

The Domestic Church

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Divine Physician

"The Church knows that this Gospel of life, which she had received from her Lord, has a profound and persuasive echo in the heart of every person ---- believer and non-believer alike ---- because it marvelously fulfills all the heart's expectations while infinitely surpassing them. Even in the midst of difficulties and uncertainties, every person sincerely open to truth and goodness can, by the light of reason and the hidden action of grace, come to recognize in the natural law written in the heart (cf. Rom 2:14-15) the sacred value of human life from its very beginning until its end, and can affirm the right of every human being to have this primary good respected to the highest degree....."

The Gospel of Life
By John Paul II

In these words we are comforted, knowing that Christ, the greatest Physician of all, heals us and comforts us in all of our trials, from the beginning of our life to its very end. In these times, there is an ever increasing need for awareness of the boundless love of God, our Creator, who "by his incarnation, has united himself in some fashion with every human being."⁽¹⁾, therefore revealing to us the incomparable value of every human person. It is He, who is the inspiration for all those in the medical profession who truly seek to "cure", whether they acknowledge him or not. Let's pray that Christ guide us, as we are faced with decisions regarding the care of any human life He has given us charge over.

Dear Jesus, Divine Physician and Healer,
Pray for us!



Erin Rapp
Editor in Chief,
Ruth Andreas and Anne Trausch, Associate Editors.

1). *Pastoral constitution on the church in the Modern World Gaudium et Spes*, 22.



A Woman's Place

Raising Physicians in the Domestic Church

by Dr. Ann Trausch

Your 23-year-old medical student hustles to the hospital in the pre-dawn hours. On the OB floor, mothers have given birth overnight and the halls are bustling with activity. Senior residents hand out the daily assignments, including discharge orders for mothers and babies returning to the peace of home. As part of the discharge plans, your medical student is told to write a prescription for birth control pills. Will your son/daughter be prepared for this situation?

The Domestic Church is the ideal training ground for physicians-to-be. Many of the intangible qualities that make a good physician are formed in the family long before the first anatomy class in medical school. Let us consider three areas crucial to practicing the art of medicine that will distinguish our children from their peers: the art of conversation, the practice of the corporal works of mercy, and an understanding of basic medical ethics.

As far back as the toddler days, children begin to learn the essential art of conversation. The family by its nature provides numerous opportunities to draw out members through conversation. With the current trend toward digital communication, we need to assure that our children are learning how to converse well with others. This skill is vital to the healing of those in need and takes years to develop. The stress of col-

lege and medical school is often at cross-purposes with developing good conversation skills. What a gift to have a physician skilled at gathering information while maintaining the dignity of the patient! A physician able to recognize Christ the Hidden Guest in an anxious or angry patient who needs understanding and a patient listener!

A PHYSICIANS PRAYER

DEAR LORD,
THOU GREAT PHYSICIAN, I
KNEEL BEFORE THEE.
SINCE EVERY GOOD AND
PERFECT GIFT MUST COME
FROM THEE, I PRAY:
GIVE SKILL TO MY HAND,
CLEAR VISION TO MY MIND,
KINDNESS AND SYMPATHY
TO MY HEART.
GIVE ME SINGLENESS OF
PURPOSE, STRENGTH TO LIFT
AT LEAST A PART OF THE
BURDEN OF MY SUFFERING
FELLOWMEN AND A TRUE
REALIZATION OF THE
PRIVILEGE THAT IS MINE.
TAKE FROM MY HEART ALL
GUILF AND WORLDLINESS
THAT WITH THE SIMPLE
FAITH OF A CHILD I MAY
RELY ON THEE.
AMEN

As children mature, the opportunity to practice the corporal works of mercy abound in the

