last photograph taken in the month of January 2005 on the occasion of the Plenary Assembly of the Pontifical Council. Between those two dates I met the Pontiff about eighty times for various reasons – on fifteen occasions for lunch and dinner – as his guest, of course together with the President and the Under-Secretary of the Pontifical Council. This was a privilege that fills me with enthusiasm, admiration and devotion. These are moments when one perceives, amongst the conversations and the sentences, the meaning of the people one is taking to. In the case of the Pope, his serenity, his capacity to listen, his commitment, his enthusiasm, his concern for the sick and for health care workers, his faith and his exhortation to always be present in temporal realities. The meeting with the Pope on 6 January 1999 was an unforgettable day, an exceptional encounter. This was the day of my consecration as a bishop, a consecration that was received from his hands. That day, and

the next day, at the audience granted by the Pope, when my family relatives accompanied me, were days of great emotion for all of us and in particular they were a unique experience for my parents.

#### 6. The Pope has Left us, he is Dead

It was 2 April 2005, the eighth day of Easter, the first Saturday of the month. The son, the *Totus tuus*, was led to heaven by Mary, the Mother who had accompanied him during his earthly life at every moment of his life. On the first page of the special edition of the *Osservatore Romano* (3 April 2005) the death of the Pope was announced with the following statement: 'Today, Saturday 2 April, at 21.37, the Lord called to himself the Holy Father John Paul II'. And on the same page, at the foot of the photograph of the Pope, it continued: 'You have left us, Holy Father. You wore yourself out for us. In this hour – for you glorious and for us painful – we feel abandoned. But you take us by the hand and guide is with that hand of yours that in these months became in you also words. Thank you Holy Father!'

H.E. JOSÉ L. REDRADO O.H.  
*Titular Bishop of Ofena,  
 Secretary of the Pontifical Council  
 for Health Pastoral Care,  
 The Holy See.*



19 APRIL 2005

*Annuntio vobis gaudium magnum;  
habemus Papam:*

*Eminentissimum ac Reverendissimum Dominum,  
Dominum Josephum  
Sanctae Romanae Ecclesiae Cardinalem Ratzinger  
qui sibi nomen imposuit*

***Benedictum XVI***

9

*...A simple and humble labourer  
in the vineyard of the Lord...*  
(Benedict XVI)

# Mass, Imposition of the Pallium and Conferral of the Fisherman's Ring for the Beginning of the Petrine Ministry of the Bishop of Rome

## Homily of His Holiness Benedict XVI

ST. PETER'S SQUARE, SUNDAY, 24 APRIL 2005

10

*Your Eminences,  
My dear Brother Bishops and Priests,  
Distinguished Authorities and Members of  
the Diplomatic Corps,  
Dear Brothers and Sisters,*

During these days of great intensity, we have chanted the litany of the saints on three different occasions: at the funeral of our Holy Father John Paul II; as the Cardinals entered the Conclave; and again today, when we sang it with the response: *Tu illum adiuva* – sustain the new Successor of Saint Peter. On each occasion, in a particular way, I found great consolation in listening to this prayerful chant. How alone we all felt after the passing of John Paul II – the Pope who for over twenty-six years had been our shepherd and guide on our journey through life! He crossed the threshold of the next life, entering into the mystery of God. But he did not take this step alone. Those who believe are never alone – neither in life nor in death. At that moment, we could call upon the Saints from every age – his friends, his brothers and sisters in the faith – knowing that they would form a living procession to accompany him into the next world, into the glory of God. We knew that his arrival was awaited. Now we know that he is among his own and is truly at home. We were also consoled as we made our solemn entrance into Conclave, to elect the one whom the Lord had chosen. How would we be able to discern his name? How could 115 Bishops, from every culture and every country, discover the one on whom the Lord wished to confer the mission of binding and loosing? Once again, we knew that we were not alone, we knew that we were surrounded, led and guided by the friends of God. And

now, at this moment, weak servant of God that I am, I must assume this enormous task, which truly exceeds all human capacity. How can I do this? How will I be able to do it? All of you, my dear friends, have just invoked the entire host of Saints, represented by some of the great names in the history of God's dealings with mankind. In this way, I too can say with renewed conviction: I am not alone. I do not have to carry alone what in truth I could never carry alone. All the Saints of God are there to protect me, to sustain me and to carry me. And your prayers, my dear friends, your indulgence, your love, your faith and your hope accompany me. Indeed, the communion of Saints consists not only of the great men and women who went before us and whose names we know. All of us belong to the communion of Saints, we who have been baptized in the name of the Father, and of the Son and of the Holy Spirit, we who draw life from the gift of Christ's Body and Blood, through which he transforms us and makes us like himself. Yes, the Church is alive – this is the wonderful experience of these days. During those sad days of the Pope's illness and death, it became wonderfully evident to us that the Church is alive. And the Church is young. She holds within herself the future of the world and therefore shows each of us the way towards the future. The Church is alive and we are seeing it: we are experiencing the joy that the Risen Lord promised his followers. The Church is alive – she is alive because Christ is alive, because he is truly risen. In the suffering that we saw on the Holy Father's face in those days of Easter, we contemplated the mystery of Christ's Passion and we touched his wounds. But throughout these days we have also been able, in a profound sense, to



touch the Risen One. We have been able to experience the joy that he promised, after a brief period of darkness, as the fruit of his resurrection.

The Church is alive – with these words, I greet with great joy and gratitude all of you gathered here, my venerable brother Cardinals and Bishops, my dear priests, deacons, Church workers, catechists. I greet you, men and women religious, witnesses of the transfiguring presence of God. I greet you, members of the lay faithful, immersed in the great task of building up the Kingdom of God which spreads throughout the world, in every area of life. With great affection I also greet all those who have been reborn in the sacrament of Baptism but are not yet in full communion with us; and you, my brothers and sisters of the Jewish people, to whom we are joined by a great shared spiritual heritage, one rooted in God's irrevocable promises. Finally, like a wave gathering force, my thoughts go out to all men and women of today, to believers and non-believers alike.

Dear friends! At this moment there is no need for me to present a programme of gov-

ernance. I was able to give an indication of what I see as my task in my Message of Wednesday 20 April, and there will be other opportunities to do so. My real programme of governance is not to do my own will, not to pursue my own ideas, but to listen, together with the whole Church, to the word and the will of the Lord, to be guided by Him, so that He himself will lead the Church at this hour of our history. Instead of putting forward a programme, I should simply like to comment on the two liturgical symbols which represent the inauguration of the Petrine Ministry; both these symbols, moreover, reflect clearly what we heard proclaimed in today's readings.

The first symbol is the Pallium, woven in pure wool, which will be placed on my shoulders. This ancient sign, which the Bishops of Rome have worn since the fourth century, may be considered an image of the yoke of Christ, which the Bishop of this City, the Servant of the Servants of God, takes upon his shoulders. God's yoke is God's will, which we accept. And this will does not weigh down on us, oppressing us and taking away our freedom. To know what God wants, to know where the path of life is found – this was Israel's joy, this was her great privilege. It is also our joy: God's will does not alienate us, it purifies us – even if this can be painful – and so it leads us to ourselves. In this way, we serve not only him, but the salvation of the whole world, of all history. The symbolism of the Pallium is even more concrete: the lamb's wool is meant to represent the lost, sick or weak sheep which the shepherd places on his shoulders and carries to the waters of life. For the Fathers of the Church, the parable of the lost sheep, which the shepherd seeks in the desert, was an image of the mystery of Christ and the Church. The human race – every one of us – is the sheep lost in the desert which no longer knows the way. The Son of God will not let this happen; he cannot abandon humanity in so wretched a condition. He leaps to his feet and abandons the glory of heaven, in order to go in search of the sheep and pursue it, all the way to the Cross. He takes it upon his shoulders and carries our humanity; he carries us all – he is the good shepherd who lays down his life for the sheep. What the Pallium indicates first and foremost is that we are all carried by Christ. But at the same time it invites us to carry one another. Hence the Pallium becomes a symbol of the shepherd's mission, of which the Second Reading and the Gospel speak. The pastor must be inspired



by Christ's holy zeal: for him it is not a matter of indifference that so many people are living in the desert. And there are so many kinds of desert. There is the desert of poverty, the desert of hunger and thirst, the desert of abandonment, of loneliness, of destroyed love. There is the desert of God's darkness, the emptiness of souls no longer aware of their dignity or the goal of human life. The external deserts in the world are growing, because the internal deserts have become so vast. Therefore the earth's treasures no longer serve to build God's garden for all to live in, but they have been made to serve the powers of exploitation and destruction. The Church as a whole and all her Pastors, like Christ, must set out to lead people out of the desert, towards the place of life, towards friendship with the Son of God, towards the One who gives us life, and life in abundance. The symbol of the lamb also has a deeper meaning. In the Ancient Near East, it was customary for kings to style themselves shepherds of their people. This was an image of their power, a cynical image: to them their subjects were like sheep, which the shepherd could dispose of as he wished. When the shepherd of all humanity, the living God, himself became a lamb, he stood



on the side of the lambs, with those who are downtrodden and killed. This is how he reveals himself to be the true shepherd: "I am the Good Shepherd . . . I lay down my life for the sheep", Jesus says of himself (*Jn* 10:14f). It is not power, but love that redeems us! This is God's sign: he himself is love. How often we wish that God would make show himself stronger, that he would strike decisively, defeating evil and creating a better world. All ideologies of power justify themselves in exactly this way, they justify the destruction of whatever would stand in the way of progress and the liberation of humanity. We suffer on account of God's patience. And yet, we need his patience. God, who became a lamb, tells us that the world is saved by the Crucified One, not by those who crucified him. The world is redeemed by the patience of God. It is destroyed by the impatience of man.

One of the basic characteristics of a shepherd must be to love the people entrusted to him, even as he loves Christ whom he serves. "Feed my sheep", says Christ to Peter, and now, at this moment, he says it to me as well. Feeding means loving, and loving also means being ready to suffer. Loving means giving the sheep what is truly good, the nourishment of God's truth, of God's word, the nourishment of his presence, which he gives us in the Blessed Sacrament. My dear friends – at this moment I can only say: pray for me, that I may learn to love the Lord more and more. Pray for me, that I may learn to love his flock more and more – in other words, you, the holy Church, each one of you and all of you together. Pray for me, that I may not flee for fear of the wolves. Let us pray for one another, that the Lord will carry us and that we will learn to carry one another.

The second symbol used in today's liturgy to express the inauguration of the Petrine Ministry is the presentation of the fisherman's ring. Peter's call to be a shepherd, which we heard in the Gospel, comes after the account of a miraculous catch of fish: after a night in which the disciples had let down their nets without success, they see the Risen Lord on the shore. He tells them to let down their nets once more, and the nets become so full that they can hardly pull them in; 153 large fish: "and although there were so many, the net was not torn" (*Jn* 21:11). This account, coming at the end of Jesus's earthly journey with his disciples, corresponds to an account found at the beginning: there too, the disciples had caught nothing the entire night; there too, Jesus had invited

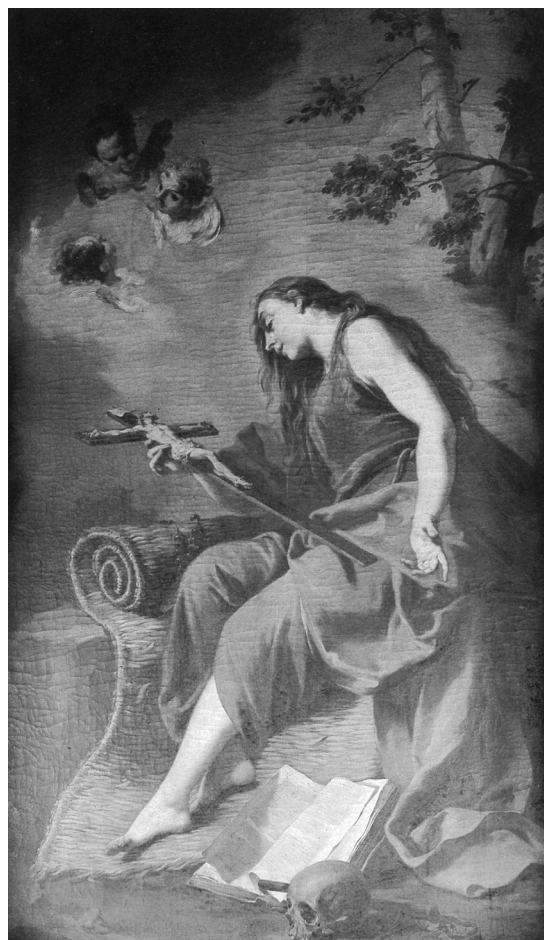


Simon once more to put out into the deep. And Simon, who was not yet called Peter, gave the wonderful reply: "Master, at your word I will let down the nets." And then came the conferral of his mission: "Do not be afraid. Henceforth you will be catching men" (*Lk* 5:1-11). Today too the Church and the successors of the Apostles are told to put out into the deep sea of history and to let down the nets, so as to win men and women over to the Gospel – to God, to Christ, to true life. The Fathers made a very significant commentary on this singular task. This is what they say: for a fish, created for water, it is fatal to be taken out of the sea, to be removed from its vital element to serve as human food. But in the mission of a fisher of men, the reverse is true. We are living in alienation, in the salt waters of suffering and death; in a sea of darkness without light. The net of the Gospel pulls us out of the waters of death and brings us into the splendour of God's light, into true life. It is really true: as we follow Christ in this mission to be fishers of men, we must bring men and women out of the sea that is salted with so many forms of alienation and onto the land of life, into the light of God. It is really so: the purpose of our lives is to reveal God to men. And only where God is seen does life truly begin. Only when we meet the living God in Christ do we know what life is. We are not some casual and meaningless product of evolution. Each of us is the result of a thought of God. Each of us is willed, each of us is loved, each of us is necessary. There is nothing more beautiful than to be surprised by the Gospel, by the encounter with Christ. There is nothing more beautiful than to know Him and to speak to others of our friendship with Him. The task of the shepherd, the task of the fisher of men, can often seem wearisome. But it is beautiful and wonderful, because it is truly a service to joy, to God's joy which longs to break into the world.

Here I want to add something: both the image of the shepherd and that of the fisherman issue an explicit call to unity. "I have other sheep that are not of this fold; I must lead them too, and they will heed my voice. So there shall be one flock, one shepherd" (*Jn* 10:16); these are the words of Jesus at the end of his discourse on the Good Shepherd. And the account of the 153 large fish ends with the joyful statement: "although there were so many, the net was not torn" (*Jn* 21:11). Alas, beloved Lord, with sorrow we must now acknowledge that it has been torn! But no – we must not be sad! Let us re-

joice because of your promise, which does not disappoint, and let us do all we can to pursue the path towards the unity you have promised. Let us remember it in our prayer to the Lord, as we plead with him: yes, Lord, remember your promise. Grant that we may be one flock and one shepherd! Do not allow your net to be torn, help us to be servants of unity!

At this point, my mind goes back to 22 October 1978, when Pope John Paul II began his ministry here in Saint Peter's Square. His words on that occasion constantly echo in my ears: "Do not be afraid! Open wide the doors for Christ!" The Pope was addressing the mighty, the powerful of this world, who feared that Christ might take away something of their power if they were to let him in, if they were to allow the faith to be free. Yes, he would certainly have taken something away from them: the dominion of corruption, the manipulation of law and the freedom to do as they pleased. But he would not have taken away anything that pertains to human freedom or dignity, or to the building of a just society. The Pope was also speaking to everyone, especially the young. Are we not perhaps all afraid in some way? If we let Christ enter fully into our



lives, if we open ourselves totally to him, are we not afraid that He might take something away from us? Are we not perhaps afraid to give up something significant, something unique, something that makes life so beautiful? Do we not then risk ending up diminished and deprived of our freedom? And once again the Pope said: No! If we let Christ into our lives, we lose nothing, nothing, absolutely nothing of what makes life free, beautiful and great. No! Only in this friendship are the doors of life opened wide.

Only in this friendship is the great potential of human existence truly revealed. Only in this friendship do we experience beauty and liberation. And so, today, with great strength and great conviction, on the basis of long personal experience of life, I say to you, dear young people: Do not be afraid of Christ! He takes nothing away, and he gives you everything. When we give ourselves to him, we receive a hundredfold in return. Yes, open, open wide the doors to Christ – and you will find true life. Amen.



***VI Plenary Assembly  
of the Pontifical  
Council for Health  
Pastoral Care***



***20-21 January 2005  
Domus Sanctae Marthae  
Vatican City***



# Address of Homage to the Holy Father John Paul II

Most Blessed Father,

It is a great honour for me to extend to you the most cordial greetings of the Pontifical Council for Health Pastoral Care, of the Superiors, the Members, some Consultors and the Officials of the Pontifical Council who have met over the last two days to assess the work that has been done over the last two years, according to the plan approved by Your Holiness in 2002. We have examined the fifty-three programmes underway and the individual actions that we proposed to ourselves for implementation so as to achieve the various goals established for each programme. Our task has been that of assessing both these programmes and the actions engaged in to see if by chance there are other programmes that should be added or actions that should be intensified or terminated. The planning was carried out in 2002 looking forward to 2007. We are in the middle of our journey and we are specifying the pathway that should be followed.

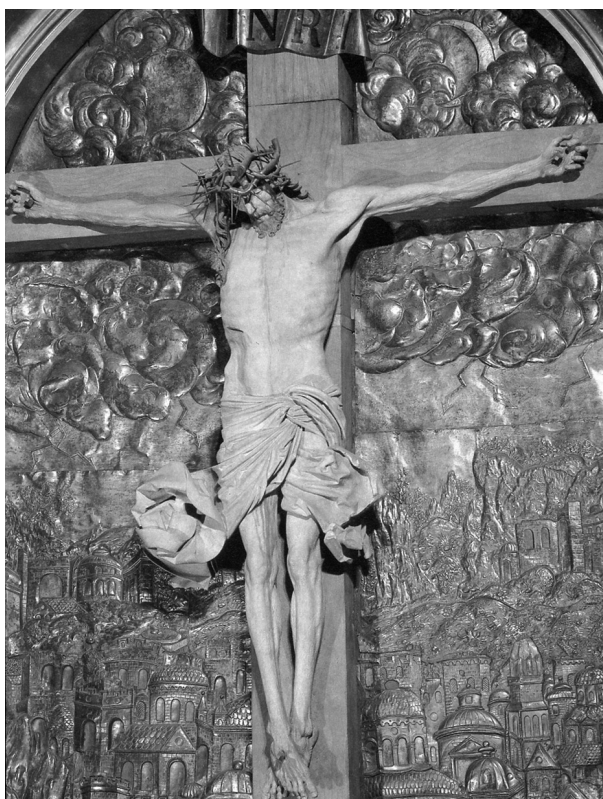
We are aware of the close collaboration with Your Holiness through this Pontifical Council and we are full of affection and grati-

tude towards Your Person for having entrusted to us such a very sensitive task – that of implementing the mandate of Christ, ‘*Curate Infirmos*’, in your name and in harmony with your role within the Church. We must provide a response to the deepest questions of human existence represented by suffering, pain and death; promote an effective sacramental response – the only reality that is truly satisfactory in making us present to Christ who died and rose again; and intensify the deepest communion and solidarity with Christ, who defeated death, and with all men who follow the path of the risen Christ.

Your Holiness, we have come here today to deliver our work into your hands, to subject it to your guidance and to ask you for direction and light so as to carry out the mission that has been entrusted to us. We humbly ask for your blessing and will now listen to your words.

Vatican City, 21 January 2005

His Eminence Card.  
JAVIER LOZANO BARRAGÁN  
*President of the Pontifical Council  
for Health Pastoral Care,  
The Holy See.*



# Sanctifying the Moment of Illness

*SPEECH OF JOHN PAUL II TO THOSE TAKING PART IN THE VI PLENARY ASSEMBLY  
OF THE PONTIFICAL COUNCIL FOR HEALTH PASTORAL CARE  
FRIDAY, 21 JANUARY 2005*

*Your Eminence,  
Venerable Brothers in the Episcopate  
and in the Priesthood,  
Dear Brothers and Sisters,*

1. I offer you my cordial greeting, with a special thought of gratitude for Cardinal Javier Lozano Barragán, who has expressed your common sentiments.

Your Plenary Assembly is taking place on the 20th anniversary of the foundation of the Pontifical Council for Pastoral Assistance to Health Care Workers, established in 1985 with the “*Motu Proprio*” *Dolentium Hominum*. Consequently, this is a particularly favourable opportunity to thank the Lord for the good achieved by the Pontifical Council at the service of the dissemination of the *Gospel of Christian hope* in the vast world of the suffering and of those who are called to care for them.

2. May this moment also become for you an effective incentive to renew your commitment to putting into practice your programmes “to spread, explain and defend the Church’s teachings on the subject of health care, and to encourage their penetration into health-care practices”, as the “*Motu Proprio*” *Dolentium Hominum* says (n. 6). Indeed, it is your Dicastery’s task to *guide, sustain and encourage* all that is promoted in this field by the Bishops’ Conferences and by Catholic Organizations and Institutions for professionals in medicine and in health-care promotion.

In this regard, it is comforting to think of all the pastoral work that the Dicastery is able to carry out with *harmonious and specific animation*, linked to the Bishops’ Conferences and Catholic Organizations, “to promote and spread an ever-better ethical-religious formation of Christian health-care workers in the world, keeping in mind the different situations and specific problems which they must face in carrying out their profession... to safeguard essential values and rights connected with the dignity and the supreme destiny of the human person” (*Dolentium Hominum*, n. 5).

In her pastoral action, the Church is called

to face *the most delicate and unavoidable issues* that well up in the human heart in the face of suffering, illness and death. It is from faith in Christ who died and rose that these issues can draw the comfort of the hope that does not disappoint.

Today’s world, which often does not possess the light of this hope, suggests solutions of death. Hence, there is the urgent need to promote a new evangelization and a strong witness of active faith in these vast secularized areas.

3. The Pontifical Council, therefore, does well to focus its reflections and programmes on the *sanctification of illness* and the *special role* of the sick in the Church and in the family, by virtue of the living presence of Christ in every suffering person. From this viewpoint, the year dedicated to the Eucharist is an appropriate opportunity for a more intense pastoral commitment in the administration of both Viaticum and the Anointing of the Sick. By fully configuring patients to Christ



who died and rose, these sacraments enable sick persons themselves as well as the community of believers to experience the comfort that comes from supernatural hope.

Properly enlightened by the words of the priest and of those who assist him, the sick person can joyfully discover *the particular mission* entrusted to the sick in the Mystical Body of the Church: united with the suffering Christ, each one can cooperate in the salvation of humanity, making the most of his or her prayers with the offering up of one's suffering (cf. Col 1: 24).

4. This must not, however, dispense Church leaders from paying *stimulating and active attention to the structures* where sick people sometimes suffer forms of marginalization and a lack of social support. Church leaders must also extend this attention to the areas of the world where the neediest of the sick, despite the progress of medicine, lack medical drugs and appropriate treatment.

