



# Bringing Home the Word



Fifth Sunday in Ordinary Time February 8, 2015

## Suffering and Healing

By Janel Esker

Job speaks for all of us—OK, well, most of us. Certainly anyone who's struggled with insomnia resonates with Job's being "filled with restlessness until the dawn." But most of us share with Job the experience of suffering. Some people have suffered beyond comprehension; others have known only "regular" suffering—illness, death, disability, tragedy—although it's never regular when it happens to us. We've all felt the frightening despair of which Job speaks.

### Sunday Readings

#### Job 7:1–4, 6–7

Job laments the "drudgery of life": hard, hot working days; long, restless nights; and an endless, hopeless, restlessness.

#### 1 Corinthians 9:16–19, 22–23

Paul describes his preaching as "an obligation" and "a stewardship." So that others may gain the gift of salvation, he humbles himself and offers the gospel to all.

#### Mark 1:29–39

Jesus cures many sick people, including Simon's mother-in-law. Pressed by the disciples and crowds, he extends his preaching and healing to the nearby villages.

Some fortunate souls haven't experienced such challenges. During a talk I gave several years ago, I asked the audience to recall their own suffering. An older couple admitted they hadn't experienced significant suffering. Their children were healthy, their parents died at a ripe old age, and life had been fairly easy for them.

This isn't the experience of most of us, however. Even if we've moved past such moments of pain and suffering, we can recall feeling as Job did—that life was misery, that hope was difficult to find.

There certainly are no easy solutions to the problem of suffering. But in the Gospel today we see Jesus in his healing ministry, reaching out to many in need. Aren't we, in our times of suffering, among the crowds gathered at Jesus' door, begging for healing and mercy?

Jesus is persistent in his healing—he doesn't let exhaustion or weariness stop him. He reaches out, grasps hands, and is present to those who are hurting.

Jesus is this persistent presence of healing to us, too. He sees us in the crowd, he grasps our hand, and he promises to stay with us always. †

### REFLECTION QUESTIONS



- When do I feel weary, weak, restless, ill, or enslaved?
- How do my obligations—including my stewardship—heal, teach, and bring salvation to others?

## PRAYER

Lord, your touch is  
gentle and loving.  
Heal me of all that  
prevents me from  
seeing my sisters  
and brothers with  
eyes of love.

—From *Faithful Meditations  
for Every Day in Ordinary Time*,  
Rev. Warren J. Savage  
and Mary Ann McSweeney

# Catholic Calendar: St. Josephine Bakhita

By Mary Lee Barron, PhD, RN

Josephine Bakhita was born in the Darfur region of Sudan in 1869. At nine, she was kidnapped from her home. This trauma caused her to forget her family surname. Her kidnappers gave her the name *Bakhita*, meaning “fortunate.”

Josephine was sold often and endured horrific brutality. In 1883, was staying with the Canossian Sisters of the Institute of the Catechumens in Venice. It was there in 1890 that Bakhita heard the call to the faith and was baptized and confirmed, taking the name Josephine. She refused to return to her owner, and in a court case the judge concluded that since slavery was illegal in Italy, Josephine had been free since 1885. When she came of age, she declared her desire to become one of the sisters.

Josephine spent the rest of her life at a house in northern Italy, where she was known for her gentleness, ready smile, and modesty, keeping the faith during day-to-day work and routines. She started writing her memoirs in 1910. They were published in 1930. Appearances throughout Italy made her famous and helped recruit missionary nuns for Africa, whom she also helped train. Her last years were marked with pain and illness, and she lost the ability to walk. She died in 1947 on February 8—her feast day—and was canonized in 2000. She is venerated as a modern African saint and as a saint with a special relevance to slavery and oppression. She is the patron saint of Sudan. †



## Bioethics: Chronic Pain Management

By Fr. Mark Miller, CSsR

People with chronic pain often are given medication that does not work or has awful side effects. They go from doctor to doctor seeking relief and end up with a reputation as complainers. The frustration level is high—for the chronic sufferer and for the doctor.

I often hear stories from people who suffer horrible, constant pain even in the hospital. On requesting relief they are told, “Doctor’s orders: No medication for two more hours” or, “It’s not that bad” or even, “There is nothing we can do.” Ironically, much of the medical system simply minimizes the reality of pain. Denial reinforces the conviction that nothing needs to change.

But a growing number of health-care providers, finally realizing the problems of chronic pain, specialize in pain treatment.

Perhaps the key breakthrough for these doctors is their willingness to accept as true the testimony of pain sufferers. Because it is difficult to measure pain objectively, a doctor’s belief of a patient’s pain story shows a level of trust that is at the root of the healing arts.

Most people would prefer just to take a pill. Pain specialists, however, have had to adopt four critical approaches to pain management. First, they speak of *coping with* rather than *curing* pain. When a cure is not possible, pain levels can still be reduced to tolerable levels where people can live full lives.

Second, these doctors work in interdisciplinary teams. Physiotherapy and chiropractic often help patients more than opiates. Acupuncture may help others, and others require counseling to change self-harming behaviors.

Third, the best medications are used but are seldom magic bullets. Doctors need to find the right dose, the right combination, and the right balance with other therapies. Here pain research, though lengthy and expensive, offers considerable hope.

Finally, and perhaps most surprising, these doctors often put “the sufferer at the head of the care team.” Patients need to find what works for them and, as one woman explained, “direct the best care that worked for me.”

So why discuss physical pain, let alone bioethics, in a religious publication? Like ethics, a cornerstone of faith is providing good and appropriate care for people who suffer. And pain is suffering. †

## WEEKDAY READINGS February 8–14

Mon. Genesis 1:1–19 / Mark 6:53–56  
Tue. St. Scholastica:  
Genesis 1:20–2:4 / Mark 7:1–13  
Wed. Our Lady of Lourdes:  
Genesis 2:4–9, 15–17 / Mark 7:14–23

Thu. Genesis 2:18–25 / Mark 7:24–30  
Fri. Genesis 3:1–8 / Mark 7:31–37  
Sat. Sts. Cyril and Methodius:  
Genesis 3:9–24 / Mark 8:1–10