

Presentation by Mons. Anthony Ekpo  
to Participants in the Catholic Health Association of USA  
Ecclesiology and Spiritual Renewal Program in Rome  
18 April 2024

Dear Participants in the CHA Ecclesiology and Spiritual Renewal program,

I was very pleased to be invited to address this group of leaders engaged in the Catholic Church's sacred ministry of health care, both in the United States of America and in so many parts of the world. Your service is very important for the local population, especially when you take care of those who have no other resources. We thank you for your efforts in direct assistance, research, training, advocacy and networking.

In reviewing your letter of invitation, my mind immediately focused on the fact that you have included "Ecclesiology" as a fundamental theme in your renewal program. This effort to study the Church - note that *ecclesia* means "church" in both Greek and Latin - will involve every facet of the Church's foundation by our Lord Jesus Christ, including its biblical history, its nature, its structure, and its worship, for which the Holy Mass is its "source and summit", since it re-enacts the greatest gift of love, His passion, death, resurrection. Then there is the two-millennia-long tradition of putting the Church's values and doctrine, rooted in the Gospel of Christ, into practical action in the lives of our families and communities. The *Compendium of the Social Doctrine of the Church*<sup>1</sup>, specifies that "*By means of her social doctrine, the Church takes on the task of proclaiming what the Lord has entrusted to her. She makes the message of the freedom and redemption wrought by Christ, the Gospel of the Kingdom, present in human history* [62]. In this regard, it cites the principle of the universal destination of goods as a requiring "*that the poor, the marginalized and*

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<sup>1</sup>[https://www.vatican.va/roman\\_curia/pontifical\\_councils/justpeace/documents/rc\\_pc\\_justpeace\\_doc\\_2006\\_0526\\_compendio-dott-soc\\_en.html#The%20specification%20of%20rights](https://www.vatican.va/roman_curia/pontifical_councils/justpeace/documents/rc_pc_justpeace_doc_2006_0526_compendio-dott-soc_en.html#The%20specification%20of%20rights)

*in all cases those whose living conditions interfere with their proper growth should be the focus of particular concern*". Furthermore, the same document insists that *this ... preference for the poor, and the decisions which it inspires in us, cannot but embrace the immense multitudes of the hungry, the needy, the homeless, those without health care and, above all, those without hope of a better future*" [182].

Popes since the beginning of the Church always have expressed concern and taken practical action in response to the sick and suffering, as they personally were able and the capacity of the Church in respective times and situations. Recently, during the days after Easter, we read, in the *Acts of the Apostles*, the response of St. Peter, our first Pope, to the appeal of the paralyzed man: "*Now Peter and John were going up to the temple area for the three o'clock hour of prayer. And a man crippled from birth was carried and placed at the gate of the temple called 'the Beautiful Gate' every day to beg for alms from the people who entered the temple. When he saw Peter and John about to go into the temple, he asked for alms. But Peter looked intently at him, as did John, and said, 'Look at us.'* He paid attention to them, expecting to receive something from them. Peter said, *'I have neither silver nor gold, but what I do have I give you: in the name of Jesus Christ the Nazorean, [rise and] walk.'*" [Acts of the Apostles, 3:1-6].

The same deep sensitivity and commitment to poor and marginalized persons are so well reflected in the aims, values, and "charisms", or gifts of the Holy Spirit to build up the charity or other structures of the Church, that were handed down to you by the founders of religious orders or bishops from which your present-day Catholic health care facilities drew their first breath and continue to be inspired to this very day. In his *Motu Proprio* entitled *Dolentium Hominum*<sup>2</sup>, written in 1985,

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<sup>2</sup> [https://www.vatican.va/content/john-paul-ii/en/motu\\_proprio/documents/hf\\_jp-ii\\_motu-proprio\\_11021985\\_dolentium-hominum.html](https://www.vatican.va/content/john-paul-ii/en/motu_proprio/documents/hf_jp-ii_motu-proprio_11021985_dolentium-hominum.html)

St. John Paul II re-traced the links between the overall mission of Christ's Church and its activities in the health care field: *"... over the course of the centuries the Church has felt strongly that service to the sick and suffering is an integral part of her mission, and not only has she encouraged among Christians the blossoming of various works of mercy, but she has also established many religious institutions within her with the specific aim to fostering, organizing, improving and increasing help to the sick[1]."* He also firmly maintained that *"... in her approach to the sick and to the mystery of suffering, the Church is guided a precise concept of the human person and of his destiny in God's plan. She holds that medicine and therapeutic cures be directed not only to the good and the health of the body ... but [to]man in his entirety and in his somatic-spiritual unity [2]."*

