TUI MOTU
InterIslands

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Visiting the Sick

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EDITORIAL

Giving the Sick our Real Presence

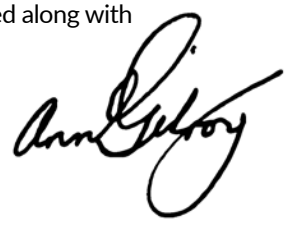
Winter is covering the landscape with its particular palette of silver and grey in our part of the world. A single scarlet geranium, a refugee of summer, seems unashamed of its out-of-placeness. We've see-sawed into this season through extended warm patches, bursts of rain, sudden freezes and patches of sunshine. Now winter is no longer just popping in — it's here to stay.

We often image illness as an attack on our health as if it is an alien force breaching our fortress. We speak of "fighting off" sickness and "keeping it at bay". Yet we can read vulnerability, frailty and illness in bodies every day. As Mike Riddell says: "Suffering is the price of humanity. It's the cost of admission to life." Sometimes, like the coming of winter, it shocks us into a new state of awareness, or it may come among us like a gradual wearing out of slippers. I asked Matt how long he'd had multiple sclerosis. "I was diagnosed last year but I really "heard" it only a couple of months ago," he said referring to his journey to acceptance. Illness, injury, breaks and wearing out are not strangers. Like winter we can expect them. We don't want their suffering and we can do our bit to build up our health, arrange our environment and co-operate with treatments. But neither can we escape them.

Maybe it's when we're ill that we appreciate mercy more fully— the relief of the ambulance's arrival at an accident, the hot meal at the door, a mowed lawn, the right prescription, a phone call, the children's cards, the prayer, the visit. It's in these acts of visiting — of giving our real presence — that the geranium scarlet of mercy is embodied and compassion surges in our universe. Mercy is in our real presence, a voiced "I'm still here" in the dark night, in compassionate company in pain, in sitting beside listening.

Visiting the sick is the theme of this 205th issue. We thank all our contributors whose reflection and writing, questions, spirituality, faith and struggle, art and craft have created June's magazine. Mike Riddell reflects on suffering as "a sacred mystery to be borne rather than understood" and that "knowing the depth of divine love enables us to go where we might otherwise fear" in being with people suffering. Stephanie Kamp speaks of a need for mindfulness in the busy hospital routine so she can be fully present to her patients. Rebecca Dickinson and Michele Lafferty share why their work with injured and sick people is a privilege. These and other articles, comments, images and poems offer reading and reflection — gifts of geranium-red along with the silver of winter.

As is our custom, the last word is of blessing. ■



POPE FRANCIS'S COMMISSION ON WOMEN DEACONS

by Ann Gilroy

I welcome any development in Church that responds to women's repeated call to have an equal share in the decision-making. Pope Francis's proposal to set up a Commission to study the possibility of having women deacons, while not yet a decision to change a structure, is offering Catholic women a frisson of promise.

The composition of the members of the Commission will be crucial for credibility and for symbolic value. Will it have the usual token couple of women? Will at least half be women? Or even—will the majority be women? Certainly it will not be difficult to find qualified women to serve, as more than one Catholic theologian and scripture scholar has researched in this area in the last decades, including Phyllis Zagano, an internationally renowned academic, who has published extensively on women deacons. We remember the study of women deacons set up in the 1990s which fizzled out and we will be watching that this new initiative does not meet a similar fate.

The ordination of women into the diaconate could be a radical, hope-filled, Spirited intrusion into the male-only priesthood or it could be a matter of merely "adding women and stirring".

We can expect that a decision for women deacons will have strong opposition from many clerics and among some of the faithful. Our Church has a tradition of thinking about women and men as different and unequal—which in official documents is couched in the language of "complementarity". In essence this means that the clerical Church identifies, assigns and gate-keeps women's roles. Despite the cultural, family, feminist and other changes affecting the equality of opportunity and power for women and men in more than just western societies in the world, the Church has lagged in accepting even the new theologies emerging from contemporary experiences. When was the last time we saw a woman theologian or scripture scholar cited in a Papal or Episcopal letter? Or, consider the current liturgical translation where women are expected to pray: "For us men and for our salvation . . . " Look at the way Pope Francis's encyclicals have been marred by the sexism of the English translations.

But equally we greet the Commission in hope. We know that a decision to ordain women to the diaconate will need a window-opening, Spirit-blowing, joyous conversion and acceptance so that it is recognised as a new evolution in the Church. As a "new thing" it will need to be nurtured, valued and mentored.

Most importantly this new life will need to grow in the soil of humility composted in the decay of clericalism, focused on the ministry of service, watered by scriptural reflection and acknowledged as a "new thing" in the Church and in the communion of God.

Although women deacons will be new in the 21st century Church, they are not new to the Church. In the New Testament letters by Paul and other early Church documents there is evidence of women serving in both deacon and priestly roles. Although they did not have formal ordination as now, neither did the men in those roles. As the Church became enculturated in patriarchal civil cultures women were denied the ministry roles. Theological reasons favouring a men-only priesthood and control of the Church, took over and have been entrenched since.

As a "new thing" we want to discover how women will be deacons in the Church at this time in history, in the different contexts of their ministry and with the gifts they will bring to ministry.

We don't want them to be another layer of clericalism.

We want the vocation of deacon to be open to all women who discern God's call—young, married, single, older—and from all the cultures of the people of God.

We want the same resources put into women's formation for the diaconate as are given to the formation of men in the seminary.

We want women's preparation for the diaconate to be carefully thought out with discernment, study, praxis and prayer forming an integrated life-style. We want that to happen in ordinary life and in time apart.

We want the craft of preaching to have particular emphasis in their preparation. We want to be nourished, extended, challenged and encouraged in our faith—personally and as Christian community. We need women deacons who are steeped in Scripture and in ordinary life.

And we want to see women deacons appearing in liturgies alongside priests, taking up their role confidently.

We celebrate the life of the Spirit working through the Women Religious Leaders in Rome which moved Pope Francis to listen and act. We wait to see how God is doing a "new thing" among us. ■

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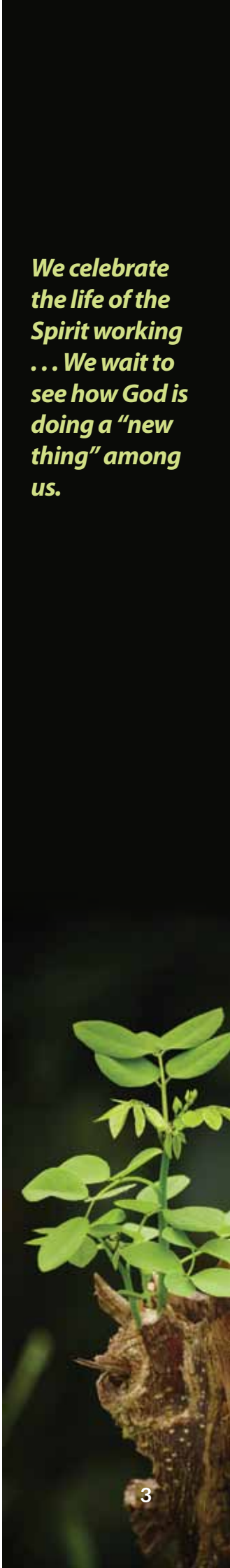
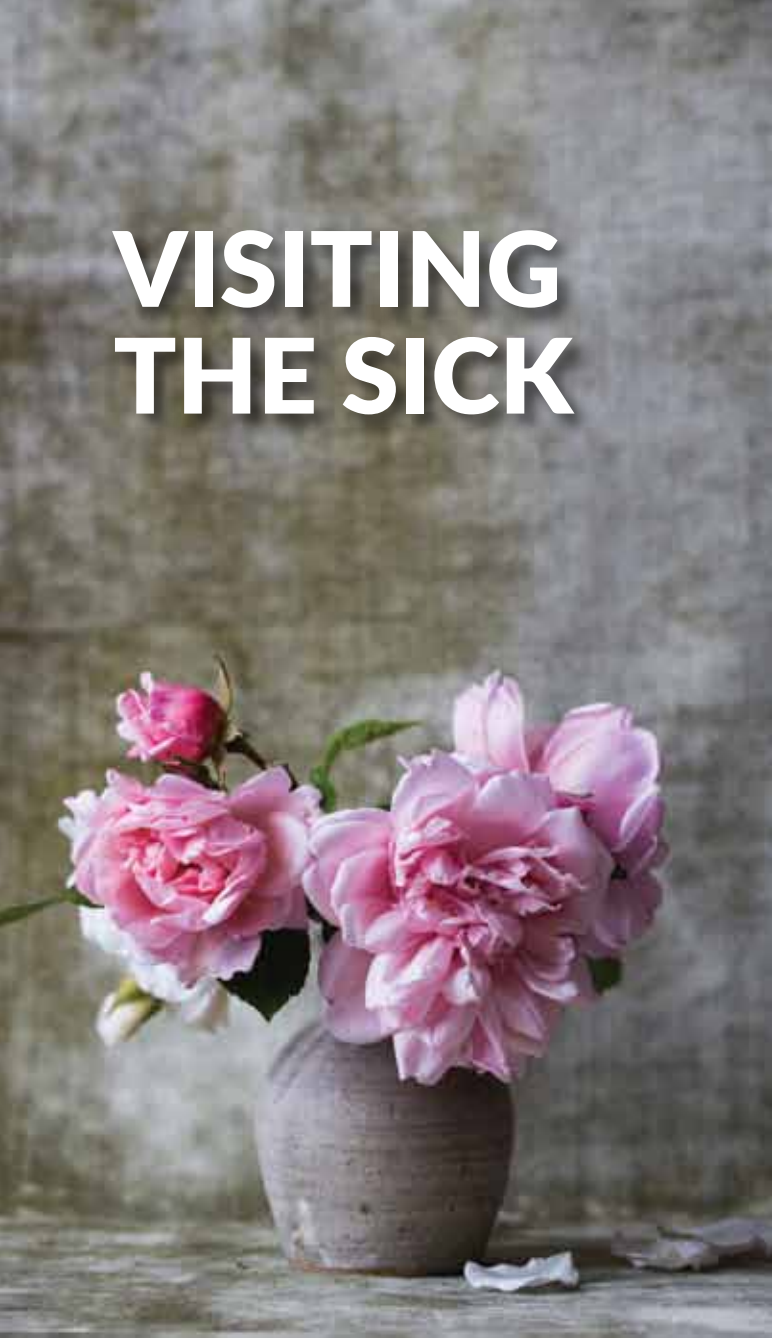


VISITING THE SICK



Mike Riddell reflects on visiting the sick as a work of mercy where both visitor and sick person face, accept and enter into the mystery of suffering.

I'd not long arrived back from Switzerland, where I'd been doing post-graduate work in theology. I was very excited about a new school of thought, Process Theology, which had some fresh perspectives on evil and suffering in the world. I was keen to share them with anyone who would listen.

We visited friends, who in our absence had given birth to a daughter. The delivery was botched badly, in a way that later found its way before the courts. As a result, this beautiful dot of a girl was born with brain damage, such that she would experience distressing fits at regular intervals. The prognosis suggested she wouldn't live for long, but our friends took her home to care for her.

It was both agonisingly painful and tiring for them. The father had been a lapsed Catholic, but strangely enough, the harrowing experience with his daughter had caused him to begin attending church again. It was not a particularly thought-out decision, but one I suspect was induced by the need to experience something familiar and sheltering.

As we talked over a few wines, he inevitably asked me how God could allow this kind of cruel torment that his daughter was bearing on a daily basis. In my fresh arrogance, I expounded my new-found theories based in Process Theology. He was an intelligent man, and able to follow the complex metaphysical precepts that underlay it. But it brought him no comfort.

His daughter died without relief from her suffering. Her parents, good people, offered her what comfort and love they were able to give.

Accepting Suffering

I sometimes look back on my conversation with my friend as an example of tragic failure to understand the difference between compassion and rhetoric. He gave me the gift of revealing my nakedness; my poverty of care.

Henri Nouwen writes: "The friend who can be silent with us in a moment of despair or confusion, who can stay with us in an hour of grief and bereavement, who can tolerate not knowing, not curing, not healing and face with us the reality of our powerlessness, that is a friend who cares."

