

Bruce T. Morrill

Christ the Healer: A Critical Investigation of Liturgical, Pastoral, and Biblical Sources

Father, all-powerful and ever-living God, we do well always and everywhere to give you thanks, for you have revealed to us in Christ the healer your unfailing power and steadfast love.

In the splendor of his rising your Son conquered suffering and death and bequeathed to us his promise of a new and glorious world, where no bodily pain will afflict us and no anguish of spirit.

Through your gift of the Spirit you bless us, even now, with comfort and healing, strength and hope, forgiveness and peace.¹

The sacraments are properly understood and practiced as manifestations of Christ's redemptive action in the lives of believers and for the life of the world. This is not to say that the ritual sacraments are the exclusive means of practicing the faith. They are, rather, meant to be tangible experiences, through highly condensed symbols, revealing Christ's active presence in all dimensions of life. The key to the reform and renewal in sacramental theology over the past several decades has been an effort to shift how the faithful — clergy and laity alike — fundamentally conceive of sacraments, a shift from receiving them as holy *things* to sharing them as graced *events* revealing the active presence of the Spirit of the Risen Christ amidst an assembled community of faith.

Situating the liturgical sacraments thus in a broader pastoral context, however, is not meant to reduce them to a merely expressive function. While sacramental celebrations find their concrete

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¹ Preface, Anointing Within Mass. International Commission on English in the Liturgy, *Pastoral Care of the Sick: Rites of Anointing and Viaticum* (1983) no. 145; hereafter, PCS.

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effectiveness (their “fruitfulness,” to use traditional language) through their strategic roles in specific pastoral situations, they not only draw upon the assembled people’s experiences but also make a further, unique contribution to them. Traditionally the church speaks of this in terms of grace, a profoundly biblical word designating the merciful favor of God towards humanity and, in the New Testament, this as definitely given in and through the person and mission of Jesus, the Christ. Commissioned by the risen Christ to carry on this work in the power of his Spirit, the church brings an effective word into history, to people living in particular times and places.

Drawing on New Testament texts, Christian tradition describes the genuine difference grace makes in human lives by employing medicinal, economic, and legal metaphors: salvation, redemption, and justification, respectively. For the sacrament of anointing the sick the medicinal dimension, obviously, is primary. With its etymological roots in *salus*, the Latin word for health, salvation shares that root with another English word, *salve* (medicinal ointment). Both terms, as liturgical theologian Susan Wood has noted, thereby imply bringing about health and wholeness.² For Christians this is a bodily and spiritual reality. The effects of sin (which ultimately reside in death) are, speaking again metaphorically, both interior and exterior. The eucharistic preface above, invoking Christ (the very title means “anointed one”) as healer, frames Jesus’ death and resurrection in terms of the assured promise of final deliverance from bodily and spiritual affliction, a promise which nonetheless can be sacramentally experienced presently as “comfort and healing, strength and hope, forgiveness and peace.” The sacrament of anointing the sick, especially when celebrated with an assembly of the faithful, is meant to make, through word and symbolic gesture, an effective difference in the lives of those who are experiencing the turmoil — physical, psychological, spiritual, and social — that sickness or seriously diminished health brings about for them and those around them.

² Susan K. Wood, “The Paschal Mystery: The Intersection of Ecclesiology and Sacramental Theology in the Care of the Sick,” in Genevieve Glen, ed., *Recovering the Riches of Anointing: A Study of the Sacrament of the Sick* (Collegeville, MN: Liturgical Press 2002) 5–7.

The priest-presider may introduce the Ritual Mass for Anointing the Sick with the words, “. . . Christ is always present when we gather in his name; today we welcome him especially as physician and healer.”³ The pastoral-theological question for this article concerns how that offer of healing might be heard in the late-modern context of American Catholicism. Indeed, “Christ the Healer” seems at present to be a highly ambiguous Roman Catholic symbol. The ambiguity lies not only in the psycho-social and religious connotations of the markedly fluid term “healing” but also in the current approaches — biblical, doctrinal, and popular — people take in attempting to understand the person and mission of “Christ.”

A few years ago I had the good fortune of being a visiting fellow in the Center for Religion, Ethics, and Culture at the College of the Holy Cross. My project included undertaking an original initiative with the sacrament of anointing the sick. Some of the students enrolled in my course worked with me in developing a semester’s long process (fashioned on the four stages of the RCIA) of evangelizing and catechizing students, faculty, and staff who might benefit from the celebration of the sacrament and, in the wake of that eventual communal celebration, sharing a period of mystagogical reflection. Evangelization included our producing a brochure on the theology and practice of the sacrament that we distributed to the entire campus community, as well as students making presentations at Sunday liturgies. The project received strong support from the offices of the college chaplain and student affairs, and a catechetical group of students — both those seeking the sacrament and those accompanying them — met weekly for a month. Ultimately, a dozen people from the campus and alumni community were anointed. Still, throughout the initiative I encountered the resistance and negative criticism from some of the faculty and staff, clerical and lay, who did not seem open to learning about the reformed theology and possibilities for renewal of this rite.

That contestation concerning the sacrament’s meaning and practice led me to observe and reflect upon the ways in which Catholics — on that campus, in the region, and even in my religious order — were, in fact, employing the concept of healing. In this article I begin by describing and briefly analyzing a few such

³ PCS, no. 135.

scenarios in order to return to the ritual text of the sacrament of anointing the sick in order to see, in the second part, what correlations might exist between the official and popular notions of sacramental healing and the understandings of healing people demonstrated in those other situations. Christian notions of healing — popular and official, pastoral and liturgical — bear with them notions about Christ, however explicitly or implicitly held. The last part of the article will survey a few of the current scholarly approaches to Jesus as healer in scripture and tradition, seeking insight into how the gospel stories of healing proclaimed in the rite might contribute to the meaning of the sacramental healing being celebrated. The conclusion will proffer observations in support of the continued reform and renewal of this tradition in Catholic faith.

