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**A Call for Life and for Ministry: Towards an Effective Pastoral  
Care to Exiled Cuban Patients in the Context of Hospice Ministry**

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A CALL FOR LIFE AND FOR MINISTRY:  
TOWARDS AN EFFECTIVE PASTORAL CARE TO EXILED CUBAN PATIENTS  
IN THE CONTEXT OF HOSPICE MINISTRY

BY

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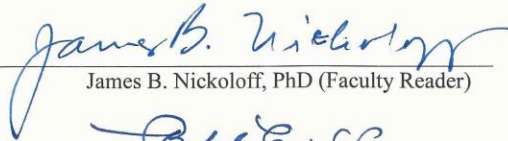
*A CALL FOR LIFE AND FOR MINISTRY:  
TOWARDS AN EFFECTIVE PASTORAL CARE TO EXILED CUBAN PATIENTS  
IN THE CONTEXT OF HOSPICE MINISTRY*

has been accepted in partial fulfillment of the requirements of and affirmed by the Director of the DMin Program for the degree of Doctor of Ministry in the Department of Theology and Philosophy.



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The signatures below verify that faculty and student-peer readers have exercised due diligence in review of and comment upon the thesis-project.



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*To my beloved mother **Blanquita***

*Who passed away while I was writing this thesis-project*

*To my beloved aunt **Titi Tera***

*Who was like a mother to me*

*To my father-in-law **Don Fernando***

*Who used to say to me ¡Qué suerte hemos tenido!*

*The truth is that I was the lucky one!*

*To have shared the love and affection of such a beautiful family*

*To all of you I dedicate this accomplishment*

*May you all rest in Peace*

*¡Hasta luego!*

*In the smile of my dear Lord I should rest assured*

*Until the day I'll be called to be awakened*

*To rejoice and to see you all*

*Once again!*

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## ABSTRACT

The thesis-project is about hospice ministry and the Cuban exile community. As a chaplain with Catholic Hospice in Miami, Florida, I became aware of the pain and suffering that exiled Cubans are experiencing while in hospice care.

My ministerial concern is: What kind of pastoral care do we need to provide to the exiled Cuban patients in the context of hospice ministry? My intuition is that we need to develop an all-inclusive approach to the realities of these patients who are dying in *el exilio*. I also posed a theological question: How is God present in the circumstances of dying in exile? Or how do the lives of those dying in exile reveal the face of God (or of Jesus)? My intuition is that God is in the midst of their suffering.

I used the See-Judge-Act methodology of Practical Theology, and Schreiter's opening of the culture to help obtain a pastoral answer to the Cuban exile community ministerial concern. *El Velorio* (The Viewing) by Francisco Oller, a Puerto Rican artist, was also used as a point of entry. A methodology I called Caribbean Aesthetics was used to help identify elements of popular religion in Caribbean traditions congruent with the Cuban culture. In addition a concept call the *field of dreams* was developed, to help identify the dichotomy of God's presence in the lives of the Cuban exiles. A questionnaire was provided to hospice staff to share their "hospice stories," or the staff personal experiences while serving in hospice care.

In the last chapter I provided a number of recommendations born out of the correlation from the following principles: Identity, Culture, *La Tierra*, Popular Religiosity, Theological Perspectives on Death, and Anthropological and Ethical Perspectives in regard to Death and the Dying. As a result, the hospice care and ministry should seek a pastoral care of accompaniment and reconciliation where the Cuban identity, culture, *la tierra*, and popular religiosity are honored, understood, and respected. The renewed praxis must be filled of hope, faith, and solidarity with the Cuban exile community.

## INTRODUCTION

The colors of our life's rainbow are full of experiences, motives, and reasons that allow us to carry on and to share our love with others. The same experiences that we have been permeated with since the beginning of our lives<sup>1</sup> will continue to shape and influence our nature until the day that we depart from this world.

As we look carefully to each stride and portion of our living we realize that life itself will finish very fast. The colors that we once experienced will never be the same again, and the ones we are exposed to now will very soon disappear. In our life term we not only realize that there is a sunrise but also a sunset.

Ministry is really a very charged word that implies listening to people's voices, listening to the outcry of people who have been destitute, broken and silenced by life and by others. To speak on their behalf so people will listen to the growing lament from their very souls is a very difficult task.

In this thesis I will analyze pastorally from a Hispanic theological perspective the realities that engulf people who are just about to die, their needs, and how these necessities are being dealt with or not. The point of departure is a group of people who are the patients at the Catholic Hospice, an institution belonging to the Archdiocese of Miami, Florida. The ministerial concern is: what kind of pastoral care do we need to provide to the exiled Cuban patients in the context of hospice ministry?

I worked as one of the chaplains and was responsible for providing pastoral care services to the patients and family members. My experience dealing with the sick and the

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<sup>1</sup> Jay E. Adams, *The Christian Counselor's Manual: Life Must Have Meaning* (Grand Rapids, Michigan: Zondervan House, 1973), 34.

dying also comes from working many years as a Baptist Senior Pastor in the congregations I served, and from being an On- Call Chaplain for the Baptist Health System (Baptist Hospital) in South Florida.

During the course of this thesis I will describe in detail some of the structures for the service that Catholic Hospices provides to the Miami-Dade and Broward communities. I will identify the realities in the context of hospice care where the family's patients and employees are influenced. I will do so from the perspective of a Catholic Hospice chaplain.

Furthermore, I will identify the existential problems and meanings based on a faith perspective as well as the questions, along with some of the answers proposed in the project. I will also look at the Bible, ecclesial historical documents, and some more contemporary authors, particularly in the areas of the theology of accompaniment<sup>2</sup> to help find some structures for a new praxis.

Finally, I will review the ministerial question and respond to each one of the ministerial problems that were identified in the beginning of this thesis project. In the last chapter I will propose a new praxis addressing these issues. I will use the See-Judge-Act method of practical theology.

In Chapter One I offer insights of the methodology and outline process of the thesis-project. The practical theology method by which this work will be developed is also explained in this section. I introduce in this chapter, what I called a "Methodology of Caribbean Aesthetics" from a Hispanic perspective, to help us look into the very fabric of the Caribbean culture where the foundational context is taking place for the purpose of

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<sup>2</sup> Roberto Goizueta , *Caminemos con Jesús: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, NY: Orbis Books, 2003).

this project. The research method is applied to the painting of *El Velorio*, the Hospice Stories” and to the Cuban exile patients realities. In addition, I articulate my personal story, this, by taking into account my life experiences in a world full of injustices in a foreign land. I also introduce the theological concept for what I called *Field of Dreams*, where I establish the dichotomy of God’s intervention in our lives.

In Chapter Two I provide a historical account of the development of hospice care. I explain in detail the different members of the hospice interdisciplinary team along with their particular responsibilities. A fundamental attention is given to the role of the hospice chaplain since this thesis-project departs from this perspective, and is seeking to improve the pastoral care ministry in the context of hospice care.

In Chapter Three I further develop the methodology of aesthetics. I compare and use the painting of *El Velorio* from a recognized Puerto Rican artist named Francisco Oller, as a point of entry, and the analysis of the culture is engaged by the use of Semiotics as represented by Robert S. Schreier. The elements of popular religion found in Oller’s painting are analyzed as well in this part of the thesis-project. The “hospice stories” are also discussed and used in correlation with the painting *El Velorio*, while integrating the realities of the Cuban exile community.

In Chapter Four I explore the convergence and correlation found in the principles that developed out of the painting of *El Velorio*, the “hospice stories” and the realities found in the lives of Cuban exile patients while in hospice care. Six principles that materialized as a result are used to provide insight and to create an effective pastoral care for these patients in the context of hospice ministry. The principles are: Identity, Culture, *La Tierra*, and Popular Religiosity, Theological Perspectives on Death, and

Anthropological and Ethical Perspectives in regard to Death and the Dying. As a result of the findings from all of these principles, a number of recommendations are envisioned to create the foundations for an effective pastoral care to the Cuban exile patients. They seek to enhance and address a pastoral care service that will take in consideration the Cuban exile patients reality as well as other patients.

In Chapter Five I propose a new praxis for an effective pastoral care to Cuban exile patients in the context of hospice ministry. The renewed praxis for a ministry of hope and of life identifies five pastoral strategies that will improve the pastoral care of those dying in *el exilio*.

# CHAPTER I

## THE THESIS-PROJECT

I am a Baptist pastor and was hired as a chaplain in a Catholic Hospice organization, where interfaith chaplaincy services are provided to patients. The fact that I was raised Catholic helps me understand and be empathic with the needs of Catholic patients. I was born in Puerto Rico but I have lived in Miami for more than thirty years, so I have been very much in contact with the exiled Cuban community. I have identified myself with their pain and suffering caused by their exiled condition.<sup>3</sup>

Departing from the fact that we need to mediate and reconcile the pain and the suffering that many people experience in our community, I decided to provide and help my Cuban brothers and sisters who are afflicted with the pain of dying in a foreign land in *el exilio*<sup>4</sup>. They have become my family and most definitely have a ministerial concern which I feel that I must help them by sounding the alarm so we can come to the rescue of this very special and loving community!

This thesis-project is about hospice ministry, and will not only be based on my experience as a chaplain in a Catholic Hospice organization, but also ministering as a

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<sup>3</sup> Roberto Goizueta recognizes that exile is being “forced into the solitude and loneliness of an alien country.” *Caminemos con Jesús: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, NY: Orbis Books, 2003), 1.

<sup>4</sup> For this thesis-project I will be using the *exilio* concept from a literal point of view as explained by Fernando Segovia: “the term naturally applies to first-generation immigrants, those who remember the past, the country of birth, and live in the present, the country of adoption-a reference to those whose exile transpires in somebody else’s land and country”. “In the World but Not of It: Exile as a Locus for a Theology of the Diaspora,” in *Hispanic/Latino Theology: Challenge and Promise*, ed. Ada María Isasi-Díaz and Fernando Segovia (Minneapolis: Fortress Press, 1996), 202-3. According to him, this “flesh-and-blood exile” is shaped by age and by whether the exile is temporary or permanent. In the case of permanent exile, the exile lives in what he calls “two worlds and no world at the same time”.

pastor to Cuban patients who are living in exile in the United States. Hospice ministry is a fertile ground for reconciliation and preparation for our new life in Christ.

When patients are at the end of life they need the healing support that will help them through the process. When I am dealing with patients who are dying away from their homeland, appropriate care and accompaniment are needed. This is due to the longing and the suffering caused by dying away from their homeland.

My ministerial concern is: What kind of pastoral care do we need to provide to the exiled Cuban patients in the context of hospice ministry? My intuition is that we need to develop an all-inclusive approach to the realities of these patients who are dying in *exilio*. This all-inclusive approach will seek to identify and to mend the specific needs of this community, with the loving care and support of the hospice staff. This thesis-project will look into the situation of exiled Cuban patients in order to see whether I am correct in this intuition.

As a chaplain in Catholic Hospice, I was constantly experiencing the human realities of death and the despair of the patients and family members. The same realities allowed me to create an environment that is conducive to overcome past experiences since they will never see their homeland and their families ever again.

The embracing of the Cuban families, who live away from their homeland and experience the *exilio*, is very important. On many occasions the chaplain is the only person in a position to facilitate this type of reconciliation. This reconciliation attests to the fact that the patients will never see again either their families here in United States, or the ones in their homeland.

The need to be able to die in peace is very much perceived in the patients who are just about to die. Many times these patients voice their concern about dying away from home, in a foreign land unfamiliar to them. Even after living for many years in the South Florida community, they have explained to me their desire to return home. This situation is very devastating to them. Many of these patients have asked me about the possibility of having their remains buried in their homeland as the final resting place.

Like other patients at the end of life they are seeking peace and harmony with the people surrounding them. They are grateful to their family members, but exiled patients also seek peace in their desire to be resting in the land in which they were born.

I perceive the pain and the suffering of not being able to die in peace *en la tierra que me vió nacer* (in the land that saw my birth). This is especially true for the Cuban exiles living in South Florida. My job as a chaplain was to accompany them in such a difficult time, to provide the necessary support and to help meet their spiritual needs. Also to ask what kind of pastoral care is specific to this community.

I will focus on hospice ministry and on the Cuban exiled community as my thesis-project because I see the need for a greater awareness of their particular needs. I have experienced throughout my life discrimination, injustices, harassment and racism, just as many Cuban exiles have experienced. I have seen the pain and suffering they have gone through. I do not want to see the same treatment to them at the time of death. I hope to offer insights and even suggestions for improving the performance of hospice care to the exiled community.



Human beings in distress have the prevailing necessity to understand, to search, and to even try to find answers to numerous existential questions. The fundamental option available to us of acknowledging that the Lord has been revealed, giving us hope and the freewill to accept or reject his commandments is extremely important.

The theological question that I would like to pose is: how is God present in the situation of dying in exile? Or how do the lives of those dying in exile reveal the face of God (or of Jesus)? My intuition is that God is in the midst of the sick and the dying and that a pastoral ministry of accompaniment will complement the church mission in this type of ministry.

Departing from this question we cannot avoid meditating on our own existence and the existence of the people whom we love and serve. As pastoralists we need to provide the best possible solutions to the problems found in this type of ministry. We must provide an answer that will address the people who are just about to depart this world with its connotations and consequences.

The pain and the suffering will leave an indelible mark in the patients as well as the family members. On many occasions it will also impact the staff, and the gamut of people who directly or indirectly are part of this endeavor. The answer (s) must satisfy the hunger of the human intellect and quench the spirit of the people who are just about to depart this world. Many are victims of the pain and the suffering, physically and spiritually.

A number of people, who are experiencing and feeling the nearness to death, are not ready to confront this human phenomenon. On the other hand, many of the family

members are not yet ready to surrender to this fact of life. In the end, the art of dying continues to be an enigma, and will continue to trouble us for the rest of our lives.

How can we reconcile our human hearts with the traumatic experience of separation? A pastoral ministry of accompaniment as part of the mission of the chaplaincy work, will allow us to better serve the community of believers that are being afflicted by the loss of love ones.

The ministerial problems that I will consider as well as the solutions that might emerge will give me a better understanding of the pain and the suffering found in the Cuban exile community. Likewise, it will also help me to better adjust to these contemporary issues in ministry. Moreover, I will benefit from this investigation because I will be able to confirm or not confirm some of my claims and intuitions about the pastoral needs of the Cuban exiles in the context of hospice ministry. The thesis project will also be able to help me in my call to provide excellent care to the people I serve.

Human dignity is grounded in people's celebration of life and is also God's presence in the world through the suffering Christ. In the first century Christ, after he was exiled to Egypt, came back to the Palestine community and cared for the poor and the oppressed. Christ's praxis was and still is to seek and to help those who are less fortunate and afflicted.

We are experiencing today the suffering Christ's presence in the sick and the dying in the exiled community, as we attempt to seek and mend their needs we discover that Christ is in the midst of Cuban exiled community. I see God's presence in this community by the way they seek to mediate and alleviate their sorrows with faith and

perseverance. They seek and look at the suffering Christ as if God understands their pain by way of the Cross.

The most important theological issue is who is God to the exiled community and where is God in the context of hospice ministry for the exiled Cuban patients. How is God an intrinsic part of providing the pastoral care that will satisfy and speak to the real-life issues of the patients who are dying far from their homeland?

Many of these realities, which are perhaps common to other immigrants, are also addressed in the Bible. The Gospel of Matthew offers the blueprint for pastoral care:

#### The Final Judgment

<sup>31</sup> When the Son of Man comes in his glory, and all the angels with him, then he will sit on his glorious throne. <sup>32</sup> Before him will be gathered all the nations, and he will separate people one from another as a shepherd separates the sheep from the goats. And he will place the sheep on his right, but the goats on the left. <sup>34</sup> Then the King will say to those on his right, 'Come, you who are blessed by my Father, inherit the kingdom prepared for you from the foundation of the world. <sup>35</sup> For I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me, <sup>36</sup> I was naked and you clothed me, I was sick and you visited me, I was in prison and you came to me.' <sup>37</sup> Then the righteous will answer him, saying, 'Lord, when did we see you hungry and feed you, or thirsty and give you drink? <sup>38</sup> And when did we see you a stranger and welcome you, or naked and clothe you? <sup>39</sup> And when did we see you sick or in prison and visit you?' <sup>40</sup> And the King will answer them, 'Truly, I say to you, as you did it to one of the least of these my brothers, you did it to me...' <sup>5</sup>

Because of the painful situation of the exiled patients I will also consider this passage by making an analogy to the exiled community. When God looks at the exiles, he will also attend to their needs by using us to provide the necessary care for them.

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<sup>5</sup> Matthew 25:31-46 (New Revised Standard Version).

## Methodology and Outline of the Process

The primary theological perspective that will ground my thesis will be U.S. Hispanic/Latino (a) Theology due to the fact that the hospice ministry in which I am involved is located in the very populous Hispanic community. I will also use the Theology of Pastoral Care to address the issue of ministry within the same context. This will be a pastoral theological project that will research the theological, spiritual, and psychological aspects of the exiled Cuban people who are dying.

A theology of aesthetics will also be useful to comprehend the “mystery” within the world of hospice ministry.<sup>6</sup> I will explore the role of aesthetics<sup>7</sup> and Hispanic popular religiosity in relation to hospice ministry, since in the Cuban exile community aesthetics plays a vital role in identifying how exiles live out their cultural roots in a foreign land. The methodology will identify the issues at hand by utilizing narratives given and experienced by the people who have been subject to the issues of the death and the dying in our community. The use of the methodology of aesthetics in a narrative form will allow us to reach into the very soul of what the Cuban patients endure during the pain and the suffering of dying away from their homeland. According to Alejandro R. García-Rivera the aesthetics or the theology of art calls for a new way of doing theology:

A theological method proper to a theology of art tends toward synthesis, putting things together, rather than analysis, taking things apart. A theology of art ought to understand the whole rather than the parts. Moreover, it ought to bring insight

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<sup>6</sup> As Alejandro García-Rivera explains, a Theology of Art “must concentrate on a theology of the human person for at the heart of the mystery of Beauty is the human capacity to experience it.” *A Wounded Innocence: Sketches for a Theology of Art* (Minnesota: Liturgical Press, 2003), x.

<sup>7</sup> Alejandro García-Rivero defines aesthetics “as the science that answers the question of *what moves the human heart?*” . *The Community of the Beautiful: A Theological Aesthetics* (Minnesota: Liturgical Press, 1999), 9.

into the human condition which means wrestling with the problem of suffering. Art, after all, does not take place in some isolated place away from the ordinary cares of the world but in the midst of the garden of good and evil.<sup>8</sup>

In this thesis-project the methodology of aesthetics proposed by Latino/a theologians will be applied to the painting *El Velorio* or the “The Viewing” (Please see attachment #1). This work of art is from a well-known Puerto Rican artist named Francisco Oller. The painting is a very large painted canvas that portrays a scene from the early part of the 19<sup>th</sup> century of a funeral celebration called *el Baquiné*. By using this painting I will look into some of the known historical facts of the time, with its corresponding Hispanic popular religious beliefs, in addition to the realities of the exiled community. *El Velorio* will help us explore the deep sense of aesthetics in life and also in situations of death.

As we look again at the different ways we are going to be describing the hospice ministry in light of the aesthetics portion of this paper, we will ask a question: What do I really mean by aesthetics? I truly believe that aesthetics is an intricate part of who we are as humans. When looking at the Bible, we discover the use of different types of metaphorical languages and symbols to describe the universality of the word of God and its cosmology that is being revealed to the people. A parable, for example, can be defined at its simplest as: "a metaphor or simile drawn from nature or common life, arresting the hearer by its vividness or strangeness, and leaving the mind in sufficient doubt about its precise application to tease it into active thought".<sup>9</sup>

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<sup>8</sup> García-Rivero. *The Community of the Beautiful: A Theological Aesthetics*, xi.

<sup>9</sup> C. H. Dodd, *The Parables of the Kingdom* (New York: Charles Scribner's Sons, 1961), 5.

However, parables can be categorized in different ways according to the particular form of understanding of what the parable wants to reveal. The use of aesthetics as part of the methodology of See-Judge-Act in this thesis project will help us understand better the language of real-life issues that afflict human beings.

Aesthetics is the reflection and acknowledgement of God's divine intervention and it could yet be understood as the art of accompaniment,<sup>10</sup> the interaction between us and others, and even with Creation. Nonetheless, I believe that it is very important to recognize the context in which the project will develop, because the Hispanic Caribbean aesthetics is in many ways different from other Hispanic contexts.

Caribbean aesthetics is contemplation but with *picardía* (cunning). It is contemplation but without being in a hurry. It is a celebration of life, the blessing from the elders: "*Dios te bendiga mijo (a)*" (God bless you my son-daughter). Caribbean aesthetics is food, community, tradition, and is also "Land."<sup>11</sup> It is living and enjoying life to the fullest. Caribbean aesthetics is maximizing *la belleza de la vida* (the beauty of life).

In contrast, for the exiled Cuban, death is depletion and separation. It is the ultimate letting go. It is the most intense solitude whose intensity is increased by the fact that their thirst for community with those they loved will not be quenched. Death is separation and above all pain for which there is no medicine. It is also the tragedy of loss: *la patria* (native country), *la libertad* (freedom), *la familia* (the family), and *la Tierra* (the land).

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<sup>10</sup> Goizueta, *Caminemos con Jesús*, 73.

<sup>11</sup> Walter Brueggemann, *The Land, Place as Gift, Promise, and Challenge in Biblical Faith* (Minneapolis: Fortress Press, 2002).

It is to be exiled and to leave behind all of who you are, and to become something else that you are not. It is the sadness when someone loses hope in life, even though there is a beginning of another life in Christ. These realities of the sick and the dying exiled Caribbean Hispanic patients are dealt with by the Catholic Hospice team of professionals. I will detail some of the aspects carried out by them further down in this project.

*Method of Practical Theology (See-Judge-Act)*

The origins of the See-Judge-Act Method go back to the Review of Life Method used by the Young Christian Workers (YCW) in the 1930's.<sup>12</sup> After World War I there was a large demand for factory workers. In 1925, Rev. Joseph Cardijn founded in Brussels the Young Christian Workers organization that later expanded to France and many other countries around the world. The organization has been widely known as JOC, the French acronym for *Jeunesse ouvrière chrétienne*. In 1928 Pope Pius XI founded Catholic Action, "a lay organization that joined the other renewal movements in the central European church"<sup>13</sup>. Catholic Action also assumed the Review of Life Method as an inductive method that wanted the transformation of Christians in their own environments.<sup>14</sup> The See-Judge-Act Method was part of the Review of Life Method of

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<sup>12</sup> Casiano Floristán, *Teología Práctica: Teología y Praxis de la Acción Pastoral* (Salamanca, Spain: Ediciones Sígueme, 2002), 379.

<sup>13</sup> *Ibid.*, 380.

<sup>14</sup> *Ibid.*

Catholic Action<sup>15</sup> and has been attributed to Cardjin, who also used the method in the YCW organization.<sup>16</sup>

The first reference to the See-Judge-Act Method in a papal document is found in 1961 in Pope John XXIII's *Mater et Magistra*:

There are three stages which should normally be followed in the reduction of social principles into practice. First, one reviews the concrete situation; secondly, one forms a judgment on it in the light of these same principles; thirdly, one decides what in the circumstances can and should be done to implement these principles. These are the three stages that are usually expressed in the three terms: look, judge, act.

It is important for our young people to grasp this method and to practice it. Knowledge acquired in this way does not remain merely abstract, but is seen as something that must be translated into action.<sup>17</sup>

The influence of the See-Judge-Act Method can also be found in Vatican II documents. Joseph Cardjin participated in the Council from 1962 to 1965 as a consultant to the Commission on the Lay Apostolate. In 1965 he was made a bishop and cardinal by Pope Paul VI, so he was able to participate as a Council Father in the fourth Session of the Council.

*Gaudium et Spes*, the Pastoral Constitution on the Church in the Modern World followed the See-Judge-Act methodology.<sup>18</sup> It began by looking at the world situation: "The People of God believes that it is led by the Lord's Spirit, Who fills the earth. Motivated by this faith, it labors to decipher authentic signs of God's presence and

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<sup>15</sup> Floristán, *Teología Práctica*, 382.

<sup>16</sup> Richard P. McBrien, *The Church: The Evolution of Catholicism* (New York: HarperCollins Publishers, 2008), 348.

<sup>17</sup> John XXIII, *Mater et Magistra*, 236-237.

<sup>18</sup> Floristán, *Teología Práctica*, 388.



purpose in the happenings, needs and desires in which this People has a part along with other men and women of our age.”<sup>19</sup>

The Pastoral Constitution continues to assess (judge) the reality of the signs of God’s presence: “For faith throws a new light on everything, manifests God's design for man's total vocation, and thus directs the mind to solutions which are fully human. This council, first of all, wishes to assess in this light those values which are most highly prized today and to relate them to their divine source.”<sup>20</sup>

Furthermore, *Gaudium et Spes*, states the importance of scrutinizing the signs of the times and their interpretation in order to continue Jesus’ mission:

To carry out such a task, the Church has always had the duty of scrutinizing the signs of the times and of interpreting them in the light of the Gospel. Thus, in language intelligible to each generation, she can respond to the perennial questions which men and women ask about this present life and the life to come, and about the relationship of the one to the other. We must therefore recognize and understand the world in which we live, its explanations, its longings, and its often dramatic characteristics.<sup>21</sup>

*Apostolicam Actuositatem*, The Decree on the Apostolate of the Laity, talks about the importance of the See-Judge-Act Method in the formation of the laity:

Since formation for the apostolate cannot consist in merely theoretical instruction, from the beginning of their formation the laity should gradually and prudently learn how to view, judge and do all things in the light of faith as well as to develop and improve themselves along with others through doing, thereby entering into active service to the Church. This formation, always in need of improvement because of the increasing maturity of the human person and the proliferation of problems, requires an ever-deeper knowledge and planned activity. In the fulfillment of all the demands of formation, the unity and integrity of the

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<sup>19</sup> *Gaudium et Spes*, 11.

<sup>20</sup> *Ibid.*

<sup>21</sup> *Gaudium et Spes*, 4.

human person must be kept in mind at all times so that his or her harmony and balance may be safeguarded and enhanced.<sup>22</sup>

The Latin American Episcopal Conferences adopted the See-Judge-Act Method in the Conferences of Medellin (1968), Puebla (1979), and more recently in Aparecida (2007):<sup>23</sup>

In continuity with the previous general conferences of Latin American Bishops, this document utilizes the see-judge-act method. This method entails viewing God with the eyes of faith through his revealed word and life-giving contact with the sacraments, so that in everyday life we may see the reality around us in the light of his providence, judge it according to Jesus Christ, Way, Truth and Life, and act from the Church, the Mystical Body of Christ and universal Sacrament of salvation, in spreading the kingdom of God, which is sown on this earth and fully bears fruit in Heaven.<sup>24</sup>

The Hispanic Ministry in the United States conference held in 1985 (known as the *III Encuentro Nacional Hispano de Pastoral*) produced the National Pastoral Plan for Hispanic Ministry. The See-Judge-Act methodology was used in the process of creating the National Pastoral Plan. Evaluation and Celebration were also added to the process:

Pastoral Planning is the effective organization of the total process of the life of the Church in fulfilling her mission of being a leaven of the Kingdom of God in this world. Pastoral planning includes:

- analysis of the reality wherein the Church must carry out her mission;
- reflection of this reality in light of the Gospel and the teachings of the Church;
- commitment to action resulting from this reflection;
- pastoral theological reflection on this process;
- development of a pastoral plan;
- implementation;
- ongoing evaluation of what is being done;

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<sup>22</sup> *Apostolicam Actuositatem*, 29.

<sup>23</sup> The Conference of Santo Domingo (1992) turned away from the See-Judge-Act Methodology to go back to a deductive approach of theology that used theological affirmations as a starting point.

<sup>24</sup> *Aparecida*, 19.

- and the celebration of the accomplishments of the life experience, always within the context of prayer and its relationships to life.<sup>25</sup>

The See-Judge-Act Method has been instrumental in the Latin American Church and in Hispanic Ministry in the United States where this thesis-project is grounded. This methodology is still very useful in the Hispanic Ministry: “the methodological cornerstone of the *Encuentro* Processes saw praxis as both its initial and final reflection; it established a practical theology done from the underside of history and human experience. [...] Popularly referred to as *ver-juzgar-actuar-evaluar* (see-judge-act-evaluate), this process continues to be the pastoral planning method of choice of many U.S. Hispanic leaders in the Church.”<sup>26</sup>

In the “See” portion of the thesis-project I will explain the role of the Catholic Hospice, its employees, and its patients from a chaplain’s perspective. I will use Schreiter’s notion of “opening of the culture,”<sup>27</sup> since the analysis of the local culture will help us understand the underlying situation and issues at stake, particularly in the Cuban exiled community.

Furthermore, I will elucidate the painting of Francisco Oller *El Velorio* as a paradigm that will help the reader understand the world of the sick and the dying from a Caribbean Hispanic perspective. The painting will introduce the methodology of

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<sup>25</sup> National Conference of Catholic Bishops, *National Pastoral Plan for Hispanic Ministry*, USCC, Washington D.C. 1987, n6. In United States Conference of Catholic Bishops, *Hispanic Ministry: Three Major Documents*, USCCB, Washington D.C. 1995.

<sup>26</sup> Jorge Presmanes and Alicia Marill, “Hispanic Ministry and Theology,” in *Hispanic Ministry in the 21<sup>st</sup> Century: Present and Future*, ed. by Hosffman Ospino (Miami, FL: Convivium Press, 2010), 90.

<sup>27</sup> Robert J. Schreiter, *Constructing Local Theologies: The Opening of Culture* (Maryknoll, New York: Orbis Books, 1997), 28.

aesthetics<sup>28</sup> as a tool to analyze the hospice realities of the sick and infirm in an exiled context.

In the “Judge” portion of the thesis I will refer back to the painting as a point of entry to explain and reflect about the different generative themes that came out as a result of the “See” analysis. In this section I will describe in detail some of the conversations that will develop between the normative (Christian) tradition, the dominant (Anglo) culture, and the realities of the sick and the dying in the Hispanic Caribbean exile community.

In the “Act” portion of the thesis-project I will present a renewed theology of hospice ministry for Cuban exiles but which may also apply to people of other cultures and Caribbean nations, by proposing some answers to these ministry problems. The new praxis will include specific recommendations that will satisfy the situation at hand and provide responses and answers to the human existential issues. The new guiding principles behind the aesthetic methodology will allow us to engage, to mediate, and to integrate new forms of theology to answer new realities.

### *Schreiter’s Opening of the Culture*

The theological process in contextual theologies should begin ideally with the opening of the culture which is a “long and careful listening to a culture to discover its principal values, needs, interests, directions, and symbols.”<sup>29</sup>

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<sup>28</sup> Alejandro García-Rivera, *The Community of the Beautiful*, 9.

<sup>29</sup> Schreiter, *Constructing Local Theologies*, 28.

In this thesis-project I will be analyzing culture as a point of entry to better understand the realities and the pastoral situations at hand, by taking semiotics into account. One of the reasons why Schreier considers that a semiotic study of culture is appropriate for the construction of local theologies is because:

...its interdisciplinary approach and its concern for all dimensions of culture, both verbal and nonverbal, both empirical and nonempirical, represent the kind of holism that is important when it comes to listening to a culture. It allows study of the so-called high cultural elements (art, poetry, music, religious belief) and the so-called popular elements (customs, superstitions), and other elements of the cultural systems (social organization, economic and political organization) in a way that allows them to be seen as interlocking and interdependent.<sup>30</sup>

He also points out that “the observation of the various sign systems in a culture, and their configuration, allows for a closer look at how the identity of the culture and the identity of members of the culture are constituted.”<sup>31</sup>

Semiotics will play a vital role in the opening of the culture by looking at the very heart of the cultural elements that can be found in aesthetics through Oller’s painting *El Velorio*.

### *Methodology of Aesthetics*

At first glance the methodology of aesthetics reveals to us the most superficial appearances and values. Subjectivity and even objectivity are part of the basic tools of engagement for the experiential understanding of the world that we live in. They will come into play during the first stage of the method. What do you see or hear (understand,

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<sup>30</sup> Ibid., 52.

<sup>31</sup> Ibid.

perceive) of what is revealed to us? We cannot underestimate the fact that many of what we call “realities” have been somehow “romanticized” or “masked” by our own human limitations and prejudices.

At second glance we discover the underlying values behind the signs and the symbols of what is being revealed to us. What do these signs and symbols represent? How did these signs and symbols come about? What are some of the precursors to the symbols or the underlying facts?

Beneath the signs and the symbols we encounter real situations, and aesthetics will help us reveal and identify the very nature of these symbols. For example: I remember a Cuban exile patient who occasionally appeared to be depressed at first glance. However, after talking with this patient, I discovered that this was not the case; all she wanted was a rosary. I provided the patient with the rosary and she immediately became very friendly and outspoken. She died few days later still holding on to what the rosary represented to her.