Domestic Church. Attending to the needy requires time and selflessness. These are assets that will be called on again and again in the life of a physician. A valuable way to learn to turn the focus away from ourselves, perhaps overlooked as being too adult for a child to experience, is a funeral. Funerals offer a unique opportunity to teach our children the art of offering condolence to those grieving. Suffering can be eased by lending an ear to talk about the important life that just left the world, helping with the reception after a funeral service, or serving for a funeral Mass. Family illness is another occasion to ease the burdens of being sick. Are the sick in our families expected to "keep up" and/or allowed to be alone or lonely in their suffering? Teaching children how to visit the sick by starting with those closest to us is of great value. Being alone in a bedroom due to illness invites the opportunity to teach children how to help someone pass the time through reading, drawing, or playing cards. What a great lesson to tie this work of charity to the company our Lord craved during his Agony in the Garden. To those of us who are able, a day spent in bed sounds appealing until you realize you must ask for assistance for the most basic needs of using the bathroom or food and water. It doesn't take long before you feel as though you are inconveniencing those around you with regular, reason-

able requests for help.

As our children progress through high school, their capacity to debate a subject blossoms. This is an ideal time to talk specifically about the medical profession's hostility toward the transmission of life. Many physicians deny the manner in which birth control pills work to make the womb an inhospitable place to the development of a fragile life and, in so doing, end its life. The explosion of infertility treatments also offers rich ground for discussion about what the Catholic Church allows. We can also help our children gain an

understanding of medical ethics through debate, which includes taking the opposing side of an issue and then refuting it.

Finally, as children enter college, they are in a unique position to influence a friend who may find herself in a crisis pregnancy or the unexpected father of an unborn child. How important it is for them to have a beginning understanding of how to be present for and offer help to those in need of mercy and compassion! Perhaps it would be helpful if they volunteered at the Birthright office nearest their college or university?

It is too late to arrive at medical school without the tools necessary to show compassion and an understanding of medical ethics. We can prepare our children in their formative years for a vocation in the medical profession by nurturing the art of conversation, practicing the corporal works of mercy, and instructing them in basic medical ethics. Let us train our children in those skills useful in many vocations but vital to returning medicine to its proper role of healing and respect for life at every stage.

Cancer Patient Cancels Living Will Says Many Support Euthanasia for Others, Not Self

by Antonio Gaspari

RIMINI, Italy, AUG. 28, 2008 (Zenit.org).

Reprinted with Permission from Zenit

People in favor of euthanasia often support it "for others," without thinking about the end of their own lives, contends a cancer patient who changed her mind about life after she was diagnosed with her terminal disease.

Silvie Menard, a French oncologist and consultant at the Center of Experimental Oncology of the National Institute of Tumors in Milan, Italy, spoke of her change of perspective in a conference at the Rimini meeting organized by Communion and Liberation. The annual meeting is under way through Saturday.

She said she had arranged for a living will, but as soon as she discovered that she was ill with cancer, she changed her mind. Menard, a specialist in the study

of cancer and the new medicines to combat it, said that after years of work with gravely ill people, she was in favor of living wills. But when she discovered that she herself had a bone marrow tumor, her life "took on a different meaning."

"Since knowing that I am sick, I feel like living every instant of my life, precisely because I realize that it is the only one I have," she said.

Doubts

Menard said that at first she had doubts about whether or not she should undergo treatment -- doubts she said assailed every patient.

She knew it was very difficult to be cured, but "incurable is different from untreatable," she specified.

In regard to proposals for euthanasia and living wills, Menard said at a press conference that "many

in Italy are in favor of euthanasia for others; they don't think about the end of their own life."

"I can tell you that when one is healthy, one does not know how one will react in the case of sickness; that is why the testament written by a healthy person is meaningless," she added.

Menard explained that she is "opposed to euthanasia because the right to die then runs the risk of becoming a duty."

During the same conference, Giancarlo Cesana, professor of Applied General Hygiene of the University of Milan, explained that "life is a mystery. We feel it, we perceive it, but we haven't created it, because it is something infinite and hence not measurable."

"Medicine," the professor added, "was born in the Middle Ages to do what was offered in the classical era: to cure. [...] If this is impeded, medicine is finished."

Spiritual Fatherhood

End of Life Issues

by Mark Andreas

From a lay man's perspective

Recently, I had a conversation with a person I consider to be a Catholic with a good heart, in which the topic of end of life issues arose. His opinion was to let people near death, die with an overdose, rather than to suffer a prolonged death. I was taken aback! I went on to dialogue with him on the teachings of the Church. By the time I was done explaining the Church's position, he began to reconsider. Something struck me in that conversation, something that seems to resonate across the board with people of many different religious beliefs: our understanding of Mercy.