The Church must also devote special care to those areas of the world where *those sick*

with AIDS receive no help. The Good Samaritan Foundation was created especially for them; its aim is to contribute to helping the peoples most exposed with the necessary therapeutic support.

The work of evangelization, the formation of consciences and the charitable witness that your Dicastery promotes in the world are a precious contribution, not only to comforting the suffering but also to guiding civil societies towards the demanding goals of the civilization of love.

5. I therefore thank you, dear brothers and sisters, for all the work done in these years, and I urge you to continue it with renewed enthusiasm. You know that I am constantly close to you and accompany you in your Dicastery's tasks with my prayers and my full confidence in the dedication you devote to your important activities. I encourage you in them, and to comfort you in your work I impart a special Apostolic Blessing to you, with which I also intend to embrace all those to whom you reach out through your work.





# Homily of Cardinal Lozano Barragán During the Holy Mass Celebrated on the First Day of the VI Plenary Assembly

20 JANUARY 2005

I would like to greet all the participants, Members, Superiors, Officials and Consultors of this Pontifical Council for Health Pastoral Care. We will begin the VI Plenary Assembly of this Dicastery, an assembly for the assessment of the work plan, with this Eucharist addressed to the Holy Spirit.

The Holy Father entrusted this Dicastery to us to carry out a very difficult mission: to respond to the most profound questions that a man can pose to himself, especially in this epoch of deChristianisation, where it seems that even these very questions are prohibited. Why does one die? Why does one suffer? Why does pain exist? Why does illness exist?

We Christians know the answer well and it has been repeated very many times by priests such as ourselves, the 'why' is nothing other than Christ, who was crucified, died and rose again.

But this answer, unfortunately, runs the risk of being worn out in our presentation of it: a stereotypical answer which, because it is repeated, seems to remain an empty formula.

In order to enter the profundity of Christian mystery, which is the core of the task entrusted to our Dicastery, it is necessary to experience that mystery in identification with Christ who died and rose again. And this union can be nothing else but following the way by which a person can identify with another, that is to say – love.

There is the human love by which at times somebody wants to identify with Christ, relying on his own strength in the Pelagian style, through a false ascesis of renunciation and strength of will, or through stoicism. I think that in this way we do not rise above the

religious ideologies that down the centuries man has invented in order to try to solve the problem of evil: ideologies that evaporate in the intimate experience of death and leave us naked in our desperate powerlessness.

The only strength at the level of an answer is vital love, that is to say an omnipotent Love that can create life in death itself. This Love with a capital 'L' cannot be a feeling that is only sublime. It has to be the very person of God. The God of Love, the God who is a gift that reaches the heart and generates the most satisfactory affective, mental, and in an overall sense personal, answer that can be found, that is to say finding in the absurd and cruel negation of death the recreation of life. This means that what in the evidence of experience is humanly absurd, is found to be infinitely logical and truthful: our death as the only and true birth. This is the answer of true Love to the most disquieting questions of existence.

For this reason, we have read in the Gospel of St. John (Jn 14:15-21) that the Lord prayed to the Father so that He would give us 'another Counsellor to be with you for ever, even the Spirit of truth, whom the world cannot receive, because it neither sees him nor knows him'. This Spirit is the true Consoler because who else can console us in relation to the injury of death? This Spirit is the Spirit of truth because only he can lead us to the truth of our existence in uniting us to the only existent truth – the Logos of the Father, the revelation of whom only takes place with the victorious cross.

It is certainly the case that this divine Love generates in us the fullness of our personal, affective, mental, corporeal and

total human love. It is the love with which, as an answer and the very strength of the Spirit, we love Christ, and as the Lord says: 'in that day you will know that I am in my Father, and you in me, and I in you', which means: we will have all the answers that we seek because we will have the whole of life.

But this love cannot be only empty affection, says Christ: 'He who has my commandments and keeps them, he it is who loves me; and he who loves me will be loved by my Father, and I will love him and manifest myself in him'. It is specifically this answer on the part of the Pontifical Council for Health Pastoral Care that



we want to examine at this assembly of assessment: if we have obeyed and how we have obeyed the commandments of the Lord in the specific field of work of this Dicastery, according to the programmes designated at the previous Plenary Assembly by the Members of this Pontifical Council and ap-

proved by the Holy Father, so as then to assess whether we are really carrying out the mission that the Pope entrusted to us, namely to provide an answer to the most vital questions of contemporary man.

May the Holy Spirit, whose Holy Mass we are celebrating, identify us in this Eucharist

with Christ, who died and rose again, and give us his all powerful Love so that our Assembly is in itself an important part of the vital witness that, as a final answer, we give to today's man in relation to the greatest problems of existence!

We entrust our work to Mary,

'*Salus infirmorum*', who, full of the Holy Spirit, was made 'Ark of the Covenant', Ark of the definitive divine Testament of life, health and salvation.

His Eminence Card. JAVIER  
LOZANO BARRAGÁN  
*President of the Pontifical Council  
for Health Pastoral Care,  
The Holy See.*

## Homily on the Second Day

21 JANUARY 2005

20

"Then he went up on to the mountain side, and called to him those whom it pleased him to call; so these came to him, and he appointed twelve to be his companions, and to go out preaching at his command" (Mk 3:13-14).

In the same way John Paul II has gathered us together, has taught us and has sent us out to heal the great wounds of humanity of our times.

Life, bread and freedom – these are the three great challenges that face humanity.

"The Catholic Church, because of her universal character, has always been directly involved, and has taken part, in the great causes that involve contemporary man's suffering and hope. The Church does not feel that she is a stranger in relation to any people because wherever there is a Christian, namely one of her members, the whole of the body of the Church is involved. And more than this, wherever there is a man, there for us is a bond of brotherhood".

"Life is the first gift that God makes to us; it is the first wealth that man can enjoy. The Church proclaims the 'Gospel of life'. And the primary task of the state is to defend and promote human life. The challenge to life over recent years has become increasingly broad and crucial. It has emerged by concentrating in particular on the beginning of human life when man is at his weakest and

must be most protected. Opposing ideas confront each other on the subjects of abortion, assisted procreation, the use of embryo stem cells for scientific purposes, and cloning".

"The second challenge is bread. The earth, made wonderfully fertile by its Creator, has enough and varied food for all its inhabitants, both present and future. Despite this, the statistics on hunger in the world that are published are dramatic: hundreds of million of human beings suffer from malnutrition. And every year millions of children die because of hunger or its consequences".

"Then there is the challenge of peace. A supreme good which is the pre-condition to the achievement of so many other essential goods, peace is the dream of all generations. But how many wars and armed conflicts there are, and how many continue to exist – between states, between ethnic groups, between peoples and groups living in the same territory of a state – from one end of the globe to the other, causing innumerable innocent victims and constituting the sources of so many other evils!"

"But to bring real and lasting peace to this bleeding planet of ours we need a strength of good that does not step back from certain difficulties. This is a strength that man on his own is unable to obtain or to

conserve – it is a gift of God. And Christ came specifically to bring it to man, as the angels sung at the manger of Bethlehem: 'peace on earth to men that are God's friends' (Lk 2:14). God loves man and wants him to have peace. We are asked to be the active instruments of peace and to defeat evil with good."

"Freedom is a great good because only through freedom can man fulfil himself in a way that corresponds to his nature. Freedom is light: it allows us to choose our goal responsibly as well as to choose the path by which to achieve it. In the most intimate core of human freedom there is the right to religious freedom because this is connected with the most essential relationship that man has – the relationship with God".

To engage in this work of healing the wounds of mankind we have come to the hospital of the mercy of God to have the help that we need. And in that very sacred hospital the nurse is none other than the Blessed Virgin Mary.

There is no more a wonderful and effective medicine than that wine and blood which, by the work and the grace of the Holy Spirit, is converted into the body and blood of the Lord.

His Eminence Card.  
CARLOS AMIGO VALLEJO  
*Archbishop of Seville  
Spain*



*XIII World Day  
of the Sick*



*11 February 2005  
Marian Sanctuary  
of Mvolyé  
Yaoundé - Cameroon*

## Letter of the Holy Father to Cardinal Lozano Barragán

*ON 11 JANUARY 2005 THE HOLY FATHER JOHN PAUL II  
APPOINTED HIS EMINENCE CARDINAL JAVIER LOZANO BARRAGÁN  
HIS EXTRAORDINARY ENVOY TO THE CELEBRATION  
OF THE THIRTEENTH WORLD DAY OF THE SICK*

To Our Venerable Brother **Javier LOZANO BARRAGÁN**,  
Cardinal of the Holy Roman Church,  
President of the Pontifical Council for Health Pastoral Care

The twelve apostles of Christ, who were sent out in twos by him with the power to cast out evil spirits, anointed many sick people with oil and healed them (cf. Mk 6,7:13). We too, who occupy the most demanding ministry of the successor to Peter, have taken to heart these words of Holy Scripture on the zeal of the apostles and we strive to bring great care to spiritual support for all sick people.

Indeed, there are very many faithful who in their daily lives experience sufferings and difficulties and who, because of this, need comfort and the celestial consolation of their souls.

We thus think with great emotion of the thirteenth World Day of the Sick which will be celebrated in the city of Youndé at the sanctuary of Holy Mary Queen of the Apostles on 9, 10 and 11 February 2005. Given the importance of this meeting we wish there to be present at that place a prelate who represents, officially and publicly, our person and is a clear witness to our special union with the sick and those work for them in our world.

You, Venerable Brother, who by our wish preside over the Pontifical Council for Health Pastoral Care, are the person suited to performing this mission in a diligent and fruitful way. As a consequence, given all the problems and the spiritual needs that spring from them, I delegate you, by this letter, our Extraordinary Envoy to this assembly, which has been made the subject of great pastoral attention. And thus it is on our behalf that you, Venerable Brother, will be present amongst the participants and those listening to this celebration. You will renew our special message and you will confirm everywhere our thought and our communion with the infirm and the sick.

In undertaking such an important and useful service we will accompany you with our prayer, being most happy at your pastoral dedication and care.

You will comfort anew with our Apostolic Blessing, which I impart to you, the holy pastors that are present, as well as members of religious families and the faithful, in particular those who suffer, so that they may gather abundant fruits from this celebration and undertake with care a new evangelisation.

From the Vatican, 11 January 2005, the twenty-seventh year of our pontificate

A handwritten signature in black ink, reading "Joannes Paulus II". The signature is fluid and cursive, with a long horizontal stroke at the end.

# Letter of John Paul II to the Special Envoy to the Celebrations of the XIII World day of the Sick

YAOUNDÉ - CAMEROON, 9-11 FEBRUARY 2005

*To Cardinal  
Javier Lozano Barragán  
President of the Pontifical Council  
for Health Pastoral Care*

1. Your Eminence, as my Special Envoy to the celebrations for the 13th World Day of the Sick, I entrust you with the task of addressing my most cordial greetings to all the participants and to all who, via the mass media, will be joining in spirit in this solemn moment of reflection and prayer at the “Mary, Queen of the Apostles” Shrine in Yaoundé, Cameroon.

I express my sentiments of gratitude to the President of the Republic of Cameroon and to his Collaborators for the readiness to help that the whole country has shown in the preparatory phases and celebration of this event.

I greet the Bishops, priests and deacons responsible for the pastoral animation of the entire community. I greet the men and women religious who are always ready to come to the aid of those in trouble. I greet in particular all the personnel from the health-care world, for it is on their generous commitment that the care and nursing of the sick largely depends.

I have very special thoughts for you, dear sick brothers and sisters, who bear in your bodies the signs of suffering and frailty, and also for you, their families, who are closest to them in their daily life: I am present among you all with my wholehearted affection.

2. This year, the celebration of World Day of the Sick is taking place in Africa, a Continent scarred by many serious problems, but also rich in extraordinary human and spiritual resources and enlivened by an intense desire for peace and authentic progress. Africa is suffering because of the presence of so many sick who are silently calling for solidarity from the whole world.

Dear brothers and sisters of Africa, Jesus is “the Man who knows suffering”. In this year dedicated to the Eucharist, I invite you, in your thoughts and hearts, to join in the sacrifice of the Mass, an inexhaustible source of hope in all life’s trials.

May Mary, Queen of the Apostles and Help of the Sick, who on Calvary participated in the painful martyrdom of her Son, gather up the tears of those who are afflicted by suffering in Africa and in every corner of the earth!

I very gladly impart to you, Your Eminence, and to all those who will be taking part in the celebrations for World Day of the Sick, a special Apostolic Blessing.

*From the Vatican, 1 February 2005*



# Account of the XIII World Day of the Sick

YAOUNDÉ, CAMEROON, 9-11 FEBRUARY 2005

Yaoundé, the capital of Cameroon, where on the hill of Mvolyé – which in the local language means ‘hill of God’ – is located the ‘Mary Queen of the Apostles’ sanctuary, was the city that hosted those taking part in the XIII World Day of the Sick of 2005. Ten years had passed since a similar event had taken place in Yamoussoukro in the Ivory Coast. In choosing Africa once again, in line with the words of John Paul II the intention was ‘to offer an opportunity to express concrete solidarity to the populations of that continent so burdened by a grave lack of health care services’. ‘Africa suffers’, observed the much-lamented Pope, ‘because of the presence of so many sick people who silently request the solidarity of the whole world’.

The World Day of the Sick, which was organised by the Pontifical Council for Health Pastoral Care together with the Bishops’ Conference of Cameroon, was dedicated to the subject: ‘Jesus Christ, a hope for Africa – Youth, Health, AIDS’.

The special envoy of His Holiness to the XIII World Day of the Sick was His Eminence Cardinal Javier Lozano Barragán, President of the Pontifical Council for Health Pastoral Care. The two other members of the pontifical mission were Msgr. Théodore Toko, Adjunct General Secretary of the Bishops’ Conference of Cameroon, and Rev. Paul-Marie Philémon Mbinda, the head of pastoral care in health for the Archdiocese of Yaoundé.

The group of people of the Pontifical Council for Health Pastoral Care that went to Yaoundé was made up of: the Bishop Secretary of the Pontifical Council for Health Pastoral Care, H.E. Msgr. José Luis Redrado O.H., some Officials and workers of the Pontifical Council, as well as priests, religious and members of the laity in-

volved in various ways in pastoral care in health in Spain, Italy, Belgium, Germany and India.

## The Preparations for the World Day

Announced and convoked by the Message of the Holy Father, the celebration of the XIII World day of the Sick in Yaoundé was the subject of numerous preparatory initiatives. The Message of the Pope was spread through the mass media. Radio Vatican transmitted the principal initiatives connected with the celebration. The information leaflets on the organisation of the World Day were prepared both by our Pontifical Council and by the Episcopal Commission for Pastoral Care in Health of the Cameroon.

From an organisational point of view, of marked importance was the visit of the President of the Pontifical Council for Health Pastoral Care, accompanied by the Secretary, on 9-22 July 2004, in order to meet the authorities of the government and to establish the details of the imminent event with the organising committee. The co-ordinator of this committee was the President of the Episcopal Commission for Pastoral Care in Health of the Cameroon, H.E. Msgr. Adalbert Ndzana, the Bishop of Mbalmayo.

## The Celebration of the World Day

The solemn celebration of the XIII World Day of the Sick took place on 9 February. The Prime Minister, Ephraïm Inoni, on behalf of the President of the Republic of Cameroon, extended words of greeting to the participants. Afterwards the following greeted the assembly: the President of the Bishops’ Conference of Cameroon,

Msgr. Simon-Victor Tonyé Bakot, the Metropolitan Archbishop of Yaoundé; the President of the SCEAM (Symposium of the Bishops’ Conferences of Africa and Madagascar, which brings together all the bishops of the continent of Africa and the Island of Madagascar); the Archbishop of Abuja, Msgr. John Olorunfemi Onaiyekan; and the representative of the Director of the World Health Organisation.

Archbishop Tonyé Bakot gave a summarising account of the context in which this important ecclesiastical event was taking place. The Archbishop concluded: ‘the pathological situation requires a strong response on the part of bishops who are aware that the hope of Africa is young people. If youth is sick then society, too, is sick. At the present time young people are the main victims of AIDS’.

Following on from this observation, the President of the SCEAM, stressing the importance of the fact that the World Day of the Sick was being held in Africa, warmly thanked the Holy Father and the Pontifical Council for Health Pastoral Care for their courageous choice and for having established the ‘Good Samaritan’ Foundation whose aim is to care for those sick people who are most in need.

The polyphonic chants in French and Latin that followed each other during the opening ceremony expressed the shared feelings of the bishops and the delegates who had come from all over the world, and in particular they expressed their gratitude to and love for Pope John Paul II, a ‘witness, teacher and guide’. Equally significant was the hymn composed especially for this occasion and sung by young people: ‘prevention, education, the correct practice of sexuality, faithfulness, and chastity are the only means by which to combat

AIDS. Christ is the real hope for Africa and mankind'.

Following tradition, the celebration of the XIII World Day of the Sick in Yaoundé also took place under three headings: pastoral care, the doctrinal-scientific aspect, and the liturgical dimension, and also included visits to places of health care.

#### *The Pastoral Day: the Meeting of Bishops*

The significant presence of sixty Archbishops and Bishops in the capital city of Cameroon from over thirty countries of Africa marked the pastoral day of 9 February. The following dignitaries honoured the meeting with their presence: Cardinal Christian Wiyghan Tumi, the Archbishop of Douala; Cardinal Polycarp Pengo of Tanzania, the Archbishop of Dar-es-Salaam; the Apostolic Nuncio to the Cameroon, Archbishop Eliseo Antonio Ariotti, twenty-three Archbishops and Bishops from the diocese of Cameroon; H.E. Gregorios, the Archbishop of the Greek Orthodox Church in Cameroon and Exarch of Central Africa.

Cardinal Javier Lozano Barragán began the deliberations of the World Day of the Sick and in his proslution on 'Pastoral Care in Health. What it Must be' he stressed the enormous efforts that the Church was making in Africa through its 106,591 health care centres, thereby carrying out the mandate of the Lord: 'heal the sick'.

The analyses and proposals of the Cardinal President met with full support on the part of the assembly. The 'Good Samaritan' Foundation, by which the Pontifical Council for Health Pastoral Care had committed itself to collecting the funds needed to save the lives of AIDS victims, who are very great in number in Africa, received unanimous applause. The statistics of the reports of the World Health Organisation, which conceal terrible human dramas, are beyond calculation.

H.E. Msgr. Adalbert Ndzana, the President of the Episcopal Commission for Pastoral Care

in Health in Cameroon, outlined the general contours of the current situation of health care, of which, of course, the activities of the Catholic Church in Africa form a part. The Bishop of Mbalmayo observed that the Church is responsible for 42% of health care structures in Africa and stressed that the Catholic places of care must remain authentic promoters of public health.

The subsequent papers by bishops were dedicated to an



analysis of the dramatic situation and to proposals to achieve a possible solution to the problems that exist.

For example, Bishop Msgr. Hervé Itoua of the Episcopal Conference of the Republic of Congo stressed that the epidemic of AIDS was decimating the population of the Congo. Other endemic evils joined this scourge – marsh fever, tuberculosis and malnutrition. 'From this World Day of the Sick', concluded Bishop Itoua, 'we expect greater and more caring solidarity in the Church on behalf of the sick'.

A tangible sign of such solidarity was the contribution of 60,000 euros by the Bishops' Conference of Italy. Msgr. Sergio Pintor, Director of the National Office for Pastoral Care in Health of this Bishops' Conference, explained that this sum could be used to launch a project to combat AIDS in Cameroon.

In general, the papers of bishops responsible for pastoral care in health emphasised, on the one hand, the tragic health care situation of the countries

of Africa, and, on the other, the exemplary role of the Church, which was often the work of the heroic sacrifices of both religious and members of the lay faithful.

#### *The Doctrinal and Scientific Day*

The day of study on AIDS and on all the problems connected with this pandemic was held in the great hall of the congress centre on the morning and afternoon of 10 February.

The first paper was reserved to the Minister for Health of Cameroon, Mr. Urbain Olangue. After giving a 'photograph' of his country as regards AIDS, he thanked the national and international organisations, and in particular the Catholic Church, for the contribution that they were making in this field, giving themselves limitlessly to AIDS victims who make up 5.5% of the population. Like so many others AIDS victims also suffer from marsh fever, malnutrition, tuberculosis, the consequences of armed conflicts, and forced migrations, and have urgent need of help. 'We need to act as though everything depended on God and work as though everything depended on us', concluded the Minister, referring to the words and the work of the previous great Archbishop of Yaoundé, Msgr. Zoa.

In his paper, Cardinal Javier Lozano Barragán presented the scientific data on the expansion of the epidemic of AIDS in the world. He then outlined the Magisterium of the Church and in particular the Magisterium of John Paul II. 'Prevention', 'formation', 'assistance', and 'accompanying' were the key concepts of the speech of the President of the Pontifical Council for Health Pastoral Care who stressed that 'the doctrine of the Church is global and is directed towards combating aids with every means possible in order to defend life, following the path of chastity and observing the commandment of God 'do not fornicate'... In response to a pansexual society we must propose and proclaim the value of chastity and conjugal faithful-



ness. We must reflect on the concept that life is not produced but created'.

Also worthy of attention were the speeches of the representatives of the countries and of the various organisations that were present at the meeting. These speeches were very moving. Mrs. An Verlinde, President of the CICIAMS, brought out the originality of the 'mission' of Catholic nurses, a mission that involves hundreds of thousands of men and women who serve sick people following the indications of Jesus Christ. This experience was also shared by a very large number of medical doctors, on behalf of whom spoke the Vice-President of the FIAMC, Dr. Wilson of Ghana. Dr. Alain Lejeune, President of the International Federation of Catholic Pharmacists (FIPC), referred to the new proposals and initiatives designed to lower the cost of the production of pharmaceuticals and emphasised the need to produce them locally.

Amongst the other numerous papers that filled the programme of the day dedicated to doctrinal and scientific matters, reference should also be made to the moving testimony of Sister Raphaela Handler, the Director of the Health Catholic Service of Windhoek, the capital of Namibia; the speech of Dr. Pierre Effa, the President of the organising committee of the World Day of the Sick in Cameroon; the paper by Rev. Prof. Jacques Semporé of the Faculty of Medicine of Ouagadougou; and the paper by Dr. Giovanni Guidotti and Dr. Angela Silvestrini of the Community of Sant'Egidio, both of whom described the 'Dream' ('Drugs Resource Enhancement against Aids and Malnutrition') programme by which a large number of religious congregations in Africa are supported economically.

In addition, there were papers by Dr. Peter Piot, the Director of the UNAIDS programme, and by representatives of the government of the United States of America, of the Bishops' Conference of the USA, of Caritas Internationalis, and of the World Medical Association.

Lastly, a so-called 'Marshall Plan' for Africa was envisaged which had the aim of treating a million AIDS victims every year.

Cardinal Javier Lozano Barragán ended the day by calling on African bishops to create realistic and concrete pastoral programmes based upon three elements: planning, communion and communication. As regards the 'Marshall Plan', the Cardinal President observed that there is another plan within the Church, namely Divine Providence, which had recently given us the 'good Samaritan' Foundation and which could become an effective instrument in the fight against AIDS.