The rosary became a symbol that mediated grace in the life of a dying patient. The rosary was much more than a rosary because she identified a symbol that was beautiful to her. The rosary was beautiful because it reminded her of her childhood and the foundational beliefs that came along with this memory. She was reminded of the memory of her family in Cuba, and the love and compassion of the Cuban people through the beauty of the symbol.

In this case the methodology of aesthetics allowed me to have a better understanding of what really was taking place, and not what appeared to be taking place. If I would have judged at first glance and assumed at first that the patient was just

depressed and accepted this to be the reality, I most definitely would have been in error. Because the truth was revealed during the “See” portion of the situation at hand, I discovered the patient’s true need and concern. The patient was longing for a symbol that brought into her soul a vivid memory of the past, enlightening not only her present but also her future.

Aesthetics will help us unveil the truth behind the historical accounts of realities that perhaps have been impregnated with the biases of the dominant culture, thus seeing past situations more clearly, and utilizing them as a blueprint to change for the better present realities.

#### *Research Method: Questionnaires*

The questionnaires were given to some of the employees and volunteers from Catholic Hospice. Participation in the questionnaire was totally voluntarily. The names of the patients and the employees were kept confidential by the use of pseudonyms. The staff names remained anonymous if they wished. I asked each one of the employees and volunteers not to disclose the names of the people who were their patients on several presentations that I made at Catholic Hospice. These were the questions asked on the questionnaire:

- a. *Please tell us about your “hospice story,”<sup>32</sup> as you recall it, without using the real names of the people. The “hospice story” of each individual is unique and we*

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<sup>32</sup> The “hospice stories” are narratives given by the employees and caregivers of the Catholic Hospice during the weekly reviews of patients. These narratives are given by the people who voluntarily share their interactions and experiences with the patients and family members during the course of the hospice care. People who are referred to the hospice program are afflicted by terminal diseases with no

*will not be judgmental about it. Please feel free to describe it in as much detail as possible. Every detail is extremely important; we want to know what you felt, and what transpired. Maybe you would like to give a little background of yourself so your story can make sense to us. Remember, this story will be read by people who may not have any idea of what hospice is or how it works. We want to know how you feel about the struggles that patients, families, and staff members endure.*

*b. What was your experience with some of the Cuban exiled patients?*

*How about their longing for their homeland?*

*Do you observe any difference between the exiled Cuban patients, and patients from other communities? If yes, please explain.*

*What can we do to better serve the exiled Cuban patients by taking into account their particular needs?*

*c. How do you think we can improve our service in hospice ministry? How about in Catholic Hospice?*

*d. How do you feel about serving in this type of program?*

The Catholic Hospice employees were asked to answer these questions on a separate piece of paper, and were told to feel free to explain in detail their experiences and recommendations. I will share further in the thesis project some of the responses that I received from the Catholic Hospice staff.

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expectation of surviving these illnesses. In the midst of the pain and the suffering endured by the patients, and family members, there are experiences and stories that are worth sharing with others.



## *Hispanic Theology Perspective*

Hispanic Theology is rooted in lived experiences, in our stories within our particular contexts. Jeanette Rodriguez points out that “while theology is not autobiography, it is autobiographical. It entails a story, a story of one’s life, one’s faith journey in the world, a world that it is constituted within a political socioeconomic context. So, to begin to speak, to begin to tell our story - the story of our people – is to bring that which has been in the margin, that which has been dismissed, into the center, offering a different perspective.”<sup>33</sup>

For David Maldonado, Jr., founding Director of The Center for The Study of Latino/a Christianity and Religions, “doing theology from a Hispanic perspective means doing theology from the perspective of the Hispanic context and experience”.<sup>34</sup> This implies the importance of a Hispanic theological anthropology that “calls for the examination of historical, social, and community realities, as well as economic, ethnic, racial, gender realities within which faith is known and religious life experienced.”<sup>35</sup>

Virgilio Elizondo and Justo González are representatives of Hispanic Theologies from Catholic and Protestant perspectives. David Maldonado points out that they both introduce their theological reflections with aspects of their life:

Elizondo chose to begin his theological reflection from the deepest roots in his family, church, and community. His theology, as articulated in *Galilean Journey*:

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<sup>33</sup> Jeanette Rodriguez, “U.S. Hispanic/Latino Theology: Context and Challenge,” *Journal of Hispanic Latino Theology* 5:3 (Feb 1998): 12.

<sup>34</sup> David Maldonado Jr., “Doing Theology and the Anthropological Questions,” in *Teología en Conjunto: A Collaborative Hispanic Protestant Theology*, ed. by José David Rodríguez and Loida I. Martell-Otero (Louisville, Kentucky: Westminster John Knox Press, 1997), 100.

<sup>35</sup> *Ibid.*

*the Mexican-American Promise*, is strongly autobiographical, with deep roots in San Antonio and his Mexican American context. He makes his point of reference clear, as that of a Mexican American who is a product of Mexican immigrant parents, a San Antonio barrio, the Roman Catholic Church, and the Southwest. His theology is the outcome of a lifelong experience of working with and listening to Mexican Americans and sharing that experience himself.<sup>36</sup>

González has emerged as the most articulate voice among Hispanic Protestants. His pioneer work, *Mañana: Christian Theology from a Hispanic Perspective*, is autobiographical, especially in its opening sections. He begins the task of articulating a Hispanic theology by telling of his formative experiences in his native Cuba. González describes being a young Protestant man in a Catholic culture and a Hispanic in Anglo Protestant institutions. His point of reference is a broader Hispanic context encompassing Latin American and U.S. realities with a special attention to Hispanic Protestants in particular.<sup>37</sup>

If we look into the work of many other Hispanic theologians, we would also find that their personal stories are points of reference for their theologies. Some examples are: Ada María Isasi-Díaz' stories of her garden, struggle for justice, exile, and *la lucha*<sup>38</sup>; Alejandro García Rivero's account of his mother's request in the midst of her sickness; and Roberto Goizueta as a Cuban exiled living in the United States.<sup>39</sup>

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<sup>36</sup> Ibid., 102. In reference to Virgilio Elizondo, *Galilean Journey: The Mexican-American Promise* (Maryknoll, N.Y.: Orbis Books, 1983).

<sup>37</sup> Ibid., 103. In reference to Justo L. Gonzalez, *Mañana: Christian Theology from a Hispanic Perspective* (Nashville: Abingdon Press, 1990).

<sup>38</sup> See Ada María Isasi-Díaz, *Mujerista Theology* (Maryknoll, N.Y.; Orbis books, 1996), 13-56.; and *La Lucha Continues: Mujerista Theology* (Maryknoll, N.Y.; Orbis books, 2004), 11-23.

<sup>39</sup> See Alejandro García Rivera, "Creator of the Visible and Invisible: Liberation Theology, Postmodernism and the Spiritual," *Journal of Hispanic Latino Theology* 3:4 (May 1996): 35-56; and, Chapter One of Goizueta, *Caminemos con Jesús*,

## My Story

I will share some of my life experiences because they are relevant to this project for a variety of reasons. Since all theology is contextual, is extremely important to share my narratives because of the similarities between the Cuban and the Puerto Rican culture in order to better understand the pain and the suffering of the Cuban exiled community.

By sharing the common roots of our ancestors and the Caribbean culture we can help others to truly understand *lo cotidiano*<sup>40</sup> in our lives. To revisit my life experiences will also open and develop the themes that are congruent with the Cuban experience here in the U.S., along with the challenges.

Telling our stories validates who we are, where we come from, and where are we going. The project will be developed in a narrative form so first I would like to share at glance my life and ministerial journey because ministry is part of who I am and where I come from.<sup>41</sup> Ministry has been my life for more than thirty years.

As I begin sharing my life and ministerial journey from the early years to the present, the story will give birth to the developmental journey of many ministerial issues relevant to this thesis project. As we grow in understanding of what God's purpose is for our lives, we experience the wonderful news that the Lord not only wants to work within us, but also wants us to work for Him in very special ways. My early days of ministry were similar to a child who is beginning to experience and to develop the motor skills. In the initial stages of learning how to walk, something they have never experienced before,

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<sup>40</sup> Isasi-Díaz, *Mujerista Theology*, 66-73.

<sup>41</sup> B. F. Skinner, *Beyond Freedom and Dignity* (New York, New York: Bantam Books, 1980), 175. According to this world-renowned psychologist, "the evidence for a crude environmentalism is clear enough. People are extraordinarily different in different places, and possibly just because of the places."

in every step, a transformation is taking place. Literally, every step becomes more pronounced as the child learns how to maintain his or her balance.

Occasionally, the child stumbles and yet learns how to find a more direct path. Gaining greater perspective, finally the child learns to walk with his own two feet. I was like this child: somehow I knew the Lord wanted me to follow his footsteps; I just didn't know how yet but I had to learn.

Looking back, I learned that the Lord had a plan for me from the very beginning, even while I was just a small, helpless, unborn child in my mother's womb. As I lay in my mother's womb, she took great care of what was soon to be her second of seven children.

My mother, a devout Catholic, English teacher, and Social Worker, lived in downtown *Calle Nueva* (New Street), in the very small town of Corozal, Puerto Rico. As you might expect, everyone knew us in town, my father also a teacher, my grandfather the town pharmacist.

As you would traditionally expect in a small Hispanic town, the Catholic Church was located directly in the center of the plaza. The town of Corozal is very picturesque and is where many Spaniards and other Europeans had settled creating a dynamic mixture of cultures.

My mother recalls that on a beautiful morning in Corozal, Puerto Rico, she was busy closing the patio gates of the house prior to leaving to run a few errands when a driver turned off the street and struck her, rendering her unconscious. The news left the town in shock, knowing that her life and the life of her baby were at risk. I was told by old family friends that it was never made clear if he was drunk or asleep at the time of the

accident. In any event, the accident was catastrophic, although my mother was rushed immediately to the hospital, the car impact left her with a concussion and a lifetime of epileptic seizures.

As for me, the unborn child, everything appeared to be fine. However, once I was born, I had a stifling cry that never seemed to subside, and thereafter I began to demonstrate symptoms of speech impairment. What was perhaps most shocking to others was the fact that both my mother and I had survived.

The house we lived in was actually very special to me for the fire station was literally across the street, and the town hospital was right next to it. We had been living there for a short time when I developed a lung allergy and some sort of infection.

As my mother recalled, one day when she walked into the room to check on me, she found that I had stopped breathing, and was lying down motionless with my eyes already “rolled back,” as she described it. She immediately ran across the street with my lifeless body in her hands yelling and screaming for help.

As she entered the hospital, a young German doctor rushed to her aid. The doctor drained out the fluids and foreign materials that had developed and accumulated within my lungs. The young doctor saved my life that day from drowning on my own fluids, although the procedure he used for clearing out my lungs was criticized by our family doctor as being dangerous and reckless when carried out on a newborn child. I believe God had His hand in the matter, and had a future and a mission in store for me. I had not yet matured enough to know God on a personal level, but God was quite aware of who I was, to say the least.

Something very unique happened to me as I grew into a young boy. As my health began to strengthen with age, I was permitted to play outdoors, and began exploring as most young children do. The rows of houses where we lived were pretty close together, and the back of the houses led to a small ravine.

I managed to discover a small access between the houses that led into the backyard of my house and others. It was through this small gap and underneath these houses that I claimed a new location for playing with my small cars and toys. It was there that I experienced for the first time an aesthetic encounter of a special kind, or perhaps I should say of self-understanding.<sup>42</sup>

In this small place underneath the house, I found a framed portrait of “Jesus,” fairly large-sized that someone had left behind, hidden away from the elements so as not to get destroyed. I noticed every day how the morning daylight baptized the picture of Jesus and in every late afternoon as well.

As I played with my toy cars, I remember looking at the picture of Jesus. I looked at his face and realized that he looked placid, tranquil, and peaceful. I remember his mouth: it was easy looking, not a frown, yet not a smile either. I would say it was one step down from the *Giaconda*. Until one day: as I was aiming at the picture and playing with my cars as usual, Jesus smiled at me! So I smiled back at him. I must tell you, what a beautiful smile he had: thin lips, soft and genuine, pretty similar to my mother’s smile.

Now I really had a friend in that man in the picture. So every day, as it was my custom, I would come down to my playing area and continue to play, and waited until the man in the picture would smile at me again. Sometimes, he would play games by staying

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<sup>42</sup> Roberto S. Goizueta, *Caminemos Con Jesús: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, New York: Orbis Books, 1995), 73.

“serious,” then, I would smile (knowing that he was playing with me) and wait, and after a little while he would smile again. What a privilege! I can say that I have seen the smile of God!

It is interesting to note how through this portrait of Jesus, I began to develop a relationship with my Lord and Savior Jesus Christ, a special and endearing love for my Creator. Little by little that same joy and the warmth that I felt during the days I spent sharing a smile with the man in the portrait, would be the same warmth I felt when I finally asked Jesus to live in my heart twenty or so years later.

As years past, this experience had mesmerized me and created a very long-lasting impression on my mind, and I believe that it will stay with me until the day that I pass on from this world.

I grew up as was customary under the Catholic tradition: I was baptized, confirmed and received my First Communion. I attended the local Catholic private school, *La Sagrada Familia*, and also helped at the local church as an altar boy. It wasn't until many years later that I started to questions of the 'why's and how's' of human existence.

Life, nature, and human interactions fascinated me. There is no doubt that I became aware of the importance of life, society, and began experiencing and enjoying very much the company of others. At a very early age God had revealed to me that I had a purpose in life.

During high school years I started to hear “the Call” of the Lord knocking on my heart, and to be honest, I did not understand what was happening to me. On April 10<sup>th</sup> 1980, I completely surrendered my heart to the Lord and devoted my life to the Lord's

service. In 1981, I moved into the Miami-Homestead area and not long after, I began working for the Salvation Army as a Counselor.

I immediately started to preach the gospel to the people who entered the program and shared the “Good News” of Salvation. It was then that I discovered some of the empathy and sometimes the apathy of people towards the gospel. Not long after I had worked for the Salvation Army I began working for the Federal Bureau of Prisons.

As soon as I started this new assignment I met with the staff chaplain Rev. Milan Kralick and started to serve as the Interdenominational Hispanic Worship Volunteer Services Coordinator. Many of the challenges that I experienced had to do with the fact that I was a Senior Officer Specialist. Many of the Officers and Lieutenants did not view this fact positively since I was one of the first officers authorized to perform the two roles in the facility’s history.

In this next section I will continue to share some of these experiences to help the reader understand the difficulties found in a foreign land when you find yourself away from *nuestra casa* during my tenure with the Federal Government. Many Cuban families are also subject to mistreatment and bigotry in the new world of injustices when they come to the United States. The fact that you are *un hispano* does not help you at all, particularly when you don’t know the language.

### **Life Experiences: The World of Injustices in a Foreign Land**

The atrocities that are committed in the name of the law and justice are indescribable. During my tenure with the U.S. Department of Justice, Federal Bureau of



Prisons, I was able to witness many of these atrocities. It was a mixed bag of rules, people, and their consequences.

As an officer I endured a very harsh racial treatment due to my Hispanic Puerto Rican background. As you know, people born in the Commonwealth of Puerto Rico are U.S. citizens, but this did not stop the racial mistreatment during my service with the department. For example, Anglo-American officers would be able to go in and out of the Lieutenant's office to check-in and conduct debriefings, while African-American and Hispanic officers would only be allowed to step up to the doorway. If you crossed the invisible line of the doorway, everyone in the office would go silent and wait for you to step back out into your allowable space. Tension was very high!

Many Cubans are continuously confronted by situations that unavoidably create a very hostile environment. Many of the job assignments performed by many of the Cuban exiled communities are jobs that no one from the dominant culture here in the U.S. wants to do.

#### *Walking in Faith (Abuse)*

I recall an incident in which we had a terrible thunderstorm that rendered the outside security fence system inoperable. They needed an officer to walk the fence line to make sure that there was no security breach. We had a very large number of Anglo-American officers, all of them with less rank and seniority than me. However, I was the one who was selected to conduct such a dangerous and suicidal task.

The bureau is very much like the military; when you are given an order you just have to carry it out without questioning the order. Outside, several lightning bolts were striking every second. You could hardly be heard even if the person was standing directly in front of you. The wind was swirling almost to a tornado twist. I gathered myself, grabbed a heavy raincoat, and walked out into the abyss! As I walked, as a good pastor, I reconciled my soul with my Creator. (Many people who experience the trauma of being confronted by life or death situations reconcile with those whom they loved).

I really did not believe that I was going to make it back and see my children again. I could only see a few feet in front of me; even though it was in the middle of the day it was almost as dark as night. Lightning would strike before me and behind me but in some miraculous way did not touch me. The wind would try to direct me off my path but I remained. I started to mumble Psalm 23: "*The Lord is my shepherd, I shall not want...*"<sup>43</sup> and lightning would strike, cutting my prayer short, and I would have to start all over again and again.

As I came around the one-mile-long perimeter fence, I prayed: "*Lord make my hands and my body like rubber,*" to avoid the electricity that was surging on the fence. This was due to the fact that I had to open with my bare wet hands a number of metal gates along the way to gain access to every new section around the perimeter.

I meditated in how time slows down when you experience traumatic events or when you are in the middle of the storm because of the situation at hand. What is it that makes time slow down when, to my estimation, I needed it to go faster? Then I realized that if I went faster, the lightning that appeared in front of me would have struck me, and likewise with the one that struck behind me. I had to walk *in between*. (Many of the

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<sup>43</sup> Psalm 23 (New Revised Standard Version).

Cuban families are always walking *in-between* in their effort to survive extremely difficult situations particularly when they are unable to control what is happening to them).

Time itself had slowed down so I could walk *in between*, I had to walk in faith, and it was then that I realized that I was in the middle of the *twilight zone*. When I finished, not short of a miracle, I noticed that I was not able to finish the Psalm and its six verses. As Roberto S. Goizueta would say: "*Caminemos con Jesús*,"<sup>44</sup> I know that Jesus was with me, walking alongside, and for me that was the only reason why I was not hurt.

In the same way I experienced God's grace during this situation, many of the people of the Cuban exiled community have experienced God's grace in difficult situations through their lives, but they especially need to experience it at the time of sickness and death.

### *Noisy Places (Suffering)*

I had the privilege to also serve during my tenure in the department at Fort Gordon, Georgia. I was sent there as "T.D.Y." or temporary duty a year assignment. I worked at this military base for a period of thirty days, seven days a week, twelve hour shifts. The reason was due to the fact that many of our federal facilities had been destroyed by detainees that were called "Mariel" inmates.<sup>45</sup> (Many of the Cuban families

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<sup>44</sup> Goizueta, *Caminemos con Jesús*, 33.

<sup>45</sup> From April 15 to October 31, 1980, there was a massive emigration of Cubans from the *Mariel* Harbor to the United States. Approximately 125,000 Cubans arrived in Florida. A number of the exiles had been released from Cuban prisons and Mental Health facilities, and were held at Federal prisons waiting for deportation hearings.

were separated from their loved ones because of the broken immigration laws. Many of the detainees who left Cuba via the Mariel boat lift committed a number of infractions or crimes and ended up in federal custody).

After many years of incarceration the U.S. Immigration and Naturalization Service announced that they had made a deal with Fidel Castro, the Cuban dictator, to send the Mariel inmates back to Cuba. This resulted in a number of riots at several federal prisons and detention facilities. Among the facilities destroyed was the United States Penitentiary located in Atlanta, Georgia. Some had already completed their sentences and they were being held in a legal limbo for many years. Many of them had done more time waiting to be released than for the actual sentence they received at the beginning of the judicial process.

When I arrived at the newly created facility inside Fort Gordon, I wondered what to expect. The need for prayer and reconciliation was very real and because many of the inmates knew me I expected to be extremely busy. Not only because I was going to be working as an officer, but also because I was the Hispanic Christian Worship Services Coordinator at the Metropolitan Correctional Center in Miami, Florida.

A large number of the detainees had known me for many years from this facility in Miami. As soon as I arrived at Fort Gordon, I was assigned to work inside the "Range" or housing unit with the inmates due to my ability to speak Spanish, and because I was a Senior Officer Specialist at the time. The inmates were locked up for twenty-three hours a day, seven days a week. They were only allowed to exit their rooms for showers and for one hour of exercise under careful surveillance and restraints.

As I approached the range, after carefully reviewing the Position Orders or Post Orders, as they were called, some of the detainees got a glimpse of me and began to yell: "*Córdova is here, Córdova is here...!*" I imagined that to them I looked like an angel coming from heaven. I immediately began to talk and to establish a rapport with the detainees and without delay they began to tell me their *narratives* of what took place during the uprising. They talked about physical and mental abuse during the period of incarceration. Surprisingly, I discovered that one of the leaders had managed to contact a local radio station and they were able to explain and tell their narratives to the outside public.

I must add that many officers had a lot of animosity towards them because they had lost their facility since it was destroyed. More significantly, many officers as well as staff members were also taken hostage and victimized by the detainees. Since my shift started during the night, I was able to talk and to help reconcile<sup>46</sup> them after what had transpired, and to assure them that everything was going to work out.

I remember that during the uprising the authorities made a very significant effort to control and to manage the situation but they were unable to do so. It was not until they contacted a very loving priest from the Miami exiled Cuban community that they were successful. *Monseñor* Agustín Román was flown to the U.S. Penitentiary by the Federal Government and was able to calm the situation to the point that all of the hostages were released and the hostage takers surrendered to authorities. (The Church has been one of

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<sup>46</sup> Telling and retelling stories is a crucial part of healing memories and traumas of the past. Listening to these stories is a key element within the Ministry of Reconciliation. See Robert Schreiter, *The Ministry of Reconciliation*, (Maryknoll, NY: Orbis Books, 1998), 44-45, 88.

the greater assets to the Cuban exiled community by mediating many of the problems and situations here in the United States).

One particular inmate stands out in my mind. He had mental and emotional issues, and people said that he "*estaba loco!*" During the day it appeared that many people would mock him and call him names to which would cause him to become extremely violent! Then, they would proceed to put him in what was called "four point restraints." They would tie every limb to the bed with "soft" (leather) or "hard" (metal) restraints, depending on the situation. During the thirty days that I was stationed at this facility, I was able to help reconcile his soul after talking and listening to him. I tried to make sense of his madness, yet I listened. Then I would give him in so many words, words of encouragement and hope, and after we prayed he was good for the night. I repeated this process night after night.

The range used to be a very loud place, but now it had been calmed down, for after the inmates' *narratives* had been heard by this writer there was finally tangible peace! The quiet spread from one unit to the other, from one corridor to the next. The Lord brought peace to the hearts of the troubled ones. I will always thank the Lord for allowing me to be His vessel!

I met with Bishop Agustín Román many years later, just a few months before he passed away. I met him at *La Ermita de la Caridad* (National Shrine constructed by the Cuban exiled community located at Coconut Grove, Florida) where Bishop Agustín was serving. We talked and remembered the Mariel Cuban crisis in Atlanta, Georgia. He recalled being taken from Miami by law enforcement to one of the towers of the U.S. Penitentiary as a mediator. From there he spoke to the exiled Cuban community and told

them that he was not going to leave them alone and that he was going to say *El Padre Nuestro* (the Lord's Prayer) but he asked that they surrender their arms because it was not proper to pray with weapons. Father Agustín shared with me that he was in shock when he saw all of the Cuban inmates laying down their weapons at once and they even waited for the priest to pray and to recite the Lord's Prayer. The crisis was over because God used His vessel that had no human weapons but the power of the Word of God, and because of the pastor's integrity and veracity. In the same way that Bishop Román was the instrument to mediate and bring peace to the situation, I envision hospice ministry as an instrument to bring hope and understanding to the exiled Cuban community.

#### *We Reap What We Sow (Solidarity)*

In the Caribbean culture we are told to follow very strict guidelines when observing someone in need. We are mandated to help, to be hospitable and kind, particularly to those who are less fortunate. If there is anything that characterizes the Cuban community, it is the show of compassion and the fact that they are willing to help each other regardless of the circumstances.

I experienced a similar situation during my tenure with the Bureau, and thanks to God and to my Caribbean upbringing I was able to survive a life-and-death situation. It was four o'clock at the Federal Correctional Institution in Miami, Florida. I was getting ready for the 4 p.m. official count. All inmates are required to stand up and to remain standing during the countdown. This is to verify that they are alive, and that there are no "dummies." When the count ended, the inmates would wait out of their rooms to be

released into the open compound, and to go to the mess hall for dinner. In the meantime I would conduct what was called "mail call."

A Jamaican inmate who used to work for me approached me after mail call and said to me: "*Officer Córdova, they are going to kill you tonight.*"

By telling me this he was risking his own life because he had broken the protocol that inmates followed not inform officers absolutely anything. I asked him who was going to kill me. To which he replied: "*The Jamaicans.*" I imagine that since he was also a Jamaican, they allowed him into their inner circle and he was able to listen to what they were planning to do to me. He told me that they had already completed home-made knives, and that they had stashed them under their bed. Moreover, he also mentioned how they were going to kill me.

According to the inmate, one was planning to talk to me face-to-face while the second one was going to stab me from the back. After identifying the two perpetrators in the bed book pictures (5 X 8 cards), I immediately contacted the Operations Lieutenant. I proceeded to explain to him what I was told, and that I was going to search the beds of the individuals in question for weapons.

The lieutenant assured me that he was going to send a second officer to accompany me for security reasons and protection. After I searched their beds, sure enough I found under their bed mattresses the homemade weapons, true to what the Jamaican inmate had told me. I immediately contacted the Lieutenant's Office to advise him of the findings. Then everything went wrong!

I realized the lieutenant never sent the "back up" to begin with. Apparently, he had interrogated the two inmates, and they convinced him that the weapons were not



made to harm me, but they were made for their own personal protection against what they called: "*the Cubans*."

The Lieutenant told me that he was not going to lock them up, and that if I was so afraid I shouldn't work for the Bureau. I was outraged by the reply that I received from the lieutenant who was my shift supervisor. All of a sudden it made sense to me; I recalled having problems with this particular lieutenant in the past because he was very racist. Yet, I replied to him: "*Since when do we allow inmates to make weapons?*" and I explained to him that I was going to defend myself as soon as they came into the front door of the unit, and that we (the Lieutenant and I), were going to see the Warden the next day.

At this point I hung up the phone and shook my head in disbelief. Then I heard a voice from one of the Cuban inmates who told me: "*Don't worry Córdova, we are going to defend you!*" I could not believe what my ears just heard; the Cuban inmates themselves were on my side and *Justice* was against me. What a paradox!

Later on I transferred to work at the Homestead Air Force Base in Homestead, Florida. No too long afterward somehow a group of the same inmates brought a pistol inside the Federal Correctional facility and they even took a lieutenant hostage in an escape attempt. Thank God nobody was killed!

I can summarize my tenure in the Department with one sentence that has been part of *Mujerista* Theology: "*la vida es lucha*."<sup>47</sup> When I look back and recall all of these incidents, I become aware of my *scars* and the post-traumatic-syndromes that come with the *territory*. The need for my own reconciliation with the past was very real. Many of the exiled Cubans are plagued by the scars of leaving their homeland behind

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<sup>47</sup> Ada María Isasi-Díaz, , *Mujerista Theology*, 21.

along with their families. They are victims of post-traumatic episodes and many developed debilitating diseases because of their inability to overcome the despair and depression caused by such experiences.

The territory is like a terrain full of narratives with its ups and downs, and somewhere on the horizon you can just about make out what I have called the *field of dreams*. Every act of reconciliation is confronted with the realities of the territory, before and after, but the *field of dreams* is just different because of God's intervention.

### **Field of Dreams**

The "*Field of Dreams*" for me is the place where our incomplete narratives are fulfilled. It is also the sacramental experience of God for the people whose lives are in need to find a place for communion and closure with help of the Creator. The field of dreams is *el lenguaje mediador y lugar de encuentro* of the people by mediating grace when facing solitude. The "field" refers to our very personal perspective in how these experiences are being viewed and understood from our particular and unique advantage point or context. The field is the totality of the wealth of all knowledge acquired by our axiological and experiential values enriched by God's intervention.

The "dreams" alludes precisely to this intervention by God in the roams of our daily existence. Many life experiences are common while others are extraordinary and difficult to explain. They are "out-of-this-world" because they are difficult to predict or to be explained by science or any empirical process, however, they are as real as they can be. They are perceived by the soul who possesses a God given gift to help

acknowledging God's intervention when addressing those life narratives that for some reason remain incomplete throughout our lives. I have witnessed these types of experiences firsthand and they have changed my life. To know, to witness, and to experience them directly of what I consider to be God's sacramental intervention in the lives of the little ones, is just amazing!

We have to be in "tune" or to be ready (alert, paying attention) to be able to witness any sign or symbol that could materialize by these types of extraordinary experiences. Sometimes they would manifest a short period of time after a life event, while others may somehow make a connection with past life events. I remembered when my father-in-law passed away. My wife and I went to my in-law's house on the way to the funeral home. I knew that somehow God was going to show us a sign indicating that everything was fine.

I carefully and tenderly explained to my wife my concerns. I told her that I understood her pain that she was experiencing for the loss of her father, but I needed her to pay attention because somehow I knew that God was going to manifest a sign. I just did not know when or how. Immediately after I came outside next to the vehicle located on the driveway, I came around to open the passenger side door for my wife. Then it happened as we stood right outside the front of the car. A shower literally circled us with some kind of "liquid sun" material and started to fall right on top of us. I said "liquid sun" because they looked like long strips of a material with silver like fluorescent color behaving as if they were elastic and elongated drops of water falling on top of us. We felt them touching our heads and shoulders but rapidly disappearing. Amazingly, we remained completely dry!

My wife was as astounded as I was and looked at me acknowledging and witnessing of what was revealed to us, this, just few moments after of what I just predicted earlier with such assurance. Why was I so sure that something like this was just about to happen? I really do not know. But what I do know is that in a similar manner surrounding the sick and the dying these types of phenomena are taking place before us. Most of them will go unnoticed because we are not paying attention, or because we do not recognize them, or even because we have dismissed them since we do not understand what just transpired. I must testify that I have witnessed in many instances signs mediating our life situations as if God was saying: I am with you!

God is also present in the field of dreams of the Cuban exiled community. They are blessed by God's presence constantly reminding them that they are not alone. God is in control of our daily living and is also in control of our incomplete narratives. The world of hospice ministry is relentlessly mediating on one hand our physical world and on the other, the world that is unknown to the living but is starting to materialize for the ones who are just about to depart this world. The *field of dreams* is a sacramental experience of God for the people!

The *field of dreams* is not subject to space or time, although it is based on reality, and is based on the beauty of that reality. I am referring to the reality of the past imbedded in the reality of what the future will hold with a twist, your twist; "*Se hace camino al andar*."<sup>48</sup> This is the dichotomy of the narratives of the territory and the *field of dreams*, as Juan Diego experienced first hand:

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<sup>48</sup> This is a very famous verse from the Spanish poet Antonio Machado (1875-1939). The verse is part of a poem included in a collection of poems titled *Proverbios y Cantares en Campo de Castilla* from 1912. *Caminante no hay camino, se hace camino al andar* (Wanderer, there is no road, the road is made by walking) has become so popular that after so many years it is customary to use it in conversations.

A central theme of the Guadalupe story is the revelatory power of beauty. The story itself begins with music, the singing of the birds, and ends with flowers, the roses that Juan Diego takes to the bishop. The extended dialogues in which the Lady identifies herself as Mary are circumscribed by symbols of beauty which make that identification credible for Juan Diego. If Juan Diego believes what Mary tells him, it is not because her statements are self-validating or self-evidently true, but because they are preceded by beautiful, heavenly music and corroborated by beautiful, fragrant roses. The truth of Mary's statements is mediated by and revealed in the beauty of music and flowers. Without the singing birds and the fragrant flowers, Juan Diego would not have encountered Mary and, even if he had, would not have believed her. It was in the music and the flowers that he knew her. Here, interpersonal action is defined and mediated by beauty. In the world of the Nahuas, beauty is truth. To know beauty is to know the truth; it is to know God.<sup>49</sup>

The search for the truth will become the prerogative of a lifetime, the *clash of the universes*, the universe of lies against the universe of truths, and the need for a compatible and level *field of dreams* so we can seek the beauty in the field.

The *field of dreams* has nothing to do with an abstract idea or with abstract language. It is a language based on the narrative of the soul who refuses to accept the narrative of the lie. It is the search for a meaning that finds its source *en un aquí y en un ahora* (the here and now) of life.

In the transforming power of God's presence whose *field of dreams* is the human heart and its hope for a better future, we nevertheless find ourselves in the midst of our own reality. It is to be able to shape our own destiny and to reconcile our lives with our own narrative. It is the longing to find truth when you find yourself in obscurity, the darkness or narrative of the lie is a fact of life.

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<sup>49</sup> Goizueta, *Caminemos con Jesús*, 106.