When we hear people say that Dr. Kevorkian and people like him are monsters, we should give pause to that knee jerk reaction, step back, and think for a minute. Why does a person like Dr. Kevorkian think the way he does? I propose that the answer is his misperception of Mercy. The media has made a hero of Dr. Kevorkian and his cause, because to some he espouses a credible notion of Mercy.

Hardly anyone I know wants to take on suffering voluntarily. The culture we live in would consider a desire like that to be masochistic and unhealthy - even sadistic. This is the way the world sees suffering, and we are brought up to believe that suffering should be relieved at any cost.

Relief of suffering *is* a part

of our Christian ethos, which is rooted deeply in our Western culture, so much so that we have welfare and medical benefits for the poor, and unemployment benefits for the unemployed. We also have hospital systems developed by the Catholic Church in Europe, in the US and throughout the entire world for the purpose of alleviating suffering and nourishing the soul. But we also see in Christianity a beautiful and redemptive side to suffering that is absent from the world view.

As Catholic Christians, we know that suffering can be salvif-

ic when offered up to Christ and joined to His Passion (suffering) and death. We pray for the person who is suffering, and even ask that person to pray for us, because in their pain they are much closer to God. By offering our own suffering to Christ, we join Him on the cross and in a special sense, enter into the mystery of redemption. He has done all of this for us already, but He is ever present on the cross through time, ever offering Himself for us as an oblation to the Heavenly Father. It is in

this manner that our suffering joined to His makes sense, because it is redemptive. I remember hearing Bishop Fulton J. Sheen say that if all the suffering people in all the hospitals of the world offered up all of their pain and suffering to Christ, the world would be converted. What a powerful gift! What an awesome thought: that my suffering can help another soul!

Furthermore, for those who help someone suffer well, is to help them grow closer to God. This means that we are there for

In truth, dying a merciful death is to die in a perfect state of Sanctifying Grace, with the Church present, and with our loved ones there praying at our last breath.

them in prayer, and in giving physical and emotional comfort. We live mercy and we help another to suffer right through to the end, when our Creator will take that person into his Loving and Merciful embrace.

True Mercy and Love is to help each other achieve heaven, which is our true home and ultimate happiness. This is Man's final end, "The Beatific Vision," which is to see the face of God. And as God is our Creator and holds our very existence in His

hands, it is He alone who gives and takes life. As privileged stewards, our life belongs to Him, not to us. Therefore, it is not our place to take another person's life, even for the sake of Mercy.

As a former paramedic, I learned a valuable lesson about life that I'll never forget. I noticed that some people whom I helped in a code situation responded to my ministrations. Others did not. Why? Because God holds everything in His hands; we do not. This is something that we can't begin to understand unless we see through the eyes of Faith. Only Faith gives us the eyes we need to see God at work in our lives, and to recognize that He holds every-

thing in the balance.

In truth, dying a merciful death is to die in a perfect state of Sanctifying Grace, with the Church present, and with our loved ones there praying at our last breath. The medical help we receive is for the purposes of alleviating pain and providing nourishment and comfort, until God calls us home to Heaven.

We don't hold the "plug" in our hands, nor do we provide the "electricity" for the soul. Mercy understood from the Christian perspective is far more complete and beautiful than the world view, because it addresses the needs of the soul to the end.

