

Camillians and the Pandemic

The Current Situation of the Pandemic in the Lives of our Religious Communities and in the Order

Problems, Responsibilities, Prospects, Opportunities, etc.

The first confrere of my community to fall ill (Brother Long of Vietnam) to my surprise displayed joy and used words similar to those of Camillus who called his illnesses mercies of God.¹ “It would be a joy”, said Brother Long, “to die serving the sick like St. Camillus”. He is not a person with a shallow spirituality. We had spoken on a number of occasions in the refectory, saying that if the virus arrived everybody would have had to go to the wards, fathers and brothers, to care for the sick. There can be no discussion about the reality of ‘complete service’ in the exemplary direct care that was provided by the young Camillians from Vietnam, Peru and India.

In me there ring out the words of St. Camillus, words like these: ‘all the Fathers and Brothers, priests, clerics and students, like lay people, both professed and novices, should serve in the hospitals the sick in care for their physical needs...and equally in care for their spiritual needs, that is to say in encouraging the sick to prepare to receive well the Most Holy Sacraments: in administering these to them, in helping and comforting the dying, and commending their souls with due charity’.² We brought together our harsh experience at the St. Camillus Centre of Tres Cantos, Madrid, beginning with the testimonies gathered from the first day that was published³ as a notebook of Bitacora for a special ‘liturgy of mercy’ in which everybody sets themselves to work with the ‘sacred vessels’⁴ and are involved in the ‘cult of service’ to the sick.

During this harsh period all of us experienced uncertainty, fear, menace, illness, the dying of so many people in a way that we had never seen before, empty churches, centres that were unsustainable in financial terms, volunteers who had disappeared...the Camillian Family in part dispersed...Should this be an opportunity for us to think anew about some things?

¹ CICALTELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO, (Camilliani, Rome, 1980), p. 437.

² SPOGLI E., *La diakonia di carità dell’Ordine camilliano* (Camilliani, Rome 1989), p. 149.

³ BERMEJO J.C., VILLACIEROS M., and MORENO G., *Crónica de San Camilo. Nuestra residencia en tiempos de pandemia* (Sal Terrae, Santander, 2020). Some invoke the urgent need to ‘de-clericalise consecrated life’ in order to overcome pseudo-spiritual vanities: EGIGUREN A., ‘En las fronteras y ligeros de equipaje’, *Vida Religiosa*, 4, 2015, p. 29.

⁴ PRONZATO A., *Un cuore per il malato. Camillo de Lellis* (Gribaudo, Turin, 1983), p. 210.

The joy of service to the sick

Everyone in the wards

Uncertainty and fears, empty churches,

For some time Pope Francis had been reflecting on consecrated life in terms that he expressed in *Evangelii Gaudium*: ‘we must not be afraid to discard the “old wineskins”’: that is, not to renew those habits and those structures which, in the life of the Church and thus also in consecrated life, we recognize as no longer corresponding to what God asks of us today in order to help his Kingdom move forward in the world: the structures that give us false protection and that condition the vitality of charity’.⁵ Structures, habits...to be thought about anew, perhaps even more now that a new six-year period is beginning in special conditions after the pandemic.

Ten points now follow in order to structure my pious thought and what is addressed in my analysis:

1. Health at the centre of things.
2. Service at risk.
3. Essential or less than essential?
4. Brothers all, vulnerable.
5. Prepared for ethical discernment.
6. Aged as Camillians as well?
7. Together? In the same boat.
8. In mourning at risk.
9. Connected online.
10. Bearing witness to hope.

1. Health at the Centre of Things

This is my first reflection which, shared in this General Chapter, acquires a special relevance: the global health-care crisis as an opportunity to ‘follow the founder’⁶ and to remember one and a thousand times what our reason for being is – the *principale Istitutum* contained in the Formula for Life: caring for the sick.⁷

The diaconate, expressed for us in service to the sick and in the promotion of a culture of humanisation of health, is one of the constituent aspects of the Church. The charism of the Order is specifically this: the diaconate for humanity in the world of health. Indeed, ‘As...the Church spread further afield, the exercise of charity became established as one of her essential activities, along with the administration of the sacraments and the proclamation of the word’.⁸

⁵ FRANCIS, *Evangelii Gaudium*, n. 235; ‘Address of His Holiness Pope Francis to Participants in the Plenary of the Congregation for Institutes of Consecrated Life and Societies of Apostolic Life, 27 Nov. 2014’.

⁶ Second Vatican Council, *Prefectae Caritatis*, n. 2b.

⁷ SPOGLI E., *La diakonia della carità nell’Ordine camilliano* (Camilliani, Rome, 1989), p. 80.

⁸ BENEDICT XVI, *Deus Caritas Est*, n. 22.

Principale Istitutum

Diaconate and the
humanisation of health

Perhaps we are especially called as Camillians to the centrality of ministries specifically channelled towards health. One may think of how Bresciani, faithful to St. Camillus, did not accept the creation of new foundations if together with fathers there were not also brothers, as a sign of the focusing of our presences in the world of health, at the heart of our charismatic identity.⁹

We remember how Camillus when he was travelling with his companions encountered someone who was interested in them. This person, hearing where they were going, felt it was his duty to warn them that in Milan there was the plague. Spurring his horse, Camillus, as though he had been rebuked for slowness, answered on behalf of everyone in a happy way: “that is why we are going there!”¹⁰