## *A Happy Day*

In the *field of dreams* we find what I call *happy days*. In life we find many other kinds or types of happy days, the day of your birthday or when you had your first child, first job, first car, and the first time when you *fell in love*. We could say that these were happy days. A happy day in the *field of dreams* is something very different. As we recall the biblical story of the *Father of Faith* or Abraham, we will come to a better understanding of what a *happy day* in the *field of dreams* really is.

"Abram," when God called him in the beginning, from Ur of the Chaldeans, an important ancient Babylonian city and one of the oldest known civilizations, was called to a new place, to a new territory: "Now the Lord said to Abram, "Go from your country and your kindred and your father's house to the land that I will show you."<sup>50</sup> He was called to a new narrative by leaving behind his entire family based on a promise given by God that through his descendents all nations of the world were going to be blessed: "I will make of you a great nation, and I will bless you, and make you a name great, so that you can be a blessing"<sup>51</sup> Thus his name was changed to "Abraham," or "father of many people:"

When Abram was ninety-nine years old, the Lord appeared to Abram, and said to him, "I am God Almighty, walk before me, and be blameless. And I will make my covenant between me and you, and will make you exceedingly numerous." Then Abram fell on his face; and God said to him, "As for me, this is my covenant with you: You shall be the ancestor of a multitude of nations. No longer shall your name be Abram, but your name shall be Abraham; for I have made you the ancestor of a multitude of nations."<sup>52</sup>

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<sup>50</sup> Genesis 15:1 (New Revised Standard Version).

<sup>51</sup> Genesis 15:1-2 (New Revised Standard Version).

<sup>52</sup> Genesis 17:1-4 (New Revised Standard Version).

Abraham acted in *faith*, a necessary ingredient in the process of reconciliation. Although Abraham was very old and his wife Sarah was sterile, through a *miracle*, another important ingredient in the *field of dreams*, she was able to have a child. The child was named Isaac which means "laughter," because when the angel revealed to Abraham that she was to bear a child, she laughed. She did not believe what God had said through the angel. Here we discover the narrative of the lie inside Sarah's heart.

Later, Abraham is asked by God to sacrifice his own child. The location for the sacrifice was three days out or *tiempo de cumplimiento* because for the oriental communities the numbers are not only quantities but also qualities. Probably Abraham's son, Isaac, was already in his teens or older. The Bible tells the story:

<sup>1</sup>After these things God tested Abraham. He said to him "Abraham!" And he said, "Here I am." <sup>2</sup>He said, "Take your son, your only son Isaac, whom you love, and go to the land of Moriah, and offer him there as a burnt offering on one of the mountains that I shall show you." <sup>3</sup>So Abraham rose early in the morning, saddled his donkey, and took two of his young men with him, and his son Isaac; he cut the wood for the burnt offering, and set out and went to the place in the distance that God had shown him. <sup>4</sup>On the third day Abraham looked up and saw the place from a distance. <sup>5</sup>Abraham said to his young men, "Stay here with the donkey, the boy and I will go over there; we will worship, and then we will come back to you." <sup>6</sup>Abraham took the wood of the burnt offering and laid it on Isaac his son Isaac, and he himself carried the fire and the knife. So the two of them walked on together. <sup>7</sup>Isaac said to his father Abraham, "Father!" And he said, "Here I am, my son." He said, "The fire and the wood are here, but where is the lamb for a burnt offering?" <sup>8</sup>Abraham said, "God himself will provide the lamb for a burnt offering, my son." So the two of them walked on together. <sup>9</sup>When they came to the place that God had shown him; Abraham built an altar there and laid the wood in order. He bound his son Isaac and laid him on the altar, on top of the wood. <sup>10</sup>Then Abraham reached out his hand and took the knife to kill his son. <sup>11</sup>But the angel of the Lord called to him from heaven, and said, "Abraham, Abraham!" And he said, "Here I am." <sup>12</sup>He said, "Do not lay your hand on the boy or do anything to him; for now I know that you fear God, since you have not withheld your son, your only son, from me." <sup>13</sup>And Abraham looked up and saw a ram, caught in a thicket by its horns. Abraham went and took the ram and offered it up as a burnt offering instead of his son. <sup>14</sup>So Abraham called that place "The Lord

will provide"; as it is said to this day, "On the mount of the Lord it shall be provided."<sup>53</sup>

We can notice some things in the story. First, we note the words of Abraham when he stated that he and the boy would go over there, to the place of the sacrifice, and return. Abraham was already acting in faith when his faith was being tested by God. Abraham chose to obey God even though he was asked the most difficult task you can ask a human being, to sacrifice his own son.

I find a parallel between this story and the one of Jesus. Remember how God characterized it to Abraham: "take now your son, your only son, whom you love, Isaac." I guess it was no laughing matter anymore! Imagine how happy the old man, Abraham, became when his son was born at an old age. Abraham had already spent a few years with his son and instructed him about the importance of sacrifices, and even the necessary tools and ingredients to perform the same. However, there was one missing item, the lamb!

As Abraham tied his son, I wonder how sad he was. I can only imagine the pain and the sorrow of what was just about to happen, yet he was determined and trusted that the Lord would supply the necessary ingredients in the *field of dreams*, to complete Isaac's narrative, but even more so that of Abraham's. Of course, God stopped Abraham from slaying his son, and all of a sudden a ram caught in a thicket by its horns became the sacrificial lamb. Abraham went ahead and offered the ram instead of his son, so Abraham called that place, "*the Lord will provide*" or "*Yahweh Jireh*." This is a perfect picture of a *happy day*.

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<sup>53</sup> Genesis 22:1-14 (New Revised Standard Version).



When Abraham first had his baby, there is no question that he was very happy; nevertheless, in the *field of dreams* the happiness that Abraham experienced when his son was born would pale in comparison to the day when his son was spared. The first scenario takes place, although miraculously, in the narrative of a natural world. What makes the scenario part of a *field of dreams* is the promise of what that birth represents. The truth of the promise given to Abraham about his son shaped the faith and kindled the hope of what was to become the narrative of truth.

The fiat given to Abraham by the experience that he had with God and his son will help Abraham to assert his belief and to complete his narrative. In the same way people who are subject to injustices are able to find a *happy day* as they come out of the rubble. They are able to fulfill and actualize<sup>54</sup> their lives in the *field of dreams*. The *field of dreams* takes place in the midst of aesthetics (a beautiful narrative), a very resourceful tool or narrative that transforms the narrative of the lie into a promise fulfilled.

In this chapter I presented an introduction about the thesis project and I explained the methodology by which the thesis project will be developed. I also presented my story and part of my life and ministerial journey because I found them to be relevant and congruent with the experiences that the exiled Cuban community experienced when they left their country and came to live in country with a dominant culture very different from their own.

In the next chapter I will present an overview of what hospice ministry is so we can have a better understanding of this type of ministry.

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<sup>54</sup> Maslow, *Toward Psychology of Being*, 189.

## CHAPTER 2

### THE MINISTERIAL CONTEXT: HOSPICE CARE

Hospice care is offered to those patients who may not have long to live and/or choose to discontinue the treatment plans. Hospice care is typically provided in the patient's home, but can also be offered in hospital settings, nursing homes and assisted living facilities. The caregivers are experts in caring for the symptoms, but not necessarily for the disease. Understanding the spiritual context that the families and the patients are experiencing is extremely important. The pastoral care services are an intricate part of hospice care by providing emotional and spiritual support to the patients and families.

Hospice and palliative care are types of holistic medical care that help relieve pain and the suffering without using any type of aggressive treatments. This improves the quality of life of the people who are experiencing serious to terminal diseases, compounded by other life-threatening illnesses.

The National Hospice and Palliative Care Organization defines hospice care as follows:

Considered to be the model for quality, compassionate care for people facing a life-limiting illness or injury, hospice care involves a team-oriented approach to expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient's needs and wishes. Support is provided to the patient's loved ones as well. At the center of hospice and palliative care is the belief that each of us has the right to die pain-free and with dignity, and that our families will receive the necessary support to allow us to do so.<sup>55</sup>

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<sup>55</sup>As stated in the National Hospice and Palliative Care Organization (NHPCO) webpage: <http://www.nhpc.org/> (accessed December 22, 2014).

According to the same organization, Palliative Care “is patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate patient autonomy, access to information and choice.”<sup>56</sup>

While palliative care addresses medical conditions that require constant vigilance because of their debilitating effects, hospice care deals with the needs of the people who are just about to die. Hospice and palliative care have different primary teams made of doctors, nurses, chaplains, counselors, social workers, bereavement counselors, therapists and volunteers. They all provide routine care for the patient, and also give support to the patient’s families. The team helps patients and families to understand the disease process by providing medical care, spiritual support and counseling. They also provide a Care Plan customized to each individual’s needs. One of the primary goals is to provide spiritual care for the patients.

Hospice care for many is an unknown world full of mystery because of the lack of understanding about this type of ministerial work. I will provide some basic and essential information about this type of pastoral ministry. Since hospice care’s inception, thousands of people have benefited because of the care and support that only hospice care can provide to a person who is about to die.

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<sup>56</sup> Ibid.

## History of Hospice Care

A number of institutions were opened during the nineteenth century in order to provide a more humane care for the dying: hospices or Calvaries were established in Lyons, France in 1842; the Irish Sisters of Charity founded in 1879 a center named Our Lady's Hospice in Dublin, and in 1905 the St. Joseph's Hospice opened in East London; Calvary Hospital was opened in 1899 in New York, and three other homes were also opened in London by the end of the century.<sup>57</sup> All these institutions had the same desire to be able to serve those who were afflicted by terminal diseases.

Historically, the development of hospice and palliative care owes much of its development to Dame Cicely Saunders who studied at St. Thomas Hospital Medical School in London back in 1951 subsequent to original preparation as a nurse at the Nightingale School at St. Thomas Hospital.<sup>58</sup>

After Cicely Saunders finished her medical career in 1957, she was able to realize the multifaceted interdisciplinary need of cancer patients and formulated the following values.<sup>59</sup> Some of the recommendations made were straightforward:

1. Death must be accepted.
2. The patient's total care must be managed by a skilled interdisciplinary team whose members communicate regularly with one another.
3. The common symptoms of terminal disease, especially the palliation of pain in all its aspects, need to be controlled effectively.
4. The patient and family as a single unit of care must be recognized.

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<sup>57</sup> David A. Bennahum, "The Historical Development of Hospice and Palliative Care," in *Hospice and Palliative Care*, ed. Denise C. Sheehan and Walter B. Forman (Boston, Massachusetts: Jones and Bartlett Publishers, 1996), 4-5.

<sup>58</sup> Ibid.

<sup>59</sup> Ibid.

5. An active home care program should be implemented.
6. An active program of bereavement care for the family after death of the patient must be provided.
7. Research and education should be ongoing.<sup>60</sup>

Cicely Saunders helped found St. Christopher Hospice in London 1967, a hospice that became a model and subject of study for the later development of hospices in the United States.

The modern evolution of hospice care in the United States also has to do with the contributions of three other women: Rose Hawthorne Lathrop, Florence Wald and Elizabeth Kübler-Ross.<sup>61</sup>

Rose Hawthorne Lathrop, who was trained as a nurse in 1896, began a journey that year that took her from taking personal care of cancer patients in two tiny rooms in Manhattan, to a four-bed apartment, then to a three-storey house named Saint's Rose in 1899, and finally to Rosary Hill in 1901, with capacity for 100 patients.<sup>62</sup> In 1899 she became Mother Mary Alphonsa under the third order of St. Dominic, and the order she founded opened five more homes.<sup>63</sup> Cicely Saunders knew about these centers, and visited St. Rose the first time she came to the United States in 1963.<sup>64</sup>

Florence Wald, a nurse born in New York, met Cicely Saunders in 1963 when she came to Yale University to give a lecture about specialized care for the dying. The

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<sup>60</sup> P.R. Torrens, ed. *Hospice Programs and Public Policy* (Chicago: American Hospital Publishing, American Hospital Association, 1985) quoted in David A. Bennahum, "The Historical Development of Hospice and Palliative Care," in *Hospice and Palliative Care*, ed. Denise C. Sheehan and Walter B. Forman (Boston, Massachusetts: Jones and Bartlett Publishers, 1996), 4-5.

<sup>61</sup> Fran Smith and Sheila Himmel, *Changing the Way We Die: Compassionate End of Life Care and the Hospice Movement* (Berkeley, Cleis Press Inc., 2013), 13-31.

<sup>62</sup> *Ibid.*, 23-24.

<sup>63</sup> *Ibid.* 24

<sup>64</sup> *Ibid.*

lectures included information given to medical students, nurses, social workers, and chaplains. Many notions of holistic hospice care including photos of terminally ill cancer patients and their families were provided, thus demonstrating the remarkable differences before and after the symptom control care. Following this lecture a sequence of events took place which resulted in the expansion of hospice care as we know it today.<sup>65</sup>

In 1968, a year after Cicely Saunders created St. Christopher's Hospice in London, Florence Wald, who was then Dean of the Yale School of Nursing, went to St. Christopher's to learn all she could about hospice.<sup>66</sup> That eventually led her to the establishment in 1972 of the Connecticut Hospice in Branford, Connecticut.

Elizabeth Kübler-Ross, M.D. spent years interviewing dying patients. In 1969 she published *On Death and Dying*, where she made an appeal for home care instead of treatment in an institutional setting. She argued that patients should have an option and the capability to partake in the decisions that have an effect on their future.<sup>67</sup> Her work was extremely important to the approval of hospice care and treatment as projected by Saunders.<sup>68</sup>

Legislation followed after the United States Senate's Special Committee on Aging held in 1972 a series of hearings on the subject of "Death with Dignity". After very strong advocacy for the implementation of hospice care by the year 1983 the

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<sup>65</sup>As stated in the National Hospice and Palliative Care Organization (NHPCO) webpage: <http://www.nhpc.org/history-hospice-care> (accessed December 22, 2014).

<sup>66</sup> Ibid.

<sup>67</sup> Ibid.

<sup>68</sup> David A. Bennahum, "The Historical Development of Hospice and Palliative Care," in *Hospice and Palliative Care*, ed. Denise C. Sheehan and Walter B. Forman (Boston, Massachusetts: Jones and Bartlett Publishers, 1996), 4.

National Hospice Organization was able to influence Congress to create hospice benefits for Medicare beneficiaries. Today, thousands of palliative and hospice care companies and institutions are serving communities throughout the world.<sup>69</sup>

The National Hospice and Palliative Care Organization provides data that will help us put the growth of hospice care in perspective. Between 1982 and 2012 the patients served by hospice have multiplied at an unprecedented rate. For example, in 1982 a total of twenty-five thousand people were served and by 2012 a total of one million six hundred and fifty thousand people were served.<sup>70</sup>

The U.S. Hospice Program's growth between 1974 and 2012 has been also exponential. According to the same hospice organization there was only one hospice in 1974, and by 2012 there were about five thousand five hundred hospice providers including their satellite offices.<sup>71</sup> The estimates for 2013 were as follows:

In 2013, an estimated 1.5 to 1.6 million patients received services from hospice. This estimate includes:

- Patients who died while receiving hospice care
- Patients who received care in 2012 and who continued to receive care into 2013 (known as “carryovers”)
- Patients who left hospice care alive in 2013 for various reasons including extended prognosis, desire for curative treatment, and other reasons (known as “live discharges”)<sup>72</sup>

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<sup>69</sup> Bennahum, “The Historical Development of Hospice and Palliative Care,” in *Hospice and Palliative Care*, 6.

<sup>70</sup> NHPCO Graph of Hospice Patients Served 1982-2012, available at the National Hospice and Palliative Care Organization (NHPCO) webpage: <http://www.nhpc.org/hospice-statistics-research-press-room/facts-hospice-and-palliative-care> (accessed December 22, 2014).

<sup>71</sup> NHPCO Graph of Hospice Program Growth in the US from 1974-2012, available at the National Hospice and Palliative Care Organization (NHPCO) webpage: <http://www.nhpc.org/hospice-statistics-research-press-room/facts-hospice-and-palliative-care> (accessed December 22, 2014).

<sup>72</sup> NHPCO Facts and Figures: Hospice Care in America, Alexandria, VA: National Hospice and Palliative Care Organization, October 2014 . <http://www.nhpc.org/hospice-statistics-research-press-room/facts-hospice-and-palliative-care> (accessed December 22, 2014), 4.

Another important fact about hospice care is that because of the services provided by healthcare professionals, thousands of families are able to cope better with extremely difficult situations. The service is given at various locations including the hospital bed, inpatient facilities, nursing homes, residences, etc.

The same organization explains that hospice care provides patients and families members the following services:

- Manages the patient's pain and symptoms
- Assists the patient with emotional, psychosocial and spiritual aspects of dying
- Provides needed drugs, medical supplies, and equipment
- Instructs the family on how to care for the patient
- Delivers special services like speech and physical therapy when needed
- Makes short-term inpatient care available when pain or symptoms become too difficult to treat at home, or the caregiver needs respite
- Provides bereavement care and counseling to surviving family and friends.<sup>73</sup>

One of the paramount goals of the hospice program is to be able to manage pain effectively for the comfort of the patient. Emotional and psychological care is also extremely important for the patient and for family members. The medical supplies are a priority because they must be available for the healthcare professional to use during the patient's daily care.

A detailed and progressive assessment is done on a daily basis to optimize the medication accountability and availability along with all medical equipment necessary. Moreover, family instruction is an essential and important facet for the "need to know information" so members can become familiar with what to expect during the hospice care of the patient.

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<sup>73</sup> Ibid, 11.



Special services are delivered on the basis of need and on many occasions music or pet therapy is used to ease the pain and to break the monotony during the dying process. The short-term inpatient or outpatient process is addressed by the “continuous care team.” The team will continuously stay with patient until the crisis subsides to more comfortable and manageable levels, where the regular team can continue to manage the patient.

The bereavement and counseling process will not only continue during the hospice care process with the patient but is also available to family members after the patient has passed away. The family members could continue to be counseled if they desire to do so for up to a year. The same process has been a great tool in the treatment of family members who find themselves in a very difficult situation without any recourse to vent their anxieties and concerns apart from these types of services.

Hospice care is today a huge business. According Fran Smith and Sheila Himmel, about 1.5 million Americans die while in hospice care:

About 1.5 million Americans a year die in hospice care-44 percent of all deaths. A \$14 billion industry serves the growing demand. Hospices seem to be everywhere-in nursing homes, hospitals, and prisons. You can even get hospice for your pet when the time comes. In some communities, competition for dying patients drives hospices to advertise on AM radio, like car-donation hustlers and the makers of anti-wrinkle creams. Shares of hospice companies trade on Wall Street.<sup>74</sup>

The way we die has become not only a fertile ground for ministerial practice but is also big business for corporations. Several more figures about hospice will allow us to better grasp the need to be vigilant about what is happening in this type of service to the public:

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<sup>74</sup> Fran Smith and Sheila Himmel, *Changing The Way We Die: Compassionate End-Of-Life Care and the Hospice Movement* (Berkley, California: Viva Editions, 2013), xvi.

Since Wall Street discovered hospice, Medicare spending for hospice has shot up, from \$2.9 billion in 2000 to \$13 billion in 2010. And the fastest growing population in hospice care was that most lucrative group--Alzheimer's and dementia patients, most of them living in nursing homes. From 1998 to 2008, hospice use by Alzheimer's and dementia patients increased six-fold. Hundreds of hospices, mostly for-profits, have two-thirds or more of their patients in nursing homes.<sup>75</sup>

Hospice care program has been trouble by the number of entities which are now in the hospice business that have defaulted the government. These types of incidents are on the increase since its inception:

On the other hand, it is hard to imagine a group more vulnerable to unscrupulous hospice operations than dementia patients. Abuses happen more often though not only in the for-profit sector. In 2012 alone, Harmony Care Hospice, a small chain based in South Carolina, agreed to pay \$1.3 million to settle charges that it had falsely billed Medicare for patients who were not terminally ill. Hospice Care of Kansas and its parent, Texas-based Voyager Hospice Care, settled similar charges, for \$6.1 million. Odyssey did too, in March 2012, for \$25 million, in a case predating the Gentiva takeover.<sup>76</sup>

It is important to be reminded that "...for-profits tend to admit the most lucrative patients"<sup>77</sup> making the need for hospice service even more challenging. They tend to seek those who will stay longer under their hospice care:

Such patients turn out to be the for-profit sweet spot. A study of 1,036 hospice agencies, published in the *Journal of the American Medical Association* in 2011, found that for-profits have far more patients who stay six months, a year, even longer. Some for-profits actively recruit patients who have dementia and other illnesses that progress slowly and often unpredictably—people who might fit the Medicare requirement of a six-month life expectancy, yet who may linger well beyond that. Compared with nonprofits, for-profits, on average, have fewer patients with cancer—people who often need more intensive hospice support, especially to manage pain, and who tend to enroll just days or weeks before they die.<sup>78</sup>

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<sup>75</sup> Ibid,161.

<sup>76</sup> Ibid.

<sup>77</sup> Ibid, 154.

<sup>78</sup> Ibid, 155.

We are challenged as pastoralists to be observant and to know that many companies providing these types of services may not be seeking the patient's interest but their own. A good hospice interdisciplinary team will seek to serve patients with the best knowledge of how to ease their pain and sadness regardless of the financial circumstances that the world of hospice care is facing today.

### **The Team**

In hospice ministry it is very common to see a team of people working together to provide the necessary care according to areas of expertise. The team is called the "Interdisciplinary Team."<sup>79</sup> The interdisciplinary team's goal is to "...work with patients to identify their specific needs and health goals within a holistic framework. Each member contributes from their unique areas of practice rather than focusing on treatment of disease entities or resolution of physical symptoms in isolation."<sup>80</sup>

The interdisciplinary team meets at least once per week to review the different situations that may have risen during the last review period. Each member of the team helps to identify the best course of treatment particularly suited to each patient.

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<sup>79</sup> Jeanne M. Martinez, "The Interdisciplinary Team," in *Hospice and Palliative Care: Concepts and Practice*, ed. Denise C. Sheehan & Walter B. Forman (Sudbury, Massachusetts: Jones and Bartlett Publishers, 1996), 21.

<sup>80</sup> Ibid.

### *Medical Director*

The hospice may have a General Medical Director with physicians assigned to the different color-scheme-teams. The color schemes are use to identify different teams assigned to different areas of service in the city as is the case with Catholic Hospice. The medical director, as well as other physicians are responsible not only for the welfare of the patient but also for seeing that the patient meets the stringent federal and state guidelines for the types of services offered. Some of the basic guidelines are as follows:

At a minimum each hospice must have a physician designated as the medical director. This physician has both administrative and clinical responsibilities. Administratively, the medical director reviews hospice policies and participates in quality assurance studies. Under Medicare regulations, the medical director is responsible for determining the medical eligibility of patients for hospice care, and certifying (initially in collaboration with one other physician) that the patient is terminally ill. The medical director must also be available to provide primary care to the patient if the patient's physician is unable to carry out this role. Beyond these required functions, the effective medical director must have expertise in pain and symptom management, a strong knowledge base in a primary field of medicine, comfort with difficult emotional issues, and the ability to communicate compassion and empathy. Good communication skills are also required to provide consultation and support to referring physicians and foster cohesive collaboration within the hospice team.<sup>81</sup>

### *Nurses*

Nurses are also part of the interdisciplinary team and they perform an essential role. They help mediate immediately the physical needs by providing and managing the medicines necessary to help ease the pain and the suffering by administrative them. Also

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<sup>81</sup>Ibid, 23.

they provide nurture and emotional support to those afflicted by these terrible and deadly diseases. The responsibilities of the nurse are multifaceted as follows:

Nurse coordination drives most patient services and care. The nurse must continually evaluate the need for medical supplies, durable medical equipment, therapy, and counseling. The nurse needs good physical assessment skills and a working knowledge of pain and symptom management appropriate to palliative care. This must include the emotional and spiritual dimensions of patient comfort, and a focus on quality of life *as defined by the patient*.<sup>82</sup>

### *Medical Social Worker*

The next team member is called a Medical Social Worker. In the case of Catholic Hospice, the social worker is constantly helping the team as well as the patient by providing intelligence-gathering so we can properly manage the patient's need from a social perspective.

The knowledge acquired by the social worker in regard to family members, the patient's concerns, as well as the patient's medical needs and eligibility is dealt by the same social worker. Special attention to detail is extremely important when dealing with patients who are terminally ill.

The logistics of the patient's special needs from housing to seeking governmental state or federal programs customized for patients who may be eligible to benefit from them are handled by the social worker. The social worker is constantly dealing with a gamut of issues, for example:

Although a medical social worker is a required member of the team, the role of the social worker in hospice practice may vary widely. At a minimum, the social worker must review each patient's care plan upon admission to the hospice program and provide an initial psychosocial assessment of the patient and family.

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<sup>82</sup> Ibid.

This assessment contributes to the legal, financial, and, at times, spiritual needs. These identified issues then determine the extent of the social worker's involvement with the patient and family. The psychosocial assessment also provides the beginning of the bereavement assessment. Depending on the structure of the individual hospice program, the social worker may have a major role in providing spiritual care, support to the family at the time of death, and grief counseling particularly for those individuals assessed as "high-risk" for complicated bereavement. Larger programs employ spiritual care coordinators to facilitate this care by specially trained volunteers. Many programs also employ health care professionals from a variety of disciplines as bereavement counselors or coordinators.<sup>83</sup>

### *The Chaplain*

The next member of the interdisciplinary team is the Counselor or Chaplain. The chaplain also plays a vital role in the care of the hospice patient by helping and assuring that the patient's spiritual and holistic needs are met. This entails that the chaplain must be in constant communication with not only the patient but with the whole interdisciplinary team of health care professionals.

The chaplain brings about a sense of security and comfort to the family because at this point many existential questions arise from the stress and concern for the welfare of the patient and family members. The chaplain helps the family by supporting them and easing any concerns that they may have about the afterlife and for any unresolved personal issues that may need attention.

One of the most important roles that the chaplain plays is that of accompaniment. The patients have a never-ending thirst for someone who can ease their pain and suffering and they are always seeking help and support to mediate their concerns.

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<sup>83</sup> Ibid, 24.

The role of the chaplain is essential to the patient because he or she is able to somehow mediate the transition to the afterlife while preserving the personal integrity of the patient's own assessment of what the future holds for them. In the case of Cuban patients the chaplain tries to help people who have been driven from their homeland.

Many times the patients may have a vague or no idea of what to expect in this difficult time in their lives. The chaplain listens to the cultural context of the patient's own narrative and hopes to project the understanding of the future guided by the universal values that inform every tradition as well as the unique ones.

The chaplain's moral virtues are essential traits according to Richard M. Gula, S.S. While he mentions a number of these, "holiness" is one that the pastoral minister should aspire to:

Since the pastoral ministry mediates the presence of the divine and promotes the mission of Christ through the church, we must be firmly committed to developing a relationship with God in Christ through the Spirit in the church. The minister who is "holy" is one who finds direction from a relationship of love with God, and who nurtures this relationship through the practice of private prayer, public worship, and the practice of spiritual disciplines that express an ongoing life of openness to the Holy Spirit. The covenantal virtue of holiness is manifest in the person who is genuine, non-defensive, detached, flexible, accepting of diverse experiences and people, critically self-aware, and striving for balance in his or her life and for justice in the lives of the people.<sup>84</sup>

The chaplain is one of the key members of the team that helps to provide spiritual care and support to the family, the infirm, and even the hospice team. Pastoral caregivers are enablers regardless of the faith tradition, medical condition, or ethnicity.

The use of theology is what makes pastoral care distinct from other forms of care. Pastoral caregivers can cast in high relief questions about religious faith and meanings, questions that are often ignored or undervalued by those using medical

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<sup>84</sup> Richard M. Gula, S.S. *Ethics In Pastoral Ministry* (Mahwah, New Jersey, Paulist Press, 1996), 146.

and psychological perspectives. Pastoral caregivers can assess theologically how people put into practice the values that form their religious orientation by asking questions like these: Do their religious faith and practices give people new life, or exacerbate already painful circumstances? To what extent do people experience the fullness and complexity of God's presence with them?<sup>85</sup>

The pastoral care professional ministry is routinely related to the ministry of presence or accompaniment. However, one of the most relevant roles a chaplain provides is that of a mediator. The chaplain helps the patient and the family members to tell their stories.

The patients and family members not only want their physical or psychological pain to be treated, but they also have a story to tell. The narrative of their lives will become one of the major factors dealing with the spiritual aspect, thus facilitating their story-telling and allowing the patient or family members to be heard.

It is by listening that the hospice teams in Catholic Hospice are unique in nature because they are made up not only of caring professionals but of employees of many different cultures suited to the type of people we serve. In the following section we will look in more detail at the hospice ministry offered by Catholic Hospice in Miami, Florida.

### **Catholic Hospice of Miami, Florida**

Catholic Hospice is an integral part of the Archdiocese of Miami and has been serving our communities since 1988.<sup>86</sup> The same provides a multitude of services to

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<sup>85</sup> Carrie Doehring, *The Practice of Pastoral Care* (Louisville, Kentucky: Westminster. John Knox Press, 2006), 111.

<sup>86</sup>Information provided on Catholic Hospice Website at <http://www.catholichealthservices.org/catholic-hospice/catholic-health-services.aspx?nd=26> (accessed on Dec 31, 2014).



patients who are terminal and/or physically declining. Many of the personnel who help provide some of these services are: nurses, medical doctors, social workers, bereavement counselors, chaplains, volunteers, etc. Each one of them serves in their capacity to provide the best care possible to the people who are dealing with a very difficult situation and outcome.

Catholic Hospice is a non-for-profit entity, and this fact has been one of the backbones of the company, because they are more concerned in providing the best care possible to the patients and family members, rather than worrying so much about being a profitable company. The Catholic Hospice brochure called *A Sacred Journey* talks precisely about this life-changing experience in the following manner:

Though death remains a mystery, the dying process is one that all beings must eventually experience, regardless of culture or religious orientation. This process is unique for each individual. Medical knowledge available in the nineteenth century created a culture when most people died at home surrounded by their loved ones. Modern day technological advancements and aggressive curative treatments provide options, and this has increased the number of those who now die in hospitals. Medical advances also allow patients the choice to remain in the comfort of their homes, free of pain. Caring for a loved one at home not only provides an environment conducive to maintaining the patient's dignity, but also affords the opportunity for history, warmth, and family unity.

Death is often traumatic not only for the dying individual, but for their loved ones as well. Often times the dying and the loved ones feel scared, lonely, and misunderstood. It is not uncommon for the caregiver to feel stress, resulting in anger, depression, and the need to negotiate for their loved one to live one more hour, one more day, and even one more week. There is also guilt associated with the thought of giving up or not having done enough. These feelings are normal and, yes, they are very common.

Catholic Hospice's goal is to give the dying the freedom to face death on their own terms. This is not the time to change his/her belief system, nor is it the time to win arguments. The choices you make during this time are the memories you are creating for the future. With the help of the caring professionals at Catholic Hospice, you are not alone. We want you to know that we want your experience to be less frightening and one you will remember with love.<sup>87</sup>

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<sup>87</sup> Catholic Hospice, *A Sacred Journey* (Miami, FL: Pamphlet, 2010).

Catholic Hospice's goal is to provide the best support for patients and family members by a team of caring professionals, through support, education, and information, so people can enjoy and treasure this time with their loved ones. As we understand the dying process, according to the Catholic Hospice, the function of the biological systems will start to diminish. Sometimes this is due to health issues and in other occasions it may be due to advanced age.

Caring professionals have discovered that this process varies in different people. On occasions the change may have to do with limited mobility. In others it may have to do with loss of appetite. During the dying process the bodily functions will continue to change, and sometimes we can see a sudden weakness from one day to the other.

The ability to tolerate some foods will diminish, and sometimes the patient will experience difficulty when swallowing, due to the weakness in the muscles in the human body. This creates a problem for the patient who cannot swallow food or even drink. This happens as a direct result of the bodily changes in the metabolic system as well as the digestive function. In the end there will be a total inability to eat and to drink when death is near. What can we do when these things happens?

This is precisely the goal of Catholic Hospice: to provide and attend the physical, emotional, and spiritual necessities of the patients and their families during the dying process. The brochure that is given to the patients and family members addresses some of the different people impacted by this reality: patients, families and employees.

### *Patients*

The patients of Catholic Hospice are from the different spheres of society. Even though many different countries and belief systems are present in the Catholic Hospice patients, more often than not they are of the Roman Catholic faith. The number of Catholic people needing services creates a logistical problem because of the lack of ministers able to provide the sacrament of the Anointing of the Sick.

Another problem the Catholic Hospice is facing is that most of the patients are of a Hispanic descent, and thus need bilingual professionals. Most patients prefer not only a Catholic priest chaplain, for example, but one who understands their vernacular language and if possible, who comes from the same town that they came from. Undoubtedly, the minister who fills all of these requirements and qualifications will be in a better position to be accepted by the patient and family members. This makes the Catholic belief system the most likely common denominator between so many different cultures and countries of origin.

