

## **Health Care as a Vocation: *Cura Corporum* as *Cura Animarum*\*** **Speech Given to the CMA Annual Educational Conference**

### **Précis**

*Catholics have always given prominence to care for the sick, seeing this corporal work of mercy as care for the whole person. Consequently, the Church has always given priority to spiritual care when attending to the sick. Analogously, the work of the health care provider is not simply a career, but a vocation, a means to sanctification and growing to be the person God created him or her to be. The separation of care for bodies and care for souls that has occurred since the time of the Enlightenment has been detrimental to the overall quality of care for the sick. Catholic health care workers in our own time must preserve and reassert the authentic Christian vision whereby care for the sick is always carried out with a view to the ultimate good of the eternal salvation of both patient and caregiver*

### **Introduction: A Doctor-Saint from Naples**

If you have ever been to Naples, I'm sure you will agree that it is a city like no other: at once chaotic, exhilarating, frustrating and charming, teeming with life, noise, flavors, and – one of the things it is most famous (or infamous!) for – contraband. The view of the city as you approach it from the bay is strikingly beautiful. I got to know the city a little bit when, while living in Rome, I used to visit a priest friend of mine who was a Navy chaplain stationed at the NATO base there. It was then that I came to appreciate the old Neapolitan adage: “See Naples and die.” One of my outstanding memories of my visits there is the famous Jesuit church of the Gesù, the burial place of an early 20<sup>th</sup>-century saint who was one of the most famous physicians in modern Italian history, and whose tomb I had the grace to venerate: Giuseppe Moscati.

### **The Witness of Sanctity**

When Giuseppe was a teenager, his older brother, a soldier, was wounded with an incurable head wound, and Giuseppe helped care for his brother until the poor invalid's death. Giuseppe's early-life experience with his brother taught him to accept the limited efficacy of human remedies for bodily health and to trust ultimately in the hope of eternal health in heaven. Thus, with deep sensitivity towards the bodily suffering of his brother, he also was able to look beyond the body to care for his brother's soul.

After graduation from the University of Naples in 1903, the newly-minted Dr. Moscati began to work at the “Hospital for the Incurables,” while also teaching at the university. His talents were multiple, and he was soon elevated to the duties of hospital administrator. In his practice, he combined his knowledge of traditional methods of diagnosis with the latest findings in biochemistry. He became well-known for his masterful diagnostic skills. He wrote the following advice to a young physician, who was a former student of his: “Remember that you must treat not only bodies, but also souls, with counsel that appeals to their minds and hearts rather than with cold prescriptions to be sent to the pharmacist.” Here was a physician who was

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\* “*Cura animarum*” – the care of souls – is the classic term in the Catholic lexicon to express what we now more commonly refer to as pastoral care. The point of this talk is to reclaim authentic medical care as not only care of bodies – “*cura corporum*” – but care for the whole person, above all, spiritual care. Thus, its title.

truly committed to treating the whole person; he regularly encouraged his patients to receive the sacraments, especially when they were in danger of death.

Dr. Moscatti was so intensely devoted to his vocation in health care that he made a private vow of celibacy to Our Lord, consecrating himself entirely to his service as a physician. He sanctified his work by making frequent acts of faith, hope and charity in between tasks. His love for God overflowed into his work; it was the inspiration for his professional excellence as well as his care for the poor, often treating them free of charge. His everyday virtue in health care prepared him for heroic charity during great crises in Naples, such as in 1911, when a cholera epidemic hit Naples and Dr. Moscatti treated its victims for countless hours in their homes in the poverty-stricken and dangerous Spanish district.

Earlier, in April of 1906, Mount Vesuvius erupted creating major earthquakes and spewing heavy loads of ash onto the unstable buildings; Giuseppe willingly put himself in harm's way, personally evacuating a nursing home minutes before the roof of the home collapsed under the weight of the ash. Interestingly, by the way, it was at that exact same time that another earthquake struck a major city on the opposite side of the world: my own city of San Francisco. The ensuing fire did even far greater damage, but the nuns were so heroic in caring for its victims that, in gratitude, to this day the city allows them to ride public transportation at no charge.