In his book *Essere religiosi oggi* (‘Being religious Today’), Fr. Calisto Vendrame, a former Superior General, pointed out pathways for renewal with a special learning and vision. And he said that to solve problems ‘a conversion of mentality is needed in addition to a conversion of the heart...that is to say conforming our way of seeing with that of Christ, of the Gospel and of the Church which expressed itself in such a strong way at the Second Vatican Council, placing charity (as the Bible does) above everything and before everything’.¹¹ ‘Our charism is expressed and put into practice in works of charity towards the sick, taking on every service in the world of health...thus...there will be Camillian nurses, hospital chaplains, medical doctors, psychologists, administrators, experts in pastoral care in health, in Holy Scripture, in moral theology and in anthropology, in a few words all, the human and theological sciences which, after a certain fashion, help in serving the sick person in a better way and creating around him, in the vast world of health, a human and Christian atmosphere’.¹²

In my view we need in the Order a pilgrimage towards the centre of the charism, towards health as a central category, without oversights or hiding places. Thus, health at the centre of our charismatic attention, which is something indeed that the pandemic has called us to. I still ask myself whether as Camillians we feel ourselves to be health-care professionals or clerics who support hospitals. Who knows whether we must learn from Camillus with a certain refounding of the Order that enables us to say like him,

⁹ BERMEJO J.C., ‘Presentación’, in: VENDRAME C., *Los hermanos en los religiosos camilos* (Mensajero, Bilbao, 2015), p. 10.

¹⁰ VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome, 1982/4), pp. 278-279.

¹¹ VENDRAME C., *Essere religiosi oggi* (Dehoniane, Rome, 1989), p. 35.

¹² VENDRAME C., *Essere religiosi oggi* (Dehoniane, Rome, 1989), p. 308.

Health: heart of the charismatic identity

In Milan because there is the plague

Camillian nurses, chaplains, medical doctors, psychologists, administrators, experts in pastoral care in health, in Scripture, moral theology,

Pilgrimage to the centre: a de-clericalisation of consecrated life

starting with this pandemic: “First God, and this leg with a sore have founded this Religion”.¹³

What could this taking ‘health to the centre’ mean when we think in terms of the Order? Probably the gravest temptation of the Church, and the temptation that most deforms its image and its action, is the tendency to place itself at the centre of the Christian system: the *ecclesiocentrism* denounced by Fr. Congar which others have identified as ‘the ecclesiasation of Christianity’ and which has a great deal to do with acting in a self-referential way¹⁴ – the subject of sustained denunciations by Pope Francis.¹⁵ And probably one of the strongest temptations of consecrated life is that of losing its identity, which is neither lay nor clerical. Indeed, there is no lack of people who invoke the urgent need for the ‘de-clericalisation of consecrated life’¹⁶ in order to overcome pseudo-spiritual vanities and go towards the centre of the charism – health.

On 2 February 2022, in the cubiculum, on the occasion of the 130th. anniversary of the foundation of the Institute of the Daughters of St. Camillus, the invitation was to look to the centre.¹⁷ The originality and the modern character of Camillus’ idea, which we also find in the Bull *Superna disposizione*,¹⁸ is connected to the emergency of the pandemic: Camillus and his sons accepted the words of the Pope on ‘corporal and spiritual service’. The fourth vow highlights the originality, and is the guarantee, of the vitality of our Order. By observing the fourth vow the Order could live; without that vow it would wane.¹⁹

In his letter to Fr. Pieri of 28 May 1611 Camillus used burning words: ‘Remember that the purpose of our holy vocation is not to hear confessions in church and fill churches with confessionals. This is only a little bit of appearance and woe to those who spend their time in doing that! Instead, our purpose is to serve perfectly the poor in hospitals, dying people in their homes; this is our holy vocation. Woe to those who forget this truth! The time will come at the tribunal of Christ when we will be very strictly judged

¹³ CICATELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO (Rome, 1980), p. 15.

¹⁴ FRANCIS, *Apostolic Letter of the Holy Father Francis to all Consecrated People on the Occasion of the Year of Consecrated Life*, 28 November 2014, n. 3.

¹⁵ MARTÍN VELASCO J., in BERMEJO J.C., *Humanización y evangelio* (PPC, Madrid, 2015).

¹⁶ EGIGUREN A., ‘En las fronteras y ligeros de equipaje’, *Vida Religiosa*, 4, 2015, p. 29.

¹⁷ LUNARDON G., ‘Paraliturgia per i 130 anni di fondazione dell’Istituto Figlie di San Camillo’, in <https://www.camilliani.org/paraliturgia-per-i-130-anni-di-fondazione-dellistituto-figlie-di-san-camillo/> 2.II.2022.

¹⁸ CLEMENT VIII, *Superna Disposizione*, 29 December 1600, in <https://www.camilliani.org/san-camillo-e-i-camilliani/>

¹⁹ LOCCI E., *San Camillo e i camillini*, <https://www.camilliani.org/san-camillo-e-i-camilliani/>

Religious, neither clerics nor lay people

The importance of corporal service

The sick in hospitals, the dying in their homes

on this'.²⁰ Camillus himself in his Testamentary Letter restated with force: 'Each one should be careful about such a great sacrilege and offence to God'.²¹

Thus: health at the centre of the Order. The pandemic requires this of us.

2. Service at Risk

Some people have wanted to see in this pandemic the radical character of the Camillian consecration expressed in our fourth vow, that is to say: to care for the sick even at the risk to our life²² (C, n. 12). I see, rather, how this unconditional reality of service at risk has entered the DNA of the health-care professions and, with some exceptions, humanity has answered in this direction.

The research of Fr. Spogli on the fourth vow has highlighted the importance of 'corporal service' for the vitality of our Order because the Order is characterised specifically by complete service to the sick. We know that with the passing of time for various reasons inside and outside the Order 'corporal' service' became increasingly weak and to the almost exclusive benefit of spiritual service, even though this latter became much impoverished with time. Of especial importance is the Testamentary Letter which brought together the most important concerns of Camillus: 'I declare that my will

Fourth vow present in professionals

Complete service to the sick

²⁰ SOMMARUGA G., *Scritti di San Camilo* (Camilliani, Turin, 1991) p. 394.