The simple fact is that most of us would prefer to avoid the suffering of others rather than enter it. We recoil from pain and sickness as if it were intrinsically contagious. And in a way it is. Being in the presence of affliction awakens our own vulnerability to and capacity for brokenness.

Suffering is the price of humanity. It's the cost of admission to life. It comes in many forms—some more overt than others. Scratch the surface of a friend, and you discover anguish of one sort or another. The most dangerous people in the world are those who are disconnected from their inner turmoil, and therefore visit it on others.

There is no path to God without the trek through pain. The journey toward the divine centre passes through a landscape of inner torment. Let us acknowledge that the suffering we all resist is a sacred mystery rather than an intellectual problem to be solved. It is to be borne rather than understood, however much our minds may ache for understanding.

I was a hard nut to crack, and it took some time before the brittle shell of my *ego* gave way under the sledgehammer of pain. Eventually I came to see that the circumstances I so resisted in my own life were an invitation to enter into the life of God in some small way. The coining of affliction into gift was a miracle worthy of an alchemist.

Being With the Suffering One

At some point in later life, I found myself teaching a course on Pastoral Care in a theological college. I suggested to my students that when they were with people in any form of suffering, they must at all costs avoid offering explanations. When people ask "Why?" or "How can God allow this?" they are wanting a hug or a cup of tea rather than an answer.

What all of us are hungry for is presence—someone to be with us in our private agonies. To suffer alone is the greatest cruelty. Many people of faith tell us that God is always with us, but fail to demonstrate it through incarnating that companionship in human proximity. Comforting the sick is an invitation to share physical space with them.

Nouwen again: "Compassion asks us to go where it hurts, to enter into the places of pain, to share in brokenness, fear, confusion, and anguish". The only way to do so is to be comfortable with our own dis-ease, to be at home in our skin. Only then can we take the risk of exposure to the pain of others without the temptation to flee.

Entering into the Mystery

I've come to believe that suffering and evil are not primarily theological issues but devotional ones. These conundrums ask us to hold two seemingly paradoxical concepts alongside each other—a God who is love, and a reality that is full of contradiction. To dismiss this sentiment as chicanery is easy. But to do so is to misunderstand.

Knowing the depth of divine love enables us to go where we might otherwise fear. And it is only in overcoming our deeply-seated fears that we are able to fully enter the mystery of suffering.

We have numerous defence mechanisms to protect us from the mystery of sickness and pain. The common one is to avoid situations where we are likely to encounter it. Another is to assume that God's intent in every such crisis is to remove the source of difficulty. The prayer for healing must be an open one, leaving room for outcomes different from those we seek for our own comfort.

Mercy Dissolving Fear

To be with the troubled person is a work of mercy. Like all such, it is contingent on our own experience of receiving mercy. Knowing the depth of divine love enables us to go where we might otherwise fear. And it is only in overcoming our deeply-seated fears that we are able to enter fully the mystery of suffering.

In part it is merciful because we bring our own broken humanity, rather than any form of solution. Our presence is in no way a rescue, because such lies beyond us. Instead it is the companionship of one hurting heart alongside another. Is that not what we have ultimately found in the cross of Christ?

Many years ago I was incarcerated in a Moroccan prison, along with other Europeans on drug charges. A French Catholic man came to visit us, and bring us a box of food. His only rationale was that he too had been in prison during the uprising against the French in 1955. He knew what it was to be confined, and his response was to visit us.

The only spark necessary for mercy is to recognise our own need for it. With that we can enter the darkness of others without fearing that it will increase our own. We bring only whatever light is within us. That must be enough, and thankfully, it often is. ■

Mike Riddell writes novels, plays, films and apology notes. He cooks when he can, and breathes intentionally on a daily basis.

HEALTH CARE IS SHARED UNEVENLY

Marian Hobbs writes from her political experience and her recent need of the health system.

Good health will always be a big budget item, but there are ways to make that expenditure achieve more for a healthy society.

All my political life, which is nearly all my life, I have tried to avoid health politics. Dealing with life and death is so complex and often emotionally raw. But now I cannot avoid it, because in the last eight months Richard and I have been immersed in the health system. I write this from my "lazygirl" armchair with my broken leg elevated! Richard is between chemotherapy treatments. And while politics should not always be personal, we have learnt much and have the time to reflect.

Community Being There

One of the satisfying learnings has been to experience "community" at its very best. On Easter Sunday Richard answered the door to a woman he did not know. She had brought down some fresh home-baked Easter buns to cheer us up. The neighbours across the back fence saw washing on the line for several days and came across to get it in and then offered to mow the lawn.

When you are immobile as we both are, you are so dependent on others, and those who know us both, will know that that is particularly difficult for us. And yet an endless army has helped with shopping, with ironing, with ready-made meals, with baking. And then there have been the charities, like Cancer Society, who have stepped in with volunteer drivers for Richard's daily treatment at hospital.

So supporting those with ill health is disproportionately huge for those suffering. Never ever be shy of offering support even if it is as simple as picking up a friend for a brief visit to a coffee bar or pub. You do not have to be an activist to make a difference for someone who is sick.

Health System

The state has tried to imitate that care through the services offered by the Accident Compensation Corporation (ACC). But cost cutting has meant that ACC tends to limit the support it offers. I am a superannuitant, not an employee. But I do have a role at the moment as a carer. ACC could not recognise that. The cleaner was advised that she should focus on those areas of the house that I used, not on Richard's!

I am not sure that a state agency can really replicate the flexibility of the community, but it is a dream worth struggling for because not everyone has a community surrounding them. And state agencies are needed to ensure at the very least

that no one falls through the cracks. Accountability has reduced flexibility and common kindness.

Being Acknowledged

The other great difference between neighbours and friends and professionals, is that friends and neighbours know you and treat you as a person, while professionals often treat you as a case or an appointment. An example is the doctor on morning round who knows my name, but who does not introduce him or herself.

I watched with admiration as a fellow patient extended her hand to such a doctor, introduced herself and asked him, in this case, for his name. It was a salutary reminder that we are real people with individual responses.

Being Given Information

When you are a patient you crave information. Different wards and services have a very different approach to keeping patients informed. All are rigorous in pre-operation information, checking out that you understand the risks and decisions that may have to be made during the operation. But it is the information about discharge, freedom to move out of bed, diet, risks, possible reactions that the patient confined to a bed wants answers on. At the same time the patients are very much aware of the pressure on the nursing staff and of the needs of others, so that they do not always push forward their case for information. And therein lies a problem, because overloaded staff do not have the time to pick up the signals that there are unasked questions.

Wholistic Approach

And then there is the skill of joining the dots. Both Richard and I were dealing with different departments and agencies and were being treated as separate entities.

If we had been seen as people more than as cases, then it would have been obvious that there were some serious gaps in our mutual care away from the hospital. The contrast between institutional care and that provided by a specialist driving service, or the care provided by neighbours and friends is flexibility and a wholistic approach.

In Parliament whenever it came to The Budget, every Minister almost deferred to the stated needs of the Health Minister. Health is always hungry for money and resources. But while more money is always needed, and increasingly so with an aging population and advances in pharmaceuticals, there are some better outcomes for such a large and complex service.

And better outcomes are not guaranteed by meeting targets: that is far too simplistic and treats all patients as if their circumstances are the same. And as if their different needs will be met by an identical budget.

Better outcomes stem from focusing on better health outcomes for the patient, whether that patient is in hospital or is visiting their GP.

If patient improvement is the focus, rather than meeting targets, then all the observations of that patient by nurse, cleaner, registrar, physio; all the input from family and friends, is of value when determining treatment.

Shared Decision Making

I would like to sit in on the handover between shifts, because I sense that this is a time when all observations are taken on board and treated equally.

That may be me being hopeful, because I became aware of a culture of deferral to the consultant or boss, which is the opposite of shared decision-making. It can breed the reverse of information-sharing. It can breed fear and encourage bullying. This hierarchical culture appears more pronounced in health than in almost any other profession.

I do not have any sense of shared decision-making in our health system, whether in the Ministry or in the Health Boards or in the hospitals. Occasionally you can see this in a warm, inviting and efficient local medical practice. But in hospital the emphasis was on the "boss".

Changing that culture of hierarchy to more of sharing information and decisions may well improve outcomes for the patient. And may make it more wholistic. Sure the "operation" or "treatment" is fundamental to a successful result, but after-care and home-support can also affect the long-term prognosis for that patient. And yet these are not always the concern of the big "boss" and therefore not always valued.

Unequal Access to Resources

If I, an assertive woman, have found the health system difficult to get information or supportive services from, then how does someone without my confidence cope? And when the services were not provided as needed, I had the resources to hire a housekeeper or taxi.

There is no equality of access to healthcare or health information. We must be more proactive in finding support for those in need, rather than waiting for them to arrive by ambulance. There are money and lives to be saved by timely intervention.

Good health will always be a big budget item, but there are ways to make that expenditure achieve more for a healthy society. And as I shared at the beginning, neighbourly support costs nothing yet achieves so much. Even as I write, two neighbours have been stacking the winter wood. ■

Marian Hobbs now retired from politics is involved in a range of community organisations. After recently breaking her leg she is back on her feet again.

LIGHTS AND

Rebecca Dickinson provides a glimpse into the work of a paramedic – often the first professional on the scene to care for those sick, shocked and injured.

I'm a paramedic. And I love my job! It's exciting work where no two days are the same. And it's a privilege—a real privilege. I meet people often in their darkest hours and I can make a difference to their pain, their dignity and to their families.

After growing up as the daughter of a pharmacist and emerging as a bossy, headstrong young woman, it's no surprise that I find myself in a medical role. At secondary school I thought I wasn't smart enough for medical school (not disciplined enough if I'm honest!), and I discounted nursing as an option. But I knew for a long time that I wanted to be a paramedic.

It's not easy to get a full-time job as a paramedic. I joined my current ambulance service as a volunteer in 2000. I completed a number of ambulance courses through my service, volunteering at least one shift a week, and was delighted when I was offered a permanent, paid role six years later.

Learning and Being Mentored

I first worked in the Ambulance relief pool before being assigned to a permanent rostered area. While I was doing my Intensive Care paramedic training, I worked in other areas of the Ambulance service with incredible mentors. I absorbed as much of their greatness as possible and once I passed (phew!), I returned to where I had come from—to my "work family". They are a bunch of crazy, thoughtful, incredibly smart, cheeky, supportive and loving people.

Taking in the Whole Situation

It's 10pm on a weekday night and I've just met our new patient. Camille (not her real name) is a lovely woman, wife, mother and grandmother. But she's lying on the floor in her husband's room crying in pain. She was giving her husband a cuddle in his bed and fell getting out of the bed. "He snores," she says, "so he sleeps in here." Then she begs us just to put her into her own bed and she'll be fine in

My colleague and I embark on treating Camille as carefully and professionally as we would like our own mothers cared for in a similar situation.

Camille's husband has severe short-term memory problems and she is his primary care-giver. She pleads that she **has** to be fine by morning—for him. However we have to break it to her gently that she has obvious deformity to her right leg and it appears she has fractured her hip. Camille cries some more and tells us she can't go to hospital. Finally she relents and accepts that we need to take her with us.

My colleague and I embark on treating Camille as carefully and professionally as we would like our own mothers cared for in a similar situation. We set about keeping her warm, making her more comfortable, giving her pain relief, dressing her husband and packing medications and toiletries for both.

We call their daughter and arrange to meet her at the hospital so she can take over the care of her Dad.

Then between us we manage to move the furniture so that we can carry Camille out of the house and into the ambulance. We go back inside and arrange the furniture back into position, lock up the house and head towards the hospital.

But adding insult to injury, our brave, independent Camille finds she needs to go to the bathroom. We know that she will need our help for this and that will breach her last piece of privacy. We stop on the side of the road. We get her off the board we had used to move her from bedroom floor on to the ambulance stretcher and we help her onto a bedpan. Camille is mortified to be performing this personal, private task with an audience. We understand. We clean her up as best we can and finish our trip to hospital.

Camille's daughter and son-in-law meet us there. They cope amazingly with the situation and immediately look after their Dad.