The late Pope Benedict XVI viewed health as *"a precious good for the person and the community to be promoted, preserved and protected, dedicating the necessary means, resources and energy in order that more and more people may benefit from it."* He decried *"... the fact that still today many of the world's populations have no access to the resources they need to satisfy their basic needs, particularly with regard to health care ..."* He urged *"...greater commitment at all levels to ensure that the right to health care is rendered effective by furthering access to basic health care."* He called for the establishment of *"a real distributive justice which, on the basis of objective needs, guarantees adequate care to all"*<sup>3</sup> and *"charity [which] goes beyond justice, because to love is to give, to offer what is 'mine' to the other ..."*<sup>4</sup>

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<sup>3</sup> Message of His Holiness Pope Benedict XVI to the 25<sup>th</sup> International Conference organized by the Pontifical Council for Health Care Workers, Vatican City , 15 November 2010, [https://www.vatican.va/content/benedict-xvi/en/letters/2010/documents/hf\\_ben-xvi\\_let\\_20101115\\_op-sanitari.html](https://www.vatican.va/content/benedict-xvi/en/letters/2010/documents/hf_ben-xvi_let_20101115_op-sanitari.html)

<sup>4</sup> Pope Benedict XVI, Encyclical *Caritas in Veritate*, #6, [https://www.vatican.va/content/benedict-xvi/en/encyclicals/documents/hf\\_ben-xvi\\_enc\\_20090629\\_caritas-in-veritate.html](https://www.vatican.va/content/benedict-xvi/en/encyclicals/documents/hf_ben-xvi_enc_20090629_caritas-in-veritate.html)

Pope Francis has focused on the social virtue of “compassion” in healthcare delivery, since *“a doctor’s identity and commitment are not based solely on his knowledge and technical expertise, but also and above all on his merciful attitude of compassion — suffering-with — toward those who are suffering in body and in spirit. Compassion is in a certain sense the very soul of medicine.”* He warned against *“giv[ing] into the functionalist temptation to apply quick and drastic solutions, stirred by false compassion or by simple criteria of efficiency and economic saving.”* It should be noted here that Pope Francis often makes such a point when teaching that deliberate ending the lives of terminally ill persons is not ethical and gravely immoral, but, on the other hand, palliative care, including pain control and holistic physical, mental, and spiritual care should be promoted and easily accessible in all such situations.

On the Thirtieth Anniversary of St. John Paul II’s designation of the feast of Our Lady of Lourdes as the date for the Catholic Church’s observance of the World Day of the Sick, Pope Francis declared: *“Down the centuries, showing mercy to the sick led the Christian community to open innumerable “inns of the good Samaritan”, where love and care can be given to people with various kinds of sickness, especially those whose health needs are not being met due to poverty or social exclusion or to the difficulties associated with treating certain pathologies. In these situations, it is children, the elderly and those who are most frail who most often pay the price. Merciful like the Father, countless missionaries have combined the preaching of the Gospel with the construction of hospitals, dispensaries and care homes. These are precious means whereby Christian charity has taken visible shape and the love of Christ, witnessed by that of his disciples, has become more credible.”*<sup>5</sup>

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<sup>5</sup> Pope Francis, Message for the 30<sup>th</sup> Observance of the World Day of the Sick, 11 February 2022, <https://press.vatican.va/content/salastampa/it/bollettino/pubblico/2022/01/04/0006/00010.html#en>

Moreover, the Holy Father has identified Catholic-inspired health care, education, psycho-social, development, and advocacy activities as key and far-reaching contributors to the common good of society: “... *schools and centers of education and healthcare have been established for the use of all citizens. The presence of the Church and its activities are therefore rightly seen as a service, not only to the Catholic community, but rather to the whole nation.*”<sup>6</sup> But he continues to be troubled by the inequities in access to health care in different parts of the world and even in different locations in so-called “high income” countries: “*I think especially of people in the poorest areas of our planet, where it is sometimes necessary to travel long distances to find treatment centers that, albeit with limited resources, offer what is available. We still have a long way to go; in some countries, access to adequate care remains a luxury. We see this, for example, in the scarcity of available vaccines against Covid-19 in poor countries; but even more in the lack of treatment for illnesses that require much simpler medicines.*”<sup>7</sup>