#### *The Liturgical Day: Moments of Prayer*

##### *1. The opening Holy Mass of Monday 9 February*

The opening Holy Mass in honour of the Blessed Virgin Mary Consoler of the Afflicted took place in the cathedral dedicated to 'Notre Dame des Victoires' of Yaoundé. In the church, which was bursting to the seams with the faithful, the celebration was presided over by Cardinal Javier Lozano Barragán.

##### *2. The Holy Mass of Tuesday 10 February*

The Eucharist of the second day was celebrated in the parish church of the Sacred Heart of Jesus of Mokolo, a working-class district of the capital city. The principal celebrant of this Holy Mass celebrated under the heading 'for the sick' was Cardinal Polycarp Pengo, the Archbishop of Dar-es-Salaam, Tanzania.

##### *3. The solemn celebration of the Eucharist on Wednesday 11 February*

The solemn liturgical celebration of the XIII World Day of the Sick began at 16.00 with the welcoming of the special envoy of the Pope, Cardinal Javier Lozano Barragán, and the President of the Republic of Cameroon.

Over twenty thousand faithful took part in the religious celebration both within the church and in the atrium of the

Marian sanctuary of Mvolyé. Amongst them were a large number of young people who had come to the capital from all over the country in order to take part in the thirty-ninth National Youth Day. This celebration, to which young people (who constitute 45% of the Cameroon population) are very attached, is held on 11 February.

Together with the special envoy of the Pope, the Holy Mass in honour of the Blessed Virgin Mary of Lourdes was celebrated by Cardinal Christin Wiyghan Tumi, the Archbishop Douala; by Cardinal Polycarp Pengo, the Archbishop of Dar-es-Salaam; by Msgr. Simon-Victor Tonyé Bakot, the Archbishop of Yaoundé; by Msgr. Adalbert Ndzana, the Bishop of Mbalmayo; by Archbishop Eliseo Antonio Ariotti, the Apostolic Nuncio; by the Archbishops and Bishops of the five ecclesiastical provinces of Cameroon; by Msgr. José L. Redrado, Secretary of the Pontifical Council for Health Pastoral Care; by fifty bishops who had come from the whole of the Africa together with the President of the SCEAM, Msgr. John O. Onaiyekan, the Archbishop of Abuja; and by the presbyters of the official delegation of the Pontifical Council and two hundred priests from all over the country, many of whom were missionaries.

Next to the President of the Republic, Paul Biya, who was accompanied by his wife Chantal, were present numerous authorities of the state, amongst whom the Minister of Health, Urbani Olanguen.

Before beginning the Holy Mass, the Secretary of the Pontifical Council for Health Pastoral Care, Msgr. José L. Redrado, read the letter of the Pope appointing Cardinal Javier Lozano Barragán his special envoy to the celebrations of the XIII World Day of the Sick.

The readings from the Bible referred to Christ the Saviour of man and to Mary Maria *Salus infirmorum*. The verse from the New Testament 'Rise up and walk' (Jn 5:1-3, 5-9) had a special resonance. These

words on banners, flags and shirts had been chosen by the organisers in order to explain the spiritual importance of the World Day of the Sick in Africa.

In his homily, Cardinal Lozano Barragán emphasised the special character of the celebration of the World Day of the Sick of 2005, which was taking place during the Year of the Eucharist. Jesus Christ, who offers his body and his blood and gives his own life, invites us to imitate him: 'It is from him that all people involved in the field of pastoral care in health draw the strength that is needed to work in faith with love, generosity, dedication and altruism'. As President of the Pontifical Council for Health Pastoral Care, the Cardinal paid tribute to health care and peace workers in Africa for the courage, sacrifice and self-denial with which they work and bring all the comfort that is possible to the suffering and the sick.

In the prayer of the faithful, various intentions were proclaimed as regards the Church and the carrying out of her mission of salvation amongst the burdened populations of the continent of Africa. With extraordinary intensity, prayers were then read out for the health of the Holy Father John Paul II, for those afflicted by AIDS –

and above all young AIDS victims – for countries at war, for those afflicted by drought and for all those who are compelled to engage in forced migrations.

An intense moment of liturgy then followed – the administration of the sacrament of the anointing of the sick. The special envoy of the Pope, together with other Archbishops and Bishops, anointed a thousand sick people with the oil for the infirm. These were patients who had come from the three large hospitals and ten private clinics of the capital.

During the whole of the celebration various songs and dances typical of the Church of Cameroon were sung and danced. A choir of five hundred people chanted Gregorian chants and sung polyphonic songs, thereby conferring solemnity on this great ecclesial event.

#### *Meetings with the Sick*

On the morning of 11 February the special envoy of the Pope, together with other bishops and with the Vatican delegation, visited the Catholic Centres for Social and Health Care Animation of the central hospital of Yaoundé. This is financed by the 'Chantal Al Biya Foundation'. The Cardinal President was the bringer of the comfort and the blessing of the

Pope for the sick and those who accompany them. The festive welcome of dancing and singing that took place in these places of suffering was exceptionally warm and beautiful. The Cardinal congratulated those present not only on this welcome but above all on the successes achieved and the witness that the Catholic Church offers to the people of Cameroon in the field of health and pastoral care in health. They were two realities that stressed the need for great reflection on human pain and the urgent need for the solidarity that must unite peoples and nations in the North and the South of the world.

#### **Conclusion**

The celebration of the XIII World Day of the Sick in Cameroon was a valuable opportunity to direct attention to the continent of Africa, which is exploited and often forgotten, in a way that invokes a globalisation of solidarity so that a vigorous journey can be embarked upon towards the fullness of health and life, whose only source is Christ.

Rev. DARIUSZ GIERS  
*Official of the Pontifical Council  
for Health Pastoral Care,  
The Holy See.*



# The Pope Places Great Trust in the Value of your Prayers and your Suffering. Offer them for the Church and for the World

*MESSAGE OF JOHN PAUL II TO THE PILGRIMS WHO MET ON THE 11 FEBRUARY 2005, THE DAY OF THE BLESSED VIRGIN OF LOURDES, IN THE BASILICA OF ST. PETER'S, TO TAKE PART IN THE HOLY MASS FOR THE SICK, ON THE OCCASION OF THE XIII WORLD DAY OF THE SICK. THE SOLEMN CONCELEBRATION OF THE EUCHARIST WAS PRESIDENT OVER IN THE NAME OF THE HOLY FATHERS BY CARDINAL RUINI*

*Dear Brothers and Sisters,*

1. I joyfully join all of you who are taking part in the annual meeting of pilgrims, the sick and volunteers, organized jointly by UNITALSI and the Opera Romana Pellegrinaggi. I extend a most affectionate greeting to each one of you.

In the first place, I greet the Cardinal Vicar, the Bishops and the many priests present, and I extend my greeting with deep sympathy to you, dear pilgrims who have come here to relive Lourdes' special atmosphere; to you, dear directors of UNITALSI and of the *Opera Romana Pellegrinaggi*; to you, dear volunteers; and especially to you, dear sick people, to whom I feel particularly close.

2. The evocative Eucharistic and Marian Celebration in which you are taking part in

St Peter's acquires special significance on the day in which the liturgy commemorates Our Lady of Lourdes.

The anniversary of 11 February reminds us of the Grotto of Massabielle, high up in the French Pyrenees, where in 1858 Our Lady appeared at least 18 times to St Bernadette Soubirous. From that grotto, which has become a place of prayer and hope for multitudes of pilgrims from every part of the world, Our Lady continues to ask for prayer, penance and conversion. Her message is the same as that of Christ: "*Repent, and believe in the Gospel*" (Mk 1: 15), which is offered to us by the liturgy of Lent that has just begun. Let us accept it with humble and docile compliance! The flow of sick and suffering people to the feet of the Blessed Virgin is a ceaseless exhortation to entrust ourselves to Christ and his heavenly Mother, who never abandon those who turn to them in moments of suffering and trial.

3. In dying on the Cross, Christ, the Man of sorrows, brought the Father's plan of love to fulfilment and redeemed the world. Dear sick people, if you join your suffering to the suffering of Christ, you will be his privileged cooperators in the salvation of souls. This is your task in the Church, which is always deeply aware of the role and value of illness enlightened by faith. Thus, your suffering, dear sick people, is never wasted! Indeed, it is valuable for it is a mysterious but real sharing in the saving mission of the Son of God.

The Pope, therefore, sets great store by the value of your prayers and suffering: offer them up for the Church and for the world; offer them for me, too, and for my mission as universal Pastor of the Christian people.

4. From St Peter's Basilica, our gaze now broadens to take in so many other localities





where Christian communities are gathered today on the occasion of the 13th World Day of the Sick and, especially at the “Mary Queen of the Apostles” Shrine in Yaoundé, Cameroon. It is there that the principal celebrations of this important ecclesial event on the theme: “Christ, hope for Africa” are being held. The African continent, together with all humanity, is crying out to experience the merciful love of the Lord and the support of the Holy Virgin, especially in moments of exhaustion and illness.

May Mary, Woman of sorrow and of hope, be gentle to all who are suffering and obtain fullness of life for each one: may she clasp them all to her maternal heart!

Most Holy Virgin, Queen of Africa and of the whole world, pray for us! I impart my Blessing to everyone with affection.

*Joannes Paulus II*

## The Sound of Weapons, the Source of the Woes and the Sufferings of the People, should Cease

*THE HOMILY OF CARDINAL JAVIER LOZANO BARRAGÁN, THE SPECIAL ENVOY OF THE HOLY FATHER, DURING THE CELEBRATION OF THE EUCHARIST AT THE MARIAN SANCTUARY OF MVOLYÉ, IN YAOUNDÉ, CAMEROON. 11 FEBRUARY 2005*

Dear Brothers and Sisters in Christ,

In designating me his special envoy for the celebrations of the thirteenth World Day of the Sick, the Holy Father John Paul II wanted to be officially and publicly represented and thus to express his union with, and his special concern for, the sick and those who take care of them, in order to bring celestial consolation to their souls.

I thank God, the Lord of Life, for having given me the opportunity to celebrate the Eucharist in this memorable Marian sanctuary of Mvolyé in the heart of the continent of Africa, ten years after the World Day that was celebrated in 1995 in the Marian sanctuary of Mary the Queen of Peace of Yamoussoukro in the Ivory Coast. Once again the choice of Africa for the celebration of such an event demonstrates not only the special attention that the Catholic Church pays to the problems of this continent but also her desire to make her material, spiritual and moral contribution to the grave challenges that the continent of Africa is experiencing, in particular in the field of health and health care.

I extend my warm thanks to all the pastoral agents of the Church in Cameroon, all the civil and political authorities, the organisers of this World Day and all of you who are taking part in this celebration, for the spirit of

welcome dear to African traditions that you have displayed since our arrival and above all for the attention that you pay to health care problems.

The event that we are celebrating today coincides with the creation of the Pontifical



Council for Health Care Workers on 11 February 1985 by John Paul II. This Pontifical Council has as its objective that of providing an answer to the ultimate questions of human existence, in particular the problems of suffering, illness and death, to which the Church provides answers in a strong way through the action of the Holy Spirit the Consoler who leads us to Christ who died and rose again. In this sense the Pontifical Council for Health Care Workers 'draws near to the wounded of life in order to offer them the love of Christ' ('Message for the XIII World Day of the Sick', n. 5) and expresses the 'care of the Church for the sick, helping those that engage in service to the sick and the suffering' (*Pastor Bonus*, n. 152). In short, the Pontifical Council for Health Care workers is at the service of the dissemination of the Gospel of Christian Hope – the theme of the Pope's message for this World Day – amongst health care personnel and people who suffer. The World Day of the Sick has been placed, in line with the wishes of the Holy Father, under the patronage of Mary, Our Lady of Lourdes, whose memory we celebrate today by invoking her as the Consoler of the afflicted and the Health of the sick.

I would also like to draw your attention to



the fact that we are celebrating this World Day within the context of the liturgical year that the Holy Father wanted to dedicate to the mystery of the Eucharist, a mystery in which Jesus offers his body and his blood, thereby making a gift of his own life, a pledge of the salvation of mankind. It was Christ himself who invites us to imitate him: 'do this in remembrance of me' (Lk 22:19-20). It is from him that all the people involved in the field of pastoral care in health should draw the strength that is needed to work in faith with love, generosity, dedication and altruism, bringing comfort, peace and hope to sick people and those who suffer. In the mystery of the Eucharist, and above all in Viaticum, we find the practical response to all the problems connected with health because it was on the cross that the salvation of man was completed. In celebrating today this Eucharistic liturgy, the culminating moment of this World Day of the Sick, we render present in Africa and for the whole of Africa the reality of the healing of illness through the omnipotence of the Saviour.

Indeed, the Church 'sees the face of Christ in the features of every person who suffers' ('Message for the XIII World Day of the Sick', n. 5). Christ is seen as the figure described in the first reading from the Book of Isaiah: 'he had no form or comeliness that we should look at him, and no beauty that we should desire him. He was despised and rejected by men; a man of sorrows, and acquainted with grief; and as one from whom men hide their faces he was despised and we esteemed him not' (Is 53:2-3).

Still today, dear brothers and sisters, our society has numerous cases of abandoned, despised people. They need our compassion and our solidarity, our gaze of goodness and benevolence: they need to experience the love of Christ for them through our consoling presence and medical help. In the second reading St. Paul exhorts us to accept suffering in a total self-abandonment and a total trust in the Father, certain of victory, so that nothing can separate us from the love of Christ (Rm 8:31-35): 'if God is for us, who is against us?' This assumes that nobody will be left alone in their loneliness and their needs.

On this point the observation of Pope John Paul II in his post-synodal exhortation *Ecclesia in Africa* retains all its relevance: 'Africa is a continent in which innumerable human beings – men and women, children and young people – lie in a certain sense at the edge of the road, sick, wounded, and powerless. They have extreme need of Good Samaritans who come to their aid' (n. 41).



With his care and his effective words, Jesus healed the sick man and assured him of his reintegration into society: 'Rise, take up your pallet, and walk' (Jn 5:8).

Certainly, health care workers do not have, as Jesus did, the power to restore health to sick people with the force alone of words, but they do have the knowledge and the art of healing, which confer upon them a special capacity to meet needs connected with the health of a sick person. In this sense they practice their profession within medical institutions in order to cure the illnesses of men, thus placing themselves at the service of life. There are a very large number of Bishops, priests, and male and female religious who help the sick in the Church in Africa and some of them do so without even having a specific medical training; they all do this with hearts full of charity, love, compassion and sensitivity. Like the Good Samaritan (cf. Lk 10:29-37), they stop at the side of suffering and wounded people in order to come to their aid. What matters is helping to produce 'people on their feet, people who walk', that is to say people who are healthy in body and spirit, who benefit from that life in abundance that comes from Christ. They help the sick to conform themselves to the suffering Christ who died and rose again, to unite their sufferings to the sacrifice of Christ for the salvation of the world and to undergo the experience of spiritual consolation, which is the fruit of Christian hope. As the Holy Father has written: 'In Christ is the hope of true and full health, the salvation that he brings is the true response to the ultimate questions of man' ('Message for the XIII World Day of the Sick', n. 6).

Following the example of Christ, the perfect model of giving oneself to others, health care workers – the directors of hospitals and health care centres, medical doctors, male and female nurses, midwives, researchers, pharmacists, chaplains, voluntary workers, and paramedical staff – are witnesses to the love and the presence of Christ and at the same time they are the builders of the culture of life amongst families burdened by illness and sufferings of every kind: malnourished children, the abandoned, orphans, men and women who have lost members of their families because of armed conflicts, elderly people without the support of a family, drug addicts, and sick people afflicted by AIDS and malaria or by tuberculosis.

On behalf of the Holy Father John Paul II, I would like to make a vibrant appeal to all those who hold positions of influence in the world: the sound of weapons, the source of

the great sufferings of the populations of Africa, should cease. Let us therefore work together to build peace and foster that social, political and economic development of which Africa has urgent need!

With respect to AIDS, I would like here to recall what the Pope commends to health care workers: 'bring to our brothers and sisters afflicted by AIDS all the material and spiritual comfort that is possible. To men of science and leaders of the whole world I ask with great emphasis that moved by the love and respect that are due to every human person they do not economise on the instruments that are capable of ending this scourge' (Apostolic Exhortation *Ecclesia in Africa*, n. 116).

To make a concrete contribution for the benefit of the AIDS victims of the populations exposed to this pandemic, as indeed to other emergency pathologies, Pope John Paul II has recently created a Foundation called 'The Good Samaritan' which will try to respond to the numerous needs that Christian communities encounter in this field. I exhort you to offer your contribution as the Church in Africa to this Foundation. Africa will be the principal beneficiary of this institution. In the Church, as you know, one gives and one receives in a spirit of brotherly communion.



It is in this sense that we await your valuable help so as to enable the 'Good Samaritan' Foundation to grow and thus help the sick who are most in need throughout the world.

To conclude, I would like to pay tribute with admiration to the courage and the dedication of those many amongst you who, with a spirit of self-denial and sacrifice, work in very difficult conditions, often in inadequate structures with chance instruments to help your sick brothers and sisters. I address in particular the male and female religious who work with heroism amongst people most in need. I also greet with deference, and I thank, the various heads of civil and religious institutions, and in particular governors and bishops' conferences, for the advances that have been made in the health care field and I encourage them to collaborate and to commit themselves ever more in the training of qualified personnel, education in respect of the sacred value of life, the creation of adequate structures, the material equipment of health care centres, and the organisation of preven-

tion. Specifically in the field of prevention and in particular in relation to AIDS, I would like to observe with great emphasis the absolute efficacy of the virtue of chastity and of abstinence before marriage. I also invite you to commit yourselves to food security and the promotion of health care coverage in order to combat in a responsible way the spread of illnesses and thus allow everyone to have access to basic health care treatment.

May the Virgin Mary of Lourdes, the Cause of our joy and Queen of Peace, intercede on behalf of the peoples of Africa, and in particular on behalf of the large number of ill and suffering sick people, as indeed of health care personnel, so that they can find in Jesus Christ, the Hope for Africa, consolation for their souls and strength of service towards those who suffer. Amen.

His Eminence Card.  
JAVIER LOZANO BARRAGÁN  
*President of the Pontifical Council  
for Health Pastoral Care,  
The Holy See.*



# *Viaticum: Fullness of Health*

*Symposium on Viaticum  
Organised by  
the Pontifical Council  
for Health Pastoral Care*



*21 May 2005  
Domus Sanctae Marthae  
Vatican City*



# Viaticum: the Apex of Life

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In one of his first statements the new Pope, Benedict XVI, reminded us not to forget the Second Vatican Council because its richness is such that in no way can we see it as having come to an end.

This symposium on Viaticum was born from the need to reflect more deeply within the Pontifical Council for Health Pastoral Care on what gives it its specific form – because what it offers is the *princeps analogatum* of health – and the goal that we should aim for in all our pastoral efforts. A magnificent framework to reflect upon this is offered to us by this year of the Eucharist, which we are now celebrating, and to which we will offer our modest study as a small contribution.

With reference to the statement of our Supreme Pontiff, allow me to begin with three sections taken from two Constitutions of the Second Vatican Council: *Lumen Gentium* and *Sacrosanctum Concilium*.

As regards the sacrament of the anointing of the sick, this Dogmatic Constitution of the Church tells us that ‘by the anointing of the sick and the prayer of all the presbyters, the whole of the Church commends the sick to the suffering and glorified Lord so that he may heal them and save them (Jam 5:14-16) and also exhorts them so that by freely uniting themselves to the Passion and death of Christ (cf. Rom 8:17; Col 1:24; 2 Tim 2:11-12; Pt 4:13) they contribute to the good of the People of God (n. 11).

In the same Constitution, later on in the same section, we are told that ‘participating in the Eucharistic sacrifice, the source and summit of the whole of Christian life, they offer to God the divine Victim and offer themselves with him...They demonstrate the unity of the People of God...achieved wonderfully by this sacrament’ (n. 11).

In the Constitution on sacred liturgy it is observed: ‘and the same apostle exhorts us to constantly bear mortification in our bodies so that the life of Jesus is also manifested in our mortal lives (cf. 2 Cor 4:10-11). It is for this reason that we ask the Lord in the sacrifice of the Mass that ‘in accepting the spiritual offering, he makes of us an eternal offering to himself’ (Roman Missal, Secret of Monday of the Eighth Day of Pentecost) (*Sacrosanctum Concilium*, 12).

In the following reflections we will begin with the contemporaneous character of the fact that in Viaticum we find realised the mandate of the Lord ‘do this in remembrance of me’ specifically at the our of our deaths. In every Eucharist our concrete time and that of all centuries is inserted into the highest event of history in which everything achieved its culminating point – the paschal supper, the death and resurrection of the Lord or, in order to be more all-embracing, the whole of the meaning of the mystery of the Incarnation in its completeness, from the eternal decree of the Father, concealed before all centuries, until the current eternal presence of Christ at the right hand of the Father.

Following this central thread, I will seek to refer to certain ideas about life, communion and eternity that are implied in the receiving of Viaticum.

## 1. Life

Viaticum is the apex of life. The Eucharist is the total source of life because it is the simultaneous presence of the whole of the mystery of Christ. We are dealing here with the re-creation of a new creature. In the Eucharist one always shares in the medicine of immortality. However, in

Viaticum, on the shores of death, the contemporary character of death is given with the fullness of life; medicine is received by which to defeat death by the highest irruption of life.

Our death is this – death as the ultimate staging post. But in contact with Viaticum our death ceases to be a final point and becomes converted from a burial mound into a cradle in an authentic rebirth.

On the cross Christ abandoned himself into the hands of the Father and rendered up his spirit to him. And this rendering up of Love, the Spirit, is the force by which the Father converted the death of Christ into a source of life, or rebirth.

Our abandoning ourselves to the Father at the final moment is like a total loving embrace in the Spirit; and with Christ in Viaticum our mortal embrace is converted into the special immortality of the resurrection. Christ spoke about his last hour as the hour of his glorification; in Viaticum Christ ensures that our final hour is also the hour of our glorification.

In Viaticum our death is united to the death of Christ and thus completes what was lacking in the passion of Christ for the salvation of the whole world. The highest event of our existence reaches that culmination when we are in synchrony with Christ and with Christ we give our life for the salvation of the world. Thus we come to give a full meaning to suffering, to sickness and to pain, which are accepted so that they may complete in our bodies what was lacking in the passion of Christ so as to give them full meaning, rather than the funeral procession that accompanies throughout our lives, in the triumphal process of the merits that through the only true merit, that of Christ, obtains for us unending new life.

This union of the painful precedents that come before death and death itself with all its sufferings, but together with the very powerful death of Christ, is what we call the Eucharist as Viaticum. To summarise: Viaticum offers us the contemporaneous reality of the whole of our life as the whole of the life of Christ and makes us the heirs of true eternal life.