THE RHETORIC OF HEALING:

SCENARIOS FROM THE CONTEMPORARY CHURCH

First Scenario: At the beginning of the 2002 fall term at Holy Cross, its Jesuit president designated September 14th, the college's titular feast on the church calendar, a "Day of Community Healing." The day's purpose, as reported in the student newspaper, was "to help mend the wounds of the past year's violence still painful in the hearts of many."⁴ The previous academic year had begun with the suicide of a student, followed immediately by the terror of September 11th. At the other end of the school year, the final weekend in the spring term brought an unprecedented homicide of one student by another, a violent fight in the early Sunday morning hours during which one young man allegedly inflicted blows to the head that resulted in the other's death later that day. The college's response was to hold a "Mass of Healing" on the following evening and to instruct faculty to work with class deans in considering distraught individual students' requests for exemptions from final exams. The long summer recess intervened, followed by the president's call in September for the "Day of Community Healing" on the feast of the Triumph of the Holy Cross.

⁴ Mark McDougall, "Day of Community Healing Brings Closure to Tragic 2001–02 Year," *Holy Cross Crusader* (20 September 2002) 4.

The day had two main events, a “memorial service” and a picnic. The student newspaper reported attendance at the memorial service at “100 students, faculty, and family members” out of a possible 2700 students and 500 faculty and staff. The president, as reported in the article, spoke in terms of transformation, calling on the assembly “to transform those terrible events into something meaningful and life affirming.” The mother of the slain student, the newspaper reported, explained “what healing meant for her and what lessons can be learned from the tragic death of her son”: 1) stop asking “why,” since there is no ultimate explanation for the tragedy; 2) live in such a way as to have hope and peace when tragedy occurs; and 3) live in preparation for eternal life in heaven. Finally, she reported her consolation in knowing that the donation of her son’s organs had saved six lives, a scholarship established in his name will help educate others, and his death brought together family and friends.

Second Scenario: For six years I had been helping in a suburban parish in the Archdiocese of Boston, approximately two thousand members served by one priest and a small lay staff, by presiding at one Mass per weekend. During the last week of June 2002, the archbishop removed the pastor due to a man’s allegation that this priest had molested him as a child thirty-five years ago. A nun on the staff undertook the administration of the parish. In the ensuing weeks she collected scores of letters of encouragement from the parishioners to deliver to the secluded pastor. As the month’s anniversary (her words) of his removal neared, she organized a “Healing Mass” to be held on a Tuesday evening in the parish church, at which she asked me to preside and preach. I asked her what she meant by a Healing Mass, and she said she found the parishioners in need of comfort but, moreover, she wanted to videotape the liturgy to send as encouragement to the pastor. She left the selection of scriptural passages to me, and I preached on a passage from Jesus’ farewell discourse in the Gospel of John (15:9-17) in terms of our deep longing for truth. Approximately 150 attended on the muggy July evening.

Earlier that year a group of parishioners had formed a “response group” to the archdiocesan sexual abuse crisis. In the early fall, 2002, the group attempted a letter-writing campaign to the archbishop, calling for fair treatment of alleged victims and abusers, as

well as the wider faithful. In their written invitation to fellow parishioners, they exhorted all to “remain united in our faith and in our prayers . . . to resolve this crisis,” and articulated this objective: “By taking this action, of writing a letter, it becomes a part of our healing process and hopefully it can make a difference.”

Third Scenario: The College of the Holy Cross is an apostolate of the New England Province of the Society of Jesus (the Jesuits), of which I am a member. In the fall of 2002 our provincial superior wrote a series of letters in light of the church crisis. His second letter concerned “the experience of victims,” including not only (but, nonetheless, first) those abused by clergy but also the Jesuits’ own experience, as well. “I believe we need to enter into solidarity with victims not only as members of a eucharistic community who wish to be healers, but also as men in need of healing ourselves.”⁵ He described healing as a “long journey” in which victims tell their stories in safe environments; shame, fear, and isolation are replaced by hope and confidence; and the possibility of forgiveness can at least be dreamed. Healing, he instructed, comes through “graced relationships,” replacing the tendency to persevere through loss alone, which often results in bitterness and despair. The graced alternative, he argued, is to join Jesus’ call “to make the windings [sic] straight and the rough ways smooth (Luke 3:5).”

Brief Analysis of the Scenarios: I have rehearsed these pastoral vignettes in the hope of giving some insight into the context in which the sacrament of anointing the sick might take place. Considering these popular symbolic notions of healing, rather than an exclusive focus on the official ritual texts, seems all the more necessary since I have found American Catholic clergy and laity profoundly lacking in knowledge of the content and structure of the reform of the sacrament of anointing. Indeed, my pastoral and classroom experience leads me to think that most Roman Catholics not only do not understand anointing within the entire rite of the Pastoral Care of the Sick, they in fact cling to the pre-Vatican II (medieval-tridentine) titles for this sacrament, Extreme Unction or Last Rites, which terminology in fact appears nowhere

⁵ Robert J. Levens S.J., to the Society of Jesus of New England, Province, Memorandum 2002/20, 16 September 2002.

in the rite that has been functioning officially in the Roman Catholic Church now for some thirty years.⁶