Such selfless care for the poor and vulnerable bears witness to the timeless truth of the Church's understanding that the care of bodies (*cura corporum*) cannot be separated from the care of souls (*cura animarum*). As Dr. Moscatti once wrote to a colleague of his: "Only one science is unshakeable and unshaken, the one revealed by God, the science of the hereafter. In all your works, look to heaven, to the eternity of life and of the soul, and orient yourself then much differently from the way that merely human considerations might suggest, and your activity will be inspired for the good."

When we consider the matter further, we see that there is a symbiotic relationship between health care and the Christian faith: to care for the soul – of ourselves or another – leads us to care for the bodies of the sick. Love for eternal life leads to love expressed in the concrete necessities of temporal life. Christians care for the bodies of the sick because they care for the eternal well-being of themselves and others, and their care for the physical health of the sick is ordered ultimately to the spiritual health of those whom they serve. The care of souls is the source and summit of the care of bodies.

Christians even express this truth linguistically. When the Church first began to evangelize Western Europe, there was no Latin word for "salvation." The Church had to find a word in the Old Vernacular to express this idea. The word she settled on was the Latin word for "health": *salus*. To this day in the Church's official language, *salus* means both "health" and "salvation."

### **Early Historical Development of Catholic Health Care**

The link between the care of souls and the care of bodies has played out before our eyes in the history of medical care. In his important work, *The Triumph of Christianity: How the Jesus Movement Became the World's Largest Religion*, the historian and sociologist Rodney Stark discusses the remarkable influence of Christian doctrine on health care in the days of the Roman Empire. In the second century, during the reign of Marcus Aurelius, the empire was hit with a severe plague, which lasted some fifteen years. The fear of contagion and death was exceedingly great, of course, among the pagans. The famous Roman physician Galen, instead of

caring for the sick, fled to his country estate to escape the disease. Relatives likewise abandoned their ailing loved ones. Once someone began to exhibit symptoms, they were abandoned by their families, out of fear of contagion, and left to die in the streets.

The Christians, however, were different. The Christians cared for their own who were ill, and they even gave assistance, when possible, to the pagans left to die in the streets. It turned out, Stark notes, that this generosity and sacrifice gave the Christians a distinct demographic advantage. The nature of the disease was such that basic nursing could save the person's life about two-thirds of the time. Therefore, the Christians survived the plague in much greater numbers thanks to the care of their fellow believers, and, because they also cared for their sick pagan neighbors, the Christians began to be seen almost as miracle-workers by them. Surely, those pagan patients who recovered due to Christian nursing also were eager to hear about this Jesus who inspired their caretakers, and the number of Christian converts no doubt also increased due to this medical care. The Christians even developed a kind of "herd immunity" due to their willingness to be exposed to the disease.

The same scenario played out again in the following century when another plague hit the empire. In 251, Dionysius, Patriarch of Alexandria, described the situation in his part of the empire: "At the first onset of the disease, [the pagans] pushed the sufferers away and fled from their dearest, throwing them into the roads before they were dead and treated unburied corpses as dirt, hoping thereby to avert the spread and contagion of the fatal disease; but do what they might, they found it difficult to escape..." Instead, again, the Christians survived in greater numbers and received more converts, due to their willingness to provide health care to the suffering. The love of eternal life caused the Christians to care for the bodies of the sick, and, in so doing, they were rewarded with health and growth even in temporal life. Heroic charity overflowed into self-sacrificing health care.

That heroic charity of the Christians during the plagues was just an extension of the day-to-day virtue that they practiced in caring regularly for the sick and poor. Like St. Giuseppe Moscati, they prepared for the extraordinary test of love by fidelity to charity in ordinary circumstances. The ordinary charity of these Christians meant health care. The link between Christianity and care for the body was obvious to them. As Stark also points out, health care was such a distinct part of Catholic life in the early Church that when the emperor Julian the Apostate tried to restore pagan religion in Rome in 361, he had to order the pagan priests to start providing care for the pagan sick and poor so that the influence of Christianity would be reduced. He was embarrassed because "the impious Galileans [the Christians], in addition to their own, support ours, [and] it is shameful that our poor should be wanting our aid."