## 2. Communion

People talk about the terrible loneliness of death because nobody can take the place of anyone else and we all have to die individually. This is true, but for a Christian, through Viaticum, this loneliness is not as terrible as it would appear to be at first sight.

In the Eucharist received as Viaticum we are in full and intimate union with Christ who dies in each one of our deaths; not in the shadows of annihilation but in the luminosity of the resurrection. This luminosity is the company of the personal Truth of the whole of existence which, lived in Christ, brings with it the merciful and benevolent judgement of our Saviour. It is the merciful love of the Father that lives in the person who dies, because of the Eucharist, and which is the all-powerful Love of the Holy Spirit. In Viaticum we enter the communion of the Trinity as the last step of the ladder of the perfection of our earthly life so as to open ourselves to the supreme perfection of heaven.

In Christ, the total Head of the Church, we enter into the communion of the saints with the Most Holy Virgin Mary, with St. Joseph, with all the saints, with all those who are in the state of purgatory and with all the Christians with whom we are in communion. All of them accompany us at the definitive moment of the passing over and help us to take the fundamental leap towards absolute happiness.

In Christ, Alpha and Omega, the first born of the universe, virtually the whole

of creation is found. And at the moment of death, with the Eucharist received in Viaticum, the whole of creation hopes for its redemption through the dying person. This is the moment to enter into the inheritance of the whole of the universe, each one of us uniting ourselves to Christ, the centre of the universe, the first born of the whole of creation. Especially at this moment, each person shares in this central quality of Christ and also becomes in Christ the centre of the universe and the first born of the whole of creation (cf. Col 1:15-20). Thus with Viaticum for each Christian arrives the culminating moment to which St. Paul refers in his Letter to the Ephesians: the Lord has called us 'For he has made known to us in all wisdom and insight the mystery of his will, according to his purpose which he set forth in Christ as a plan for the fullness of time, to unite all things in him, things in heaven and things on earth. In him, according to the purpose of him who accomplished all things according to the counsel of his will, we who first hoped in Christ have been destined and appointed to live for the praise of his glory (Eph 1:9-12).



The experience of the loneliness of death involves privation for those who do not have faith. In Viaticum faith sustains us through the definitive presence of Christ. Viaticum is the crowning of the individual, solidarity-inspired, triumph of communion, brotherhood, friendship, total love, and self-giving of future happiness. The proportion between lone-

liness and faith at the moment of death is inverse, i.e. greater faith means less loneliness and greater loneliness means less faith.

## 3. Eternity

The definitive presence of Christ in the Eucharistic host offers us a foretaste of eternity. Christ appears independently of conditions of time and space. His dimension transcends all imagining, which is always conditioned by material measurements. This reality that is given in all Eucharistic acts in a very special way takes place when crossing the threshold of eternity in Viaticum.

In a classic way Boetius defined eternity as '*Interminabilis vitae tota simul atque perfecta possessio*': the unending, simultaneous and perfect possession of life. In this definition we can perceive a trace that allows us to unveil – stuttering – participation in divine life. Indeed, the frontier, so to speak, between what is of the divine and what is of the creature, is movement. God is unchanging; the creature is changing. This is certainly not only a quantitative movement that can be measured with the coordinates of time and space but is also an essential movement that becomes perfect progressively. Divine immutability is not a state of static quiet that is lacking in dynamism, but a fullness of activity that means omniperfection. This omniperfection is not only the concept of 'immobile engine' but also the fullness of passing over in the infinite giving of love that is the Most Holy Trinity. It is a dynamism that does not wish to possess because in itself it is everything. This is because it is loving giving without decrease, loving receiving without increase: God is love. He is not only infinitely lovable but infinitely loving. This immutability of perfect joy in loving giving is the authentic divine immutability, the very nature of God.

To share in the nature of God is to enter this communi-

ty that is full of love; it is to enter the circle of the Trinity, defeating the mutability of desire and progressive growth, in the full satisfaction of the creature through the filling of his capacities to the brim. This is true life, and thus this supreme communion of love constitutes true health, which is usually called eternal health.

The Eucharist achieves this wonder. Thus Christ says: 'if any one eats of this bread, he will live for other...He who eats my flesh and drinks my blood abides in me, and I in him. As the living Father sent me, and I live because of the Father, so he who eats me will live because of me' (Jn 6:51; 54-57). As we know, this is the Eucharistic bread that was given to us and the blood that was shed on the cross (cf. Lk 22:14-2).

Such is Viaticum: to share in the body of Christ who was given over to death and in his blood that was shed on the cross, so as to then enter into eternity. The frontier between the mutability of the creature is crossed in death with Viaticum. This is because the frontier between what is of the

divine and what is of the creature is crossed through that bridge, the cross. Viaticum is Christ who died and rose again, as the fullness of the times of the individual life of each one of us. Thus death is no longer darkness that is feared and rejected but the loving embrace that conforms us to the Lord Jesus. Our death in Viaticum becomes full giving to the Father through the total love of the Spirit in the Lord Jesus. This giving is the sum of all the daily acts of giving by which we wish to demonstrate to the Lord God our devotion in our own lives. This is because in this giving we do not give something to the Lord – we give everything. We place life itself in its totality in the hands of God. We then begin to really live and the paradox of death in life is solved.

### Conclusion

Let us state the paradox: the fullness of health is death. But not any death: only death in Christ and with Christ. That is to say: death experienced inti-

mately united to the death of Christ and thus with his resurrection. The achievement of such as a death is Viaticum.

It was for this reason that I said at the beginning of this paper that Viaticum is what fully specifies pastoral care in health. This is because it is the only horizon towards which the health of mankind can really advance.

With Pope John Paul II health was defined as 'tension towards physical, mental, social and spiritual harmony'. Viaticum is not tension towards harmony but the achievement of harmony, where the disharmony of death leads back to the harmony of the resurrection.

In Viaticum the disorder of death is converted into the greatest order; anxiety is converted into the greatest tranquillity. One finally reaches the wished for peace in dying because this is specifically what peace is: 'tranquillity in order'.

His Eminence Card. JAVIER LOZANO BARRAGÁN,  
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for Health Pastoral Care,  
The Holy See.*





# Viaticum: the Cultural Aspect

In the 'Year of the Eucharist' a symposium on the subject of Viaticum has a special importance not only for pastoral care in health but for all those who profess themselves Christians and who, in living by the Eucharist every day or on Sundays, are preparing themselves for the definitive meeting with Christ in the paschal mystery of the passion-death-resurrection of the Lord.

As my task is to present the cultural aspect of Viaticum as a source of life and hope I would like to take into consideration the liturgical-pastoral horizon taking as my point of reference the Second Vatican Council which, indeed, constitutes almost a watershed between the past and future. I will then take into consideration, with reference to their essential points: the situation before the Second Vatican Council (1) and certain debates during the discussion of significant documents such as *Sacro-sanctum Concilium*, *Lumen Gentium* and *Gaudium et Spes* (2), in order to see at the level of ritual how the reform of Viaticum with its theological-pastoral implications has been implemented (3). The last part of the paper (4) will provide some of the perspectives and opinions of the Bishops who sent the Pontifical Council a vast gamut of answers on the theory and practice of Viaticum in some continents of the world and in some dioceses. The conclusions, which of necessity will be brief, will seek to bring out underlying questions that will be further analysed in the papers that follow.

## 1. The Situation before the Second Vatican Council

In order to understand the significant aspects of the development of the subject and the practice of Viaticum in the modern Church we should re-

fer to the situation prior to the Second Vatican Council, that is to say to the long period of history that preceded this Council, beginning with the liturgical reform of the Council of Trent. This is the reason why there will now follow an analysis of the Ritual of Paul V (1614), the canon law of 1917 and certain proposals that sprang from the liturgical movement of the twentieth century, to then arrive, so to speak, at the eve of the Second Vatican Council and certain proposals of Bishops who perceived the need for a number of changes.

With respect to the term 'Viaticum',<sup>1</sup> we should remember that this was originally adopted to refer to all the forms of religious help and comfort given to the dying,<sup>2</sup> but very soon it was limited to refer exclusively to the Eucharist and more specifically to the Eucharistic communion given as the last nourishment to the dying.

### 1.1 The Ritual of Paul V

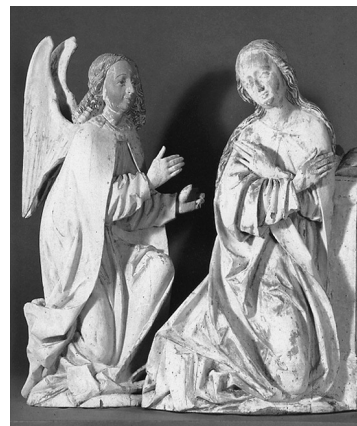
First of all let us examine what was established by the liturgical reforms of the Council of Trent (1545-1563): this is an obligatory choice when we consider the subject of this paper and given that after the *Roman Ritual* of Paul V (1614)<sup>3</sup> significant changes would only come with the Second Vatican Council (1962-1965).

In the *Roman Ritual* the chapter on the sacrament of the Eucharist is the only one that envisages a special and specific rite for the sick. Two parts may be distinguished: in the first part premises are laid down, in the second there are the various prayers and a description of the modalities of the same rite.<sup>4</sup>

In the premises there are pastoral suggestions for the parish priest who has to attend to the spiritual aspect. Thus, a) he should not deprive the sick

of Viaticum, indeed he should invite them to receive this sacrament even when there is no threat of imminent death and especially at the time of certain special feasts; b) he should not administer the Eucharist to unworthy people without having first confessed them; c) he should not only bring the Eucharist for adoration, devotion or other reasons; d) after Viaticum he can still bring the Eucharist to sick people who request it.<sup>5</sup>

Secondly, the parish priest should also attend to certain exterior aspects, such as, for



example: fasting, respect for the most holy sacrament, cleanliness and order in the house of the sick person, and the organisation of the procession.<sup>6</sup>

On the journey to the home of the sick person the priest is to pray. After reaching the place where the sick person is lying he gives a greeting of peace which is followed by the antiphon *Asperges*, the first verse of *Miserere*, and certain invocations followed by the prayer *Exaudi nos*. He then draws near to the sick person to discern his or her readiness to receive Viaticum, and if the patient wants to confess he is to listen to him or her and give absolution.<sup>7</sup> After hearing confession and giving absolution the priest will show the host, says the *Ecce Agnus Dei*, and will then with the sick person repeat *Domine*

*non sum dignus* three times. The priest will then give communion to the sick person and say (in Latin): 'Receive brother (or sister) Viaticum of the body of Our Lord Jesus Christ so that he delivers you from evil and accompanies you to eternal life. Amen.'<sup>8</sup>

If the threat of death is imminent the priest, after the *Misereatur*, omits completely or in part the previous prayers and immediately gives Viaticum to the sick person. This is followed by the prayer

by ecclesiastical law<sup>11</sup> when there is the threat of death. In addition, it is specified that 'one should not delay overly in giving holy Viaticum to the sick; and those who care for souls should act to ensure that sick people receive it when they are still perfectly conscious'.<sup>12</sup> Viaticum, this document states, can be administered on any day, including Good Friday, even when there is an interdict,<sup>13</sup> and at any time of the day or night. It is laid down that every believer

of cases envisaged by law and except in the case of need.<sup>16</sup> In case of general need (persecution, war, epidemic), if one cannot find a priest or a deacon and one cannot appeal to the Ordinary for authorisation, it is taught – in line with the early practice of the Church – that any member of the laity, assuming that that person has a licence, can administer Viaticum.

As regards the rite, the Viaticum is to be carried publicly with great solemnity, unless there are special contrary arrangements, because of the respect due to the Eucharist. The formula prescribed by the *Roman Ritual* is in Latin '*Accipe, frater [soror], viaticum Corporis Domini...*' and is to be used only once, during the period when death threatens and more precisely at the outset.<sup>17</sup>



*Domine Sancte* and by the blessing of the sick person with the ciborium (if there are other particles); then, in procession, praying with the psalm *Laudate Dominum* (or other psalms or hymns), the priest returns to church. If other particles do not remain after communion with the sick person the priest blesses with his hand and then in private each person returns to church or to their own home.<sup>9</sup>

### 1.2. The Code of Canon Law of 1917

With the codification of the *Codex Juris Canonici* of 1917 (CJC), the grave obligation to receive Viaticum is made explicit both by divine law<sup>10</sup> and

when threatened by death is obliged to receive Viaticum, as long as he or she is capable of doing so and worthy of doing so. It is clear that this obligation is not met in the case of sacrilegious communion.<sup>14</sup> Children are subject to the same precept, and this is the case even if they have not been admitted to first communion, as long as they are able to distinguish the body of Christ from ordinary food and know how to worship it.<sup>15</sup>

In addition the administration of Viaticum is reserved to the Ordinary of the place and to the parish priest, within the limits of their respective areas, both publicly and in private, for their own faithful and for outsiders, with the exception

### 1.3 The conference of the liturgical movement (1948)

During the twentieth century the liturgical movement grew in strength and during a work session on the liturgy for the sick held in Vanves in April 1948<sup>18</sup> the subjects addressed included visiting the sick, anointing, Viaticum and the death of Christians. Some of the limitations of pastoral practice were emphasised given that at that time the *Ritual* was often ignored by pastors themselves.

Of no lesser importance were the discussions after each paper<sup>19</sup> when it was stressed that the sacrament of anointing was a sacrament neither of the last hour nor of dying.<sup>20</sup> In addition, Viaticum was said not to be a communion like any other but a 'pledge of eternal life' and thus had to be a communal act that had to be experienced and explained at the most suitable occasions (retreats, paschal communion, parish missions) so that the event of death could be lived out in a Christian way – a celebration, in fact, that ought to take place in a festive climate. Alone in the service of God and his brethren, the Christian was a person who, in virtue of the Holy Spirit, dis-

covers the meaning of his or her own dying.<sup>21</sup>

#### 1.4 *The proposals for the Second Vatican Council*

After the Council had been convoked the Bishops were invited to express the proposals that they thought deserved to be taken into consideration during the ecumenical assizes. With respect to Viaticum, we find some proposals in the part of communion for the sick and some in the part on the sacrament of anointing. As regards communion for the sick, there is a call for the right of any priest or confessor of the sick person, after informing the parish priest, to administer Viaticum. The idea is also proposed that it should be licit for the priest to consume the remaining particles even if he is not fasting. In addition, it is requested that it should be possible to administer Viaticum without the lighting of candles.<sup>22</sup> As to anointing, the request is made that Viaticum should not be limited by law to the parish priest. In addition, it is suggested that Viaticum itself should be placed after anointing both in order to follow ancient practice and because anointing is seen as the *consummativum* of penance. Another request is that the continuous rite (anointing, Viaticum, apostolic blessing) should be simplified, perhaps with a single saying of the *Confiteor*.<sup>23</sup>

Of interest as well are the two proposals concerning the institution of a permanent diaconate, to which should be entrusted, amongst various other offices, the task of bringing the Eucharist to the sick in the form of Viaticum as well.<sup>24</sup>

## 2. The Second Vatican Council

In discussing this very important event for the Church in the contemporary world both the debates on, and certain conclusions of, important documents such as *Sacrosanctum Concilium*, *Lumen Gentium* and *Gaudium et Spes* will now be subjected to analysis.

### 2.1. *Sacrosanctum Concilium*.

There was a general interest in an overall and almost total revision of the various rituals connected with ceremonies that were considered too long, and for this reason it was believed advisable to shorten them.<sup>25</sup> The request was made to recite the *Confiteor* only once when anointing of the sick and the apostolic blessing were given after communion.

The organisation of the Ritual had its toots in the initial schema of the document 'De sacra liturgia' which preceded the *Sacrosanctum Concilium* (SC). In the third chapter certain proposals were made specifically for the anointing of the sick and included the question of when it should be conferred within the continuous rite of more than one sacrament (including the Eucharist): 'n. 58 (when to administer the sacrament). The anointing of the sick should usually take place after confession and before receiving the Eucharist'.<sup>26</sup> Various Fathers spoke in favour of a return to the ancient practice of first penance, then anointing, and finally Viaticum.

In a successive drafting of the texts on anointing certain changes to the initial schema were made and these were then put to the vote. The Council Fathers also gave their assent to amendment n. 5 which read as follows: 'in addition to the distinct rites of the anointing of the sick and Viaticum, a continuous rite should be prepared in which anointing is administered to the sick person after confession and before Viaticum'.<sup>27</sup> The new schemata was approved by an absolute majority and the *Sacrosanctum Concilium* was promulgated by Paul VI on the following 4 December – this was an important step because a new pathway was opened up to the implementation of the principles that had been established.

### 2.2. *Lumen Gentium*

A second document that considered Viaticum was the pastoral Constitution on the

Church, *Lumen Gentium* (LG), and Viaticum here was discussed within the context of a specific subject – the diaconate. Indeed, for some Fathers the diaconate had to have a specific responsibility as regards the dying. It was for this reason that Msgr. Fernandez placed assistance to the dying amongst the tasks of deacons,<sup>28</sup> whereas Drzazga, given the scarcity of both priestly and religious vocations, thought that it was advisable for men such as the helpers of the priest to be involved both in religious instruction and visiting believers who were sick in body and in spirit. As permanent deacons such people could provide such help.<sup>29</sup> Msgr. Piérard was in favour of the diaconate and declared that the wish expressed by sick people to partake of the Eucharist often to be nearer to Christ given that they could not go to church was an example of *vox pauperum*.<sup>30</sup> Msgr. Yamaguchi and Msgr. Ziade also asked that deacons be made able to console the sick when dying through the administration of Viaticum as well.<sup>31</sup> Msgr. Nežić, instead, proposed a new chapter with the title 'The Church as Communion in Charity' and argued for the need for charity based upon the world of God (*Mt* 5:43-48; 22: 36-40; 25:31-46; *Jn* 13:35) and concrete examples of such charity (assistance for the sick, those in need, the poor, the elderly). There should also be, he went on, special care for the elderly and gravely ill to whom access to a priest was often denied, as a result of which they could not receive Viaticum when they were about to die and thus lacked all comfort.<sup>32</sup>

In the final document of *Lumen Gentium*, n. 29 was dedicated in particular to deacons,<sup>33</sup> in relation to whom it was stated that 'sustained by sacramental grace, in the 'diaconate' of the liturgy, preaching and charity they serve the people of God in communion with the Bishop and his presbyter'.<sup>34</sup> Amongst their tasks were listed: 'according to the instructions of the competent



authorities, to solemnly administer baptism, to conserve and distribute the Eucharist, to assist at and bless marriages in the name of the Church, to bring Viaticum to the dying...Dedicated to the offices of charity and assistance, the deacons should remember the injunction of St. Polycarp: 'be merciful, walk with the truth of the Lord, who made himself the servant of all men'.<sup>35</sup>

In the pastoral Constitution of the Church in the contemporary world *Gaudium et Spes* (GS), the Council Fathers stressed the fact that human activity is raised to perfection in the paschal mystery and that this is prefigured in Viaticum. Indeed, 'the Lord left a pledge of this hope and Viaticum to his disciples in that sacrament of faith in which the natural elements cultivated by man are transmuted into the glorious Body and Blood of Christ in a supper of fraternal communion that is a foretasting of the banquet of heaven'.<sup>36</sup>

### 3. The Post-Council Statements

The principles and the observations of the Second Vatican Council found concrete application in certain official texts of the Church and as a result in theological and pastoral thought as well. At this stage in this paper comments will be made on the ritual of anointing and pastoral care of the sick, the *Catechism of the Catholic Church*, the Code of Canon Law, and, lastly, some comments will be offered on certain statements of Bishops' Conferences.

3.1. The *Ordo unctionis infirmorum eorumque pastoralis curae* (OUI), which was promulgated in 1972, found other practical expressions in the translations and adaptations carried out by certain Bishops' Conferences. After *Sacrosanctum Concilium* a long path had to be followed before the new Ritual was established and we may observe that 'amongst all the documentation the texts of the 'schemata' certainly form an important part. These were

projects drawn up during the period of the implementation of the reform of the 'Consilium' and the Congregation for Divine Worship, in the work involving the formulation and the revision of the books of liturgy and the directives and instructions of the Apostolic See. The schemata therefore offer not only a vision of the scale of the work undertaken overall and in chronological fashion but also an opportunity to follow the progressive unfolding that took place in the drawing up of the new books of liturgy and the documents of the reform'.<sup>37</sup>

The group concerned with the problem began its work in 1965. Attention was paid above all to the problems that the liturgical Constitution raised, including the drawing up of a continuous rite in which were to be administered the sacraments of penance, anointing of the sick and Viaticum.<sup>38</sup>

The first heading of the deliberations of the 'Consilium' (26 April 1965) is very brief: 'Title: Anointing of the sick, Viaticum and funeral rites. Index. Introduction. Chapter I: The rites for the sick; Chapter II: Viaticum and the commending of the soul; Chapter II: Funeral rites'.<sup>39</sup> We may observe that in this first schema anointing, Viaticum and funeral rites are placed together; further enrichments and specifications would arrive with the meetings of the months of October and November 1968,<sup>40</sup> when the schema would only take into consideration the sick (*Titulus. De infirmis*), whereas chapter III would be reserved exclusively to Viaticum and chapter IV would deal with the rite for the administration of the sacraments to a sick person threatened with death.<sup>41</sup>

At the meeting of 13 October 1970,<sup>42</sup> the new schema became more detailed both as regards the number of pages and because of two new chapters on confirmation and the commending of the soul.<sup>43</sup> The complete schema was then examined and finally approved by the first plenary Congregation of Divine Worship on 13

November 1970. The text, which was then once again revised on the basis of the observations that had been made, was sent to the Congregations for the Doctrine of the Faith and the Sacraments, for the Clergy and for the Propaganda of the Faith.

