



A NEWSLETTER OF CAMILLIANS-INDIA

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'Lord, Increase our Faith'

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FAITH IN ACTION

In his Apostolic Letter “Porta Fidei” (The Door of Faith), His Holiness Pope Benedict XVI has recently announced the “Year of Faith” that begins on October 11, 2012 to November 24, 2013. He communicates to us that we need to take special effort to manifest our faith through our actions. Yes, as we read in James 2: 26, “For just as the body without the spirit is dead, so faith without works is also dead”.

Faith in God is important for a Christian as his/her life is led by faith. Abraham, the father of faith has shown us what faith in God is and how to trust God. Our founder St. Camillus has shown us what faith in God meant for him. At large, though we say that we trust in God, it is not well manifested in our thoughts and actions; rather, we trust more in our planning and decisions and so forth.

In this context I would like to share this story with you. There was a village with no rain for couple of years which made the life of people very difficult. It was impossible for them to cultivate and to grow cattle. People had to go very far to get drinking water. It was in this situation that the parish priest announced parishioners to gather in the parish church to observe fast and pray for rain. The response of the people was amazing as the church was filled with parishioners to pray for rain. When the prayer was over there was a heavy rain for a long time. To the surprise of everyone they saw that only a little boy had an umbrella who could go home when it was raining, while others remained in the church for the rain to subside.

I think that we are often like the crowd who pretend that they have faith in God but lacking in the manifestation of it in their lives, unlike the little boy who had faith and its reflection in his life.

Fr. Reji Kaithaparambil MI
[Vicar Provincial]



Buy from me gold refined by fire

Rev 3:18

Saul, son of Kish a Benjaminite, was a handsome young man looking for his father's strayed donkeys when God called him and anointed him to be the King of Israel. [cf.1Sam 9]. In the 1st book of Samuel, chapter ten, we read how in spite of his lack of expertise God anointed this young, inexperienced Saul as the King of God's people [v.1].

Although he began his ministry with great fear of the Lord and with constant counsel by the Spirit, Saul gradually fell into 'self-reliance' and 'self-management' and strayed apart from God and from the prophetic interventions. He could not any more feel the sense of the Word of God and heaven's interventions came through prophet Samuel.

God regretted that he made Saul king! [15:11a]. "He has turned back from following me and has not carried out my commands" [v.11b] - the LORD laments!

About me.. God REGRETS or REJOICES ?! I may be apparently successful and without any challenge or crisis now and so far. Nevertheless... **Does God regret over choosing me?**

I know your works; you have a name of being alive, **but you are dead** [Rev 3:1b]. You say 'I am rich, I have prospered and I need nothing.' You do not realize that you are wretched, pitiable, poor, blind, and naked [v.17]. Your gold and silver have rusted and their rust will be evidence against you, and it will eat your flesh like fire [Jas 5:3].

Jesus turned to Peter and glanced at him with heart pierced by the sword of Peter's disowning... He pulled down Paul from his power and safety ... from all his regalia, and addressed him with tears: 'Why are you persecuting me... by not listening to me... by not seeking me?'

Jesus does regret and weep about me for having turned my back to him and disobeyed! For, the Word of God says: if you will not listen, my soul will weep in secret for your pride. [cf. Jer 13:17a]

Let heaven REJOICE!

Our Lord's greater joy of returning of a sinner than the virtues of ninety-nine just is a promising hand to us as to sinking Peter. When Peter lost the sight of Jesus he also lost the gift of walking over water! A horrifying cause of Samson's tragedy as in the book of Judges is that 'he did not know that the LORD had left him' [16:20c]. Even though Judas and king Saul could not feel the sense of heaven's interventions in their lives Peter and Paul could. They returned and were restored.

His delight is not in the strength of the horse, nor his pleasure in the speed of a runner; but the LORD takes pleasure in those who fear him, in those who hope in his steadfast love [Ps147:10-11].

God awaits my Home-coming!

