

CONTINUING GROUPS

CATHOLIC SOCIAL TEACHING

- Topic: *Viaticum*: Communion and Care at Life's End
Convener: William P. George, Dominican University
Moderator: Thomas J. Poundstone, St. Mary's College, Moraga, California
Presenters: John A. Gallagher, Holy Cross Health Care Systems
Regina W. Wolfe, St. John's University, Collegeville
Mark Miller, Redemptorist Bioethics Consultancy
for Western Canada

The Catholic Social Teaching group discussed theological, social, and economic dimensions of presence and care at life's end. Participation of panelists from both the U.S. and Canada allowed for comparison, albeit limited, of distinct healthcare systems and contexts. Each presenter illustrated central points with personal and institutional narratives.

Jack Gallagher provided a theological retrieval of "viaticum." He placed end of life care within the "herald" and "servant" ecclesial models, discussed historical transformations of Catholic healthcare in the United States, predicted a strong impact of the latest transformation (the integrated delivery network) on sacramental ministry, and stressed the need for an expanded sacramental theology to encompass the increasing involvement of nonordained ministers in end of life care.

Regina Wolfe explored certain economic dimensions of care of the elderly. While acknowledging the limitations of this focus (care for the dying extends to younger people, too), her presentation included a statistically informed description of our current situation in the U.S., a discussion of theologically grounded values needed in this situation, and a focus on the complex stratification of community that, today, characterizes compassionate care and presence at life's end. With Cardinal Bernardin's *The Gift of Peace* serving as a reference point, Wolfe emphasized among other things the redemptive power of suffering for the caregiver.

Mark Miller discussed four attitudinal problems in healthcare systems prior to the current emphasis on palliative care: (1) the ascendancy of the "medical model" in the 1940s and 1950s, wherein the standard of care is acute care; (2) a denial of death; (3) a shift in understanding of *viaticum* to sacrament of the ill—and thus an extension of the "acute care" model; and (4) an increasing view of spirituality as an embarrassment. Emergent, or needed, responses to this situation include hospice care, a more nuanced understanding of suffering

(distinct from pain) as attacking the spirit, a sacramental process placed squarely within the dying person's (not the minister's) context, a renewed appreciation of Christ's healing ministry, and a more adequate bioethics, presently secularized and narrow.

The presentations generated lively discussion. In response to a comment on the difficulty of providing pastoral care when patients are hurried through the system, one panelist stressed the manner in which healthcare institutions can, and often do, ensure that pastoral care accompanies medical care—whether that be in or out of the hospital setting. One questioner felt that the presentations assumed an “extraordinarily truncated view of sacramentality,” with too much emphasis placed on ordained ministry. The point was well taken, despite the basic thrust of the presentations—namely, an attempt precisely to expand understandings of sacrament, Eucharist, and *viaticum* to embrace the rapidly changing, extraordinarily complex, and multidimensional character of end-of-life care today (thus, e.g., the panel's attention to economics of healthcare). One presenter's response to the concern did, however, emphasize current ecclesial tensions that surround expanded approaches to sacramental practice and care, as evidenced by the case of a deacon disciplined for anointing a dying patient.

Necessarily brief discussion of other issues, ranging from possible rituals for the termination of treatment to business models that might appropriately apply to healthcare, indicated that end-of-life care deserves and requires further discussion within the context of both sacramental theology and Catholic social thought.

WILLIAM P. GEORGE
Dominican University
River Forest, Illinois