Ritual theorists might aver that a couple of decades constitutes a short period of time in the ongoing practice of a religious tradition. The point would be well taken. My point here is that one must take into serious consideration the popular uses of the word “healing” in the above scenarios when one questions how these clergy and laity perceive or understand healing to take place ritually, whether by means of sacramental liturgy or not, in the church. It would seem that healing among these well-educated U.S. Catholics connotes a social process entailing: 1) a crisis — including physical and/or psychological violence, a breach in community coherence and power relations, and a serious questioning of ultimate meaning — and 2) subsequent efforts to transform the situation, that is, for people to change how they perceive themselves individually and collectively so as to recover a sense of wholeness or rightness in their worldview. Ritual (especially the Mass) plays a fundamental role in the pursuit of transformation, serving both a salvific function — situating the current crisis in the larger narrative of Christ — and a redemptive one — exhorting believers to activities that will benefit the social entity as a whole and/or the disadvantaged therein.

At the time I was first attempting this description and analysis a professor of psychology shared with me his dissatisfaction with popular uses of the word healing. He cautioned that the current widespread pattern of calling people to heal in such situations sets them up for pain and frustration in pursuing an ill-defined goal. In other words, when students are in shock over a homicide or suicide among their numbers, or citizens are terrorized by the events of September 11th, or priests and parishioners are demoralized by scandals of sex and authority in the church, their pain may well end up compounded by feelings of failure and guilt when, after having done the activity of “healing” to which their professional leaders exhorted them, they do not in fact find themselves much transformed at all. One wonders whether this therapeutic insight might not be relevant to the fact that such a small number

⁶ See Charles W. Gusmer, *And You Visited Me: Sacramental Ministry to the Sick and the Dying*, rev. ed. (New York: Pueblo 1989) 66–67.

of the community participated in the day of healing in the first scenario or the Healing Mass in the second. It may well also be relevant to the slowness of so many American Catholics to understand and embrace the reformed sacrament of anointing, to which we now turn.

ANOINTING THE SICK:

SEEKING A PASTORAL SACRAMENTAL THEOLOGY

From the outset the General Introduction to the Pastoral Care of the Sick places suffering and illness in relation to both the entire human condition and Christ's words and actions. Christ's words reveal "that sickness has meaning and value for [the sick persons'] salvation and for the salvation of the world," while the biblical stories of his healing of the sick reveal his "[love] for them in their illness." Faith in this Christ "helps them to grasp more deeply the mystery of suffering and to bear their pain with greater courage."⁷ A vocational dimension to this sacrament is thus established from the start.⁸ The introduction provides the substantive content for the ensuing rhetoric of strengthening and comfort, saving and "raising up," that pervades the instructional and ritual texts of the entire rite. Suffering believers are strengthened to strive against illness so as to be able to contribute to the good of society and the church. They are, moreover, *in their very infirmity* to function as sacraments (living signs or witnesses) of the gospel by joining their sufferings to Christ's "for the salvation of the world," reminding "others of the essential or higher things" of life, and "show[ing] that our mortal life must be redeemed through the mystery of Christ's death and resurrection."⁹

The purpose of the sacrament of anointing, especially in light of the rite's expectation that religious education, pastoral visitations, and a variety of rituals suited to individual and communal circumstances will be practiced, is not only to grace suffering believers with gifts that enable them to renegotiate (transform) their lives in

⁷ PCS, no. 1.

⁸ For a sustained argument for this vocational aspect, see James L. Empereur, *Prophetic Anointing: God's Call to the Sick, the Elderly, and the Dying* (Wilmington: Michael Glazier 1982) 141–203.

⁹ PCS, no. 3.

relation to their illness. It is also to grace (transform) the community with greater faith through their interaction with the sick and suffering, who become living witnesses for them of a crucial dimension of the gospel, namely, that in the raising up of the lowly God's reign is known. In an overwhelmingly consumerist culture that glamorizes largely unattainable images of youthful beauty to the detriment of compassionate attention to the ill and aged, the Pastoral Care of the Sick brings a much needed vision and practical program for helping Catholics embrace the gospel. The rite's recurrent call for communal celebrations of the sacrament¹⁰ makes pastoral sense not only for the strengthening of the sick and those who care for them but also for the ongoing conversion (transformation) of the entire community of faith.

Such are the basics of the ministry of this sacrament, as reformed after Vatican II on the basis of sources from the first eight Christian centuries and implemented for its renewal in the contemporary context. The actual practice here in the United States, as already mentioned earlier, is another matter. During my year at Holy Cross, I encountered what may well be representative attitudes toward the sacrament of anointing among working, middle, and upper-class American Catholics. Recall how my students and I had distributed the educational flyer explaining the theology and current practice of the sacrament of anointing, along with some of them making short presentations on our pastoral initiative for this sacrament at all Masses one weekend. I had distributed a similar letter of explanation and invitation to the faculty and staff, as well as the alumni sodality, of the college.

I realize that multiple factors contribute to the attractiveness of a pastoral initiative in a particular community. The notable, recurrent feedback I received on or around the scheduled first catechetical gatherings, however, included people's strong perception of the sacrament as relevant only to the deathbed, despite all our efforts to educate to the contrary. People were not receptive to the written quotations from the reformed rite, with its clear articulation of the sacrament as being for the benefit of those suffering from chronic or recurring illnesses, nor to its encouragement of communal celebrations. My conversations with a staff member in

¹⁰ See *Ibid.*, nos. 97, 99, 108.

her forties and a student in his twenties were almost identical: "Father, for people this sacrament is what the priest does to somebody who is dying. It's the last rites. And that's it." More than one of my fellow clergy told me how bemused they were at my "trying to do something" with extreme unction or the last rites. The consistent language of the rite's instructions and rituals bespeak healing and strengthening, comfort and pardon through the ministration of Christ as healer, savior, messiah, and physician. These people, on the contrary, seemed adamant in perceiving the sacrament only as providing a final forgiveness of sins at the last possible moment of earthly life.

