

Archbishop Vincenzo Paglia
THE MEANING OF A MOTHER'S SUFFERING
Marialuisa Ferrari Lectureship for Life
Houston, September 16, 2018

Your Eminence, Your Excellencies, Esteemed Professors, Ladies and Gentlemen,

Thank you very much for your presence at this wonderful event, and even more, thanks to Mauro Ferrari and the board of the Marialuisa Ferrari Lectureship for Life for giving Pope Francis, through myself and the Pontifical Academy for Life, your witness of sincere attachment to him and gratitude for his Gospel service to the Church and all humanity.

The award also recognizes the work that the Academy, which I have the honor of leading, has been doing for two years, in a project called PALLIFE, which fosters and spreads awareness of palliative care. I know how much you appreciate that this question, whose technical medical aspects are extremely important and have benefitted without measure from the contributions of earlier recipients of the award, some of whom are here with us this evening, cannot be limited to those technical aspects.

In reality, the question of palliative care highlights the broader and crucial question of how to care for those who are in the last days or moments of their life in this world, and to care for them as persons and not only as patients. Taking care of these persons means allowing the last days of their lives to be truly days of life, dignified days, days of accompaniment, days of love, rich in gestures of reconciliation, delivered from the physical pain that brings so much fear and anguish to all of us. Fear of loneliness and of intractable pain are among the main reasons why some seriously ill patients begin to think of euthanasia as an acceptable way to avoid suffering, to not be a burden, to take leave of this world without bothering anyone. The promotion of palliative care (as the Pope recently said in his message to the palliative care conference that the Academy for Life held in Rome last February) depends on an opposite approach. It entails adoption of a series of protocols full of an intelligent love that makes them effective and that are able to fill with meaning and affection the last days of the lives of many seriously patients. The Congress that will begin tomorrow is the fruit of cooperation among the Pontifical Academy for Life, the Houston Methodist Research Institute and the Department of Palliative, Rehabilitation & Integrative Medicine at The University of Texas MD Anderson Cancer Center; and it will, I am sure, offer us much food for

thought about the medical and spiritual dynamism that is generated by palliative care .

And I particularly happy that this evening we are also expressing our common commitment to the development on palliative care by issuing a joint declaration of support in this area: I am honored to sign this declaration together with Bishop Scott Jones of the United Methodist Church. We are both grateful as well to Cardinal Daniel DiNardo who, with his presence, tonight underscores how all persons of good will can see the great benefit that our efforts will produce in those who are passing from this life to life everlasting.

Our meeting here tonight—thanks to the Marialuisa Ferrari Lectureship for Life—keeps alive the memory of Doctor Mauro’s bride Marialuisa, a woman, wife and mother who died nineteen years ago from a disease that was debilitating, painful and incurable. In recent days, I have been asking myself about the meaning of the pain a mother like Marialuisa feels when faced with an illness like the one that took Marialuisa away from those she loved, who loved her then and who love her still no less today. I remembered the many stories of suffering mothers that in my years of pastoral ministry I have had the grace (because it is a question of grace) to hear, sometimes in confidence, and to suffer over as I heard

There is one thing common to almost all these stories that struck me particularly, and it makes the pain of a mother different from any other pain. A mother in pain, even in great pain, does not speak to you first of her illness, of her serious condition or of her sometimes truly unbearable pain. All this is borne in silence, perhaps appearing only from an grimace of pain or an attempt to find a posture that is even slightly more comfortable. No, this is not what a dying mother speaks about. Her concern is not for herself or her condition.

Always, a gravely ill mother will speak to you of her children, of their future that she will not live to see, of the troubles they will have to face without her help, that she can not accompany, of the difficulties they will have to face without her help, of the somehow welcome sleepless nights of worry she will not live to suffer through, of never being able to care for and protect the fruit of her womb, of no longer being close to her husband, the father of her children. The pain that comes from not being able to do what mothers do sometimes creates in her a sense of unbearable guilt, a feeling of failure that is always unfair but sometimes inevitable.

This, I believe, is true pain for a mother: not being able to care for the life she has dreamed of and brought into the world. No palliative care can diminish it; no clinical protocol is effective, no opioid can dull it.

And yet, the failure of medicine's technical greatness might itself be a moment of grace.