The Lord is ... patient with you, not wanting any to perish, but all to come to repentance. [2 Pet 3:9]. St. Peter, a man who experienced the gift of repentance and hug of our Lord's mercy exhorts us to regard the patience of our Lord as salvation [2 Pet 3:15] and so to repent and turn to God so that our sins may be wiped out [Acts 3:19].

Let us deafen not our ears to prophet Jeremiah: Return, faithless Israel, says the Lord. I will not look on you in anger... Only acknowledge your guilt that you have rebelled against the Lord your God... [3:12-13]

Secretariat for Community and Spiritual Life
Camillian Vice Province - INDIA



One thing that often makes me feel sad is to see a good number of patients going through terrible loneliness, shares Kakkarakunnel John MI

Some Chaplaincy Moments

*Asato ma satgamaya
Tamaso ma jyotirgamaya
Mryorma amrtam gamaya*

[Lead me from the untruth to the Truth.
Lead me from darkness to Light.
Lead me from death to Immortality.] - Brhadaranyaka Upanishad

These words from Indian Scriptures may resonate in some of the chaplaincy moments. We sit with a patient who, the treating team doubts if he/she could take in the truth, the news of a terminal diagnosis. We journey with another in total darkness emerging from so long a time of hospitalisation searching for some signs of light at the end. We speak about our belief in eternal life to the family of another patient who died in the hospital after giving a good fight.

It has been three years and a half, since I arrived in Ireland. The cultural differences did not shock me so vehemently, to be honest, because I was reasonably prepared mentally, but the weather did, especially the longer winter nights. From the beginning itself I have been involving in the chaplaincy service in Mater hospital that has 150 years' history. Doing couple of CPE units certainly helped me get into the whole system of chaplaincy or pastoral care before I started off a fulltime ministry. It has been a good experience.



As far as I know, the only hospital in India that has an 'organised chaplaincy department' with a reasonable number of chaplains is Christian Medical College [C.M.C] at Vellore, owned and managed by a group of protestant denominations. It had 8-10 salaried chaplains, both male and female, in 2002. I guess it hasn't changed much. Chaplaincy as a department enjoys a good recognition in the hospital. No other hospital, private or public, not even the few Catholic managed medical colleges have an organised department of professionally trained and qualified team of full time chaplains. That is bit unfortunate. The spiritual care generally involves, in these hospitals, the presence of chapel, daily Mass and communion to the Catholic patients. The priest

usually gets called from the neighbouring parish or religious house to 'anoint' the sick and the dying.

This situation is in big contrast with what is happening here in Ireland. Pastoral care is much more organized, recognized and established. It's so easy to work here as there is already a well founded structure and system. I needed only to evolve and fit into that system and that wasn't so bad.

A reason for this contrast, I guess, is the strong family support system in Indian society available when someone is sick. Lots of visitors from family day in and day out. There would be one family member accompanying the patient. In fact lots of things like feeding, toileting and even medicines' purchase and administration (non-complicated, of course) are done by these 'bystanders'. As one can guess, there is that dimension of care and love very naturally. Having someone from home makes the daunting hospital environment a bit less strange for them. It has some other benefits as well. It is in fact a great relief for the nurses who are usually overloaded. The strong family bond and care with the needed emotional support help the healing process. Though none in the family may be a professionally qualified counsellor, or pastoral care giver, the psychological needs of the patient is catered for in a very informal way.

One thing that often makes me feel sad, working here, is to see a good few patients going through terrible loneliness, because there is no one around from the family. It becomes more painful to see some dying alone. Loneliness is not an issue in Indian hospital scenario, the opposite may be, privacy...! To an extent, the professional helping mechanisms to support people emotionally and psychologically become a need only when such a support is unavailable through natural means.