All of this led me to wonder how Roman Catholics on that campus, whether young, middle-aged or old, cleric or lay, do think about healing in the context of the church — in the community, its ministers, and the person of Christ. That question caused my attentiveness to the pastoral-ecclesial scenarios, with their rhetoric of healing, that I recounted earlier in this section. On initial reflection, at least, the words and objectives voiced in those situations seem consistent with those of the sacrament of anointing and the Pastoral Care of the Sick: Healing is sought not individualistically but amidst the community of faith. Healing is a matter of transforming people's perceptions of a critical or painful situation by means of making it somehow meaningful. Healing comes through doing actions that, even if only as verbal protest, seek to enact change in the situation; healing in some way invokes Christ (e.g., his death and resurrection, his service to others). Healing is needed when communal relations, whether vertical or horizontal or both, are somehow broken off, eliciting the need for reconciliation and forgiveness not only among people but also with God. This very list, however, could be applied and substantiated in reference to the rite of the Pastoral Care of the Sick, although a couple of factors crucial to the rite would need to be added: the drawing upon ancient biblical symbols of anointing and hand-laying, and the necessity of acknowledging Christ's presence to suffering and sickness as *sacramentally* manifested in individuals in relationship to the entire community of faith, that is, as revealing the mystery of his life, death, and resurrection (the paschal mystery) as the healing source of meaning for their lives in these particular circumstances.

That last point, however, raises one further difference between the first three scenarios and situations pertinent to the Pastoral Care of the Sick: the criteria for identifying who needs healing. Nobody in those three scenarios invoked the term “sickness.” Whatever needed healing was due to some breakdown in social or interpersonal relations, placing the authority structures of the community’s institutions (e.g., the church, the college, the ordained priesthood, the civil criminal and judicial systems) in play, if not in question. In case of the Pastoral Care of the Sick, the recognition that somebody needs anointing has a highly personal dimension. The rite specifies that a given individual needs to be afflicted by either a serious illness or significant debilitation in old age, and calls on pastoral ministers and health-care professionals to help a given individual discern whether anointing is suitable.¹¹

With the rite cautioning against both undue scrupulosity that would withhold anointing, on the one hand, and indiscriminate anointing of large numbers, on the other,¹² the question of criteria for the suitability of individuals for sacramental anointing remains one of the thorniest challenges in implementing the reform of this sacrament. Theologian Charles Gusmer shows great wisdom in his primary criterion for this pastoral question: “[I]t is not so much the person’s medical condition that is determinative. It is rather the ‘religious’ condition, a spiritual powerlessness, the crisis that illness represents in the life of an ailing Christian as regards communication with self, others, and God.”¹³ Compounding the problem of discernment, I would argue, is the fact that Catholics in mainstream America largely view sickness as private and, whether in explicit or inchoate ways, shameful.¹⁴ Such feelings can easily work against a person’s desire to be part of a communal celebration of the sacrament that, as I have noted above, singles out the sick and elderly as sacramental signs of faith amidst the larger assembly. All of this would seem, indeed, to contribute to conflicting views about the meaning and purpose of the sacrament of anointing in contemporary Catholic communities.

¹¹ Ibid., no. 8.

¹² See *ibid.*, nos. 8, 13, 99, 108.

¹³ Gusmer, 87.

¹⁴ See David B. Morris, *Illness and Culture in the Postmodern Age* (Berkeley: University of California 1998) 64–65, 245.

The contestation concerning the appropriate practice of the rite of anointing resides, however, not only in the social, cultural, and ecclesial perspectives people bring to a sacrament engaging sickness and healing. Important as well is how Catholics, clergy and laity, perceive the image of Christ. Who is the Christ being invoked as healer? If individual alienation or communal anomie are what contemporary Catholics seek healing *from*, then what are they being saved for, that is, what is the positive meaning brought by Christ? How does healing fit into his saving mission for humanity?

THE HEALING CHRIST: SCRIPTURE AND TRADITION

The above analysis or approach to healing in the contemporary practice of Roman Catholicism has basically focused on what theologians and official church teaching call tradition, that is, the content of the doctrine and rites of the church (as promulgated by the official magisterium), as well as the processes whereby the doctrine and rites develop in and through history. Vatican II was a ground-breaking council in its endorsement of this processual notion of tradition, trusting that the definite content of doctrine is nonetheless part of a continuous unfolding of the depths of divine truth. Also crucial to the council's agenda of reform and renewal was its preeminent desire that the reading of scripture become a crucial aspect of Roman Catholic theology and popular practice. Abandoning certain Counter-Reformation dualistic views of scripture and tradition, the council promoted an integral relationship between the two, even giving priority to the word of God over the magisterium.¹⁵

The pastoral and theological impact envisioned, and slowly being realized, by the renewed engagement of the bible in the practice of Catholic tradition cannot be overstated. The council's mandate that the proclamation of scripture be integral to the liturgy (a primary form of the tradition) has changed the content, tenor, and length of sacramental celebrations. Whereas prior to the council liturgical reading from scripture was cursorily done (if at all), often in an

¹⁵ See George H. Tavard, "Tradition," in *The New Dictionary of Theology*, ed. Joseph Komonchak and Others (Wilmington: Michael Glazier 1989) 1037-41; and Sandra Schneiders, *The Revelatory Text: Interpreting the New Testament as Sacred Scripture* (San Francisco: Harper Collins 1991) 67-86.

unintelligible language, the Mass and other sacraments now include substantial and sustained readings, focused around the gospels and other New Testament texts, but also drawing from the Old Testament, especially the psalms. For believers intellectually and emotionally willing and capable of engagement in the liturgy of the word during the celebration of Mass or other rites, gospel stories of Jesus' words and actions contribute to their image of the Christ who is salvifically present in the sacramental ritual.