²¹ VENDRAME C., 'Il fondatore', in: BRUSCO A., ALVAREZ F., *La spiritualità camilliana* (Camilliane, Turin, 2001) p. 96. Vendrame adds: 'That such strong words were neglected after the death of the founder as regards 'corporal' service is something that is difficult to understand. One tries to explain this fact by attributing the fault in large measure to the lack of a sufficient number of brothers following the epidemics of plague in 1624, 1630-31 and 1656-57 which obliged the Order to leave care in hospitals'. It should be observed that the edition on Camillian spirituality in Italian contains three pages less than those responsible had wanted to publish. Fr. Calisto undertook through Br. Bermejo to publish them in the Spanish edition (2003) and they deal specifically with the problem of the decrease in the number of brothers in the Order and the need for a 'retrieval of the values of the charism' as well as the question of brothers being Superiors (at all levels): VENDRAME C., *El Fundador* (Camilianas, Madrid 2003), pp. 105-108.

²² 'Our religious should be ready to bear witness to our charism even risking their lives, whether the danger comes from a contagious disease or from some other calamity or from prophetic activity in the defence of the rights of the last. Given that care for the sick in most countries no longer exposes the religious, as was the case in the past, to the risk of losing their lives, they commit themselves to living the radical character of the fourth vow, choosing appropriate ways in the context in which they live and work: constancy and faithfulness in daily work, the integration of the negative aspects of life, the ability to work even when there is no immediate gratification, sensitivity to accepting the values of a different culture, the purification of the reasons for their behaviour, the acquisition of human qualities that facilitate the exercise of the ministry, the choice of the last, and the hard work of engaging in updating' (General Statutes, n. 14)

is...Furthermore I intend that spiritual care alone should never be attended to without corporal care'.²³

This aspect of the pandemic also led to a decline in the cooperation of volunteers and in some places even in the life of the Lay Camillian Family. Now, we should ask what we want to do here and how much this may not be an opportunity for the membership or militancy of certain people.

It is certainly the case that during the pandemic there was the specific risk not so much of becoming infected but of becoming vectors of contagion, but what was not called into question was the duty to help the infected in their essential needs, with a discussion of the extent to which spiritual care was essential or not.²⁴

3. Essential or Less than Essential?

Indeed, the new fact of this pandemic was that providing spiritual care could be a cause of infection for other people and for ourselves. And the criterion of public health during the most acute stage of the pandemic was specifically to provide only 'essential services' which for many people are those connected to physical needs but not those connected to the spiritual dimension of the person. This is a problem in relation to which different decisions were taken and which became for Camillian priests, as well, an opportunity to explore the identity of being a Camillian priest.

'The recent pandemic has enabled us to return to and appreciate the very many travelling companions who while afraid reacted by giving their own lives. We have been able to recognise that our lives are interwoven with, and supported by, ordinary people who without doubt have written the decisive events of our shared history: medical doctors, nurses (both men and women), pharmacists, workers in supermarkets, cleaning personnel, carers, people engaged in transport, men and women who work to provide essential services and security, volunteers, priests, women

²³ SOMMARUGA G., *Scritti di San Camilo* (Camilliani, Turin, 1999), p. 45. St. Camillus also observed: 'A Minister of the Sick should be concerned about 'life, death, infirmity or health'. He knows what he risks when he enters the community and this not only in times of disasters but also continuously, in the unhealthy and odorous air of the hospitals of the time': SPOGLI E., *La diaconia della carità nell'Ordine camilliano* (Camilliani, Rome, 1989), p. 30.

²⁴ 'Although the control of constants is important by adopting the highest measures of protection on the part of professionals, there is no doubt that securing the suitable accompanying of a relative at the moment of death, like spiritual or religious support when it is requested, is a justified action and a high act of humanisation': Comité de bioética de España, *Declaración del Comité de Bioética de España sobre el derecho y deber de facilitar el acompañamiento y la asistencia espiritual a los pacientes con Covid-19 al final de sus vidas y en situaciones de especial vulnerabilidad*, Madrid, 15 April 2020.

Volunteers and the Camillian Family

Tension: essential needs

Identity of the Camillian priest

Nobody can save themselves on their own

religious...have understood that nobody can save themselves on their own'.²⁵

St. Camillus, in the tones of the culture of the epoch as well, said: 'Blessed and happy are those Ministers of the Sick who will taste this holy celestial liquor, works of charity in hospitals'.²⁶ As we well know, Camillus 'thought he could free the sick from the hands of the mercenaries who served them only in corporal matters...and wanted the sick to be even more freed from spiritual ministers, for which there was greater need in Christendom'.²⁷ For Camillus, 'only obedience could prevent him from going morning and night to the hospital. If there fell, he said silk from heaven, nothing could prevent me from going to the hospital'.²⁸ And at the end of his life he envied those who could go to a hospital: 'Blessed are you my Fathers, who have been in that holy vineyard'.²⁹

Some authors have expressed surprise at one aspect of consecrated life, namely the existence of communities that are overly similar to each other (if not too much the same) despite the creativity and diversity of their charisms.³⁰ Perhaps the hour has come to really identify our specific character and purify the standard forms that we have acquired during our history which have made us resemble other religious Institutions. Our Founder wanted us to be different, as we can read in his Testamentary Letter: 'One should not dwell on whether other Orders of the Church of God do not journey along our route'.³¹ This diversity, in my view, is that identity willed by Camillus which has still to be explored. We well know that Camillus lived the last days of his life with the constant fear of a deviation and alteration of his foundation. At the General Chapter of 1599 he dwelt upon failings, and those relating to the fourth vow he held to be the most serious.