Generally, spirituality and/or religious spirit is part of the Indian psyche. Calling God's name or making a gesture of devotion would be part and parcel of their lives. So to an extent, may be in a rather non-systematic way, the spiritual

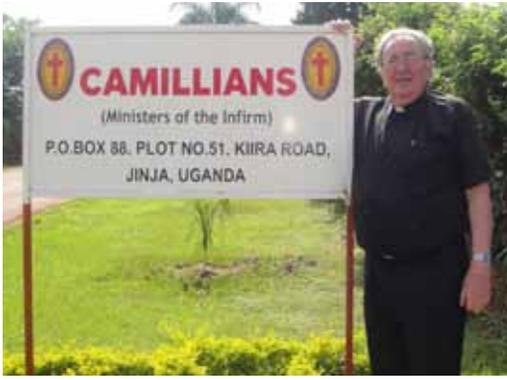
dimension of healing is around there. During my theological training, every Sunday I used to visit patients in a semi-private hospital run by Good Shepherd sisters. Majority of the patients were Hindus. As I met with them, most of them would say things like; "it's all in God's hands", or "God will help", or "it's my fate". Though at times it came with a voice of passive resignation, mostly it helped them towards acceptance and coping. It was natural for people to do that, while here in Ireland, I may have to make efforts to explore the faith of people and support them at that level, quite often.

Then there is the language. If I move from one state to the neighbouring one in India it's totally a different language, whereas here it's easy with the same language used all over, though different accents. Not only the language in itself, but even the language of pastoral care, its terms and words are in English and to get them into an Indian language, it would be not only hard but also even awkward at times. For example, "How do you feel?" is a common and most natural question in chaplaincy care. But it would be so weird to ask that question to a patient in an Indian language, not only for language difficulty but also for the reason of addressing the feelings being culturally not so suitable.

Then there is the diversity of faiths. There is no common faith platform to share and help, though we can support at a human level. But in Ireland, the good majority that I come across in the hospital are Roman Catholics, and open to my presence. While lots of emotional and spiritual helps do happen very informally through family systems in India, it stands as though it can benefit a lot from researching and systematisation already present in Ireland.

When Fr. Pat O'Brien passed away last January, I glanced through a chaplains' book in one of the wards. It was so special to see his sign in the book and of a few other Camillian confreres. I was so proud to add my sign as well into it, not realizing so much I am also continuing that long unique Camillian history of caring for so many sick people here in this lovely land.





The Indian vice-Province can rightly be proud of its missionary spirit and expansion in direct missionary involvement in Uganda, writes Tom O'Connor MI

A Return to Uganda

I did not expect to return to Uganda having left there on September 1, 2010 exactly ten years into the Mission's foundation and growth. But Boniface Walusimbi, having successfully completed his philosophical studies in Nairobi and his novitiate in Bangalore, was due to make his first profession in Jinja on June 2. Boniface was recruited by me and because of that the provincial council thought it appropriate that I should be there to receive his vows.

Following ten years from the foundation of the Mission, my week's visit was packed with memories from the past, the ups and the downs of discovery and dreaming. But much more than memories was the abundance of solid evidence in the growth and expansion of everything that the Order and its charism can be proud of and indeed boast about. From the very first inklings of the possibility of confreres from India I felt the Mission's future was guaranteed. Gone were the initial faltering steps from the Year 2000 to be now replaced by an established pattern of life and ministry in the best Camillian tradition of community living, vocation promotion and formation as well as the service to the sick poor.

The two Indian pioneers (Johnson and Shubin) are already doubled in number with the arrival of Richard and Russell. It would be difficult to prioritize the stages in this evolutionary direction. But the fruits of vocation promotion stand out in a programme that sees at present three new novices, one next year and two the year after that. Waiting in the assessment wings are seven enthusiastic aspirants whose presence augurs well for future continuity and growth. Aware of such blessings I could not but feel

proud of the progress that in itself is a just reward for the efforts and creativity our four missionaries have had and continue to have in a mission that can still be regarded as a nascent foundation.