In the last schema of 16 August 1972<sup>44</sup> there is a variation in terms employed and a greater number of pages, in addition to a change in the title. Thus, 'with all the difficulties overcome and having the approval of all the relevant organisms, on 17 November 1972 the Congregation for Divine Worship was able to present the Holy Father with the final draft of *Ordo unctionis infirmorum eorumque pastoralis curae*',<sup>45</sup> with a schema that was precise and complete.<sup>46</sup>

We can consider the contents of the 'premise' of the Ritual in which specific reference is made to Viaticum which is an integral part of the sacraments for the sick and there is the statement that in passing over from this world to the other 'Viaticum of the Body and Blood of Christ strengthens the believer and provides him with the pledge of resurrection'.<sup>47</sup> It is thus requested that if possible this should be received during Holy Mass as a special sign of participation in the mystery of the death of the Lord and his passing over to the Father.<sup>48</sup> In addition, it is stated that 'all those faithful who for whatever reason are threatened by death are held by precept to receive holy communion...so that the faithful can receive its comfort when there are still in full possession of their faculties'.<sup>49</sup> And during the celebration of Viaticum the faith of baptism by which a Christian 'received adoption as a son of God and became co-heir to the promised eternal life' should be renewed.<sup>50</sup>

The ordinary ministers of Viaticum are the parish priest, his collaborators, however, if needs be, the Viaticum can also be administered by a deacon or another believer, man or woman, if he or she has received from the Bishop, by

concession of the Apostolic See, authorisation to distribute the Eucharist to the faithful.<sup>51</sup>

With respect to the continuous rite, it is specified that the order by which the sacraments for the sick are administered when death threatens should be as follows: repentance, anointing, and then the Eucharist in form of Viaticum. However, if there is an urgent need an opportunity for confession in general form should be given, Viaticum should then be administered, and then, if there is time, anointing.<sup>52</sup>

Amongst the premises that apply to the offices and ministries for the sick, reference should be made to the fact that priests, and especially parish priests, have the duty 'to visit in person and with caring frequency the sick, and to help them with a profound sense of charity. Above all when they administer the sacraments they should try to strengthen the hope and make more alive the faith of all those present in the suffering and glorified Christ; with this invocation of the maternal care of the Church and the comfort that comes from faith, they will provide relief to believers and awaken in others the sense of the realities beyond this earth'.<sup>53</sup>

Lastly it is observed that 'in preparing the rite and in organising its ceremony the priest should become informed about the conditions of the sick person so that he can take account of them in organising the whole event, in the choice of the reading from the Bible and the prayers, in the celebration or otherwise of the Holy Mass, and in deciding about the possible administration of Viaticum etc. All these things the priest, where possible, should agree upon beforehand with the sick person or his or her family, taking advantage of the occasion to explain the meaning of the sacraments'.<sup>54</sup>

### 3.2. *The New Code of Canon Law*

In line with the decision of the Second Vatican Council, on 25 January 1983 the Code

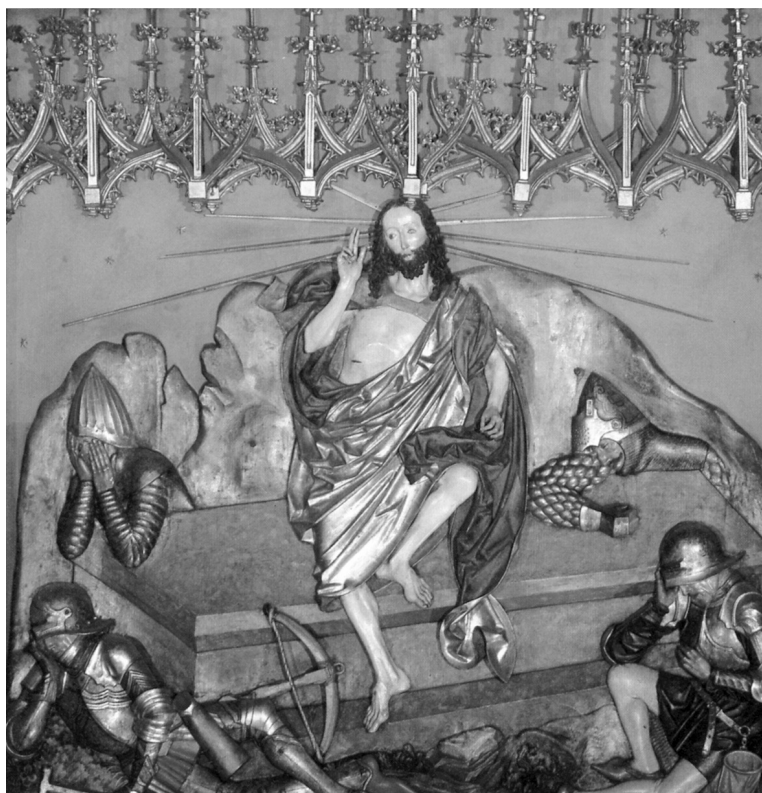
of Canon Law (CDC) was promulgated by John Paul II and Viaticum in a concrete way, albeit with its own specificity, was listed amongst the functions entrusted to the parish priest<sup>55</sup> and chaplains.<sup>56</sup> It is emphasised that 'the parish priest, the parish vicars, chaplains, and the Superior of the community in clerical religious institutes or in societies of apostolic life as regards all those who are in the home, have the duty and the right to bring the Eucharist in the form of Viaticum to the sick',<sup>57</sup> but it also states that 'this must be done by any priest or other minister of Holy Communion in case of need or with the at least presumed licence of the parish priest, of the chaplain or the Superior, who must be informed'.<sup>58</sup>

For believers who are threatened by death the Canon lays down that 'they should receive the comfort of the

gested that 'Holy Viaticum should not be deferred for too long; those who care for souls should diligently keep watch to ensure that the sick receive its comfort when they have full possession of their faculties' (Can. 922).<sup>59</sup>

### 2.3. *The Catechism of the Catholic Church*

Published by John Paul II on 12 October 1992, the *Catechism of the Catholic Church* (CCC) has some contents that restate what was by then already known, but it further specified that 'this growth in Christian life needs the nourishment of Eucharistic Communion, the bread for our pilgrimage until the moment of death, when it will be given to us as viaticum',<sup>60</sup> given that 'as the sacrament of Christ's Passover the Eucharist should always be the last sacrament of the earthly journey, the 'vi-



Holy Communion as Viaticum' (can. 921 - 1) 'even if they have received Holy Communion the same day' (can. 921 - 2), but where 'the threat of death remains it is recommended that Holy Communion be administered more than once on different days' (can. 921 3). Lastly, it is sug-

gested that 'passing over' to eternal life'.<sup>61</sup> Viaticum is thus defined as the last sacrament of the Christian,<sup>62</sup> and with penance and holy anointing it makes up the unity of sacraments that prepare the Christian for the heavenly homeland and complete the earthly pilgrimage.<sup>63</sup>



#### 2.4. *The theology of Viaticum promoted by the Second Vatican Council*

The theological reflection promoted by the Second Vatican Council is still at its initial stage as is borne out by the fact that many texts of the sacraments or dictionaries of theology do not deal with this subject. However, the authors that address the subject emphasise certain essential themes, beginning with both the history and the liturgy of Viaticum.<sup>64</sup> In this context the question of the death of a Christian as a paschal 'passing over' following the example of Christ and Viaticum as the 'true' sacrament of the death of a Christian are both examined. As an effective sign of the salvific presence of the Risen Christ at the supreme moment of death, Viaticum refers not only to the paschal dimension but also to the dimensions of baptism, the Church and eschatology.

#### 4. Theory and Practice in Local Churches

It is not possible to outline a complete picture of this complex subject. We can only do so by demonstrating in the form of flashes certain observations that come from specific continents or contributions that present local situations.<sup>65</sup>

4.1. *Europe.* We may observe that in *Europe* a great effort has been made from a liturgical point of view but given the realities of health care many believers die in hospitals or institutions (clinics, rest homes, residence of various kinds). For this reason, it is often not easy to bring communion in the form of Viaticum or to celebrate Holy Mass with every dying person. Because of this the practice has emerged of seeing anointing of the sick (which is often called extreme unction) as in reality the last sacrament of the Christian.<sup>66</sup>

The Spanish Bishops in the preface to their Ritual emphasise the net distinction between anointing of the sick and Viaticum, a distinction

that emerges from the doctrine of the Second Vatican Council, given that only Viaticum is the true last sacrament of a Christian.<sup>67</sup>

The Bishops of Croatia, for example, also stress the importance and the significance of the both the profession of faith and Viaticum at the end of a person's life.<sup>68</sup>

4.2. *The United States of America.* When we look at the *United States of America* we can observe that there has been a change in the way in which the sacraments of the Church for the dying in the United States of America have been understood over the last forty years. Previously, the pastoral custom was to wait for what was really the last moment of life before administering anointing of the sick.



This was done so that the person's sins were really forgiven before he or she died. What was important was to be certain that the Christian had received the forgiveness of sins and as a result there was less emphasis on the fact of receiving Viaticum. More recently, the idea that the last sacrament to be received should be Viaticum so that believers can be offered communion in order to help them in the journey towards eternity has gained ground. The reality of reconciliation and the remission of sins was already taken into

consideration within the context of the sacrament for the sick that was offered beforehand. Viaticum is normally administered at the same time as anointing of the sick.

The celebration of Viaticum can be difficult because of the physical conditions of the sick person or because of the hospital situation in which he or she finds herself. Because of the shortage of clergy and the excessive number of requests made to the pastor, Viaticum is celebrated by a deacon or by a lay person who has been trained for, and delegated to, this task. This can be a positive development because these people can offer a form of pastoral care that is more frequent. A difficulty that is still real is connected with how Viaticum is understood. Many people, including

priests, still see the sacrament of the anointing of the sick as more suitable for dying Christians than Viaticum. Greater education is required to create a better understanding of the sacrament of the anointing of the sick and this is already underway. Greater instruction is needed to ensure that ministers understand that it is important for those who are threatened with death to receive the body and blood of Christ.

4.3. *Canada.* Over the last two or three decades in *Canada*



da as well there has been an improvement in the understanding of the role and the importance of Viaticum in pastoral care for the sick and the dying. The sacrament of the anointing of the sick in the minds of many people occupied the position of what was generally called 'extreme unction'. In truth, still today, for many people it is not clear that Viaticum must be offered to the dying as the last sacrament. In order to overcome this misunderstanding, which, indeed, has existed for a very long time, what is needed is a greater catechesis on the role of illness and suffering in the life of Christians and in particular a richer understanding of the meaning of the sacraments in the life of the sick and the dying.

Because of the great distances that separate communities in some parts of Canada and also because of the scarcity of priests in many parts of the country, it is almost normal for priests not to be personally present to assist the sick at the moment of their deaths. Those who assist the sick, deacons or members of the laity involved in pastoral care, are in general well informed about the rules of the Church regarding the celebration of the sacraments but very often these people consider that what they are doing in bringing communion to the dying is only 'bringing communion to the sick' and they do not use the rite for the celebration of Viaticum outside the celebration of Holy Mass.

The Catholic Bishops' Conference of Canada published a Ritual and pastoral documents so as to offer an education and guidelines to those who offer ministry to the sick and the dying. In the introduction to the short book on the celebration of Viaticum one finds written that the celebration of the Eucharist as Viaticum, food for the passing over through death to eternal life, is the specific sacrament for a dying Christian. It is the completion and the crown of the Christian life on this earth and signifies that the Christian is following the Lord into eternal

glory and the banquet of the heavenly kingdom. The education and training of members of the laity about the great gift of the Eucharist, especially as food for the great final journey, and thus as Viaticum, are still today a priority in pastoral care.

4.4. *Colombia and Latin America.* The context in *Latin America* and in particular in *Colombia* is different still. Here the aim is to ensure that the subject of Viaticum is not addressed separately from communion for the sick. A special situation is generated by the presence of many members of the laity in this field because priests cannot always devote a great deal of attention to this area given that they are busy with the ministry of confession. A significant moment is the reading of, and commentary upon, the word of God, which becomes a reason for a great deal of consolation and constitutes help in evangelising pain and suffering. It also fosters solidarity. Some difficulties spring from the evangelical churches and the various sects which operate with great energy, and also from the process of secularisation which, however, has not as yet prevailed in this field of pastoral care given that families themselves attach great importance to, and emphatically request the presence of, the Church during these moments.

4.5. *Ghana (Africa).* The situation in a country such as *Ghana* is different. Here inculturation allows the Catholic to have a better understanding of the celebration of the Eucharist and the mystery that it contains. Here it is believed that the Eucharist continues to be a travelling companion for the whole of the life of all Christians and thus Viaticum is a companion on the road that leads to the other world. In Ashanti culture it is accepted that death is a moment when the dead person begins a journey towards the other world where he or she will have to settle accounts with what he or she has done dur-

ing life. Given this, it is considered a sacred duty to give drinking water to the dying so as to prepare them for the journey ahead. With this approach, the idea and the teaching of the Church on Viaticum as food for the journey coincides with the beliefs of the faithful. The implication involved well emphasises the eschatological effect of the Eucharist by making its real meaning, and its meaning as a banquet for pilgrims (a messianic people moving forward), both understood.

For the Second Vatican Council there is hope in a future of glory in Holy Communion, given that Christ is seated at the right hand of the Father and continues to act amongst men by nourishing them with his body to make them share in his glorious life (cf. *LG*, 48). The Christian community thus has the responsibility of praying for and with the dying, and through this sacramental ministry the community helps Christians to embrace death in the fullness of life. This explains the reasons why when Catholic believers are threatened by death or seriously ill their family relatives urgently look for a priest to administer this sacrament. Given that the Lord is present in the Eucharist, there is the hope that one will share in his eternal glory and if through the healing power of the Eucharist the sick person regains his health then the joy of the whole family is even greater.

The Christian faithful have experienced the fact that as food for the journey Viaticum offers healing to the person who receives it when threatened by death. There have been some pastoral cases where the Holy Communion in form of Viaticum has been given (by priests specially called for this purpose) to people threatened by death who have then recovered from their illness and are now active in the ministry of the Church. But even if healing does not take place, most of the people who are gravely ill and receive Viaticum then die serenely.

With respect to the rite of

the celebration of this sacrament, in most cases this takes place outside Holy Mass together with the family relatives who are gathered around the sick person: a short rite is performed with elements of penance, the Lord's prayer, followed by Holy Communion and a final blessing.

4.6. *Australia.* In this immense territory dying is a slow process. Very many people live for a long time and gradually grow weak. In a large number of situations people are kept alive and as a result during their last days they can neither speak nor eat nor drink. As a result, the dying often cannot receive Viaticum because they are unable to swallow or because they have been unconscious for a protracted period of time. In homes of the elderly a large number of people suffer from dementia and thus do not appreciate Viaticum. All of these factors in the context of Australia have meant that Viaticum for the dying is rarely celebrated.

A large number of sick people and elderly people have the opportunity to receive Holy Communion every week both in hospitals and in their homes during the weeks, the months and even the years that precede their deaths. Occasionally a dying person is fully conscious and is able to take part in the celebration conscious that death is near. When death takes place he or she can receive Holy Communion as Viaticum but according to the experience of a large number of chaplains this rarely happens. These kinds of patients receive Holy Communion a large number of times during the last days of their lives but Holy Communion is not necessarily administered as Viaticum.

In most of the dioceses of Australia there is a strong tradition whereby members of the laity bring the Holy Communion to the sick and the dying. Although they are well trained for this kind of ministry they are rarely aware that Viaticum should be administered.

In the experience of a significant number of chaplains, the Catholic faithful and the staff of hospitals or hospices are familiar with the new concepts present in the Apostolic Letter of Pope Paul VI and in the Ritual of 1982 on pastoral care for the sick and the dying. They rarely ask for the sacrament of Viaticum but continue to ask 'has the patient received unction?' They see unction as the last sacrament even though the sacrament for the sick is regularly celebrated with the sick and the elderly.

To summarise: we need a catechesis on the administration of Viaticum. To this end,

of his or her baptism (*the baptismal dimension*). As food for the journey, the Eucharistic Viaticum, following the example of Christ (*the Christological dimension*), sustains the dying person in the passing over from this life to the Father (*the paschal dimension*) and provides him or her with the guarantee of resurrection when faced with the extreme loneliness of death (*the eschatological dimension*). Viaticum is thus an act of true faith on the part of the dying and of love of the community that draws near to its loved ones and comforts them at the most difficult moment of their



the Ritual on 'the pastoral care of the sick' does not need to be revised given that little has so far been done to help those who use it make themselves able to offer more effective pastoral care in this area.

## Conclusion

When the situation of illness is especially grave and such as to envisage the death of the sick person, it is an ancient practice of the Church to provide the dying person with the gift of the Eucharist in form of Viaticum. To receive 'Viaticum' is to bear witness is a strong and especially significant way to that faith of which the Christian made himself or herself the heir from the day

existence (*the ecclesiological dimension*).

The liturgy as a source and culmination of the life of the Church already places us in a privileged situation of discovering and living above all in the Sunday Eucharist the eschatological meaning of our being in Christ, in as much it precedes in the 'already' and 'not yet' the goods and the perennial praise of the saints who will be celebrated in the heavenly Jerusalem.

The task of theologians is thus to deepen analysis of the Eucharist as a sacrament of resurrection and pastors have the duty to make people understand the richness and the strength of the body and blood of Christ at the moment of the loneliness and tribulation of

death.<sup>69</sup> We can and we must say forcefully, like the Bishops in the papers on the thought and practice of Viaticum in various nations and continents, that we must evangelise Viaticum. This means first and foremost 'evangelising the meaning of death and its paschal significance. Our culture tends today to ill-perceive the mystery of death, which is seen as a taboo. There is an urgent need for an intense and broad action of evangelisation, not to wave the scarecrow of death but to evangelise it in its authentic realism and in the perspective of Christian hope'.<sup>70</sup>

In definitive terms, we need 'to think about' and 'to experience' the gift of Christ in the Eucharist as Viaticum in a different way, and the dying person cannot be, and must not be, left alone!

Change in contemporary pastoral practice (which often ignores this sacrament) should also be further promoted through a capillary catechesis not only in places of suffering but above all in parishes, dioceses and places of study (seminaries and faculties of theology). For that matter, we should remember that 'in the Eucharist there is a clear and decisive eschatological perspective because the Eucharist is already a participation on the banquet of the future kingdom and the 'pledge' of resurrection. The Eucharistic celebration of the first Christian communities conserved an expectation of the final and complete coming of the Lord in a living and renewed way? correct desire for encounter with Christ is a fundamental feeling in our lives as believers, it allows us to live with serenity our own daily lives in the comforting life of hope and it finds strong nourishment in the Eucharist, the true food of eternal life'.<sup>71</sup>

This last dimension which comes to us from the liturgy and in particular from the Eucharist which constantly reminds us of it in the prayers 'after communion' of Holy Mass should lead us to hope for greater interest and adherence to Viaticum in the con-

text of the moment of our real passing over to the Father, in Christ, with the grace of the Holy Spirit.

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## Notes

<sup>1</sup> Cf. A. CRISCITO, 'Viatico', in *Enciclopedia Cattolica*, XII (Vatican City, 1954), coll. 1553-1555.

<sup>2</sup> Cf. can. 13 of the Council of Nicea [325]; can. 3 of the Council of Orange [441].

<sup>3</sup> This ritual was recently published as: *Rituale Romanum. Editio princeps (1614)*, anastatic editio, introduction and appendix edited by M. SODI AND J. J. FLORES ARCAS, foreword by A.M. TRIACCA, Libreria Editrice Vaticana, Vatican City, 2004 (Monumenta liturgica Concilii Tridentini, 5); for the pastoral care in health of this ritual see E. SAPORI, *La cura pastorale del malato nel Rituale di Paolo V (1614) e in alcuni Ordini religiosi del XVII secolo. Studio storico-liturgico* (CLV-Edizioni Liturgiche, Rome, 2002) (Biblioteca "Ephemerides liturgicae" - "Subsidia", 123; Studi di liturgia n.s., 43).

<sup>4</sup> Cf. *Rituale Romanum*, pp. 52-56 (the pages indicated are those of the anastatic editio and not those of the volume just cited); for a brief comment and history see M. RIGHETTI, *Manuale di storia liturgica*, III, *La Messa. Commento storico-liturgico alla luce del Concilio Vaticano II con un Excursus sulla Messa Ambrosiana di P. Borella* (Ancora, Milan, 1998; 1966), pp. 545-553.

<sup>5</sup> Cf. *Rituale Romanum*, pp. 52-53.

<sup>6</sup> Cf. *Rituale Romanum*, p. 53.

<sup>7</sup> Cf. *Rituale Romanum*, pp. 54-55.

<sup>8</sup> *Accipe frater, vel soror, viaticum corporis Domini nostri Iesu Christi, qui te custodiat ab hoste maligno et perducat in vitam aeternam. Amen.*

<sup>9</sup> Cf. *Rituale Romanum*, pp. 55-56.

<sup>10</sup> Cf. *Jn* 6: 54; St. Thomas Aquinas, *Summa Theologiae*, 3<sup>a</sup>, q. 80, a. 11.

<sup>11</sup> Cf. can. 864 1 of the *Codex Iuris Canonici* of 1917 (hereafter *CJC*).

<sup>12</sup> *CJC*, can. 865; the prescription as such is taken up to the full in *Rituale Romanum* (edition of 1925), tit. IV, chap. 4, n. 2; tit. V, chap. 4, n. 10.

<sup>13</sup> Cf. *CJC*, cann. 2270-2271.

<sup>14</sup> Cf. *CJC*, can. 861.

<sup>15</sup> Cf. *CJC*, can. 854 2.

<sup>16</sup> Cf. *CJC*, cann. 848-850; cf. also *CJC* can. 397 3 and can. 514.

<sup>17</sup> Cf. however *CJC*, can. 864 2.

<sup>18</sup> For the complete proceedings of the study meeting, with the title 'La liturgie des malades', see n. 15 (1948) of the review *La Maison-Dieu*.

<sup>19</sup> Cf. n. 15 of *MD*, 'Le viatique', pp. 130-142.

<sup>20</sup> Cf. B. BOTTE, *L'onction des malades*, pp. 91-107.

<sup>21</sup> Cf. L. BEAUDUIN, 'Le viatique', in *La Maison-Dieu*, n. 15 (1948), pp. 117-129; A.G. MARTIMORT, 'L' "Ordo commendationis animae"', *Ibidem*, pp. 143-160.

<sup>22</sup> *Acta et documenta Concilio Oecumenico Vaticano II apparando, Series I (Antepreparatoria)*, App. vol. II..., cura et studio SECRETARIAE PONTIFICIAE COMMISSIONIS CENTRALIS PRAEPARATORIAE CONCILII VATICANI II (Typis polyglottis Vaticanis, Vatican City, 1961), pp. 70-71.

<sup>23</sup> *Acta et documenta, Series I (Antepreparatoria)*, App. vol. II, pp. 95-101.

<sup>24</sup> Cf. *Acta et documenta, Series I (Antepreparatoria)*, App. vol. II, p. 129.

<sup>25</sup> Cf. V. MALANCZUK, in *Acta synodalia sacrosancti concilii oecumenici*

*Vaticani II*, vol. I, pars 2, p. 372. The proceedings of the Second Vatican Council are hereafter abbreviated with the acronym ASCOV, followed by the volume, part and page(s).

<sup>26</sup> The Latin text in the proceedings of the Second Vatican Council, read: n. 58 (*Collatio sacramenti*). *Unctio infirmorum regulariter locum habeat post confessionem et ante receptionem Eucharistiae*: ASCOV, I/1, p. 285. We note here the use of the term 'Eucharist' and not 'Viaticum'.

<sup>27</sup> (Amendment n. 5). n. 74. *Praeter ritus seiunctos unctionis infirmorum et Viaticum, conficiatur ordo continuus secundum quem unctio aegroti conferatur post confessionem et ante receptionem Viatici*: ASCOV, II/2, pp. 553-554. Here the sacrament of the Eucharist as Viaticum is specified.

<sup>28</sup> Cf. A. FERNANDEZ, in ASCOV, II/2, p. 424.

<sup>29</sup> Cf. I. DRZAZGA, in ASCOV, II/2, p. 624.

<sup>30</sup> Cf. R.I. PIÉARD, in ASCOV, II/2, p. 841.

