



# Wereldziekendag: de geesteszieke, een gelovig beeld van God

*Zenit, 18 februari 2006*



Here is an excerpt of an address Cardinal Javier Lozano Barragán, president of the Pontifical Council for Health Care Workers, prepared for World Day of the Sick. The main events of the World Day were held Feb. 9-11 in Adelaide.

## **Is the Mentally Ill Patient a Deformed Image of God?**

Some Data on Mental Illnesses

### **1. Current Situation**

According to the World Health Organization there are 450 million people in the world affected by neurological or behavioral mental disorders, of which 873,000 commit suicide each year. Mental illness is a true health and social emergency. Twenty-five percent of countries do not have laws concerning mental health, 41% have no defined policy on the issue and in over 25% of health centers patients do not have access to basic psychiatric medication; among 70% of the world population there is less than one psychiatrist for every 100,000 people.

As to dealing with mental disorders, it maybe asserted that in the past 50 years great strides forward have been made, evidence of which are the technological advances in the field, of new psychotic and mental health medicines, which have considerably improved the quality of life of the mentally ill. Nevertheless, the conditions of assistance to mentally ill patients are quite deficient as a result of limited funding, the lack of understanding among authorities, the serious problem of the social stigma that the patients and their families have to face, all of which have serious repercussions on the social support networks in many countries that consequently deteriorate.

The number of "homeless" mentally ill patients has considerably increased in wealthy countries. It is alarming to see how serious mental disorders are simply dealt with using bureaucratic and juridical or legal solutions without in the least taking into consideration the daily needs and the quality of life of patients and their families.

Mental disorders affect more frequently those populations that are less fortunate economically culturally and intellectually. Millions of individuals have to bear on their body and mind the psychological consequences of malnutrition, armed conflicts or natural disasters with their heavy burden of morbidity and mortality. ...

## **What Can Be Done?**

### **1. Mental Disorder in Christian Thought**

In Christian thought it is said that these severe mental illnesses reduce man to sad conditions, like a deformed image of God, which is compared to the suffering servant of Isaiah (Isaiah 53:1-7). Yet, apart from that deformation, or rather due to it, the mentally ill person resembles our Lord on the cross; and since the cross is the only way to the resurrection, the mentally ill person, has so to say a superior level, is worthier and reaches such a level of excellence because of the magnitude of his love and the suffering he endures.

### **2. Is He a Deformed Image of God?**

If the above holds true, I would like to move a step further and venture a statement that might shed light on the



issue, from the point of view of moral theology. The statement is that: the mentally ill person is not a deformed image of God but, rather, a faithful image of God, our Lord.

Such a statement intuitively finds confirmation in the thought of our Lord when he says: "The Kingdom of God is within you" (Luke 17:21) and "what comes out of the mouth proceeds from the heart, and this defiles man" (Matthew 15:18). "For from within, out of the heart of man, come evil thoughts, fornication, theft, murder, adultery, coveting, wickedness, deceit, licentiousness, envy, slander, pride, foolishness. All these evil things come from within, and they defile a man" (Mark 7:20).

The Kingdom of God, the existence of the Holy Trinity in each one of us, may be found in our heart, the heart seen as the ultimate source of decisions that give form to our whole existence; not only that which was previously defined as the fundamental option, but also the whole meaning of this option, with all the actions we perform to realize it. In other words, the heart represents all our dynamism at the service of the mission that God has entrusted to us.

The Kingdom of God enters into the loving knowledge and in the decision made in the deepest intimacy of our person, which are then realized by the power of the Holy Spirit, who leads us by the hand like Children of God, and by the total collaboration that give form to our existence, according to the Law of God. If we want to separate from the Kingdom of God, we can do so only with an evil heart, to which Christ our Lord refers, and from which all the sins come.

### **3. Faithful Image of God**

Therefore, once the mental illness has caused such a disorder as to take away from the mentally ill patient any responsibility for his actions — qualifying them as separation from the divine will, as a sin — the mental patient cannot separate from God. In other words, the image of God in him cannot be distorted. In this case his knowledge or his volitive option is no longer sufficient to motivate any human action that separates him from God. His bodily and psychic conditions do not allow him to commit a grave sin, given that in his state of disequilibrium he does not have that full knowledge and ability of assent required to sin.

