Your Eminence, Cardinal Wuerl, my brother bishops, priests and deacons, women religious, and my dear brothers and sisters in Christ:

Our celebration of this twentieth annual Rose Mass affords us the opportunity to reflect on the meaning of human suffering and to pray for the sick, as well as for all health care professionals who care for the sick.

I come from a family of pharmacists. My grandfather started Paprocki Pharmacy in 1919. His brother had a drug store. My Dad took over the family pharmacy when his father died in 1947. My Dad’s brother also had his own drug store, I have two brothers in the pharmacy business and one of my nieces is now a registered pharmacist. I started my career in healthcare when I was in sixth grade, working behind the candy counter in our family pharmacy. I worked part-time in our drug store throughout my years in the seminary. I also had summer jobs at a wholesale drug company and at Northwestern Memorial Hospital in Chicago. While I was in the seminary I did internships as a hospital chaplain at Alexian Brothers Medical Center in Elk Grove Village, Illinois, and at Parkland Memorial Hospital in Dallas, Texas. My graduate thesis in theology was in medical ethics. When I was Auxiliary Bishop of Chicago, I served as Cardinal
George’s Liaison for Health and Hospital Affairs and I currently serve as a Member of the United States Conference of Catholic Bishops’ Task Force on Health Care, so I have more than a passing interest in the subject health care. As a hockey goalie, I have also been a frequent visitor to hospital emergency rooms for treatment of injuries sustained in the line of fire. I am deeply grateful to the doctors, nurses and other health care professionals who treated me in my pain and suffering with skill and compassion.

Of course, all of us have been sick at one time or another, some more seriously than others, so we all have had occasion to think about sickness, to suffer through it, and wonder why a loving God allows the pain and suffering of sickness and disease. In the Bible, the Book of Job in the Old Testament is a masterful treatise on the search for the meaning of human suffering. That search always seems to start with looking for a culprit, someone or something to blame for our misfortune. The blame game usually starts with seeing sickness as a punishment for sin. What the Book of Job initiates in the growing and maturing revelation of God to His people, is that the mystery of sickness and suffering are not often easily dismissed by blame of direct human sin—for what was so confounding for Job was that he was a good and righteous man. His sickness and misfortune at losing everything and everyone that was dear to him clearly was
not a punishment, yet God allowed Satan to inflict evil on Job for reasons known only to God.

Similarly, in the New Testament, the story of the man born blind in the Gospel of Saint John starts with the disciples asking Jesus if the man’s blindness was due to his own sins or the sins of his parents. Jesus answers that it was neither for the man’s sins nor his parents sins that the man was born blind, but “that the works of God might be made visible through him.” What does this mean?

It is true as a general principle that sickness and suffering are the consequence of original sin, the human rebellion against God as described in the story of Adam and Eve in the Book of Genesis, the effects with which we must all live. Since this sin has changed our relationship with the created world, no longer are all things around us ordered for our good. No one, Christian or not, can avoid this reality. But it is a mistake to look to specific, actual sins as the reason for all sickness and suffering. The explanation that the man was born blind “so that the works of God might be made visible through him” can be understood on at least two levels.

On the first level, the works of God are revealed in the miracle that Jesus performs to cure the man’s blindness. This has a great significance for health care professionals. To the extent that our medical care for the sick helps to restore
people to good health, the works of God are revealed. But even when good health is not restored, when people suffer from terminal illnesses and die, the works of God are revealed in the compassion and merciful love shown by those who care for the sick, by which they imitate and reflect the love of Jesus. Compassion requires action—it requires the willingness to place ourselves in the midst of the suffering, understanding that we are present before the cross for a reason. Compassion alone is not sufficient—health care workers in particular are called to come into the reality of the suffering of another. Some contemporary attempts at relieving suffering, which cite compassion, are more correctly a “flight from suffering,” not a willingness to come into the reality of the cross. While the vocation to heal and care for the sick and suffering are most laudable, they can never dismiss the suffering person while attempting to relieve the suffering itself. Human dignity cannot be taken away by suffering, but it can be and often is taken away by isolation or the judgment of a life as not worth living.

On a second level, though, the works of God were being revealed in the man born blind even before Jesus gave him physical sight. This was apparently because the blind man had been living in such a way that God’s goodness could be seen in him. Unlike other accounts of miracles where people asked Jesus to heal them or their loved ones, the man born blind makes no such request of Jesus. It is Jesus who takes the initiative to heal him. Perhaps this suggests that
the blind man put spiritual insight above the physical ability to see. This would explain the statement of Jesus that he came into the world “so that those who do not see might see.” Jesus has not restored physical sight to everyone who has ever been blind, but His grace does enable people to see Him with the eyes of faith as our Lord and Savior.