Predictably, there was little response to Julian's plea; the pagans had no concept of receiving a heavenly reward for caring for the sick. Nor did they benefit from the gift of faith in Jesus Christ, which teaches that the love of bodies is the love of souls. The pagans practiced health care as a natural art, to be sure, and many pagan physicians have taught us great things; but health care in its perfection – the kind of health care that sacrifices comfort and risks the lives of care-givers, the kind of health care offered to the poor and outcast – flows only from the divine charity of Jesus Christ. Julian had no answer for the love which surpasses all understanding.

It is not surprising, then, that this divine love would give rise to the Catholic culture of the Roman Empire that developed hospitals into communities of care for the whole person, soul and body. It is true that different forms of hospitals existed at times in the ancient pagan world, especially in India. However, in the last quarter of the fourth century, soon after the conversion

of Rome to the Christian faith, St. Basil the Great founded the first Christian hospital, in his diocese of Caesarea. It was the first hospital built for the care of civilians and the poor in the history of the Roman Empire. After St. Basil founded his hospital, similar institutions began to be founded all throughout the Christian Roman Empire, including the *Hôtel-Dieu* in Paris, founded in 650, and today still operating as the oldest hospital in the world. The bioethicist Albert Jonson refers to this phenomenon as the “second medical revolution.”

The emperor Charlemagne decreed that all the hospitals in his realm were to be updated according to the needs of the time and that each cathedral and monastery in the empire was required to have a hospital attached to it. The cathedral hospitals were especially busy because they were located in the center of cities, and the canons of the cathedral took up the task of caring for the sick with the same commitment of vocation with which they approached their duties of preaching, teaching and singing the Divine Office. The Christian hospitals were different from their pagan counterparts in India because they were not just dispensaries of care for the material needs of the body; they were communities, led by monks and nuns, in which the sick received care for their bodies and souls. Christian hospitals were an extension of the life of the monastery, an opening of the monastery infirmary to all those in need of care.

To use a phrase that is fashionable today, Christian hospitals cared for the “whole person,” body and soul. Enlightened by the Catholic faith, our ancestors in the faith understood that the two cannot be separated. This understanding animated the way they set up the medical institutions they established. The care of the whole person, therefore, is a distinctly Christian contribution to civilization. Authentic health care, in this sense, can only be perfected if it is illuminated by the truth of the Catholic faith and quickened by the love of the theological virtue of charity.

### **The Roots of Modern Health Care**

What began as a supernatural instinct in response to the physical needs of the poor and sick developed, by the Middle Ages, into what can be identified as the roots of modern health care. By the time of the twelfth century, the simple infirmaries of monasteries developed into a sophisticated system of Catholic health care. The eventual prototype for all Christian hospitals was founded in Jerusalem in the year 1113, just after the First Crusade, which established a Catholic kingdom in Jerusalem. The famous Hospital of Saint John had beds for 1,000 to 2,000 patients and was staffed by some 150 religious men known as the Order of Knights of the Hospital of Saint John of Jerusalem.

Theirs was a new form of religious life in the Church that arose at the time of the Crusades, helped especially by the preaching of St. Bernard of Clairvaux. The Knights Hospitaller, as they were called for short, were a military order of religious men, dedicated to caring for wounded and poor Crusaders. Their spirituality was simple: the guests at the hospital were lords, and the Knights Hospitaller were their servants. The knights saw Jesus Christ in the sick and suffering. They cared for the crusader’s body because they revered Christ in his soul. Like St. Giuseppe Moscati, they consecrated their entire lives to this endeavor, giving up not only marriage and family, but also riches and self-determination.

The knights provided excellent health care for the time, and, of course, always saw to the spiritual needs of their patients. They represent the elevation of the Christian intuition that the care of souls and the care of bodies are inseparable. Their contribution achieved what can be identified as the beginning of total consecration to a life of Christian care for the sick. One could say that, in the Knights Hospitaller, the vocation to medical care was born. Their exemplary

work and dedication provided a model for the foundation of thousands of hospitals throughout Christendom.