We give a handover to the triage nurse and when we've finished our paperwork, we stop by to say goodbye and good luck to our beautiful Camille. She grabs our hands and with tears in her eyes, thanks us from the bottom of her heart and gives us each a kiss.

Yes, this job is a privilege. For Camille there was no other option—she needed us. She needed our professional skills, our pain relief and our gadgets for lifting and carrying. And more importantly, Camille, her husband

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and family, needed our care, understanding and tenderness.

A Time for Hospital . . . and a Time for Home

Another night we were called out to Heather (not her real name) whom I'd met on other occasions. Heather was dying from cancer and was acutely short of breath. We assessed her, treated her with oxygen and moved her back into her amazingly sophisticated armchair.

We are an ambulance crew and our role is to recognise life-threatening events quickly, stabilise and treat the patients and transport them to hospital.

However in Heather's case hospital was unnecessary. So was most of the equipment we carry in the ambulance. Heather wanted to die at home. And thankfully our workload had lulled, there were a few extra vehicles on for the night shift, which gave us the time to contact the Hospice, arrange for the nurse to visit and wait with Heather until the nurse arrived. After consulting the on-call Hospice doctor, the nurse put together a syringe driver of medication for Heather and her son collected an oxygen condenser from the Hospice.

We left Heather knowing it was the last time we would see her alive. I felt sad that her life was nearly over. And I was sad for her sons because I knew they would lose their second parent in six months.

At the same time I felt blessed and grateful that I was part of the crew sent to Heather in her time of need. And I was immensely grateful that we had been able to keep Heather at home by accessing the superb help of the Hospice.

A Privilege

My job is a privilege. From the lights and sirens jobs, breathing problems, strokes, cardiac arrests, car crashes, to all the other types of trauma and medical calls — all are exciting! These events test my clinical skills, my clinical decision-making, our teamwork and our communication with one another and with other agencies.

However I'm humbled also because beneath it all every day people trust us to help them with whatever ails them at the time.

I recognise that increasing costs, workloads and waiting times at General Practitioner Clinics are making people access their healthcare at different times and places — and they look to us at times. We then become part of their health journey and often assist them to get better. But whatever the outcome of each person who calls out — it's a privilege to attend. ■

Photograph used by permission of the Wellington Free Ambulance Service

Rebecca Dickinson is an Intensive Care Paramedic with Wellington Free Ambulance. She is married with one seriously cute toddler.

ATTENDING TO EACH PATIENT

Stephanie Kamp is a junior doctor in a New Zealand secondary hospital and shares how she is learning to relate to sick people and their families as a Catholic medical professional.

When I began my medical journey I had a naive and high-spirited ideal of what it would mean to be a doctor. I thought optimistically that I would have great impact on the disease process and that all my patients would have good health outcomes. When I was a child the back of my bedroom door held an image and the text: "Trust in the Lord with all your heart and lean not on your own understanding" (Proverbs 3:5). The phrase always puzzled me. I have now been working for 18 months as a junior doctor and my expectations have been tempered by reality. And I am beginning to understand what the proverb means.

Persons are not just Bodies

I am constantly struck by the diversity of people and the different ways in which each person experiences and copes with suffering, joy and hope. I find it impossible to consider the human person as no more than a body. I have a fundamental belief that each person is made in the image of God. There is such beauty in the biophysical functioning of the body and I find that the diagnosis of particular conditions is often an intellectual puzzle engaging the academic, logical and rational parts of my brain. But ultimately the illness experience is unique to each person. Everyone has their own ideas, values and expectations of what life with their illness means and so each person needs particular attention.

Developing Catholic Identity

I thoroughly enjoyed my education and training among a great cohort of medical students. During that time I also made strong friendships with a group of Catholic students studying across a diversity of faculties. We were active in the local Dunedin parish and organised various events for the Catholic student body on campus. On reflection, I think this group gave me critical peer support when my faith was challenged by difficult ethical topics covered in lectures, such as the practice of abortion. We would mull over these topics and how they related to our Christian beliefs. It was also during these years that I really started to form my identity, separate from my parents, as a Catholic and as a medical professional. Developing self-assurance and confidence in my faith at the same time as undertaking medical training has worked well for me and I have many people to thank for assisting me in this process.

Learning the Power of Community

Some of the most profound experiences in my medical training occurred over different summer periods as a volunteer in the developing countries of India, Guatemala and the Solomon Islands.

There I learnt the importance of health literacy, good access to primary healthcare and strong public health policy. In these countries rural doctors have few health resources but their role in advocacy is immeasurable. People trapped in poverty or with profound disability are among the most vulnerable members of society. They need someone in a respected position caring enough to speak on their behalf. I saw numerous examples where doctors took on this role beyond their immediate medical input. My understanding of how the tool of "medical knowledge" could be used for the betterment of people was widened by exposure to the nature of third-world health services.

While working during my medical elective at Gizo Hospital in the Solomon Islands I experienced the power "community" can have at the time of a person's illness and dying. In one situation I had the difficult job of informing a patient and his family that he was dying. This was the first time as a lead clinician I needed to relay this type of information. It was humbling to see the impact the prognosis had beyond the patient. Through it I came to an understanding of the importance of empathetic communication in my role as a doctor, even though I was a student at the time. By addressing each person's concerns in the wider family, I could see that it created a platform upon which the family and community could collectively move forward, empowering the patient to experience the fullness of life for however long that would be.

Sanctity of Life to the End

By contrast earlier this year I was asked to advocate against the possible introduction of the law enabling euthanasia in New Zealand. I spoke after each Mass one weekend to encourage parishioners to write submissions to the Parliamentary Health Select Committee considering the proposed End of Life Choice Bill. I found this a daunting task because of the highly emotive nature of the topic and because the thought of working in a climate of physician-assisted suicide scares me immensely.
I was encouraged by the feedback

I received from parishioners and by the knowledge that other people also passionately value life to its completion beyond our own timing.

Along with many of my colleagues fundamentally I believe in the sanctity of life. Euthanasia is a distinctly different process from the withdrawal of active medical treatment from a person with terminal illness. The change from curative or disease-modifying treatment to one focused upon comfort and symptoms management, is not euthanasia. It is a transition that allows for normal natural processes to take their course, thereby respecting a person's dignity through to the end of his or her life.

The person in front of me is the important one. So it was important for me to be free from distractions and present to them in my whole person.

Challenge to be Present

Daily hospital work can at times be challenging especially when the workload is high.

Last Saturday there was much to be done and my attention was being pulled in all sorts of directions. Before walking into the bed space of the next patient, I took a moment to drink a glass of water and collect my thoughts. In that moment I had a realisation that this next patient wasn't worried about my busy day and all the things I needed to get done. I recognised that when I entered the room I needed to be self-aware and not make patients feel as if "they were wasting my time". The person in front of me is the important one. So it was important for me to be free from distractions and present to them in my whole person.

As I finished the glass of water I tried consciously to leave my stress at the door as I entered the patient's bed space, thereby enabling me to be present for that patient's needs.

Developing my Style in Practice

I have now been immersed for nearly seven years in the medical profession that has a solid moral grounding with a strong affinity to Christian ideals of dignity and respect for people, regardless of individual circumstances. As I grow in experience and confidence I am developing my own style of practising medicine. I have come across some inspiring role models who have shown me how to live out a faith-filled working life in the medical profession.

For now I would like more moments where I take a glass of water and allow the grace of God to calm my racing thoughts, direct my focus and help me to be fully present for the patient. I am not sure what the future holds for me but I continue to "lean not on my own understanding" and go where God, whom I trust, leads me. ■

Stephanie Kamp is a doctor in a New Zealand hospital. She grew up in Hamilton and studied medicine at Otago University and Christchurch Hospital.

Chaplaincy is a *Privilege*

Michele Lafferty tells **Michael Fitzsimons** about her great good fortune in stumbling into the role of hospital chaplain.

We meet late Friday afternoon in a church hall, a stone's throw from Wellington hospital, where Michele works four days a week as a Catholic chaplain. She's wearing a red leather jacket but there's no sign of a Harley.

Michele Lafferty has been a Catholic chaplain for 18 months and still considers herself a newbie. She has plenty of vitality and a puckish humour that's quick to surface.

She's not quite sure how she came to be a chaplain. She was in a big job, manager of Catholic Schools for the Wellington Archdiocese, and had been doing that for 20 years. She did a Clinical Pastoral Education course (CPE) while in the role because a lot of her involvement with principals had a pastoral dimension.

"Then someone asked me if I would be interested in doing 20 hours a week as a chaplain at Wellington Hospital, and without a thought in the world out of my mouth came a 'Yes'."

And so she left her Catholic Schools role and took up the chaplaincy position alongside long-time chaplain, Sister Sia, who has been a great mentor to her. They take a number of wards each. Michele's round includes oncology, ICU and the children's ward.

The Shock of Sickness

"The thing about being sick—sick enough to be in hospital—is that it usually comes as a surprise," says Michele.

"Sickness is something you don't even think about until it hits you. You think you're healthy until you are sick and then you think: 'What's this?' It's a surprise event, from the beginning. Even if you have cancer for a long time you have to first get cancer, and you might have been healthy your whole life.

"It's a surprise to you and the people that love you. Suddenly you're sick and you are not in control. Often people are quite scared, nervous and frightened and that's what they want to talk about.

Relating is Key

"The key to the chaplaincy role is relationship. You are someone who isn't their family, someone they don't have to worry about telling they're frightened. So that's often the beginning. You become a person that they can talk freely to, which is not something I'd thought of. I'm sure that happens to every chaplain in the world—you become an independent person that the patients can tell their worries to. It's a lovely thing to be that person.

"You do a lot of listening, you hear their stories. You don't just go in and give communion or say a prayer. You build up a relationship with them. I've found it's easy to build up a relationship with someone who's sick in bed. It happens quickly. You don't have to do it over weeks or months. You ask what's happening, is there anything you can do but mostly it's just listening to their stories."

One reason Michele finds fulfilment in the role is that she herself has experienced quite a lot of sickness.

Michael Fitzsimons is a professional writer and director of FitzBeck Creative. He lives in Worser Bay, Wellington and particularly enjoys walking long distances and wine-tasting.

"I think that does help a bit. Not that I would ever discuss it with patients, but I know the feeling of being ill and things being out of control."

Presence with no Strings

As a Catholic chaplain, Michele organises her visits around those who have declared themselves Roman Catholic on the daily patient list. Mostly, but not always, she gets a good reception. Sometimes it can be a slow process.

"When I visited one woman, she said: 'No thanks'. So I just kept going and asking how she was doing, every day. And then one day she had someone visiting and she said to her: 'Oh, this is my friend, Michele'. This was over months. And then one day she said: 'Oh, I might have a prayer'. And a few weeks later: 'Communion would be all right'. When she died, her children couldn't believe she'd told her friends that she wanted the chaplain to be there when she was dying because it had so not been a part of her life.

Learning all the Time

"There's a lot to learn in this job. Every day I think I'm learning. I don't think I'd ever be able to say: 'Oh yes, I know exactly what to do when this happens.'"

The usual routine when she visits is to sit down and have a chat and just listen. And then, if it's the first time, she asks whether the person would like communion or would like them to say a prayer together. That's when she offers them what she calls (with a grin) her "turbo-charged blessing".

"I was in Europe last year where you trip over shrines wherever you are. I started collecting holy water and when I got home I put it all together in one bottle. Now I can give a turbo-charged blessing.

"I say a little prayer and tell them I'm not promising any miracles but that I absolutely believe with all my heart that something good will come of it. And then they look for it and, you know, they'll tell me something lovely that's happened. It's the most amazing thing."

Giving from my Spirituality

Michele believes that as a chaplain what she brings is "me and the spirituality that I have. I don't even really think about it being Catholic. I'm bringing me, to be honest. I'm funny sometimes and I'm nice sometimes and I do care. I'm doing my best.

"Your spirituality is what you bring of your relationship with God. You don't need to be anyone but yourself and people feed off that. It lifts their spirits. What I want people who are sick or dying to think about is the compassion of God. I don't deny anyone who wants communion because I don't believe Jesus would."

Michele is very impressed with the hospital system and the amazing standard of care she observes at so many levels, with the involvement of social workers and *whānau* alongside health professionals.