4. Brothers All, Vulnerable

One of the categories during this time of pandemic that has been the most used to describe individual and collective experiences

²⁵ FRANCIS, *Fratelli Tutti*, n. 54.

²⁶ VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Roma 1982/4), p. 208.

²⁷ CICATELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO, (Rome, 1980), p. 68.

²⁸ VANTI M., *Lo Spirito di S. Camillo de Lellis* (Camilliani, Rome, 1944), p. 102.

²⁹ CICATELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO, Rome, 1980), p. 96. 'A Minister of the Sick who was cold and frozen in service to sick poor people, and was happy only with his habit and cross, would resemble an emaciated donkey covered with a very beautiful and rich saddle cloth': VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome 1982/4), p. 116.

³⁰ MARTÍNEZ F., *¿Adónde va la vida religiosa?* (San Pablo, Madrid, 2008), p. 18.

³¹ Testamentary Letter of Fr. Camillus de Lellis, 10 July 1614: SOMMARUGA G., *Scritti di San Camillo* (Camilliani, Turin, 1991), p. 215.

Nothing stopped Camillus from going to hospitals

Religious communities that are too similar

All are vulnerable: the elderly most of all

has been that of vulnerability. Everyone is vulnerable. The way in which the virus is transmitted has made us all feel this. It is certainly the case that the people most afflicted were those who had in addition to their vulnerability a particular frailty as a condition of their lives and a result of various pathologies, and in particular those associated with ageing. But we are all vulnerable and increasingly appreciate life, which Camillus ‘greatly appreciated...as a talent that had to be spent well’.³²

Indeed, that evening of silence in St. Peter’s Square in Rome was the moment of prayer that was the most desolate and the most followed at a global level, and the Pope declared: ‘For weeks now it has been evening. Thick darkness has gathered over our squares, our streets and our cities; it has taken over our lives, filling everything with a deafening silence and a distressing void, that stops everything as it passes by; we feel it in the air, we notice in people’s gestures, their glances give them away. We find ourselves afraid and lost. Like the disciples in the Gospel we were caught off guard by an unexpected, turbulent storm. We have realized that we are on the same boat, all of us fragile and disoriented, but at the same time important and needed, all of us called to row together, each of us in need of comforting the other. On this boat... are all of us’.³³

‘True, a worldwide tragedy like the Covid-19 pandemic momentarily revived the sense that we are a global community, all in the same boat, where one person’s problems are the problems of all. Once more we realized that no one is saved alone; we can only be saved together. As I said in those days, ‘the storm has exposed our vulnerability and uncovered those false and superfluous certainties around which we constructed our daily schedules, our projects, our habits and priorities...Amid this storm, the façade of those stereotypes with which we camouflaged our egos, always worrying about appearances, has fallen away, revealing once more the ineluctable and blessed awareness that we are part of one another, that we are brothers and sisters of one another’’.³⁴

Awareness of being defenceless against this threat perhaps was able to help us to feel a form of fraternity and solidarity that we previously had not experienced. In a short time the whole world stopped completely except for what were thought to be essential services. And thus it was that the need to protect oneself also produced visible help from Taiwan with the initiative organised by Fr. Giuseppe Didonè – help that was perhaps unexpected because of the idea that economic help could only come from Europe. ‘The true worth of the different countries of our world is measured by their

In the same boat

Membership as brothers

New solidarity

³² VANTI M., *Lo Spirito di S. Camillo de Lellis* (Camilliani, Rome, 1944), p. 204.

³³ Prayer of Pope Francis, 27 March 2020.

³⁴ FRANCIS, *Fratelli Tutti*, n. 32.

ability to think not simply as a country but also as part of the larger human family. This is seen especially in times of crisis'.³⁵

A confrere of my community in Santiago, while we were having a glass of wine together, a new habit of ours, in front of the fire, said that the pandemic *has united us*, even though we had to stop – for a period – going together every day to the chapel and had to go in turns to the refectory.

In a certain sense we can say that we see Jesus more clearly in our poverty, an idea provoked in us by Carl Jung who was amazed at the difficulty that Christians have in seeing Christ in themselves yet preach that they see him in the weakness and state of need of others (Mt 25: 31-46). When we fall sick we see that this is the moment of identification – this was already the case when we were not sick! – not only with the Good Samaritan (Lk 10: 25-37) but also with the wounded man who is seen cared for a foreigner. In very many cases, indeed, we are cared for not only by confreres but also by lay health-care professionals who at times do this 'with their hearts in their hands'. Now, spirituality should not only be taught – it should also, and rather, be discovered and lived as poor people and as sick people.

5. Prepared for Ethical Discernment

During the pandemic we also needed declarations and attitudes which were the outcome of discernment in the complexity of the ethical world and the urgency of a situation of crisis. How should we react in those hospitals where Camillian chaplains had been expelled by the authorities in order to protect the health of the community? What argued response could one give to those Camillians who were deniers and did not want to accept the vaccine and were expelled from the hospitals? What attitude and message should be given by the Camillian community when faced with the expulsion of elderly people from the resources of hospitals? Silence as an Institution, as a Province, as a community, perhaps makes us accomplices and places us on a short wave of providing immediate mere care that does not transform institutions and has no impact on people's culture.

The restrictions that were imposed to prevent contagion privileged care for biological health but had a deeply negative effect on the overall wellbeing of elderly people and the dying who were deprived of the emotional comfort of their loved ones and religious support at critical moments. The necessary but controversial health-care strategy, although understandable from one point of view, dehumanised dying and created poignant human traumas whose effects on health will be seen in the future. One should think of the

³⁵ FRANCIS, *Fratelli Tutti*, n. 141.