Today the Knights Hospitaller are known by the name of the Sovereign Military Order of Malta, and there are still some knights of their order who live the Hospitaller vocation in the full consecration of religious life. In my own Archdiocese of San Francisco and all throughout the Bay Area, the Knights of Malta are very active, and have operated a free medical clinic for the uninsured out of Oakland's Cathedral of Christ the Light ever since the Cathedral's dedication eleven years ago. Even today, they have not lost the charism of medical care for the whole person, and still refer to the sick as their lords.

The care of the whole person inaugurated at St. John's Hospital was so exemplary that by the 14<sup>th</sup> century, most towns in Europe had one or two hospitals. As in our times, medical care in the Middle Ages was marked by the diversity of human needs. There were hostels for pilgrims, hospices for the dying, *sanitaria* for leprosy and other infectious diseases, almshouses for the aged poor, and hospitals for the sick poor. Although they were attached to monasteries, they were often founded as acts of charity on the part of munificent Christians. These institutions of medical care were mostly staffed by simple monks and nuns, carrying out the duties of charity to their utmost ability, but these institutions of the early Catholic health care system sometimes employed the services of a trained physician.

What a joy it must have been for that physician to find his vocation so richly supported in the environment of those holy hospitals! What freedom to know, love and serve Jesus Christ those nurses must have discovered, as they tended to the physical needs of their patients in an environment that spoke so clearly of the connection between the physical and spiritual care of their patients! It is worthwhile for us to meditate longingly on such a scene, allowing ourselves to be motivated anew to create health care institutions that are unapologetically informed by the Catholic faith and the supernatural life of the Gospel.

These wonderful medieval hospitals operated as an extension of the discipline of monastic hospitality, which is where the name "hospital" comes from. In Latin, "*hospes*" means "guest." Monks committed themselves to practice *hospitality* by welcoming guests to their monastery with great charity. St. Benedict of Nursia, the father of Western monasticism, taught the importance of this hospitality in his *Rule*, exhorting his sons and daughters to welcome guests as they would welcome Christ. "All guests who present themselves are to be welcomed as Christ," St. Benedict wrote, "for [Christ] himself will say: I was a stranger and you welcomed me. Proper honor must be shown to all, especially to those who share our faith and to pilgrims."

Because of this discipline of hospitality, these monastic hospitals were often called *Domus Dei*, the "Household of God," because, as the fruits of hospitality, they were an integral part of the monastery, a household with God at the head. The structure of these *Domus Dei* was rather simple – essentially a large hall where people could lie along the walls in beds – but it provided sufficiently for the care of body and soul. Often, at the end of the hall, there would be a beautiful altar that served as a chapel for prayers and Holy Mass. The worship of God was at the center of the life of the hospital. The community of the hospital was an extension of the monastery, and the patients were expected to participate in a regular life of prayer.

In Spain and Portugal, the hospitals would eventually be built in the cruciform shape of churches, a style perfected by St. John of God, who built dozens of hospitals throughout Portugal as part of the work of his new religious order, the Hospitaller Order of the Brothers of Saint John of God. The cruciform shape of the hospital communicated that, like a church, it existed primarily for the glory of God and the salvation of souls. The very architecture of these

Christian hospitals, then, communicated that they were considered sacred places. For the medieval mind, health care was holy work because it operated according to the logic of Christian health care: the spiritual well-being of both patient and caregiver was the ultimate purpose of the medical care provided. This is how one sees health care as a true vocation.

As the Catholic faith spread throughout the world, the vocation to Catholic health care always followed. Only eleven years after Christopher Columbus discovered America, construction began on the *Hospital San Nicolás de Bari* in Santo Domingo, Hispaniola. This Catholic hospital – the first built in the Americas – began operation in 1522. Two years later, Hernán Cortés founded the Immaculate Conception Hospital to care for the poor of Mexico City. Cortés would also found another hospital, dedicated to St. Lazarus. In the Age of Discovery, the vocation to Catholic health care continued to grow. By 1715, 150 years after the death of St. John of God, over 250 hospitals had been constructed throughout Europe and the New World through the assistance of the Order he founded.