It is further reassuring to hear the ready comments of our formators: Fr. Sojan, Novice Master in Bangalore regarding Boniface Walusimbi, and those of Fr. Gabriel, Master of philosophy students in Nairobi regarding our present three novices, Brian, Acheleo and Joseph who completed their philosophy studies in Nairobi. Following behind these is one third year philosophy student in Nairobi and two second year philosophy students in the Philosophy Centre Jinja.

I returned happy, very happy giving thanks to God for the continuity and evident progress of the Ugandan Mission: the ministry of vocation recruitment and formation provided by Johnson and Russell in Jinja with direct involvement too from Shubin and Richard, the direct pastoral ministry to the sick in Nyenga hospital by Shubin and Richard. As well as that all four missionaries are actively involved supplying ministry in then local parishes thus establishing more and more the Order's name and specific ministry among Bishops, priests and Religious throughout Uganda.

The Indian vice-Province can rightly be proud of its missionary spirit and expansion in direct missionary involvement in Uganda. In its short history through dynamic confreres in Uganda it has set standards that the Church's Missions everywhere and Camillian Missions in particular can learn from and hope to emulate.

HISTORY OF BIOETHICS: SOME FUNDAMENTAL ELEMENTS



Eronimose William MI

Bioethics (*bios and ethics* – ethics of life) was first coined in 1970 by Van Rensselaer Potter (1911-2001). He used it as a science of survival and quality of life, seeking to integrate biology, ecology, medicine, and human values through an ethical duty. It can now be defined as a science which regulates human conduct, in the field of life and health in the light of values and rational moral principles. It has following characteristics: 1) it is human because it is directly concerned with the life and health of human being and indirectly it is concerned with the environment in which one lives; 2) it is rational because it regulates the attitudes and behaviours of rational beings according to the moral values founded on human dignity and human rights; 3) it is universal for it is valid for all human beings without distinction of culture or religion, 4) it is interdisciplinary because it makes use of various such disciplines as biology, medicine, law, philosophy, 5) it is general because it deals with values and general ethical principles, and 6) it is clinical or applied because the general principles are applied for concrete cases under biological, medical, legal, anthropological and ethical profile. It can be called personalistic bioethics because it is founded on the dignity and absolute value of human person.

The subject of bioethics is ‘bioethics’ itself and therefore there is a necessity to understand this subject. In order to do so, we have to navigate into a few historical elements of this discipline.

i) Ancient classical tradition: In this tradition, the ethical reflections of Plato and Aristotle on medicine and society are noted. Plato in *Republic* held that medicine was created not to torture patients but to cure them and he affirmed that if one were sick and curable, he should intend to cure and if one were unhealthy and incurable, one should leave the doctor and accept death. Plato proposed a current problem: when should one intervene? Is the intervention proportionate or non-proportionate? Applying Plato’s ethical consideration, medicine in today’s context is somehow torturing the patients and the discussion of ‘therapeutic tenacity’ (an obstinate futile attempt towards partial results at the expense of

the total good of the patient) is very much against the true good of the dying person. It is the most delicate theme regarding the proportionality of medicine. As regards to Aristotle, he spoke of the number of children one should have proposing that after 40 years one must not procreate, but should abort the foetus before it should have become a human being. These authors can be criticized of their ethical positions, but today's bioethical problems have their historical precedence in antiquity.

ii) Hippocratic School: The important reflection in this school is the Hippocratic Oath that contains some elements of medicine and even today the medical students recite it. The focus of attention in this oath falls on the doctor, that is, on the virtuous doctor, that is, he should be honest, discreet, respectful of the patient and not avid. The doctor vows to live and act according to some indications, like no abortion, no euthanasia even if it is asked of and he lives according to some principles, duties and tasks which we call now as medical deontology.