### *Families*

The families express their pain and frustration in so many different ways. The sadness and anguish at seeing their loved ones slowly vanishing away without any recourse are devastating. The anxiety experienced by the family members when they try to provide what is necessary to quench the thirst and to satisfy the hunger while quieting the pain for the family member who is about to depart forever, is ever present.

The soul-searching of those who try to make sense<sup>88</sup> of what is happening based upon their relationship to the patient will impregnate the family in different ways. Then the depression created by the loss, the emptiness, the disbelief of what just transpired are some of the human realities that family members experience during the process of death and mourning of their loved ones.

The dying process influences the families as they realize the vulnerability of their own humanity. I have seen many families who stand together while others do not. Conflict is other real-life issue in regard to the families because it has to do with the best care, financial obligations, and even inheritances. In any event, Catholic Hospice plays a vital role as a catalyzing agent between all of these factual realities in the world of hospice ministry.

### *Employees*

The employees of Catholic Hospice are second to none. I have been in ministry for the past thirty years and I have never seen professional people so dedicated to a common goal as the employees of Catholic Hospice. Each employee is co-dependant to the others because we need each other for the health and moral support of our patients and family members. Each employee has a specific job to perform with multiple responsibilities.

As you would anticipate, many of the employees unavoidably will develop companionship ties with the patients and their respective family members. Many of us

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<sup>88</sup> Viktor E Frankl, *Man's Search for Meaning: an Introduction to Logotherapy* (Boston, MA: Beacon Press, 1963).

cry every time we lose a patient. The problem that we have been experiencing in Catholic Hospice is that many of the employees do not stay very long. Sometimes this is due to the nature of the difficult job of staying focused since little by little the pain and the suffering overcome the employee to the point that they cannot take it anymore.

Another problem is the salaries, which are some of the lowest in the industry. However, I still believe that the main reason is the adversity that employees are confronted with, the unavoidable outcome of the patients, and the inability to find a response that will satisfy not only the family and the patients, but themselves. The fact remains that the turnover is extremely high, and it is very difficult to replace the people who leave. In the meantime the remaining employees have to carry the load of the missing ones for very long periods of time. We have even seen new patients who were former employees or volunteers that may have been affected by depression.

The consequences of the Cuban migration due to Castro's revolution and subsequent regime would have devastating consequences for many families who lived such a difficult situation. I believe it is very important to somehow summarize some of the history lived by the Cuban patients who were impacted by these historical events. This will give a better perspective on the pain and the suffering of our Cuban brothers and sisters who are now afflicted by their physical limitations and are dying away from *la patria*.

## The Cuban Patients

The depression and sadness created as a direct result of exposure to the pain and the suffering of the patients where human dignity is tested up to the inexplicable. Cuban exiled patients are also confronted with a multicultural society and different traditions compounded by the multitude of ideologies.

The arrival of Cubans to Miami coincided with the 1959 revolution and the need to find a new place to live away from the Castro regime. The Cuban exile community found a new home along with the difficulties in a new country with its challenges. Catholicism was imposed as the “official and exclusive religion” in Cuba during Spanish rule, according to David A. Badillo.<sup>89</sup> He adds: “Cuba virtually abandoned Catholicism and turned to other ideas, including Protestantism, anarchism, and socialism.”<sup>90</sup>

During the Cuban revolution about 84 percent of Cubans considered themselves Catholic but by the year 1998 this figure had dropped to only 43 percent<sup>91</sup> due to many factors including the Castro regime. The Church had lost a large number of its clergy, falling from 700 priests and 3,500 religious in 1959 to 270 and 577 respectively forty years later.<sup>92</sup>

Castro’s resolve against the churches and any position opposed to communism meant that by February of 1959 Catholics and other Christians felt the pressure. In 1961

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<sup>89</sup> David A. Badillo, *Latinos And The New Immigrant Church* (Baltimore Maryland, The John Hopkins University Press, 2006), 93.

<sup>90</sup> Ibid, 93.

<sup>91</sup> Ibid, 94.

<sup>92</sup> Ibid.

a failed attempt to overturn Castro failed, and the fate of Cuba would be sealed for several decades thereafter.

The revolutionary regime started to take political prisoners as well as faith representatives since their views were contrary to the Castro's vision of a "free" Cuba. By 1966 many other religious restrictions were added by the Castro regime impeding the "right of male and female religious to walk the streets in a clerical habit."<sup>93</sup> Many religious observances were abolished and replaced as "national holidays" such as "Bay of Pigs Day" in April.<sup>94</sup>

Many of the families were forced to leave Cuba, leaving behind just about everything they had. The financial crisis compounded by confusion and the desperation of losing their homeland to tyranny were very difficult to bear. Faith again had become their old friend in the Miami area. Badillo<sup>95</sup> explains:

The Diocese of Miami had been established in 1958, one year before the ascent of Castro, and had developed outreach programs for Mexicans and Puerto Ricans in the diocese, primarily migrant farm workers. But it had done little with Cubans prior to the revolutionary-era exile waves. There had been little need to actively incorporate permanent residents in distinct church structures then or even during the mid-50s, when Miami served as a financial base for base for supporting Batista. During the mid-1950s, Archbishop Joseph P. Hurley of St. Augustine had sent several U.S. priests to Spain to learn Spanish. Aided by the national Catholic organizations, the diocese became a major distributor of social services to exiles after 1959. Established in the first three years after the formation of the Miami diocese were several new parishes, a minor seminary, a center for the elderly, and the Centro Hispano Católico.<sup>96</sup> In March 1959, Bishop Coleman

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<sup>93</sup> Badillo, *Latinos And The New Immigrant Church*, 98.

<sup>94</sup> Ibid.

<sup>95</sup> Ibid, 99.

<sup>96</sup> Bryan O. Walsh, *Religion in the Cuban Diaspora: A Critical Profile* (Paper delivered at the 2000 meeting of the Latin American Studies Association, Miami (March 2000), quoted in David A. Badillo, *Latinos And The New Immigrant Church* (Baltimore Maryland, The John Hopkins University Press, 2006), 99.

Carroll approved Monsignor Bryan O. Walsh's proposal and announce the opening of the Centro in some vacant classrooms in Gesu School in downtown Miami. It was the only social agency with a bilingual staff when Cuban refugees began to arrive in large numbers in the summer of 1960. The Centro handled some 450,000 exile cases from October 1959 to June 1968. It helped the early group of wealthier exiles during the first year. The U.S. nuns staffing it had all worked in Cuba for many years and knew many of the refugees personally.<sup>97</sup>

The appointed bishop as well as the Miami Cuban community began the quest to save Cuban children from the influences of communism and started "Operation Peter Pan" (Operación Pedro Pan) blessed by the U.S. government.<sup>98</sup> Approximately fourteen thousand children between 1960 and 1962 were taken out of Cuba and many ended up in orphanages, with foster parents, and on many occasions remained unable to be reunited with their parents. This fact haunted the reality of the Cuban community here in Miami during the exodus.<sup>99</sup>

By 1964 the San Juan Bosco Church became a Cuban national parish.<sup>100</sup> By 1966 Archbishop Carroll challenged Cuban American Catholics to build a holy place to la *Virgen de la Caridad del Cobre*<sup>101</sup> on a location next to Mercy Hospital in Miami. Monsignor Agustín Román who came to Miami a year earlier, was entrusted with raising

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<sup>97</sup> Badillo, *Latinos And The New Immigrant Church*, 99.

<sup>98</sup> Ibid, 101.

<sup>99</sup> Ibid. Some of the patients in Catholic Hospice have been former children who were sent to the United States during the "Pedro Pan Program" who never saw their parents or even their family members ever again!

<sup>100</sup> Ibid, 103.

<sup>101</sup> Ibid.



the funding and building of the *Ermita*.<sup>102</sup> With many contributions and the help of many volunteers the chapel building was finally dedicated by the end of 1973.<sup>103</sup>

The mass exodus from Cuba was welcomed by cities like New York, Caracas, Madrid, San Juan and others.<sup>104</sup> In South Florida was also part of the influx of Cuban families:

In South Florida, refugees initially resided together in the Little Havana area of Miami, but residential patterns changed as they found jobs, gained income, and sought permanent homes. Wealthier Cubans, for example, eventually settled in Coral Gables or perhaps Miami Beach, while working class Cubans moved to Westchester and Hialeah or remained in the Calle Ocho area.<sup>105</sup>

In 1980 we experienced in South Florida one of the largest migrations from Cuba from the Port of Mariel. Many of these families were extremely poor and others had been incarcerated or treated for mental illnesses. This brought about a new challenge in the *exilio* community because of the special needs of these new people.

Pastoral care for individuals who have been mocked and rejected not only by the communist party in Cuba, but also by more affluent Cubans already established in the South Florida community caused marginalization to some extent. Many were scattered throughout the United States and were frantic to find the whereabouts of their family members:

In the Archdiocese of Miami, the pastoral care of the “Marielitos” took two distinct directions. First, there was the obvious need to deal with those refugees settling in South Florida. Although many had located in New Jersey and

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<sup>102</sup> Badillo, *Latinos And The New Immigrant Church*, 104.

<sup>103</sup> *Ibid*, 104.

<sup>104</sup> Gerald E. Poyo, *Cuban Catholics in the United States 1960-1980* (University of Notre Dame Press, 2007), 214.

<sup>105</sup> *Ibid*, 215.

California where established Cuban communities existed, most chose to stay with relatives or friends in the Miami area. Second, the archdiocese became the “central switchboard” for communications between those held in detention centers all over the country and their families who often did not even know that they had arrived. The office of Bishop Román received thousands of letters asking, “Where is my mother? Where is my sister? I am sending you their names. Please, Bishop, find them!”<sup>106</sup>

I would characterize the many contributions of the Cuban community as unique in nature. They have battled all winds that were trying to undermine and squelch their efforts but they have overcome. Many new leaders rose to the occasion and helped the community get new footing in South Florida.

The Cuban *diáspora* continues to be a prevalent reality throughout the South Florida communities. Gerald E. Poyo refers to this phenomenon as the “international diáspora”:

The integration of Cubans into the United States as ethnics proceeded in an almost inevitable manner, given the circumstances, but their exile experience also contributed to another important dimension of their reality. The communities of Cuban exiles that formed not only in the United States but in many other regions, including Puerto Rico, Venezuela, Mexico, and Spain—to name the most important—created an international diasporic reality.<sup>107</sup> On the one hand Cubans often lived in insular communities, but on the other the exile dimension kept the scattered communities in touch, encouraging an international solidarity, with Miami at its heart. Cubans in the *diaspora* adapted to the realities of their

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<sup>106</sup> Adele J. Gonzalez, “The Pastoral Care of *Los Marielitos*,” in *Bringing Boundaries: The Pastoral Care of U.S. Hispanics*, ed. Kenneth G. Davis & Yolanda Tarango (New York: The University of Scranton Press, 2000), 57.

<sup>107</sup> Thomas Tweed, *Our Lady of Exile: Diasporic Religion at a Cuban Catholic Shrine in Miami* (New York: Oxford University Press, 1997), 84, quoted in Gerald E. Poyo, *Cuban Catholics in the United States 1960-1980* (University of Notre Dame Press, Indiana, 1990), 279. In Poyo’s footnote in relation to Tweed, he states: “Tweed defines diaspora as “a group with some shared culture which lives outside the territory that it considers its native place, and whose continuing bonds with land are crucial for its collective identity.” Also, they “share a language, even if some members of the group also speak another tongue as well, and they appeal to common symbols (such as flags, heroes, or parades), even if they struggle among themselves over their meaning. Most important, these migrants symbolically construct a common past and future, and their shared symbols bridge the homeland and the new land.”

respective places of residence but also maintained strong relations with each other based on their exile interests.<sup>108</sup>

The dichotomy of the early exiles and the *marielitos* has impregnated the very hearts of many people in South Florida. The interminable suffering of the families who experience extreme poverty and the fight for the rights to live in freedom are very much a contrast of *claros y oscuros*. The emotional impact compounded by the literal physical scars of the exiled community are evidence of the struggles lived by many families.

The narratives of the Cuban people seeking to be heard and to be honored by those who have underestimated their sacrifices will endure for eternity. I have felt their pain because one day I decided to hear their cry and to denounce the injustices done to innocent people by a dictatorship government. How can we look the other way? I want to look into the very eyes of human existence with the colors of the experiences lived by those who have been marginalized, punished, and dismembered. Now they are departing life with perhaps mixed feelings about the whole situation full of open and sometimes unfinished narratives.

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<sup>108</sup> Gerald E. Poyo, *Cuban Catholics in the United States 1960-1980* (University of Notre Dame Press, Indiana, 1950), 279.

## CHAPTER 3

### OPENING OF THE CULTURE, AESTHETICS AND HOSPICE STORIES

The "ministry of life"<sup>109</sup> is the term I use to describe how our whole life becomes a ministry, where we become aware of our needs and the needs of others and look for every opportunity to announce and proclaim the mercy of God. This ministry is enhanced by the presence of aesthetics even in life and death situations. I will be looking into the life of a widely recognized artist from Puerto Rico named Francisco Oller and his painting *el Velorio* (the Viewing). In order to analyze the painting I will utilize an epistemology rooted in the Caribbean culture's response to the imperative of death. The fiat of defiance will continue to be born in a community which perceives death in a very special way (although Caribbean's are not the only ones to perceive death this way), because they refuse to succumb to the idea of seeing death as the final destination.

The colorful way in which the Caribbean culture mediates its pain aesthetically allows it to impregnate the air of solitude with a genre of tradition. Thanatologies<sup>110</sup> based on the beliefs and wealth found in diverse popular religiosities have taken many different forms and perspectives, but thanatology has rarely been studied through the eyes

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<sup>109</sup> The "ministry of life" refers to my belief that we live a life with a purpose and God is in the midst of our daily living. God prepares us in such a way that our whole life becomes a ministry, where we become aware of our needs and the needs of others and look for every opportunity to announce and proclaim the mercy of God.

<sup>110</sup> Thanatology (from Greek **thanatos**, "death") the description or study of death and dying and the psychological mechanisms of dealing with them. Thanatology is concerned with the notion of death as popularly perceived and especially with the reactions of the dying, from whom it is felt much can be learned about dealing with death's approach. Thanatology also examines attitudes toward death, the meaning and behaviors of bereavement and grief, and the moral and ethical questions of euthanasia, organ transplants, and life support. Encyclopedia Britannica: Death Science <http://www.britannica.com/EBchecked/topic/589963/thanatology>.

of Caribbean Aesthetics. The *locus theologicus*<sup>111</sup> of this chapter is the Cuban exiled community and in particular those members who are perishing away from their homeland. Caribbean Aesthetics can be seen as an instrument to allow us to better grapple with the reality that our exiled Cuban brothers and sisters are experiencing.

The work of Alejandro García-Rivera provides a good understanding of what he calls the *Community of the Beautiful*<sup>112</sup> in his book of the same name. His theology of aesthetics departs from its contemporary meaning as a philosophy and science of the beautiful:

It may surprise that the term “aesthetics” did not appear in its contemporary meaning, i.e., the philosophy and science of the beautiful, until the eighteenth century. Alexander G. Baumgarten coined the term in 1735 to describe what he called the new “science of sensory cognition.”.... The term is found in Alexander G. Baumgarten, *Meditationes Philophicae de Nonnullis Ad Poema Pertinentibus* (1735). Today, the meaning is expanded to include questions about art and its nature, conditions, and consequences. This meaning makes aesthetics equivalent to the philosophy and psychology of art.<sup>113</sup>

Theological Aesthetics possesses a religious dimension but stops short of the “absolute origins of God’s beauty,”<sup>114</sup> according to García-Rivera, for the latter is the subject of theology proper. He explains the interaction between *Beauty* and the *beautiful*:

Theological aesthetics addresses this modern theological crisis [the crisis between the connection of the Beauty and the beautiful] by doing justice to these twin aspects of Beauty: its absolute origins in the transcendent God who nonetheless wishes to be known and loved by his human creation. Theological aesthetics attempts to make clear once again the connection between Beauty and the

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<sup>111</sup> The *locus theologicus* refers to the point or place of departure for making theology (its source). The Cuban exiled community's experience *ipso facto* includes many people and can be characterized as a paradigm for other communities who are living in the United States of America.

<sup>112</sup> Alejandro García-Rivera, *The Community of the Beautiful* (Collegeville, Minnesota: The Liturgical Press, 1991).

<sup>113</sup> *Ibid*, 9.

<sup>114</sup> *Ibid*, 10.

beautiful, between Beauty's divine origins and its appropriation by the human heart. In doing so, theological aesthetics discloses the importance of restoring the connection between Beauty and the beautiful which, in our day, has been severed. Human life has a worth and a dignity which only Beauty can reveal through the beautiful. Without the language and experience of Beauty and the beautiful, the Church will find difficult the expression of her faith, much less her conviction of the dignity of the human person, and, even less, be a sacrament to the world. There is, however, a more personal and concrete reason for a reconsideration of the organic connection between Beauty and the beautiful. It is the experience of a particular living ecclesial tradition, the Latin Church of the Americas, whose voice may add a guiding light in the present darkness [the present darkness means that the connection between the Beauty and the beautiful has been severed] of the Church's pilgrimage.<sup>115</sup>

The role of the Hispanic Church in the face of its abandonment by the institutional Church is to bring beauty again into the daily living of the Church. Alejandro García-Rivera explains this very reality and pinpoints the place where beauty really resides: "God's own art, the natural beauty of Creation... Theology discerns the beautiful in the face of a crucified man through the lens of the community that gathers around the foot of his cross... If justice and beauty are reconciled in the following and accompanying of Christ, then "imitation Christi" does not simply refer to our need of salvation but also to the way of salvation."<sup>116</sup>

According to Christian faith, we live a life full of meaning and regardless of what happens in this life, God is in control. The hope that we find in the unknown is lit by the faith of the believer. The theme in the painting *El Velorio* is the phenomenology of death where death itself is at the very center of the crisis situation. Dr. Julián Marías, a well-known Spanish scholar, explains:

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<sup>115</sup> Ibid, 11-12.

<sup>116</sup> Alejandro R. García-Rivera, *A Wounded Innocence: Sketches for a Theology of Art* (Collegeville, Minnesota: The Liturgical Press, 2003), 5, 85.

Before anything else, birth. Naturally, this is not an act of mine; but neither is it a fact of my life; as a fact, only the birth of other people exists, which is a happening in the world, and as such, absolutely different from my own birth. My birth is, then, *outside* my life, is prior to it, and I encounter it as an *absolute past*.... With regard to death, it will be well to proceed with extreme caution and precision, in order not to confuse what I actually encounter and is a problem to me, with the interpretation of it.<sup>117</sup>

The interpretation of death dwells in the mind of the living because we don't know what is in the mind of the dead. In the case of the work of Francisco Oller, the dead person is a child. What can be in the mind of the parents and family members whose child has departed? It is extremely important to look at death for what it is, irrefutable eternal physical and material separation with undeniable consequences. The irony of death resides not in death itself because death really doesn't exist; death is actually total depletion of life and alienation for the ones who are left behind. Julián Marías continues to explain what he calls the stages of death:

In the first place, we must distinguish three stages: the death of an individual fellow-being (the only kind of death which presents itself to me as an immediate and primary fact, and therefore raises ulterior questions); the death of human-beings *in genere*, i.e. of every human being (which is the content of a belief), and my personal death, which, so far, is not there, and which appears to me of course as latent, in the concrete form of the future.... Death is indeed that—in the first place; but it is here that the problem begins. The death of one of my fellow-men is, as we saw, something that happens to me, in the sense that I am left alone without him [her]; .... Death, the negative significance of which—as loss, absence or solitude—is clear, appears as incomprehensible and enigmatical from the positive point of view. To understand it as death, I need to put myself in the place of the man [woman] who dies, and see it from his [her] point of view [although this cannot be done in reality at least we will have an idea of what transpires in other people's lives when confronted by death]; and as I find, alongside of the fact of other people's dying, the belief that all men [and women] die, and therefore I will have to die myself, the attempt to fathom my neighbor's death is at the same time an imaginative anticipation of my own death.<sup>118</sup>

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<sup>117</sup> Julián Marías, *Reason and Life: The Introduction to Philosophy* (New Haven: Yale University Press, 1956), 372-373.

<sup>118</sup> *Ibid.*, 373-374.

As explained in chapter one, I will be analyzing culture as a point of entry to better understand the realities and the pastoral situations at hand, by taking semiotics into account. Robert Schreiter calls for a "long and careful listening to a culture to discover its principal values, needs, interests, directions, and symbols."<sup>119</sup> The painting of Francisco Oller is extremely full of Caribbean cultural elements of the time which the artist was able to capture and to give a glimpse of history as well as aesthetics. Again, semiotics will play a vital role in analyzing the very heart of the cultural elements that can be found in Oller's painting *El Velorio*.

### **Who was Francisco Oller?**

Spaniards' descendants, who settled in Puerto Rico during the colonization years, were no longer called Spaniards by their countrymen and women but they started to be called *criollos*. The Spaniards started to recognize that *the isleños* were different in many of their customs. Francisco Oller was born in Bayamón, Puerto Rico on June 17 of 1833 and died on May 17, 1917 in Santurce, Puerto Rico;<sup>120</sup> he was the son of Cayetano Juan Oller y Fromesta and María del Carmen Cestero Dávila.

Oller began to study art at a very young age. He moved to Madrid, Spain, to continue to study painting and was influenced by Impressionism as a form of art in his paintings. He studied at the *Academia de Bellas Artes de San Fernando* and some years later he went to Paris, France.

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<sup>119</sup> Schreiter, *Constructing Local Theologies*, 28.

<sup>120</sup> Antonio Martorell, *El Velorio: Novela-Martorell's Wake* (San Juan, P.R.: Ediciones R.I.P., 2010), vi.



When Oller turned twenty-four, he traveled to Madrid to study at the Academia de Bellas Artes de San Fernando, where he studied with painter Federico de Madrazo. Seven years later, he moved for a time to Paris. When he returned to Puerto Rico, he took part in several exhibitions, receiving silver medals. Still young, and full of enthusiasm, he returned to Paris, where he studied in the atelier of famed painter and teacher Thomas Couture. Oller also appears registered as a copyist in the Louvre Museum, and he is known to have worked at the Académie Suisse and L'École Impériale et Spéciale de Dessin...was in relationship with Gustave Courbet...was friends with Camille Pissarro, Frédéric Bazille, Auguste Renoir, Claude Monet, Alfred Sisley, and many others.<sup>121</sup>

Historically, Oller has been considered one of the most important Puerto Rican artists of the XIX century. He is also known for many beautiful paintings such as: *El Coronel Contreras en Treviño (1878)*, *Un Mendigo (1881)*, *El pleito de la herencia (1854-1856)*, *Retrato de Manuel Sicardó (1866-1868)*, *El molino (1875)*, *Las lavanderas (1887-1888)*, and *El Velorio (1893)*, among many others.

### *El Velorio*

*El Velorio* was finished in approximately 1893 and the painting depicts a scene of a funeral viewing that used to be called *el baquiné*. The painting of *El Velorio* is located at the University of Puerto Rico Museum of Anthropology, History and Art, in Río Piedras.<sup>122</sup> In the painting a child appears to have died at a very young age and to be considered an angel because of the child's innocence. The celebration of *el Velorio* was very much alive in Spain where it took root and later spread in different forms throughout

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<sup>121</sup> Ibid, vii.

<sup>122</sup> Osiris Delgado Mercado *Tragedia y Glorificación de El Velorio de Francisco Oller* (Hato Rey, Puerto Rico, Publicaciones Puertorriqueñas, 2009), 98.

the New World.<sup>123</sup> However, *el baquiné* may have had an African genesis and was later practiced by the slaves brought over to the islands where it was eventually adopted by the dominant culture in some of the more rural communities as a form of popular religiosity. Even today we find some popular songs making reference to this very old tradition, as it is the case of a famous song named “*Che Che Colé*” from the Puerto Rican music group of Willie Colon and Héctor Lavoe:

Vamos todos a bailar  
(Let's all dance)  
  
al estilo africano  
(In African style)  
  
si no lo sabes bailar  
(If you don't know how to dance)  
  
yo te enseñaré mi hermano.  
(I will teach you my brother)  
  
A ti te gusta la bomba  
(You like the “bomba”)  
  
y te gusta el baquiné  
(And you like the “baquiné”)  
  
para que goces ahora,  
(So you can rejoice right now)  
  
africano es el bembé.  
(African is the “bembé”)...

We can observe in the portion of the song that was sung by these Puerto Rican singers that we have a potpourri of different elements of the Caribbean culture: the Spanish, the African, the *baile*, the *música*, and the *canCIÓN* (all in one, the dance, the music, and the song). In a very similar fashion we discover that Oller's painting echoes

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<sup>123</sup> Internet: <http://musica.uprrp.edu/lalvarez/velorio7.html> , 3.

the Hispanic Caribbean traditions expressed by the *brocha* (brush) of aesthetics in the painting.

The *baquiné* celebrates the early departure of a young child because the baby was not going have to suffer life as people knew it. The child's soul was going to be free of disease and sickness; however, ironically the child had died precisely because of these. Denial is very much present in the lives of those afflicted by terrible diseases that claim the life of the patients and the peace of the family members.

The painting depicts a scene from everyday life of the Puerto Rican working class. Since I was born in the countryside of Puerto Rico, I am very familiar with the scenery as well as the participants in this painting. I cannot help but identify myself with the persons depicted on the canvas and also cannot help but be with those afflicted by the pain and the suffering of the patients of hospice ministry, particularly the exiled Cuban community.

In the same way that we understand that the Word of God was written with a purpose, the painting from Francisco Oller was also made with a purpose. Oller is able to capture a popular religious tradition that mediated the pain and the suffering that accompanied a family that dealt with reality of a child who had just died at such a young age.

The echoes of pain and sorrow are ever present in the lives of the sick and the infirm in the exile community, and the reverberations of pain and mourning are also present in the painting regardless of the environment depicted, i.e., the food and the music. Is a very sad day no matter how strong the sun was shining if one faces a casualty of life or should we say a casualty of death?

The departure of a loved one should not be taken lightly, particularly when you look back *a la tierra que me vió nacer* knowing that you will never see it again. What a travesty; a world has to deal with the casualties of life and of death. In the death of a child people must face human finitude, despair and the uncertainty.

The artist paints with the strokes of daily existence, coloring the world he knows so it can be viewed and preserved for posterity; this enables us to see into the past of our ancestors. I once asked a question: *Donde están mi abuelito y mi abuelita?* And someone answered me from the distance: they are gone! How can I absorb (accept) the fact that I cannot see them again? These are some of the thoughts in the hearts of the people who experience traumatic losses.

Here is where I find the promise of popular religiosity: when the Church cannot answer with honesty about the inexplicable, Christ answers with a cross, a cross of popular dimensions and the sacrifice of the Son of God ready to intervene in the lives of those who could not help themselves.

In order to really understand the painting and the characters, it is very important to be immersed in the cultural context. According to Roberto S. Goizueta, we must be familiar with and have walked with the people whom we are trying to help so that we can understand their suffering: “If affective, aesthetic union with the poor is the most profound way of knowing the poor as persons, and if this affective, aesthetic union can only take place between and among concrete, particular persons, then one cannot know the poor or perceive reality from the perspective of the poor unless he or she is literally and physically walking with particular poor persons.”<sup>124</sup>

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<sup>124</sup> Roberto S. Goizueta, *Caminemos Con Jesus: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, New York, Orbis Books, 1995), 207.

The same is true with the painting as well as the Cuban community when dealing with their reality. I know that someone with a Jewish background will find it very difficult to understand the celebration of the *baquiné*, particularly the *lechón* that someone just roasted *a la varita*. Our own prejudices sometimes help obscure the reality before us and the sadness of the people who are waiting for us to listen to their cries. This is Caribbean culture at its best, the sound of the music—*el tambor, el cuatro el cencerro, el guiro, y la maraca*—because the way of life of the Caribbean people allows them to seek refuge and identity in God’s presence and popular religiosity. The art of accompaniment is very much present in the silent language of the people and also in their celebrations:

Consequently, the act of accompaniment is never the act of autonomous individuals; it is by definition a walking “with.” Human interpersonal action is never simply a “doing” but is also always, at the same time, a “being with” and an “interacting with.” It is a communal action: “let us walk with Jesus.”<sup>125</sup>

Caribbean Aesthetics go beyond anyone’s expectations, allowing us to understand the inexplicable just as a good symbol will do and to search the deepest feelings and meanings of human existence in the face of eternal physical solitude for the ones who are left behind.

The painter explores each of the faces of the participants with their different attitudes while not conforming to the situation at hand. Oller is speaking of the different levels of human interactions in the face of the existential issues.

At first glance, we see people gather in a house on the hillside or mountainous terrain of Puerto Rico where a *baquiné* is being celebrated. The time is early afternoon at the earliest. I conclude this because traditionally the roasted pig is cooked extremely

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<sup>125</sup> Ibid, 206.

early in the morning, almost at sunrise, but it takes between seven to eight hours to cook it *en la varita*. The man comes into the picture with the pig still on the stick and appears to just have arrived.

Outside on the field the shadows created by the people and the trees appear to be on the right. This probably means that the artist's perspective is from the Southeast looking to the Northwest.



Francisco Oller y Cestero (1833-1917)  
El Velorio, 1893  
Oil on canvas 96" x 156 ½" (224 x 397 cm)  
Collection Museum of History, Anthropology and Art  
University of Puerto Rico

Used with Permission of The Museum of History, Anthropology and Art of the University of Puerto Rico (Appendix E)

The house has a porch and appears to be located on a hill. The home appears to be very humble, but it is not a house a slave would live in. All the slaves with the exception

of one are staying by the doorways, suggesting not only humility but also the unjust social structure of the day. Additionally the painting seems to depict a house that has been made out of local materials.

Looking from the right to the left of the painting and from the bottom to the top, we find on the right a person who appears to be the mother of the child who just died. She appears to be very disturbed and the smile reflects<sup>126</sup> this fact. The baby has been *amortajado* with flowers adorning the creature as if he were part of the table decoration. We find that some of the flowers that adorned the baby earlier are also found on the floor. The toddler seems to be a boy because of the color of the shoes he is wearing.

The scene depicts the music, the alcohol, the slavery, the poverty, used by everyone to mock death; in other words, we are face-to-face with the *narrative of the lie*.<sup>127</sup> In the whole picture only one person is actually looking at the child: a very old sick and tired slave who carries *un bastón* and is wearing no shoes. The feet are oversized, implying that he has walked barefoot for a long time over the streets of misery. There is no glamour in his dull clothes and he can't even afford a hat.

All of the slaves are rendered in the painting with very dark skins. They are not just people of color but they are almost faceless. The old black man is looking at the baby who appears to reflect light from the inside even when oxygen has stopped flowing

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<sup>126</sup> The mother's "smile reflects her grief," Francisco Oller appears to convey this fact, because is extremely similar to the type of smile you see when someone has lost a loved one. If you look closely, the mother is actually looking at the spectator who is looking and is outside of the painting.

<sup>127</sup> The *narrative of the lie* refers to the tendency of human beings to obscure and neglect the *narrative of the truth* in order to confront extremely difficult situations. The human inability to change the crude and difficult reality of the death of a loved one creates the environment where we tend to romanticize the situation being endured, thus making the situation more attainable. Many people find refuge in abusing drugs; others may in fact immerse themselves in the robes of religion by means of popular religiosity. In any case the fact remains that we as human beings are overwhelmed by our insecurities when unable to change the critical situations brought about by our human finitude. The things that we have no control of will continue to create tension in our lives.

through his veins. James H. Cone speaks about God's liberation for those who are oppressed:

Because human liberation is God's work of salvation in Jesus Christ, its source and meaning cannot be separated from Christology's sources (Scripture, tradition, and social existence) and content (Jesus in his past, present, and future). Jesus Christ, therefore, in his humanity and divinity, is the point of departure for a black theologian's analysis of the meaning of liberation. There is no liberation independent of Jesus' past, present, and future coming. He is the ground of our present freedom to struggle and the source of our hope that the vision disclosed in our historical fight against oppression will be fully realized in God's future. In this sense, liberation is not a human possession but a divine gift of freedom to those who struggle in faith against violence and oppression. Liberation is not an object but the project of freedom wherein the oppressed realize that their fight for freedom is a divine right of creation.<sup>128</sup>

Imagine the sounds of *el cuatro* (it could be a *tiple* or a *bordonúa*)<sup>129</sup>, *el guiro*, *la maraca*, compounded by yelling and screaming. The scene is totally chaotic and almost everyone is helping to make it this way. A child who fell from the chair while another is running around playing with the dogs attests to this fact. We can see that the scene is not as chaotic near *el sacerdote* but deteriorates as you look from right to left.

Everyone is reacting to the scene departing from his or her own context. On the extreme right there is perplexity, and at the center of the room life has been taken away from the one who was not supposed to die, while the old Negro slave is still fighting death after a lifetime of humiliation and poverty. What an irony of life: the ones whom we hold dear depart without any concerns while those who remain are bewildered by death itself!