### **Profession and Vocation, Science and Religion**

The loss of the Catholic faith due to Protestantism and the ensuing Enlightenment led to the idea of health care as a profession rather than a vocation. As Tim McHugh explains in his 2012 article in the *Journal of the History of Medicine and Allied Sciences*, Protestantism divided the scientific and religious aspects of health care, which led to a kind of secularization of hospitals. In Sweden, for example, the many previously Catholic hospitals were turned over to the control of the State. This division of science and religion caused the physicians and nurses in those hospitals to see themselves as mere professionals rather than as consecrated to the spiritual and physical care of the sick.

One can imagine how this affected the overall care of the patients being treated, as well as those treating them: hospitals that had once been uplifting communities of prayer and worship were now institutions that gave care only for physical health or comfort. The care of souls had become separated from the care of bodies. Ironically, this eventually led to the immense popularity of Catholic women's religious orders operating hospitals in Protestant countries. McHugh particularly documents the rise in prominence of the Daughters of the Holy Spirit in early modern Brittany. These women religious devoted their entire lives to the care of the sick, spiritually and physically, resulting in their hospitals being more desired by the suffering seeking treatment.

Fortunately for us, the vocation to Catholic health care found generous response in the history of our own country. The year 1736 saw the establishment of the first two hospitals in the territory that would become the United States of America. The first, established on March 31, was a public hospital in New York, while the second, established 40 days later, was the Hospital of Saint John in New Orleans, popularly called "The Charity Hospital of the Poor," so infused as it was by divine charity. Some thirty years later, it was that same divine charity, sparking the desire for the care of souls, that led St. Junípero Serra and his brother Franciscans to establish the 21 California missions, so dear to me as a native of the Golden State and having grown up just some three miles from the first mission church that he founded, San Diego de Alcalá.

While all the missions included an infirmary for the bodily care of ailing residents, one mission distinguishes itself as the first proper hospital in the history of California. On December 14, 1817, the Franciscans of Mission San Francisco de Asís, nicknamed "Dolores," founded Mission San Rafael Arcángel, to the north across the San Francisco Bay, as a *hospital-asistencia* to provide medical care for the sick and suffering members of Mission San Francisco. The

sunny climate of San Rafael was more conducive to physical health than the damp and foggy weather of Mission Dolores, which had been founded by the Apostle of California in 1776. Thus, the first hospital in the history of California flowed from the spiritual fruitfulness of St. Junípero and was born from the Christian commitment to medical care which he embraced, motivated by his love of souls.

The Fathers of Mission San Rafael knew by experience that the love of souls leads to the care of bodies, and that the care of bodies has as its ultimate aim the care of the soul. How many fortunate souls were prepared lovingly for eternal glory at San Rafael and the infirmaries of all the missions? I myself am blessed to have been born in a Catholic hospital, Mercy Hospital in San Diego, founded by the Sisters of Mercy in 1890. Known for many decades as San Diego's "baby hospital" – happily, a very common Catholic phenomenon! – Mercy is the oldest hospital in San Diego County, and it continues the great tradition of Catholic health care in California that began with the infirmary of Mission San Diego de Alcalá in 1769.

### **Vocation and Career**

We have seen how the riches of Catholic health care flow from the inseparable connection between the care of souls and the care of bodies. For Catholics in the field of medicine, this insight must lead to a firm conviction about another foundational Catholic principle with regard to serving the ultimate good: the primacy of vocation over career. What, though, does "vocation" really mean?

We speak of "vocation" in many different senses. There is first of all our common human vocation: happiness with God, what the Church calls "divine beatitude." Those of you more well-seasoned among us can define this vocation from what you memorized at the beginning of the Baltimore Catechism in response to the question, "Why did God make me?": to know, love and serve Him in this life, in order to be happy with Him in the next. For believers, though, there is also our common Christian vocation: to glorify God by worthy worship and to sanctify the world by the witness of a holy life and sharing the Good News to those still in need of receiving it. Finally, there is the personal vocation that God gives to each one. Traditionally, we categorize these as the religious life, the priesthood, marriage, and the single life – that particular way in which we live out our Christian calling to holiness.

