

THE SECOND PASTORAL VISIT TO THE CAMILLIAN COMMUNITY IN AUSTRALIA

Introduction

Traveling to the Southern hemisphere coming from Rome in May is so lovely. Weather is so amazing and pleasant. Foliage is changing its color from green to yellow, orange or varying shades of red. Australia is transiting to winter which will begin in June. It is exactly during this period that the Consulta with Fathers Gianfranco Lunardon and Aris Miranda paid a second pastoral visit to the Camillian Community in Australia from April 30 - May 8 of 2019. The first visit of this Consulta took place in September 2016.

It has been the desire of the Father General and his Consulta to visit as often as possible the geographically isolated new missions of a particular Province of the Order whose areas of responsibility (AOR) are multi-country and multi-ethnic. Their superiors are encouraged to participate in some important meetings of the Provincial Council. The Camillian community in Australia is under the Philippine Province together with the countries of Taiwan and Indonesia. Their members hail from several nationalities: Italians, Taiwanese, Filipinos, Pakistani, Indonesian, Australian (not officially incardinated), Vietnamese, Malaysian, and American.

A multi-ethnic mission is a sign of growth of the missionary spirit and the charism of the Order. In the past, missionary activities were unidirectional, that is, from a highly developed to a least developed country or a highly Christian to a non-Christian nation. At present, it is bi-directional or multi-directional. The missionary trend is undergoing an essential mutation due to the fast-changing character and needs of the people, its social condition and the Church's pastoral mission. Today, evangelization is not only discerned by the doctrinal hunger of the people but by the social condition which provoked a deep-seated human and spiritual crisis.

The Camillian Community

The Camillian Australian Community is composed of five religious: Fr. Remigio Jamorabon, Fr. Diosdado Haber, Fr. Marcelo Pamintuan Jr. and Fr. Domingo Barawid from the Philippine Province and brother Eric Perret from the Anglo-Irish Province who is not canonically enlisted to the Philippine Province. Since our last visit in 2016, the number went down by one due to health reason of one of the religious – Fr. Giulio Ghezzi – who decided to go back to his home Province (North Italy). While the membership is going down the demands of the ministry is scaling up, a situation which is beyond the control of the community of religious but merits a deeper reflection and planning. Our confreres are zealously responding to these demands according to their capacity and competence.

They are all primarily working in the chaplaincy ministry of the Diocese of Parramatta, a diocese which covers the Western Sydney and the Blue Mountain regions which are the main pastoral area of responsibility. This particular service of the Diocese is managed by the Catholic Care an agency of the Diocese of Parramatta whose commitment is “to offer quality professional services which enable people to live life in a spirit of hope and to become the best human being that they can be.” (Vision of Catholic Care).

It is an interfaith chaplaincy ministry in the hospitals and healthcare facilities composed of ministers and lay volunteers from different faiths. Their primary task is to deliver spiritual care to patients, families, and friends as well as to the carers (ministers and lay). The chaplains are highly qualified and expected to have undergone training and formation on spiritual care to render a standard, professional and quality care to those who are suffering.

The Camillians are full-time chaplains in the three government hospitals at Westmead, Blacktown, and Mount Druitt and also extending their assistance to other hospitals such as the Children's Hospital and Cumberland (mental health facility) at Westmead. Aside from chaplaincy, they are also looking after the migrant spiritual care ministry of the diocese to the Filipino and Italian Catholic communities with an official mandate from the said Diocese. Previously, the community used to run a parish in the Diocese for a decade, but due to the lack of religious, they decided to give up the parish. It was a big loss to the community because apart from the big appreciation among their parishioners and the diocese itself, they are losing a privileged place for vocation promotion, an area of ministry which is facing huge challenges in the highly developed society. In the parish, they can organize several pastoral activities as compared to the hospital chaplaincy wherein they have to abide by the general program strictly.

Despite their hectic schedule, the community is also keen to the concerns and care of their religious with the support of the diocese and groups of religious in the area. The Diocese is providing them a 7-unit (7 hours) of training on Safeguarding and Professional Standards, a program of the diocese for establishing a robust system and policy to ensure a child-safe environment as well as protection to vulnerable adults. They are also encouraged to participate in the clergy bi-monthly gathering where some theological-pastoral updatings and discourses are normally given. They are also participating in the bi-annual gathering of all religious in the diocese especially during important feasts of the Church. Apart from the external support services, the community is organizing a bi-monthly spiritual recollection and a weeklong annual retreat and community relation enhancement activities such as community outings.

Aside from the involvement with their regular ministry, they are also following up the spiritual and organizational care of two Camillian organizations, namely, the Lay Camillian Family and CADIS Australia organization.