iii) Hebrew-Christian Tradition: In this tradition, we find a profound biblical anthropology. In the light of OT, human beings have to act freely and responsibly according to the intangible dignity of man as *Imago Dei*. In the light of NT, human dignity belongs to all as God is *Father* of all and we are His children. As a result, this personal and universal dignity cannot be removed for it is ontological and it calls for a task to fight against those who play against it. This tradition had a vast medical practice to cure the sick under the model of Jesus, the Healer and had also developed medical ethics against abortion, suicide, euthanasia and so on. In later times, there developed moral theology which dealt with themes like justice, prudence and treatment of the sick. The interventions regarding abortion, euthanasia, birth regulation and use of analgesics (Pope Pius XII), the intervention for the love for life (John Paul II) and the intervention for charity and truth (Pope Benedict XVI) are to be noted in this tradition.

iv) Birth of Medical Ethics: Another historical element can be the beginning of medical ethics. In 1803, there was the first book of "Medical Ethics" in the United States where the attention is given to the virtuous doctor and the ethical consideration starts from the doctor. It is a sort of paternalistic medicine which means the doctor has the final word and he is all in all in the decision making. Then in 1847 there was born American Medical Association, from which there emanated some deontological codes which are used to regulate the behaviours of the doctors.

v) Birth of Ethical Codes: In 1946, there was the trial of Nuremberg before which many inhuman acts were placed (how far human body resists the cold, how human body reacts in certain height; whether there are some lives worthy to live or not). All these were done on 60-100 thousands of people for the progress of medicine by Nazi doctors through experimentations. When the public came to know about these inhuman acts, there was an authentic shock which led

A Frame from
our History



Fr. Angelo Brusco during his canonical visit to Upasana, Bangalore in December 1993

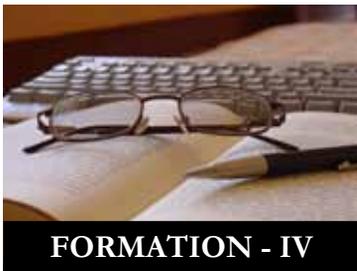
to the Code of Medical Ethics, called also as **Declaration of Geneva**, adopted by the General Assembly of the WMA at Geneva in 1948 and amended in 1968, 1984, 1994, 2005 and 2006. It was a declaration especially against the medical crimes in Nazi Germany; it tends to give a collection of duties when doing research; it is a declaration of physicians' dedication to the humanitarian goals of medicine and is intended as a revision of the Oath of Hippocrates that can be comprehended in modern times. The next code is the **Declaration of Helsinki**, which is a set of ethical principles regarding human experimentation. It is widely regarded as the cornerstone document of human research ethics. This

code was renewed many times, which shows the importance of ethical guidelines in the human research.

vi) Ethics in India: India, a land of traditional medicines and of 'state-of-the-art' medicine has its historical *Ayurvedic* text *Caraka Sambita*, in which we see the following ethical guidelines: 1) the physicians have the primary duty towards their patients; 2) the prime concern of medicine is the safety and best interest of patients; 3) the doctors should maintain confidentiality; 4) they have to avoid institutional entanglements that would compromise independent judgement; 5) the doctors should refrain from unsavoury financial deals; 6) they have to refrain from advertising and

7) the doctors should keep professionalism with patients and colleagues. These ethical principles are very paramount in today's bioethics in India as the science and technology at Indian level tend to lose their ethical orientation through many unethical practices.

As a conclusion, we can say that although bioethics is a new discipline, it has got its fundamental historical facet in classical traditions, in the medical ethics, in ethical codes and it has got historical elements in India's traditional medical texts. It is a discipline which has got its own uniqueness in contributing to the defence of human life on the basis of rational moral principles and values.



FORMATION - IV

FORMATION AS TRANSFORMATION

Koonanickal Sojan MI

Secretariat for Formation
Camillian Vice-Province, India

At this point of our sharing, we might come up with a question, what/who is to be transformed?