Living such a personal vocation brings down into the concrete the demands of authentic Christian living; it can no longer remain in the abstract, because, in order to persevere, one must continually live Our Lord's command to die to self, pick up our cross, and follow Him. To make this point to Confirmation candidates, I often suggest to them that they ask a couple they know who have been married a long time – thirty, forty, even fifty years; their grandparents, an aunt and uncle, perhaps elderly neighbors – I suggest they ask them, "How did you manage to stay married to each other for so long?" I then tell them: "I guarantee you, they will not answer by saying, 'Because I always looked for what I was getting out of it.'" There is no way to persevere in one's personal vocation to the end of life without learning this lesson, which is why God gives each of us this gift, for this is how we become capable of receiving and sharing His love, which makes possible our communion with Him: our eternal, divine beatitude.

Yes, the point of our vocation is to get us to heaven. But there is another sense in which we can speak of a personal vocation, and that is as a calling to use the gifts God has given us for His glory and our sanctification. Some people have certain talents for certain things; they are so gifted, so driven by such talent, that they cannot be truly who they are unless they use their talents to their maximum potential. We speak colloquially about vocation in this way: "he

missed his calling to be an actor”; or, “she has a calling to be a teacher.” Some people even have a natural talent for making money; they have the calling to entrepreneurship. This is good when it is used for God’s glory and not one’s own, and for serving the common good.

Vocation is different from career, but we can see here that sometimes career can be part of one’s vocation. Our society used to have a culture of vocation: people worked in order to support their vocation (usually marriage and family), and even those who excelled in a career lived their career around their vocation and as a vocation. Now, however, we have a culture of career: this is where many people find their purpose in life. But you can change your career; you cannot change your vocation. Only by persevering in your vocation – even if that in some way involves the work that you do – will you become the person God created you to be, and achieve moral and spiritual excellence in life: that is, someone capable of giving and receiving love, and thereby realizing true and lasting happiness in their life.

Health care is a very good example of what I am talking about. In times past, doctors were almost like part of the family; they were famous for making house calls. While the medical field has become much more complex in our own day thus making such deep, personal connections much more difficult if at all possible (especially in urban settings), the medical professional (and especially the Catholic medical professional) must still interpret his or her career through this lens of vocation: a gift from God for serving the common good and for personal sanctification. It harkens back to what St. Augustine teaches: that there are ultimately only two ways of loving in this world. “Two loves,” he says, “built two cities: the earthly city was built by the love of self even unto contempt of God; the heavenly city was built by the love of God even unto contempt of self” – that is, dying to self, taking up one’s cross, and following Our Lord to Calvary.

We must, then, recover the sense of health care as a vocation. Indeed, I believe that the root cause of many of the evils present now in the field of medicine is this separation of career and vocation. Abortion, contraception, euthanasia, assisted suicide, in-vitro fertilization, and other forms of unethical and even sinful medical practices represent the ultimate divorce of career and vocation. When medical professionals choose these evil actions, they consent to the love of self even unto contempt of God. This is a betrayal of the very meaning of the vocation to health care, a severing of the connection between the care of bodies and the care of souls. This is easiest to see in the case of abortion, euthanasia and assisted suicide. Even the pagan Hippocrates knew that the first duty of the physician was to do no harm. The Catholic physician knows much more than that! The Catholic is motivated by his or her own love for God even unto the contempt of career or gain or comfort. The Catholic physician lives his or her career as vocation.

### **Another Good Shepherd: The Catholic Health Care Professional**

The Catholic physician or nurse, then, is, if you will permit an unusual application of the Gospel image, like the Good Shepherd Who lays down His life for His sheep. The Good Shepherd loves bodies and souls. Our Lord Jesus Christ went about healing bodily illnesses, always in the service of His primary mission of spiritual healing. For the Divine Physician, the care of souls was the animating principle of His care of bodies. He healed bodies because He wanted to heal the souls of the sick and suffering.