<sup>31</sup> Cf. P. A. YAMAGUCHI, in ASCOV, II/2, p. 895; I. ZIAD, in ASCOV, II/2, p. 901.

<sup>32</sup> Cf. D. NEŽIĆ, in ASCOV, II/4, pp. 280-281.

<sup>33</sup> Cf. J.M. GUZMAN GONZALEZ, *El di- aconado en 'Lumen Gentium'* 29 (Pontificium Athenaeum Sanctae Crucis, Romae, 1996).

<sup>34</sup> *LG*, 29. Cf. *Constitutionis dogmaticae Lumen Gentium synopsis historica*, edited by G. ALBERIGO AND F. MAGISTRETTI (Istituto per le Scienze Religiose, Bologna 1975), p. 160; reference to the schemata nn. 2ter, 3, 3bis, *LG*.

<sup>35</sup> *LG*, 29.

<sup>36</sup> *GS*, 38.

<sup>37</sup> 'Elenco degli "schemata" del "Con-silium" e della Congregazione per il culto divino (Marzo 1964-1975)', edited by P. MARINI, in *Notitiae* vol. 18 (1982), pp. 455-456.

<sup>38</sup> Cf. A. BUGNINI, *La riforma liturgica (1948-1975)* (Rome, CLV Edizioni liturgiche, 1997); *BEL*, 'Subsidia', 30) p. 663.

<sup>39</sup> The texts are in Latin: *Titulus: Relatio de unctione infirmorum, de Viatico et exsequiis. Index: Introductio* (p. 1); *I. Titulus de ritibus infirmorum* (p. 2); *II. Titulus de Viatico et commendatione animae* (p. 5); *III. Titulus de exsequiis*, (pp. 7-10): cf. 'Elenco degli "schemata"', p. 758.

<sup>40</sup> 'Elenco degli "schemata"', p. 759.

<sup>41</sup> Cf. 'Elenco degli "schemata"', p. 759, where the index is presented in the following order: *Praenotanda*, p. 2; *I. De visitatione et communione infirmorum*, p. 10; *II. Ritus unctionis infirmi qui incipit esse in periculo mortis*, p. 13; *III. De Viatico*, p. 19; *IV. Ordo praebendi sacramenta infirmo qui est in proximo mortis periculo*, p. 23; *V. Textus diversi in ritibus pro infirmis adhibendi...*, pp. 28-40.

<sup>42</sup> 'Elenco degli "schemata"', p. 760.

<sup>43</sup> 'Elenco degli "schemata"', p. 760.

<sup>44</sup> 'Elenco degli "schemata"', p. 761.

<sup>45</sup> A. BUGNINI, *La riforma liturgica (1948-1975)*, p. 670.

<sup>46</sup> Cf. 'Elenco degli "schemata"', p. 761: *Titulus: Ordo unctionis infirmorum eorumque pastoralis curae. INDEX: Decretum sacrae Congregationis pro Cultu divino*, p. 5; *Constitutio apostolica Pauli VI de sacramento unctionis infirmorum*, p. 7; *Praenotanda* p. 13; *Cap. I. De visitatione et communione infirmorum* p. 23; *Cap. II. De unctione infirmi* p. 30; *Cap. III. De Viatico*, p. 40; *Cap. IV. Ordo praebendi sacramenta infirmo qui est in proximo mortis periculo*, p. 49; *Cap. V. De confirmatione in periculo mortis*,

p. 57; *Cap. VI. Ordo De commendatione morientium*, p. 58; *Chap. VII. Textus diversi in ritibus pro infirmis adhibendi*, pp. 64-80.

<sup>47</sup> *OUI*, n. 26.

<sup>48</sup> *OUI*, n. 26.

<sup>49</sup> *OUI*, n. 27.

<sup>50</sup> *OUI*, n. 28.

<sup>51</sup> Cf. *OUI*, n. 29.

<sup>52</sup> Cf. *OUI*, nn. 30-31.

<sup>53</sup> *OUI*, n. 35.

<sup>54</sup> *OUI*, n. 37.

<sup>55</sup> The functions entrusted to the parish priest in a special way are 3) to administer Viaticum and the anointing of the sick, the provision of 1003, ? 2 and 3 still applying, and to impart the apostolic blessing...: *CDC*, 530.

<sup>7</sup> After providing a definition of a chaplain in can. 564 (the chaplain is the priest to whom is entrusted pastoral care on a stable basis, at least in part, of a community or a specific group of faithful, and which must be exercised following universal and particular law), can 566 1 establishes: 'The chaplain must be provided with all the faculties required by ordered pastoral care?nd because of his office he has the faculty?o administer to them Viaticum and anointing of the sick, as well as to confer the sacrament of confirmation to those amongst them who are threatened by death'.

<sup>57</sup> *CDC*, can. 911 1.

<sup>58</sup> *CDC*, can. 911 2.

<sup>59</sup> Cf. n. 39 of the Instruction *Eucharisticum mysterium* (25.05.1967) of the Sacred Congregation for Rites, which presented such contents beforehand in *Enchiridion Vaticanum*, 2 (1963-67), EDB, Bologna 1989<sup>12</sup>, n. 1339.

<sup>60</sup> *CCC*, 1392.

<sup>61</sup> *CCC*, 1517.

<sup>62</sup> 'the Church offers those who are about to leave this life the Eucharist as Viaticum... It is the seed of eternal life and the power of resurrection... The Sacrament of Christ once dead and now risen, the Eucharist is here the sacrament of passing over from death to life, from this world to the Father': *CCC*, 1524.

<sup>63</sup> 'Just as the sacraments of Baptism, Confirmation and the Eucharist form a unity called "the sacraments of Christian initiation", so too it can be said that Penance, the Anointing of the Sick and the Eucharist as viaticum constitute at the end of Christian life "the sacraments that prepare for our heavenly homeland" or the sacraments that complete the earthly pilgrimage': *CCC*, 1525.

<sup>64</sup> Cf. L. BRANDOLINI, *Celebrare "con" e "per" i malati. Sussidio pastorale per la catechesi e la celebrazione dei sacramenti nelle istituzioni sanitarie* (Rome, 1993); R. DALLA MUTTA, 'Il Viatico ai morenti: panoramica storica', in *Rivista di Pastorale Liturgica*, 190 (1995), 23-30; G. DAVANZO, 'Il Viatico: suggerimenti pastorali', in *Rivista di Pastorale Liturgica*, 190 (1995), 40-45; R. FALSINI, 'Il senso del Viatico ieri e oggi', in *Il sacramento dei malati* (Leumann, 1975), pp. 191-208; A. NOCENT, 'Il mistero eucaristico nel mistero del tempo', in *Rivista Liturgica*, 61 (1974), 562-578; PH. ROUILLARD, 'La liturgia della morte come rito di passaggio, in *Concilium*, 14/2 (1978), 303316.

<sup>65</sup> As regards some situations I here take advantage of some of the papers sent to the Pontifical Council by some bishops responsible for pastoral care in health: Msgr. J.L. CHARRON, C.P.P.S., Bishop of Moines, Iowa (United States of America); Msgr. J.M. WINGLE, Bishop of Saint Catharines (Canada); Msgr. J. E. JIMÉNEZ CARVAJAL, Auxiliary of Cartagena-Colombia (LATIN America Latina and Colombia); Msgr. T. KWAKU

MENSAH, Bishop of Obusai (Ghana), Msgr. P. J. CONNORS, Bishop of Ballarat (AUSTRALIA).

<sup>66</sup> 'Un hereux effort a donc été rélé, au plan liturgique, pour rendre l'ultime communion sa place et sa fonction de dernier sacrement, faisant participer le mourant la mort et la réurrection du Christ. Dans la pratique, il faut reconnaître qu'en de nombreux pays peu de chrétiens reçoivent le viatique avant de mourir, et les pasteurs ne semblent pas s'en émouvoir. Dans les pays riches, o 75% des habitants meurent l'hôpital ou en clinique, il n'est pas toujours facile de porter la communion au mourant, et encore moins de célébrer la messe près de lui. En maintes régions, l'extrême-onction est encore considérée comme l'ultime sacrement': PH. ROUILLARD, 'Viatique', in G. MATHON AND G.H. BAUDRY (eds.), *Catholicisme. Hier, aujourd'hui, demain*, XV (Letouzey et An, Paris, 2000), col. 982.

<sup>67</sup> 'La Unción de los enfermos es el sacramento específico de la enfermedad y no de la muerte. De acuerdo con la doctrina del Concilio Vaticano II, el Rito de la Unción está concebido y dispuesto para tal situación, como lo demuestra el cambio de la fórmula sacramental y el resto de las oraciones, orientadas, conforme a la más genuina Tradición, hacia la salud y restablecimiento del enfermo.

La neta distinción establecida con el Viático, como sacramento del tránsito de esta vida, ayuda a situar la santa Unción en su justo momento": *Ritual de la Unción y de la Pastoral de Enfermos* (Barcelona 1987\*), n. 65.

<sup>68</sup> 'With the same care and concern we must also refer to the conscience of the faithful the duty to renew their baptismal faith at the moment of passing over from this life, and to restore themselves with Viaticum of the body and blood of Christ as a pledge of resurrection, in line with the words of Jesus: 'the man who eats my flesh and drinks my blood enjoys eternal life, and I will raise him up on the last day' (Jn 6:54). Thus Viaticum is the sacrament of the dying and all the baptised who can draw near to communion are required to receive it. This is because at the moment of death, whenever that moment arrives, the commandment to receive Holy Communion applies to all the faithful': Bishops of the Croatia, 'Chiamati alla santità', in *Il Regno*.

<sup>69</sup> "Il appartient donc aux théologiens d'approfondir la réflexion sur l'eucharistie comme sacrement de résurrection, et aux pasteurs et à leurs collaborateurs laïcs de faire comprendre aux malades en danger de mort la richesse que représente pour eux, dans leur solitude et leur angoisse, la com-

munion au corps (et au sang) du Seigneur ressuscité": PH. ROUILLARD, 'Viatique', coll. 982-983.

<sup>70</sup> C. ROCCHETTA, 'Viatico', in *Dizionario di teologia pastorale sanitaria*, edited by G. CIN ET AL., Camiliane, Turin, 1977, p. 1365. The same author then continues: 'In fact there is an absence of a real awareness of the positive significance of Viaticum as the paschal victory of Christ over death and as a spiritual accompaniment on the voyage beyond this life. There is often a tendency to postpone the presence of the priest at the bedside of the dying person until the threshold of that person's consciousness has been crossed, almost as if Viaticum was a sign that arouses fear or even an action of ill presage. The Code of Canon Law wisely urges that 'Holy Viaticum is not deferred for too long; those who care for souls should diligently keep watch to ensure that the sick receive its comfort when they have full possession of their faculties' (can 922). This indication amounts to a dictate, which should be matched by an effective evangelisation, proposed from early youth and in every sphere of the pastoral action of the Church': Ibidem.

<sup>71</sup> G. GESTORI, 'Il giubileo: un invito a festa di nozze (7 settembre 1999)', in *Lettere Pastorali 1998-1999* (Magistero episcopale, Verona, 2001), col. 90.



In illness or when death threatens man becomes aware of the precarious character of his being and the illusory nature of most of the values that guide ordinary existence. At the same time he presents himself to others as a worrying symbol of the inescapable ending of life and the imminent threat of death.

Amongst the acts that are a part of pastoral care for the sick, there exists one that is called communion in the form of Viaticum. At first sight this seems a communion like all the others. But a careful examination enables us to see that this religious act has a much more profound and specific meaning. It is this meaning to which I will dedicate my paper. This analysis will thus confine itself fundamentally to the level of an attempt at a theology of Viaticum, without seeking to solve the great problems that pastoral care in relation to Viaticum presently raises: how to spread awareness within the people of God about the importance of this sacrament which, indeed, is often not requested? How is it to be celebrated in a way that involves family relatives and the Church community?

I will confine myself here simply to stressing that such problems require a continuous catechesis on what dying in a Christian way means, that is to say that one is dealing here with integrating into our ordinary catechesis (at times of homilies and preparation for the sacraments) the subject of death and its Christian meaning. In this paper, however, an attempt will also be made to emphasise certain central features of the theology of Viaticum.

In order to delineate certain features of such a theology one needs to place Viaticum within the context of communion between all the suffering members of the (celestial and earthly) Church, of penance and of the anointing of the sick, seen

as the three fundamental aspects of pastoral care for the sick.

From a historical point of view we should not lose sight of the fact that the three sacraments of the Christian exodus or the last pilgrimage – reconciliation, anointing of the sick and the Eucharist – perform the role of ‘Viaticum’ in the broad sense of the term, namely provision for the last journey. At the decisive moment the sick person is waiting for death but also for that help that comes from on high. While the definitive moment in his life is produced – that which is irremediable for him and his loved ones – in a tension of hope he can receive Viaticum, the principle provision for the journey of life towards death and thus towards eternal life (Viaticum = food for the journey). The dying person can call for unfailing help using the words of Revelation (3:20): ‘Behold, I stand at the door and knock; if anyone hears my voice and opens the door, I will come in to him and eat with him, and he with me’. The journey takes place with Christ. This liturgical act expresses the tenderness of, the trust in and the hope of salvation.

Greater knowledge about Viaticum requires certain clarifications. First of all it is necessary to distinguish between communion brought to sick people and communion received as Viaticum. This distinction allows us to see how the Church has taken care of her (gravely) sick members during the various ages of the past and in various cultural contexts. Then the relationship between Viaticum, Penance and the Anointing of the Sick should also be clarified.

In the early centuries Viaticum was very distinct from communion brought to the sick because it was limited to situations involving imminent death, even though from the point of view of ritual there was no distinction during antiq-

uity between Viaticum and communion for the sick. It was administered in the two forms, that is to say by dipping the Eucharistic bread in the consecrated wine. The Eucharist was celebrated at home. During the second millennium, given that anointing had become the sacrament of the dying, communion for the sick was hardly distinguished from Viaticum at a practical level. Vatican Council II confirmed a movement that involved a return to the original sources, a movement that still today encounters difficulty in becoming manifest everywhere. In the first part of this paper I will try to outline this historical movement and in the second there will be an attempt at a theology of Viaticum.

## 1. The Context of the Origins of Viaticum and Later Developments

Here what interests us is not historical research, which can be read in any textbook on liturgical history, but some elements connected with the use of Viaticum in terms of its theological motivations and meaning. The use of Viaticum is closely bound up with communion for the sick and is therefore characterised as communion for those people who are threatened by death. It is by now well known that at the outset it was a common practice for the faithful after the celebration on Sunday to take communion to those who had not been present and above all to the sick. It is within this context that Viaticum is to be placed, as the Instruction *Quam plurimum* (1 October 1949) of the then Sacred Congregation of the Sacraments well emphasised: ‘the primary and original purpose of the keeping of the host outside Mass is the administration of Viaticum’.<sup>1</sup> It is different from ordinary communion because of the simple fact that Viaticum is received only



when there is a danger of imminent death. Danger of death is not necessarily connected with illness. It can exist when a person is in a violent context or when a person has to engage in a very dangerous journey or form of work, or when a person is faced by imminent execution (for example a person sentenced to death). In general it is given in the two forms.

According to its etymology, Viaticum means 'provision for a journey' or 'provision in the mouth' for the journey (*ephodion*). In a pagan context this



meant both food and money (*obulus*) to pay the ferryman and to cross the Styx. An *obulus* was placed in the mouth of the dead person.<sup>2</sup> But from the outset the Christian meaning diverged from pagan customs. Christian Viaticum is for the living and not for the dead. Various synods and councils would prohibit the practice of placing the consecrated host in the mouth of a dead person. The reason for this prohibition was purely religious – a Christian should not have to pay for his journey to the place of eternal rest. He receives it as a gift without there being merit. The Eucharist is not a price that has to be paid. It is intended to create unity with the Lord. As Viaticum, it is a pledge of eternal life. Other meanings are added to this one. As death is consid-

ered a journey (*migratio ad Dominum*), this celestial food helps the Christian in his journey: Viaticum is the bread of the journey. In this sense should certain Biblical passages be interpreted.

During his long journey towards Mount Oreb the Prophet Elia was fed by the angels (1 Kings 19:5-8). The passage from John 6:54 has a special significance: 'he who eats my flesh and drinks my blood will have eternal life, and I will raise him up at the last day'. One could also quote Revelation 3:20. The ancient Church emphasised this dimension of Viaticum as an aid, the necessary support for the faithful who are about to begin the journey towards the celestial homeland.

The ecumenical council of Nicea (325), in canon 13, emphasised this need for Viaticum in the journey from this life to eternity. Indeed, to solve the question of Viaticum in relation to an apostate (the purists denied Viaticum to apostates who died before having finished their period of penance),<sup>3</sup> the Council stressed the fundamental principle by which Viaticum is a right that cannot be denied to the dying: 'as regards those who are at the end of their lives, the ancient canonical discipline will be observed by which if someone is about to die no faithful who requests it can be denied it'.<sup>4</sup> At the hour of death the Church must give way to God because the hour of death is the hour of the Lord. The Eucharist is seen in its sanctifying aspect. It completes the reconciliation that is still not fully complete on the journey of penance here on earth. Here we again find the nexus between Viaticum and penance.

It is worthwhile recalling a concept that is to be found frequently in the ancient Church and which was especially emphasised by St. John of Chrysostom and St. Augustine, namely that one could cease to be in grace with God because of sins for which the Church did not excommunicate, just as one could be in grace with God while being excommunicated by the Church. With this they

did not remove the mediating function of the Church but emphasised the awareness of the Church that she is at the service of the Kingdom of the Father in the humility of never wanting to take the place of the Father, who knows the hearts of men more deeply. In a certain sense this was an affirmation of the absolute humility of God. Church practice envisaged the reconciliation of penitents threatened by death through the means of the Eucharist and it was held that 'Viaticum' included penance and the Eucharist. Indeed, the canon refers to '*oblationis particeps*'. However, the term 'Viaticum' would come to refer to the Eucharist alone. In addition to penance in the ancient Church Viaticum had a close connection with the anointing of the sick.

During the Carolingian reform (VIII-IX centuries), at least three factors can be detected that played a role in the process at the end of which Viaticum would become the last solemn communion and anointing the last sacrament of the dying. First of all one should note an important decrease in communion. From the seventh to the eighteenth centuries most Christians took communion only three times a year. Another factor was the concentration of all pastoral care in the person of the priest. The role of the faithful, in this sense, was constantly in diminution. A third factor is that during the time of the Charles the Great three sacraments were concentrated together at the end of a person's life. For centuries the Christians postponed the sacrament of reconciliation to the end of life. In this period the anointing of the sick became extreme unction given to the dying, amongst other things because they could not be anointed without having confessed. The obligation to receive Viaticum was conserved but it was received before anointing. The order of sacraments was thus laid down in the following way: first reconciliation, then communion and finally anointing. The priest gave communion-Viaticum at the home of

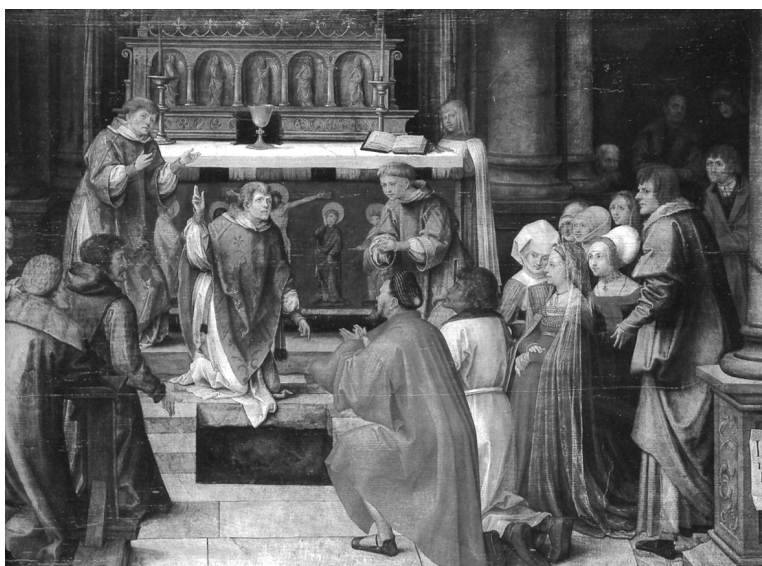
the sick person. During the twelfth century the celebration of Viaticum acquired a more solemn and public character. This was a period that witnessed the flourishing of the cult of the Eucharist. The receiving of Viaticum lost its original character of being the final preparation for death and became a kind of second or last solemn communion. Its meaning of being a 'provision for a journey' or a 'pledge' of resurrection lost ground.

The change in recent times had its origins as well in a speech made by Dom Lambert Beauduin<sup>5</sup> at the liturgical session of Vanves. He asked for a return to the original sources, that is to say a restoration of the original order of the sacraments of the sick and the dying, namely reconciliation, anointing of the sick, and Viaticum for the dying. The essential condition for Viaticum was the danger of dying: *'beati mortui qui in Domino moriuntur'*. The anointing of the sick, instead, was the sacrament of the sick: *'et oratio fidei salvabit infirmum et alleviabit eum Dominus'* (Jas 5:15). A dangerous journey, a death sentence etc, were situations in which Viaticum could be given. The communal dimension of Viaticum came to be increasingly emphasised.

In 1963 the Constitution on the Liturgy of the Second Vatican Council re-established the original order: anointing for the sick and Viaticum for the dying (nn 73-74). The Institution *'De cultu mysterii eucaristici'* (1967)<sup>6</sup> emphasised the importance of Viaticum and suggested the celebration of the Eucharist at the bedside of the sick person. According to this Instruction, celebration at the home of a sick person facilitated communion in the two forms both for the sick person and for the family relatives, and thus also the Church dimension of the celebration was emphasised: a Christian dies in church.<sup>7</sup> The Ritual *Ordo unctionis infirmorum eorumque pastoralis curae* (1972)<sup>8</sup> reflects the fundamental choice of the Second Vatican Council in the division and arrangement of its chapters: visit to the sick,

communion, reconciliation, anointing and, lastly, Viaticum and prayer for the sick. The only exception here is the stress on the Eucharist in Viaticum: if death is imminent, Viaticum is to come before anointing (*Praenotanda*, 30). The Ritual prefers to give Viaticum during a Eucharistic celebration for the same reasons: communion in the two forms and the communal character of the celebration.

If this is possible before communion, the dying person should renew his profession of faith (28). In this way is established the direct connection with the first journey, that of baptism. The faithful professes the realities on which he has based his life. One is dealing here with a profession of faith, perhaps the most solemn of the whole life of the believer.



However, two points of difference between the ancient order and the ritual of Vatican Council II can be observed. First of all, Viaticum is dealt with within the section of the sacrament of the sick and not in the ritual for the dead. Thus the *'Praenotanda'* refer a great deal to the sick person who receives Viaticum. Number 27 of the *'Praenotanda'* calls on ministers to be careful about ensuring that Viaticum is not always postponed – it is better for the sick person to receive the comfort of this sacrament when he still has full use of his faculties. Since Vatican Council II the subject of Viaticum has been a

sick person threatened by imminent death but who is still conscious. The last sacrament is followed by the prayers for the commendation of the dying person.