Certainly, we must be clear. Our task is to strive mightily for the defeat of pain and suffering experienced by those who are ill. It is no longer acceptable for people to live out their last days in pain that is unworthy of our humanity. This cannot be in our Western world where we have advanced medical capabilities, and it is in a way even more disgraceful in lands where poverty is the most severe. Blessed are those men and women who dedicate their lives to scientific research that gives life to a fellow human being's last days, especially if the person dying is poor and dying alone.

The pain of a dying mother, however, is different and can't be eased. Really!

In a world increasingly characterized by withdrawal into oneself, where personal well-being is what matters most, the grief of a mother who learns she will no longer be able to care for her children is a precious witness, a seed that must yield a fruitful harvest. In a time when narcissism seems to have taken over the hearts and minds of many, the pain of a mother who is no longer able to die for her children is a message from heaven. It is a pain that should not be anesthetized. It must be regarded with admiration, protected, placed on a candlestick so that it may shine before all, as Jesus invites in the Gospel.

Christian revelation points to the cross of Jesus as the source of that dynamism that gives a basic meaning to history and to the existence of every man and woman living on this Earth. Remember, however, that we are not born to suffer. Not even Jesus wanted this. He probably blessed the sponge soaked in vinegar that offered relief to His lips while He was nailed to the cross. We have been created to love and to give life, even if it costs us suffering. Every mother on Earth teaches this to us and delivers this message to us in a special way, revealing the basic plan that shines through the complicated weave of human life.

In the third chapter of Genesis, which tells the story of original sin, the place of motherhood is shown immediately. The angel curses the serpent who deceived humanity and prophesies, “Her seed will crush your head” (Gn 3,15). Boldly, we Christians proclaim Jesus Christ, Son of God and Savior of humanity; but this text that proclaims He is able to defeat the world’s evil presents Him as mediated—“born of a woman,” a son. The mystery of God, that is, of the gift of life, of diamond-hard passion, of care until death, finds its home in the mystery of the seed, born of woman, of generation, of the transmission of humanity and of the sense of the divine that is written in the universal experience of being a son. As a son, with all joys and worries, is the way God decided to “give human life” to the Son who conquers evil for “every man who comes into the world.” Grace and salvation come from there, from a

woman's womb, the gateway to life , the keeper of pain, the passageway for God.

All this reveals a mother's sorrow. We must not wipe out that sorrow, but rather preserve it with gratitude. This is what is asked of Mauro, Giacomo, Chiara and Kim, who with Paola, Ilaria and Federica, continue today to welcome in a family the mystery of God that is revealed in a Son and in the concerns to which His coming gave rise.

This precious institution that is the family—a place where the Divine is revealed—must rediscover today its vocation as source of human interactions that reflect the family and therefore give life to a care for others, particularly the sick, that is both paternal and maternal. It is within this framework that the profession of the physician and of anyone involved in healthcare is situated. It is a deeply human dimension that is also profoundly evangelical. Briefly, I would like to point out how the Gospels present Jesus as one who devotes his life to caring for and healing the sick. It is not by chance that the majority of the miracles reported in the Gospels are healings of the sick. For this reason, the Christian communities, from ancient times, have not hesitated to call Jesus “doctor of Christians” and to call the Church “a clinic.” The beautiful image used by Pope Francis of the Church as a “field hospital” is heir to that tradition.

My wish for all of you who are active in the various fields of medicine, is that you can live up to this maternal aspect of your professional responsibility. We can not be only skilled and experienced, up-to-date and brilliant; we must be professionals with great hearts, able to appreciate the human quality of care. The Gospel Beatitude that proclaims “Blessed are those who mourn, for they shall be comforted” (Mt 5: 4), does not refer only to those who themselves mourn, but also to those who make their own the sorrow of others, those who shed the tears of others, until we can no longer distinguish between those who care and those who are cared for, those who console and those who are consoled. We honor this evening the memory of a mother’s sorrow, and we commit ourselves to work intensely so that no woman again suffers as Marialuisa suffered. We commit ourselves to ensuring that all men and women, and us first of all, accept to suffer for, to feel the pain of, and worry our endless worries about, those dear ones whom the Good Lord entrusts to our loving maternal and fatherly care.