

# COMPASSION HAS A FACE

## The Place of Catholic Health Care in Christ's Redemptive Mission

**I**n the encyclical *Redemptoris Missio*, Pope John Paul II articulates the mission of Christ entrusted to the church in light of a broad view of the human enterprise. He suggests that Christ's mission is still only beginning, thus calling for a wholehearted commitment to it. He looks to a changed and changing world.

Of particular importance is his treatment of the contemporary equivalents of the Areopagus. The Areopagus in Athens represented the cultural center for dialogue and exchange of ideas (cf. Acts 17:22-31). Pope John Paul employs the Areopagus as a symbol of the new locales in which the good news must be proclaimed, and to which the mission of Christ is to be directed. Of these various locales, John Paul singles out the world of communications, culture, scientific research and international relations which promote dialogue and open new possibilities. Solutions to pressing problems are to be studied, discussed and worked out precisely in these and other locales, problems and concerns such as:

- urbanization
- the poor
- the young
- migration of non-Christians to traditionally Christian countries
- peace and justice
- the development and the liberation of peoples
- the rights of individuals and peoples, especially those of minorities
- the advancement of women and children
- safeguarding the created world

Also, John Paul takes stock of the desperate search for meaning, the need for an inner life, and a desire to learn new forms and methods of meditation and prayer. The mission is to address these and other pressing concerns amidst these locales

of the new Areopagus, bringing the Gospel of Christ to bear in these "places." In so doing, the Christian community is at the service of furthering human freedom by proclaiming Jesus Christ.

It comes as something of a surprise that the late Pope John Paul made no reference to health care as a new Areopagus for the redemptive mission of Christ.

It is now commonplace to speak of the changing face of Catholic health care. Further, it is commonly recognized that not all the changes are for the good. With diminishing numbers of religious in the ranks of Catholic hospital administrators and personnel, with market forces and profit margins sometimes trumping a hospital's mission, with technological developments making it possible for surgeons to do medical procedures without any personal contact whatsoever with a patient-become-customer, how are we to speak rightly and meaningfully of the redemptive mission of Christ continuing in the changing face of Catholic health care?

With strong competition from hospitals that provide same or similar services, together with the expectation of meeting the same gold standards of competence as all others in the profession, is there room enough for compassion in the context of the mission of Catholic health care?

*Her face signaled a mix of sadness and disappointment. Or was it resignation and defeat? Or something else I could not decipher. She told me that she had come from her home country to the United States to study medicine. Having completed her residency in one of the larger Catholic hospitals on the East Coast, she narrated the many advantages of her training. When I asked her about the differences between the practices of medicine in her home country and those in the United States, she replied*



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*without hesitation: "In my country we still treat patients like people."*

Could it be that patients are people only through the eyes of compassion? A costly loss, compassion! Without it, perhaps Catholic health care cannot be a new Areopagus for the redemptive mission of Christ.

Ripped from its biblical roots, compassion is all too often reduced to a feeling of sympathy, an empathetic connection with one who is weak, vulnerable or in pain. While compassion is a feeling with and for another, it is much more.

Compassion remains a feeling unless and until it has a face. Jesus Christ is the "fleshliness" of the compassion of God. The face of the Christ is the face of compassion gazing upon those who are wounded and weak; the last, lost, littlest and least.

In an effort to understand the place of compassion in Catholic health care, the biblically informed philosophical work of the French Jew Emmanuel Levinas on "the face" of "the other" might yield insight.

***The first movement in compassion is to look long enough into the face of another person and to "read" the face of pain and suffering.***

In seeing the face of the other, especially the face of one who is vulnerable and in pain, the face makes a moral claim on me: "Do not hurt me. Do not kill me. Let me live!"

The first movement in compassion is to look long enough into the face of another person and to "read" the face of pain and suffering. This entails lingering long enough to let the other in all her brokenness and weakness show forth in the light. Levinas calls this "the face's epiphany." Often, a patient feels like nothing, reduced to the point of invisibility by pain and diminishment. This first move in compassion allows the patient to be seen in her "nothingness," to sense the possibility that may be born of her vacuity.

The second movement in compassion is to let oneself look long into the face of another and allow the other to look upon me in all the "nakedness" of his face. I must be willing to go face to face with the other, to find what Levinas calls "enjoyment" in this naked face-to-face gazing upon one another.

The third movement in compassion, the moment born of the face-to-face encounter, is one

of looking with the other to the horizon of what is beyond, to what will be given, even if it is not recovery to the health the other once enjoyed.

This is to "face up" to whatever lies ahead, to face up to what is yet to come, to look long at how one will be "in the face" of an unknown future, even and especially diminishment and death.

Thus, true compassion is not just *feeling* the pain of the other, nor is it offering unreasonable assurances of improved health. This feeling has a face. "Facing up" "in the face" of what is yet to come by "reading the face of the other" in a "face to face" encounter is the dynamic of compassion through which the sick and suffering person is fortified to endure the truth that he will most likely never live as he once did.

Compassion, then, is turning to another in weakness, pain, suffering and 1) reading the face; 2) being face to face with the other whose face I behold; and 3) seeing beyond the face so as to help the other "face up" to what is to come and live "in the face" of what is unknown. Thus, the place of compassion in the redemptive mission of Christ through Catholic health care entails so much more than relaying information related to diagnosis and treatment options. There is so much more to this redemptive mission than the effective delivery of medical care. Above all, this mission calls for the recognition that the sick person is *dealing with a life, not just a body*. But this we come to know only by looking into her face, being with her face to face, and fortifying her to face whatever might lie ahead.

Such an approach to compassion in the mission of Catholic health care is given ample warrant in both the Hebrew and Christian Scriptures. One passage will have to suffice here. In the account of Peter healing the crippled beggar in Acts 3:3-10, the sick man sees Peter and John as they are about to go into the temple. He asks them for alms. Peter "looked intently at him, as did John, and said, 'Look at us.'" The crippled beggar fixed his attention on them. Peter and John have no silver or gold to give him. But what they have to give is his. Healing comes as Peter and John read the face of the crippled beggar, looking upon him with an invitation to look upon them in return. In this encounter, the sick one allows his nothingness and nakedness to be seen in his "face's epiphany." And in this light emerges the openness to possibility that can only come as a gift. ■

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