

Aandacht voor ouderen met degeneratieve ziekten

Address to participants in the 28th International Conference sponsored by the Pontifical Council for Health Care Workers

Paul VI Audience Hall
23 November 2013
Pope Francis



Dear Brothers and Sisters,

Thank you for your welcome! I cordially greet you all.

Today I would like to repeat that the elderly have always been and still are protagonists in the Church. Today more than ever the Church must set an example for the whole of society that, despite their inevitable and sometimes grave “ailments”, the elderly are always important; indeed, they are indispensable. They carry the memory and wisdom of life to hand down to others, and they participate fully in the Church’s mission. Let us remember that, in God’s eyes, human life always retains its value far beyond any discriminating vision.

The increased life expectancy which developed over the course of the 20th century has entailed that a growing number of people are facing neurodegenerative diseases, which are often accompanied by a deterioration of the cognitive capacities. These diseases push the socio-health care world both to the horizons of research, and to those of assistance and care in social facilities, as well as in the family, which remains the privileged place of warmth and closeness.

The provision of adequate assistance and services which respect the dignity, identity and needs of patients is important, but the support of those who assist them, whether family members or healthcare professionals, is also important. This is only possible within the context of trust and within an atmosphere of a mutually respectful relationship. Lived in this way, care becomes quite an enriching experience, both professionally and humanly; otherwise, it becomes all too similar to cold, basic “physical protection”.

It therefore becomes necessary to be committed to a form of assistance that, alongside the traditional biomedical model, offers spaces of dignity and freedom, far, far away from closure and silence, that torture of silence! Silence is so often transformed into torture. People who live in assisted care are often surrounded by this sense of enclosure and silence. Within this perspective, I would like to stress the importance of the religious and spiritual aspect. Indeed, this is a dimension that remains vital even when cognitive faculties have been reduced or lost. It is a matter of implementing a special pastoral approach in order to accompany the religious life of elderly patients with serious degenerative diseases in various forms, to ensure that their minds and hearts do not interrupt their dialogue and relationship with God.

I would like to conclude by greeting the elderly. Dear friends, you are not only recipients of the good news of the Gospel message; in virtue of your Baptism you shall always be its heralds in the truest sense. Each day you can live as witnesses of the Lord, in your families, in your parishes and in your habitual meeting places, by making Christ and his Gospel known, especially to the younger generations. Remember that it was two elderly people who recognized Jesus in the Temple and proclaimed him with joy, with hope. I entrust all of you to the protection of Our Lady, and I thank you from my heart for your prayers. Now, all together let us pray to Our Lady for all

healthcare workers, for the sick, for the elderly and then let us receive the blessing (Hail Mary...).

Ongeboren kind heeft Gods aangezicht

Address to Group of Catholic Gynecologists: “Spread the Gospel of Life. Every unborn child, condemned unjustly to being aborted, has the face of the Lord”

Zenit, 20 september 2013



20 september 2013

Pope Francis

Dear Brothers and Sisters,

Please excuse the delay, there were complications today on account of the audiences ... forgive me please.

1. The first reflection that I would like to share with you is this: today we are witnessing a paradoxical situation, which concerns the medical profession. On the one hand, we note — and we thank God for it — the advances made in medicine, thanks to the work of scientists who passionately and unsparingly dedicate themselves to the search for new cures. On the other hand, however, we also find the danger of a doctor losing his own identity as a servant of life. Cultural disorientation has beset what seemed to be an unassailable sphere: yours, medicine!

Although, by their very nature, healthcare professions are at the service of life, they are sometimes induced to disregard life itself. Yet, as the Encyclical *Caritas in Veritate* reminds us: “Openness to life is at the centre of true development”. There is no true development without this openness to life. “If personal and social sensitivity towards the acceptance of a new life is lost, then other forms of acceptance that are valuable for society also wither away. The acceptance of life strengthens moral fibre and makes people capable of mutual help” (n. 28). This paradoxical situation may be seen in the fact that, while persons are being accorded new rights — at times even presumed rights — life itself is not always protected as a primary value and primordial right of every human being. The final aim of the doctor’s action is always the defence and promotion of life.