In calling men and women to serve as Catholic health care workers, Our Lord is extending His mission of bodily and spiritual healing. His Sacred Heart, pierced with divine love and full of compassion, is incessantly pouring forth a fountain of healing Mercy. In their

own sphere of influence, He is calling Catholic physicians, nurses, and other health care professionals to be the ministers of that Mercy to the sick. This is the vocation of Catholic health care. To paraphrase the Prophet Isaiah, how beautiful are the feet of the one who accepts the vocation to Catholic health care!

Faithful Catholic medical workers are good shepherds after the Heart of the Lord. They practice medicine only as a gift received from God. They are willing to risk even their own health to care for the souls and bodies of others. They nurse back to health those suffering from the dangerous plagues of ancient Rome or medieval Europe. They treat the cholera victims in the dangerous slums where no other physician will go. They rush boldly into the nursing home in danger of collapse from the ash of Mount Vesuvius, and come to the rescue of victims of earthquake and fire without counting the cost. They sacrifice out of love of God, pouring out God's love to others.

In my own city of San Francisco, during the onset of COVID-19, when much was still unknown about the virus or its lethality, it was the Catholic Charities personnel who continued their direct service to the homeless still living on the streets, even as others stayed at home to avoid contagion while continuing to collect government funding for the services they were supposed to provide. While the Catholic Charities workers do not deliver health care services *per se*, their willingness to serve the needs of the homeless during the pandemic is another, contemporary manifestation of the same spirit of selfless service that our early ancestors in the faith exemplified during the plagues in ancient Rome.

### **The Formation of Catholic Health Care Workers**

The vocation to Catholic health care is a deeply generous gift of the Good Shepherd to the Church. When He taught us about the shepherds after His own Heart, Our Lord also warned us about hirelings and wolves. Hirelings, He said, run away when the wolf comes because they work only for their own gain and have no love for the sheep. Hirelings are motivated by love of self; they have separated career from vocation. If they are medical professionals, they have separated the care of bodies from the care of souls, reducing medical care from being a vocation to merely a profession. This is seen especially in what some doctors, mainly medical researchers, will do for fame and fortune: they pursue honors for being the first to discover a breakthrough and win a prestigious prize or international recognition, but without any regard for the ethics of their research.

For a while, perhaps, it was easy enough in Western society to practice medicine as a hireling, so long as Christian principles were (more or less) still present in the accepted code of medical ethics. But things are different now. I would not say we have completely lost this Christian health care ethic. I think of health care workers in this current pandemic, who work themselves to exhaustion, exposing themselves to contagion and so jeopardizing their own health. Some few have even died as a result. This is a vestige of the sacramental vision of all reality which the Church gives us – the human person as the *imago Dei* – and which contributed to the building of Western civilization.

Such examples notwithstanding, generally speaking, in the current situation, it is impossible to remain neutral. In today's anti-life climate, which has influenced even bioethics itself, many medical care professionals are faced sooner or later with a clear choice about whether or not to cooperate with grave sin in their medical practice. And when compromises are made, one after another, with these fundamental principles, the hirelings eventually start acting like wolves, for example, by pressuring a woman to have a tubal ligation after giving birth to her

second child, or to abort an unborn child who is perceived to have some sort of health defect or could possibly involve a risky labor. There are those who deceptively call what they do “infertility treatment” when, in reality, they do not treat infertility at all, but rather manufacture embryos in a laboratory, often causing serious health consequences to women who are forced to super-ovulate – not to mention removing God’s beautiful gift of procreation from the marital embrace and destroying most of the newly manufactured human beings in the process. And yet again, there are those who will even directly inflict the greatest possible harm on their patients through assisted suicide or euthanasia.