Concerning the Pastoral Care of the Sick and sacrament of anointing, when the general introduction explains the rite in terms of "Christ's words" revealing the "meaning and value" of people's sickness "for their own salvation and the salvation of the world," or of Christ "during his life" visiting and healing the sick and "lov[ing] them in their illness,"¹⁶ we can reasonably ask how such large concepts might be filled with narrative content. Contemporary Roman Catholic tradition and current biblical scholarship afford a few typologies for Christ.

Christ the Priest. As noted at the outset and at other points in this article, the rite of anointing refers to Christ as healer and draws upon the imagery of healing narratives from the gospels. The church doctrinally locates Christ's institution of the sacrament, however, in the Letter of James, a pseudonymous work attributed to an apostle, probably written at the end the first century: "The Catholic Church professes and teaches that the anointing of the sick is one of the seven sacraments of the New Testament, that it was instituted by Christ our Lord, 'intimated in Mark (6:13) and through James, the apostle and brother of the Lord, recommended to the faithful and made known: 'Is there anyone sick among you? Let him send for the presbyters of the Church and let them pray over him, anointing him with oil in the name of the Lord. The prayer of faith will save the sick man and the Lord will raise him up. If he has committed any sins, they will be forgiven him' (James 5:14-15)."¹⁷ While discussion of the scholarly exegesis of that text as well as its association with the sacrament of anointing

¹⁶ PCS, no. 1.

¹⁷ Paul, Bishop of Rome, Apostolic Constitution: Sacrament of the Anointing of the Sick, 30 November 1972. Here the Constitution directly quotes the Council of Trent, session 14.

in the church's history are beyond the scope of this present essay,¹⁸ continued popular Roman Catholic understanding of this sacrament seems to align itself with a certain view of the priesthood: Christ instituted the priesthood for his church at supper on the eve of his execution and by sending the Holy Spirit upon the twelve apostles in the wake of his resurrection.¹⁹ The power to heal and forgive sins resides in Christ, the high priest who, in turn, has given that power to his apostles and their successors (bishops and, in service with them, presbyters) as priests. Such an understanding of the origins, authority, and exercise of priesthood can easily foster a highly restricted view of the ministry to sacramental healing in the church, namely, that priests are called in to forgive the sins of the faithful on their deathbeds.²⁰ Hence the persistent view of clergy and laity that I encountered in my recent pastoral effort with the reformed rite: Associating anointing exclusively with the dying, not the sick, and with the work of an individual priest, not an entire community of faith, is not, in the end, all that surprising.²¹

¹⁸ See John J. Ziegler, *Let Them Anoint the Sick* (Collegeville, MN: Liturgical Press 1987) 28–31, 41–48, 96–101, 120–43.

¹⁹ See Second Vatican Council, *Lumen Gentium*, Dogmatic Constitution on the Church (1964) nos. 18–21; and John Paul II, *Ordinatio Sacerdotalis*, Apostolic Letter on Reserving Priestly Ordination to Men Alone (1994) no. 2.

²⁰ For a clear, instructive exploration into why liturgical and canon law insists upon the priest as the proper minister of this sacrament, attending to the need for the recipient of a sacrament to be in the state of grace (and thus, sacramentally forgiven of grave sin), see John M. Huels, "Ministers and Rites for the Sick and Dying: Canon Law and Pastoral Options," in *Recovering the Riches of Anointing*, 83–112.

²¹ In presenting such a sweeping typology here I in no way intend to negate the ancient Christian tradition, based in scripture, of the priesthood of both Christ and the church. On the contrary, I am contrasting a popular view (both clerical and lay) that fails to situate the Christian ministerial priesthood in its proper ecclesial context, mandated by *Sacrosanctum concilium*, no. 7, and repeatedly propounded in liturgical documents to this day. For example: "Through baptism and confirmation, Christians share in Christ's priesthood which they exercise through their worship of God and their vocation of service to others. . . . In the liturgical assembly, Christ's presence is realized in all the *baptized* who gather in his name, in the *word of God* proclaimed in the assembly, in the person of the *priest* through whom Christ offers himself to the Father and gathers the assembly, in *sacramental celebrations*, and especially, in the *Sacrament of his Body and Blood*." National Conference of Catholic Bishops, *Built of Living Stones: Art, Architecture, and Worship* (Washington: United States Catholic Conference 2000) ch. 1.

Christ the Healer, in this widespread Catholic paradigm, is Christ the Priest, the divine-man with power to forgive and save people for eternal life in heaven.