Ask yourself, "Is real love

and mercy to have you, a doctor, or a relative decide whether or not you should live or die?" How can I or my representatives possibly outguess God, who knows all things? How can we know the hour, the day, or the minute when God wants us to leave this earth and return to Him? Will we come before God with the gift of our lives resting in His hands, or will we come before Him having torn from His loving hands that same gift, now mangled and disfigured, in our own hands? As for me, I choose Christ's way and the teachings of His Church.

footnotes:

Catechism of the Catholic Church. 1473, 1475, 2447"

A Book Review

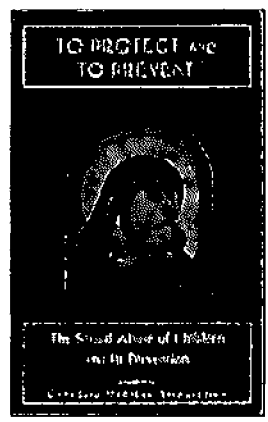
Submitted by Ruth Andreas

I'd like to recommend an excellent booklet, printed in 2006 by the Catholic Medical Association entitled To Protect and to Prevent, the Sexual Abuse of Children and its Prevention. The task force responsible for the booklet is made up of Catholic professionals from around the country.

The report includes summaries of professional analyses of the various sexual abuse prevention programs for children in use during the last couple of decades; programs such as Good Touch, Bad Touch; Confusing Touch; Child Assault Prevention, CARE and Talking About Touching. The gist of the task force analysis of this material is

1) that the programs have been ineffective at delivering what they promise: "Research of the last two decades demonstrates that it is not effective to ask the

potential child victim to prevent the abuse. Children cannot be empowered or expected to prevent abuse, either in Church or in society.";



2) that the primary responsibility for protecting the children lies with adults;

3) that the programs often violate the innocence of our children.

The booklet also includes solid

information on the "science of child development", as well as risk factors for victims of sexual abuse and psychological risk factors for offenders.

It is, of course of the highest importance that parents inform and educate their children for moral and responsible relationships. "Secure attachment relationships with parents are protective factors against abuse"; also discouragement of societal tendencies toward narcissism, violence and moral relativism.

"The response of the Church to the sexual abuse scandal should accord with the Catholic faith teachings contained in the document The Truth and Meaning of Human Sexuality."

To obtain a copy of To Protect and to Prevent..., visit the Catholic Medical Association website at: www.cathmed.org.

Questions Answered

Administration of food and water to a patient in a "vegetative state"

by Brian T. Mullady, O.P.

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Homiletic and Pastoral Review

Question: *Has the Holy See issued any further clarification on the issue of food and water to patients in the "vegetative state"?*

Answer: The Holy See has recently clarified the teaching on patients in the "vegetative state" in response to some questions from the United States Conference of Catholic Bishops about Artificial Nutrition and Hydration (September 14, 2007). In this clarification they state unequivocally that "the administration of food and water even by artificial means is, in principle, an ordinary and proportionate means of preserving life. It is therefore obligatory to the extent to which, and for as long as, it is shown to accomplish its proper finality, which is hydration and nourishment of the patient. In this way suffering and death by starvation and hydration are prevented."

The Congregation for the Doctrine of the Faith then comments on this answer with an examination of the history of papal teaching on this question. An address Pius XII gave to a Congress of Anesthesiology on November 24, 1957 is quoted concerning the ethical principles involved in this discussion which are two: "the patient and those

caring for him or her have the right and the duty to provide the care necessary to preserve health and life" and "this duty in general includes only those means which, considering all the circumstances are ordinary, that is to say, which do not impose an extraordinary burden on the patient or on others."

**Catechism
of the Catholic
Church**
Part III, Life in Christ
paragraph 2280

"Everyone is responsible for his life before God who has given it to him. It is God who remains the sovereign Master of life. We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls. We are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of."

The Congregation notes that some try to use these principles to justify withdrawing food and water. In fact, the teaching in question in the address of Pius XIII was the issue of a resuscitator. The Congregation clearly teaches that the second principle does not apply to artificially giving food and water to a patient who cannot do these things for himself. Instead, when it comes of patients in need of artificial means of nutrition and hydration the first of the principles is the operative one. These are not extraordinary means. As recently as March 20, 2004, John Paul II has confirmed this teaching.

The Congregation in light of the constant teaching of the Magisterium on this issue wishes to affirm in no uncertain terms "first of all, that the provision of water and food, even by artificial means, is in principle an ordinary and proportionate means of preserving life for patients in the 'vegetative state': "It is therefore obligatory, to the extent to which, and for as long as, it is shown to accomplish its proper finality, which is the hydration and nourishment of the patient'. It also wishes to affirm that "this ordinary means of sustaining life is to be provided also to those in a 'permanent vegetative state', since these are persons with fundamental human dignity."