"I went to a palliative care meeting recently with doctors, surgeons and nurses. They talked about the patients' needs, including spiritual needs, and they were into it. At the end of the meeting they lit a little candle. It was really beautiful and I was amazed."

Visiting Relieves Loneliness

Visiting the sick is a fundamental of the Christian life, says Michele "and you don't even have to be sick because loneliness makes people sick."

"As well as the sick, there are many lonely people in our parishes to be ministered to and visited. There are old people who like being in hospital because they have people around them whereas at home there is nobody. Loneliness is huge.

"When you think of how your grandmother lived in a house with all her siblings and mother and father, and maybe a maiden aunt who might have been still there. That was a family community. Often it doesn't happen now for all kinds of good reasons and so many people live on their own."

Being a chaplain is not really a job, says Michele. It's a privilege, a tiring one at times that requires boundaries and a good supervisor, but a privilege nonetheless.

"I'm very lucky." ■

Mercy Visits Me

Extending the hand of mercy reminds us that we belong to one another no matter our creed, colour or gender. Mercy is without boundaries and finds many ways to express herself. Earlier this year I was diagnosed with cancer. I have been deeply moved by how people have reached out to me. There are so many stories I can tell.

A teacher whom I'd met through work wanted to drop off a container of curry she had made for me. I live in an apartment on the 5th floor of the building which has tight security access. She could not get through to me and had nowhere to leave the food. So she went to my "neighbour", the Specsavers shop, and asked them if they would put the curry into their fridge until I could pick it up. She explained that I was really sick. The optometrist had never met me but he did not hesitate to look after the food for me. I laughed and laughed at the story of such quirky kindness. Mercy overcame the boundaries of commerce, of strict work protocols, of hesitancy among strangers, all in the name of a curry for a sick person.

I have a little altar which has grown vibrant with mercy—a delightful collection of pre-loved fluffy toys, flowers, pot plants, shells, stones, a beautiful hand-carved Mary MacKillop holding-cross, a magnificent walking stick, a collection of handwritten cards and paintings from three-year-olds through to an 80-year-old, candles, handmade plaques, jewellery, religious icons and little animal figurines. These are expressions of love. Mercy has visited me a thousand times over, seeking me out, crossing boundaries and reminding me that I am never alone.

This year that I have been ill I have been blessed over and over by visitors. I have learned to call them Mercy. ■

Delphina Soti is St Vincent de Paul's Kingsland Centre Manager and Youth Programme Leader and is going through cancer treatment.

They have my BEST INTERESTS at HEART

Philip Culbertson tells of his journey to the diagnosis of dementia and of how his life has changed since accepting his children's help.

I'd moved back to the United States after retiring from a very gratifying career in New Zealand and had landed a job teaching part-time at the local community college in Palm Desert, California. Late in 2011 as I was being driven to the college by a student, we were in a car wreck. I was severely concussed. My doctors followed the progress of my brain injury for over three years, but while they could see the physical damage to my brain, what they couldn't really tell was how much damage was concealed within those x-rays.

During those three years, two different psycho-neurologists and two different psychologists tried to make sense out of my repeated test results. Ultimately in the fourth year, we gave up. By then it was clear that I'd lost my perspective on what was happening and what would be needed.

I co-operated when my kids announced that they were moving me to Seattle in the hopes that a larger city would have more sophisticated testing equipment.

My two children tell me that I was "acting out" long before I could remember doing so. Certainly, I was aware that I was being extremely generous with my life savings, thinking that treating myself to new clothes (buying up to 10 shirts at a time for example), pledging funds to political and charitable organisations and taking friends to dinner often and footing the bill, was just what people who were comfortably retired after a successful career were supposed to do. However my children were much more frugal, having become aware that as we age, we have more and more expenses to bear. They were right and I was foolish.

In late spring 2015, brain x-rays were showing sufficient injury that my children decided to step in and take over large parts of my life. I let them. I've heard too many stories over the past several decades to know not to argue with my kids but to hear them out. Most of the time they understood me, probably because we've been so close over 30 years. And I have always trusted

that, when needed, they would have my best interests at heart—although according to their definition!

While I'm sure it was taxing for them, they persisted on presenting things this way: "Dad, here are three choices that need to be made, and we'd like you to choose the one you feel is best. Then we can all discuss together whether we agree with your choice or not."

Their strategy has worked so far, for the most part, to everyone's benefit. In hindsight, that whole phase in which we were involved in a sort of tug-of-war was the most critical phase for me. At that point I let go of my need for control, sensing that my kids now knew better than I did what was needed.

Moving into a Care Facility

In early summer 2015 I flew to Seattle to tour possible places to live. We kept in mind that our search was for me—at risk of losing my mind but according to an unknown timetable. My daughter had done her homework well. I didn't have to see all the sites before I realised how well she knew me. The first place was wonderful and I wanted to move in immediately but she insisted that I at least see the second place.

At both locations, arrangements were made for me to meet some of the residents. I found that in both groups each person had experienced some unique brush with death and they had grown to respect, challenge, support, and rescue one another. And importantly I found that there was a reliable system of professionals and carers, and that no one needed to experience alone the taxing and often frustrating things that mark the end of life.

Shortly after the decision was made to move me to Seattle both my kids took me to Harborview Hospital where we heard the diagnosis: "Early Alzheimer's—with a life expectancy of two to 20 years".

Coping with Alzheimer's

The first three to four months in the Residential Care Centre were pretty rocky for all of us. I'd been single for years and certainly not used to taking orders from anyone, especially my children. I still wanted to be the parent but I was increasingly unable to make good decisions. That made me angry with them—and with myself!

My journey through Alzheimer's continues to be marked with alternating times of bravery and fear, expectation and resignation, clarity alternating with frustrating confusion and one hell of a lot of paradox.

The more I talked openly with others, the more I learned. Feeling ashamed is one of the great enemies of a healthy approach to Alzheimer's and dementia. Shame can cause us to hide, stop telling the truth, avoid others, skip attending worship, not enjoy our friends, or fail to take care of our own bodies.

With my kids' help, I accumulated a bevy of supporters, including a therapist, a hospital chaplain, the doctors at the Harborview Hospital, various other professionals and specialists and a place to worship. Most importantly I have my children and grandchildren. Together we are learning that none of us should hide in the dark out of fear, however much each of us also has individual needs to be left alone at times.

Accepting Help and Learning Strategies

I have good days and bad days and many days are a combination of both. I've always slept very well. Now I often don't. I start into a sentence and then can't remember what I was going to say. Sometimes I blank out on particular words, or I can't pull up the names of friends even when they are standing near me. I have learned to write **everything** down, in detail, including things that I was quite sure I'd never forget to do.

The Centre has taught us the importance of establishing a daily routine, possibly built around the times when we take our medications and also to prioritise our time. For example, I now have many more doctors' appointments in my life than ever before. No matter how intrusive I feel they are, they must be prioritised over my other commitments and activities.

In the residence where I live, I have been given a one-on-one Alzheimer's consultant, who sees me weekly. She has encouraged me to create a list of the things that I believe are making my life more manageable, most of which are supported by the medical literature. My list for her today was (1) play the piano, even if my hands are trembling; (2) work crossword puzzles, the more difficult the better; (3) go for a walk—about an hour a day; (4) play with my grandchildren when they visit; (5) sing weekly in a men's barbershop chorus; (6) maintain a part-time job, in my case as an editor of academic articles for publication; (7) teach a course to a group of residents on Third Century Jewish literature; and (8) make sure my spiritual needs are being met on a regular basis by people whom I trust.

My journey through Alzheimer's continues to be marked with alternating times of bravery and fear, expectation and resignation, clarity alternating with frustrating confusion and one hell of a lot of paradox. Yet journeys like mine need to be brought into the open rather than kept in the dark, addressed rather than being ignored or minimised. By sharing our story, I believe the fear of death is challenged and ultimately even transformed. ■

Philip Culbertson now lives in Seattle after years teaching pastoral theology and counselling at Auckland University.

Cardiac Advice

Rescue the heart when it's in trouble.
This is the work of a lifetime.

In the explosive morning
    when your heart is under siege,
    face white as marble,
    embrace the surgeon.
Marvel at the tiny balloons
    he fires up your arteries.

If you get to walk away,
    lungs bursting with air,
    tell yourself you are a survivor.
Eat tangerines, pick small flowers of hope,
    read the mystics. Forgive lavishly.

Aqua-jog with the oldies in the basement pool,
    the air pungent with chlorine.
Put on webbed gloves, thrash around
    in the fluorescent light like a fish that cannot swim.
Say goodbye to your friend who won't make it.

Lay down a garden of stones,
    haul them up the steps in a blue bucket
    until your calves ache.
Spread them round the olive and the yew tree,
    smooth river stones like those that shimmer
    in amber water on a hot summer's day.

At night open the window and sing like the ocean,
dance like the unruly wind.
Surrender your fretful heart.
Want for nothing more.

— Michael Fitzsimons.

Poem from *Now You Know* 2015. Printed with permission

COUNSELLING and UNDERSTANDING OURSELVES BETTER

I like to paint. I'm intrigued by the creative process — the preparation of the canvas, the sketching in of the image, the underpainting where some will remain hidden and some will shine through yet both enriching the whole work. Then comes the final working, the strengthening of colour, the deepening of shadows, the highlights — and the whole comes to life. In Ephesians we find Paul declaring: "We are God's work of art." (Eph 2:10). What a difference it could make to our lives if we understood that we're invited to participate with God in creating ourselves as that art.

In this Jubilee Year of Mercy Pope Francis has asked us to reflect on and practise mercy. The word "mercy" is a limited translation of the biblical concept of "loving kindness" or "to be kind faithfully". This year especially, we are urged to practise mercy and loving kindness in our daily encounters with others, in our world and towards ourselves.

Childhood Perceptions and Expectations

As a work of art we can be quite tatty round the edges as through our lives we are constantly forming and emerging. And stuff happens which knocks us around.

Sometimes something in our early preparation work is poorly done. I believe most parents do their best with their children but many adults carry wounds of the past in the form of distorted perceptions of themselves, others and life in general. These perceptions and expectations have developed because children have limited psychological defences and interpret their experiences in a negative way. The distortions may continue into their adulthood and because they are of such long standing, the person never questions them. But they can mar their lives with an underpainting of negativity.

Recently Maria (not her real name) shared her disappointment in being turned down for a job — not her first such rejection. She is a competent woman, good at her work and pleasant with customers. However in the presence of those she judges to be in authority, she undergoes a transformation. She becomes hesitant and withdrawn. The belief patterns of inferiority she learnt early in life are still active and they rob her of confidence and poise.

Many adults carry wounds of the past in the form of distorted perceptions of themselves, others and life in general.

Counselling Offers Assistance for Personal Change

A counsellor could help Maria to recognise how her old but dominating patterns of thought and behaviour inhibit her life today. She could learn to be flexible in her thinking, recognising she has intrinsic value — God's work of art.

Counselling could also help to stem her habit of ruminating on painful memories. This habit opens her to living life as a victim of anxiety and depression.

Recent research indicates that some depression may live more in a person's way of interpreting reality than as a medical issue. Michael Yapko wrote in *Depression is Contagious*: "Depression runs on a fuel of a negative frame of reference, a patterned way of interpreting and reacting to life that is painfully self limiting."

Illness has many causes and we no longer view illness as punishment: "Why should this happen to me?" However illness does not rise in a vacuum and has a social component too.

Constant self-criticism, dwelling on past (or present) hurts and harbouring grudges give rise to what Yapko calls a "hostile internal environment" which can make us unhappy and sick.

This is particularly true for survivors of childhood abuse. "Repeated trauma in childhood forms and deforms the personality," Judith Herman wrote in *Trauma and Recovery*. Children exposed to violence carry a tragic legacy into adulthood — a shattered sense of self, a conviction of being damaged or evil, deep feelings of emptiness and abandonment and an inability to regulate their emotions. They can either shut down their emotions completely, or become aggressive and volatile. Too often these children are exposed to further abuse as adults. The legacy of damage to their self-agency leads them to believe that they are unable to change their situation.

But mercy and loving kindness are about seeking solutions, in Stephen Bevan's words: "going to the root of the problems" and in so doing inviting personal change. Engaging in healing the effects of their legacy of abuse can be merciful for the survivors as well as the counsellor.

