Mass in honour of Our Lady of Lourdes

Archbishop Vincent Nichols' homily Westminster Cathedral *13 February 2010*

Today, at this Mass in which we honour the Blessed Virgin Mary, Our Lady of Lourdes, we thank God for the gifts of life and faith.

During this Mass many of us recall the enriching of these gifts of life and faith which we receive in Lourdes, on the Diocesan Pilgrimage and on other visits. Those are occasions in which our faith is strengthened, at the invitation of Mary who always brings us to her Son. So too, on pilgrimage our sense of the true value of life is enhanced, especially with the gift of the sick, and through the care of the sick, which are so central to the experience of a pilgrimage.

In these few words, there are two themes I would like to pursue about the way in which our understanding and experience of life is enhanced through the sick and our care for them.

The first is expressed in the reading from Isaiah. Here we have a great song in praise of the care and comfort God has for each of us. Strong images of motherhood are used: 'like a son comforted by his mother so I will comfort you' (Is 66.13)

Comfort is at the heart of the care we strive to offer to each other, especially those who are burdened by illness or distress. This is true, of course, of all who genuinely care for the sick. The Constitution of the National Health Service, published in January 2009 states:

'We – the NHS – respond with humanity and kindness to each person's pain, distress, anxiety or need. We search for the things we can do, however small, to give comfort and relieve suffering. We find time for those we serve and work alongside. We do not want to be asked, because we care.'

These are splendid sentiments, suitable as a mission statement for any Lourdes pilgrimage. Often they are fulfilled in NHS hospitals, for which so many are very grateful. But sometimes they are not, as some will know from personal experience.

Where this happens it is not simply a matter of the attitudes of individuals, though of course that is part of the story. It is also about the prevailing culture in an institution, the pressures of control and delivery which can impair and diminish the ability of staff to care properly. In contrast a culture of true compassion and healing fosters a deep respect and attentive care of the whole person, it promotes genuine care characterised by a sense of humility, a profound respect for others, and a refusal to see them as no more than a medical or behavioural problem to be tackled and resolved. To care in this way is a gift of oneself to another. And, as with all true giving, the giver also receives.

In this Mass we rejoice in the gift of faith which makes clear to us a very fundamental human truth: that each of us has a dignity that comes from God, and therefore a quality of life in relationship to God that can never be reduced to its external human behaviours. From the outside a life might seem restricted, reduced or burdensome.

But from within, where the love and comfort of God is experienced, that same life might well be rich in both experience and promise.

The appreciation of this spiritual dimension of every life makes the experience of Lourdes in the company of the sick so very special. There it is easier to see the sick as our spiritual leaders, as champions of faith and trust in the Lord. In Lourdes, where the veil between heaven and earth is so much more transparent, we see life in its true dimensions: as a spiritual as well as physical journey; as enriched by love given and received as well as by achievements of more measurable kinds.

The quality of care that we give and receive, in the end depends on the eyes with which we see each other. And faith in God is a light to our eyes, and a gift beyond compare.

The Gospel reading hints at the second theme I would like to address.

In the parable we learn that the best wine is usually served first, whereas at this special wedding feast the best wine has been kept to the last. This wine, of course, has been provided by Jesus himself. Surely there are echoes here of the 'new wine' of which Jesus speaks at his last supper when he says: 'From now on, I tell you, I shall not drink wine until the day I drink the new wine with you in the kingdom of my Father.' (Mt 26.29)

Here is the promise of life after death, the fullness of life which flows from the death of Christ and is offered to us as our true destiny, the purpose for which we have been created.

This is the perspective in which we come to view the prospect of death, which certainly awaits us all. In the care of the dying there is so much disquiet and dispute today: campaigns for assisted suicide and euthanasia; fears of unrelieved suffering and loss of control; fears of over-treatment – that is, of inappropriate aggressive medical interventions as life nears its end. Then there is the opposite fear of undertreatment or neglect – sometimes, for instance, food and water may be simply put in front of patients unable to feed themselves who are then noted as having refused their food. We do not know how to deal with death. But fear cannot be our guide.

For these reasons, the Bishops of England and Wales have recently published a consultation paper on the spiritual care of the dying person. In it we state:

'There are two things that need to be kept in mind in end of life care: respecting life and accepting death. Respecting life means that every person must be valued for as long as they live. One implication of this is that death should never be the aim of our action or of our inaction. We should never try to bring about death. On the other hand, accepting death means that we should prepare properly for death. One implication of this is that we should not deny the reality of the situation or flee from the inevitable by seeking every possible treatment. A religious person will see both life and death as coming from God.'

Then we add:

Every human life and the person who lives it are always more than a bundle of genes and actions. Even the most restricted of lives is lived in transcendence by virtue of being human. If we fail to see this and honour it, then we not only fail to respect a person: we do that person violence. There is a hidden violence in so many of our systems, even those of care, because their operational mode is reductionist. If

we reduce death to a clinical event and manage it through a series of standard procedures then we do not deal with death well, either clinically or humanly.'

The spiritual being of every person, then, is always central to the care we give and receive, most especially at the time of death. For those of our faith, this is the moment when, whether we are weak and struggling, tranquil and awake, or in some other inner space, we hand ourselves over to our loving Father. This moment is central to our pilgrim journey. We practice for it, day by day, rehearsing our final act of trust with smaller daily acts of abandonment to God, in prayer, in kindness towards others, and in our sacramental life.

It is to one of the sacraments that we now turn: the anointing of the sick. In it, we trust ourselves to God anew, confident that God will strengthen and sustain us, especially in the face of the illness that we carry. And we are confident for we know, in these moments, that the prayer of the whole Church is the prayer of Christ himself who carries to the ear of his attentive Father the sincere prayers of each one of us today.

+ Vincent Nichols