If we approach the argument from this point of view, whereby the mentally ill patient does not have the knowledge or the faculty of full consent required to commit a mortal sin, his is not a deformed image of God, since that image can only be deformed by sin. Certainly, it is the suffering image of God, but not a deformed image. He is a reflection of the mystery of the victorious Cross of the Lord. Inspired by the image of the Suffering Servant of Yahweh (Isaiah 53:1-7) we are drawn to a conscious act of faith in the suffering Christ.

It is not by chance that in the old popular Mexican language, a mad person was called "bandito," that is, "blessed"; [...] without the full use of reasoning, he was unable to commit sin and was, therefore, destined to eternal life. It is true that the objective disorder of sin and its consequences are manifest in the mentally ill patient; however, at the same time, there is in him the historical equilibrium of the only possible order, the order and equilibrium of the Redemption.

This is not comprehensible to a secularized mentality; it is only understood within the context of Christian optimism, which stems from a reasoned faith that tells us how in such circumstances our obligations towards a mentally ill person, on one hand, satisfy our duty to see the suffering Christ in the poor and less protected; and on the other hand the idea of seeing in the patient the love of God who has indicated him as his chosen one, in the sense that he shall not be separated from Him.

He is therefore a proof of the crucified love of God. Hence, the best thing we can do is to give them a treatment of love. Since the mentally ill patient is also the image of the resurrected Christ, we have the obligation of being the "Good Samaritan," that is, providing all that is necessary for his care.



We need to think about a series of treatments that should be devised to pull these patients out of the prostration that is all the more painful the deeper the psychic suffering is. In fact these patients often lose the sense of human relations and feel persecuted by a hostile surrounding environment; or the subjectivity of the environment disappears and for them people become many objects, or are indifferent or even real threats to their security.

#### **4. Treating the Mentally Ill**

The treatment for a mentally ill patient should be a treatment of loving care, tenderness and kindness, in order to help him cope with his imaginary world, perceived as an enemy, a world in which he often drowns.

The treatment, which should be personalized and of maximum quality, requires also maximum diligence in prescribing treatments and most appropriate medicines. It will draw from all the resources made available by science, be it from medical and technical arts or from the research that is always progressive looking for the most adequate medicaments from the psychosomatic point of view.

#### **Practical Lines of Action**

In this perspective, allow me to suggest some guidelines for practical interventions, which will help us offer a loving care to the mentally ill:

General Interventions:

- Establish, in the education systems, solid religious foundations that help one to work out clear and stable horizons, to be followed for a lifetime.
- Be aware of the system of values underpinning the whole human life and make reference to it, especially to avoid that mental illness is lived with anxiety, sadness and desperation.
- Fight against relativism, consumerism, pseudo-culture of instinctive desires and pansexualism.
- Promote the dignity of mentally ill patients.
- Foster a healthy development of the child, including his brain functions.
- Make awareness programs on mental illnesses for the society so that people may know about them and prevent them.
- Exhort religious orders and congregations, whose charisma it is to take care of these patients, not to waver in their commitment and to dedicate particular care to them, given the particular emergency that this illness presents.
- Support these patients with the administration of sacraments where this is possible.
- Enlighten and console the mentally ill with the Word of God, if their mental and physical condition allows it.
- Be aware of the fact that the rehabilitation of a mentally ill patient is a duty of the whole society together, within the context of solidarity that shows preference for those who are most in need.
- Promote a social and physical environment that favors human relations and for the mentally ill patients a sense of belonging to a concrete community. ...

#### **Conclusion**

Remembering that sentence engraved on the lintel of a German hospital “Infirmis sicut Christo” — to the sick as to Christ — I would like to conclude my reflection insisting on this image of Christ suffering in the depth of his soul, full of pain and affliction, yet he succeeds in transforming this evil into a source of life, since his pain and suffering constitute the nucleus of his Resurrection, and therefore our salvation.

Our way of approach to the mentally ill is a difficult test for our faith. Handling them effectively means professing our faith in the agonizing and suffering Christ, but at the same time victorious. This is the sense of today's celebration of the World Day of the Sick, dedicated to the mentally ill patients.