

PERSISTENCE AND PAIN

Women and Healing in the Gospel Offer Insights To Catholic Healthcare Providers

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In each issue of *Health Progress* in 1995, the journal's 75th anniversary logo highlights an article of particular significance to the Catholic health ministry.

These are difficult times for Catholic healthcare providers. Almost daily we hear of our hospitals closing, being bought by for-profit healthcare organizations, laying off hundreds of workers. It seems that the old order is passing away and Catholic healthcare must adjust radically to this new situation. So we ask, as did Jesus, disciples, "Lord, to whom shall we go?" (Jn 6:68).

I suggest we turn to an ancient source, our own Scriptures, for enlightenment on this situation. Two stories from Mark's Gospel offer helpful insights to persons engaged in the institutional context of healing. These stories are of the woman with the "flow of blood" (Mk 5:25-34) and of the Syro-Phoenician woman (Mk 7:24-30). These two persistent women, both very different, both in pain, came to Jesus for healing. Both came away healed.

Summary Scripture can enlighten us on the difficult times Catholic healthcare providers face today. Two stories from Mark's Gospel offer helpful insights to persons engaged in the institutional context of healing. These stories are of the woman with the "flow of blood" (Mk 5:25-34) and of the Syro-Phoenician woman (Mk 7:24-30).

The women were determined to receive the healing they needed. They went for it, and got it, despite considerable obstacles. I suggest five insights we might draw from these two narratives of healing.

These women were persistent. Sometimes it takes a great deal of persistence to find God in all the ordinariness, the numbing everydayness we encounter in our daily work.

Like these women, the healing you seek for those you care for takes place in a hostile world. Catholic healthcare institutions themselves face

TWO WOMEN IN PAIN

The woman in the first story had been suffering from a flow of blood for 12 years. Mark says she "suffered much under many physicians, and had spent all that she had, and was no better but rather grew worse." We can well imagine what she went through during those 12 years: the physical pain, heartache, and mess of this persistent flow of blood; the various medical procedures, douches, and poultices; and probably the indifference of physicians who told her that this was all in her head. In addition, she was in a perpetual state of ritual impurity, rendering anyone she came in contact with impure as well. This was a vulnerable woman: She is not identified with any male relatives. Yet in Mark's Gospel she went alone to a public place, something no woman should do, especially one in her condition, hoping against hope that she would be cured. This was a desperate woman. But she would not give up.

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The stories remind us that we must feel our own pain and that of others. The capacity to hurt and to feel the hurt of others helps us persevere in the face of this hostile world.

Both women did what others could—and should—have done for them.

Each of these women found in herself a place of strength she could draw on. This place of strength is the presence of God.

I hope that Catholic healthcare providers are aware of God's presence in them and in those to whom they minister. I hope they work against the "quick-fix" mentality of much of modern healthcare and modern consumerism. Catholic healthcare recognizes the sacramentality of life on earth, struggling always to find the God who is revealed where we least expect her.

Wisely, she did not want to attract attention, and she told herself, "If I touch even his garments, I shall be made well." So she came up behind Jesus and touched his cloak—not his flesh—and felt the bleeding stop. Mark tells us that Jesus felt the power go out of him and asked who touched him. "She came in fear and trembling and fell down before him," writes Mark. Jesus called her "daughter," a term of tenderness, and told her that her faith had saved her.

In the second story, Jesus, traveling outside Jewish territory (in Tyre and Sidon), took refuge in someone's home, looking for privacy from the crowds. A Syro-Phoenician woman entered the house and begged Jesus to cast out the demon from her daughter. Mark tells us that Jesus wanted no part of her—she was not even a Jew. The woman had violated Jesus' privacy, and he let her know this, in spades, saying that the children's food should not be thrown to the dogs. Here the woman turned the table on Jesus and told him, "Even the puppies under the table eat the children's crumbs." Jesus recognized that he had been one-upped in this conversation and said, "For this saying you may go your way; the demon has left your daughter."

PAIN AND CREATIVITY

I am drawn to these two Gospel stories for a number of reasons. The women were determined to receive the healing they needed. They went for it, and got it, despite considerable obstacles—ritual impurity, loss of money, alien status, and Jesus' rude and dismissive attitude.

In addition, both stories portray Jesus as a typical, fallible human being—unaware, impatient, and irritable. In the face of this, both women had to be strong.

