



# The Holy See

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**ADDRESS OF HIS HOLINESS POPE FRANCIS  
TO PARTICIPANTS IN THE INTERNATIONAL CONFERENCE  
SPONSORED BY THE PONTIFICAL COUNCIL FOR HEALTH CARE WORKERS [FOR HEALTH  
PASTORAL CARE]**

*Sala Regia*

*Thursday, 19 November 2015*

**[[Multimedia](#)]**

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*Dear Brothers and Sisters,*

Thank you for your welcome! I thank Archbishop Zygmunt Zimowski for the courteous greeting he addressed to me on behalf of all those present, and I give my cordial welcome to you, organizers and participants of this 30th International Conference on “The Culture of *Salus* and of Hospitality at the Service of Man and of the Planet”. I extend a heartfelt thank you to all the collaborators of the Dicastery.

Many questions will be addressed in this annual meeting, which marks the 30 years of activity of the Pontifical Council for Health Pastoral Care, and which also coincides with the 20th anniversary of the publication of St John Paul II’s Encyclical Letter *[Evangelium Vitae](#)*.

In fact respect for the value of life and, even more so, love for it, finds irreplaceable fulfillment in reaching out, drawing near, taking care of those who suffer in body and spirit: all actions that characterize health pastoral care. Actions and, even before, attitudes that the Church will especially emphasize during the Jubilee of Mercy, which calls us all to be close to our most suffering brothers and sisters. In *[Evangelium Vitae](#)* we can trace the constitutive elements of the “culture of *salus*”: namely, *hospitality, compassion, understanding and forgiveness*. They are the habitual attitudes of Jesus in relation to the multitude of needy people that approached him every day: the sick of every kind, public sinners, the demon-possessed, the marginalized, the poor, foreigners.... And, curiously, in our *throwaway culture*, they are rejected, they are left aside. They

don't count. It's curious... What does this mean? That the throwaway culture is not of Jesus, it's not Christian.

Such attitudes are what the Encyclical calls "positive requirements" of the Commandment about the inviolability of life, which, with Jesus, are manifested in all their breadth and depth, and which again today can, or better yet, must distinguish health pastoral care: they "range from caring for the life of one's brother (whether a blood brother, someone belonging to the same people, or a foreigner living in the land of Israel) to showing concern for the stranger, even to the point of loving one's enemy" (n. 41).

This *closeness* to the other — true closeness, not feigned — to the point of regarding him as someone that belongs to me — an enemy also belongs to me as brother — surmounts every barrier of nationality, of social extraction, of religion... as the "Good Samaritan" of the Gospel parable teaches us. It also surpasses that culture in a negative sense, according to which, whether in rich countries or in poor ones, human beings are accepted or rejected according to utilitarian criteria, in particular, social or economic utility. This mentality is parent of the so-called "medicine of desires": an ever more widespread custom in rich countries, characterized by the quest for physical perfection at any cost, in the illusion of eternal youthfulness; a custom that in fact leads to discarding or marginalizing those who are not "efficient", those who are regarded as a burden, a bother, or are simply unappealing.

Likewise, "reaching out" — as I recalled in my recent Encyclical *Laudato Si'* — also implies assuming *unbreakable responsibilities towards Creation and the "common home"*, which belongs to all and is entrusted to the care of all, also for the coming generations.

The anxiety that the Church harbours is for the fate of the human family and of all of creation. It is about educating everyone to "care for" and to "administer" Creation as a whole, as a gift entrusted to the responsibility of every generation, so that it is handed down as intact and humanly liveable as possible to the coming generations. This conversion of heart to the "Gospel of Creation" implies that we make our own and render ourselves interpreters of the cry for human dignity, which is raised above all by the poorest and most excluded, as sick and suffering people often are. In the now imminence of the Jubilee of Mercy, may this cry find a sincere echo in our hearts, so that in the exercise of the corporal and spiritual works of mercy, according to the different responsibilities entrusted to each one, we can also receive the gift of God's grace, while we render ourselves "channels" and witnesses of mercy.

I hope that in these days of reflection and debate, in which you also consider the environmental factor in its aspects most strongly related to the physical, psychological, spiritual and social health of the person, you may contribute to a new development of the culture of *salus*, understood also in an integral sense. I encourage you, in this perspective, to always bear in mind in your work the reality of those populations, which suffer most the damages that stem from environmental

degradation, serious, often permanent injuries to health. And, speaking of these damages that stem from environmental degradation, it is a surprise for me to find — when I go to the Wednesday Audience or to parishes — so many sick people, especially children.... The parents say to me: “He has a rare illness! They don’t know what it is”. These rare illnesses are the consequence of the sickness that we inflict on the environment. And this is serious!

Let us ask Mary Most Holy, Health of the Sick, to accompany the work of your conference. We entrust to her the commitment that, every day, the different professional figures of the world of health carry out in favour of the suffering. I wholeheartedly bless you, your families, your communities, as well as all those you meet in hospitals and in nursing homes. I pray for you; and you, please, pray for me. Thank you.