I personally would answer that I as a formator have to be transformed and then initiate the transformation to the formee that I accompany. Across the major religious and spiritual traditions, transformation is considered the endpoint or outcome of the spiritual journey. Transformation is a considerably broader concept than self-transcendence. Transformation is a process of change into a mature relationship with God that has its effects on human relationships and human actions.

As such, it involves grace. Transformation is primarily attributed to the grace of God, but it also involves human cooperation. Through formation the whole person is to be transformed so that he/she may become and acquire a personality that is effective for the task assigned to him/her.

NB: We are coming to the end of our sharing on 'Important Aspects of Formation' with this subtitle, 'Formation as Transformation' and we will continue with some of the Challenges in Formation namely the 'External and Internal Challenges' to the Religious Life.

NEWS NEWS

Rainbow in the Summer

Koickal Vince MI

Bangalore: Sneha Care home organized a five-day RAINBOW summer camp for its children from 29th May to 2nd June 2012. It was a unique experience with lots of fun and frolic. The camp offered the children an array of activities like performing arts, team building games and exercises, dance, music, magic, drawing, painting, crafts, sports, theatre, skill training etc along with a field day out.

The event became more colourful with the presence of eight students from United World College in England. The major highlights of the celebration were a session on Waste management by Daily Dump, mock fire drill by the nearest fire station, a session on model designing and a camp fire at the end of the camp.



Back to academics

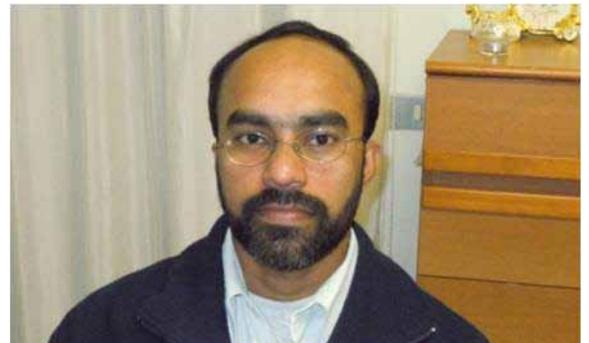
After a month-long holidays and the Rainbow camp children and staff of Sneha care home got into busy academic activities. The new academic year began on June 4. The superior of Snehadaan Fr. Sojan inaugurated the new academic year by lighting the lamp and releasing the calendar of the academic year 2012-13.

Ordained to Diaconate

Mananthavady: Taking a step closer to the Altar, Eanthumkal Bobin was ordained a deacon by the bishop of Mananthavady diocese Mar Jose Porunnedom here at St. Camillus Seminary on May 31, 2012. At present, Bobin is serving as a deacon at St. Mary's church, Edoor.



On New Missions



Fr. Baby Illickal is on a new mission to Kenya as he has been appointed as the Novice master for East Africa. He will begin his mission on July 21, 2012.

Frs. Naikkarakudy Baby, Paradiyil Tomy and Chintagunda Suresh have already begun their mission with the Anglo-Irish Province. Fr. Naveen Mathew reached the United States for his CPE studies.

A Growing Fraternity

Kaithaparambil Reji MI

The meeting of Consulta and Major superiors and delegates of the Order for the year 2012, held at Motinello (N. Italy) on May 22-26 was in view of the General Chapter 2013. There were various concerns discussed among which the major discussions were centred on the revision of the Constitution and on Camillian Project. Apart from these there was discussion on participation of larger Camilian Family for the Chapter.

With regard to the discussion on Camilian Project decision was taken to have Post-Novitiate program in Italy for whole Europe. Further along this discussion it was decided to reformulate some concepts of the Camillian Project document prior to finalising it. Apart from this, there was a lengthy discussion on the celebration of the Fourth Centenary of the Death of our Founder and plans for the celebration from the Central administration and from the provincial administrations.



Simple & Solemn Vows



Basil Singh (left) and Nixon make their temporary Profession; and Eanthumkal Bobin (right) makes his Perpetual Profession on May 25, 2012 at Snehadaan, Bangalore.

Photos: Mekkattu Prince