Jennifer Schollum reflects on the practice of counselling, using the imagery of painting.

Caring for Self and Family

Using inferior materials in painting can spoil a work of art. And in this analogy not taking care of ourselves takes a toll. We live in very stressful times and often our efforts to lessen stress serve to increase it. Under the constant pressure to save time and to do more we can skip meal breaks, overuse coffee, sugar and alcohol and multiply work hours. In some jobs those who work 12–14 hours a day can be regarded as exemplars. Whereas others work long hours just to provide for their families because we have a low wage economy. But long hours outside the home mean less family time. Beside other areas, this can affect food preparation where processed foods, often with little nutritional value and harmful preservatives, are substituted for good products.

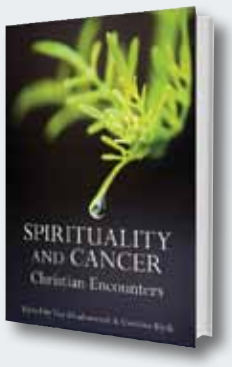
When stress becomes distress and is allowed to build it is expressed in irritability and anger. If it is unchecked, relationships will suffer, families can disintegrate and people become ill. Stress lowers the immune system and leaves us open to infection. Stress hormones put the body into a constant state of readiness, more adrenaline flows, heart rate increases, muscles tighten and breathing becomes shallow. While this is a necessary response to danger, when it becomes a lifestyle we are in trouble. We are at risk of heart attack, ulcers, respiratory problems and depression. Instead of the home being a place of safety and peace, it becomes one of discord or silent tension.

Recognising our own stress levels and developing ways to alleviate them such as exercising daily, eating healthily, engaging in something creative and learning to have fun, is being merciful to ourselves. We can practise accepting our joys and sufferings, letting go of the past and using resources with a sense of gratitude rather than of entitlement. This is a challenging option. So too, is loving and forgiving ourselves and others. Sometimes we need a facilitator in the process—a counsellor or therapist—to enable us to find and practise more life-giving ways. We can grow in recognising that "we are God's work of art, created in Christ Jesus to live the good life as from the beginning God had meant us to live it" (Eph 2:10). ■

Jennifer Schollum is a Sister of St Joseph living in Balclutha. She is a counsellor and also paints in water colour and oils.

Spirituality and Cancer: Christian Encounters

Edited by Tim Meadowcroft and Caroline Blyth
Published by Accent publications, 2015
Reviewed by Anna Holmes



This book contains edited papers from a symposium on "Theology, Spirituality and Cancer", co-hosted by the University of Auckland and Laidlaw College. It explores how people try and make sense of cancer in a God-created world and how those supporting cancer patients need to be aware of the spiritual issues.

The first section deals with the responses of three people to cancer in themselves or their family. The next section is by those involved in the spiritual care of cancer patients—a spiritual care coordinator, a palliative care nurse, a tutor in the Medical Humanities course for medical students, a senior lecturer in Medicine and the Head of Theology at Laidlaw College.

They suggest those with cancer, or any life-threatening disease, need spiritual listening from all their carers. Cancer is a "sacred" disease with implications not present in other serious illnesses. I found most interesting "Faith Heals? Faith Claims in the Public Square" about public reaction to a poster outside a church reading "Jesus Heals Cancer". Churches need to consider carefully what they say in a world with a powerful and often dismissive media.

The third section "Theological and Theoretical Responses", has six dense papers on understanding how physics, evolution and theology intertwine in trying to tease out the problem of suffering in a God-created world. An evolving world contains both the possibility of free will and of suffering and death. Humans are caught in a paradox of growth and death, suffering and hope. In this they search for God. It suggests that God does not prevent suffering but suffers with the sufferer. Two responses to the symposium, both about yearning for God in the midst of suffering, complete the book.

I found this book interesting. The first section about the experience of cancer is moving. I will not forget that for cancer patients there is a BC—before cancer and an AD—after diagnosis. Suffering is about loss of relationship to self, others, the world about us and the transcendent. Patients feel isolated and say: "I'm not myself any more!" When people bear witness to the suffering and accompany the sufferer, they bring hope, which is about love. It was encouraging to read that no matter what the theological paradigm, faith helped. The journey really is a tightrope between hope and despair. ■

THE JOY OF LOVE IN FAMILY LIFE





Anna Holmes responds to Pope Francis's letter about the family – *The Joy of Love: Amoris Laetitia.*

The Joy of Love (AL), Pope Francis's post-synodal Exhortation, is about real human love. For 50 years I have been reading Catholic documents on marriage and sexuality. This has often been tedious for they seldom related to my experience of marriage or sexuality. I taught and trained teachers of Natural Family Planning and the Christian Family Life Education course for many years. In 1985 I gave a paper in Sydney on *Humanae Vitae: A Human Response.* This identified the scientific and human inadequacies of *Humanae Vitae* (1968) and *Familiaris Consortio.* (1981) The paper finished with: "It is the responsibility of the teaching Church to listen—not just to those who seem to be able to live up to the ideal—but to those who are struggling and in pain. Christian marriage is a complex harmony of growth, pain, joy and reconciliation and no more easily defined than any other mystery of the love of God."

Shortly after I received a letter from Cardinal Gagnon, president of the Pontifical Council for the Family, dismissing what I had said. Clearly he had not read my paper since he suggested I read *Familiaris Consortio*, which I had quoted in the paper.

From the Listening Church

What a relief to read *The Joy of Love*, which is from the listening Church. It starts: "The Bible is full of families, births, love stories and family crises" (AL par 8). It shows reflection on the real experience of families. It points out that the culture of individualism reduces the value of family. It rejects living: "as if there were no truths, values of principles to provide guidance and everything were possible and permissible" (*AL* par 34).

Cultural Forces against Marriage

Western culture is discussed, where social networks can be disconnected at whim and in which relationships and the material world are disposable. The fear of permanent commitment, lack of work, social support, housing and prolonged education all work against marriage. Migration, war and job opportunities scattering families break the links between generations. Families affected by age, illness or disabilities are under particular pressure.

Recognising Conscience Decisions

Pope Francis admits that the institutional Church often presents "marriage in such a way that . . . its call to grow in love and its ideal of mutual assistance are overshadowed by an almost exclusive insistence on the duty of procreation" (*AL* par 36).

He continues: "We also find it hard to make room for the consciences of the faithful, who very often respond as best they can to the Gospel . . . and are capable of carrying out their own discernment in complex situations. We have been called to form their consciences not to replace them. We have often been on the defensive . . . denouncing a decadent world without . . . proposing ways of finding true happiness" (*AL* par 37-38).

He dismisses patriarchal cultures,

discusses the difference between sex and gender roles and suggests that today flexible roles are essential. Men can look after children and women can be leaders. "There is no stereotype of the ideal family, but a challenging mosaic made up of many different realities with all their joys, hopes and problems" (*AL* par 57).

Practices of Love

Francis points out: "The couple who marry are the ministers of the sacrament" (*AL* par 75). There is a wonderful discussion of love based on the first letter to the Corinthians 13:4-7: "My advice is never to let the day end without making peace in the family ... By getting down on my knees? No! Just by a small gesture ... a little caress, no words are necessary" (*AL* par 104). These are the words of a wise man.

"Love coexists with imperfection" (*AL* par 113). "The trust enables a relationship to be free" (AL par 114). "Marriage is the icon of God's love for us" (*AL* par 121).

The document talks about the contemplative gaze of love. It is unmistakable, quite different from a critical glance, for it wraps the beloved in affection. My children used to ask me why I was looking at them like that when I gazed on them lovingly.

How can we do this? "Take time, quality time. This means being ready to listen patiently and attentively ... This means cultivating an inner silence to listen to the other person without mental or emotional distractions" (AL par 137). "Keep an open mind . . . The unity we seek is not uniformity but a unity in diversity" (*AL* par 139).

Passionate Love

Passionate love is important. "Sexuality is not a means of gratification or entertainment; it is an interpersonal language wherein the other is taken seriously . . . A healthy sexual desire always involves a sense of wonder . . . The erotic dimension of love . . . is a gift from God that enriches the relationship of the spouses" (*AL* par 151). "Anyone who wishes to give love must also receive love as a gift" (*AL* par 157).

Responsible parenthood "does not mean unlimited procreation or a lack of awareness of what is involved in rearing children, but rather the empowerment of couples to use their inviolable liberty wisely and responsibly, taking into account social and demographic realities as well as their own situation and legitimate desires" (*AL* par 167). "The parents themselves and no one else should ultimately make this decision in the sight of God" (*AL* par 222). If only this had been said in 1968.

Pastoral Needs

Pope Francis expresses concern at the absent fathers in Western society and proposes support for the early years of marriage, suggesting dealing with crises, recognising stress and learning to forgive are important lessons. One of the problems today is that many people have grown up with separated or divorced parents and this experience forms their attitude. I liked the suggestion that "communication is an art learned in moments of peace in order to be practised in moments of difficulty . . . Like childbirth this is a painful process that brings forth a new treasure" (*AL* par 234).

The document also identifies the pastoral needs of those living in irregular relationships, repeating the understanding that human beings are on a journey to perfection which is not reachable in this life. Francis stresses the need for mercy and compassion for each unique couple. "Hence it can no longer be said that all those in any irregular situation are living in mortal sin and are deprived of sanctifying grace . . . Natural law could not be presented as an established set of rules ... rather it is a source of objective inspiration for making personal decisions ... Maintain constant love for one another for love covers a multitude of sins" (*AL* par 301–306).

Some Issues Missing

I found that there were some issues not dealt with. In mixed marriages "eucharistic sharing can only be exceptional" (*AL* par 247). When the closeness of the couple is so very well described, how can the separation of the couple in Eucharist be a rigid norm? And while the Pope is clear there must be no discrimination on the grounds of sexual orientation, he does not view same sex relationships as marriage.

Document of Encouragement

Several times Pope Francis writes that each marriage and family needs to keep in mind three words: "please, thank you and sorry". And he says the Church must act with humility, compassion and mercy attending to the unique situations of families. As we have grown to expect of Francis, he finishes the document with encouragement: "May we never lose heart because of our limitations or ever stop seeking that fullness of love and *communion*" (*AL* par 322). ■

Anna Holmes, married to John for 50 years, now has a great-grandchild. She tutors medical students, passing on her experience of 46 years as a GP.

Reading Luke's Gospel with ecological eyes

In the fifth part of the series **Elaine Wainwright** interprets the story of Martha and Mary, pointing out the time, space and social aspects woven into the narrative.

Luke 10: 38 Now as they went on their way, he entered a certain village, where a woman named Martha welcomed him into her home. 39 She had a sister named Mary, who sat at Jesus' feet and listened to what he was saying. 40 But Martha was distracted by her many tasks; so she came to him and asked, "Jesus, do you not care that my sister has left me to do all the work by myself? Tell her then to help me." 41 But he answered her, "Martha, Martha, you are worried and distracted by many things; 42 there is need of only one thing. Mary has chosen the better part, which will not be taken away from her. **Luke 10:38-42.**

Martha and Mary are familiar biblical characters who continue to feature significantly in the developing tradition of the early Church. Their story in Luke's Gospel (10: 38–42) focuses predominantly on human interrelationships. So while an ecological reading will be attentive to those relationships, it will also seek to hear the voice of the other-than-human that may be present in the storytelling, even if only subtly.

Attending to Time

The story opens with the word "now", a word designating time. It is followed by a physical marker: they went on their way or were walking the road, as Lk 9:57 says earlier. Jesus' ministry is located very explicitly in time and in place. It invites those wishing to read ecologically to be attentive to time. Such attentiveness can bring us to an awareness of cyclical time marked by the changing of the seasons, as well as linear time with which we are more familiar.

The "now" in the Lucan narrative prompts us to notice linear time and also to the cycles of life in both the human community and the other-than-human world of being. This includes cycles of birth and death, of planting and harvesting and of working and lying fallow even in our own and community gardens.

Attending to Space

And just as this gospel is grounded in time, inviting us into a deep awareness of time, so too does it draw us into an awareness of space through its reference to their "walking along the road". Such attentiveness does not focus on place and space simply as a backdrop for characters on a human stage—which has been our usual way of reading the gospels and other narratives. Rather, we recognise place and space as a living participant in the drama of an emerging universe. We can mar or scar place and space as we walk along the road of living and life, or we can recognise that we are in partnership with it every moment of every day.