Amongst the documents that have contributed to the renewal of the liturgy of the sick and the dying, mention should also be made to the Instruction *'Immensae Caritatis'* (1973). This document also deals with the ministry conferred on members of the laity to bring communion to the absent, whether sick or in good health.<sup>9</sup> It reduced the period of fasting for the sick, the elderly and the people near to the sick people to fifteen minutes. In 1973 the *'Ritual of the Eucharist outside Holy Mass'*<sup>10</sup> was published. In the second chapter on communion for the sick it is stated that communion should preferably

take place in the company of the family and that Sunday is the best day for this. The faithful who bring the communion should come to Sunday Mass. People draw near to the altar after the *'Our Father'*. After receiving communion they are sent to the sick. At the home of the sick people they read some verses from the Gospel and the sick person then receives communion. This communal dimension is still very important for communion in the form of Viaticum, as we will see when we address the theology of Viaticum. Here an attempt will be made to bring out how canon law and the *Catechism of the*

*Catholic Church* see Viaticum.

The *CIC* (1983) repeats the fact that Viaticum is an obligation for every Christian (can. 921) and invites priests to fulfil their responsibilities (can. 530, § 3; 911, 922).<sup>11</sup> The *Catechism of the Catholic Church* (1992) summarises the doctrine very well: communion 'received at this moment of 'passing over' to the Father, has a particular significance and importance. It is the seed of eternal life and the power of resurrection' (CCC, n. 1524). And here we come to the presentation of the theological meaning of Viaticum.

## 2. Towards a Theology of Viaticum

In essential terms, the meaning of communion for the sick and Viaticum is not different from the profound meaning of every other form of communion. But it is a special form of communion. This Eucharist reaches strong human situations in order to go beyond them and to declare the essential – to proclaim a future with a certain fullness in a way that respects the pathway of the sick person and in a way that conforms to his freedom. There is a celebration of the person's self-delivery into the hands of the Lord and the person's trust in him. Where the body suffers, Christ speaks of his presence and his promise. It should be seen as a form of communion that brings us to dying in a Christian way, as help so that people may die as Christians, accept death and rise above it. It is a provision for a journey that helps the Christian to pass, with Christ, from an earthly condition to the condition of true life, of fullness of life. It helps the person not only to die but also to defeat death, to transfigure this tragic moment of human existence, to overcome and pass over the period of death by bestowing the bread of life on the believer. N. 26 of the text is explicit: 'in the passage from this life the faithful, strengthened by Viaticum of the body and blood of Christ, receives the pledge of resurrection, in line with the

words of the Lord: who eats of my flesh...has eternal life, and I will raise him up on the last day' (Jn 6:54).

The sacrament that is celebrated is often accompanied by certain effects of grace: the profound serenity of the suffering man, an interior peace that gives the certainty of being loved unconditionally, and a new relationship with his loved ones because of his peace which is rediscovered through the body of Christ and also through the body of the Church. Viaticum generates an act of faith. Indeed, 'communion received in the form of Viaticum must be held to be a special sign of participation in the paschal mystery celebrated in the sacrifice of the Mass: to the mystery, that is to say, of the death of the Lord and his journey to the Father. In it the faithful, who is about to leave this life strengthened by Christ, receives the pledge of resurrection'.<sup>12</sup> Every Eucharist achieves in us a certain part of prefigured death and is a pledge of eternity.

Viaticum is not only food for the journey and a defence against its dangers. It expresses and actuates life in terms of the sacrifice of Christ. Death takes on the character of an offering, of a final self-giving to God in an inner and generous impetus linked to that of Christ. Indeed it is taken on by Christ and brings us to the passing over, the Easter of Christ. With Viaticum one takes part in the paschal mystery of Christ and one is united to his sacrificed and glorious body, to his blood that is shed and full of life, to his passing over from this world to the Father. Where this takes place at every Mass in a symbolic way, here the symbol is about to reach its full and visible reality in the dying believer. Indeed, communion in the form of Viaticum is a special sign of participation in the mystery that is celebrated in the sacrifice of the Mass, the mystery of the death of the Lord and his passing over to the Father.<sup>13</sup> In it takes place the victory of life over death. Four actions of the Eucharistic prayer especially capture our attention because they correspond to the

four verbs of the account of the institution of holy communion and they can help us to draw up a theology of Viaticum: to take ('he took the bread and cup'); to thank; to break; and to give.

The first verb corresponds to the giving of gifts; the second to the Eucharistic prayer in itself; the third to the breaking of the bread; and the fourth to the act of communion. Each person who takes part in the supper of the Lord – whatever his situation or his state of health – can identify with these four moments, which for him are like the script of his existence. Accepting to take in order to offer is nothing else but an invitation to allow oneself to be guided by God, an invitation to not to keep oneself to oneself, to open one's heart to God and to give oneself to Him, with everything that characterises one's own existence. This is an invitation to give oneself up totally to His hands: 'Your will be done'. To thank God means to want to give again to God all the graces that have been received from Him, graces that are transformed through the action of the Spirit in us and through us. This means giving up, and not keeping to oneself, everything that has been received. We receive from another. 'To break' is nothing else but to express one's own wish to share with one's brethren. This is a fundamental approach. Once again: an act of giving and of openness of heart. Lastly: 'to give'. In essential terms it is Jesus himself who gives himself to man. Man receives what Jesus gives him. But this reception cannot remain self-enclosed. The food that is received once again invites us to sharing. A gift leads to a gift. It is this approach that is meant by the phrase '*ite missa est*'. 'Go and share with your brethren, do not stay here, but come back next Sunday to remember again as the Lord told you'.

One is dealing here with four actions of giving and of openness of heart, of four actions in which the whole of the material of our life is placed upon the cross of Christ who then takes it to the Father. For this reason, the Eucharist is the place



whither all the situations of our life are taken, also and above all else at the last moment, situations that are raised up to the Father in an action of thanksgiving with the wish, the desire, to be transformed by Him so as to become not only an offering that is pleasing in His eyes but also a gift, life, for other people. It is the union with Christ that allows us to become a gift and to pass like him and with him beyond death in resurrection.

As a result, Viaticum as a sign of imminent death becomes a sign of eternal life: it represents it, it gives it and it brings it to blossom in fullness through the intervention of Christ. It is certainly the case that this aspect belongs to every Eucharistic communion. However, the context of illness and unexpected encounter with the fragility of life brings out three aspects: the dying person faced with a journey to be engaged in (the anthropological aspect), the hand offered by Christ (the Christological aspect), and the solidarity of the community (the ecclesial aspect). In Viaticum it acquires the fullness of its meaning and its effects. What other communions have effected, this completes. Previous communions find their culmination in Viaticum. Viaticum does not refer us to daily life but to life in the celestial kingdom.

Our faith does not deny the suffering, the pain, of a human being confronted with illness and death. In faith, suffering and pain are, however, experienced in a new light. In this suffering and this pain, faith presents to man the crucified and risen again Lord as the good shepherd who is next to him and reassures him, freeing his heart from worries, from fears and from insecurities, as the host who invites him to courageously make the journey that brings him to the eternal feast. Only in faith, when faced with anxiety about death, about loneliness, does man become able to say with the Psalmist: 'Even though I walk through the valley of the shadow of death, I fear no evil; for thou art with me; thy rod and thy staff comfort me' (Ps 23:4). Thus n.

28 of the 'Praenotanda' (introduction to the Ritual for the Anointing and Pastoral Care of the Sick) clearly declares: 'in the celebration of the Viaticum the faithful should renew the faith of his baptism, in which he received adoption as the son of God and became a co-heir of the promised eternal life'.<sup>14</sup> Faith does not take away worry but creates trust and hope; it thus removes from death its absurdity. In professing his faith the faithful reaffirms for himself and the community the beliefs on which he has based and founded his life. This is the most solemn profession of faith of the believer: 'not even death can separate him from Christ', specifically because Christ defeated death. This is the greatest testament that he leaves to his beloved ones: he transforms his death into a moment of proclaiming Christ, thereby providing proof of his faithfulness until death.

For a Christian death is a second (and final) birth. Viaticum completes the sacramental death of baptism by which the believer dies with Christ, passing with him to life. Just as is the case with the first birth, in the second birth as well a difficult journey has to be made, a journey that is troubling, suffocating, Baptism by immersion symbolises this Easter: descent into the water, being submerged, being breast-fed, living again, being taken out of the waters of death. The celebration of Viaticum evokes baptism through being sprinkled with water and through the renewal of the profession of baptismal faith. The baptised person is ending his Christian initiation; he celebrates his last Easter with Christ.

Viaticum is like a hand that is extended to us from on high in our journey towards the beyond. To receive the body and blood of Christ is to enter into a personal relationship with Christ, it is to take part in the paschal movement of Christ: 'I am the resurrection. Who believes in me, even though he die, yet shall he live' (Jn 11:25). Viaticum is a communion that in a superlative and effective way 'proclaims the Lord's death until he comes' (1

Cor 11:26). Because of its eschatological dimension, the Eucharist is the sacrament of hope, the 'sacrament of the future kingdom to which are invited to take part all those who receive it'. Communion in the form of Viaticum, given at the moment of passing over, transforms worry into an invitation to trust. Communion is a sharing in Christ who transformed the death that he experienced into a freely given life. Death that kills life becomes an invitation to giving.

As a remembrance of the paschal mystery of Christ, the Eucharist actualises the gift that Christ made of his life the very night that he was betrayed. And because this life is given as a sacrifice to destroy death, it is the life of Christ that is given to us for victory over every form of death. The Eucharist makes real the journey from death to life that Christ engaged in so that his life is communicated to all those who receive through Eucharistic ecclesial communion. Thus to the extent to which it is received, the Eucharist becomes essentially the passing over to eternal life for all those who receive in themselves the paschal mystery of Christ, his Eucharistic mystery: 'he who eats of my flesh and drinks of my blood will have eternal life' (Jn 6:54). It is in the Eucharist that the anxiety and pain of the passing over receive their paschal character.

It is certainly the case that even a good Christian will encounter difficulties in reaching this absolute trust if he finds himself abandoned by his brothers and sisters. The body of Christ is indissolubly Eucharistic and ecclesial. If death is the extreme experience of isolation, the Eucharist wants to overcome it by establishing a bond of solidarity through the speaking presence of the Christian community. To the extent to which the sick person is a member of a community that celebrates the feast of the Lord, it is of decisive importance for this community not only that it be experienced at the decisive moment of the passing over to the beyond but also that it expresses itself as a bond that

lasts even beyond death. Hence the importance of this communion at this moment.

Viaticum brings out even more how the Eucharist is communion in pain. In this communion that actualises the Eucharistic body of Christ which becomes the transforming power of the Eucharist and ecclesial unity, as we are reminded by the Letter to the Corinthians: is not the bread we break perhaps communion with the body of Christ? As there is only one bread we all form one body, because we all have part of a single bread? He can thus develop his famous allegory: if one member suffers the whole body suffers. It is in communion with the body of Christ that is to be found the culmination of 'syn-pathos'. It is in this that in fact the suffering of the members of the ecclesial

peace and entrusts him to the community of saints. This earthly Church will be transformed for the dying person into the celestial Jerusalem. In this communion, therefore, is also manifested the mediating character of the Church. The Church that began him with the baptism of his life to Christ is now present while his earthly life comes to a close and entrusts him to the celestial Church that is gathered around Christ so that he may begin eternal life.

Indeed, as a remembrance the Eucharist is the superlative sacrament for intercession because in front of the Lord it actualises the blood shed for the multitude, the blood shed for the sins of the many (Mt 26:28), presenting Christ as our advocate before the Father. Thus when the Church wants to

characteristic problems of the contemporary world and in particular in the West (Europe and America), namely the privatisation of death. Death is hidden because it is seen as a failure of the health system. How can one 'die in Ecclesia' given that death in society is forbidden? In addition, the increasingly technical character of care does not always facilitate the spiritual and sacramental accompanying of sick people. Even today many Christians do not manage to understand that the Eucharist is participation in the Easter of Christ. The theological counterpart of silence about death is the loss of the eschatological dimension of the sacraments and also of the Eucharist.

There are also new possibilities. In many parishes communion for the sick is well followed, above all at liturgically strong moments. But communion in the form of Viaticum is not well rooted everywhere. Some people explain this with reference to the fact that for many people who are about to die Viaticum amounts to a death sentence. What should be done in these situations?

It is true that the profound meaning of Viaticum is 'to entrust one's life to the hands of the Lord'. It is a conscious acceptance of one's own death in professed faith that is of primary importance and not the fact of being merely the last sacrament. In order to create this awareness of having to prepare oneself well for the final encounter with the Lord through Viaticum, one should first of all organise a solid catechesis around Viaticum, both in homilies and in the ordinary and extraordinary catechesis. During preparation for first communion one could already speak to the young people about the last communion, demonstrating the journey to be made between the first and the last communion. During the Easter festivities one could also recall the obligation to have Viaticum as an instrument for the realisation of the paschal event in our lives. Homilies during funerals can also be an occasion to draw the Christian people towards the real meaning of Viaticum.



community is shared. At this painful moment of imminent separation, the Eucharist is the source and the culmination of communion in pain. In it, in fact, are actualised the sufferings of the servant who justified the many by bearing their sins and interceding for the transgressors' (Is 53:11-12). The presence of the family relatives and the local community, which takes part in both the Holy Mass and communion with the dying person, represents the pilgrim Church that is helping him with prayer, receives his last act of faith, takes leave of him with the kiss of

intercede for the forgiveness of the sins of one of her members or for his healing, there is no better way than the Eucharist. In it is actualised the certainty of the Church that her spouse is always present where two or three are gathered in his name and pray for other people.

### 3. Faced with Contemporary Challenges, a New Hermeneutics of Christian Eschatology

Communion for the sick and communion in the form of Viaticum come up against certain

Such a sensitisation requires a sound stress on the communal dimension of Viaticum and the bringing out of its paschal dimension. The celebration of Viaticum can become a moment for the gathering together of all the loved ones to say 'we will meet again in the home of the Father', that is to say a farewell party and thus also a moment of reconciliation, of conversion and of peace within the community. Viaticum thus achieves its deepest meaning of uniting the life of the dying person to Christ and the whole of the body of the living Christ in earth and in heaven. The celebration of Viaticum can thus become a place of evangelisation, of proclaiming and of witness of Christian love and faith in eternal life. One is dealing here in essential terms with creating an eschatology, as a proclaiming of the fullness of life in God, the red line that passes through the whole of apostleship and catechesis, of living in the belief in what is expressed in one of the prayers after communion in the form of Viaticum: 'Lord God, while death surrounds us and threatens from every part, we receive the body and the blood of Your son as a promise that is already be-

ginning to be fulfilled. We pray that this communion makes us live from now Your love whose power one day will free us from the tomb. Hear us through Jesus Christ our Lord, who lives for ever and ever'.

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## Notes

<sup>1</sup> CONGREGATION OF THE SACRAMENTS, *Istr. Quam plurimum*, 1 oCt. 1949, AAS 41, 1949, 509-510; cf. COUNCIL OF TRENT, sess. XIII, 11. oCt. 1949, Decree on the Eucharist, chap. 6; cf. PIUS X, Decree *Sacra Tridentina Synodus*, 20 Dec. 1905 (DS 3375). Cf. SACRA CONGREGATIO RITUUM, *Instructio Eucharisticum mysterium de cultu mysterii eucharistici*, 25 maii 1967' in AAS 59, 1967, 539-573. Italian text in EV, 2, *Documenti ufficiali della Santa Sede 1963-1967* (EDB, Bologna 1979<sup>11</sup>), nn. 1293-1367, n. 1349. Cf. also THOMAS D' AQUINAS, S. Th. III<sup>a</sup>, q. 83, a: 5.

<sup>2</sup> This practice also infiltrated the Church. The Council of Ippon (393), in its eighth canon, formally prohibited the custom of burying the dead with the Eucharistic host.

<sup>3</sup> Various Councils, such as the Council of Arles (314), of Ancira-Ankara (312) and above all of Elvira (311) in Andalusia, were very severe towards apostates and went so far as to deny them Viaticum.

<sup>4</sup> It would be interesting to dwell on the way in which the Fathers in their

homilies laid emphasis on the meaning of, and need for, Viaticum. One need only think of the fact that St. Basil, on the basis of this need for Viaticum, went so far as to call the 'Our Father' the great 'ephodi-on'.

<sup>5</sup> L. BEAUDUIN, 'Le viatique' in *LMD*, 15, 1948, pp. 117-142.

<sup>6</sup> SACRA CONGREGATIO RITUUM, 'Instructio Eucharisticum mysterium de cultu mysterii eucharistici', 25 maii 1967' in AAS, 59, 1967, 539-573, Italian text in EV, 2, *Documenti ufficiali della Santa Sede 1963-1967* (EDB, Bologna 1979<sup>11</sup>), nn. 1293-1367.

<sup>7</sup> 'Eucharisticum Mysterium', 32, 33, 6 and 39.

<sup>8</sup> SACRA CONGREGATIO PRO CULTO DIVINO, 'Decretum Infirmis cum quo Ordo unctionis infirmorum eorumque pastoralis curae editur 7 decembris 1972', in AAS, 65, 1973, 275-276 and Praenotanda: in EV, 3, in *Documenti ufficiali della Santa Sede 1971-1973* (EDB, Bologna, 1978), nn. 1858 - 1901.

<sup>9</sup> SACRA CONGREGATIO DE DISCIPLINA SACRAMENTORUM, 'Immensae caritatis de comunione sacramentali quibusdam in adjunctis faciliore rendita, 29 januarii 1973', in AAS, 65, 1973, pp. 264-271, Italian text in EV 4, *Documenti ufficiali della Santa Sede 1971-1973* (EDB, Bologna, 1978), nn. 1924-1944.

<sup>10</sup> SACRA CONGREGATIO PRO CULTO DIVINO, *De sacra comunione et de cultu mysterii eucharistici extra Missam* (Typis Poliglottis Vaticanis, Vatican City, 1973).

<sup>11</sup> WILLIAM H. WOESTMAN, O.M.I., *Sacraments. Initiation, Penance, Anointing of the Sick. Commentary on Canons 840-1007* (Ottawa, 2004<sup>3</sup>).

<sup>12</sup> 'Eucharisticum nysterium', (25 May 1967), n. 39.

<sup>13</sup> 'Eucharisticum nysterium', (25 mag. 1967), nn. 36, 39 and 41.

<sup>14</sup> SACRA CONGREGAZIONE PER IL CULTO DIVINO, *Introduzione al Rituale per il Sacramento dell'Unzione e cura pastorale degli Infermi*





# Pastoral Guidelines to Rediscover and Reassess Viaticum

## Introduction

On drawing near to death Pope John Paul II received Viaticum. With this action not only did he prepare for the great voyage but he also engaged in his last pastoral journey – a lesson for the world.

Holy Viaticum forms a part of the care that the Church demonstrates towards the sick and also forms a part of the rites of transition, the rites of passage from life to death. It is an expression of the love and tenderness of God that always accompany us but especially during the great moments of life. Every journey generates fear, and every passage is a threat. Viaticum infuses trust in God who saves; it is strength for the journey; it is a guarantee of the encounter with God.

After the Second Vatican Council, with the rediscovery of anointing of the sick as a sacrament for the living, Viaticum separate from anointing of the sick was no longer considered a part of pastoral care for the dying. It is necessary to rediscover Holy Viaticum as a sacrament for the last moments of life as nourishment with which to regain one's strength on the journey towards eternity, as a preparation for the definitive encounter with the Lord.

## 1. Holy Viaticum: What is it?

Holy Viaticum is the last sacrament of the Christian. He receives it as spiritual strength for the passage from life to life, from earthly life to eternal life.

– It is the sacrament of the Eucharist, a 'provision for a journey' at the moment of passing over to the Father of the Christian.

– It is the communion of the body and blood of Christ as a

sign of resurrection. This is made clear by the prayer at the end of the rite: 'walk in peace towards your kingdom'.

– It is worthwhile asking what place Viaticum has in pastoral care for the sick? If death is fullness of life, the sacraments nourish overall health and Viaticum gives that health that is needed for the journey until the House of the Lord is reached. In pastoral care in health, at the side of the gravely ill one has the duty to administer Holy Viaticum wherever this is possible. When a sick person cannot receive communion, 'Spiritual Viaticum' is experienced with him, that spiritual communion that is so important in the relationship with Jesus Christ.

The sacrament of reconciliation may, if necessary, precede the administration of Viaticum. This is the moment when one should concede full indulgence in *articulo mortis*, with the remission of all sins. 'Through the holy mysteries of human redemption, may almighty God forgive you all the errors of present and future life, open the doors of heaven to you, and lead you to eternal happiness' (from the 'Ritual of Holy Viaticum').

Viaticum should also be associated with holy anointing and given when death is imminent. The celebration of the Eucharist with the administration of Viaticum, and also Eucharist at the home of the sick person, is a practice to be recommended since the Eucharist is a 'sign of unity, a bond of love, a sacrament of piety, a feast of happy paschal remembrance of the death and resurrection of Christ' (SC, 47).

The priests who are the ministers of the Eucharist (and also the extraordinary ministers of communion) must give Viaticum to those sick people who are drawing near to the hour of their deaths. This cele-

bration is one of the most beautiful moments of pastoral care for the sick, involving the search for spiritual health and so as to live with joy the definitive meeting with God.

## 2. Concrete Situations that Condition the Administration of Viaticum

The contemporary world has involved new elements that have obliged us to rethink Viaticum.



*Some elements for an analysis*

The characteristics of contemporary society accentuate a reductive vision of Viaticum: materialism, lack of faith, indifference to spiritual values, and a loss of religious feeling. People know neither the importance of, nor the need for, Viaticum. People easily ask: 'communion now, why? The sick person has become weak, he no longer knows what he is doing, he has tubes in his body'. On the other hand, the fear of death (the last taboo) and a fear of disturbing the pa-

tient lead to a postponement of the request for any sacrament to the last moment. When a priest is called for, it is usually too late.

The irregular situations of some sick people who ask for religious assistance present certain difficult pastoral problems. They are people who in normal situations could not receive the sacraments. This is the case of divorcees and people who are living in a state of public scandal. How should the Christian community react? Will it be prepared to endorse religious assistance that includes communion in the form of Viaticum?

Viaticum as the last sacrament at times cannot be administered because the sick person is no longer able to receive it, he is unconscious, he is connected to a machine, and he is unable to swallow the host or the precious blood because he is in a clinical situation in which food is immediately rejected. In pastoral practice it is recognised that today almost nobody asks for Viaticum and that there are many people who are not in a condition to receive it.

In the large hospitals or the large cities the difficulties are even greater. Pastoral workers encounter a very great number of problems. Here are some of them:

Anonymity, with its lack of knowledge about the sick person or his spiritual and religious life, does not allow the request for a sacrament such as Viaticum to be assessed given that what is in question is only tradition or the search for a magical rite.