2. The second point: in this context of contradiction, the Church makes an appeal to consciences, to the consciences of all healthcare professionals and volunteers, and especially to you gynaecologists, who are called to assist in the birth of new human lives. Yours is a singular vocation and mission, which requires study, conscientiousness and humanity. There was a time when women who helped in the delivery were called “comadre” [co-mothers, midwives]: like one mother with another, with the real mother. You, too, are “co-mothers” and “co-fathers”, you too.

A widespread mentality of the useful, the “culture of waste” that today enslaves the hearts and minds of so many, comes at a very high cost: it asks for the elimination of human beings, especially if they are physically or socially weaker. Our response to this mentality is a decisive and unreserved “yes” to life. “The first right of the

human person is his life. He has other goods and some are more precious, but this one is fundamental — the condition of all the others” (Congregation for the Doctrine of the Faith, Declaration on procured abortion, 18 November 1974, n. 11). Things have a price and can be sold, but people have a dignity; they are worth more than things and are above price. So often we find ourselves in situations where we see that what is valued the least is life. That is why concern for human life in its totality has become in recent years a real priority for the Church’s Magisterium, especially for the most defenseless; i.e., the disabled, the sick, the newborn, children, the elderly, those whose lives are most defenseless.

In a frail human being, each one of us is invited to recognize the face of the Lord, who in his human flesh experienced the indifference and solitude to which we so often condemn the poorest of the poor, whether in developing countries or in wealthy societies. Every child who, rather than being born, is condemned unjustly to being aborted, bears the face of Jesus Christ, bears the face of the Lord, who even before he was born, and then just after birth, experienced the world’s rejection. And every elderly person – I spoke of children: let us move to the elderly, another point! And every elderly person, even if he is ill or at the end of his days, bears the face of Christ. They cannot be discarded, as the “culture of waste” suggests! They cannot be thrown away!

3. The third aspect is a mandate: be witnesses and diffusers of the “culture of life”. Your being Catholic entails a greater responsibility: first of all to yourselves, through a commitment consistent with your Christian vocation; and then to contemporary culture, by contributing to recognizing the transcendent dimension of human life, the imprint of God’s creative work, from the first moment of its conception. This is a task of the new evangelization that often requires going against the tide and paying for it personally. The Lord is also counting on you to spread the “gospel of life”.

Within this perspective, hospital departments of gynecology are privileged places of witness and evangelization, for wherever the Church becomes “the bearer of the presence of God”, there, too, she becomes the “instrument of the true humanization of man and the world” (Congregation for the Doctrine of the Faith, Doctrinal Note on Some Aspects of Evangelization, n. 9).

By fostering an awareness that the human person in his frailty stands at the centre of all medical and healthcare work, the healthcare facility becomes “a place in which the relationship of treatment is not a profession” — your relationship of treatment is not a profession — “but a mission; where the charity of the Good Samaritan is the first seat of learning and the face of suffering man is the Christ’s own Face” (Benedict XVI, Address at the Catholic University of the Sacred Heart, 3 May 2012).

Dear friends and physicians, you are called to care for life in its initial stage; remind everyone, by word and deed, that this is sacred — at each phase and at every age — that it is always valuable. And not as a matter of faith — no, no — but of reason, as a matter of science! There is no human life more sacred than another, just as there is no human life qualitatively more significant than another. The credibility of a healthcare system is not measured solely by efficiency, but above all by the attention and love given to the person, whose life is always sacred and inviolable.

Never fail to ask the Lord and the Virgin Mary for the strength to accomplish your work well and to bear witness courageously — courageously! Today courage is needed — to bear witness courageously to the “gospel of life”! Thank you very much.