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OFICINA DE PRENSA DE LA SANTA SEDE



BUREAU DE PRESSE DU SAINT-SIEGE  
PRESSEAMT DES HEILIGEN STUHLS

# **BOLLETTINO**

SALA STAMPA DELLA SANTA SEDE

N. 191210a

Tuesday 10.12.2019

## **Press Conference to present the International Symposium “Religion and Medical Ethics: Palliative Care and the Mental Health of the Elderly”**

At 11.30 this morning, in the Holy See Press Office, Via della Conciliazione 54, a press conference was held to present the International Symposium “Religion and Medical Ethics: Palliative Care and the Mental Health of the Elderly”, organized by the Pontifical Academy for Life and the World Innovation Summit for Health (WISH, an initiative of the QATAR Foundation), to be held in the *Augustinianum* in Rome from 11 to 12 December 2019.

The speakers were: Archbishop Vincenzo Paglia, president of the Pontifical Academy for Life; Dr. Sultana Afdhal, chief executive officer of WISH, Qatar; and Dr. Kamran Abbasi, executive editor of the BMJ (British Medical Journal).

The following are their respective interventions:

### **Intervention by Archbishop Vincenzo Paglia**

The two themes chosen for this Congress are Palliative Care and Mental Health in ageing. These are two areas that are important for the future of our societies and not only in healthcare, since the sick and elderly are considered people who no longer have anything to offer. They are not productive, they are of no use, they constitute a burden for our societies that make efficiency into an absolute myth. An attitude denounced by Pope Francis who uses, as you know, the effective expression “throwaway culture”.

The Pontifical Academy for Life is committed to promoting a culture of palliative care at the level of the Catholic Church, everywhere in the world. We have already held various Congresses on this theme, both in Italy and in Europe; in the United States, with the signing of a Joint Declaration with the Methodist Church; in Brazil, in Lebanon and in Qatar, where in January 2018 I signed, indeed with Dr. Sultana Afdhal, a Joint Declaration. The *Position Paper* on the themes of end-of-life and palliative care, signed in the Vatican on 28 October with the representatives of the three Abrahamic religions should not be forgotten. (The texts of these documents are on our website, where there is a well-documented page dedicated to the work of the Academy on Palliative Care

[www.academyforlife.va](http://www.academyforlife.va)).

We have published a White Book for Global Palliative Care Advocacy, prepared by an international expert group. The text is available in English, German and Italian – it is also on our website – and Catholic Universities and the Catholic Hospitals throughout the world are receiving it to enable an increase not only in knowledge, but above all in the practice of palliative care. We have in common the wish to promote a “palliative culture”, both to respond to the temptation that comes from euthanasia and assisted suicide, and especially to nurture a *culture of care* that enables companionship of love to be offered up the passage of death.

The Symposium that we are beginning tomorrow, as I said, unites two themes important to the future of healthcare policies in many countries in the world, and not only in the west. We witness on the one hand the increasing ageing of the population; on the other the spread of a culture of euthanasia, since it is considered that the terminally ill and elderly should be discarded in a world focused on profit and economics, and healthcare policies often give in to this mentality that prioritizes accounts. Instead we are well aware of how central palliative care is to the recovery of an integral accompaniment of the sick in contemporary medicine. And we know that we can treat, even when we can no longer cure, by balancing attention to the person with economic budgets. The experts tell us this and it will be discussed during the work of this Congress.

But I would also like to highlight a further aspect, which relates to a very important frontier field. If indeed the men and women of our time, at the moment of frailty, are in need of integral accompaniment, these is even more true with regard to minors. A specific section of our work is dedicated to a very delicate and painful subject: paediatric palliative care. When suffering afflicts minors, children, we are even more shaken.

These, then, are the fields in which religions define a common prospect: an accompaniment that looks at the physical, emotional and spiritual dimensions of each person. An interpretation of human existence and of reality that places value on religious experience enables a good to be seen and affirmed that goes beyond the mere measure of calculation. The acknowledgment of the constitutive openness to the transcendence of the person enables the affirmation that in human life, even when it is fragile and apparently defeated by illness, there is an intangible preciousness. Starting from the encounter with the Creator, it is possible to identify in finiteness an aspect of the human condition that, while inspiring rebellion and transgression in man, can open up to another reading: the limit can be rediscovered as a place of relation and communion. And this applies not only to the human being, but also to nature and the earth. The “I” finds its most complete expression in relation, that is, in “we”: two realities that cannot be separated from each other. We must patiently restore evidence to the dynamic of the mutual bond between the “I” and the “we”. Humanism is constituted of solidarity.

This is why the Pontifical Academy for Life is engaged on these frontiers. Reinventing a new fraternity is the anthropological and social challenge of our days. And it is precisely in this line that Pope Francis has given a specific mandate to the Pontifical Academy for Life, on the occasion of the twenty-fifth anniversary of its institution, which was celebrated on 11 February this year. Overcoming the prevaricating and predatory attitude that we so often practice, we have been assigned the task of caring for the other and for creation, without which the very life of the human family would be deprived of what renders it possible.

Thank you.

### **Intervention by Dr. Sultana Afdhal**

Hello. On behalf of the World Innovation Summit for Health, I want to thank you all for giving your valuable time to join us at this press conference today.