Martha . . . is engaged with many tasks,* diakonia . . . *the language Jesus uses to describe his own ministry.

Materials of Village and Home

In this vibrant context, Jesus enters a village, a grouping of houses. Each house would have been a unique interrelationship of materials associated with the work and life of the different members of that house. There would likely be grains and other sources of food from farm and courtyard gardens. Yarns and wool would have been in store or worked into bedding. And much more constituted the houses of the village that Jesus enters. This is true of Martha's house also.

Not only is the household vibrant but so too are the human and other-than-human interrelationships. In this Lucan story, the woman Martha welcomes Jesus into "her" home. She is presented very clearly as the householder who has oversight of or works in right relationship with all that constitutes the household—other-than-human as well as human. Mary too is presented in a way that would have crossed or expanded cultural expectations and boundaries for some. She is characterised as a disciple of Jesus, seated at his feet and listening to his teaching.

Martha is Engaged in *Diakonia*

However the ecologically sound context of rightly ordered relationships is shattered by the "but" at the beginning of Lk 10:40. It introduces a process into the narrative that pits the two sisters over against one another. Even more it attributes the creation of the division to Jesus.

Martha is described in the NRSV translation as being engaged with "many tasks" and she is said to be distracted by these tasks. However the Greek word translated as "tasks" is *diakonia*. That is language that Jesus uses later to describe his own ministry (Lk 22:27) and to characterise that of his disciples whom he commissioned to preach and to heal (Lk 22:26). Luke says that Martha is engaged in a *diakonia* or discipleship role, perhaps

undertaking healing and proclamation roles as Jesus invited his disciples to do (Lk 9:1). She is also hosting the Jesus group on their itinerant mission.

Attending to Social Threads

The Lucan narrator presents Jesus as negating Martha's *diakonia*, calling it distraction and pitting it over against Mary's role of listening to Jesus' teachings. Attentive readers will be alert to the function of gender in this narrative. Just prior to this story, the lawyer who questioned Jesus about inheriting eternal life is commissioned to be neighbour to the one in need by showing mercy (Lk 10: 25-37). In this very next story, a woman's discipleship or active *diakonia* or doing of mercy is criticised while another woman's sitting at Jesus' feet and listening to what he is saying (Lk 10:40) is affirmed.

An ecological reader engaging with this well-known story may recognise what is stated in *Laudato Si'* (par 139) namely that "we are faced not with two separate crises, one environmental and the other social, but rather with one complex crisis which is both social and environmental". A complex social crisis has been woven into the material context evoked in the Lucan story and explored earlier in this article.

As contemporary readers it is important to be attentive to these social threads in the story and to understand what may have informed them. In this regard, there is both narrative and inscriptional evidence of women householders in Hellenistic Judaism and early Christianity. Some of these women householders hosted the gatherings in which the believers in Jesus listened to the word and broke bread. There seems to have been tension around such roles in the Lucan story-telling community and this has become encoded into the final gospel story. Martha's diaconal role and household leadership is set over against Mary's listening to and learning from the teachings of Jesus. This obscures the fact that both roles were undertaken by women in emerging Christianity.

And a contemporary ecological reader, attentive to environmental and social factors, will attend to space and time as well as to the multifaceted social crises that characterise this narrative. Critical engagement with the gendering of discipleship in this text will enable the ecological reader to reclaim the roles of both Martha and Mary. Women are called to the work of diaconal household leadership as well as listening and learning within the Jesus movement. They are called to mirror the role of Jesus in both roles. Both roles constitute the vibrant discipleship that characterised the material space, the home of Martha and Mary. ■

Painting: ***The Four Elements – Fire***
by Joachim Beuckelaer (1533–c1573)
[Image from Wikipedia]

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The Anointing. Illustration, dated 1260, in Psalter of a Cistercian Monastery in Basel, Switzerland.

The Anointing Woman

Kathleen Rushton reveals that the woman who anoints Jesus' head in Simon the Pharisee's house in Luke 7:36-8:3 is a different woman from Mary Magdalene or Mary of Bethany, with whom tradition has confused her.

11th Sunday of Ordinary Time
12th June

Do you share the surprise on the faces of the two disciples on the left and right of the woman at the top of the remarkable *The Anointing* illustration of 1260? My students do. After comparing and contrasting the anointing woman stories in the four gospels, they exclaim: "Anointing Jesus' head? Never heard that before!"

The two stories telling of a woman anointing Jesus' head for healing as he faces his coming death (Mt 26:6–13; Mk 14:3–9), are eclipsed in interpretation and art. The focus was on the woman called a sinner who anoints Jesus' feet (Lk 7:36–50) or on Mary of Bethany (Jn 12:1–8). *The Anointing* shows both traditions.

The *Sunday Roman Lectionary* also eclipses the head-anointing tradition despite Jesus' words that "wherever the good news is proclaimed in the whole world, what she has done will be told in memory of her." Mark's account is heard in the passion story on Palm Sunday (Year B). Only Luke's anointing woman is proclaimed (Year C, 11th Sunday of Ordinary Time). Lk 8:1–3 is added, which has contributed to fusing her with Mary Magdalene.

Ministering Women

I am beginning with a passage unique to Luke 8:1–3, in order to unravel who Luke's anointing woman is. Jesus went "through cities and villages, proclaiming and bringing the good news of the kingdom of God". Accompanying him were the twelve along with some women. We learn they "had been cured of evil spirits and infirmities"; seven demons had gone out from Mary called Magdalene; and "they provided for them out of their resources".

Ancients attributed many illnesses to demon possession. Demons can unite into an evil seven (Lk 8:2; Mt 12:45). "Seven" means a great number and indicates frequency and power (cf. Mk 16:9; Lk 11:26). The text emphasises the greatness of Jesus' power. However the interpretive tradition focused on Mary.

The Greek verb translated as "provided" *(diakonein)* has a range of meanings. In Luke's gospel it is applied to the mother-in-law of Simon (Lk 4:39), Martha (LK 10:40), vigilant servants (Lk 12:37) and in Jesus' instruction to his disciples at the Last Supper (Lk 22:25–27). In Lk 8:1–3 it is used of women, not in the domestic space, but in the public space of missionary travel.

Mary, Joanna, Suzanna and the women seem to be wealthy patrons of Jesus' mission. Joanna, wife of Chuza, King Herod's steward, had wealth and status. The use of material possessions and discipleship recurs in Luke-Acts. Jesus warns against wealth, tells of the faithful poor and invites some to leave their wealth and follow him. For some, the call to follow Jesus does not mean to leave their goods but to open their homes and share with the community. Christians were known for sharing everything in common (Acts 2:42–47; 4:32–37). These Lucan women are like Mary, at whose house disciples gathered in Jerusalem (Acts 12:12) and Lydia, seller of purple cloth (Acts 16:14).

She is Not Mary Magdalene

A dominant error in the Western Church since the time of Gregory the Great has been the fusion of several gospel women into one character—Mary Magdalene, the assumed sexual sinner. In the 1962 *Marian Missal* we find the heading for the 22nd July feast day: St Mary Magdalen, Penitent, and a blurb describes her as "first a sinner ... converted by the Lord". She was

by the cross. Jesus showed himself to her and made her his messenger to announce his resurrection to the apostles. The Collect Prayer further confuses her with Lazarus's sister: "Jesus in answer to her prayers didst raise her brother Lazarus to life, after he had been dead for four days". The gospel for the day (Lk 7:36-50) further confuses her with yet another woman. This fusion and confusion of the sinner who anointed Jesus' feet with Mary of Bethany and Mary Magdalene at the cross and witness to the resurrection, lingers even today in the imagination, art and preaching.

> *Some form of the word "anointing" is used five times . . . The woman's touching of Jesus' feet, washing them with her hair and anointing them, are all bodily expressions.*

We find a very different focus in the 1969 *Missal* issued in the Liturgical Reform of Vatican II and in the retranslated *Missal* (2010). The Proper Prayers for the feast speak of Mary Magdalene as the first person entrusted by Jesus "with the joyful news of his resurrection". The gospel is the story of Jesus' resurrection and commission (Jn 20:1–2; 11–18). The Missals erase centuries of sexualising and demonising Mary Magadelene. They reinstate Mary Magdalene officially to her early Church title, Apostle of the Apostles. In the Eastern Church, which has never regarded her as sexual sinner, she has the title, Equal to the Apostles.

Who Is the Woman?

Luke is the only evangelist to describe the one who anoints Jesus' feet as "a woman in the city, who was a sinner" (Lk 7:37). He uses the same word for sinner (*h'amartōlos*) to describe the woman and Peter (Lk 5:8). (Interpreters have never speculated about the nature of Peter's sinfulness even though Luke stresses this in his "call" story.)

The anointing story is set in the context of a meal in Galilee during Jesus' ministry. The meals of the well-to-do were in two phases. During the first appetisers were served as servants waited on guests, washing and anointing them with perfumed oils. The main courses followed. Men and women ate separately and a widow was the only woman permitted to serve men at meals. Simon the Pharisee had taken no measures to ensure other women did not enter. He had not provided the expected hospitality. However the woman does.

Some form of the word "anointing" is used five times in the narrative (Lk 7:38, 46). The woman's touching of Jesus' feet, washing them with her hair and anointing them are all bodily expressions. They are combined with elements of the Earth — a precious alabaster jar filled with expensive perfumed vegetable oil (*myron*).

A tension exists in this text. While Lk 7:37 states the woman was a sinner, the tense of the Greek verb means "used to be." Then in some ancient literature anointing feet with *myron* had strong sexual connotations. The focus slips to the forgiveness of sins rather than staying on the healing tradition of the woman anointing Jesus as he faced death. The woman's actions and motivation are more important than her sinfulness.

A parable about debtors is inserted. The central point is forgiveness. John Pilch explains how Mediterranean peasants got into debt. Their meagre resources were taken by tithes, taxes and tolls. When they became indebted and unable to repay their loans, they lost their lands and became tenant share croppers. Jesus' ancestors may have shared that fate, as those dispossessed of land often became artisans, like the carpenters. Material indebtedness through the powerful's injustice and land exploitation in the parable told by Jesus, helped to illustrate the forgiveness of sin. Exploitation by indebtedness and negative sexual connotations underpin this narrative.

Kevin Beale in *Blood and Earth: Modern Slavery, Ecocide, and the Secret to Saving the World* (2016) tells heart-wrenching stories of vulnerable people in the Eastern Congo, who through indebtedness are driven from their lands and end up in slavery in our own times. It includes working in mines and quarries which bring about the degradation of the Earth through the extraction of minerals like tin and coltan used to make my cell phone. Women particularly suffer sexual violence in addition to hard labour. We can reflect on how Luke might tell his story in this context? And how Jesus might tell his parable of debtors? ■

Kathleen Rushton RSM tends her vegetable garden, walks in the hope her feet will allow her to tramp again and delights in learning about Scripture.

a GEN-Y perspective

Learning Te Reo Māori

Photograph courtesy of www.maori-identity.ac.nz

As a Pākehā I feel incredibly privileged to be formally learning *Te Reo Māori* (language) this year through *Te Wānanga o Aotearoa's* learning course. I am now in my second term of learning and I am thoroughly enjoying spending my Tuesday nights learning, singing and talking with my classmates.

The class of 20 is a different demographic from the one I initially imagined. Before arriving for the first class I thought that it would be primarily Pākehā professionals looking to improve their Māori language skills in order to be more culturally sensitive in the workplace.

It turns out that a big proportion of the class is Māori, either looking to engage with their own language for the first time, or looking to refresh their knowledge and be able to teach their own children. Chatting with my classmates about why they had chosen to undertake the course made me reflect on my positionality as a Pākehā. I am privileged to be able to learn a language that is not my own as opposed to learning to ensure that my own language and culture are not lost.

While World War I is undeniably a very significant part of New Zealand's history, it strikes me as odd that the New Zealand Land Wars remain unacknowledged in shaping our national heritage.