The pandemic has united us

The Lord in us, in need

Chaplains in hospitals.
Deniers

Elderly people, the dying,
adieu

‘affective fasts’ of elderly people and the dying, of the ‘very many adieus’ that were never said when life ended, of the suspended mourning of survivors.³⁶

We well know that Camillus during his voyage in a carriage from Novara to Magenta in order to reach Milan in 1594 had what Vendrame calls his fifth conversion.³⁷ ‘Thus my brothers I can die tonight but I clearly know that this is the will of God: our Order should be directed towards study...not as an end in itself but as the means that are needed to perfectly fulfil our purpose. I call you as witnesses to this wish of mine so that you may communicate it to the whole of the Order’.³⁸

‘The more the Ministers of the Sick have learning, the more they will understand what a precious pearl that have in their hands and the more they appreciate it the more they will hold it dear’.³⁹ Camillus had not read ‘the moral idiot’⁴⁰ but he was afraid that there were religious without sufficient learning to draw near to the sick in a correct way and to create a healthy culture of health.

‘Adaptation and renewal depend greatly on the education of religious’.⁴¹ In my view we want a centre or service as was proposed in the hall of the General Chapter at the Magdalene building in 2019 – a Camillian Centre – that will be used by the Order as a reference point, as a think tank from a theological-pastoral point of view to generate learning and help us to interpret from the perspective of our charism the utilitarian paradigm. This paradigm is followed in the world in order to take decisions in favour of the exclusion of elderly people during the most acute stage. We well know how the *catastrophe for our charism* of the closing of the *Camillianum* has left us lame⁴², even though other realities such as CADIS are being developed. We must be very attentive to the fundamental dynamics of the ‘death’ of the former⁴³ and the development of the latter.

³⁶ PANGRAZZI A., ‘L’impatto della pandemia e le sfide pastorali accanto a chi soffre’ in <https://www.camilliani.org/limpatto-della-pandemia-e-le-sfide-pastorali-accanto-a-chi-soffre/> 25.02.2021.

³⁷ <https://www.camilliani.org/san-camillo-profilo-biografico-e-novita-antropologica-apportata-il-coraggio-di-osare/4/> 4.XI.2014.

³⁸ CICALTELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO, (Camilliani, Rome, 1980), Vms. p. 132.

³⁹ SOMMARUGA G., *Scritti di San Camilo* (Camilliani, Turin, 1991), p. 96. If our religious are not learned and instructed they cannot help the dying in their needs.

⁴⁰ BILBENY N., *El idiota moral. La banalidad del mal en el siglo XX*. Argumentos, Anagrama (Barcelona, 1995).

⁴¹ *Prefecte Caritatis*, n. 18.

⁴² The closure of the Camillianum, despite the pressure applied in Taiwan to force support by the Provincial Superiors, has been a catastrophe for the charism of the Order. One hopes that there will be a follow-up to this closure, not only to recognise the work that was done over thirty years but also to provide a continuation of its meaning.

⁴³ SANDRIN L., *Invidioso io? Un’emozione inconfessabile (Psicologia e spiritualità)* (Romani, Savona, 2020).

Prepared (through study) for discernment

A healthy culture of health

Camillianum: a catastrophe for the charism

Camillianum Centre

Equally, we need a support at the level of thought to meet the beliefs of deniers and pose questions to those beliefs through Catholic morality.⁴⁴ The same may be said in order to look for, understand and identify strategies – of a spiritual character as well – with which to address *the fatigue caused by the pandemic*.⁴⁵ Our vocation to be a ‘school of charity’ should not weaken. Vanti writes on this subject: ‘Instead, no other page of the history of the foundation of the Ministers of the Sick is more determining than this one. The Founder was not content only with teaching what ‘the new school of charity’ opened up to him by Christ on the crucifix actually was in his mind and in his heart – he also wanted to teach how it could be achieved’.⁴⁶ In reality, more than creating a school, Camillus made the Hospital of the Holy Spirit into a *gymnasium caritatis*, a very important point of reference for innovation and humanisation in the field of health care;⁴⁷ Camillus and his religious saw it as a house of God.⁴⁸

6. Aged as Camillians as well?

The pandemic found a nest amongst old people. This also took place in the religious communities of Europe who were touched, diminished, even with some deaths because of infection by the disease, above all during its first wave in the spring of 2020.⁴⁹

In a certain sense there was a clearer highlighting of the situation of consecrated life, which in European countries involves a average age of over eighty, has undergone a reduction in numbers of over a half over the last three decades, and has seen the disappearance of more than a thousand communities (for example in Spain) in five years.

⁴⁴ KASPER W., *et al.*, *Dios en la pandemia* (Sal Terrae, Santander, 2021).

⁴⁵ BERMEJO J.C., *Espiritualidad y salud. Diagnóstico y cuidado espiritual* (Sal Terrae, Santander, 2021).

⁴⁶ VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome, 1982/4), p. 342.

⁴⁷ *Christianae caritatis gymnasium*, the Holy Spirit is and will be a school, a gymnasium of Christian charity with an international influence says Vanti: VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome, 1982/4), p. 144.

⁴⁸ VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome, 1982/4), p. 148.