In 2017, Pope Francis sent a message to participants in a conference convened by the Dicastery for Promoting Integral Human Development and the International Confederation of Catholic Health Care Institutions on the theme of “Addressing Global Health Inequities”. This message cited an urgent concern raised by the Late Pope Benedict XVI in his previously cited Encyclical *Caritas in Veritate*: “*those responsible for healthcare activities must also allow themselves to be uniquely and forcefully challenged by the awareness that ‘while the poor of the world continue knocking on the doors of the rich, the world of affluence runs the risk of no longer hearing those knocks, on account of a conscience that can no longer distinguish*

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<sup>6</sup> Apostolic Journey of Pope Francis to Tirana (Albania, Meeting with Civil Authorities, 1 September 2014, <https://www.vatican.va/content/francesco/en/travels/2014/outside/documents/papa-francesco-albania.html>

<sup>7</sup> Pope Francis, Message for the 30<sup>th</sup> Observance of the World Day of the Sick, 11 February 2022, *op.cit.*

*what is human” [91].<sup>8</sup> He further encouraged the conference participants to persevere in their aim to establish “an operational platform of sharing and cooperation between Catholic health care institutions in difference geographical and social settings,” emphasizing that “healthcare workers and their professional associations in particular are called to this task, since they are committed to raising awareness among institutions, welfare agencies and the healthcare industry as a whole, for the sake of ensuring that every individual actually benefits from the right to health care.”<sup>9</sup>*

On that same occasion, the Holy Father took the opportunity to recall the stand which he took in his Apostolic Exhortation *Evangelium Gaudium*: *“the need to resolve the structural causes of poverty cannot be delayed, not only for the pragmatic reason of its urgency for the good of society, but because society needs to be cured of a sickness which is weakening and frustrating it, and which can only lead to new crises ... As long as the problems of the poor are not radically resolved by rejecting the absolute autonomy of markets and financial speculation and by attacking the structural causes of inequality, no solution will be found for the world’s problems or, for that matter, to any problems. Inequality is the root of social ills [202].”<sup>10</sup>*

At this point, I would like to thank the leadership and members of the Catholic Health Association of the United States for your sensitivity to the needs of Catholic

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<sup>8</sup> Pope Benedict XVI, Encyclical *Caritas in Veritate*, *op.cit.*

<sup>9</sup> Pope Francis, Message to the Participants in the International Conference on the theme: “Addressing Global Health Inequalities”, 16-18 November 2017, [https://w2.vatican.va/content/francesco/en/messages/pont-messages/2017/documents/papa-francesco\\_20171118\\_conferenza-disparita-salute.html](https://w2.vatican.va/content/francesco/en/messages/pont-messages/2017/documents/papa-francesco_20171118_conferenza-disparita-salute.html)

<sup>10</sup> Pope Francis, Apostolic Exhortation *Evangelii Gaudium*, 2013, [https://www.vatican.va/content/francesco/en/apost\\_exhortations/documents/papa-francesco\\_esortazione-ap\\_20131124\\_evangelii-gaudium.html](https://www.vatican.va/content/francesco/en/apost_exhortations/documents/papa-francesco_esortazione-ap_20131124_evangelii-gaudium.html)

Health Associations in other parts of the world as well as individual healthcare efforts by Episcopal Conferences, dioceses, parishes, missions, and religious congregations to expand access to high quality treatment and prevention in low-income countries and to marginalized persons in high- and middle-income territories throughout the world. Your care and attention to developing Six Guidelines<sup>11</sup> (prudence, authenticity, honesty, patience, excellence, and humility) to examine current international health program practice in light of Catholic-inspired Teaching and Tradition represent a model that can be adopted by sister organizations worldwide.

Filled with similar inspiration, St. Vincent de Paul taught that *“You will find out that Charity is a heavy burden to carry, heavier than the kettle of soup and the full basket. But you will keep your gentleness and your smile. It is only for your love alone that the poor will forgive you the bread you give to them.”*<sup>12</sup> And Pope Francis has said, *“The poor are also the privileged teachers of our knowledge of God; their frailty and simplicity unmask our selfishness, our false security, our claim to be self-sufficient. The poor guide us to experience God’s closeness and tenderness, to receive his love in our life, his mercy as the Father who cares for us, for all of us, with discretion and with patient trust.”*<sup>13</sup>

I am well aware of CHA’s active engagement in the Catholic Response for Ukraine (CR4U), which included Catholic-inspired humanitarian organizations and partnered with both your own organization and the Knights of Columbus. Your participation as specialists on health has aided the working group to respond