There is an enormous incapacity on the part of pastoral workers to recognise a sufficiently expressed wish on the part of the sick person and to give communion with sufficient dignity, above all when the sick person is only half-conscious and encounters great difficulties in expressing his wishes and perceptions.

The inability to engage in a celebration that the sick person or his family or the health care professionals also participate in greatly limits pastoral action through Viaticum. How can

those present be involved in the celebration if the sick person is 'absent'?

The involvement of the hospital community in the supremacy of the technical, where only such supremacy is considered important, and the indifference of those who are near when a sick person is very ill, condemn the patient to the most violent forms of loneliness, and for this reason it is difficult to discern whether Viaticum should be given or not.

Here one should consider the non-viability of administering Viaticum to the victim of a road accident.

*In Christian communities and above all in parishes on the outskirts of cities and in the rural world* the rediscovery of Viaticum as a sacrament for the journey is easier. A parish community in a rural context favours the administration of Holy Viaticum, within the Eucharist as well or when the anointing of the sick is administered, at the terminal stage of life. Catechesis during the year, the benefit of a date such as the World Day of the Sick, and the accompanying of a sick person who is known, all allow the celebration of the Eucharist and the administration of Viaticum to the sick.

*The existence of a parish unit dedicated to pastoral care in health* facilitates the preparation of the community that will take part in the celebration. In a joint initiative with social pastoral care the sick person is supported to the point of preparing him for the receiving of Viaticum and accepting with joy his last moments. It is urgently important, therefore, that we go beyond sacramentalism. The sacraments are signs of salvation; they are not salvation.

### **3. In Pastoral Practice at the Side of the Terminally Ill a Series of Attitudes are Required that within the Christian Community Constitute Key Elements for a Solution to the Problem**

It is important to overcome the 'taboo' of death and defeat

false attitudes that are very frequent: flight because of fear, a feeling of failure, 'window' introspection, and 'intimism' that leaves the sick person alone. Only those who have already thought about death have the ability to help other people who are at the terminal stage of their lives and are near to the end. The constant accompanying of all sick people becomes indispensable at a pastoral level, and the constant accompanying in particular of those who are at the terminal stage of their lives. This should involve frequent meetings that plan all kinds of celebration that are suited to the difficult situations that each sick person will experience. All celebrations, however, must be experienced in the perspective of the Resurrection of Christ.

A catechesis of the community on the terminally sick and the collaboration of the family and friends of the sick person are of great importance in ensuring that people know what to do at the moment of death. Each catechesis is an initiation into Christian life and people should constantly know how to live out their own deaths so that they can teach other people to do the same.

The provision of suitable training to health care professionals and above all to hospital chaplains about the terminal stage of life is an indispensable pastoral goal. For this reason, the learner must emphasise the re-socialisation of death and the therapy of compassion, without forgetting that palliative care can give terminally ill people the possibility of experiencing communion in the form of Viaticum in a better way.

The groups of extraordinary ministers of the Eucharist must be organised and trained at a personal and hospital level to know how to offer Holy Viaticum in the accompanying of the dying. This celebration must be experienced in a context of strong spirituality and should involve the family, close friends and health care professionals.

Ensuring an up to date

training for priests (recycling) and seminarians (pastoral courses) in order to ensure correct behaviour towards the terminally ill is innovative at a pastoral level but is also something that is urgently required. Both the educational curriculum and the on-going training of the clergy should take into account the importance of pastoral care in health and have all these reference points.

Giving value at the level of pastoral practice to assistance to the sick implies engaging in a spiritual journey with them that passes through personal encounter, reconciliation, the Eucharist, the anointing of the sick and Viaticum at the terminal stage. To pray with sick people is a decisive element in the preparation of this spiritual pathway.

It is worthwhile motivating the whole of the Christian

community in the parish and the community as regards the festive celebration of the sacraments of the sick, anointing and Viaticum. The whole of pastoral care for the sick within pastoral care in health is:

**Paschal** – it is based on the great event of the Resurrection of our Lord Jesus Christ.

**Communal** – it is experienced by all the members of the Christian community with gestures of solidarity and sharing during the difficult hours experienced by brothers in the faith.

**Prayer** – it involves helping everyone to draw near to God, engaging in a journey of conversion and establishing a dialogue of love that also draws people closer those who suffer most.

**Charitable** – it is marked by a concern to give joy to all those who suffer, above all

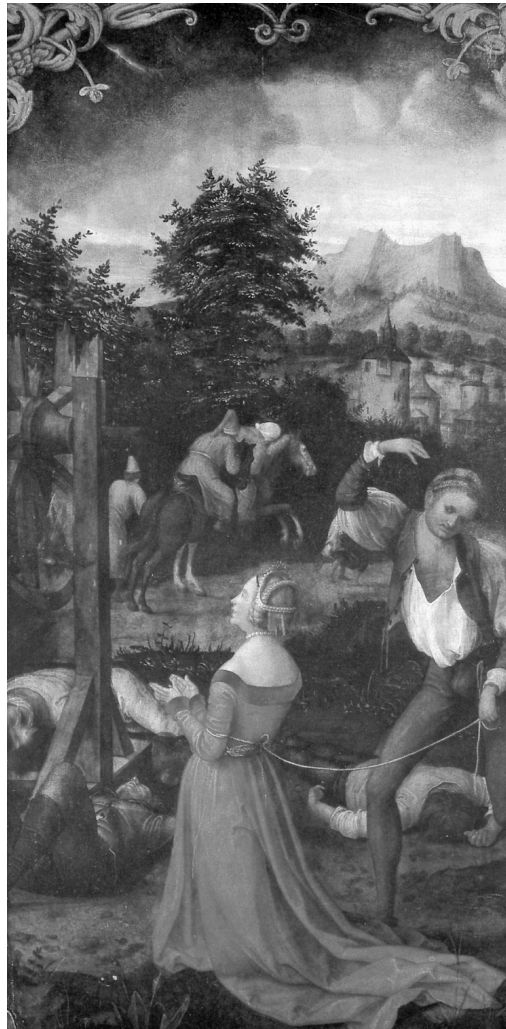
through the exercise of generous charity and brotherly care during the difficult moments.

Evangelising and missionary – it involves ensuring that the sick people themselves are an instrument for the transmission of the Gospel through the serenity that is achieved during these hours that constitute a summary of life.

## Conclusion

The example of John Paul II in receiving Viaticum was a sign of this wonderful dimension of pastoral action involving the concern that everyone, including the terminally ill, 'may have life and have it in abundance' (Jn 10:10).

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# Viaticum: Fullness of Health. The Pastoral Aspects

## SUMMARY OF THE PAPER

I would like to greet you all and I would like to thank the organisers of this conference for inviting me to present a paper.

1. Pastoral guidelines for the rediscovery and reassessment of Viaticum: pastoral care at the end of life.

- The usual perspective of those who work in hospitals.

- The goal: to open up a pathway in the souls of people, a spiritual journey that makes the encounter with Christ possible, Christ the Saviour who offers the fullness of health.

The first set of problems to address concerns the meaning of death. Today death is the taboo above all others, especially in our Western cultures and societies. The first obstacle consists in a certain kind of medicine that does not give up and makes itself the interpreter of the desire for eternity on the part of man, and this to the point of providing illusions in order to remove him from the profoundly human encounter with the reality of death.

The second obstacle is the invasiveness of psychology which takes on responsibility

for the emotional-sentimental dimension of modern man and seeks to defuse the drama of death by portraying it as a natural event and thus as something that is 'good' and to which man must resign himself in a stoic way.

In the Christian perspective death is a historic event (cf. Lk 9:51):

- a decisive and important moment by which to achieve the completion of our earthly existence;

- an event for which we should prepare ourselves with responsibility (consider here the ancient spiritual traditions of the *ars moriendi*);

- an event that should be experienced with the greatest awareness and self-control possible at that specific moment.

The second pastoral sphere is spiritual care for people, the aim of which is to limit the loneliness of the dying person as much as possible and thereby strengthen his or her faith. To this end one needs:

- To be able to establish a meaningful interpersonal relationship with the sick person by which to reawaken his or her condition as a subject who is able to respond to, and to

carry out, his or her vocation-mission.

- To achieve a reawakening of an awareness that makes it possible for the sick person to sustain the 'final commitment' of adherence to his or her own life project, and at that moment, in particular, conceived in relation to its dimension of transcendence.

- To engage in joint and personal prayer so that the person becomes able to adhere voluntarily to the attraction exercised upon him or her by Truth and Good, something that constitutes the full and total completion of his or her existence.

Pastoral activity seeks to create the conditions within which the reality of Viaticum expresses its sacramental value and meaning.

Spiritual care for a person is a moment of the spiritual journeying of a hospital community. This pathway is arranged and organised around the three sacraments for the sick: penance, anointing and the Eucharist.

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# Viaticum: the Pastoral Aspects

## SUMMARY OF THE PAPER

1. I would like to express my gratitude to you, Your Eminence, for inviting me to take part in this conference on Viaticum. Viaticum is connected with the last moments of the life of a believer. One is often dealing with an emergency admission to a hospital.

2. I have been engaged in pastoral service at the Umberto I Polyclinic for seven years and I would like to point out two difficulties that obstruct discovery of the profound meaning of Viaticum:

A. Firstly, the character of the structure of state hospitals and the work situation in hospital structures (the limited spaces available in the emergency departments, the very limited time available to chaplains, and the fact that family relatives cannot be present).

B. Secondly, the attitudes of our society to death (man does not face the question of death until he is in a critical situation, 'a few unfortunate people die but man believes that he is not mortal'. Society deals with the reality of death as though it were a taboo. Life itself does not have the value of an indelible dignity and when it no longer has an enjoyable meaning there is an increasing propensity to uphold the right to end it (euthanasia, suicide).

3. In this situation hospitals become a field of mission to the utmost in order to change mentalities and attitudes.

To serve life (is a divine privilege) and to help life so as to lead it to initial happiness (union with others and with God) form a part of the process of healing (this is not only a matter of medical doctors but of all the health care staff, family relatives, friends, chaplains and volunteers). In order to achieve this we need to:

A. Train staff through special courses aimed at enabling them to know how to be at the

side of a dying person, so that he or she in turn is able to die in the presence of family relatives, and in the case of patients who are believers, staff should be ready to call for the chaplain.

B. Given the shortage of priests who can carry out their mission in hospitals courses should be organised for seminarians (our experience of fifteen seminarians at 'Sedes Sapientiae').



Catecheses and listening centres should be organised (at the present time there are five of these at the Polyclinic) and these should amount to a constant help to sick people to enable them to follow the liturgy every Sunday.

C. The Eucharist is experienced as the centre of the mission: the chapel is the centre of the pastoral action, a place of personal prayer and of encounter with Christ; the celebration of the Eucharist in the corridors (there are difficulties but this also involves the participation of volunteers and sisters) at holiday times (in the fifty different wards), and the celebration of fourteen Holy Masses every Sunday; the Eucharist taken to patients during the daily visits by the chaplains (about seven thousand communions every month).

4. Viaticum is rarely asked for or celebrated – it requires a certain preparation on the part of the receiver, awareness of his or her condition of health, his or her nearness to death (which is usually concealed from the sick person), and greater calm and preparedness on the part of family relatives.

It often happens that the call to the priest takes place at the last moment when the sick person would no longer be emo-

tionally troubled by the prospect. This is why anointing of the sick (a sacrament that is always more completely understood within the Church) is suitable to prayer in situations where people are no longer conscious.

5. Let us remember the teaching of John Paul II: man cannot understand himself, his existence, without Christ... and it is certainly the case that he cannot understand and accept the moment of his death. This is why it is necessary to rediscover the presence of Christ in the Eucharist and in the celebration of Viaticum as a sign of the completion of our lives and a sign of hope in eternal life.

Rev. TELESFOR KOWALSKI  
Chaplain at the  
Polyclinic Umberto I,  
Rome

# XX International Conference on the Human Genome

VATICAN CITY, NOVEMBER 17-18-19 2005

## Presentation

We have defined health as tension towards harmony. Exploring this concept, in this XX International Conference of the Pontifical Council for Health Pastoral Care we will address the beginning of this tension, a beginning that marks health throughout life – the human genome. We see it as an organising structural element of the individual and hereditary features of the human body. It involves the whole set of genes but it goes beyond this and concerns all the elements which, together with genes, constitute the original energy that is present in a virtual form, an energy which, in turn, is the constituent mystery of the life of the human person.

This is a very broad topic and to a large extent one subject to new research and discovery. Our aims are modest and we will try to study this subject solely from the specific perspective of health, which, for that matter, is an all-embracing reality. We will lay stress on the therapeutic aspect.

The study of the human genome will proceed according to our usual method: we will begin with a vision of the genome in the light of the Word of God, and from this

we will develop our exploration of it in three stages: Reality, Illumination, Action.

In the first part of our conference we will consider the current reality of genetics, genomic studies and post-genomic studies, chromosome aberrations and congenital disorders, monogenetic, polygenetic and polyfactorial illnesses, genetic predisposition to cancer and to late-onset diseases, medical care for patients with these diseases and their families, judgement, error and negligence in genetic aspects of maternal fetal medicine, the screening of populations, and gene therapy. We will present human genetics and its international juridical status, genetic research, and international cooperation.

In the stage addressed to *Illumination*, we will reflect on the following subjects through the application of the Word of God to the reality studied in the first part of the conference: the historical process of human genetics, human genetics in the light of the Word of God, the ethics of medical genetics, the path of liberal eugenics and the ethics of medical consultancy in the field of genetics. In our traditional inter-religious dialogue we will then address the application of

the knowledge of human genetics according to Judaism, Islam, Buddhism, Hinduism, as well as genetics according to the thought of post-modernity.

In the stage addressed to *Action* we will examine genetics and the new culture, the pastoral vision of genetic research, medical genetics and ethical committees in hospitals, law and genetics, society and genetic diseases, economics and genetics, education and the updating of pastoral workers in the field of genetics, and the prevention of genetic diseases from the point of view of pastoral care.

As it is clear from the names of the specialists who will speak on the subjects that have been listed, these are highly qualified people who come from different parts of the world and who have been invited specifically within an interdisciplinary framework in order to be able to obtain a dialogue of high stature that will be useful in directing our world in relation to this matter, in which, indeed, the future is already awakening.

His Eminence Card. JAVIER  
LOZANO BARRAGÁN  
*President of the Pontifical Council  
for Health Pastoral Care,  
The Holy See.*

## Thursday, 17 November

9.00      **GREETING**

9.15      **PROLUSION: Origin of life and theology**

His Eminence Cardinal Javier Lozano Barragán

*President of the Pontifical Council for Health Pastoral Care, The Holy See*

**Chairperson:** Rev. Prof. Angelo Serra, S.I

*Professor Emeritus of Human Genetics, Faculty of Medicine,  
Catholic University of the Sacred Heart, Rome*



## I. THE CONTEMPORARY SITUATION

- 10.00     **Human genetics today: hopes and risks**  
Prof. George Robert Fraser, MD  
*Member of the "Royal College of Physicians," London (Great Britain)*  
*Member of the "Royal College of Physicians of Canada"*
- 10.30     *Break*
- 11.00     **Genomics and post-genomics: present and future**  
Prof. Stylianos E Antonarakis, MD,  
*Institute for Medical Genetics and Development, University of Geneva (Switzerland)*
- 11.20     **Chromosomal aberrations and congenital disorders**  
Dr. Clotilde Mircher  
*Lejeune Foundation, Paris (France)*
- 11.40     **The monogenic diseases**  
Prof. Pietro Chiurazzi  
*Associate Professor at the Institute for Medical Genetics,*  
*Catholic University of the Sacred Heart, Rome*
- 12.00     **The polygenic and polyfactorial diseases**  
Prof. Maurizio Genuardi  
*Chair of Medical Genetics, Department of Clinical Pathophysiology*  
*University of Florence (Italy)*
- 12.20     **Genetic predisposition to cancer and late-onset diseases**  
Rev. Fr. Jacques Simporé, M.I.  
*Professor of Genetics at the University of Ouagadougou (Burkina Faso)*  
*Director of the Biomolecular Research Laboratory*
- 12.40     **The medical assistance of affected patients and their families**  
Prof. Giovanni Neri  
*Director of the Institute for Medical Genetics,*  
*Catholic University of the Sacred Heart, Rome*
- 13.00     **End of the Session**
- 16.00     **Judgement, error and negligence in genetic aspects of maternal fetal medicine**  
Prof. Aubrey Milunsky, MB.B.Ch.  
*Director, Center for Human Genetics -*  
*Boston University School of Medicine, Boston, MA (USA)*
- 16.20     **The development of diagnostic tests for genetic diseases**  
Dr. Christine M. Eng  
*"Baylor College of Medicine," Houston (USA)*
- 16.40     **Populations' genetic screening**  
H.E. Msgr. Joannes Baptist Matthijs Gijzen  
*Bishop of Reykjavik (Island)*
- 17.00     **The gene therapy**  
Prof. Esmail D. Zanjani  
*Professor and Chair, Department of Animal Biotechnology,*  
*University of Nevada, Reno, NV (USA)*
- 17.20     **Break**
- 17.40     **International bioethics and human genetics. The activities of UNESCO**  
Prof. Henk ten Have  
*Director Division of Ethics of Science and Technology, UNESCO, Paris, (France)*
- 18.00     **Genetic research and the international cooperation**  
H.E. Msgr. Celestino Migliore  
*Permanent Observer of the Holy See to the O.N.U., New York (USA.)*
- 18.20     **End of the Session**

# Friday, 18 November

**Chairperson:** Rev. Fr. Bonifacio Honings, O.C.D.  
*Professor Emeritus of Moral Theology at the Pontifical Lateran University, Rome;  
Consultor of the Pontifical Council for Health Pastoral Care, The Holy See*

## II. ILLUMINATION

- 9.00     **Historical development of human genetics**  
Prof. Vincenzo Cappelletti  
*President of the Italian Society of the History of Science, Rome*
- 9.35     **Human genetics in the light of God’s word**  
His Eminence Card. Dario Castrillón Hoyos  
*Prefect of the Congregation for the Clergy, The Holy See*
- 10.20    **Break**
- 10.45    **The ethics of medical genetics**  
Prof. Paul Lauritzen  
*Director of the Program on Applied Ethics at the “John Carroll University”,  
University Heights (USA)*
- 11.30    **“On the way of a liberal eugenics”**  
Prof. Lutz Wingert  
*University of Dortmund (Germany).*
- 12.15    **The prevention of genetic diseases from the point of view of pastoral care**  
His Eminence Card. Karl Lehmann  
*Bishop of Mainz (Germany)*
- 13.00    **End of the Session**
- 16.00    **Interreligious dialogue on the application of human genetics knowledge**  
  
– **Judaism:** Prof. Abramo Alberto Piattelli,  
*Rabbi of the Jewish Community of Rome;  
Professor of Post-Biblical Judaism, Pontifical Lateran University, Rome*  
  
– **Islam:** Rev. Fr. Justo Lacunza Balda,  
*President of the Pontifical Institute of Arabic and Islamic Studies, Rome*  
  
– **Hinduism:** Prof. N.K. Ganguly,  
*Director General Indian Council of Medical Research (ICMR), New Delhi (India)*  
  
– **Buddhism:** Rev. Masahiro Tanaka, M.D.  
*Physician at “Medical Clinic Fumon- it”,  
Chief Priest at “Buddhist Temple Samyou-ji”, Mashiko (Japan)*
- 17.00    **Genetics and post-modernity**  
Rev. Fr. Ján Dacok, S.J.  
*Professor of Moral Theology and Ethics at the Faculty of Theology  
of the University of Trnava (Slovakia)*
- 17.15    **Break**
- III. WHAT SHOULD BE DONE?**
- 17.45    **Genetics and the new culture**  
His Eminence Card. Paul Poupard  
*President of the Pontifical Council for Culture, the Holy See*
- 18.15    **Pastoral view of genetic research**  
His Eminence Card. Angelo Scola  
*Patriarch of Venice (Italy)*

- 18.45 **Freedom and responsibility of genetic research**  
Rev. Prof. Roberto Colombo  
*Professor of Human Biology, Catholic University of the Sacred Heart, Milan (Italy)*
- 19.15 **End of the Session**

## Saturday, 19 November

- Chairperson:** Mrs. Lillian Fanjul de Azqueta  
*Founder and Director of the "New Hope" Foundation, Palm Beach (USA)*
- 9.00 **Medical genetics and ethical committees in hospitals**  
Prof. Maria Luisa Di Pietro  
*Associate Professor of Bioethics, Catholic University of the Sacred Heart, Rome (Italy)*
- 9.20 **Prevention of genetic diseases**  
Dr. Federico Mayor Zaragoza  
*Director of "Cultura de Paz" Foundation, Madrid (Spain)*
- The social impact of genetic diseases**  
Dr. Francesca Pasinelli  
*Scientific Director of "Telethon Foundation", Milan (Italy)*
- 10.00 **Economics and genetics**  
Dr. Xavier Pomés i Abella  
*Director of Planning, Assistance and International Cooperation, Fatebenfratelli, Aragon (Spain)*
- 10.20 **Education and adjournment of pastoral operators in the field of genetics**  
P. Francisco de Llanos  
*Professor of Ethics and Legislation at the department of Science of Health, Seville (Spain)*
- 10.40 **The ethics of medical counselling in the field of genetics**  
Rev. Prof. Maurizio Pietro Faggioni, OFM  
*Professor of Bioethics at the Alfonsiana Academy, Rome (Italy)*
- 11.00 **Conclusion**

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### Information

#### Conference Secretariat

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Beginning on November 17, 2005, the Secretariat will move to the Synod Hall, Vatican City

Entrance from Piazza del Sant'Uffizio, Left Colonnade of St. Peter's Square

For Hotel reservations and other information you may contact Raptim, Via Ostiense, 193/d - 00154 Rome.  
Telephone: (06) 5755988 – Fax (06) 5781394; E-mail: [booking@raptim.it](mailto:booking@raptim.it)

There is a registration fee of 100. Those registering will receive the special issue of the journal *Dolentium Hominum* containing the Conference Proceedings.

All who wish to attend the International Conference

must send a written request by October 10, 2005 to the Pontifical Council for Health Pastoral Care, 00120 Vatican City.

The fee on registering may be paid as follows:

- 1) Outside Italy, by way of an international check or postal money order made out to the Pontifical Council for Health Pastoral Care, 00120 Vatican City
- 2) In Italy, you may use c.c.p. n. 63353007, indicating that payment is to the Pontifical Council for Health Pastoral Care, 00120 Vatican City for the purpose of registration.

There will be simultaneous translation into English, Spanish, French, and Italian.

The Proceedings, to be printed in the four official languages for the Conference, will be available in May 2006.

You must present ID badge to be admitted to the Synod Hall. You may pick up at the office of the Pontifical Council.

Bar service on the second floor will be from 9 a.m. to 1 p.m. and from 4 p.m. to 6.





# Pontifical Council for Health Pastoral Care

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