Domestic Dwellings

Curriculum for the Culture of Life

by Ruth Andreas

A Curriculum for the Culture of Life: A Curriculum based upon the Principle of the Incarnation
by Mary Daly. The Hedge School, June, 2000

The process of learning in our time is riddled with the effects of relativism: thesis and anti-thesis, theory and anti-theory which may or may not produce something akin to Truth. This process creates, I believe a ground of insecurity in which the young mind finds it difficult to stand firm and face bravely all that it does not know.

The quest for learning should rather be taken up within a great blanket of Consolation, resting in God. What if each student could begin the quest assured of the existence of Truth, believing it could be found, and in every field of learning, though perhaps sometimes "in a mirror dimly" (1 Cor.13)? , This approach would provide an antidote to the way of relativism, a relativism that rocks most of today's schools, both sacred and secular.

In light of these comments, I was delighted to pick up Mary Daly's Curriculum for the Culture of Life. The curriculum is suitable for multiple applications: primary and secondary schools, the home, and may I dare suggest, the university? The curriculum is built upon incarnational theology. The author writes: "Our faith in the Incarnation leads us to believe that

God desires to enter into and bless the life of man as he lives on earth". God wants to lead the process of educating his people into knowledge, love and service of Him. He does this through His Church. "To the Catholic Church, in a unique and profound manner, God has entrusted the revelation of

formation of the [life within], that is the spiritual, mental and emotional life of the human person, a mysterious union of body and soul, indwelt by the Spirit of God." (p.5) It also identifies education as "the means of maintaining and propogating culture", the Culture of Life, as we faithful have come to know it. This is the ordering of the culture without, in every aspect of life.

Mrs. Daly delineates ten major fields of learning. Beginning with theology, the "Queen of the Sciences" she goes on to identify and summarize the ten key fields in an accomplished and fresh way. For instance, the field of psychology is reoriented as Christian anthropology. The field of politics and government (civics) is framed by a renewed vision of true civility in society. There is much to glean here as one sets out to explore the fields of science, math, history, art, literature, philosophy and music. The author also offers practical helps for building a curriculum.

Mary Daly's Curriculum for the Culture of Life rests on a ground of confidence in God, who will lead us to Truth in the various educational endeavors we take up. Trusting in God and His Church, we can learn without fear.

To find out more about the Curriculum and other work by Mary Daly, visit www.hedgeschool.homestead.com



St. Gianna Beretta Molla
Martyr of Maternal Love

"Be living witnesses of the greatness and beauty of Christianity."

St. Gianna spouse, mother, physician, exemplary professional, offered her life in order not to violate the mystery of the dignity of human life.

Born: October 4, 1922
Died: April 28, 1962
Canonized a Saint: May 16, 2004

his Will". (p.5) Thus, the Church has a unique and critical role in the education of all people.

The curriculum identifies the primary goals of education: as "the comprehensive service and

Roman Catholic Books

Partial support for this ministry has been provided by Roman Catholic Books. Founded in 1985 Roger McCaffrey and his sister Maureen Williamson have brought to the Catholic community a great number of out of print and current Catholic books, many of which cannot be found anywhere else. Most of their books are quality bound hardbacks, which are made to last a lifetime and to be passed on to the next generation. We wish to thank Roger and Maureen for their support and for their vital ministry to the Catholic Church.

You can visit their web site on line at: www.booksforcatholics.com

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St. Luke, Apostle, Evangelist, and Beloved Physician; Pray for us!

Catechism of the Catholic Church

Paragraph 2294

“...science and technology by their very nature require unconditional respect for fundamental moral criteria. They must be at the service of the human person, of his inalienable rights, of his true and integral good, in conformity with the plan and the will of God.”

Mission Statement
Founded in January 1995, St. Joseph's Center for the Domestic Church is a Catholic apostolate dedicated to serving the family. Our mission is to help families recognize their role as the "domestic church," the Church at home, and to re-establish the home as a sacred refuge.

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