The list goes on. You know better than I that nowadays many wolves are present in the field of health care. This means that our own Catholic health care facilities need to be hyper-vigilant in forming their health care workers in the proper Catholic vision of health care. We can no longer take this for granted. When Catholic health care was carried out by consecrated religious dedicated to this apostolate (not simply “work”), the Church had armies of health care workers who renounced all worldly pursuits to dedicate their whole lives to care for the sick, and who gave themselves over to a formation in which they were taken out of everyday society for years and deeply imbued with the tradition, ethos, theology and sensitivity of the Church’s vision of caring for the sick. Now, however, with Catholic health care institutions being run and operated by the lay faithful, the issue of formation is all the more critical. Precisely because, unlike consecrated religious, they live “in the world,” they especially need intense spiritual preparation effectively to carry on this apostolate.

I am reminded of what Pope Benedict XVI wrote in his encyclical, *Deus Caritas Est*, concerning the way that charity workers are to be fruitful in the Church: “Practical activity will always be insufficient, unless it visibly expresses a love for man, a love nourished by an encounter with Christ. My deep personal sharing in the needs and sufferings of others becomes a sharing of my very self with them: if my gift is not to prove a source of humiliation, I must give to others not only something that is my own, but my very self; *I must be personally present in my gift*” (emphasis added).

The same is true of Catholic health care workers: they must invest themselves in their gift; in this way, they truly encounter the one they are serving. In this encounter, both give, and both receive. This type of love is only possible in the grace of Jesus Christ. Without formation, our health care institutions will be devoid of this fruitful love. With formation in Christian love and mercy and solidarity, Catholic medical workers can live their vocations with the Heart of the Good Shepherd.

Catholic health care workers will do more than rebuild and defend Catholic institutions, of course. They will also witness to the Catholic vision of holistic, Christ-centered health care in secular health care systems, where the vast majority of them work. In addition, they will publish articles, engage in public debates, and contribute to forming ethical policies especially in secular hospital administrations, engaging in direct testimony to their colleagues and always advocating for the inseparable connection between the care of bodies and the care of souls. They will go out to the wolves and seek to make them good shepherds, which can be accomplished by the miraculous grace of the Holy Spirit.

One thinks of the marvelous conversions of Dr. Bernard Nathanson and Abby Johnson. Beyond these external efforts in the field, faithful Catholic health professionals will show themselves good shepherds in the way in which they live their lives. The power of the example of holiness was the gift to the Church of another famous Italian physician, St. Gianna Beretta Molla, who proclaimed heroically the truth of the Gospel of Life by sacrificing her own life so

that her child could safely come to term and be born – the crowning glory of a life totally dedicated to her family and her patients, famously giving special attention to mothers, babies, the elderly and the poor, and not charging patients who couldn't afford to pay her fees. She, like Dr. Moscati, exemplifies health care as a vocation.

**Conclusion: The Vocation to Personal Holiness**

The simplicity of the Gospel is liberating; the good shepherd fights the wolf primarily by maintaining his own personal holiness. This has long been the secret of fruitfulness in priestly ministry, and the same logic can be applied to fruitfulness in the vocation to health care. What allowed those ancient Christians to care for their brothers and sisters in the plague? What caused the bishops and abbots of Christendom to establish hospitals in every Christian town? How did St. Giuseppe Moscati have the courage to live his commitment to the sick so deeply as a celibate physician in *bella Napoli*?

The answer was, is, and will always be Jesus Christ. The whole tradition of Catholic health care exists only because souls who were known and loved by the Good Shepherd sought to return that knowledge and love to Him in the care of bodies and souls. There is a story from life of St. Giuseppe that illustrates this. One day, Giuseppe was very frustrated with the politics and rivalries at the hospital and university, and he went to pray before the beautiful statue of *Cristo velato* at San Severo. Kneeling before the veiled Christ and filled with frustration, Giuseppe asked Our Lord insistently: “Where are you?” As he knelt in prayer, Giuseppe was illumined interiorly with a clear understanding of his vocation: he was to find the Lord Jesus in the sick and suffering for whose bodily and spiritual health he was called to labor.

That was everything for Dr. Moscati. He never looked back. Knowing and loving the Good Shepherd: that is how health care is lived as a vocation, and how the care of bodies becomes the care of souls. It is an exalted vocation, indeed, to be called to Catholic health care. And it is a calling that flows directly from the Heart of the Divine Physician Himself. Thank you for accepting and excelling in this sublime call.