⁴⁹ Fr. Locci made an interesting observation: ‘My impression is that today there is a great deal of pessimism and that difficulty is encountered in rediscovering the revolutionary force of our charism. There is a vein of discouragement in what we say that is also due to the difficulties of solving many problems: the great ageing of the largest Province in Italy, which makes up about a half of the Order; the real decrease of the Order in Europe; various difficulties in different parts of the world; the operational weakening of animating groups. The causes vary from country to country and one cannot make a single diagnosis’: LOCCI E., ‘San Camillo e i camilliani’, in <https://www.camilliani.org/san-camillo-e-i-camilliani/>

The new school of charity should be retrieved:

The elderly

The ageing of consecrated life

In this situation of the ageing of consecrated life in Europe, Pope Francis, on the occasion of the World Day of the Sick of 11 February 2022, observed that the health-care works of the Church still have their function: ‘In this context, I wish to reaffirm the importance of Catholic healthcare institutions: they are a precious treasure to be protected and preserved; their presence has distinguished the history of the Church, showing her closeness to the sick and the poor, and to situations overlooked by others. How many founders of religious families have listened to the cry of their brothers and sisters who lack access to care or are poorly cared for, and have given their utmost in their service! Today too, even in the most developed countries, their presence is a blessing, since in addition to caring for the body with all necessary expertise, they can always offer the gift of charity, which focuses on the sick themselves and their families. At a time in which the culture of waste is widespread and life is not always acknowledged as worthy of being welcomed and lived, these structures, like “houses of mercy”, can be exemplary in protecting and caring for all life, even the most fragile, from its beginning until its natural end’.⁵⁰

In this sense it may at times happen that both as individuals and as an institution and as consecrated life in general we feel at times like the unfortunate man of the parable of the Good Samaritan: ‘gravely wounded and on the ground at the side of the road’.⁵¹ We also feel that we are abandoned by institutions, which are impoverished and lacking in human energy (*leadership*) or perhaps economic energy, in supporting our works. We need courage and judgement to discern where we should free ourselves of our works.

It is certainly the case that we must look at reality more in the face and take the future, which will be even more aged, by the hand. In the future the problem of leadership (at local and Provincial levels) and the problem of governance will have an even greater impact. Having the opportunity to receive inter-Provincial and inter-continental help will become increasingly important, but a general orchestration, a planning of the future, and a respect for the rules of religious migrations or human promotion of an economic, cultural, and status (etc.) character, will also be ineluctable. We need to have a visualisation of the religious map of Europe, of communities, their configuration, their government and their relationship with their countries of origin, and the relations of aid with the families of these religious and the young Provinces of America, Africa and Asia. A managerial silence here could lead to the growth of a headless monster, with lost and undirected energies, and perhaps with motivations susceptible to being revised and purified.

Pope Francis observed: ‘We have seen what happened with the elderly in certain places in our world as a result of the coronavirus. They did not have to die that way’.⁵² Thus it was that

⁵⁰ FRANCIS, *Message of the Holy Father Francis for the Thirtieth World Day of the Sick*, 11 February 2022, n. 4.

⁵¹ FRANCIS, *Fratelli Tutti*, n. 6.

⁵² FRANCIS, *Fratelli Tutti*, n. 19.

Religious: the wounded of the parable

Leadership and governance

Fathers of the good death (our own)

as Camillians, where this was possible, we expressed ourselves with an identity that was strengthened by the feelings of people when they began to call us in some parts of the world ‘the fathers of the good death’. Now, however, the good death is also ours, individually, as communities or as Provinces, dying as we are in Europe, and this is an opportunity for us as Camillians: ‘Consecrated life was born to introduce the newness of the Spirit and not to perpetuate old schemata. It must be located where the Spirit takes it, where it is possible to proclaim and bear witness to the ‘the good news of God’ in health-care practice. It is not appropriate to be satisfied with putting some drops of devotion in the old model’.⁵³ In our Institute we require a biographically mature age, one that is not only adolescent or elderly, as perhaps it appears nowadays.

7. Together? In the same Boat

Perhaps as never before we had to care for each other in our communities. Well, I believe that this is something that we have always done – caring for our conferes when sick or at the end of their lives. But the pandemic put us in a situation of being ‘locked in our homes’.

‘Living the present with passion’, as Fr. Léo repeated everywhere, means becoming ‘experts in communion’, with the ‘mysticism of encounter’: the capacity to hear, to listen to other people. The capacity to create the route, the method, together. This is a good way of making wine with the grapes of the times we are going through.

But how far do local fraternity, being together, sharing prayer, meals, relations, actually reach? I believe that in many communities of the Order fraternity has gone haywire and this has to be condemned publicly amongst us. There are communities that share very little and perhaps the pandemic made their members relate to each other more, locked up in their homes, perhaps taking care of each other, when someone tested positive for the virus. But this dimension of our identity should be reviewed, accompanied and addressed if we do not want the dissolution of one aspect of our identity. The pandemic has made us more aware of our interdependence. Here is the communitarian dimension. ‘We are all in the same boat’. It is our task to take care of the boat, with the different roles that contribute to its role and its religious and Camillian identity. Without community we are not religious. Perhaps

⁵³ GARCIA PAREDES J.C.R., ‘Identidad de la vida consagrada en misión socio-sanitaria: Su ministerialidad carismática y profética’, *Labor Hospitalaria*, 312, 2015(2), p. 42. José María Arnáiz, a Claretian religious, wrote: ‘Fifteen years ago I wrote a few pages in the book ‘For a Present that has a Future’ on ‘hospitalised consecrated life’ and how to rediscover it in order to free it from death. Now we speak more of death. This happens to those sick people for whom medical doctors do not give an adequate diagnosis and to whom they do not give appropriate medicines and treatment’: ARNAIZ, J.M., ‘Acompañar institutos en riesgo de extinción. La opción de morir con dignidad. El arte carismático de morir, *Vida Religiosa*, 5 (2010), p. 72.

Fraternal help in illness

Experts in communion

Fraternal life in community
(money)

this was Camillus was afraid of – in his Testamentary Letter he laid incisive emphasis on poverty which then became the sharing of money.⁵⁴

The shifting of young religious to countries of old Europe should be read in these terms of a single boat with everybody being jointly responsible, more than in terms of the personal or economic self-promotion of individuals or communities.