Christ the Sacrament. Where, however, does that leave all those allusions to Christ's healing works in the gospels that pervade the sacrament of anointing and the Pastoral Care of the Sick? Here the other christological strain in the reformed ecclesiology of Vatican II, namely, Christ the primordial sacrament of the encounter with God, comes into play. Formulated in the influential work of Edward Schillebeeckx, as well as other *periti* at the council, the paradigm "Christ the Sacrament" locates the origins of the seven ritual sacraments and, indeed, the foundation of the church, not primarily in certain words or actions of Jesus but in his entire person and mission.²² Jesus' words and actions, his association with the marginalized and his preaching of God's reign, his faithfulness to the Spirit's call even unto death, and God's raising him up in the power of that Spirit altogether amount to his being the very human, bodily manifestation — that is, the *sacrament* — of God's saving will in and for human history. This fundamental sacramental insight led Schillebeeckx into a decade of New Testament research resulting in a massive, albeit controversial, liberationist christology, for which the question of God's response in Christ (and through the church) to the historical and existential suffering of humanity was of central concern.²³

Biblical Scholarship: Jesus, Prophet and Healer. The strongly biblical turn in Schillebeeckx's work is a prime example of Vatican II's call for scripture's integral role in Roman Catholic theology coming to fruition. Whatever the given question they might be addressing, most theologians today ground their work in an investigation of pertinent biblical material, critically availing themselves of the research and writing of biblical scholars.

²² This theological principle from the council is evident in the best moments of subsequent liturgical legislation: "Christ is himself the sacrament of the Father." *Ibid.*

²³ See Edward Schillebeeckx, *Christ the Sacrament of the Encounter with God*, trans. Paul Barrett (New York: Sheed & Ward 1963); *Jesus: An Experiment in Christology*, trans. Hubert Hoskins (New York: Crossroad 1979); and *Christ: The Experience of Jesus as Lord*, trans. John Bowden (New York: Crossroad 1981).

If we look to contemporary New Testament scholarship concerning Christ as healer, two different basic approaches present themselves. Using analysis free of what they consider the ideological distortions of Christian doctrine, historical Jesus scholars seek to satisfy the insatiable modern desire to know “what really happened,” as well as how Jesus and his contemporaries themselves understood what he said and did. These scholars draw upon research methodologies and outcomes from a broad array of social sciences (archeology, anthropology, history, political science, economics) in efforts that might fairly be described as textual deconstructions opening into historical reconstructions. The other approach, one that garners far less media attention, continues to seek what Jesus meant to himself and others in the narrative structures of the gospels themselves, especially as these culminate in Jesus’ death and resurrection.²⁴ While also making use of historical, anthropological, and archeological findings, these scholars look for answers to who Jesus was and what happened in his life within the narrative frameworks of the New Testament texts themselves. The difference between the two approaches, both in fundamental principles and various outcomes, is significant and, not surprisingly, the polemics rage. Nonetheless, I believe liturgical theology can benefit from the research and writing emerging from both camps.

The most academically respected of the first, historical Jesus, type of scholars win praise from a wide range of their colleagues, even their adversaries, for their exhaustive study of the socio-historical context of Jesus and his mission. It would seem that no Christian theologian of whatever specialty can dispense with the assurance that one’s theology is connected in some way to the earthly person and work of Jesus. The doggedness of faith in the incarnation would seem to demand it, not out of mere curiosity, but in order that the prophetic, transformative, salvific potential of what Jesus said and did in such a different environment long ago might not be lost on believers today. The pastoral question of how the sacrament of anointing can function as a saving encounter with

²⁴ See Luke Timothy Johnson, *The Real Jesus: The Misguided Quest for the Historical Jesus and the Truth of the Traditional Gospels* (San Francisco: Harper Collins 1996) 151.

Christ in the church today is a stellar example of liturgical theology's need for such scholarly biblical input. If the intention of the rite is for the sick to receive consolation, strength, and even a sense of mission *from Christ* and, moreover, if the current practice of its various rituals includes proclaiming gospel passages about cleansed lepers (Mark 1:40-44; Matt 8:2-4; Luke 5:12-14), stopped hemorrhages (Mark 5:25-34; Matt 9:18-22; Luke 8:43-48), and restored paralytics (Mark 2:1-12; Matt 9:2-8; Luke 5, 18-26), then greater insight into the circumstances and implications — social, cultural, religious — of those stories cannot but shed significant light on the theological meaning and pastoral benefit of the sacramental-liturgical action taking place in the present.

For all the strangeness that details, and in some cases, the total story, of gospel-healing accounts present to late-modern readers, their incongruence with a technological worldview can nonetheless reflect back some important knowledge people have generally lost in their valorization of scientific, medical progress: Sickness and health are not simply objective realities, not merely somatic entities; rather, as New Testament scholars have come to learn from anthropologists, illness is a comprehensive social condition, if not a status, that results from a person's coming down with a disease.²⁵ As John Dominic Crossan has argued, "Society (and its systemic structures) can not only exacerbate the *illness* that follows from a *disease*, it can create the *sickness* that leads to *disease*."²⁶ The challenge for modern readers of the gospels is to learn what pre-modern peasants and indigenous peoples have known to this very day, namely, the difference between *healing an illness* and *curing a disease*, as well as how these two are entwined. Learning about the social dimension of disease (the somatic symptoms or processes making a person sick) and illness (the sickness as it functions in the total life of the person — physically, psychologically, interpersonally, economically) brings a much needed perspective on the comprehensive situations of the sick people populating the gospel

²⁵ See John J. Pilch, *Healing in the New Testament: Insights from Medical and Mediterranean Anthropology* (Minneapolis: Fortress 2000) 1-54.

²⁶ John Dominic Crossan, *The Birth of Christianity: Discovering What Happened in the Years Immediately After the Execution of Jesus* (San Francisco: Harper Collins 1998) 295.

narratives, as well as how gospel accounts of Jesus performing healing marvels are not at all beyond the historical pale. Furthermore, this line of scholarship presses the recognition that Jesus' healings and exorcisms, far from being isolated feats, were ritual events reorienting Jesus himself, those whom he healed, and others who acknowledged the miracles into a new social context, which Jesus called the reign of God.²⁷ Deliverance from sickness includes a realignment of social relations and statuses, human and transcendent.