I want to thank Archbishop Paglia and his team at the Pontifical Academy for Life for being open to co-hosting a symposium on “Religion and Medical Ethics” with us, and Kamran and The BMJ for working with us to ensure

that the medical perspective is present during our discussions. Tomorrow's symposium has been developed to shine a light on ethical questions around palliative care and on the mental health of the elderly, and whether participants in the event are healthcare policy makers, representatives of faith groups, or are carrying out the vital role of providing day-to-day patient care, we want them to find value in our event.

As the CEO of the World Innovation Summit for Health – WISH – which is a part of the Doha-based non-profit Qatar Foundation for Education, Science and Community Development, I was absolutely delighted and honoured to announce earlier this year that we would be co-hosting this week's event with our very special friends from the Pontifical Academy for Life.

In 2018, WISH published a report on Islamic ethics and palliative care, which was discussed at length at our biennial global summit last November in Doha – an event that attracts more than 2,000 healthcare leaders. Early this year, we signed a declaration on palliative care with the Pontifical Academy for Life that in October was used as the basis for a positioning paper around palliative care that was endorsed by a large group of Abrahamic faith leaders and was subsequently presented to His Holiness the Pope by Archbishop Paglia.

Since WISH was launched, at the World Global Health Policy Summit in London in 2012, our mission has been to build a healthier world through global collaboration. It is therefore a natural progression for us to be here in Vatican City to actively promote dialogue between people of faith and medical experts around issues that have such a profound effect on individuals, their families, their communities, and healthcare workers.

WISH sees itself as providing a solid platform that enables the meeting-up of global experts and stakeholders to discuss key healthcare matters. Our parent organization, Qatar Foundation, now has almost 25 years of experience working in education, science and community development both at home in Qatar and around the world. While here in Vatican City we want to initiate conversations that have the genuine potential to benefit humanity as a whole, regardless of individual's beliefs.

The interfaith nature of this event, and the involvement of experts from both a faith and a medical background, will provide a priceless opportunity to gain a deeper understanding of the very real ethical dilemmas experienced by healthcare practitioners from different spiritual backgrounds across our world when dealing with these sensitive, and yes, difficult subjects for a great many of us.

There is no doubt in my mind that sharing knowledge from different religions and medical healthcare perspectives enriches and expands our thinking. I also believe we will all gain something from learning about how other faiths respond to these issues, and perhaps discover some fresh approaches to follow, both medically and spiritually.

In-depth interfaith and medical interdisciplinary dialogue about palliative care and the mental health of older members in our communities is essential in helping to establish a common ground. This will aid our task in finding more effective ways to bridge differences in ethical approaches based on faith, whether actual or perceived. Without wanting to pre-empt the discussions that we will have, I anticipate that we'll end up finding more commonalities than differences.

By seeking to provide more uniform approaches to dealing with ethical challenges, we can be more effective in our efforts to help those in need. We can also be united in our efforts to advance the idea that to treat people holistically and in a way that alleviates suffering requires a willingness to consider a person's spiritual needs, as well as their physical and mental needs.

We will be discussing some very emotive matters over the next two days, such as suicide among older members of society and end-of-life care for children. I realise these will be very difficult and upsetting areas for us to debate. However, it is both right and important that we do not shy away from these topics, and I believe our discussions can only benefit those who are affected and afflicted by such issues, as we take back our shared knowledge and understanding to our respective communities around the world once the symposium comes to a close.

### Intervention by Dr. Kamran Abbasi

Good morning. I'm delighted to be here to represent BMJ.

This conference is perfectly in line with our core values: transparent, open and trusted; patient-centred; evidence-based – and our vision for a healthier world.

We aim to bring a medical perspective to these discussions.

If we do believe in being patient-centred, which we all of us here do, then we must find common ground for a constructive conversation that recognises that people's beliefs play an important and central part in their decision making about their health.

For over two decades, the BMJ has championed evidence-based approaches to care, and it is important now, in the era of shared decision making in health, in the age of patient partnership, that we find ways to make sure that people from all faiths and backgrounds are able to draw on the evidence and science to live long and healthy lives.

Crucially, on the issues that we will be discussing over the next few days, end of life care and mental health in the elderly, religious beliefs and evidence must work in harmony to help patients and their families face these complex challenges.

BMJ encourages open/balanced debate that reflects medical, legal, ethical, and religious views. We help inform clinicians, based on the latest evidence, so they can make decisions in the best interests of their patients. And we support shared decision making – taking account of patient / family values and beliefs.

We'd like to thank the editors of the Journal of Medical Ethics (Professor John McMillan, Professor Julian Hughes, Professor Kenneth Boyd) for their paper, which is available for you to read today. We hope it will inform and prompt debate. The Islamic and Catholic case studies are designed to prompt discussion over the next two days and will form the basis for Professor Julian Hughes' presentation tomorrow. The paper raises some of the key issues in religion and medicine, from decision making to the role of advance directives.

We, the BMJ, intend to feature the discussions we will have here in a follow paper which we'll share in the new year.

Finally, we'd very much like to thank Sultana Afdhal and Archbishop Paglia for organising and hosting this important meeting.

At a moment of global discord, disharmony, and danger, it is symbolic that we are gathering here at the Vatican to show the power of people from all faiths and backgrounds in coming together to solve the world's problems.

Thank you.

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