8. In Mourning at Risk

Without doubt many of us remember how at the General Chapter of 2013 we added to article 53 of our Constitution a new sensitivity to people in mourning: ‘In carrying out our ministry, we pay human and pastoral attention to the families of the sick, and *to people in mourning*, sharing their anxieties and supporting them with our solidarity’.⁵⁵

During the worst moments of the pandemic we witnessed a form of special loneliness experienced by very many people who did not accompany their dying loved ones and, without *pietas*, there were no rites that humanise and allow faith to be celebrated in a community. Empty places of worship, cemeteries without funeral processions. Assemblies became digital and this was also true of many expressions of mourning.⁵⁶

Many of us tried to be creative and to offer prayers, meetings, counselling...in a digital format for this strange form of accompanying and celebrating. But digitalisation and mourning have many more links that had arrived previously and have become for us an opportunity for pastoral creativity. QR codes on gravestones, reconstruction of a personality starting with a digital fingerprint, correspondence with ‘dead people brought to life digitally’, repeat broadcasts of funeral rites, digital wills...and other elements have become for us an opportunity to establish ethical-pastoral criteria for our mission of accompanying during grief.

But these creative possibilities – like online sacraments which can turn out to be convenient for non-localised new agents of pastoral care operating in rooms/offices – should be thought about, subjected to discernment, in the light of the correct criteria of wise pastoral care in health.

9. Connected Online

⁵⁴ SOMMARUGA G., *Scritti di San Camillo* (Camilliane, Turin, 1991), p. 215.

⁵⁵ Article modified at the General Chapter of 2013 with an addition on mourning.

⁵⁶ BERMEJO J.C., *Duelo digital y coronavirus* (Desclée De Brouwer, Bilbao, 2020).

Religious coming to Europe

The Constitution and mourning

Without *pietas*

Digitalisation of mourning

Wise pastoral care in health

Pope Francis has observed: ‘Digital connectivity is not enough to build bridges. It is not capable of uniting humanity’.⁵⁷ ‘As silence and careful listening disappear, replaced by a frenzy of texting, this basic structure of sage human communication is at risk’.⁵⁸

In *Fratelli Tutti* we read: ‘It should be kept in mind that “an innate tension exists between globalization and localization. We need to pay attention to the global so as to avoid narrowness and banality. Yet we also need to look to the local, which keeps our feet on the ground. Together, the two prevent us from falling into one of two extremes. In the first, people get caught up in an abstract, globalized universe... In the other, they turn into a museum of local folklore, a world apart, doomed to doing the same things over and over, incapable of being challenged by novelty or appreciating the beauty which God bestows beyond their borders”’.⁵⁹

We have experienced this in particular with various online connections between Provincial Superiors/Delegates or amongst members of a General Chapter over the last two years. While we live what is local with illness, problems and urgent needs, we raise our gaze amongst us in order to be interested in one another.

Perhaps this journey still contains some unexplored possibilities in the field of Camillian formation, in the field of the ministry of centres for humanisation and pastoral care.⁶⁰

In this sense, I do not believe that one needs to persist in overcoming a eurocentrism, thereby running the risk of losing traditions, wisdom, experience, resources, forms of knowledge...because of the appeal of decentralisation or because of a superficial and accommodating idea of synodality. Rather, it seems to me that we need to ‘work on a small scale, in our own neighbourhood, but with a larger perspective... The global need not stifle, nor the particular prove barren, our model must be that of a polyhedron, in which the value of each individual is respected, where “the whole is greater than the part, but it is also greater than the sum of its parts”’.⁶¹

‘To speak of a “culture of encounter” means that we, as a people, should be passionate about meeting others, seeking points of contact, building bridges, planning a project that includes everyone. This becomes an aspiration and a style of life. The subject of this

⁵⁷ FRANCIS, *Fratelli Tutti*, n. 43.

⁵⁸ FRANCIS, *Fratelli Tutti*, n. 49.

⁵⁹ FRANCIS, *Fratelli Tutti*, n. 142.

⁶⁰ As far as I know, at least some initiatives have been taken in some Spanish-speaking countries.

⁶¹ FRANCIS, *Fratelli Tutti*, n. 145.

Listening diminishes

Globalisation and localisation

Opportunities for centres for pastoral care

The little and the global

culture is the people, not simply one part of society that would pacify the rest with the help of professional and media resources'.⁶²

There is the risk that we will exaggerate with connections in our rooms: one can live in a continent and have one's heart, one's time, a part of one's ministry, one's active and passive voice, elsewhere. Being online...one can live in the country one comes from or in a 'virtual community' that is, however, real, with confreres from who knows where...Some of our elderly now prefer a fine Mass on television rather than a boring Mass where they are present. The balance between online and presence should be looked for, not as the result of a passive approach that bears the marks of fatigue in dealing with the pandemic but as the outcome of strategies at the level of motivations and the promotion of communion which operate at different levels: communities, Provinces, the Order.

10. Bearing Witness in Hope

During my illness – in particular during the first stage of the serious consequences of the first infection of the lungs (something some of you have experienced), I was not able to escape the need to look for forms of human contact, which I had thanks to the local community, the Provincial community, and some of you. These were supportive in various ways. I also engaged in research into hope, perhaps as my defence mechanism, grasping the anchors of the theorisation of the many surnames that hope has in illness. How much do I wish that hope had been studied in a better way, searched for, proposed in its healing power, as the last thing that is lost – it has been seen as such ever since the story of Pandora – and assessed in its most human, even before Christian, dynamics! It would be a fine thing to see the Camillians in the vanguard of research into the power of the dynamism of hope in illness and at the end of life.

Day always follows night. We do not know what the 'post-pandemic' will be. But on us will also depend the lessons that are learnt and the level of thanksgiving to God that it generates in us, as well as the dynamic of trust and solidarity specific to the *homo viator* who becomes the *homo pugnator* specifically because of hope.⁶³

St. Camillus also exhorted his followers to have hope with the following words: "Men of little faith and no charity, why do you not trust in God?"⁶⁴

⁶² FRANCIS, *Fratelli Tutti*, n. 216.