The controversial question in light of such biblical scholarship concerns interpretation. Among the most contested positions is that of Crossan, who portrays the Galilean peasant Jesus as a wandering cynic dispensing a socially radical wisdom. Magic and meal were at the heart of Jesus' program, Crossan determines, because the way Jesus went about healing people and practicing an utterly open table fellowship struck at the heart of ancient Mediterranean society's system of honor and shame, patronage and clientage, creating in its place a kingdom of "nobodies." The marginalized people with whom Jesus dined and among whom he performed miracles lived in the "schizoid position of a colonial people," stressed-out, as it were, physically, psychologically, and socially. Jesus' exorcisms and other cures must be understood under those human conditions wherein acts of magic help oppressed people feel secure or relieved and exorcisms amount to "individuated symbolic revolution."²⁸ Stevan Davies, another gospel historical deconstructionist, on the other hand, criticizes Crossan and other colleagues for uncritically projecting onto the texts their own worldview, a bias for a coherent, meaningful world from a teacher, only to produce a plethora of diverse interpretations: Jesus as a political revolutionary, a reactionary Pharisee, or a sort of cynic. Davies argues that the place to meet Jesus on his own historical ground is his healing activity, wherein he exudes the characteristic psychological behavior of a *medium* or, to use the

²⁷ See Stevan L. Davies, *Jesus the Healer: Possession, Trance, and the Origins of Christianity* (New York: Continuum 1995) 100–04, 199–200.

²⁸ John Dominic Crossan, *The Historical Jesus: The Life of a Mediterranean Jewish Peasant* (San Francisco: Harper Collins 1991) 317–18.

ancient Jewish paradigm for such a medium, a spirit-possessed prophet.²⁹

But to what end such historical precision (concerning healing) and speculation (concerning Jesus and his followers)? And has Jesus' own end, that is, his death by execution, no significance for the meaning of his prophetic work, as these and other biblical scholars conclude?³⁰ While such scholarship helps us avoid projecting our worldview onto ancient Palestine, raises the human complexity of sickness and health, and even forges an important link between Jesus' miracles and his radical table fellowship, the question remains as to whether and *how* anybody could give oneself over to this Jesus now. For theology and pastoral practice recent historical Jesus scholarship reaches a limit: affirming the historicity of Jesus' miracles by methods functioning outside the narrative structures of the gospels ends up producing theories about Jesus' work at too great a distance from what I believe Leander Keck rightly calls "the offense of the Gospel,"³¹ namely, its proclamation of Jesus as the crucified Jewish prophet whom God has raised from the dead, making him a life-giving Spirit capable of animating our lives today. Although one might look to more recent, multi-volume works by biblical scholars promoting a narrative-textual based approach to the historical Jesus,³² I turn, finally, to one from the 1970s, a lithe, original work abounding in insights that, when read in the light of the findings of those more recent massive volumes, seems to have been ahead of its time.

In *To Heal and To Reveal* Paul Minear acknowledges how difficult it is for modern readers to grasp Luke's message about Jesus, as well as about *the church* as the historical successor of his mission. Indeed it is impossible without undertaking the hard work of trying to apprehend the consciousness or worldview that Jesus and his first followers lived (the "reign of God"), which is at odds with

²⁹ See Davies, 100, 198.

³⁰ See *ibid.*, 147–50; Crossan, *The Historical Jesus*, 367–76; and Paula Fredriksen, *Jesus of Nazareth, King of the Jews* (New York: Knopf 2000) 232–34.

³¹ Leander Keck, *Matthew-Mark*, *The New Interpreter's Bible*, vol. 8 (Nashville: Abingdon, 1994) 251.

³² See the series of N. T. Wright, *Christian Origins and the Question of God*, vols. 1, 2, 3 (Minneapolis: Fortress 1992, 1996, 2003); and John P. Meier, *A Marginal Jew: Rethinking the Historical Jesus*, vols. 1, 2, 3 (New York: Doubleday 1991, 1994, 2001).

virtually every tenet of modernity. This is the consciousness of God calling people to repentance, to break away from the pattern of lording authority over others, of expecting might (political, religious, economic, professional) to make right and, in its place, embracing the pattern of Jesus' prophetic life of self-emptying (kenotic) service. For Jesus these local, specific acts of God's deliverance of the forsaken amount to nothing less than the cosmic overthrow of the dominion of evil, of sin, of Satan. This worldview of Jesus is a paradoxical one, Minear argues, given to disclosure not by analytic argument but parabolic words and deeds, of which the definitive one was his crucifixion.

The offense of the gospel lies, then, not in Jesus' performance of healings or exorcisms per se but, rather, in how those miracles help to reveal something far more world-shattering, namely, the origin and kind of authority Jesus was inaugurating and the decision it demanded: "[W]e will not grasp how healing meant revealing, and how revealing meant healing, without grasping the mystery of how weakness had become the channel of God's power."³³ Jesus' taking the latter all the way to his death makes the crucifixion, along with the resurrection, the definitive realization of this divine power exercised through humility in suffering service to the lowest, the revelation that the dominion of evil is not ultimately in charge. Jesus' death and glorification sealed with authority the prophetic implications of his miracles, table service, and teachings, which he clearly intended as applicable "to all types of human associations, whether political or economic or religious . . . constitut[ing] nothing less than the most revolutionary form of liberation from every kind of servitude."³⁴ Freedom resides in the awareness that in taking on this "from the bottom up" approach in whatever situations of urgent need, believers experience the invisible God's immanence in visible human actions. Belief in this fusion of the human and divine, the visible and invisible, is evident in Luke's disinclination to separate what modern interpreters would identify as the objective and subjective factors in the miracle accounts.