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<sup>11</sup> [https://www.chausa.org/docs/default-source/international-outreach/cha\\_guidingprinciples\\_2022-update\\_lr\\_single.pdf?sfvrsn=7370c7f2\\_11](https://www.chausa.org/docs/default-source/international-outreach/cha_guidingprinciples_2022-update_lr_single.pdf?sfvrsn=7370c7f2_11)

<sup>12</sup> <https://famvin.org/en/2016/09/26/monsieur-vincent-famous-quote/>

<sup>13</sup> Pope Francis, Visit to Astalli Centre, Jesuit Refugee Services in Rome, 10 September 2013, [https://www.vatican.va/content/francesco/en/speeches/2013/september/documents/papa-francesco\\_20130910\\_centro-astalli.html](https://www.vatican.va/content/francesco/en/speeches/2013/september/documents/papa-francesco_20130910_centro-astalli.html)

efficiently and effectively to address the urgent needs for medical equipment, medicines, and supplies, given the strong focus of the Ukrainian government on the treatment and rehabilitation of the large number of military personnel who have been wounded during the war. The International Catholic Migration Commission, which serves as convener of the CR4U Working Group has informed the Dicastery of its partnership with CHA, the Mission Outreach of the Hospital Sisters Health System, the Catholic Medical Mission Board, the Knights of Columbus, both in the USA, and in Poland and Ukraine, to make possible the delivery of a container of medical equipment, medicines, and other medical supplies, all of which had been pre-identified as urgently necessary by health care facilities in Ukraine. We also are grateful for the participation of CHA and Mission Outreach in two of the four solidarity visits to Ukraine, which ICMC undertook on behalf of the Working Group.

I also would like to note CHA's Discussion Paper on "*The Future of Health Workforce: Insights and Opportunities to Transform International Health Workforce Recruitment and Capacity*". Your aim to engage Catholic health care leaders in the development of a global health care workforce based on fair and equitable values is most relevant. If the estimates by the World Health Organization for a projected shortfall of 10 million health workers by 2030, mostly in low- and lower-middle income countries, we certainly will face significant obstacles in achieving universal health care for all by 2030. Pope Francis has promoted this same objective in several messages and speeches, which included, on one occasion, his citation of the of the Vatican's New Charter for Health Care Workers: ..."*those responsible for healthcare activities must also allow themselves to be uniquely and forcefully challenged by the awareness that 'while the poor of the world continue knocking on the doors of the rich, the world of affluence runs the risk of no longer hearing those knocks, on account of a conscience that can no longer distinguish*



*what is human ”*.<sup>14</sup>

Speaking of the urgent need of, and responsibility for, hearing poor of and marginalized persons when they are “*knocking on our doors*”, I am sure you are well aware that, from his earliest days as the Bishop of Rome, Pope Francis has reminded us that “*From the time of the Second Vatican Council until the present Assembly, we have experienced ever more intensely the necessity and beauty of “journeying together”*”. He has stated his conviction that “*we must continue along this path. The world in which we live, and which we are called to love and serve, even with its contradictions, demands that the Church strengthen cooperation in all areas of her mission. He has acknowledged that “journeying together — laity, pastors, the Bishop of Rome — is an easy concept to put into words, but not so easy to put into practice.*”<sup>15</sup> To advance this journeying together, the Holy Father decided to convene a Synod on Synodality that would be prepared by a three-year listening process (2021-2024) first at the local Church levels (diocesan and national Episcopal Conferences), then, at global level, would be convened in two sessions, with local Church reflection once again in the interim period.

In the Report on the First Session of the Synod (October 2023)<sup>16</sup>, it was noted that “*at the behest of the Holy Father, the Assembly saw other members of the People of God gathered together and around the bishops. The bishops, united among themselves and with the Bishop of Rome, made manifest the Church as a communion*

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<sup>14</sup> Pope Francis, Message to the Participants in the International Conference on the theme: “Addressing Global Health Inequalities”, 16-18 November 2017, *op.cit.*

<sup>15</sup> Pope Francis, Address at Ceremony Commemorating the 50<sup>th</sup> Anniversary of the Institutions of the Synod of Bishops, 17 October 2015,

[https://www.vatican.va/content/francesco/en/speeches/2015/october/documents/papa-francesco\\_20151017\\_50-anniversario-sinodo.html](https://www.vatican.va/content/francesco/en/speeches/2015/october/documents/papa-francesco_20151017_50-anniversario-sinodo.html)