Although we know nothing of these women before or after their encounters with Jesus, we can see that their pain drove them to persevere. Pain makes us single-minded: We become that throbbing migraine, those unbearable cramps, that abscessed tooth. It threatens to take over our entire existence. Pain is persistent, unless it is

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These women in Mark's Gospel knew pain and the havoc it caused. The woman with the flow of blood knew physical and social isolation and the feeling that things were out of control. Because of her daughter's possession, the Syro-Phoenician woman must have felt household disruption, neighbors' negative attitudes, and, most of all, pain and helplessness from seeing her child in pain.

Both women could have chosen other ways to reconcile themselves to their situations, accepting the crosses God had given them. In fact, according to Sr. Pamela A. Smith, SSCM, some people who are invalids possess a creative power (in Maureen A. Tilley and Susan A. Ross, *Broken and Whole: Essays on Religion and the Body*, College Theology Society and University Press of America, Washington, DC, 1995 ([in press], pp. 159-187). It seems that some people, like William James, Florence Nightingale, and Elizabeth Barrett Browning, were in part able to do their great creative work because they were unable to do other things—shopping, cooking, simply making a living—that take up so much of our time.

Of course, these were wealthy people who were able to call on family members and servants to take care of day-to-day tasks. Sr. Smith, herself diabetic and asthmatic, cautions that pain and suffering *can*—but by no means always *do*—bring out "the best" in people. I suspect that the two women in Mark's Gospel could count on no such support. Mark mentions no male relatives, suggesting that the women could rely on no one but themselves. They had to be strong and persistent, since no one would be strong for them. No one else would bear their pain.

TAKING RISKS

Their anger at persistent pain drove these two women to take risks, to say things that "good women" would not. They were so driven that they literally intruded on the space of others and demanded to be heard.

Jesus, by contrast, was the vulnerable one, the one who wanted to be left alone, who did not

want to be bothered. In these stories, Jesus needed a bit of a push. This is quite a reversal from our accustomed view of Jesus the healer, Jesus the tender shepherd, always watching out for the one lost sheep—not this prickly Jesus, wanting to know who touched him, saying, “Why should I help *you*?”

Each woman initiated her interaction with Jesus. And Mark makes it clear that Jesus did

not take any personal credit for these healings. In both cases, Jesus said that each woman’s faith, or word, saved her.

BE YOURSELF

I am struck by the profound differences between these two women. The hemorrhaging woman was probably middle-aged or older. After years of trying to find a cure and “suffering much under many physicians,” she was well aware of her tenuous situation. Desperate, filled with fear, she nevertheless persevered, *in her own way*, to try to find a cure. In contrast, the Syro-Phoenician woman was sharp, forward, even aggressive, in trying to find a cure for her daughter. Through her verbal quickness, she was able to do this.

The persistence of these women, driven by their pain, brought them to healing in two unique and different ways. I interpret this as saying, at least in part, that not everyone is the pushy sort, and that is fine. There is no *one* set way of having faith. What is key is that one hold to one’s faith, *as oneself*.

I suspect that most of us can identify with both women and with Jesus in these stories. If we have attained positions of responsibility, it is because we have been able to keep at things, to be responsible, to be persistent. But we also can readily identify with Jesus’ fatigue, his wanting to be left alone, his own pain. We can go back and forth in these two stories, recognizing our persistence but also our exhaustion, always being asked to do more, care for more, than we can honestly manage.

HEALING TODAY

Such stories of miraculous healings are sadly not the norm today. Yet people are no less desperate,

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 in believing that God

 can be found in the

 healing ministry.

no less in pain. So where is the miracle worker who can, in the twinkling of an eye, make everything better? I do not believe these accounts should be seen as “quick fixes” for those lucky few in first-century Palestine who were fortunate enough to encounter Jesus and get cured. I suggest five insights we might draw from these two narratives of healing.

Finding God in the Ordinary
 As I have already em-

phasized, these women were persistent. Those of us who continue to call ourselves Catholic in such a flawed Church within such a flawed world know something of what it means to be persistent. Part of the charism of the Catholic tradition comes from its rootedness in the everyday, its conviction that God is found in the ordinary, in the seemingly commonplace. Sometimes it takes a great deal of persistence to find God in all the ordinariness, the numbing everydayness we encounter in our daily work.

We must have the persistence of the conviction that God is to be found in the healing ministry, in the maintenance of the kinds of institutions that witness to God’s presence in the most insignificant acts. I see the two women in these stories as models for the healing that Catholic institutions engage in—even healing for those whom the powers that be find unworthy. And sometimes we have to be quick witted to deal with those who stand against us.