I've spent some time reflecting on the history of Te Reo Māori. It's very sad to think that prior to World War II most Māori spoke *Te Reo* as their first language and yet by the 1980s a generation of Māori was emerging who couldn't speak *Te Reo*. This was primarily because of the compulsory use of English in schools and the increasing urbanisation, which moved people away from their extended family. Since the 1980s there has been a considerable effort to ensure the revival of Te Reo.

It's a joy to be able to make sense of the world around me as many places in New Zealand not only have Māori names but also rich stories behind them. This new learning has also served to highlight how the narratives of history have played out and how the phrase "history is written by the winners" rings true. While the origin of many European place names is often well known, I have realised that I don't know the Māori narratives behind many of these places, except by doing my own research. This seems such a pity. Wouldn't it be so lovely if *Te Ika-a-Māui* and *Te Waipounamu* were in common use rather than the unimaginative "North Island" and "South Island"?

This lack of acknowledgement extends to important historical events and is something I had thought about in the marking of the ANZAC centenary last year. While World War I is undeniably a very significant part of New Zealand's history, it strikes me as odd that the New Zealand Land Wars remain unacknowledged in shaping our national heritage. Surely as a nation with a bicultural identity we should be making more effort to commemorate and acknowledge such a significant part of our history?

Biases and discrimination exist everywhere and while it seems that there are bigger issues at hand in New Zealand, such as our horrific statistics of family violence, we also know that injustice and inequality are fuelled by the quashing of identity and culture. In the last few days I have read and reread an interview by Andrew Judd, the Mayor of New Plymouth, in which he details the public outrage he has faced in trying to establish a Māori Ward for his area. I live in a fairly liberal bubble of university-educated friends who work for NGOs, and reading his article reminds me of how much inequality still exists and how far we still have to go as a country. Learning *Te Reo* certainly isn't going to fix any problems *per se*, but for me it feels like the best thing I can do to support a really important progression in Aotearoa. ■

Louise Carr-Neil, an Auckland native living in Hamilton, is passionate about gender equality and human rights. In her spare time she enjoys running and vegetarian cooking.

HOW TO CHOOSE A BISHOP

The legendary secrecy surrounding episcopal appointments has sometimes led to some inspired choices and some failures.

It is that same corrosive secrecy which enabled sexual abuse and financial corruption in the Church to flourish globally, long after the irreparable damage caused by these conditions was known.

As early as the mid-1950s, the founder of the Paracletes, Father Gerard Fitzgerald, wrote regularly to the United States bishops and to Pope Pius XII expressing his opinion that many sexual abusers in the priesthood should be laicised immediately.

The overwhelming evidence shows that when they heard of children being sexually abused, from parish priest to pope acted first to protect the institutional Church rather than the community.

The outcome is obvious: low morale amongst the people of God who have been leaving the Church in numbers. This is part of the context in which a new bishop is chosen.

The death of Bishop Barry Jones of the Christchurch diocese and the impending retirement of Bishop Colin Campbell of the Dunedin diocese, provide the Church with the opportunity to involve all the people of God.

The agenda for change has been set by Pope Francis. The watchwords of his papacy should guide the way forward — listening, consensus, consultation, mercy, pastoral not legal. The Pope has made it clear that he wants "genuine pastors" who will "argue with God on behalf of their people . . . sowers, confident of the truth".

A genuine consultation with the people concerning the needs of a diocese could precede any exploration of the kind of pastor needed as a bishop.

The traditional process, shrouded in secrecy, of electing a bishop, who then lands on the people from somewhere in the eco-system, has not always produced the pastoral leadership the people need.

Australian priest Paul McGavin has written 12 criteria worthy of serious study. In his internet article he observes that "suitable candidates are hard to find. Qualities of inclusiveness in diversity are critical along with humility, a love of beauty, intellectual accomplishment and a strong prayer life".

We could learn from the St Paul-Minneapolis archdiocese in the USA who provided all the laity and priests an opportunity to say what qualities they wanted in the new archbishop. The laity were able to present their thinking directly to the Archbishop Selection Listening Sessions. It is expected that a summary of the submission will be published.

A proposal was also submitted that the diocese should have ongoing, well-organised input from the laity. Regular synods could follow.

In formal sessions lay people were invited to answer questions such as: What do you think the archdiocesan strengths are? What are the challenges facing the archdiocese? What are three traits you would consider necessary for the next bishop?

Summaries of these sessions are then sent to the US Papal Nuncio.

Pope Francis tells us that he learnt as an archbishop in Argentina that governing is not just about issuing orders but listening, building consensus and resolving problems by taking the time to assess them in depth. The exercise of authority means fostering the growth and abilities of a team rather than waving the staff of command. "The Church does not need apologists for its causes nor crusaders of its battles, but sowers, humble and confident of the truth."

In a nearly 3,000-word text to the Vatican's Congregation for Bishops, Francis tells the office they should not look for bishops based on any "preferences, likes, or trends" and likewise should not seek prelates who are mainly concerned with doctrinal matters.

The people of God are ready to be consulted. ■

Robert Consedine "My Irish revolutionary ancestors and my Catholic experience taught me justice. I have always been surrounded by love and wisdom and trust the invisible world."

Hunt for the Wilderpeople

Directed by Taika Waititi
Reviewed by Paul Sorrell

If you prefer serious subjects to be treated in serious fashion, this is probably not the film for you. Ricky Baker (Julian Dennison), the protagonist of Taika Waititi's latest film, is a wayward young foster child, but the depiction of his plight in *Wilderpeople* is as far from social realism as you can get.

The question of sexual abuse in foster families is raised, but only to provide fuel for Waititi's off-beat humour. And the reality that many foster kids, no matter how dedicated their surrogate parents, never manage to settle into their new homes is not explored at all. However, for many viewers, Waititi's approach, drawing on a ripping yarn by Barry Crump, peppered with wacky humour and Māori comic characters and showcasing vast tracts of stunning central North Island bush, will take the subject into another dimension altogether.

The plot is simple. Ricky, a chunky Māori boy clad in immaculate hiphop streetwear, is placed by CYF with an older couple in a rundown farm encircled by native forest. Wife Bella (Rima Te Wiata) falls for him immediately, but husband Hector (Sam Neill) initially remains aloof. When Bella is suddenly written out of the story, Ricky takes off into the bush and Hec takes off in search of him.

So begins their great adventure, which quickly turns into a "fugitives pursued by posse" scenario as word gets back that Ricky has been abducted (and possibly abused) by his foster dad. Waititi has great fun with all this, supplementing the Western analogy with references to *Thelma and Louise*, the *Lord of the Rings* movies, numerous movie cop-car chases and even the famous Crumpy and Scotty Toyota Hilux ad. Add a dollop of fantasy and magic realism, impromptu haiku and some memorable comic cameos, and we have a classic Waititi romp in the mould of *Boy*.

Despite its superficial lack of seriousness, the film shows how Ricky's twin needs (for adventure and love) are satisfied over the course of the action. At the end of the film, he and the gruff, taciturn Hec are finally able to show their affection for each other. While *Wilderpeople* will not be everyone's mug of billy tea, and while some may not be convinced that its diverse elements hang together, the night I saw it the cinema was rocking with laughter — perhaps the best test of all. ■

Harmony House

CD by Dave Dobbyn
Available from Red Trolley, iTunes, Spotify
Reviewed by Robin Kearns

As artists inspired by Christian belief grow older, their faith invariably becomes more evident. Think Baxter's *Jerusalem Sonnets* or McCahon's later paintings. So too, Dave Dobbyn's 2016 album *Harmony House* exudes a candid Christianity that speaks to universal concerns encountered on life's journey.

Dobbyn's roots in Catholicism have embraced a more generic Christianity. He has long occupied our soundscape. Here on *Harmony House* — as the cover art suggests — the roots dig deeper. There have been precursors to this song cycle in terms of spirituality. For instance 1998's *Hallelujah Song* playfully mocked the more absurd trappings of religion, *Welcome Home* offered an anthem to a more tolerant and arguably gospel-inspired society and his *Song of the Years* is surely the most evocative interpretation of a James K Baxter poem.

Harmony House opens with *Waiting for a Voice*, perhaps suggesting the eight years since his last CD. Subsequently *You Get So Lonely* speaks to the balance between business and beliefs in a secular world and there are discernible traces of divine cosmology in *Ball of Light*. The brilliance in this 40 minute song cycle is not only the catchy, musical tapestry but also the deliciously nuanced lyrics. (Helpfully, perhaps, these do not accompany the disc so we are left guessing: is the line "Eyes wide open to the *sun* — or *Son*"?)

Despite the imagery, this is not music that can be corralled into the "Christian" genre. Recently U2's Bono spoke of Christian music needing to include "more songs about bad marriage". By this he was alluding to its too-often contrived sweetness. Dobbyn embraces the grittiness of the faith journey Bono suggests is necessary to grant "Christian" music integrity. Lyrics such as:"It's only when you're broken / unburdened by your pride/you can sing of what's unspoken/ with nothing else to hide" reveal the heart of a sojourner. Others are replete with hope: "The truth is you're never alone" and mystical encounter: "I could see the veins on distant leaves /every detail shining and beckoning."

Dobbyn is the master craftsman of the kiwi love song — *Loyal*, *Beside You*. His slippage between secular love song and spiritual encounter is gentle and disarming. At the end of *Tell the World*, after proclaiming the "love of my girl", he subtly shifts to: "Nothing is clearer now than you/No light is so bright/No one is nearer now than you". This, perhaps, is Dobbyn's point: to know the enduring love of another is to know the love of God.

These are redemption songs rooted in his place as well ours. *Harmony House* is deeply faith-filled and astutely crafted such that the songs never risk being dismissed as "Christian" music but rather can speak to all in our land. ■

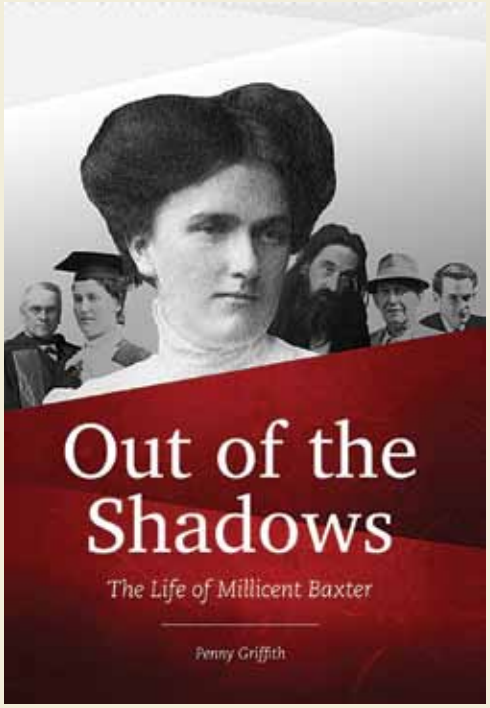
Out of the Shadows: the Life of Millicent Baxter

by Penny Griffith
Published by PenPublishing: Wellington, 2015.
Reviewed by Susan Smith

In her absorbing biography of Millicent Baxter, Penny Griffith argues that Millicent was often frustrated by other people's descriptions of her as an "add-on". As the daughter of Helen Connon, first woman graduate with honours in the British Empire and principal at Christchurch Girls' High School, and of Professor John Macmillan Brown, a founding father of Canterbury University, the wife of New Zealand's most famous pacifist, Archie Baxter, and the mother of New Zealand's most famous poet, James K. Baxter, this was perhaps inevitable. Millicent did not want to be defined by her relationship with the significant people in her life. She was more than daughter, wife and mother. She was a well-educated, articulate and strong-minded woman, as Griffith demonstrates.

Does Griffith succeed in bringing Millicent out of the shadows of these noteworthy people? In Part One, Child to Woman, the author outlines what it meant to grow up as one of the two daughters of Helen Connon and John Macmillan Brown, two noted intellectuals. Connon's professional responsibilities and her death when Millicent was 15 meant a certain emotional distance between mother and daughter. And her father's dominating, controlling personality and his hopes for her academic success meant the relationship between father and daughter was never easy. Although Millicent graduated BA in 1908 from the University of Sydney and continued her study of modern languages at Cambridge, UK and Halle University, Germany, she did not realise her father's academic ambitions.