Death does not seek or make exception but just depletes life as we know it without any regard to the consequences. We can never be ready for the occasion because

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<sup>128</sup> James H. Cone, *God of the Oppressed* (Maryknoll, N.Y: Orbis Books, 1977), 127.

<sup>129</sup> Osiris Delgado Mercado, *Tragedia y Glorificación de El Velorio de Francisco Oller* (Hato Rey, Puerto Rico: Publicaciones Puertorriqueñas Editores, 2009), 69.



it comes like a freight train; all we can do is to prepare for the impact. The scars and the solitude caused by the early departure of the soul remain forever in the hearts of those who have been stricken by the loss of a loved one.

The painting is very much like a canvas depicting the history of the exiled Cuban patients, the countryside, *el bohío, el machete, y la enamorada con su enamorado*, a memory of the collection of colors now dissipating as death approaches. The Caribbean family surrounds *al moribundo* knowing that he is about to vanish but not before receiving *la Unción de los Enfermos*.

The waiting, I believe, is the worst part, but it is necessary. Sometimes the soul patiently waits to be reconciled with the Creator, peacefully, without making an effort; it comes easily, like a butterfly finding a home on your shoulder. The patient softly listens to the people surrounding him or her, and some voices are recognized by the patient while others are not. However, some patients “resist death” until the very end for some reason.

The painting of Francisco Oller defines us as *caribeños* by preserving the very familiar elements of who we are, particularly when talking about the land. The ministry of accompaniment looks at the needs of others as if they were ours. The land plays a vital role in the lives of those who have had to live *en el exilio*. The sense of being without a home or not belonging compounded by abuse and oppression is incomprehensible. According to Walter Brueggemann, this is precisely what happens to people who experience homelessness:

The sense of being lost, displaced, and homeless is pervasive in contemporary culture.... Land is a central, if not the central theme of biblical faith.... Biblical faith is a pursuit of historical belonging that includes a sense of destiny derived from such belonging.... They are people of sojourn.... Sojourner is a technical

word usually described as “resident alien.” It means to be in a place, perhaps for an extended time, to live there and take some roots, but always to be an outsider, never belonging, always without rights, title, or voice in decisions that matter.... The theme of “resident alien” is not remote from contemporary experience.... (Sojourn) It is being where one does not belong and cannot settle in and having to survive there, all because of promise.... The wanderer is different from the sojourner-pilgrim because he is not on the way anywhere.... Israel’s third memory of landlessness is the exile.... The exiled Jews were not oppressed, abused, or imprisoned. But they were displaced, alienated from the place that gave them identity and security.... During the exile the Jews were alienated from all the shapes and forms that gave power to faith and life.... [They experienced] landlessness.<sup>130</sup>

The land is part of the identity of the Cuban exiles because they identify literally with the earth found beneath their feet as part of who they are. The attributes that follow us as *caribeños* are also captured in the song from a Puerto Rican composer named Alberto Carrión who revisits this fact. In the song he summarizes how a *caribeño* understands him or herself and what we are made of:

### AMANECER BORINCANO

Soy la luz de la mañana, que alumbra nuevos caminos,  
(I am the morning light, that brightens new roads)

que va inundando los montes, los senderos campesinos.  
(By flooding the mountains, the rural paths)

Soy el fruto del futuro, la semilla del mañana,  
(I am the fruit of the future, the seed of tomorrow)

sembrado en estiércol puro, de mi tierra borincana.  
(Planted in pure manure, from my borincana land)

Soy un pescador de sueños, voy buscando un mar de espumas,  
(I am a fisherman of dreams, looking for a foamy sea)

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<sup>130</sup> Walter Brueggemann, *The Land: Place as Gift, Promise, and Challenge in Biblical Faith* (Minneapolis, Minnesota: Fortress Press, 1989), 1,3,6,7.

De caracolas y arena, de sirenas y de brumas,  
(of shells and sand, of sirens and the fog)

De estrellas y de horizontes, se compone mi fortuna  
(Of stars and of horizons, that is what makes my fortune)

soy gaviota navegante, y astronauta de la luna.  
(I am a navigational seagull and astronaut in the moon)

Soy del pan la levadura, que alimenta la esperanza,  
( I am the yeast of the bread that nurtures hope)

del hombre puertorriqueño, del despertar de mi patria.  
(Of the Puertorican, and the awakening of my country)

Traigo sangre borinqueña, soy hijo de las palmeras,  
(I bring borinqueña blood, I am the son of the palms trees)

de los campos, de los ríos, y del cantar del coquí.  
(Of the countryside, the rivers, and the song of the coquí *frog*)

De valles y cafetales, de caña, azúcar y piña  
(Of valleys and coffee farms, of sugarcane, sugar and pineapple)

de guayaba, mampostéales, del tembleque y de mavi.  
(of guava, coconut candy, coconut gel and mavi [a *semi-alcoholic home-made drink*])

Le lo lai, lo le lo lai, le lo lai.

This song is able to capture the very proud *isleño* or islander who feels extremely happy to be a *caribeño (a)*. In the Caribbean culture we find a whole range of different races and cultures intertwined in one. When talking about immigration to the United States, many modern theologians refer to *mestisaje*. In the beginning mestizo referred to intermarriage between the conquistadores and the indigenous people. However, when we speak of the Caribbean culture, we find that we must speak not only of the mestizos but also of the mulatos and the zambos and even many more races. Theologian Justo L. González speaks about this fact:

For all Latinos in the United States, *mestizos* as well as *mulattos*, there is a further *mestizaje* or *mulatez*: our own relationship with the dominant culture. This is particularly true of those who are not first-generation immigrants. As Elizondo says, a Mexican-American is the result of a double *mestizaje*: first, of Indian and Spanish, to produce the Mexican; second, of Mexican and North American, to produce the Mexican-American. The same is true of the Puerto Rican in Chicago, the Dominican in New York, or the Cuban in Miami. There is always a sense of belonging and yet not belonging, of being both fish and fowl, and therefore fowl to the fish, and fish to the fowl; but also able to understand the fish as no fowl can, and the fowl as no fish can.<sup>131</sup>

Caribbean culture is a rainbow of races and ethnic backgrounds intertwined.

Considering this, I will be looking into some of the elements of popular religiosity found in Francisco Oller's painting.

### **Elements of Popular Religion Found in Oller's Painting**

As I mentioned in the first part of the thesis, "ministry" is a very charged word because it announces a need that must be met. "Death" is also a very charged word: it means total separation and the acknowledgement of human mortality and to believers could mean also a passage to eternal life.

Surprisingly, in the painting *El Velorio* we see that some of the social structures of the time are similar to today's social structures. Little has changed, particularly in the Hispanic culture, for many of these traditions, including the ones described in the Bible, are the direct result of thousands of years of hermeneutical evolution.

In other words, the purpose of analyzing the painting named *El Velorio* is to discover the beauty and the pain of our daily lives, which co-exist in our existences. The artist is able through his work to reveal through aesthetics infinite clues of the Caribbean

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<sup>131</sup> Justo L. González *Santa Biblia: The Bible Through Hispanic Eyes* (Nashville, Tennessee, Abingdon Press, 1996), 80.

culture in the *lenguaje* of the painting. When I refer to “the language of the painting,” I am referring to the totality of the socio-cultural trajectory along with the corresponding perspectives from the artist’s advantage point.

Many of our life events allow us to have a degree of influence or control, while others do not. The theme of the painting gives us an idea of how the people of the time, according to their role and social status, education, and even age group, understood or interpreted the same life situation in so many different ways. Only a few will have a wider perspective without interfering with what is happening or transpiring in this picture. I will call this the empirical perspective of the author or viewer.

As the artist’s paint strokes are defined and the picture takes shape before the eyes of the painter, “the angle” will become the hermeneutical view of the painter. The artist arranges the “angle” of the view to acquire balance and perspective and thus to improve the aesthetics of his masterpiece where some “jewels” are dropped to the floor for us to pick up.

The artist is a painter by trade but his ability to paint and manage the prism of colors (*los claros y los oscuros*) is not the only thing that is important, but because he is an enigmatic philosopher at heart, he is transmitting a significance that he wants to share and articulate to us. There is something he wants us to discover, a message, through the signs and the symbols that are portrayed in the masterpiece. In the painting we have a reflection of our lives that is full of meaning.

The picture below is a very good example of how Caribbean families preserve the family traditions from generation to generation. The picture is full of symbols and is very much part of who we are as believers.



This picture was once owned by my great-grandmother who was a devout Catholic. At the base of the picture frame you can see the bronze letter initial “J” for Juana; my great-grandmother’s name was Juana Morales. My family still preserves a wonderful display of family tradition. According to Orlando O. Espín, popular religiosity is very well rooted in the Latino community:

Popular religion is indeed omnipresent in the Latino universe. And it is one of the few core elements shared by all Latino cultural communities in the country. Variations do exist, depending on the specific cultural history of each of the communities, but some basic structures and symbols seem to appear as constants from coast to coast. Popular religion has all too frequently been considered an embarrassment to Catholicism. It has been derided as the superstitious result of religious ignorance, a product of syncretism, a vestige of the rural past, and an ideologically manipulated tool in the hands of those who would abuse simple folk. These accusations (and many others) do point to real issues and do express serious concerns. But when popular religion is only or mainly viewed through the prism of these accusations the result can only be prejudiced and distorted.<sup>132</sup>

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<sup>132</sup> Orlando O. Espín, *The Faith of the People: Theological Reflections on Popular Catholicism* (Maryknoll, New York, Orbis Books, 1997), 63.

Many of the exiled Cuban patients have lost all of their *sacramentales*<sup>133</sup> because of the revolution they experienced during the 1950's. They had to leave their homes in a hurry and were left with almost nothing to hang on to in the time of most need. The very meaning of life has been robbed of all of the signs and the symbols of the land that saw their birth but will not see their departure.

Mircea Eliade explains that the essence of the sacred is that which allows a person to be in contact with the divine. In some instances the hierophany<sup>134</sup> could very well be the manifestation of the higher being where the sacramental allows the person to have a religious experience in which he or she may revisit or even understand the cosmology<sup>135</sup> or paradigm of the religious experience. In this way the sacramental article (s) may have *mana*<sup>136</sup> or a special anointing that sets *sacramentales* apart from other more common articles.

The special meaning of life is waiting to be discovered in the canvas of hospice ministry. Francisco Oller developed the ability to recognize the forms and the traditions in which different themes converge under the umbrella of the celebration of death. We must pay close attention to this artist due to the fact that he may have found the key to the knowledge of the beauty in the celebration of death by the living. He does this by means of depicting popular religiosity.

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<sup>133</sup> *Sacramentales* are articles or objects that are very well regarded by the Cuban community. Sometimes these articles or objects could be pictures of the family or even family jewels. However, religious articles are particularly important to the Cuban people because they represent their faith and tradition and some of these articles may have been preserved for generations.

<sup>134</sup> Mircea Eliade, *Sacred and the Profane: The Nature of Religion* (Madrid, España, Ediciones Cristiandad, 1981), 3-56.

<sup>135</sup> Ibid, 401-410.

<sup>136</sup> Ibid, 42-46.

We can observe similarities to this very human phenomenology in hospice ministry with the patients who are on the verge of the death. What gives Caribbean aesthetics epistemological value is its magnificent way of expressing human experience by the use of silent language in the figures, the signs, and the symbols that people pass on from generation to generation.

What makes popular religiosity so valuable for the expression of the Hispanic experience is the fact that regardless of how extreme and heartbreaking the experience might be, Caribbean culture provides the necessary language even in the midst of silence (the unknown). The languages (expressions) will take many forms and many shapes in the way only humans know how to express themselves, in this case in the Hispanic culture.

### **Narratives and Life-changing Spiritual Experiences**

Narratives are shared contextual story-telling experiences. Many are full of enigmas while others are a clear path into the world of cosmological experiences. The anthropology behind them denotes the intent to preserve the memory of the facts of what has transpired in our lives, giving us a new perspective and hope for the future.

Traditional narratives involve the remembrance of historical accounts as found in the Biblical narratives. They tell us that true human experience may be different in many ways from a scientific way of understanding. Every individual will look at a particular experience departing from his or her own contextual reality. Each will narrate the story



slightly differently because of his or her own personality or personal tradition. As time passes, individuals will look back into their narratives and find new meaning.

The new understandings of the narratives told are a sure sign that humans are always changing. The narratives of the past will have a new meaning as they are recalled in the future. The narratives of the present are extremely important so that they can be shared and thus immortalize the meaning of the present for future generations. The narratives of the past are at the very center of our being, giving us life and meaning, but some are lost forever. Many people walk around with a heart disease that is unknown to them and to us. Sometimes their narratives are also unknown to us but not to them; however, they want to be heard and to be shared by others.

Many medical journals and books describe in detail how to treat and help restore the human heart to health. Few of them address a much more complex scenario, the scenario of the *wounded heart*, the open wounds that allow the vitality and purpose of life to escape into the unknown. Every precious drop of red (spiritual blood) will escape never to return, and as soon as it is exposed to the *weather* (neglected, incomplete narratives), it will become something else, no longer useful, no longer life-giving, no longer meaningful.

One of the main objectives of the soul is to find meaning, to search for the truth, to quench the thirst of the soul who asks: Why me? Robert J. Schreiter talked about this when he revisited the narrative of the empty tomb: "The absence the women felt at the empty tomb was like a black hole..."<sup>137</sup> Thus we come to the realization that we have to deal with *incomplete narratives*.

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<sup>137</sup> Robert J. Schreiter, C.P.P.S. *The Ministry of Reconciliation: Spirituality & Strategies* (Maryknoll, New York, Orbis Books, 1998), 34.

Many people long for love and understanding in the face of the reality that confronts them. It is like the search for an impossible dream that is beyond the rainbow, beyond our grasp. We have a need to find the answer for our *incomplete narratives*, and to overcome the narratives of the lie.<sup>138</sup> As Schreiter mentions, "*We need, then, to find an orthopathema, a right way to suffer, when our orthodoxies have been shattered and our orthopraxes have come to naught. Our orthodoxies, our right ways of believing, have been replaced in violence with heterodoxy, another way of believing, the narrative of the lie.*"<sup>139</sup>

The hospice stories can help us add light to the understanding of the human interactions with those who are departing from their own perspectives in very difficult circumstances.

## Hospice Stories

As stated in chapter one, the ministerial concern of this thesis-project is: What kind of pastoral care do we need to provide to the exiled Cuban patients in the context of hospice ministry? *El Velorio* was used as a point of entry to analyze the culture so we

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<sup>138</sup> According to Robert J. Schreiter: "Violence tries to destroy the narratives that sustain people's identities and substitute narratives of its own. These might be called narratives of the lie, precisely because they are intended to negate the truth of a people's own narratives." *Reconciliation: Mission and Ministry in a Changing Social Order* (Maryknoll, New York: Orbis Books, 1992), 34. In this case the narratives of the lie are those experiences that are foretold by the dominant culture minimizing and/or completely negating the actual truth of the facts. In many instances the actual perpetrators, who may have victimized others, will tell and explain their own narratives for the purpose of justifying the atrocities done by them. Many of the victims are left without a truthful explanation of what have transpired, and the only narratives they have available are those that are based on lies.

<sup>139</sup> Robert J. Schreiter, *Reconciliation: Mission and Ministry in a Changing Social Order* (Maryknoll, New York: Orbis Books, 1992), 37.

can better understand the realities experienced by the people who are suffering and dying, particularly the exiled Cuban patients who are dying in *el exilio*. It is important to denote that *El Velorio* was used as a point of entry to maximize the attention to a ministry that very few people want to investigate. The reason I decided to use Oller's masterpiece among many other works of art is because it is full of the semiotics of the Caribbean culture by way of aesthetics. The signs and the symbols are impregnated in the colorful strokes denoting the themes of the sick and the dying such as death, Caribbean music, folklore and religious beliefs among others. These elements are congruent to the lives and culture of the exiled Cuban patients.

The theological question that I posed for this paper was: how is God present in the situation of dying in exile? My intuition was that God is in the midst of the sick and the dying and that a pastoral ministry of accompaniment will complement the church's mission in this type of ministry. The Ethical and Religious Directives for Catholic Health Care Services defines the church's mission as follows,

The Church has always sought to embody our Savior's concern for the sick.... The mystery of Christ casts light on every facet of Catholic health care: to see Christian love as the animating principle of health care; to see healing and compassion as a continuation of Christ's mission; to see suffering as a participation in the redemptive power of Christ's passion, death, and resurrection; and to see death, transformed by the resurrection, as an opportunity for a final act of communion with Christ.<sup>140</sup>

The hospice narratives will help us to understand the realities experienced in the field by the hospice patients where the intervention of God's grace is experienced by and materialized before the people who are serving and helping the patients.

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<sup>140</sup> United States Conference of Catholic Bishops, *Ethical and Religious Directives for Catholic Health Care Services*, (USCCB, 5th edition, 2009), 6, <http://www.usccb.org/about/doctrine/ethical-and-religious-directives/> (Accessed on April 4, 2015)

God's presence is felt in the recounting of the narratives where we discover moments which I refer as *kairos* moments. This is a supreme moment where God's interventional presence is experienced by many of the people who are subjected to life and death situations, including those who are helping and serving in this endeavor. As ministers, we might have the advantage of recognizing that God is in the midst of the sick and the dying, and to even say that God is in the midst of the already departed!

Hospice stories are very vivid accounts of the pain and the suffering of people afflicted by terminal diseases. Many of the interactions with hospice patients are indeed very useful as we seek to serve them better. We find beauty in a very unorthodox way, delivered by a person who is just about to die, yet can leave an indelible mark in employee's hearts and in the hearts of the caregivers. I would like to share the experiences of some of the staff members as provided in the questionnaire as well as my own experiences as a staff Chaplain for the Catholic Hospice here in Miami, Florida.

By exploring the results of the investigation, I began to identify the needs as well as the gifts in this ministry. I have discovered through the expertise of the medical sciences the specific behaviors of a person who is dying, and their emotional distress with its social consequences.

In the process of reviewing the findings, I have used some existential philosophers particularly in the areas of existential psychology, and also those who deal with more traditional theological issues related to traumatic human experiences as such. As I mentioned before, to be able to accomplish all of this I gave the staff of Catholic Hospice a questionnaire (See Appendix C) to share what they call "hospice stories."<sup>141</sup>

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<sup>141</sup> Refer to footnote 32 or explanation of "hospice stories".

The “hospice stories” are testimonies of different people who in one way or another provide the necessary care for these patients who are part of the “Blue Team” or hospice interdisciplinary team, in Catholic Hospice. Every story or testimony is unique in nature, but they all appear to have some common denominators.

The questionnaires were given to a Catholic Hospice team composed of social workers, nurses, bereavement counselors, physicians, chaplains, hospice aides, as well as team supervisors. They were instructed to tell their experiences from within their own professional context. Particular attention was given to the patients who are from the Cuban *exilio* background and thus crucial to this investigation. The questions asked were very specific and each one of the participants provided the answers beginning with their own perspective and area of expertise.

Special attention to detail was emphasized so that I could maximize not only the amount of information gathered, but make it as objective as possible. The hospice stories were about real people, but no names were used in order to protect the confidentiality of all of the individuals involved.

Life experiences allow us to see different perspectives and ways to live our spirituality. The spirituality that I have found in Hospice ministry possesses a deep sense of a relational encounter within family members, friends, and even God. Even on the verge of death, people experience God. They find in the midst of death a kind of spirituality that allows them to be in touch with loved ones. This includes loved ones not only living but also the ones that have already passed on.

As I mentioned earlier, I have called this type of encounter the *twilight zone*. How can you explain in empirical terms the spirituality that you see them experiencing,

and the one that you are experiencing yourself by looking at them? The types or manifestations of the spirituality found in the ministry of the infirm and the dying are unique. Such people appear to be capable of seeing things and even talking to people from another world or dimension. They affirmed these encounters full of dignity, explaining that these types of experiences are materializing before their eyes, or should we say before their minds?

These experiences are common not only among the patients who are dying but also family members and the employees of the Catholic Hospice. They all attest to the fact that there is something manifesting itself but can only be understood or experienced spiritually. This is especially true if you are able to pay attention and listen very carefully to what is happening. The spirituality they all experienced, in this case in particular the Hispanic families, appears to be more willing to share with others. The spirituality found in hospice ministry is full of life experiences, motives, and reasons that allow us to continue and to share our love with others.

Human beings in distress have an overriding need to try to understand, to search, and even to find answers to existential and spiritual questions. The fundamental option available to us to acknowledge that the Lord has been revealed, giving us hope and the freedom to accept or reject his commandments, is extremely important.

The lives of those who serve in the hospice environment are full of spiritual experiences. I recall an incident that I experienced where a Cuban family had been waiting for days for the patient to die. This person was afflicted with a terminal disease, and the body had started to decompose even while the patient was still alive.

When I came to visit the patient, I approached the elevator to gain access to the floor where the patient was located, and to my surprise the elevator door opened at the precise moment that I approached the door. My ministerial experience has told me to be on guard when strange things start to happen; I call these *kairos* moments.

The patient's son was his caregiver that day and I knew that I had to tell him what his name meant. When I came into the room, I saw the lethargic young face of a son who was just about to lose his father to a terrible disease. He did not care about the stench that filled the room to the point of sickness. He loved his father and the smell did not matter to him. He had slept all night in a recliner next to the one he loved. His eyes blurry and still full of sleep testified to a son who dreaded what his father was experiencing. His voice spoke of the loving care and nurture he received from his father when he was enjoying a better health. I said to myself: "*What in the world can I say to this young man in the midst of the pain and the sorrow he is experiencing?*" I felt the Lord talking to my heart and saying: "*Tell him to bear the name of his father on high, with pride and with honor,*" and I did. As soon as I told this young man to bear the name of his father with pride and with honor, he looked like a person who just realized that he had the honor to continue carrying the name of the one who gave him life. That was the look this young fellow had on his face that day. The patient had a biblical name and so did his son. At the end of the visit he thanked me and I blessed him and his father. The father died not long after, may he rest in peace, amen. This is just one example of the many life-changing experiences that I have witnessed in the world of hospice ministry and that help us understand that God is present in the situation of dying in exile.

We will now look into some of the narratives that were provided by staff members of Catholic Hospice.

Hospice story #1:

I used to work in a nursing home, and I saw how they kept sending patients to the hospital who were comatose and putting them through all kinds of tests and [how] they often lived like that for years. I never saw the sense of that because quality of life rather than quantity of life [is what matters].

I am a social worker and have worked at Catholic Hospice for 20 years. There are many patients and families that come to mind. I have the utmost respect for Cuban Americans that have come to this country, worked here, but still retain a tremendous love for their homeland. One particular man comes to mind. The family never learned English but the patient 73 years old worked at *Sedanos* (a local supermarket) and his outgoing personality kept him in touch with events happening in Cuba, and his work environment where he was very well liked and it was his second family. Many co-workers visited him frequently. His son worked in Hialeah and never needed to learn English. All his family was here, son, two grandchildren, and his wife. They did not like to talk about his cancer (prostate). He stayed positive until he became bed-bound which threatened his manhood. He cried often. He never registered with immigration. We took care of him under Charity.<sup>142</sup> I am proud to work for an organization that will care for people with no insurance and no ability to pay.

As far as other patients, I have helped with many letters to the American Embassy to try to get relatives in Cuba to come to the United States before the patient dies. Sometimes it is approved and sometimes not. Patients suffer when they cannot say their good-byes to family members. In the past two years, however, families have gotten creative with technology and used “Skype.”<sup>143</sup>

I think we could do more in terms of Cuban music. The old songs could bring smiles to their faces. We have a music therapist but we need more. I love my job and find that it gives me a sense of satisfaction and peace in helping others. It also makes me remember what is important in life and not to “sweat the small stuff.”

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<sup>142</sup>“*Charity*” refers to funds designated and available only for persons who lack financial or medical insurance resources to pay for the services needed during the process of dying.

<sup>143</sup>“*Skype*” is an internet computer program and tool that allows you to communicate either by phone or by a camera that maybe attached to the computer screens allowing the recipient to be able to see the person in the other side of the camera, and the host will also be able to see the recipient and talk.



In the hospice stories we seek to unveil the ministerial concern as well as answers to theological questions about how is God present in these stories. Hospice story #1 exposes some of the realities found in this type of ministry. Patients are at the very end of life and they are subjected to a number of tests thus diminishing the quality of life they have left. On the other hand, some other facts of the lives of these patients are brought to light, for example, that Cubans had been hard workers, and longed to find out the news and daily activity in the island of Cuba.

All of these details give us an understanding for the love and desire that a Cuban patient has and wants to be part of the homeland even from the exile. The patient in this story does not speak English. This same situation is found in many exile Cuban patients and their families. Many immigrants are highly criticized because they do not want to learn or to speak English. The reality is that while many do learn and speak English, others have limitations in learning another language. This may very well be because of age or educational level. However, in other cases the difficulty may lie in the rejection of anything that they feel may jeopardize their identity. The Spanish language for the Cuban exiles is a matter of identity, and the other reality is that many find themselves living and working in communities where the Spanish language is predominant so they do not have a need to learn English.

Another reality exposed that comes directly from the Caribbean and Cuban culture is that people constantly avoid mentioning the name of the terminal disease as if by mention it, the patient will get worse. This hospice story explained that the patient never registered with the Federal Immigration and Naturalization Service Department. Many patients refuse to follow-up with immigration papers because of their desire and

certainty that Cuba will be free and they will be able to go back to Cuba. As in this case, some patients are not able to receive the necessary care because they have not follow-up with the extensive forms and bureaucracy found with some of the governmental agencies in charge of the patients care. In this case the patient was accepted as “Charity.”

God is in the narrative of this story because in a social worker the concern for the welfare of the hospice patients was expressed. We see the presence of God by way of the co-workers who visited the patient frequently thus manifesting God’s love. In the face of human physical limitations we see God in people’s ingenuity creating a technology that provided help to the patient who was bed bound, and was able to see the family members in Cuba via “Skype.” Finally, we see God’s intervention by providing hospice care to a patient who did not have the resources necessary to obtain these types of services, providing him and his family with accompaniment and pastoral care.

#### Hospice story #2:

I’m a registered nurse; I studied nursing in Colombia and started working in Miami four years ago. I worked in a hospital for a year but didn’t like the environment, the stress and the impersonal treatment of patients. I started to work [in] hospice three years ago, I didn’t have any experience before, and I have learned through the years and with the help of my team at Catholic Hospice, I have encountered several “hospice stories.”

I remember a patient from my country, in her seventies, when she was admitted to hospice the patient was in coma. We thought she [would] die in the next three days but she didn’t die. When I visited the patient ~~back~~ ...after the weekend, I found that the patient was alert, oriented, conscious, and smiling. When I asked what happened? She replied: “I was in a place all white, very bright and in front of me was a closed brown door, and I wanted to open the door and go in there.” She felt her family was not ready to let her go, so she never opened the door and woke up! After the patient woke up she felt better, no pain, fair appetite, and the patient spent Thanksgiving and Christmas with family and expired peacefully months later.

I remember another patient who was a Cuban American. Her parents brought her when she was little; the patient was [in] her fifties and had two young daughters in their twenties. The patient was married, a loving husband, also had a close sister. The patient was doing poorly, very weak, fragile, was eating food through a peg tube.<sup>144</sup> [The] patient's prognosis was poor at one point but her sister needed to go to California to arrange some family issues. At the time the patient's sister didn't know if she should go or not. She asked hospice staff continuously what to do. We always told her that whatever happens is what the patient wanted and that what she (sister) felt in her heart was right. Eventually, the patient's sister went to California, stayed about a week, she planned to go back to Miami on Friday, during that week the patient started to get worse and worse. The feeding was discontinued because she was retaining liquid, she was in pain, lethargic, blood pressure very low, and at one point she had all of the signs and symptoms of imminent death. However, she waited the whole week in that condition, and for us, the medical staff, [it] was impossible to think a patient could survive that long under these conditions. When Friday arrived, the sister called from California, and told the patient over the phone that she [would] be at her side (Miami) soon. When the sister arrived [at] the Miami International Airport she called her again, and said: "I will be there in thirty minutes." She got home and she found the patient to be doing very poor. The patient died thirty minutes after her sister arrived at her house from California.

I think hospice really helps families and patients [in] that difficult journey. I think the ministry could be improved by being more informed about hospice and by informing the community about us, and also to learn more about different religions.

In hospice story #2 a registered nurse from Colombia shares her experiences by talking about a female Cuban patient who was dying fairly young. The patient's prognosis was very poor but her sister needed to go to California. (I remember this patient because we were very saddened due to the fact that she was dying and the family was devastated). When the patient's sister left for California, we thought that she was never going to see her alive again. I remembered visiting the patient during the week and she was in the final stages of the process and just about to die but she remained. The day her sister returned to Miami we told her to hurry up and she was able to make it to the

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<sup>144</sup> "*Peg Tube*" is a tube inserted into the stomach to help the patients by providing special liquefied food when they are unable to eat in normal ways.

house in time, in some miraculous way. I am a witness to what God did in his infinite mercy by allowing the patient to stay alive until her sister completed her roundtrip. As the nurse testified that in hospice we help the patients in this difficult journey, God was present through her family, the loving husband, the daughters, and her sister. God is also present by the fact that a hospice employee who was Colombian was able to see the pain and the suffering experienced by the Cuban community, thus creating solidarity between people of different countries and cultures who find themselves united by hospice care, and by *la hermandad de los hispanos*.

#### Hospice story #3:

A Cuban exile patient had a dying wish and it was to be sent back to Cuba to be with her family. Unfortunately, the patient did not have enough money. A Catholic Hospice Doctor paid for the trip back to Cuba.

As far as my background, the family, both maternal and paternal, have used hospice for support, learning, and care. They have always been very pleased and assured. Our cultural background is Polish and Dutch. We celebrate the passing as a positive event, as part of life.

There are needs of the Cuban patients and families that in part could be met by effective education, and outreach to the community and other religious ministries.

In hospice story #3 we find that we are living in a multicultural society. The employee that shares the story has a Polish and Dutch background, by which we discovered that in a multicultural society people understand life and death issues departing from their own culture and traditions. The story is about a Cuban exile whose last wishes were to be sent back to Cuba and to be with her family. The patient had limited resources and a doctor from Catholic Hospice paid for this to materialize. God allowed for someone to help this patient to be with the family. I know the doctor who did

this and I must tell you that I consider this doctor to be like an angel for the patients and for the family members. I had the privilege to work next to this doctor during my tenure working for Catholic Hospice, and I saw how God's grace was being mediated by the services provided by him.

The hospice story mentioned by this employee was not the exception but the rule. The needs of the patients are dealt with at two different levels. The first level is the particular and physical needs of the patients that must be met. The second level is the spiritual one or the level of the spiritual and intellectual understanding of the needs of the patient. The patient's needs take a turn when the physical becomes more difficult to be sustainable and the emotional becomes more of a priority. The transition between a physical and a spiritual world is made with the help of the grace of God and with the help of the people who surround the sick and the dying. The pastoral care that needed to be provided was one that dealt with the physical needs and even more with the spiritual wishes of the patient.

#### Hospice story #4:

On one occasion I went to visit a patient at the Baptist Hospital in Kendall. While I was looking for the room of the hospice patient that I came to visit, another patient had just expired at that very moment and the nurse was weeping profusely. The reason that she was crying was not necessarily the fact that she [was] moved by her passing but because she was alone when she passed away. I asked the nurse if she [would] direct me into the right room and she immediately told [me] that the Lord had sent me to pray for the patient who just expired and she asked me to pray for her and I did. The patient was still warm and I talked to the patient as if she was alive and I explained to her that there was nothing to worry about, that the Lord was with her. As I prayed I felt the peace of God that surpasses all understanding. I knew then that God was in the midst of the room at that location at that very moment. Christ the redeemer was lifting up his child from the very grave! She was no longer alone; the resurrected Christ had claimed her as one of his very own! She was Cuban and died away from her homeland with no family

here to care for her. Unbeknown to me somehow the nurse knew that I [had] been sent by the Savior. Imagine, I thought I was lost but I have found where God really wanted me to be, what a privilege! God did not forget the little one nor the pain and the suffering she endured living away from the people she loved.

In hospice story #4 a staff member found a patient that had already passed away.

The patient was from Cuba and apparently the family was not near when the death of the patient materialized. What is interesting about this hospice story is the way by which God provided someone to pray for the patient reminding all of us that God is present and never far. Another striking detail is that the nurse recognized the staff from Catholic Hospice to be a clergy person. The human aspect of the pain endured by the people who witness the passing is expressed by the nurse who was crying. This is a reality lived by the staff who are confronted by the needs of the patients and even bewildered by their passing. The prayer provides not only comfort and support but also helps with closure in a difficult moment like this. The need for closure is extremely important because by faith we know that not everything is lost but it is in closure that we continue on living. We are witnesses to the beginning of a new life when someone passes away but we are left with the remains. God understands the needs of those who are left behind with the remains, and for this reason God allowed one of the hospice team members to be in the vicinity and to intervene, thus mediating the situation with a word of prayer.