Coping with Compassion Fatigue Like these women, the healing you seek for those you care for takes place in the face of a hostile world. We are a world that has compassion fatigue, numbed by too many homeless people begging for spare change, too many starving African children, and too many Bosnian and Rwandan corpses. We are tempted to despair and deny the goodness in ourselves, the need in others.

Catholic healthcare institutions themselves face some hostility from other institutions competing for their share of the shrinking pie. The world favors the healthy and wealthy. God forbid you should have too many children, HIV infection, or drug addiction. Catholic healthcare facilities are the ones on which the most vulnerable ought to

be able to rely. To face this continued challenge is terribly difficult.

Feeling Pain The stories remind us that we must feel our own pain and that of others. The first story is emphatic on this point: The woman *felt* her bleeding stop; Jesus *felt* the power go out of him. The visceral quality of this healing experience left neither of them untouched. Like Jesus in the second story, we are tempted to shrink away from touching and being touched. In that story, Jesus needed to be reminded that we are all hungry for healing. The capacity to hurt and to feel the hurt of others helps us persevere in the face of this hostile world.

Taking Responsibility Both women took matters into their own hands. This is what I most admire. They both did what others could—and should—have done for them. Neither passive nor ladylike, these persistent women acted.

Finding a Place of Strength Each woman did what she needed to do in her own distinctive way. Not every person has the moxie of the Syro-Phoenician woman. Not everyone has the determination to keep seeking health after 12 years. Yet each of these women found in herself a place of strength she could draw on.

This place of strength is, of course, the presence of God. We find God in these healing stories, but not in the place we expect God to be. God is supposed to be the almighty one, the miracle worker, the one who can in an instant be the “great fixer-upper.” But who is God in these Gospel stories? In the first story Jesus does not have a clue what is going on. He has to ask his disciples who touched him. In the second story Jesus is touchy, tired, irritable, and prejudiced against outsiders—not the kind of God we have been led to expect.

But God is notorious for upsetting people’s expectations and popping up in the most unexpected places. In these stories, I submit, God, the healing one, is found in the persistence of the two women in pain. The healing takes place because of their persistence in addition to their faith, intelligence, and determination. Jesus takes no credit, because the credit is not his to take. The credit goes to God.

GOD’S HEALING PRESENCE AMONG US

When we turn our eyes to the pain that surrounds us all—and those who work in hospitals, hospices, nursing homes, shelters, and child care facilities see this massive pain daily—we ask, Where is the healing presence of God today? I say it is right here—among us. The message of

the incarnation is that God has come to dwell among us, in the flesh. Not only 2,000 years ago, but right here and now, God is with us, struggling alongside us, helping heal all the world’s pain. This is the message of these two Gospel stories. We have missed the point if we come away believing that the “great fixer-upper” will take care of everything.

Unfortunately, this is the way in which these healing stories are so often told. We believe that all those lucky first-century people had to do was run into Jesus. This is frighteningly close to the ways in which people have come to look at healthcare—a product we pay for, one for which we should receive our money’s worth. But this is not what these stories are really about. They are about God’s refusal to take no for an answer.

THE HEALING MINISTRY

The work that is done in Catholic healthcare these days is one way in which God refuses to take no for an answer. Catholic healthcare providers must keep alive this vision of healing in which we, the “wounded healers,” work to affirm the humanity of all we encounter. Drawing from our sacramental charism—that God is among us, in the flesh and blood of our fellow human beings—Catholic healthcare must continue to affirm the goodness of the body.

The two women Mark describes provide models of what it means to struggle against pain: With determination and wit, they moved against the forces that would keep them silent. Like these two women, the Catholic healthcare ministry is in pain and struggling with those in pain. But it is also graced with God’s healing presence among us, to gently ask for or (if need be) to stand up and fight for the healing that is needed.

God’s solidarity with those in pain, and with those who suffer with those in pain, is crystal clear in these two stories from the Gospel of Mark. We are not called to “bear our crosses,” passively waiting for death to take away the pain, “accepting” our suffering as God’s way of teaching us a lesson in humility. I hope that Catholic healthcare providers are aware of God’s presence in them and in those to whom they minister. I hope they work against the “quick-fix” mentality that is so evident in much of modern healthcare and modern consumerism. Catholic healthcare recognizes the sacramentality of life on earth, struggling always to find the God who is revealed where we least expect her—in the hemorrhaging woman, in the woman whose daughter is possessed by a demon. God does not give up. □