The Lay Camillian Family of Australia is a very young organization with 12 members mostly Filipinos of origin but Australian citizens and a few Aussies. They are also integrating the group from New Zealand LCF to composed the Asia-Pacific (Oceania) group of the LCF. The confreres of the Australian Delegation are conducting regular formation to both groups either live or virtual (online). The LCF Australia is now planning to engage in a regular pastoral activity called the Community Visitors Scheme (CVS). The CVS is a national program of the Catholic Care funded by the Australian government. The volunteers' primary task is to enrich the quality of life of the aged persons who are lonely or isolated from friends and family by visiting them regularly in the aged care facility, that is, twice a month. The Australian government is very keen on the plight of the aged persons by protecting their rights and promoting their dignity to the extent that they are fully supporting spiritual care activities organized by different interfaith organizations. We believe that engagement to a particular ministry as an organization will strengthen the members' identity and commitment to the family.

CADIS Australia is a neo-organization that is gradually progressing in terms of its organizational and civil (legal) development. At present, they have eight members. They meet regularly for business meeting and have organized series of fundraising activities since last year to support the emergency responses of CADIS International in the Philippines, Indonesia, and India.

It obtained last year its Australian Business Number (ABN) from the government and are waiting for the final approval of its tax credit certificate so that any donation that may come will be tax deductible.

CADIS Australia is a participant member to CADIS International which defined the main principle to disaster intervention and encouraged its participants to adhere while maintaining its autonomy and sovereignty as an organization. Since they don't have yet the capacity to respond to the situation of a disaster, their commitment is to raise funds in support of various intervention organized by CADIS. We desire that this organization will grow in terms of membership, projects, and capacity to respond to disasters in the country and abroad. The South Pacific region is very much prone to natural disasters and among the most vulnerable region to climate change.

Moreover, the Australian Delegation is demonstrating its generosity towards the missions of the Province particularly to the Philippines and Indonesia through their regular annual financial commitment for the pastoral and formation activities. In exchange, those countries mentioned are also preparing their religious to support the mission in Australia. This is a fertile ground to reflect, cultivate and implement inter-provincial or delegation collaboration as encouraged by the Order not only for financial purposes but above all for the mission.

Looking Forward with Determination and Courage

The spiritual care ministry in Australia is facing huge challenges due to the growing number of aged persons who are lonely and abandoned and the lack of spiritual carers who are committed to promoting meaningful aging. In 2017, there were 3.8 million Australians aged 65 and over (comprising 15% of the total population or approximately 1 per 7 population). The number and proportion of older Australians are expected to rise.

Spirituality is integral to, but not confined by religion and faith. It is about what defines the purpose of our lives. It is about our sources of meaning and hope, which in turn is intimately linked to our connectedness to ourselves, to others and the world. The World Health Organisation views in fact spirituality as inextricably linked to the quality of life. Recent studies have demonstrated that spiritual health supports the person's ability to adjust to the challenges of aging.

Both the government and the Australian church are committed to supporting the well-being of the aged, abandoned, and the sick not merely by providing physical and medical care but as well as spiritual care which in the Christian *parlance* called pastoral care. One of the predominant characters of this care is multi-faith. Different faith personnel pooled together their resources bringing hope and sense of meaning to the lives of the suffering members of the society especially the most abandoned.

It is very encouraging to hear from you, despite your minimal presence in Australia, that you are being sought by the Church authorities to deliver spiritual care. You have received a new request for two hospital chaplains in the Archdiocese of Sydney. On the other hand, you have also expressed your desire to the archdiocese to include a parish in which a new community of the Camillian religious will look after. There is a big hope that these requests will be given space from both sides – the archdiocese and the Camillian. These merits our attention and support. Nevertheless, you are also exploring other possibilities to other dioceses.

This is a good sign of missionary zeal and enthusiasm. We understood that you are not just running after these opportunities while favorable conditions exist. It is a sincere expression of your sensitivity to the pastoral needs of the church and society.

The main challenge is where to find confreres who could render help and materialize this plan. Nonetheless, it seems that this issue is almost resolved with the commitment of the Provincial administration to send three religious hopefully by next year. The Indonesian Camillian Community has also expressed their interest to collaborate with you. Another Province has also shown the same interest. In the latter case, it would be good to apply the new guideline for interprovincial collaboration with a well-defined and mutually agreed conditions of the religious concerned who will be working with the Philippine Province. All these recommendations must be the fruit of a dialogue between the respective provincial superiors and the religious concern. Doubts and speculations can only be understood and overcome through dialogue and openness.