The hospice stories shared by the people who serve the patients and families were very helpful. They all implied concern for the welfare of the people that are dying away from their country of origin, and the desire to be useful in their personal interaction with them. The hospice stories denote the very nurturing nature of hospice care with the transcendental implications for a better implementation of a hospice program that takes

into account the exiled Cuban community. We will now look at how *El Velorio* and the hospice stories speak and interact with each other within the hospice ministry context.

### ***El Velorio* and the Hospice Stories Speak to the Cuban Exile Hospice Patients**

*El Velorio* presents many elements common to the Cuban exile community, where music, food, faith, popular religiosity and family are integral components of their culture. In addition the painting presents perspectives on the celebration of life and death that are also shared by the Cuban exiles.

The painting of *El Velorio* echoes the realities of the Cuban exile experience in the anthropology expressed by the musical instruments like: *el cuatro*, *el bordón*, *el güiro*, *y las maracas*. Music is an important element used by the Cuban community in their celebrations. For example, every year the *Calle Ocho* Festival takes place in Miami. *Calle Ocho* is a well known festival where people from all over the world come to celebrate together with a potpourri of cultures on Southwest Eighth Street near downtown Miami. They all dance to the music and in particular the Cuban music. As we shared the hospice stories, we discovered how important music is for Cuban exiles because it is part of their identity. One of the hospice employees even said (Hospice Story #1): “I think we could do more in terms of Cuban music. The old songs could bring smiles to their faces.”

The Cuban culture is enlightened by the *hermandad* of all of the community regardless of social-economic status, especially in times of trouble. In the painting of *El Velorio* we observed that people from different backgrounds were present in the

celebration of *el baquiné*, gathered by the grief and the loss of the family. The community surrounds the Cuban patients because they want to share the weight of the pain and the suffering in so many ways. In their togetherness they share the “Cuban Story” with food and drinks just like *en el Velorio*. They all play, the children run around chasing each other, and many of the adults play dominoes, indifferent to what the children are doing because they enjoy so much each other’s company.

The community of the faithful is made present in the painting of *El Velorio* by the *baquiné* celebration as a form of popular religion, and by the presence of the Church personalized by the priest. God’s presence in the midst of the little ones or the Cuban community is demonstrated by the use of many of the *sacramentales* that people use during the Cuban funerals. They always make sure that many of these articles are present like a rosary intertwined on the fingers of the deceased and the anointing of the floral arrangements.

The child in the picture of *El Velorio* was *amortajado* by the scents of the flowers that he was adorned with. In the same fashion the flower arrangements adorn and impregnate the air of the Cuban funeral irradiating the aroma of the celebration. In chapter one I shared a story about a Cuban exile patient who occasionally appeared to be depressed but all she wanted was a rosary. I gave her a rosary and she immediately became friendly and outspoken. The rosary became the *sacramental* that mediated the faith and the memories of her early years. In the painting of *El Velorio* we also find a rosary hanging from the wall that traditionally will be used during the funeral and after the burial. The family and friends, and the people from the community will gather for nine days (evenings) *a rezar el rosario de la novena*.



The theme of death is always present in the hospice experience. The same theme is also present in the Cuban experience. In the painting of *El Velorio* death impregnates the image by generating in the minds of the participants existential issues regarding death and dying and the reality of human physical finitude. Some of the testimonies found in the hospice stories attest to the defiance of the human soul when the body is expected to be already dead but it is not. Some of the Cuban patients, in a miraculous way, are able to stay alive against all medical odds, just because they are waiting for a loved one who is coming to visit them from afar.

In the painting of Francisco Oller we discovered many aspects that deal with human religious traditions and God's presence in these celebrations. At the center of the painting where a *baquiné* is being celebrated, we find the child that is *amortajado*. Rays of sunlight are able to break in through the cracks in the wall and one of them is able to reach the deceased child. The light is able to reach the child because the painter allows or enables this to happen. In a similar manner, God's presence can be seen in the midst of the sick and the dying enlightening the Cuban exiled community with love and compassion.

Many of the hospice staff have declared with assurance some kind of a phenomena that materialize when a loved one has departed or is about to depart. A patient that came out of a coma explained to a Catholic Hospice nurse (hospice story #2) the following: "I was in a place all white, very bright and in front of me was a closed brown door, and I wanted to open the door and go in there". According to the nurse, the patient "felt her family was not ready to let her go, so she never opened the door and [instead] woke up." These types of experiences are very special and life changing.

I have attended many exiled Cubans' funerals here in Miami where I have diligently observed how family members struggle to let go of the loved ones. On many occasions the scene becomes very sad and traumatic. This does not mean in any way that they do not have faith in the Lord, but the pain and the suffering experienced by these families are overwhelming. The reality of the death of a friend or family member, who is someone that they hold dearly, is very cumbersome for this community especially at the moment (burial) when they have to let go.

In Oller's painting we observed people from different social and economic status. While some of the characters presented in the painting were well-dressed and wearing shoes, we also noticed that many others were barefooted. The depictions of the feet, in many of the people in the painting show that they are extremely poor, and that they had walked with bare feet for a long period of time. Life has not being easy for them. For many Cuban exiles life has been a continuous struggle. Parents had to raise their families holding two and three jobs at a time. Older siblings had to take care of their brothers and sisters as their parents were always working. While many Cuban exiles have become very prosperous, many still struggle on a daily basis to be able to live and to provide for their families.

*El Velorio* presented some characters who seem to be faceless; we can barely see their facial features. In addition to being poor, they have no face because they are not recognized by a society that discriminates and oppresses them. Many Cuban exiles have also experienced discrimination in different ways. In the very nature of the Cubans who have been victimized in so many ways, there is a sense of reluctance to allow anything to undermine their desire to overcome in life.

In *El Velorio* we can see the aspect of solidarity by the presence of the community during the *baquiné*. In hospice story #3 we discover the aspect of solidarity within the community: “A Cuban exile patient had a dying wish and it was to be sent back to Cuba to be with her family. Unfortunately, the patient did not have enough money. A Catholic Hospice Doctor paid for the trip back to Cuba.” Solidarity is one of the elements present when the Cuban exile community faces *death in el exilio* and has been an intrinsic part of the Cuban experience when dealing with sick and the dying.

In the painting of *El Velorio* we discovered that almost all of the participants are socializing at different levels of conversation with the exception of a Negro slave. The community makes its presence known during the celebration of death and becomes entangled in conversation to the point that very little attention is given to the dead person. This is also true during the funerals in which I have participated where the Cuban family and friends welcome people and become so fixated that very few are truly paying attention to the person who lies in the casket. There is no question that everyone is fully aware of the situation, and they are even saddened by it, but they also use the funeral as a time when the “extended family”<sup>145</sup> is able to see each other again.

The painting of *El Velorio* portrays the reality of Caribbean people who experienced a traumatic loss. The hospice stories also portrayed the same reality by expressing the pain and the suffering endured when someone whom you love dearly is unable to stay because of their debilitating disease. The painting also articulated the hermeneutics by which people understand the same situation in different ways. The same is the case of the Cuban exiled community when they long to be buried in their homeland

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<sup>145</sup> According to Doctor Alicia Marill, in the Hispanic culture the term “extended family” does not exist. What other cultures consider as “extended family” is just “family” for the Hispanic culture.

(hospice story #3), while others wait patiently defying all medical odds (because they should not be alive), yet, they are able to wait for a loved one who is coming to visit them from far away (hospice story #2). These facts denote the deep connection to the family, the land, and also the agonizing death that they are experiencing. Family and land are important aspects of the patients' identity. *Caribbean aesthetics* allowed us to find in the *baquiné* a celebration of the dead by the living, depicting the identity of the Caribbean culture.

The love for their homeland is present in the Cuban exile patients as expressed in hospice story #1: "Cuban Americans that have come to this country, worked here, but still retain a tremendous love for their homeland." The first hospice story also expresses existential issues that are part of life and death and hospice ministry: "I used to work in a nursing home, and I saw how they kept sending patients to the hospital who were comatose and putting them through all kinds of tests..." Another issue that is underlined in the same hospice story is the suffering experienced by the patients who are dying away from home: "Patients suffer when they cannot say good bye to family members [in Cuba]." Hospice ministry can offer hope to the sick and the dying because the hospice staff is involved in mending physical and spiritual wounds.

Six principles emerged as a result of the analysis of the painting of *El Velorio*, the hospice stories and the context in which Cuban exile hospice patients find themselves. The principles are: Identity, Culture, *La Tierra*, Popular Religiosity, Theological Perspectives on Death, and Anthropological and Ethical Perspectives in regard to Death and the Dying. In the next chapter, I will explore on how those principles aid in the understanding on the Cuban exile experiences. Later in the thesis-project, I will provide

recommendations that aim to enlighten and improve the pastoral care of the Cuban exile hospice patients.

## CHAPTER 4

### PRINCIPLES FOR AN EFFECTIVE PASTORAL CARE TO CUBAN EXILE PATIENTS IN THE CONTEXT OF HOSPICE MINISTRY

In the previous chapters, I have looked into the ministerial context where I presented a thick description of the hospice care ministry, the painting of *El Velorio* by Francisco Oller, and the hospice stories foretold by the employees of Catholic Hospice. The experiences of pain and separation, and the inability to change what has transpired in their lives were pretty much present in the heart of the exiles. I used the painting of *El Velorio* as a point of entry for the opening of the culture by way of Caribbean aesthetics. The aesthetics methodology helped us discover God's presence in the midst of the sick and the dying by way of a popular religious celebration.

In chapter four, I will assess a number of principles that are critical for the theological and pastoral framework where the conclusions and recommendations of this thesis-project will be built upon. I will explore on how theological, sociological, and scriptural sources aid in the understanding on the Cuban exile experiences, with the objective of developing an effective pastoral care to Exiled Cubans Patients in the context of Hospice Ministry. The theological and pastoral framework will be based on the following principles: Identity, Culture, *La Tierra*, Popular Religiosity, Theological Perspectives on Death, and Anthropological and Ethical Perspectives in regard to Death and the Dying. These six principles emerged as a product of the scrutiny of the painting of *El Velorio*, the hospice stories and the context in which Cuban exile hospice patients find themselves.

These fundamental principles will be articulated taking into account my experience as a chaplain, and by some theologians and other voices, and the Cuban exile experience. These sources of information and theological disciplines will help assert our quest to provide and develop more suitable hospice care for the people who are dying in *el exilio*. The work of many theologians will be used in the correlation for the first four principles. For the principle of death; Scripture, Church documents, psychological and sociological insights on death will contribute to the conversation.

At the end of the chapter, I will summarize the theological and pastoral framework that will ground the recommendations for an effective pastoral care to Cuban exile patients.

## **Identity**

Identity plays a vital role in the masterpiece of *El Velorio*. The painting depicts a number of people who are sharing the same culture out of different life's contexts. What creates the sense of identity are not only the colors and the sounds of the life they are living in, but the sharing of the pain and suffering that the family is experiencing by the loss of their child. This creates an atmosphere of communal identity where each one of its members feel the pain, while playing the role that sometimes they have selected, or the one that life has chosen for them.

The "scene" of the Cuban exile patients is before us with fundamental similarities where its particular hermeneutical understandings of the dismembered identities, are laying down dying. What are we doing before this scene? How are we going to play our

role? Are we going to be counted as perpetrators or as messengers of love and understanding?

Fernando F. Segovia, a Cuban exile, explained that he belongs to the first-generation of immigrants, but with many struggles: “I entered the country’s political refugees on what was then called “waiver” visa, never intending to remain in the United States for as long as we have.”<sup>146</sup> These words echoes the Cuban exile patients whose desire always was to be in the U.S. for a little while, and then return to the island of Cuba. However, this never materialized, because many, even in the case where the possibility existed for humanitarian reasons, Cuban exiles refused to *poner un pie* on a land still governed by a communist regime. The patients explained to me that there are irreconcilable differences because justice has not been done for the thousands of Cuban martyrs. Gerald E Poyo explains the nationalism lived by Cubans living in exile:

Cubans living in exile after the 1959 Revolution developed an intense and single-minded nationalism and a clear and unflagging militant, anti-communist, anti-Castro discourse that became a part of the community’s very identity. In creating new communities abroad, Cubans did not relinquish their claims to the land they had left. They celebrated their past, denounced the “new Cuba,” and articulated their intention to reconstruct Cuba once freed from Marxist nightmare. In time, nostalgia for the homeland colored memories, intensifying the exile drama and deepening the determination with which they acted.<sup>147</sup>

Many other Cuban exiles patients give other reasons as to why they refuse to visit the island but the consequences are the same according to Segovia:

Finally, if the journey proves too long and exile settles into a permanent condition, that which is known and that which is unknown become quite porous—the experience of “otherness” and the sense of “belonging” gradually turn into one

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<sup>146</sup> Fernando Segovia, “In the World but Not of It: Exile as a Locus for a Theology of the Diaspora,” in Isasi-Díaz and Fernando Segovia, eds. *Hispanic/Latino Theology: Challenge and Promise* (Minneapolis: Augsburg Fortress, 1996), 202.

<sup>147</sup> Gerald E. Poyo, *Cuban Catholics in the United States, 1960-1980* (Notre Dame, Indiana, University of Notre Dame Press, 2007), 108.



and the same reality, with the exile at home every-where but no-where. The exile ends up living in two worlds and no world at the same time, with a twofold voice from no-where. Such happens to be the reality and experience of a large number of U.S. Hispanic Americans—including myself, my family, and my own subgroup.”<sup>148</sup>

We must deal with what I call “identity theft” experienced by the poor and oppressed who has been victimized by people who regard others as less than themselves. I use “identity theft” to describe the way in which many people dislike other cultures different than theirs to the point of total alienation. By “identity theft” I also mean the total estrangement of people from their identities because of political, social, ethnical or religious reasons.

In the context of hospice ministry, “identity theft” for the Cuban exile patients can be categorized as the lack of knowledge or understanding, for the struggles that this community has experienced in their lives. To undermine or to lack the knowledge necessary to understand the Cuban story and background, would be in many ways similar as negating a dignified way of dying. The acknowledgement of the pain and the suffering for the people, who have been victimized and abused, would be equivalent to honor and respect to the Cuban, and to other patients who deserve to be heard.

“Identity theft” is what the narrative of the lie tries to inflict in the lives of those who are victimized by the dominant culture. The destruction of the axiological values that constitutes the make up of someone’s identity is one of the targets of the people who want to deprive us from who we are:

If America can be described as a “melting pot,” then it seems quite obvious that the church has now become part of the stew, jostling for prominence with everything else in the pot, tossed to and from this marketplace of lifestyles,

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<sup>148</sup> Fernando Segovia, “In the World but Not of It: Exile as a Locus for a Theology of the Diaspora,” in Isasi-Díaz and Fernando Segovia, eds. *Hispanic/Latino Theology: Challenge and Promise* (Minneapolis: Augsburg Fortress, 1996), 203.

cultures, and merchandise. Stripped of its official status, the church cannot claim to be “above” the cultural process that for decades, or centuries, has been melting down all other subcultures that have deviated from its norm. It is no secret that the melting pot into which all cultures have been expected to dissolve is not culture-neutral.<sup>149</sup>

In the case of the Bible story of Cain and Able we can see how the “scene” of “identity theft” is played out and where a murder took place. Cain killed Abel his brother because God was pleased by Abel’s rather than Cain’s offering. Cain stole Abel’s identity by killing him. God asked Cain for Able and herein is what he answered God: “Then the Lord said to Cain, “Where is your brother Abel?” He said, “I do not know: am I my brother’s keeper?” Listen; your brother’s blood is crying out to me from the ground!” Genesis 4:9-10.

The panorama has fundamental similarities with the Cuban exile community. The people who they considered their own betrayed them. The metaphor used; “...brother’s blood is crying out to me from the ground!” echoes the way the Cuban exile patients manifest their pain, for their family members who have fallen victims to the perpetrators, and also because there was no one to help them in the process.

In the “scene” portrayed about the Nazis repressions and the heartbreaking atrocities perpetrated against innocent people (Jews) are beyond belief. I remember when one of the holocaust survivors in a documentary about the Jewish Holocaust said: “Here many of the people who were waiting to be killed in the gas chambers were sitting; if this trees and ground could talk...”

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<sup>149</sup> Mark Griffin & Theron Walker, *Living On The Borders: What The Church Can Learn From Ethnic Immigrant Cultures* (Grand Rapids, Michigan: Brazos Press, 2004), 8.

Viktor Frankl, a holocaust survivor, explains in his book *Man's Search for a Meaning*,<sup>150</sup> the suffering and the travesty experienced by people who were victims of the anti-Semitism campaign by the Nazis. The Nazis were in the process of literally exterminating from the world the Jewish identity or the Jewish culture. How do we find God in the midst of the pain and the suffering where there is disillusion, loneliness, destruction or alienation and even death?

We are reminded how harsh oppressors of identity can become, in the story of Frankl's testimony:

Let us take the case of a transport which was officially announced to transfer a certain number of prisoners to another camp; but it was a fairly safe guess that its final destination would be the gas chambers. A selection of sick or feeble prisoners incapable of work would be sent to one of the big central camps which were fitted with gas chambers and crematoriums. The selection process was the signal for a free fight among all the prisoners, or of group against group. All that mattered was that one's own name and that one's friend were crossed off the list of victims, though everyone knew that for each man saved another victim had to be found. A definite number had to go with each transport. It did not really matter which, since each of them was nothing but a number. On their admission to the camp (at least this was the method in Auschwitz) all their documents had been taken from them, together with their other possessions. Each prisoner, therefore, had had an opportunity to claim a fictitious name or profession; and for various reasons many did this. The authorities were interested only in the captive's numbers. These numbers were often tattooed on their skin, and also had to be sewn to a certain spot on the trousers, jacket, or coat. Any guard who wanted to make charge against a prisoner just glanced at his number (and how we dreaded such glances!); he never asked for his name.<sup>151</sup>

Viktor's personal traumatic experiences in the concentration camps in Auschwitz, Germany, during the Second World War, testified the Nazis' formulas of repression and oppressions. The extreme traumatic experiences will leave an indelible mark in the lives

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<sup>150</sup> Viktor E. Frankl, *Man's search for Meaning: An Introduction to Logotherapy* (Boston, MA: Beacon Press, 1963).

<sup>151</sup> *Ibid.*, 5-6.

and identities of the less fortunate, particularly the children of the victims with an irrefutable stigma to those who have been touched with the unmerciful hands of a nation who saw the Jewish people as less than themselves.

I have observed that the Cuban exiles also experience post-traumatic syndromes because they were also victims of a heartless regime where many of their family members were killed *en el paredón*<sup>152</sup> (firing squads) with no respect to human dignity. The perpetrators find themselves creating man-made-laws that refused to obey a greater calling, by deciding to discriminate against those who do not agree with the new government. The exile patients must deal with the fact that he or she is missing part of their identity by dying in exile.

The patients have shared with me their desire for the liberation of the precious island. This is always in the minds of the Cuban exile patients because they want to return to the Cuba that they loved. Cubans that were accustomed to celebrate their identity, by way of their folklore and religious traditional beliefs, cannot express their identity freely anymore. In some cases, poverty has deprived them of who they were and now abounds affliction in the very hearts. The people who were identified with prosperity are no longer able because they have been oppressed to the point of fracture.

Justo L. González explains how marginalization is part of the exile experience:

Exile implies a strange sort of marginalization. In exile, one leaves what has been the center of one's life and moves to the periphery. Most often, the first stage in the process has been a decay in that center. Such decay may have—and usually has—a variety of causes: outside invasion or intervention, civil strife, economic disorder and decline, or economic and political oppression. No matter what the

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<sup>152</sup> *El paredón* is alluding to the way and manner by which thousands of Cubans were executed by firing squads or even some other methods. During and following the Cuban revolution many were victims of the Castro's "execution machine" without any recourse for human decency or justice.

reason, the land that our eyes first saw can no longer sustain the life of peace and joy that God intends.<sup>153</sup>

My experience has been that in the case of the Cuban exile patients the very oppression that has fractured their sense of belonging now has drenched the sense of going back home. Gustavo Gutierrez explains how many people who are oppressed are seeking liberation from the *infortunio* of poverty:

The term “poverty” designates in the first place material poverty, that is, the lack of economic goods necessary for a human life worthy of the name. In this sense poverty is considered degrading and is rejected by the conscience of contemporary persons. Even those who are not or do not wish to be aware of the root causes of this situation believe that poverty should be struggled against. In Christian circles, however, there is often a tendency to give material poverty a positive meaning, to see it almost as a human and religious ideal. It is seen as an ideal of austerity and indifference to the things of this world and a precondition for a life in conformity with the gospel. This places the demands of Christianity at cross-purposes with the great aspiration of men and women today who want to free themselves from subjection to nature, to eliminate the exploitation of some persons by others, and to create wealth for everyone. This double contradictory meaning of “poverty” allows for superimposing one language on the other and is frequent source of ambiguities. The matter becomes even more complex if we take into consideration that the concept of material poverty is in constant evolution. Not having access to certain cultural, social, and political values, for example, is today part of the poverty that persons hope to abolish.<sup>154</sup>

The Cuban exiles left Cuba in a hurry where some had financial resources, while others had little or no money at all. Some of them left with clothes they had on while others left with little or no luggage at all. However, they all were victims of the oppression created by Castro’s regime.

I believe that in the Cuban unity is where we find identity by way of the communal God where we discover comfort in knowing that we are not alone regardless

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<sup>153</sup> Justo L. González, *Santa Biblia: The Bible Through Hispanic Eyes* (Nashville, Tennessee: Abingdon Press, 1996), 91.

<sup>154</sup> James B. Nickolof, Ed., *Gustavo Gutiérrez Essential Writings* (Maryknoll, N.Y.: Orbis Books, 1996), 292.

of the circumstances. The unity of the many different identities can be expressed by the common denominator of faith. According to Orlando Crespo we can bring contributions to our nation because we share as Latinos the seeds of diversity and marginalization: “Because of our racial diversity and the marginalization Latinos have experienced, we can actually make important contributions in bringing racial healing to our nation.... We are relational and value harmony.... We are multiracial... We are many... We understand racism and marginalization... We can celebrate even in the midst of pain.”<sup>155</sup>

The departure (death) of a Cuban exile patient should not be taken lightly. They have given it all to be able to overcome many obstacles but *la lucha sigue*. I have seen the struggles, and I have heard the voices of the less fortunate which have been a challenge for many pastoralists. Many theologians have decided to fight or to speak for the rights of those who have been oppressed by the dominant culture, and sometimes by the same institution of the church.

The identity of the poor and oppressed has been the concern of Gustavo Gutierrez because he finds not only that the pastoral approach to the Latin America question (reality) has been inadequate, but also lacks the liberating power required to acquire the necessary answers, to what has been the inability to perform before such a moment of salvation! He finds that theology, defined as the second step, after “contemplation and commitment,”<sup>156</sup> alone is not quite the answer. The first fundamental objective is the commitment of Christians.<sup>157</sup> We must have a commitment as Christians

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<sup>155</sup> Orlando Crespo, *Being Latino In Christ: Finding Wholeness in Your Ethnic Identity* (Downers Grove, Illinois: InerVarsity Press, 2003), 108-112.

<sup>156</sup> Nickoloff ed., *Gustavo Gutiérrez: Essential Writings*, 49.

<sup>157</sup> *Ibid.*, 25.

to seek help and justice for the Cuban exile patients who are under our care. The level of commitment will speak loudly about what we think and believe. To help the less fortunate is a duty for everyone in the hospice care business. This is the same concern I have for the Cuban exile patients because they are in dire need of pastoral assistance.

In the case James H. Cone the meaning of liberation is the fight for justice in a world that historically oppresses the less fortunate, just like in the black community:

Liberation is not a theoretical proposition to be debated in a philosophy or theology seminar. It is a historical reality, born in the struggle for freedom in which an oppressed people recognize that they were not created to be sized, bartered, deeded, and auctioned. To understand the question of liberation, we need only hear the words, experience the mood, and encounter the passion of those who have to deal with the dialectic of freedom and oppression in the concreteness of their everyday existence.<sup>158</sup>

According to Cone, the departure for a black theological analysis of the meaning of liberation will be born out of Jesus humanity and divinity.<sup>159</sup> Cone emphasizes that there is no "liberation independent of Jesus' past, present, and future coming."<sup>160</sup> Liberation is a divine gift of freedom and not a human possession, it is also a "project" not an "object" wherein the oppressed understand that their struggle for freedom is an inalienable right given by God according to Cone.<sup>161</sup>

The inalienable rights of the Cuban exile patients have been violated, and the consequences of this are felt because they are now living with an uncertain future. The liberation of Cuban exiles is dealt at a different level.

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<sup>158</sup> James H. Cone, *God of the Oppressed* (Maryknoll, New York: Orbis Books, 1975), 142.

<sup>159</sup> *Ibid.*, 127.

<sup>160</sup> *Ibid.*

<sup>161</sup> *Ibid.*

Goizueta's understanding of the praxis of liberation brings along several essential factors, typical of the struggle of Hispanics in the U.S. living “in between.” Goizueta explains: “As a people living “in between,” U.S. Hispanics are constantly forced to make compromises.”<sup>162</sup> I find key differences in the realities that Cone and Goizueta confronts. One deals with the black slave who was brought forcefully into the U.S., and the second deals with people who willfully comes into the U.S., escaping economic-political oppressions thus exposing themselves to the rejection of the dominant culture. The third wave of people is represented by the Cuban exile community who had to leave their homeland for total political estrangement and the massacre of thousands of people.

Goizueta introduces a very interesting metaphor that can help us better understand the realities we confront:

In organic anthropology, each person is not a mirror reflection but a *unique refraction* of the whole. Like glass prisms that, each cut in a different form, refract the light into uniquely structured, magnificent rainbows of colors, thereby making visible a light that would otherwise be invisible to the eye, each person is the unique refraction of that common Light which becomes visible only in the radiance of each unique, particular rainbow. Without the prisms, without their individual uniqueness, the Light would remain invisible.<sup>163</sup>

The prism of God’s intervention to preserve the Cuban exile community’s identity becomes apparent in *La Ermita de la Caridad del Cobre* in Miami, Florida. A living monument to the life struggles of the Cuban people: “*Nuestra Señora de la Caridad del*

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<sup>162</sup> Roberto S. Goizueta, *Camínemos Con Jesús: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, New York: Orbis Books, 1995), 15.

<sup>163</sup> *Ibid.*, 76.



*Cobre*, became one of the exile community's most powerful symbols of national redemption, a symbol in which politics and faith met [meet].”<sup>164</sup>

Many Cubans, who have made South Florida the second home, have always been fighting to preserve their identity since the very beginning: “While the faithful in the homeland were being persecuted and shot for gathering to celebrate the feast of the *Virgen de la Caridad del Cobre*, the Cuban exiles in Miami congregated in the city's stadium in a gigantic ceremony in honor of the Patroness of Cuba.”<sup>165</sup> A well-known Cuban exile who has been a noble voice to preserve the identity of people who are less fortunate is Ada María Isasi-Díaz, a Cuban exile.

I find that Isasi-Díaz self-assertions have created in her a deep commitment to community and friendship because of the mother's “understanding and deep commitment.”<sup>166</sup> Although there is some key issues that she has adopted from her mother such as: *tener fe, la vida es lucha*<sup>167</sup> we must realize that her contributions to the *mujerista* theology will play a critical role not only in her own life but in the life of others.

I consider that *la lucha* for the hospice Cuban exile patients is their fight for the last battle. *La lucha* or last struggle is to overcome the lack of sensitivity (knowledge or what I called “identity theft”) that the patients are physically and especially emotionally experiencing at their bedside. Any person who wants to understand the Cuban exile patients must do it from within their culture and reality. Is very difficult to keep the right

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<sup>164</sup> Timothy Matovina and Gerald E. Poyo , ed. “Arrival of the Virgen de la Caridad del Cobre in Miami, 1961,” in *¡Presente! U.S. Latino Catholics from Colonial Origins to the Present* (Maryknoll, New York: Orbis Books, 2000), 168.

<sup>165</sup> Ibid.

<sup>166</sup> Ada María Isasi-Díaz, *Mujerista Theology* (Maryknoll, New York: Orbis Books, 1996), 22.

<sup>167</sup> Ibid., 21-22.

composure when your family has been literally dismembered, and where many have disappeared, without losing your ability to stay calm! The Cuban exile patients struggle to fight the memories of the experiences of the past, because they are always in their hearts, and in need to be reconciled.

To understand the Cuban exiles identity we must understand that at the time where the patient is about to died, the patient has lived in a world of ambiguities. According to Justo L. González the people who live in exile live in ambiguity between gratitude and anger:

The literal exiles live in the ambiguity between gratitude and anger. We are grateful, because this country has offered us a refuge others did not. But at the same time we are angry, mostly for two reasons: first, because many of us are coming to the bitter realization that even though we have given up the countries of our birth, we shall end our days as exiles, as people who live in a land that is not theirs, that welcomes them up to a point and then shuts the door. Second, we are angry because we are becoming increasingly aware of the degree to which the United States, the land of refuge, is also the land that created our need for exile in the first place.<sup>168</sup>

To describe this place González mentions a portion of Psalm 137, “By the Waters of Babylon,”<sup>169</sup> as they remember Zion, or the place where God is intervention (presence) takes place, even when they are away from our land and culture: “By the rivers of Babylon there we sat down and there we wept when we remembered Zion...” Psalm 137:1. Fernando F. Segovia continues to explain that we live in a land of adoption and referring to Justo L. González (interpellation of exile), about people who are seeking a communion with God in exile: “As a people in exile, therefore, U.S. Hispanic Americans

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<sup>168</sup> Justo L. González, *Mañana: Christian Theology from a Hispanic Perspective* (Nashville, Tennessee: Abingdon Press, 1990), 41.

<sup>169</sup> *Ibid.*, 41-42.

are said to possess special (socioreligious) insights into what it means to be a pilgrim people of God and followers of Jesus as the one who had no place to lay his head.”<sup>170</sup>

My experience, helping the Cuban exile community is that they have a real desire to preserve who they are, and what they believe. I distinctly recalled the Cuban exile patients when they always share with me, the longing for preserving their cultural values which they feel that are now lost. They despise that some of the foundational axiological values of the Cuban culture, have been watered down into more hybrid forms: “We share the same culture, which is anchored in our language, whose purity we want to preserve, even if in or away from our country we are exposed to the influences of other languages; we are one in our traditions, customs, music, family values, our openness, in all those values which we do not want to lose despite the vicissitudes that life brings us.”<sup>171</sup>

## Culture

The Cuban exile patient’s culture is dynamic and eloquent full of gesture and pragmatic traditions. I would characterize culture from an exile standpoint as: the ever embryonic (in-developing) nature of the cultural axis (circular-like-motion), that impregnates (permeating) the very core of the symbiotic (in-relation) identity, by the metamorphosis (change) of culture’s evolution (evolving). The culture of an individual

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<sup>170</sup> Fernando Segovia, “In the World but Not of It: Exile as a Locus for a Theology of the Diaspora,” in Isasi-Díaz and Fernando Segovia, eds. *Hispanic/Latino Theology: Challenge and Promise* (Minneapolis: Augsburg Fortress, 1996), 206.

<sup>171</sup> Monsignor Eduardo Boza Masvidal and Monsignor Agustín A. Román, “Mensajes: Cuba ayer, hoy y siempre” in Timothy Matovina and Gerald E. Poyo, eds. *¡Presente! U.S. Latino Catholics from Colonial Origins to the Present* (Maryknoll, New York:Orbis Books, 2000), 182-183.

help define in many ways who this human being is, as an individual and as a community.

According to Fernando Segovia exile represents a perspective with special insights:

...While I agree that exiles do sing incessantly of “Zion” in whatever “Babylon” they happen to find themselves, I see the longings, hopes, and dreams conveyed by such singing as quite complex, quite fluid, and variant within an incredible and ever-changing *mezcolanza* (jumbled mixture) of past, present, and future. In other words, exile brings about such a Janus-like condition that “Zion” itself is endlessly deconstructed and constructed, as exiles are drawn in various directions at any one time and at all times.<sup>172</sup>

The relational forces of the Cuban exile culture, allows other people to learn and to interact with their cultural traditions and way of life, from their *usos y prácticas* of their culture. To learn about the Cuban culture and cultural diversity is extremely vital because we are living in a multicultural world. Understanding and learning about cultures different than ours will help us maximize the work of hospice ministry.

Cuban Bishop Eduardo Boza Masvidal gave a special address to the participants of the *II Encuentro Nacional de Pastoral Hispana*, titled “Unity in Pluralism”. In reference to culture he notes, “God, in His infinite wisdom, did not ordained that each of us be a “standard” type, each cut with the same mold, uniform. Rather, He willed the individuals as well as nations retain their own identity, their language, their values, their customs, their histories, their qualities and also their defects, that is to say, all those aspects which constitute their own culture.”<sup>173</sup> Later, he talks more specifically about the Cuban experience:

I have observed that many Cubans, which whom I am in close personal contact, though I suppose the same to occur with other nationalities, present this dilemma:

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<sup>172</sup> Fernando Segovia, “In the World but Not of It: Exile as a Locus for a Theology of the Diaspora,” in Isasi-Díaz and Fernando Segovia, eds. *Hispanic/Latino Theology: Challenge and Promise* (Minneapolis: Augsburg Fortress, 1996), 207.