Further disappointments followed for Macmillan Brown. In 1914, Millicent returned to New Zealand and became a pacifist, something her father found very difficult to accept. But worse was to follow when in 1918 she married Archibald Baxter, the rabbiter from Otago, pacifist, and New Zealand's most famous conscientious objector during World War 1.



Part Two is primarily devoted to Archie's story where the author covers the narrative of Archie's imprisonment and the cruel punishments inflicted on him by the military authorities.

Part Three, by far the longest, covers Archie and Millicent's married life, the birth of their two sons, Terence in 1922 and James in 1926. The couple's pacifism often meant social isolation and alienation but hard work on the family farm and in 1935 a legacy from Millicent's father ensured a certain financial security. The family travelled to England and Europe in 1936, returning to New Zealand in 1938. Part Three is concerned with Millicent's story and also tells of her son Terence, who as a conscientious objector was imprisoned in a defaulter's camp in 1941. Although he was treated far less harshly than his father had been, Millicent was convinced, with some justification, that the sins of the father were being visited upon the son.

A further chapter is devoted to The Poet Son and covers material that will be familiar to most readers—James K. Baxter's extraordinary talent as poet, his marriage to and subsequent separation from Jacquie Sturm, his turbulent life-style and chequered career, his counter-cultural positions, his alcoholism, his conversion to Catholicism, the Jerusalem story and his death in 1972 in the house of strangers in Auckland.

The question for me in reading this biography was how successful was Griffith in bringing Millicent out of the shadow of the three extraordinary men in her life. If Griffith were to receive a grade for her ability to do this, I suspect I would have given her an A-. Given the place of religious faith in the lives of three of the protagonists in this biography, Millicent, Archie and James, this significant dimension could have been further researched and critiqued. Her father's Anglicanism, Millicent's embrace of Presbyterianism, Archie and Millicent's later encounters with the Quaker community in England and in Whanganui and the conversion of Archie, James and Millicent to Catholicism, all merit further study. Perhaps, too, the emotional closeness and distances that seemed characteristic of the Macmillan Brown and Baxter families could have been examined more fully.

There is an impressive bibliography and that, coupled with generous footnotes, will ensure that this publication will be well utilised by those engaged in researching the role of women, of pacifism, of Archie or James Baxter. *Out of the Shadows* is an important contribution to those interested in the social history of New Zealand. ■

CROSSCURRENTS

Jim Elliston

Obama the Realist

Jeffrey Goldberg recently wrote in a recent *Atlantic Monthly* an account of Barak Obama's philosophy concerning international diplomacy. The article was based partly on many interviews with the President and also included descriptions of conflicting attitudes within the administration.

Some of what Goldberg writes exhibits aspects of common Washington thinking that President Obama has been trying to get away from, including the following:

1. Deal with the world as it is, not as we wish it were. The first step to being a realist is to be realistic.
2. Address specific problems and avoid specific mistakes, rather than subordinate everything under general labels. Goldberg summarises: "The strong urge among the commentariat and foreign policy *cognoscenti* in Washington to talk about foreign policies in terms of a 'doctrine' attached to the name of a particular leader or a single 'organising principle' is an unhelpful oversimplification. Even what is usually called grand strategy, although it has its role, tends to get used and overused in unhelpful ways."
3. Adapt to the differences in different situations. Not every troublesome dictator is a Hitler and not every conflict in which civilians die is a Rwandan genocide.
4. Recognising a problem is not the same as being able to solve it. The all-too-common notion that must be resisted here is one that flows from over-optimistic American exceptionalism.
5. The world is complicated and any foreign policy approach that can be simplified to a label or even to a strategy expressed in a single sentence is an oversimplification. Not doing stupid stuff is one (but not the only) important thing to remember.
6. Pay attention to geopolitics. Pay full account of how other states view their interests and the relative priority they place on those interests — and to what extent those states are or are not amenable to changing their policies.

Creative Thinking

Our prisons are so full there are suggestions that we should build a new one. The notion that imprisonment allows for rehabilitation is a sick joke. There are two options. We can address the underlying socio-economic situation that provides a breeding ground for criminal behaviour. And we can find better ways of dealing with lawbreakers. The government's philosophical ideology blinds it to the first.

A Kaitaia Trust has offered one small example of the second. The problem is that local men convicted of violence against family members can be jailed 160 km away. The mothers and children lose the minimal financial support formerly provided by the offender. Travel entailed to visit him in prison is onerous. The lack of income can lead to their eviction from rental accommodation and so the burden increases.

The Trust has bought a house where an offender can be detained while being allowed to continue working and have visits from mother and children. A counsellor is also provided with the aim of rehabilitating, rather than just punishing, the offenders (and family) and so helping them all to change.

Two Views

"People will forget what you said, people will forget what you did, but people will never forget how you made them feel." Maya Angelou.

"To achieve a life of perfect simplicity it is only necessary to reach the place where the answer to every question is: 'As you say, Majesty'." Gao Lee Ji. ■

TUI MOTU InterIslands
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Tui Motu – InterIslands is an independent, Catholic, monthly magazine. It invites its readers to question, challenge, and contribute to its discussion of spiritual, social and ecological issues in the light of gospel values, and in the interests of a more just and peaceful society. Inter-church and inter-faith dialogue is welcomed.

The name *Tui Motu* was given by Pa Henare Tate. It literally means "stitching the islands together...", bringing the different races and peoples and faiths together to create one Pacific people of God. Divergence of opinion is expected and will normally be published, although that does not necessarily imply editorial commitment to the viewpoint expressed.

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We welcome letters of comment, discussion, response, affirmation or argument of up to 200 words. The editor reserves the right to abridge longer letters, while keeping the meaning.

We do not publish anonymous letters except in exceptional circumstances.

DIFFERENT WAYS OF RESPECTING THE DEAD

I really liked reading about how different religions handled death (*TM* April 2016). Amazingly they were very similar. All were concerned with washing and dressing the body, how to watch over it, how long before it is buried or cremated and the love and care that went into it all. A pity we people of these different religions can't respect, understand and love each other more while we are living.

Susan Lawrence, Auckland

EUCHARIST BEFORE CONFIRMATION FOR CHILDREN

In response to Jim Elliston's *Anomaly* (*TM* April 2016] and the article on Catholic Schools to be prophetic (*TM* March 2016) I thought about the sacramental programmes emphasising confirmation at age seven or eight before children receive communion. It seems to sideline first Eucharist which according to the *Dogmatic Constitution of the Church* "does nothing but build in us that which we consume." Eucharist makes us all one in Christ, is linked to serving one another (Jn 13:8). Learning to appreciate the love shared in Eucharist is something young children can relate to. Eucharist gives them a chance to enjoy belonging and prepares them to receive the Holy Spirit later. I believe celebrating the Sacrament of Confirmation after first Eucharist is one step towards a more prophetic outlook by Church and School.

Patricia Chaplin, Whangarei (abridged)

KEEPING BOUNDARIES OF MUTUAL RESPECT AND LOVE

The beautiful, poignant writing of Daniel O'Leary (*TM* April 2016) expressed in very human, open, honest terms the reality of God's creation of male and female. God did not create clergy and laity, priest and parishioner. God created man and woman and saw that they were "very good".

Maintaining the boundaries of mutual respect and love is the constant challenge of spiritually nourishing "appropriate relationships".

Remembering that there are no boundaries or barriers between God and an individual — male, female, priest or parishioner — is possibly the most comforting thought in what can be difficult, heart-breaking circumstances.

Frances O'Leary, Stoke (abridged)

THINKING ABOUT FUNERAL ARRANGEMENTS

TM April 2016 was informative on funeral customs. As well as the accounts of various faith traditions, you had a piece from a funeral director who gave some useful information but "fudged" the high costs incurred by traditional funerals. Frankly many people cannot afford them. (A local director quoted $15,000 for a funeral, including $12 per head for "refreshments.") Our social justice group has been holding public meetings focused on "Funeral Choice" at which we explore options which are much cheaper and arguably more "user friendly" and emotionally satisfying. Jim Consedine and the Catholic Worker people in Christchurch have been fostering such funerals for many years. There are other initiatives, especially that of Philip Tomlinson in Timaru and Robert Benson in Feilding (www.diyfuneral.co.nz).

Ivan Snook, Palmerston North (abridged)

ALL WATER IS INDEED HOLY

Congratulations on yet another superb issue of *Tui Motu*! (May 2016). All water is holy indeed. I had my thirst quenched and was stimulated by many articles but in particular, *Star Over Troubled Waters*. Thank you Mary Leahy for opening my eyes to the many difficulties for seafarers — I had never given their challenges any thought before.

I have been reading Witi Ihimaera's book *Māori Boy*. As Witi was a sickly child, his mother would sprinkle him with water, one of the ways Māori, particularly Ringatu, had of providing protection. A quote from the book: "The Māori word for water is *wai*, and it has great resonance in our lives. When a person has concluded a speech, for instance, you will hear people call out, '*He wai*', which is an exhortation to sing a *waiata*, a song that blesses the words you have spoken. One particular proverb has the line: '*Homai te waiora ki ahau*, Give to me the healing waters of life'."

Sue O'Connor, Arrowtown

Looking OUT *and* IN

Delhi street scene

"Hot Jazz Buns! That sounds like a pretty cool song, Jalori. Is it anything like what you played at last year's talent show? Wasn't that one called Hot Cross Buns?"

"Yup, it's nearly exactly the same as Hot Cross Buns but it's a bit faster and also someone is playing the drums so we changed the name."

"Anyway I'm really looking forward to coming . . . I know you'll do a great job."

I tried to discern whether big sister's tone of voice was cynical or sincere. Regardless, Jalori was beaming with happiness that all of us were coming to listen to her xylophone performance. This year the Early Years talent show clashed with our trying to go away for a weekend with some friends. Our train was leaving at 9.20pm and the station was a good hour's drive away. We decided we'd go to school, listen to Jalori's "Hot Jazz Buns" which was third in the line-up and then tip-toe out to get to the train station.

Another "not-exactly-compulsory-but–Mum-and-Dad-think-it-would-be–great-if-we–all–could–go" event was proposed this month. Our friend and one-time neighbour in Delhi, Mathew (name changed) was recently diagnosed with advanced cancer of the gall bladder. He is 51 years old, and 15 years ago left Jesuit priesthood to work full-time in community development. He fell in love with Fatima, who was once a divorced Muslim woman, and they are now married and care for Fatima's older sons as well as many other members of her family.

"I feel like Matthew and Fatima and kids would really love to see us all. We don't know how long Matthew will be around but it's probably only another month or two. Why don't we all go to Delhi for a weekend?" suggested Dad.

"Oh I don't know. Delhi will be so hot in April. And also we have a class hike."

"Will he be well enough to talk to us and stuff? It might be really weird."

"I was so young when we lived in Delhi. I hardly feel like I know them that well and I won't really know what to say."

"Dad and I with Jalori will be going either way. But you guys can choose whether to come or not. We can probably find friends you can stay with if you don't—but it would be great to have you come along," I added.

We talked further about how we felt about a visit to Matthew and Fatima, and reasons why it might be good or bad. It required an eight hour train trip each way. In the end all four kids decided to come along.

As we suspected it was hot. A couple of other friends from here and there came too. We all sat in Matthew and Fatima's hot little apartment four stories above the tooting horns and rickshaw bells, while Matthew lay in bed. His face was much thinner than last time I'd seen him but he still managed some smiles. We didn't know what to say but we sat and talked, remembered the birthday party at the Sports complex, looked at some photos together, sang some songs, prayed and cried together. The kids all played cards in the next room and wandered through now and again to see what was happening. Later in the evening we ate beans and rice together. Matthew and Fatima thanked us several times for coming all that way.

Turning up. Being present. Bothering to come along. Whether it's to listen to the xylophone ditty of seven-year-olds, or to spend time with a friend who is unwell. Good things to do. Good things to do together. Good to remember that sometimes we do things because they're good to do, even if they're boring, hot, inane or uncomfortable. ■

Kaaren Mathias lives in north India and works in community mental health in Uttarakhand state and for the NGO, Emmanuel Hospital Association.

Like daisies in a sick room
Fresh sheets during fever
Hot water bottle in the night
Cool sips for a parched throat

Stout frame to lean on
Doctor's confidence of a diagnosis
Relief from searing pain
May mercy visit and sit with us
this month.

From the Tui Motu *team*