³³ Paul Minear, *To Heal and To Reveal: The Prophetic Vocation According to Luke* (New York: Seabury 1976) 75.

³⁴ *Ibid.*, 24.

The immense question remains, of course, whether and on what terms believers might embrace and practice the life of faith this gospel envisions. Minear's challenging response: "Any reentry into Luke's world presupposes and requires a world view the opposite of the 'flat-earthers,' those radical secularists whose earth is limited to one dimension; it requires a world view which gives absolute primacy to the reality of God and his governance of man's affairs. Moreover, we will never reenter the world of the prophets unless we concede that God actually has available various means of communication with his people, means which explode the firmness and fixity of those patterns of thought by which we have domesticated the anarchies of history, making ourselves slaves of immanence in the process."³⁵ I would propose that the understanding of Christian sacraments and liturgy outlined at the outset of this article, of their revelatory function for the practice of faith as a comprehensive way of life, of their engagement of the biblical word with the symbolic enactment of the paschal mystery, amounts to one such world-transforming means of communication between God and people. Sacramental liturgy, when understood and practiced not as quantified portions of grace dispensed inside sacred boundaries but as graced events disclosing God's active will amidst those hungering for it, has as its very purpose the making visible in and to human bodiliness the invisible mystery of salvation. Liturgy can only have such a healing and revealing force if members of the church, clergy and laity alike, give themselves over to the divine authority hidden in its unblinking openness to biblical proclamation, its tradition-based symbolism, its irreducible musicality of rhythmic sound and silence, its attentiveness to the real, live human story in which it occurs — in a word, to its ritual promise of disclosing what could not otherwise be known.

CONCLUSION:

LITURGICAL TRADITION AS SALVIFIC PRACTICE

If the church's liturgical tradition is to go forward as a living, formative practice then it will have to come from a deep sense of need, not a need to perpetuate hierarchy or cultural niceties or ancient symbols for their own sake, let alone to assuage guilt

³⁵ *Ibid.*, 100.

before divine retribution, but from a deep need for the gospel to come alive, to make a salvific difference at a given place and time for actual people. It would seem that the reformed sacrament of anointing, as part of the entire pastoral-liturgical rite of the Pastoral Care of the Sick, is both symptomatic of the social, cultural, and religious challenges to the renewal of the church's liturgical practice, as well as an opportunity for discovering the liturgy's transformative power in the Christian community when the biblical, ritual, and pastoral dimensions of a rite are put into play.

Beneficial practice of this sacrament requires that its subjects, the sick and elderly, not be approached as isolated souls but as person-bodies³⁶ who have reached a moment of crisis involving all dimensions of human life — psychological, physical, interpersonal, social, familial, economic, religious, and spiritual. Discerning the appropriateness of sacramental anointing is a matter of determining that a person realizes that life will not or cannot go on as it has, that one needs the salvific support of Christ to renegotiate one's place in the world and in the presence of God. Failing that fundamental theological insight, which as we have seen finds ample support in scripture and tradition, the sacrament cannot but remain mired in the misconception of being last rites, a hastily timed curative to the departing soul, a gesture moving entirely in one direction from the priest to the passive recipient. Both the gospels and the reformed rite, however, see in the sick person a living sign, a sacrament, an event disclosing the truth Christianity trusts God to reveal in suffering.

Human misery, shame, guilt, and fear do not glorify God; rather, seeking the presence and action of Christ in and with the suffering — or for the sick person, in one's own suffering — occasions a moment for sharing the disclosure of divine solidarity therein. Liturgically enacted, such a sacramental encounter compels ongoing pastoral engagement with the sick person in a genuine exchange of gifts, human and divine, grounded in the assurance of God's exaltation of the crucified one. Such pastoral-liturgical practice brings to the central ritual of the church, the eucharist, an intense

³⁶ See Louis-Marie Chauvet, *Symbol and Sacrament: A Sacramental Reinterpretation of Christian Existence*, trans. Patrick Madigan and Madeleine Beaumont (Collegeville, MN: Liturgical Press / A Pueblo Book 1995) 147–52.

lived knowledge of the paschal mystery, the pattern of Christ's life, death, and resurrection. This experience of and with the sick, this experience at the margins, sheds light on what matters most at the center of the faith — as seems only fitting, given the gospels' portrayals of Jesus the healer.

John H. McKenna

Eucharist and Memorial

"Do this in memory of me. . . . In memory of his death and resurrection, we offer you, Father, this life-giving bread, this saving cup."¹

Scholars today would disagree on the extent we can reconstruct first century Jewish and Christian liturgical celebrations. They also disagree on the Jewish prayer form(s) that served as a "model" for the Christian eucharist. Few, however, if any, would deny that Jesus was firmly rooted in his Jewish tradition that he freely interpreted in light of his own experience of God and Israel. This is certainly true of the Jewish *zakar* or memorial. The purpose of this article is twofold: first, to give a brief historical background of the notion of memorial; second, to sketch some underlying theological issues, especially in light of the writings of Edward Kilmartin.

HISTORICAL BACKGROUND

Max Thurian, in his classic study, reminds us that the term *zakar* and its Greek counterpart *anamnesis* have many meanings.² Not the least of these meanings is the notion that the "past event

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¹ Roman Catholic Eucharistic Prayer II.

² Max Thurian, *The Eucharistic Memorial*, trans. J. G. Davies (Richmond: John Knox Press 1959) I, 5–6, 25.

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