<sup>173</sup> Eduardo Boza Masvidal, “Unity in Pluralism,” in *Proceedings of the II Encuentro Nacional Hispano de Pastoral* (Washington, United States Catholic Conference, 1978), 58.

What must I do: integrate myself into the mainstream or continue to feel Cuban? I believe this “either-or” premise to be false; one must do both things. We must become part of the contry in which we live, love it, feel its problems, give it our best effort. At the same time, we must continue to be what we are. We must not loose our own identity.<sup>174</sup>

I strongly believe that Cuban Exiles patients still feel Cubans. They have lived in the United States for many years, but they treasure their language, food, music, traditions, history and values.

I want to emphasize that we must understand culture so we can evangelize effectively the same. As we analyze the religious phenomenon we are reminded to consider those human aspects that mold the human being through the culture. This way we can better evaluate the different possibilities to approach the diverse cultures in Miami and other parts of the world. Rev. Marcello Azcevedo explains what culture is:

The culture signifies the particular social dynamism under the particular group that a person lives, feels, interacts, self-organized, celebrates, and communicates life. In all cultures there are elements that describes; language, gestures, symbols, rituals, forms of work, construct and cultivate, to dress, to rest, to cook and to do other activities. But culture has even a more important level: the sense and values, a vision of the world and an ethical concept of life. The combination of these two levels constitutes and translates the cultural identity of the group of humans, whether a determine ethnicity, nationality or institution. The culture, although divides humanity, it also unifies it as a biological structure. All human beings are in relationship in one way or another at least with one culture.<sup>175</sup>

I deem noteworthy the function culture plays in our personal identity, is actually the very core of the person identity. To respect the culture of a particular individual is to respect the person itself. This promotes dignity in the individual in question, due to the

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<sup>174</sup> Eduardo Boza Masvidal, “Unity in Pluralism,” in *Proceedings of the II Encuentro Nacional Hispano de Pastoral* (Washington, United States Catholic Conference, 1978), 58.

<sup>175</sup> Marcello Azcevedo, SJ, *Conferencia de Lideres Hispanos: Fe y Cultura en el Nuevo Milenio* (Raices y Alas, 1996), 13.

fact that the personal identity is in intimate relationship with the person's dignity. The lack of respect to the person's culture is like been disrespectful to the person itself. The lack of respect to the person's religious beliefs, it will be seen as a disrespectful act against the identity and the dignity of any particular individual.

During my pastoral visits I experienced that many Cuban exiles patients like to share their culture with others and as a gesture of their love and affection (appreciation), they always want to give you a hug as you leave the premises. I found, that it is almost impossible to leave the home of the Cuban exiles patient's empty handed, or without sharing some Cuban food. To reject a small token of their appreciation for the help and support you are providing is to reject them and their families.

Since culture is always changing as anthropological reality, all cultures create prejudices, since every culture develops a particular vision, certain habits, particular uses and customs. According to Father Mario Vizcaíno from SEPI (South East Pastoral Institute in Miami, Florida); "What people know is comfortable and we call it *bueno*, however, the unknown creates anxiety and we call it *malo*."<sup>176</sup>

The function of culture in the lives of the people who are under pastoral care is particularly significant. Here is a description of how Orlando O. Espín defines culture:

Culture can be briefly described as the dynamic sum of all that a human group does and materially and symbolically creates in order to prolong its life in history within geographical contexts. It is culture that allows any human group, and its individual members, to discover meaning and act accordingly. Society and culture dialectically create and modify each other.<sup>177</sup>

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<sup>176</sup> Fr. Mario Vizcaíno was the director of the South East Pastoral Institute for over 30 years. I took a class with him called *Principios de Pastoral Hispana*, where he emphasized all aspects related to culture.

<sup>177</sup> Orlando O. Espín, "Grace and Humanness: A Hispanic Perspective," in *We Are A People!: Initiatives In Hispanic American Theology*, ed. Roberto S. Goizueta (Eugene, OR.: Wipf and Stock Publishers, 2001), 143.

The Cuban exile patients and family are very generous because they always greet the chaplain with love, food, and *el cafecito cubano*. When I am with them, they immediately want to share their stories and their cultural richness. Culture in the lives of the Cuban exile patients who are experiencing death in exile, represent everything they are as human beings, as culture gives them a sense of meaning and belonging. The pastoral care of the Cuban exile hospice patients need to take their culture into consideration. This is an aspect that *Evangelii Nuntiandi* considers when asserting the importance of culture in order to proclaim the Gospel: “Evangelization loses much of its force and effectiveness if it does not take into consideration the actual people to whom it is addresses, if it does not use their language, their signs and symbols, if it does not answer the questions they ask, and if it does not have an impact on their concrete life.”<sup>178</sup>

Family values are part of culture and I have discovered that the family unit for the Cuban exile patients is regarded as the most valuable asset. It is essential to understand that the perception or opinion from other families is a concern of all of its members because they want to be perceived as an honorable family, and well regarded in the community.

Family is at the very core of the Cuban exile patients it is considered to be a source of pride and joy. The Cuban family, sometimes colloquial, is in constant interrelationship and always concerned for family members and could encompass a matriarchal proclivity. The Cuban families in good times are always full of joy and celebration. They seek each other and express their love and affection. I recognized one very special trait about the Cuban family, is that they include all the members of what

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<sup>178</sup> *Evangelii Nuntiandi*, 63. [http://w2.vatican.va/content/paul-vi/en/apost\\_exhortations/documents/hf\\_p-vi\\_exh\\_19751208\\_evangelii-nuntiandi.html](http://w2.vatican.va/content/paul-vi/en/apost_exhortations/documents/hf_p-vi_exh_19751208_evangelii-nuntiandi.html) [accessed March 28, 2015].

they consider family and close friends. Again, is essential to understand that the term “extended family” does not exist in the Cuban culture. Old friends sometimes are regarded more than family, and this is preserved by an old saying that states: “*los amigos son más que familia.*”

The memories that the patients are evoking during the critical time makes them happy because this is the remembrance of the extended family when they used to have the time of their lives:

The Hispanic home will usually be multigenerational with two or three generations within the same household. This is more the case as the family lives below poverty level. Often the network of relationships makes up for whatever is lacking in economic resources. However, this kind of family of many generations seems to be on the decline.<sup>179</sup>

Family is central for the Cuban exile patient who is suffering and is unable to recover to a more dignified memory. The memoir of experiences is all they have left because many of the patients who are able to communicate love to share their life stories.

I recall one of the inpatient units of Catholic Hospice called St. Catherine’s. The unit is dedicated for the care of patients who are extremely ill and need to be in constant vigil or continuous care. During one of my on-call assignments I received a call from St. Catherine’s that one of the patients had passed away, and the family was waiting for the chaplain to come and pray with them. I immediately drove to the location with a number of concerns about the family because I felt broken by the fact that the patient had passed away.

To my surprise as soon as I arrived everyone was waiting for me. I mean everyone; all of the family members were faithfully waiting around the altar of the patient

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<sup>179</sup> James Empereur and Eduardo Fernández, *La Vida Sacra* (Lanham, Maryland: Rowman & Littlefield Publishers, Inc., 2006), 36.



to be ministered to. There were over fifty people there from at least three different generations. The peace that surpasses all understanding was present as I ministered to the congregation of the faithful. The *abuela*, who was the matriarch of the family, had passed away. She was finally resting after all of her health related struggles, and after all of the traumatic experiences experienced when fleeing the Castro regime.

The faces of the family members were so beautiful to see. The wisdom learned by the *abuela* through a lifetime of sacrifice had now been passed down to help future generations. The wealth of wisdom in the Cuban family is passed down by the elders of the family, and is greatly regarded by the younger generations of the Cuban family.

Family members are concerned to convey the stories and love for the land in which they were born. When the Cuban elders recount their narratives from the time when they were in Cuba, the new generations born in *el exilio* are carefully and vividly listening, because they are attracted to the roots of their *antepasados*. The love for *la tierra* is transmitted from one generation to another.

### ***La Tierra***

In order to provide a better pastoral care of the Cuban exile patients in the context of hospice ministry, we need to understand the love of the Cuban exile patients for *la tierra que los vió nacer*. The land has always been important to the Caribeños because it brings a sense of identity and belonging. Gloria Estefan, a very famous singer who is a Cuban exile, describes this feeling in the song named *Mi Tierra*, (composed by Fabio Alonso Salgado-Estéfano), where she expresses this way of understanding of land for the

Cubans in exile: “*La tierra donde naciste no la puedes olvidar, porque tiene tus raíces y lo que dejas atrás*” (You can’t forget the homeland where you were born, because it has your roots and what you left behind).

According to Walter Brueggemann the land was offered as a promise in biblical times: “Land is a central, if not *the central theme* of biblical faith. Biblical faith is a pursuit of historical belonging that includes a sense of destiny derived from such belonging.”<sup>180</sup>

The understanding of what is the *Promise Land* for the Semites tribes can be understood in an allegorical sense of the word. For a Jew is actually a material, physical, and empirical sense of the word land. The longing of returning to the Promised Land may infer to be out of the imagination or metaphorical language while in fact the desire to return to that land is as much on the physical sense:

A symbolic sense of the term affirms that land is never simply physical dirt but is always physical dirt frightened with social meanings derived from historical experience. A literal sense of the term will protect us from excessive spiritualization, so that we recognize that the yearning for land is always a serious historical enterprise concerned with historical power and belonging.<sup>181</sup> On many occasions historical accounts are on foretold by the dominant culture.<sup>182</sup>

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<sup>180</sup> Walter Brueggemann *The Land: Place as Gift, Promise, and Challenge in Biblical Faith* (Minneapolis, Minnesota: Fortress Press, 202), 3.

<sup>181</sup> *Ibid.*, 2.

<sup>182</sup> I have always been concerned about how or who is telling the story due to the fact that on many occasions this will directly influence how the story or historical accounts are told or preserved. The story of the Jews being on an exodus of people embarking into and seeking the Promise Land, where the land is already inhabited by other nations, has always concerned me. The understanding of a God who has almost total disregard for other cultures while protecting the “chosen ones” stills an area of major discussion because of the inalienable rights of all people just because we are human regardless of any political, religious, or cultural affiliations. Of course historically the land has been battled over throughout the world. For many had been a source of pride when winners of the spoils of war, but sadness for the ones who have lost it all to the conquerors. They will become the less fortunate. Occasionally the land is distributed as a result of a *botín de Guerra* or by other more democratic means or methods. The land still is a symbol of nationalism for many cultures.

The dominant culture is not as concerned as the people whose borders have been crossed, and whose culture has been disseminated: “Nobody doubted that the land is bounteous and attractive. But the land of promise is never an eagerly waiting vacuum anticipating Israel. Nor is it an unambiguous arena for faith.”<sup>183</sup> The physical land is ontologically neutral and unaware of people’s intentions. Death is also neutral with the lack of any understanding of people’s wishes.

The land as well as death acquires their own understandings in the hermeneutics of the culture that is mediating these realities. They are both great symbols in the minds of the sick and the dying because of what they signified. The land became the canvas by which the strokes of life permeated until sickness and disease abruptly detained the action of life into the longing of what life used to be.

I always try to give comfort to many of the Cuban exile patients who express their love for their homeland by words like: “*me hace falta mi tierra*” or personalizing the land by saying: “*mi tierra me llama.*” This is also mentioned by Gloria Estefan’s song: “*La tierra te duele, la tierra te da, en medio del alma, cuando tú no estás.*” (the land hurts you [as *la tierra* being part of the physical self], the land hits you in your soul when you are not there). The same song even goes further by saying that the land yearns for and has a groan and lament that will never be forgotten and will always be in our feelings: “*la tierra suspira si no te ve más...., tiene un quejido, (mi tierra), tiene un lamento, (mi tierra), nunca la olvido, (mi tierra), la llevo en mi sentimiento,....*”

The Cuban exile patients lost their paradise to the hands of a dictator and this was a devastating experience for them. Living in exile has been extremely difficult to

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<sup>183</sup> Brueggemann *The Land*, 63.

tolerate but thanks to the love and understanding of the South Florida community this has been more bearable. I agree with Jeanette Rodríguez-Holguín when she explains:

Each of us has a place where we feel a special relationship with the land. All of us are profoundly affected, sometimes without even being aware of it, by the many places in which we have spent our lives. Often this relationship with the land bursts forth in special places: the desert, the ocean, a mountain, a field. This focus on relationship is key to any spirituality. Latino/a spirituality is an example of a spirituality especially conscious of a relationship with the land. This relationship with the land, however, cannot be separated from one's relationship with family, community, and even the cosmos.<sup>184</sup>

I have been living in Miami for many years and I can testify that the Cuban exile community has made for the most part South Florida their second home. Undoubtedly, the South Florida community owes much of its progress to the hard work of many the Cuban exiles, where Miami has become one of most desirable places to live in United States and abroad.

The merging of lands or should I say; of cultures, has been taking place in the South Florida metropolitan areas for the last few decades. The Cuban exiles have taken the leadership to help and develop a common ground for the Hispanic immigrants coming from Central and South America into the cosmopolitan City. In many ways the Cuban exile community has been the footing for many Hispanics coming to the United States of America. According to Alicia C. Marill many of the people who arrived into these new communities are caught between different cultures:

Alicia Santana, 20, is a Cuban raised in Miami, Juan, 18, is a Chicagoan who has five sisters; Ana, 25, is from New Mexico and has a one-year-old son; Terry, 17, is Puerto Rican; Edgar, 17 is a Nicaraguan who has lived in California; Ilvis, 19, arrived from Cuba in 1980 with the group of refugees who left from Mariel Harbor; Barbara, 18, is Cuban. Despite their varied backgrounds, they share a common experience: they are Hispanic youth living in the culture of the United

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<sup>184</sup> Jeanette Rodríguez-Holguín, "La Tierra," in *From the Heart of Our People: Latino/a Explorations in Catholic Systematic Theology*, ed. Orlando O. Espín and Miguel H. Díaz (Maryknoll, New York: Orbis Books, 1999), 192.

States. Although at times they have felt caught between cultures, they have been able to “make peace” by observing the values of both worlds, affirming the good they see and rejoicing in their “double gift,” as they call it. They talk about the values they saw in their parent’s culture, the things they would change about it, the tensions they have experienced as they encountered a different culture, and the advice they would give to their parents and to their Hispanic young friends.<sup>185</sup>

The Hispanic Promise Land has been extremely difficult because of the many struggles they have to endure in the land of opportunities. Many of these difficulties are encountered because of the sudden change and the consequences of the broken roots to our traditions and land. Other factors that may be considered are the immigration exclusions and policies that only benefit special interest people in the United States:

Usually migration is handled from the perspective of interest: more from the interest of states, employers, recruiters and travel agents, banks and money changers, real estate brokers, and the receiving community, and less from the perspective of the interest of migrants. If migration is approached only from the interest perspective, it will be difficult to manage it properly because of competing interests. A more common ground must be sought, and that is found in the human rights approach.<sup>186</sup>

The way we interpret the land will be subject to a number of points of view depending what are your interest in the matter. The truth may remain by way of the communal understanding of self. Land provides identity, sustenance, and a place to call home. In many instances home for the Cuban exile community will always be island of Cuba. For many patients and no matter how long they have lived here, they will always be longing for their homeland, as the following song from Suzy Lemán, a Cuban singer, expresses in the song named “*No es igual*” or “is not the same:”

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<sup>185</sup> Alicia C. Marill, “Youth and Culture,” in *Hispanic Ministry: Perspectivas*, ed. Allan Figueroa Deck, Yolanda Tarango, and Timothy M. Matovina (Kansas City, Missouri: Sheed & Ward, 1995), 46.

<sup>186</sup> Graziano Battistella, “Migration and Human Dignity,” in *A Promise Land, A perilous Journey: Theological Perspectives on Migration*, ed. Daniel G. Groody and Gioacchino Campese (Notre Dame, Indiana: University of Notre Dame Press, 2008), 177.

No es igual, no es igual;  
(is not the same, is not the same)  
Aquí el aire no es igual,  
(the air is not the same here)  
No vuelan los papalotes,  
(the kites do not flight)  
Como en mi pueblo natal.  
(like in my hometown)

The hospice care ministry is sustained by the faith of people who serve and by the faith found in the Cuban exile patients that has been preserved for generations. I have experienced that this is very easily felt in the room where religious beliefs are present by way of religious articles, and by the preservation of biblical narratives not only found in the bible, but also found in the hearts of the Cuban exile hospice patients.

### **Popular Religiosity**

The painting of *el Velorio* expresses a particular traditional popular piety celebration, where the people become an essential instrument of God's presence by way of the communal celebration of *el baquiné*. The spiritual support for the Cuban exile patients is manifested in the canvas of the love and accompaniment by the same community. In some cases you find the Cuban exile families will share prayer cards, rosaries, and many other religious articles, symbols of God's grace to the people who participate before and after the departure of a family member. The faith expression of all the community coming together around the altar of the infirm, allows a window of opportunity to experience the very soul of God's presence. God becomes apparent by way of a communal celebration where the faithful come together by virtue of the Holy Spirit.

Faith in the life for a Cuban exile patient is also to bear whatever life fling at you if you are at the receiving end. When life overwhelms and narrows all possibilities to the point of ostracism, a Cuban soul will take on the challenge even if this means to lose their lives in the process to live life to the fullest. This is what I have witnessed the Cuban exile patients do in moments where their faith has been challenged.

Gerald E. Poyo conveys the fact that the main reason why the Cubans left their homeland in the 1960's was "because the Revolution systematically and radically transformed what they knew and valued."<sup>187</sup> Faith played a significant role for the exiles:

Their departure left them dispersed and disoriented, but they immediately sought protection and comfort by attempting to recreate what they have abandoned. Catholics turned to their faith for solace, one of the few things they carried with them to anchor their new lives. In South Florida, they used their militant faith experiences to establish Catholics communities that provided safe settings for assessing their new situation, including reengaging their spiritual and faith traditions.<sup>188</sup>

The same faith that helped the exiles then to face a new life facilitates today the reality of sickness and death. The faith of the Cuban exile patients found in hospice care is extraordinary, even when the medical odds are not in their favor for preserving life for much longer. Patients struggle when they are subjected to the pain and suffering that accompany a person who is about to die. The painful moment that this is taking place obscures the normal way of intellectually dealing with a situation, that requires all of their attention because they are overwhelmed by the discomfort, and because sometimes they are sedated by the medications. The Cuban exile patients find themselves in a survival mode having trouble to coordinate the physical movements of their fragile

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<sup>187</sup> Gerald E. Poyo, *Cuban Catholics in the United States, 1960-1980: Exile and Integration* (Notre dame, Indiana: University of Notre Dame, 2007), 81.

<sup>188</sup> Ibid.

bodies, as well as having trouble to explicitly express their feelings. It is at this very moment that God's grace is manifested in such a manner, that we are uphold to the point of humility, because we are witnessing God's presence in the midst of the sick and the dying.

The Bible talks about a man named Job in the book that carries his name. This book is perhaps the oldest of the whole anthology. The theme is the pain and the suffering of losing everything that you hold dearly, and being inflicted by sickness and disease, including death and destruction. Why do just people suffer? As we review the first chapter we find a man who suffered: "Then Job arose, tore his robe, shaved his head and fell on the ground and worshipped. He said, "Naked I came from my mother's womb, and naked shall I return there; the Lord gave, and the Lord has taken away; blessed be the name of the Lord." In all this, Job did not sin or charge God with wrongdoing."<sup>189</sup>

People who are afflicted with diseases and end up in the hospice system also experience very difficult situations. In addition to losing their health, many Cuban exile patients have lost everything in life while others desire to be dead because they can no longer take the pain and the suffering. Sometimes I hear the families and even staff members wishing for someone to die because they can no longer witness the pain and the suffering of others. This behavior is typically found in the people who are just about to die.

The Latino experience is full of enigmas as to their understanding of how God's mediates their own suffering. Orlando O. Espín explains that: "Latinos do suffer *latinamente* when they place their explanation of that suffering within the religious

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<sup>189</sup> Job 1: 20-22 "New Revised Standard Version."



sphere, and when they attempt to confront and deal with suffering through the means offered [to] them by popular religion.”<sup>190</sup>

The faith of the people like in the case the exiled Cuban patients will endure regardless of the circumstances because it is communal. The brunt of the situation is dealt by the community as a whole. In this regard we can probably understand faith as communal or community of believers. Orlando O. Espín explains about how Latinos understand their faith in the face of injustice or unfairness:

In their suffering, our Latino communities also seem to assume that there is a divine decision (“the will of God”) to allow this suffering while at the same time encourage our fight against it. In other words, God both chooses to permit evil and chooses to empower us to stand against it. Furthermore, it seems that here is an explicit effort, on the part of Latinos, to not simply accept the will of God but to actively seek to change it when it appears to be unfair! Latino *experiencia*, and its gained wisdom, are not known for neatly explaining their intuitions, so we will not attempt to reconcile what the people themselves have not. It is important, however, that we notice (first) that God is active in Latino suffering, and not solely as responsible for that suffering, and (second) that the people feel themselves capable of changing the will of God. Perhaps it might be wise to recall Job’s expression, “The Lord gives and the Lord takes away. Blessed be the name of the Lord!”<sup>191</sup>

In many instances the faith of a community is expressed thru popular religiosity that allows human beings to seek shelter when confronted by life changing events. Popular religiosity is present in the lives of many hospice patients and is also an intricate tradition in the lives of the Cuban exile community.

Orlando O. Espín explains this understanding about popular religiosity:

“Hispanic popular religiosity is a parallel complex of symbols, rites, experiences, and beliefs that our peoples, feeling themselves marginalized from the mainstream of society

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<sup>190</sup> Orlando O. Espín *The Faith of the People: Theological Reflections on Popular Catholicism* (Maryknoll, New York: Orbis Books, 1997), 169.

<sup>191</sup> *Ibid.*, 168.

and church, have developed and sustained in order to communicate with God and experience salvation.”<sup>192</sup> In many of the houses that belong to Cuban exiled families I have seen homemade altars with a number of different religious articles. The family’s religious articles may in fact have been passed down from generation to generation. Even more important is the fact that many exiles continue to see themselves as if they were back in Cuba.

Juan Sosa, a Cuban catholic priest, reflects on what popular religiosity is and the role that culture and language play on it: “Popular piety reflects an intensity in the relationship of the people with God, expressed by means of symbols and religious devotions, and traditionally transmitted from generation to generation within each culture. Popular piety is closely related to the folkloric tradition of the particular culture which embodies it; for this reason, when analyzing the constancy of popular religiosity, neither the culture nor the language of the faithful can be ignored.”<sup>193</sup> In addition to this, I believe that popular religiosity flourishes in the lives of the Cuban exile patients helping them articulate the soul desires. Moreover, I have discovered that they possess a very intimate relationship with religious articles, and some of them are specific in nature for whatever the particular need is.

For Virgilio Elizondo explains that popular religion supports and functions in different manners according to the history of the people: “For a colonized/oppressed/dominated group, they are the ultimate resistance to the attempts of

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<sup>192</sup> Orlando O. Espín, “Grace and Humanness: A Hispanic Perspective,” in *We Are A People!: Initiatives In Hispanic American Theology*, ed. Roberto S. Goizueta (Eugene, OR.: Wipf and Stock Publishers, 2001), 148.

<sup>193</sup> Juan Sosa, South East Pastoral Institute, *Popular Religiosity and Religious Sincretism: Santería and Spiritism* (Miami, Florida: Documentaciones Sureste, 2000), 11.

the dominant culture to destroy them as a distinct group either through annihilation or through absorption and total assimilation. They will maintain alive the sense of injustice to which the people are subjected in their daily lives.”<sup>194</sup> Popular religiosity offers a number of functions within the Cuban exile community by providing security for the people who are participating in the religious experience. This enables the person to have a stable reference point in which he or she is able to acquire a better grasp and understanding of the ever changing world, and is also capable to adapt better to the new circumstances.

Roberto S. Goizueta explains how the popular religion experience helps strengthening communal identity: “The stories, symbols, and rituals of popular religion mediate these intergenerational bonds, thereby strengthening communal identity and self-identity.”<sup>195</sup> I believe this is the case with *la Virgen de la Caridad del Cobre* (Our lady of Charity), as an expression of popular faith that has been transmitted among generations. Miguel H. Diaz states that “she can be characterized as Our Lady of the Exile.”<sup>196</sup> He also mentions that “the story of Our Lady of Charity resists the temptation to subordinate one form of religious or cultural expression to another. The story challenges anthropological and religious marginalization.”<sup>197</sup> I have witnessed the importance of *la Virgen de la*

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<sup>194</sup> Virgilio Elizondo, “Popular Religion as Support of Identity,” in *Beyond Borders: Writings of Virgilio Elizondo and Friends*, ed. Timothy Matovina (Maryknoll, New York: Orbis Books, 2000), 126.

<sup>195</sup> Roberto S. Goizueta *Caminemos Con Jesús: Toward a Hispanic/Latino Theology of Accompaniment* (Maryknoll, New York: Orbis Books, 1995), 52.

<sup>196</sup> Miguel H. Díaz, “Dime con quién andas y te diré quién eres,” in Orlando O. Espín and Miguel H. Díaz editors, *From the Heart of Our People: Latino/a Explorations in Catholic Systematic Theology* (New York: Orbis Books, 1999), 163.

<sup>197</sup> *Ibid.*, 164.

*Caridad del Cobre* for the Cuban exile hospice patients in the many occasions that they share with me the life stories and their visits to *la Ermita* (shrine).

*Santería* is very much present in many of the Cuban exile hospice patients that I have visited. Juan Sosa describes *Santería* as “the worship of African gods under the appearance of Catholic saints, a result of the transculturation and religious syncretism of the Caribbean people.”<sup>198</sup> According to Sosa, in contrast to Cuba where *Santería* was practiced only by certain social classes and usually in secret, in the exile *Santería* is very popular.<sup>199</sup> He explains that “for the Cubans, *Santería* fills a vacuum produced by the loss of meaning in human values which cannot be explained by science (i.e the future, love, suffering, death).”<sup>200</sup>

This holds also true in the case of the many Cuban exile hospice patients, who do not practice *Santería*, but do have home altars that manifest their devotion for the Virgin Mary and different saints. I have experienced during more than thirty years of ministry that as human beings we live in a world filled with insecurities and full of surprises. Popular religion in part is born out of the lack of control of our environment, and the formidable task to meet the demands for our own needs, and the needs of our loved ones. Even when we try to prepare ahead and take into consideration all of the plans to meet the demands for the upcoming death, we will never be able to be one hundred percent certain that we will be ready.

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<sup>198</sup> Juan Sosa, South East Pastoral Institute, *Popular Religiosity and Religious Syncretism: Santería and Spiritism* (Miami, Florida: Documentaciones Sureste, 2000), 3.

<sup>199</sup> Ibid., 8.

<sup>200</sup> Ibid., 9.

The newness brought about by God's kenosis manifested by way of popular religiosity as part of the Cuban exile experience, helped us to better understand this community in the pursue of providing an effective pastoral care for them. The hermeneutical understandings of the physical and ontological implications of the process of dying will become more apparent in the next section, where we will explore perspectives on death and hospice ministry. This will allow us to continue to scrutinize the Cuban exile hospice experience, and to develop creative resources to assist in hospice ministry.

### **Theological Perspectives on Death**

The theological perspectives on death continue to bring possibilities in how to deal with the existential issues in the topic of hospice ministry with regard to the Cuban exile patients. Having a better understanding of the realities experienced by the people who had to endure life and death situations, will help to serve better these patients. This, by making hospice staff more conscious about what the Cuban exile patients are subjected to during the dying process, will eventually help to improve hospice ministry by making it, a more sensitive and profound experience.

Francisco Oller dwells in the fact that, although extremely difficult to accept, the rendition of the death of a young child being celebrated is worth noticing and needed to be preserved on the canvas of eternity. The pretext of what appeared to be the goodness of a bittersweet experience is shared by a society immersed in its own traditional beliefs,

under the enchantment of a mystical semiconscious attempt to drown the difficult realities of daily living with the mascara of a popular celebration.

We all have experienced or will experience traumatic events that will change our lives forever. I say “forever” because we will never be the same after the death of a loved one or by someone that we hold dearly. When death occurs and the departure of a human being, our intellect will embark into a traumatic difficult moment that becomes apparent by a trance like period. The highly emotional stage is a direct result of the extremely stressful situation that was brought about by the passing of the person who was related to us. This kind of extreme life situation brings thoughts concerning human finitude, solitude, and other philosophical and theological questions that deal with existential issues. Seeking a better understanding of theological perspectives on death will help us enhance the knowledge of the realities encountered by the patients, family, and staff members in hospice care.

Theological and other anthropological disciplines are fundamental, and need to be taken into account if we want to offer an improved pastoral care for the Cuban exile patients in the context of hospice ministry. People have always been concerned with the human unsettling realities and one of the themes that have always been in the forefront is the pain and the suffering of the humankind.

I have found that in the case of the Cuban exiles to find God in the midst of their pain and the suffering is extremely difficult to accept, but could be an opportunity for taking a positive meaning by the redemptive power of Jesus:

For the Christian, our encounter with suffering and death can take on a positive and distinctive meaning through the redemptive power of Jesus’ suffering and death. As St. Paul says, we are “always carrying about in the body the dying of Jesus, so that the life of Jesus may also be manifested in our body” (2 Cor 4:10).

This truth does not lessen the pain and fear, but gives confidence and grace for bearing suffering rather than being overwhelmed by it. Catholic health care ministry bears witness to the truth that, for those who are in Christ, suffering and death are the birth pangs of the new creation. “God himself will always be with them [as their God]. He will wipe every tear from their eyes, and there shall be no more death or mourning, wailing or pain, [for] the old order has passed away” (Rev 21:3-4).<sup>201</sup>

This is especially true when many of their family members have been made martyrs by the Cuban regime. In some other cases the crisis is compounded by the lack of resources available to them. Catholic Health services are on the forefront providing help to many of these Cuban exile patients where we can see the face of Jesus throughout the process:

The response of Catholic health care institutions and services to these challenges is guided by normative principles that inform the Church’s healing ministry. First, Catholic health care ministry is rooted in a commitment to promote and defend human dignity; this is the foundation of its concern to respect the sacredness of every human life from the moment of conception until death. The first right of the human person, the right to life, entails a right to the means for the proper development of life, such as adequate health care. Second, the biblical mandate to care for the poor requires us to express this in concrete action at all levels of Catholic health care. This mandate prompts us to work to ensure that our country’s health care delivery system provides adequate health care for the poor. In Catholic institutions, particular attention should be given to the health care needs of the poor, the uninsured, and the underinsured.<sup>202</sup>

Death is commonly viewed and personalized as something that is obscure, unknown and misunderstood. Death is total depletion of the vitality of life as I mentioned before. The depletion means separation because the very nature of life being no longer will become something else and this is what we call death. Death is axiological in character but “death” does not exist.

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<sup>201</sup> United States Conference of Catholic Bishops, *Ethical and Religious Directives for Catholic Health Care Services*, (USCCB, 5th edition, 2009), 6 -7.  
<http://www.usccb.org/about/doctrine/ethical-and-religious-directives/> (Accessed on April 5, 2015)

<sup>202</sup> Ibid., 9.

For many immigrants who leave their country of origin and come through the desert from Mexico and some other Central American countries, death is pretty much real:

But there was something else happening in the desert that interrupted my contemplation of its surprising beauty: a growing number of migrant deaths. In the summer months the reports of women and men, children and infants dying in the desert is as endless and unforgiving as the heat of the sun. Almost inexplicably, every summer for the past several years seems to register a new record of deaths in the borderlands.<sup>203</sup>

The desert for the Cubans migrants who are trying to leave Cuba and to come to the United States, is the stretch of water between Florida and the island of Cuba, where thousands of Cuban migrants have died trying to escape communism, and the Castro regime, only to find death in the process.

Anyone with experience in hot and arid desert regions will be able to understand the challenging and terrifying countenance of the desert. Inhospitable to human survival, impersonal and unrelenting to human needs and desires, the desert is a location where body and soul are easily wounded beyond recovery. Nothing seems to be in moderation here: the sun is fierce and excessive, deaf to the pleas of pilgrims seeking refuge of shade.<sup>204</sup>

The sea is also very ruthless, hostile to human survival; unfriendly and unconcerned to human desires, the sea is also a location where body and soul are easily broken beyond renewal. This is also what the *balsero*<sup>205</sup> experience when crossing the Florida straits and this is what is in the minds of the people who have survived by a

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<sup>203</sup> Alex Nava, "God in the Desert: Searching for the Divine in the Midst of Death" in Daniel G. Groody and Gioacchino Campese editors, *A Promise Land, A Perilous Journey: Theological Perspectives on Migration* (Notre Dame, Indiana: University of Notre Dame Press, 2008), 63.