Of course what the message and person of Christ adds to the revelation of Job goes beyond mere “explanation.” It involves the very act of taking on suffering and sin, not from on high, but in Christ’s acceptance of death on the cross for you and for me. It goes beyond an academic answer, to the very stepping into our situation and literally, suffering in our place. Just as Jesus initiated the healing of the man born blind, he has in a real sense, by his death on the cross, whereby he unites himself to the imperfections of our nature, as well as his victory over sin and death in the resurrection, initiated the process of healing in us. That process involves our own carrying of the cross from time to time, many crosses which we cannot avoid. But in addition, it involves the voluntary carrying of the crosses of others in their need.

Certainly, suffering is an experience of evil, the privation of the goods of health and security. However, in God’s wisdom, they may, if we are open, become the unique opportunity for being instruments of God’s decisive grace in the midst of this imperfect world. Those who share in suffering, participate as
did Christ, in the cosmic struggle of good and evil, and bear up in their own bodies the effects of the sinfulness of the world, offering to God, even while not understanding, the unconditional openness to him in all things. Those who attend to the sick and suffering lift the crosses of those in need, that they may carry with pain and struggle, but not with shame or defeat, the instrument of our salvation, however and whenever it comes. Those who love and support as family and friends of the suffering, are, by the very fact of the suffering, though clearly not chosen, but nonetheless real, drawn into a new relationship of love, forgiveness, and unconditional acceptance of the sick and dependent person.

What may never be expressed in times of success, health and joy, are often brought to the surface when we are faced with the struggles which we come to know are beyond our ability to address alone. This invitation to communion has the potential to re-orient the priorities of our lives around the grace and love of God, stripping aside the common and less important cares of the world around us and address what is at the core of our hearts. The opportunity for conversion and inter-personal reconciliation may only come to us when we are unable to carry our crosses alone. We know not why they come to us, and we know not how deeply they may move us, but we do know that the reality of suffering draws us to go outside ourselves, to others and to God, in a way we may never otherwise be drawn.
In his message for this year’s World Day of the Sick, Pope Benedict said, “Dear sick and suffering, it is precisely through the wounds of Christ that we are able to see, with eyes of hope, all the evils that afflict humanity. In rising again, the Lord did not remove suffering and evil from the world, but he defeated them at their root. He opposed the arrogance of Evil with the omnipotence of his Love. He has shown us, therefore, that the way of peace and joy is Love: ‘Just as I have loved you, you also should love one another’ (Jn 13:34). Christ, victor over death, is alive in our midst. And while with St. Thomas we also say ‘My Lord and my God!’, let us follow our Master in readiness to spend our lives for our brothers and sisters (cf. 1 Jn 3:16), becoming messengers of a joy that does not fear pain, the joy of the Resurrection.”

During his traditional concluding remarks to end the general audience this past March 23rd, Pope Benedict XVI encouraged people struggling with illness to find comfort in the cross this Lent. Addressing young people, the sick and newlyweds, he said, “Dear friends, may the Lenten season be a propitious occasion to translate our daily existence, according to the different situations in which each one of us finds himself, into the same sentiments of the Savior, who for us gave his life on the cross.” The Holy Father expressed his hope that his listeners would find “comfort and support in [Christ's] sacrifice offered for the salvation of the whole of humanity.”
The concept of self-sacrifice and martyrs are central to Christianity. Often found in Catholic teaching is the idea of joining one’s own sufferings to the sacrifice of Christ on the Cross. Thus one can ‘offer up’ involuntary suffering such as sickness, or intentionally embrace suffering in acts of penance, such as fasting. This understanding finds support in St. Paul: “Now I rejoice in my sufferings for your sake, and in my flesh I complete what is lacking in Christ's afflictions for the sake of his body, that is, the church” (Col 1:24).

In a sense, Christianity acknowledges only one true sacrifice, the sacrifice which was once offered by Christ in a bloody manner on the tree of the Cross. But in order to apply to individual human beings in sacrificial form through a constant sacrifice the merits of redemption definitively won by the sacrifice of the Cross, the Redeemer Himself instituted the Holy Sacrifice of the Mass to be an unbloody continuation and representation of the bloody sacrifice of Calvary. As we continue now with the Liturgy of the Eucharist, we do well to remember that, through this sacrifice, we are made holy and are held sacred in the eyes of God as we unite our sufferings with the sufferings of Christ.

May God give us this grace. Amen.