⁶³ BERNARD Ch.A., *Théologie de l'espérance selon Sait Thomas D'aquin* (Librairie Philosophique J. Vrin, Paris, 1961).

⁶⁴ CICATELLI S., *Vita del P. Camillo de Lellis*, edited by P. SANNAZZARO, (Rome, 1980), p. 113. See also VANTI M., *S. Camillo de Lellis e i suoi Ministri degli Infermi* (Camilliani, Rome, 1982/4), p. 238.

A culture of encounter

Virtual communities, fatigue in dealing with the pandemic

Research into hope and health

Homo viator, homo pugnator

Trust in God

‘Hope is bold; it can look beyond personal convenience, the petty securities and compensations which limit our horizon, and it can open us up to grand ideals that make life more beautiful and worthwhile’.⁶⁵ How much would I also like our Order to have more that air of optimism that arises from hope and how much would I like it to overcome that other air of pessimism that easily finds the formation of groups who engage in exaggerated and endless complaining.

Never before at a global level have we paid so much attention to the importance of prevention, an importance that is recognised by our Constitution when it states: ‘By the promotion of health, the treatment of disease and the relief of pain, we cooperate in the work of God the creator, we glorify God in the human body and express our faith in the resurrection’ (C, n. 45). This is a fundamental aspect of Camillian spirituality which becomes alive in the commitment to prevention.

‘All too quickly, however, we forget the lessons of history, “the teacher of life”. Once this health crisis passes, our worst response would be to plunge even more deeply into feverish consumerism and new forms of egotistic self-preservation. God willing, after all this, we will think no longer in terms of “them” and “those”, but only “us”. If only this may prove not to be just another tragedy of history from which we learned nothing’⁶⁶ or a communal wound which it is hard for us to talk about – like at times other wounds – in order to heal it.

Our hope makes us jointly responsible, it invites us, in my view, to look at the *millennial goals* for sustainable development,⁶⁷ committing ourselves to the reasonable use of energy and – certainly – of water as a source of health, in relation to which as Camillians we should have prophetic words to say because it will become, without doubt, a problem of great importance. Given that other pandemics – like AIDS for example – have generated programmes and specific responses in different parts of the world, who knows how many new things could arise from this pandemic through the Camillians?

To finish...

⁶⁵ FRANCIS, *Fratelli Tutti*, n. 55.

⁶⁶ FRANCIS, *Fratelli Tutti*, n. 35.

⁶⁷ UN, Agenda 2030 for Sustainable Development: 1. Defeat poverty, 2. Defeat hunger, 3. Health and wellbeing, 4. Quality instruction, 5. Gender equality, 6. Clean water and hygiene-healthcare services; 7. Clean and accessible energy; 8. Dignified work; 9. Enterprises, innovation and infrastructure, 10. Reduce inequalities, 11. Sustainable cities and communities; 12. Responsible consumption and production, 13. The fight against climate change; 14. Life under water, 15. Life on earth, 16. Peace, justice and solid institutions, 17. Partnership for these goals.

An air of optimism in the Order

Prevention

Learning from the pandemic: ‘us’

Corresponsabili dinanzi agli obiettivi del millennio

During times of an anaemia of resources and a social marginalisation of the religious factor, the risk of a sacralisation of the traditional patrimony can be transformed into fanaticism and fundamentalism.⁶⁸ Such will not be the case if we engage in a pilgrimage towards the centre of our charism – health.

A new wine that is possible today is to interpret our charism not only in terms of an apostolate, and therefore of service to the sick and the culture of health, but also as ‘witness to community, a model of mutual service in old age and illness’.⁶⁹ We will need less ‘religious phraseology’ and more fraternity ‘in tune with the appealing sincerity of the Gospel. Plain words’,⁷⁰ perhaps attracted by hospitals ‘as though by a powerful magnet’.⁷¹

May God inspire in us what is needed to make *new wine* with the joy of fraternity⁷² to become resilient starting with this trauma⁷³ of the pandemic! I will end with the words of St. Camillus himself: “I commend the Almighty to inspire in all present and future fathers and brothers what is for His glory!”⁷⁴

Nemi (Rome) 14 May 2022.

Br. José Carlos Bernejo

⁶⁸ PAPA D., ‘Dal pozzo... alla locanda’, in CONGRESSO INTERNAZIONALE DELLA VITA CONSACRATA, *Passione per Cristo, passione per l’umanità* (Paoline, Milan, 2005), p. 74.

⁶⁹ The idea is of Fr. Michel Amalados cited in PUJOL I BBARDOLET J., *Hacia el futuro de la vida consagrada. Vino nuevo en odres nuevos* (San Pablo, Madrid 2008), p. 33. There is a description of mission interpreted in various ways today: as conversion, as being born anew, as inculturation, as dialogue, as an inner and prophetic pilgrimage, and also as witness.

⁷⁰ CICLSAL, *Rejoice!*, 2014, n. 1.

⁷¹ VANTI M., *Lo Spirito di S. Camillo de Lellis* (Camilliani, Rome, 1944), p. 164.

⁷² CICLSAL, *Rejoice!*, 2014, n. 9.

⁷³ The Order has had to live through various traumas recently and perhaps they still have to be healed because there have been overly the subject of silence: the events of the Superior General Renato Salvatore in 2013, the death of the new Superior General Léo Pessini five years later, the closure of the Camillianum in 2019, the covid-19 pandemic and its implications for our journey with lay people (like for example the Lay Camillian Family), and the war between Russia and the Ukraine.

⁷⁴ SOMMARUGA G., *Scritti di San Camillo* (Camilliane, Turin, 1991), p. 215.

Health at the centre of things

The Gospel with plain words

Traumas. Resilience

New wine.