<sup>16</sup> <https://www.synod.va/en/news/a-synodal-church-in-mission.html>

*of Churches.” The global impact of this process as gratefully acknowledged: “We understood, in fact, that walking together as baptised persons, in the diversity of charisms, vocations, and ministries, is important not only for our communities, but also for the world ... The world needs this testimony today more than ever. As disciples of Jesus, we cannot shirk the responsibility of demonstrating and transmitting the love and tenderness of God to a wounded humanity.”*

I firmly believe that a similar process could represent a renewing and strengthening measure in your own Catholic Health Association – at the local institutional level, at the level of religious congregations that are Sponsors of large health systems, and at the level of your national association. Within such processes, however, we must always strive to be as inclusive as possible, welcoming all levels of management and staff, and, in particular, the beneficiaries of service. In fact, Pope Francis recently shared his expectation that such a discernment process be undertaken in all the offices of the Roman Curia.

The Holy Father also reminds us of another essential element: *“Let us keep going back to God’s own “style”, which is closeness, compassion and tender love. God has always operated that way. If we do not become this Church of closeness with attitudes of compassion and tender love, we will not be the Lord’s Church. Not only with words, but by a presence that can weave greater bonds of friendship with society and the world. A Church that does not stand aloof from life, but immerses herself in today’s problems and needs, bandaging wounds and healing broken hearts with the balm of God. Let us not forget God’s style, which must help us: closeness, compassion and tender love.”*<sup>17</sup>

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<sup>17</sup> Pope Francis, Address for the Opening of the Synod, 9 October 2021, <https://www.vatican.va/content/francesco/en/speeches/2021/october/documents/20211009-apertura-camminosinodale.html>

In conclusion, I will respond to the request made in your invitation to dialogue with you today – that is, to share with you the mandate and strategy of the Dicastery for Promoting Integral Human Development (DPIHD):

#### Dicastery for Promoting Integral Human Development - DPIHD

This is our mission in the words of Jesus himself: “I came that they may have life and have it abundantly” (John 10:10). Pope St Paul VI used the expression ‘integral human development’ (*Populorum Progressio* § 14-17) to convey the ideal of life in abundance, life to the full. Hence, the very name “Promoting Integral Human Development” expresses our mission.

Pope Francis’ Apostolic Constitution *Praedicate Evangelium* entrusts to the DPIHD a broad objective: “promoting the human person and their God-given dignity, human rights, health, justice and peace” (PE 163 §1) in all areas of public and social existence, in the common home entrusted to our one human family.

Our mandate is to help and support the Holy Father and the Bishops throughout the world. Here we mean regional and national Bishops’ conferences and the hierarchical structures of the Eastern Churches, individual Bishops and Patriarchs, offices dealing with issues of integral human development issues, religious congregations, movements, communication and media offices, social centres, Catholic organisations and universities... all who with the Bishops carry out the promotion, protection and full development of God’s people.

Our daily task is to listen, dialogue and reflect in a synodal manner; to discern, propose and support effective responses striving to achieve and serve integral human development; and to feed the results back to the particular Churches and get the news

widely shared.

Our staff are now organised in three program sections:

- Listening-Dialogue: the two-way bridge with local Church and its various ministries promoting integral human development
- Research-Reflection: to the challenges are applied the many needed disciplines and Catholic social teaching in search of responses
- Communication-Restitution: tangible useful results are formulated, restored to the “field” and shared in wider communication

With three support teams:

- General Secretariat
- Evaluation and Planning
- Administration and General Services
- Superiors

The Dicastery is most attentive to the concerns expressed by the local Churches and the requests they make, specific to the local realities and changing over time. These are examples: human rights, health, justice, disarmament and peace, economy, work, environment, refugees and migrants, humanitarian emergencies, and many others. So, our agenda is shaped by the challenges which the local Churches bring to our attention.

In the DPIHD’s approach, listening and reflecting in a synodal manner form the basis for then discerning, proposing and finally communicating effective responses.

This should help God’s people to act evangelically in difficult situations that require transformation, for the benefit of all. Please pray that DPIHD

*appropriate “the paradigm of the spirituality of the Council” as expressed in “the ancient story of the good Samaritan”... This spirituality has its deepest source in the love of God, who loved us first,*

*while we were still poor sinners. It reminds us that our duty is, in imitation of Christ, to serve our brothers and sisters, especially those in greatest need, and that Christ's face is seen in the face of every man and woman, particularly those who suffer in any way (cf. Mt 25:40). (Praedicate Evangelium, preamble 11)*

If you wish to contact the DPIHD, we have a coordinator for the United States,  
Fr. Shawn Conoboy

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We are happy to receive your inquiries, comments and suggestions.