Areas of Concern and Interest

Pastoral care is the predominant expression of our ministry in Australia, particularly in the hospital or healthcare facility. It is a well-organized and standardized ministry. It is multi-faith in nature which allows other patients of different faiths can avail of the spiritual services rendered by their respective religious minister or with any other minister as desired by the patient. The growing multi-culturalism and multi-faith aspect of Australia brought about by new migrations posed a challenge to the society not in terms of security but of integration and adaptation.

One of the evident changes is in the field of pastoral care. In the search for a more “politically correct” terminology, pastoral care is replaced with **spiritual care**. Political correctness means conforming to a belief that language and practices which could offend political sensibilities (as in matters of sex or race) should be eliminated. Spiritual care is more encompassing, universal and acceptable to anyone regardless of faith. The predominant spiritual need of a patient is the search for meaning and purpose of life. How do you see this re-orienting of pastoral care? Are the patients expressing their deep spiritual hunger? How do you respond to it?

Another issue which deals with “political correctness” is the term **silent space**. What used to be called a chapel in the hospital, where an altar is at the center, and space is adorned with sacred images is now called a silent space where people can pray, meditate, refresh, be still, celebrate, etc. It is mainly a bare space which perhaps for others especially the Christians could be confusing. The sense of the sacred in this kind of space is somehow not given visibility due to the absence of certain essential symbols. You hide your tabernacles with due respect to the other faiths. The first time that we saw this kind of setup, it didn’t ring any particular question and understood as a sign of openness and welcome to the other faiths. Is the sense of sacredness does not make sense at all? Do the people especially the Christians or the other faiths find it still at home in which they could pray in such a kind of setting?

What about the attendance to masses or to the sensitivity to receiving the sacraments among Catholics? We could not deny the fact that in most of the highly developed countries there is a downtrend of the Sunday mass goers and the demand for sacraments. We have observed during our weeklong stay at the mission that most of the churchgoers are migrants coming from countries who have a strong Catholic tradition like the Philippines. This is also evident as well in the two organizations (LCF and CADIS) in which you are following where the great majority of the members are Filipinos. How do you assess yourself in this particular situation? What pastoral approach do you think effective in reaching out to this person who might have the desire but got no time to participate?

Spiritual care ministry as you called it, is multi-faith in nature and not only ecumenical which is pretty much a common form. Your primary mandate as chaplains according to the local church’s pastoral care ministry in

the Diocese of Parramatta is to look after the spiritual needs of the Catholics but not only limited to them. In the hospital, you have been working together with the ministers of the other faiths such as Islam, Hinduism, Jewish, Christians, and Buddhism. You worked as a team under the guidance of a spiritual care coordinator employed by the diocese through the Catholic Care supported by public funds. This is a very encouraging arrangement wherein the primary institutions of the society (church and state) are pooling their human and financial resources in support to the sick especially the aged who are alone, lonely or abandoned regardless of faith. What do you see as advantages and disadvantages in your spiritual care ministry and the promotion (or influencing) of our Catholic teachings and moral standard to the Australian society?

Those situations mentioned above are interesting matters for reflection to enrich our ministry of evangelization as Camillians to the new signs of the times. We can take it as our challenges and opportunities of witnessing the merciful love of Christ towards the sick and the suffering. We long to see your contribution in this field. This coming August 12-14, 2019 there will be a meeting of Asian Camillian Pastoral Health animators in Bangkok. This is a good opportunity to share your thoughts and reflections on this matter.

Lastly, you have mentioned about the possibility of the Consulta to organize an annual updating course for all the Camillians. The six-year program of the Consulta encourages the organizing of program for ongoing formation. “*Ongoing formation* should be defined on the occasion of the fourth centenary, the jubilees of religious and above all *during the ten years after perpetual profession*: the organization of an *ad hoc* program drafted for continents or linguistic areas constitutes a priority. This program of formation should contain inescapable references to the tie between the charism and spirituality, fraternity and the vow of poverty, and the capacity to bear witness to a sober life that respects the resources of the Creation.” (Camillian Project 2014-2020). This formation should focus on the following themes: Camillian charism and spirituality, bioethics, pastoral health theology, and pastoral healthcare. While the Consulta is running out of time to organize one during this sixienium, this desire merits perpetual attention from our future leaders. It has been a general desire and concern of most of the religious if not all. The Consulta apologizes for not investing much time, effort and money on this aspect despite recognizing it as our priority.

To conclude, we would like to express our heartfelt gratitude for the fraternal welcome you accorded to us during this visit. You made us feel at home and relax while enjoying the beautiful nature spots of Western Sydney. We wish you all the best to each one of you and this mission through the intercession of our Holy Founder Camillus and Our Lady of Good Health that you may continue with courage in witnessing the merciful love of Christ to the sick.

Rome, May 15, 2019



Fr. Aris Miranda

Fr. Gianfranco Lunardon