<sup>204</sup> *Ibid.*, 65.

<sup>205</sup> *Un balsero* is a Cuban person who is using a homemade flotation device such as an inner tube from a tire. As you can imagine, this type of "water vessel" is by no means any matched for the Florida straits which are famous for the rough seas, compounded by the Gulf of Mexico currents. Thousands have perished while taking on this Herculean feat.



miracle *la travesía*. In times of dire need we come to the realization that God is found in the desert, and is also found in the sea:

Any traveler to these regions will understand why clouds thus signal the presence of God to the wandering Jews in biblical times. Clouds not only hide the face of God (and hence are metaphors of divine incomprehensibility) but they also hide the severe face of the sun, providing an exiled people with respite from its damaging power.<sup>206</sup>

In hospice ministry we offer respite care to the Cuban exile patients who are overwhelmed by the journey through seas of hospice ministry, a very difficult undertake, where we try to help them find God in the midst of the travel. We see the face of Jesus in the lives of those who have been made martyrs by the hands of the oppressors in this biblical account:

When they heard these things, they became enraged and ground their teeth at Stephen. But filled with the Holy Spirit, he gazed into heaven and saw the glory of God and Jesus standing at the right hand of God. "Look" he said, "I see the heavens opened and the Son of Man standing at the right hand of God!" But they covered their ears, and with a loud shout all rushed together against him. Then they dragged him; out of the city and began to stone him; and the witnesses laid their coats at the feet of a young man named Saul. While they were stoning Stephen, he prayed, "Lord Jesus, receive my spirit." Then he knelt down and cried out in a loud voice, "Lord, do not hold this sin against them." Acts 7: 54-60.

Even though, when we are before the absence of life we have given this phenomenology<sup>207</sup> a name called "death," this characterization is normally used when

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<sup>206</sup> Alex Nava, "God in the Desert: Searching for the Divine in the Midst of Death" in Daniel G. Groody and Gioacchino Campese editors, *A Promise Land, A Perilous Journey: Theological Perspectives on Migration* (Notre Dame, Indiana: University of Notre Dame Press, 2008), 65.

<sup>207</sup> See Maurice Merleau-Ponty, "La Primacía de la Percepción," in *Problemas de la Filosofía: Textos Filosóficos Clásicos y Contemporáneos*, ed. Luis O. Gómez and Roberto Torretti (San Juan, Puerto Rico: Editorial de la Universidad de Puerto Rico, 1995), 327-341. Phenomenology is the methodology used by many existentialist philosophers like Jean Paul Sartre, Maurice Merleau-Ponty, and Albert Camus, to name a few, to describe the phenomena that takes place when a human realizes that they are a fully fleshed being, living; and a conscious entity by way of "breaking down" the reality perceived before them into "instances" of reality, where the person is able to recognize by the forces of perception in conjunction with the human understanding of self (ontological forces), whereby the interaction thus making the person realized that they exist as "a being in the world."

referring to living creatures including plants and animals, but normally not to other matter like rocks, soil, fire, or water; unless speaking metaphorically.

The Bible sometimes refers to “conscious life” when speaking about human beings and animals while considering plants as “unconscious life,” although all humans, animals, and plants have what is called “breath of life.” Jesus also refers to the people who are away from the will of God as dead in their sins and corruption: “But Jesus said to him, “Let the dead bury their own dead; but for you, go and proclaim the kingdom of God.”<sup>208</sup> While referring to the departed who observed the pious life and the ones who may still be alive as “living:” “Now he is God not of the dead, but of the living; for to him all of them are alive.”<sup>209</sup> Utilizing these images we can conclude that someone who is physically alive could be spiritually dead just because of the sinful nature of the life that they are living (practicing) and that someone who is dead is spiritually alive because of the pious life they have lived while they were physically living. The Bible even speaks about a second type of death reserved for those who will be separated from God’s presence for eternity.

In summary, we have the spiritual death of the person who is physically living, the physical death but still spiritually alive, the death of the spirit (condemnation) of the already departed, and the physically and spiritually alive or the one who are still living.

Anthropological and ethical perspectives, in regard to death and the dying must be taken into consideration during the dying process. They are essential and fundamental

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<sup>208</sup> Luke 9:60 (New Revised Standard Version).

<sup>209</sup> Luke 20:38 (New Revised Standard Version).

because they allude to the interaction between the physical and the spiritual consequences for the Cuban exile patient who is in the process of dying.

### **Anthropological and Ethical Perspectives in regard to Death and the Dying**

Physical death entails the biomedical understanding that happens when the physical body lacking the health or physical functionality to preserve life as we know it is no longer present. The natural mechanisms that would normally sustain the physical body will start to deteriorate to the point that life is no longer sustainable and the person dies. Immediately after death the body starts to deteriorate and disintegrate until it is no longer recognizable. The gruesome corruption of the body is a very strong reminder that the person is no longer with us. The name that we give to the beginning of the process by which the person will be consumed after it is no longer living is death. According to Elizabeth Kübler –Ross, M.D.:

Paradoxical as it may sound, while society has contributed to our denial of death, religion has lost many of its believers in a life after death, i.e., immortality, and thus has decreased the denial of death in that respect. In terms of the patient, this has been a poor exchange. While the religious denial, i.e., the belief in the meaning of suffering here on earth and reward in heaven after death, has offered hope and purpose, the denial of society has given neither hope nor purpose but has only increased our anxiety and contributed to our destructiveness and aggressiveness-to kill in order to avoid the reality and facing of our own death.<sup>210</sup>

I have experienced that some of the Cuban exile patients who are afflicted by terrible diseases are in so much pain and anguish that they rather be dead than to be living. Others, because of the understanding they have about the afterlife, they feel that the

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<sup>210</sup> Elizabeth Kübler-Ross, M.D. *On Death and Dying: What the dying have to teach doctors, nurses, clergy, and their own families* (New York, N.Y.: Scribner, 1969), 29.

afterlife is a better place to be. They rather prefer to be dead than to be living in a world that have caused them so much pain and suffering, and because they want to start experiencing a better life.

During the dying process the Cuban exile patients are subject to a series of emotional phases. These highly emotionally charged experiences are very well explained by Elizabeth Kübler-Ross, M.D., who defined five stages that the patients and family members endure during and after the dying process. After the definition of each one of the stages I will discuss how they apply to the hospice patients who are Cuban exiles.

The first stage is denial:

First Stage: Denial and Isolation- This anxious denial following the presentation of a diagnosis is more typical of the patient who is informed prematurely or abruptly by someone who does not know the patient well or does it quickly “to get it over with” without taking the patient’s readiness into consideration. Denial, at least partial denial, is used by almost all patients, not only during the first stages of illness or following confrontation, but also later on from time to time.<sup>211</sup>

Some of the Cuban exile patients have shared with me during this stage that they are pretty much in disbelief of what is happening to them. Each patient reacts different because they have different personalities and are affected by the disease in so many different ways. The fact remains that is extremely difficult to accept that they have been inflicted by a deadly disease that eventually is going to claim their lives.

In the second stage mentioned by Kübler-Ross we discover the frustration and the anger that many patients experience:

Second Stage: Anger- When the first stage of denial cannot be maintained any longer, it is replaced by feelings of anger, rage, envy, and resentment. In contrast to the stage of denial, this stage of anger is very difficult to cope with from the point of view of family and staff. The reason for this is the fact that this anger is

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<sup>211</sup> Elizabeth Kübler-Ross, M.D. *On Death and Dying: What the dying have to teach doctors, nurses, clergy, and their own families*, 1969), 52.

displaced in all directions and projected onto the environment at times almost at random... The problem here is that few people place themselves in the patient's position and wonder where this anger might come from.<sup>212</sup>

Imagine the Cuban exile community who were victims of injustices and they have struggled all of their lives making ends meet, and now to add insult to injury, they find that they are going to die away from their homeland after all. Many do not speak any English and they are left with little to marginal communication with the caregivers. Sometimes they have no family members left because of their fragile health condition; it had little by little excommunicated them from society to the point of exclusion. These are the patients that really had impacted me the most because the minister is their family and the only person who is going to look and speak after their interest as far as what is available to them.

The third stage mentioned by Dr. Kübler-Ross has to do with the existential crisis where they seek an avenue of escape:

Third Stage: Bargaining- The third stage, the stage of bargaining, is less well known but equally helpful to the patient, though only for brief periods of time. If we have been unable to face the sad facts in the first period and have been angry at people and God in the second phase, maybe we can succeed in entering into some sort of an agreement which may postpone the inevitable happening.<sup>213</sup>

The third stage is very common by people like the Cuban exile patients who have dealt with many crises in life where they had to find the way out of many situations and were able to bargain them out. Since on many other circumstances the bargaining may have worked perhaps it may work one more time. In the scheme of things presented to the patient by religious circles many avenues are considered. They truly believe to be

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<sup>212</sup> Kübler-Ross, *On Death and Dying*, 63-64.

<sup>213</sup> *Ibid.*, 93.

able to seek and negotiate a way out to what may seem to be a sensible answer. The truth remains that in the process by which someone is trying to seek refuge or trying to escape their reality, pastoral care will help mediate and alleviate the situation by making the Cuban exile patient understand that there is nothing to fear. During this process some patients may in fact be victims of depression according to Kübler-Ross:

Fourth Stage: Depression- When the terminally ill patient can no longer deny his illness, when he is forced to undergo more surgery or hospitalization, when he begins to have more symptoms or becomes weaker and thinner, he cannot smile it off anymore. His numbness or stoicism, his anger and rage will soon be replaced with a sense of great loss.<sup>214</sup>

During this stage the Cuban exile patient is in great need of accompaniment. I had many patients called me because of their desire for the chaplain to be next to them during this process. I remember that many of them would not sleep until the chaplain is guarding their sleep. They do not want to be left alone and they are in constant watch because they do not want to die alone. They have realized that they are going to die pretty soon because they literally feel that their vitality is leaving them at a pretty fast pace. The last stage according to Kübler-Ross is acceptance:

Fifth Stage: Acceptance- If a patient has had enough time (i.e., not a sudden, unexpected death) and has been given some help in working through the previously described stages, he will reach a stage during which he is neither depressed nor angry about his "fate." He will have been able to express his previous feelings, his envy for the living and the healthy, his anger at those who do not have to face their end so soon. He will have mourned the impending loss of so many meaningful people and places and will contemplate his coming end with certain degree of quiet expectation.<sup>215</sup>

Is in this stage where the Cuban exile patient becomes more open to be ministered to. The acceptance stage is also where many of the unresolved issues are dealt with by

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<sup>214</sup> Kübler-Ross, *On Death and Dying*, 97.

<sup>215</sup> *Ibid.*, 123-24.

the patients. They ask for family members to come so that they can clarify their final wishes. During this final stage many of the unresolved narratives are finally dealt with. However, because of the patients fragile state of mind and brittle body time is of the essence.

People involved in ministry are held to a higher standard than most other professions. This is due to the fact that pastoral ministry is a job that requires the observance of many fronts. Richard Gula points out the adherence to a Code of Professional Ministry Responsibility<sup>216</sup> will be essential in this line of work. A pastoral ministry that is a vocation and a profession: “As vocation, it is our free response to God’s call in and through the community to commit ourselves in love to serve others. As profession, our pastoral ministry is a commitment to be of good moral character and to acquire special competence pertaining matters of our religious tradition so as to serve the religious needs of the community.”<sup>217</sup> Ethical perspectives were developed to help us discern better as to what decisions should be made during the process of someone dying.

Advance directives<sup>218</sup> are legal documents where patients specifically express their desire in case of deteriorating health issues in advance when they no longer can make decisions on their own. This is also call a living will or a personal directive giving

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<sup>216</sup> Richard M. Gula, S.S., *Ethics in Pastoral Ministry*, (Mahwah, New Jersey: Paulist Press, 1996), 142.

<sup>217</sup> *Ibid.*, 144.

<sup>218</sup> Terms such as “advance directive,” “living will,” “health care proxy,” and “durable power of attorney for health care” often are used interchangeably to refer to any document that is designed to permit a non-autonomous patient to direct his or her medical care at the end of life. Such documents are of two broad types. The first records the patient’s specific preferences for treatment or non-treatment in various clinical situations. Treatments addressed most frequently are cardiopulmonary resuscitation, antibiotics for infection, blood transfusions, kidney dialysis, and artificial nutrition and hydration. The second type authorizes another person to speak for the non-autonomous patient at the time decisions actually have to be made.

instructions for treatment when they find themselves incapacitated to do so. These instructions for treatment are recognized in the United States and have legal standing. However, there have been instances where these have been challenged in a court of law. A person may also designate and give power of attorney or even designate a person as the legal representative to make health care decisions on their behalf.

One of the most difficult issues about patients, who are extremely ill and experiencing extreme pain, is that they have to deal with other life and death problems. Euthanasia, artificial nutrition and hydration, are two of the issues that have been debated by people who understand them differently. The selection of the nursing homes and assisted living facilities, as well as end of life care, is also a concern for the patients and family members. In the case of the Cuban exile patients for the most part, they have a lack of knowledge about these types of issues and the services available to them. They do not know how this would affect the outcome of their family members.

The effort made by so many caring professionals along with the help of family members make the hospice experience a little more bearable. The moral support given to the patients comes from every direction. I realized that the families are always grateful for the loving care they receive in this type of ministry.

### **Theological and Pastoral Framework**

As a way of summarizing this chapter, I will now unify the principals analyzed into a statement of a theological and pastoral framework for an effective pastoral care of the Cuban exile hospice patients. Hospice care needs to acknowledge the pain and



suffering endured by the separation from their homeland. Traumatic experiences must be dealt with the care and support of a diligent pastoral care. The Cuban patients' life struggles must be dealt with an all-inclusive approach that will attend their particular needs. The principles of identity, culture, *la tierra*, and popular religiosity have to be honored and respected. Other life related issues such as: theological, ethical, and anthropological perspectives in regard to death and the dying, are also essential to hospice care ministry. God is present in the midst of the pain and the suffering experienced by the Cuban exile patients as they face death and prepare to cross the bridge to eternal life.

In the next and final chapter, I will present suggestions with an all-inclusive approach for an effective pastoral care to Cuban exile patients in the context of hospice ministry.

## CHAPTER 5

### TOWARDS A MINISTRY OF HOPE AND OF LIFE

The colors of life are vibrant in the work of Francisco Oller. More so are the depictions of togetherness displayed in the painting of the Caribbean culture. The scene painted in *el Velorio* slows down time by allowing us to meditate in how the people who were poor and oppressed are still relevant to us today, and will continue to be even after their departure.

As a pastor, I am very much concerned about reconciliation. One of the main tasks for ministers is to make sure that a person finds a resolution by way of Christ's presence in the process of dying. Many of the Cuban exile patients are in need to reconcile the difficult experiences of the past, especially now when they are faced by the reality of human finitude that approaches. I truly believe, and my pastoral experience tells me, that the reconciliation for the Cuban exile patients will be materialized by way of God's presence in the midst of their pain and solitude. This will become the true reconciliation that could answer the person's desire to have peace in the very last moments, while dying away from the homeland. Hospice care is a ministry of hope and of life. Although it deals with the departure of a human being, it is also the beginning of a new life in Christ.

At the beginning of this thesis project, I explained that my ministerial concern was: What kind of pastoral care do we need to provide to the exiled Cuban patients in the context of hospice ministry? And my intuition was: the need to develop a more

comprehensive and effective approach by identifying the particular pastoral needs of the patients who are dying in *el exilio*.

The theological questions that I posed at the beginning of the thesis-project were: How is God present in the situation of dying in exile? Or how do the lives of those dying in exile reveal the face of God (or of Jesus)? I continue to believe that God is in the midst of the sick and the dying. The Cuban exile experience has been full of challenging moments. The exile struggles are compounded by the fact that they are now dying away from their homeland, but God is with them.

As a result of the discussions presented in the last four chapters, I now propose a new praxis for an effective pastoral care to Cuban exile patients in the context of hospice ministry.

### **A New Praxis for a Ministry of Hope and of Life**

The pastoral care mission is to provide compassionate care to the sick and the infirm, and to the people who have been victimized and marginalized. In the process to find ways to develop a more efficient hospice care ministry for the Cuban exile patients, I analyzed their pain and their suffering when dying away from their homeland. After an in-depth analysis of the needs of this community I have developed a new praxis, seeking to mend and to assist the employees of the hospice care who in-turn will provide a better service to these patients. The new praxis has to materialize in a manner that will take into account the realities experienced by this community, in an effort to provide a better hospice care service. The theological and pastoral framework for the renewed praxis is

based on the principles that emerged as a product of the scrutiny of the painting of *El Velorio*, the hospice stories and the context in which Cuban exile hospice patients find themselves. The new praxis is therefore based on the principles of Identity, Culture, *La Tierra*, Popular Religiosity, Theological Perspectives on Death, and Anthropological and Ethical Perspectives in regard to Death and the Dying. I strongly believe that these principles are very valuable to attend to the needs of the Cuban exile hospice patients.

The pastoral strategies of the renewed praxis are:

1. To provide an improved pastoral care for Cuban exile patients
2. To create an environment conducive for a true reconciliation
3. To bring forth a new solidarity approach for the Cuban exile patients
4. To rescue and perpetuate memories of hope and life for the exiled family members
5. To train hospice care employees on the principles for an effective pastoral care to Cuban exile patients:
  - 5.1 To embrace their identity
  - 5.2 To celebrate their culture
  - 5.3 To understand their love for *la tierra*
  - 5.4 To allow expressions of popular religiosity
  - 5.5 To accompany patients and families by making a safe space in impending death

## **1. To Provide an Improved Pastoral Care for Cuban Exile Patients**

Pastoral care is one of the most important services in the health programs that provide care to the sick and the dying. At the end of life the patients desire to have a human being to whom they can talk, and one that they can trust to mediate the situation when they cannot help themselves. So when the spiritual care provider attends to their needs, they will know what to do to ease their pain, concerns and sorrows.

The pastoral care team for the exiled Cuban community in the context of hospice ministry should have a common understanding of the reality of the people who were exiled from Cuba and now are dying away from their homeland. The renewed pastoral care of the Cuban exile patients must address their particular needs by honoring and respecting the principles of identity, culture, *la tierra*, and popular religiosity. Other life related issues such as: theological, ethical, and anthropological perspectives in regard to death and the dying are also essential for their pastoral care. God is present in the midst of the pain and the suffering experienced by the Cuban exile patients as they face death and eternal life, as God was present with the Israelites.

The pastoral care must formulate a hospice culture that addresses issues of accompaniment as part of the mission of the church in this area of ministry. Roberto Goizueta explains that:

To accompany another person is to *walk with* him or her. It is above all, by walking with others that we relate to them and love them. This notion now further specifies the act of accompaniment: the paradigmatic form of human action is not simply that of “being with” another but, rather, the act of “walking with” the other. To be in relationship with others and, therefore, to be a human person is to walk with others. The notion of “walking with” incorporates both the ethical-political and the aesthetic dimensions of human praxis<sup>219</sup>

The accompaniment must also comprehend the preferential option for the poor and the oppressed by the communal action in walking with *Jesús*:

The preferential option for the poor is not only an ethical-political option, or an aesthetic option, or a rational option—though it is all of these too; it is, fundamentally, a spiritual option. Through this commitment Jesus transforms not only social structures, not only our hearts and minds, but also our very souls. In the cry “Caminemos con Jesús,” we proclaim *Jesus* as the source of our community, our solidarity, and, therefore, our liberation. All the nuances, complexities, and ambiguities of our theological analyses of U.S. Hispanic popular Catholicism must ultimately return to this single, simple, fundamental

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<sup>219</sup> Goizueta, *Caminemos con Jesús: Toward a Hispanic/Latino Theology of Accompaniment*, 206.

fact. “*Caminante, no hay camino*”...”*Caminemos con Jesús.*” That place which, for others, is no-where is for us the Way. Those persons who, for others, are irrational and simple-minded are for us the privileged witnesses to the Truth. Those who, for others, are no-bodies are for us the bearers of Life. As we walk together with Jesus, it is together with him that we find our liberation. ¡*Caminemos con Jesús!*<sup>220</sup>

I envision accompaniment in the Hospice care ministry for exiled Cuban patients as “a listening presence; help in dealing with powerlessness, pain, and alienation; and assistance in recognizing and responding to God’s will with greater joy and peace.”<sup>221</sup> In addition to this, accompaniment in hospice care is acknowledging their live experiences, listening to their narratives and honoring their lives.

Pastoral care must become a ministry of empowerment thereby bringing hope and the understanding that regardless of what transpires God is in control. God’s presence is with all of the participants of hospice full of love and peace. The member of the pastoral care team discerns and waits for the right moment to interact by trusting God’s providential wisdom to be able to attain the necessary words of comfort for the patient and family members.

## **2. To Create an Environment Conducive for a True Reconciliation**

I realize that by dying in *el exilio*, many dreams will never materialize for the Cuban exile patient. I have witnessed their sorrow first hand while ministering to them at that very moment. In the last hour of the lives of the exiles the prominent presence of the

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<sup>220</sup> Goizueta, *Caminemos con Jesús: Toward a Hispanic/Latino Theology of Accompaniment*, 211.

<sup>221</sup> United States Conference of Catholic Bishops, *Ethical and Religious Directives for Catholic Health Care Services*, (USCCB, 5th edition, 2009), 14, <http://www.usccb.org/about/doctrine/ethical-and-religious-directives/> (Accessed on April 5, 2015)

Holy Spirit becomes apparent. I have seen the miracles and witnessed the events that transpire at the last instant. This is the time when *la lucha no importa* because is a moment for reconciliation and for *solidaridad con el pueblo cubano*. As the Bible says: “So if anyone is in Christ, there is a new creation: everything old has passed away; see, everything has become new!”<sup>222</sup>

The human necessity of dying in peace is more apparent in the patients who are about to die. They seek for peace and harmony with the people who are surrounding them, and even will go out of their way to acknowledge their gratefulness. However, the most important fact is that the patients seek to die in peace with loved ones. One of the most vital concerns in pastoral care ministry is reconciliation.<sup>223</sup>

The spiritual needs of the family should be also addressed in an informative manner during the process of explaining to the family members about hospice and its implications:

Modeled by a visiting care partner and imitated by the family caregiver and other family members, empathic listening can bring about relational changes within the family system. These relational changes can improve the emotional climate in which the patient must live out his or her sickness. Possibly the most important area here is forgiveness: the willingness to seek forgiveness when it is needed and the willingness to grant forgiveness when it is asked.<sup>224</sup>

The job of the minister and counselor is to assist the patients with the human ability to look for and to impart the love and forgiveness, to promote affection and to help pronounce for them the words that they cannot express themselves, due to the many

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<sup>222</sup> 2 Corinthians 5:17 (New Revised Standard Version)

<sup>223</sup> Robert J. Schreiter, *The Ministry of Reconciliation: Spirituality and Strategies* (Maryknoll, New York: Orbis Books, 1998).

<sup>224</sup> Beverly Anne Musgrave, “The Costly Business of Being a Care Partner” in *Partners in Healing: Bringing Compassion to People with Illness or Loss* eds. Beverly Anne Musgrave & John R. Bickle (New York, Mahwah: Paulist Press, 2003), 90.

illnesses. When you speak on their behalf words of wisdom and honor, life giving words to friends and family members, you could see in their faces the reflection of joy and the way they acknowledge you with a gesture of approval, as a way to thank you for doing this for them.

Although, a reconciliation process will materialize when all of the parties are in agreement, this is not the case for the Cuban exile patients, because the perpetrators are still committing crimes and dissention. The story of *las Damas de Blanco*<sup>225</sup> is an example of this. The patients' narratives of the past are full of painful situations. Many family members and friends have disappeared and they do not know if they will ever see them again. In other cases, many others have been taken to prison and have been tortured:

“Torture is especially evil because its very purpose is to rob the victim of autonomy and trust. The torturer tries through the systematic infliction of pain to inscribe the message that he has complete power over the victim. The victim can try to resist, but will not bring an end to the torment. The victim can scream, but no one can hear all shreds of dignity and autonomy stripped away. And the victim is meant to feel deeply alone.”<sup>226</sup>

They have to fight for the reconciliation of the past by the present stance against the abuse of the oppressors so they can safeguard their children's future. They live in a world full of memories of the past intertwined with the present because they refuse to let go the memories of the people whom they love. It is a never ending struggle to find the

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<sup>225</sup> *Las Damas de Blanco* is a group of women who organized themselves against the Castro regime. In the early morning of March 18, 2003, Castro's regime attacked against a number of entities (journalists, or people who oppose the regime and many family members). The military dictatorship incarcerated these people because they have been manifesting peacefully against the government. A number of them were sentenced to many years in prison while others disappeared and they are feared dead. *Las Damas de Blanco* is born out of the injustices perpetrated against family members killed or incarcerated.

<sup>226</sup> Robert J. Schreiter, C.P.P.S. *The Ministry of Reconciliation: Spirituality & Strategies*, 74.



missing pieces of the mosaic that has been tainted with the blood of the victims, while pursuing freedom for those they care for.

In many occasions, the experience of being confronted by death and despair in some special way creates an environment conducive to forgiveness and embracing. The embracing and forgiveness are experienced by those who have issues and situations that need to be reconciled with others and the hospice minister should take advantage of this.

### **3. To Bring Forth a New Solidarity Approach with the Cuban Exile Patients**

Solidarity is being one with the Cuban exile patient that is unable to articulate and express his or her needs because of the debilitating disease. I want to understand the patients suffering and I also suffer with them. I must learn to hear and listen to their cry but to also cry with them. Crying<sup>227</sup> is also very much real and an intrinsic part in the pastoral care process of spiritual healing. Crying is the burst and release of the reality of the narrative of truth that abounds and overwhelms the soul. It comes from the narrative of the truth that has been dismembered by the narrative of the lie personified by those who stole what the Cuban exile consider some of the most valuable treasures, their contentment and the place they call home.

Solidarity is part of who we are as Christians because we are to preserve relationships by way of solidarity and friendship:

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<sup>227</sup> Elizabeth Kübler-Ross and David Kessler *On Grief and Grieving*, 42. “Tears are one of the many ways we release our sadness, one of our many wondrous built-in healing mechanisms. Unfortunately, too often we try to stop this necessary and primal release of our emotions. In grief we often have only two main thoughts about crying. The first is the overwhelming thought of sadness that hits us. The second is, “I must stop crying.” After many people begin to cry they quickly move to stop this natural phenomenon.”

Because we are all interrelated, solidarity connects us with those most disconnected from the human family. In a time when there is such emphasis on upward mobility, solidarity, as an expression of Christian charity, is a form of downward mobility that expresses itself concretely in the preferential option for the poor. Downward mobility puts its emphasis on people rather than possessions, on action on behalf of justice rather than accomplishments on behalf of the ego, and on the God of hope rather than the god of greed.<sup>228</sup>

Solidarity with the Cuban exile patient entails sharing their suffering for not being able to go back to their homeland and for the many struggles that they have experienced living in *el exilio*. Solidarity with the Cuban exile experience is what makes the commitment to help improve the pastoral care provided to them in hospice, in a way that promotes a good stewardship of the resources available to them.

Solidarity will help the survivors of a tragic event because they experience a roller coaster effect during the grieving process. The pastoral care needs to help identify the different ways that a family survivor may be confronted by the death of a loved one, so they can help support family members. According to Ligia M. Houben grief could be characterized as; anticipated, sudden, or complicated.<sup>229</sup> Anticipated death is when we know that someone is going to die but also that this is going to give to us a great deal of pain. Sudden death is when nobody expected the sudden death of a friend or family member by way of a heart attack, natural disaster, etc. A complicated death has to do with a murder or some similar event. They all have a reason to mourn, although they are

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<sup>228</sup> Daniel G. Groody *Globalization, Spirituality, and Justice* (Maryknoll, New York: Orbis Books, 2007), 254.

<sup>229</sup> Ligia M. Houben *Transfoma Tu Perdida: Una Antología de Fortaleza y Esperanza* (Miami, Florida: My Meaningful Life-Life Transition Center, 2007), 47-51.

different ways of being impacted by death.<sup>230</sup> Solidarity is extremely essential during these different types of losses.

To accompany the family and the sick in this moment of pain and sorrow is also an expression of solidarity with their suffering. One of the areas where I have found to be a most crucial source to help the patient and family members to develop a relationship with the Creator of all existing things, regardless of religious beliefs. When nothing else matters, is important to be in relationship with the Creator, and to develop a sense of unity with friends and family members, will become crucial.

#### **4. To Rescue and Perpetuate Memories of Hope and Life for the Exiled Family Members**

The silence of the memories of the exiled family members, who had departed, is part of the human tendency to put behind the sad experiences of the past and to move on. It is vital and our duty to preserve the memories of the exiled Cuban patients since they are an integral part of who they are and how will they be remembered.

A hospice care of accompaniment is going to help us to understand our present by looking at our past. During the grieving process the pastoral care will help support the family members to preserve the memories of the loved ones. The memories of the people who touched our hearts and helped us to become who we are today must be preserved forever. Many times life has a tendency to change our view and to obscure our experiences and memories. This creates an internal fight because we want to preserve them as intact as possible. For this reason, it is important to encourage those who

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<sup>230</sup> Ligia M. Houben *Transfoma Tu Perdida: Una Antología de Fortaleza y Esperanza*, 48-51.

accompany the patients to listen and to share their (patients) stories so they can be preserved and honored for future generations.

Catholic Hospice should promote a program supporting families and even teaching them how to create a dignified memoir. They could create a monument in memory of the people who have passed away with a small inscription with the family choice words.

Since the process of reconciliation is not the same for every person, we must continue to provide bereavement and counseling services to the family members if necessary. The yearning we experience to have our loved ones next to us, is part of the healing process experienced by family members. The healing process and the remembrance of our family memoirs will help family members and friends deal with this reality.

##### **5. To Train Hospice Care Employees on the Principles for an Effective Pastoral Care to Cuban Exile Patients**

The fifth pastoral priority is to train hospice care employees on the principles for an effective ministry of the Cuban exile patients. The training program that I propose should be provided as part of the initial staff orientation process, and also as part of an annual refresher's training for staff. The training can be conducted by a member of the pastoral team or by the training department of Catholic Hospice.

The training program will cover the principles of identity, culture, *la tierra*, popular religiosity, and the theological and anthropological issues in regard to death and

the dying. These principles will address the Cuban exile patients' experience, but will also serve as a model for the care of many other patients that represent the multicultural society we live in.

### **5.1 To Embrace their Identity**

The first principle is the Cuban exile identity because it is here where we find the very core of the Cuban uniqueness. My perception is that the identity of the Cuban exiles proclaims the very seeds of what they are made of and the seedlings for future generations. The workshop must seek to recognize that for a comprehensive understanding of the Cuban exile, the staff member will need to be aware of their history (background), along with all of the struggles that this community has endured. This is due to the fact that if we are not aware of the Cuban experience, we are committing what I have called "Identity Theft."

During this section a number of Scriptures could be read as part of the training like the "Exodus" where the people of Israel were guided into the Promise Land, a land not made by humans but by God. Another subject area than can be introduced is by considering the importance of enabling the patients to share their personal stories with them. A notebook or a tablet could be provided when the patient is unable to speak but is able to write, this, as an example in how we can reach even the ones that are more ill. The use of Cuban music and even reading portions of what is taking place in Cuba would help tremendously. Special training should be administered with emphasis in Cuban history (particularly the Cuban revolution) and their struggles so staff will know what the patient is talking about.

## 5.2 To Celebrate their Culture

The second principle that a comprehensive workshop must include is the study of the Cuban culture. The Caribbean culture is full of life and happiness where the families and friends are at the very core. There is a very striking difference between the Cuban and others families that consider some of the family members as “extended family.” This is not the case of the Cuban exile families where every one belongs including friends; they all are just that, family.

The Cuban culture celebrates life and the family accomplishments in a very vivid manner. The workshop must seek to bring understanding about the cultural values of the Cuban exile families. To respect their culture is to respect the very person. In reference to the language barriers, it is extremely important to provide hospice services to each family, preferably in their own language or *lengüa vernacula*, because this will help the families communicate in a better way during this difficult process. We must also be sensitive to the traditions of the people to whom we minister. Each culture is a world of opportunities for us to announce the gospel of faith and hope in a world that has a culture of death. Hospice should incorporate Cultural Diversity training to its employees. We live in a multicultural and multi-faith society and cultural diversity training is one of the more versatile tools to help the staff of hospice care deal with the gamma of patients that come from different cultures:

Pastoral caregivers in culturally homogenous communities of faith may not experience a need for providing intercultural pastoral care. This need is greatest among pastoral caregivers in public institutions like hospitals, nursing homes, and hospice organizations, in which there is a higher likelihood of encountering people from different cultures. Even in homogenous settings, however, the need for intercultural pastoral care arises when members of the congregation struggle to understand those who are different. This need has been apparent in cross-

cultural dialogues between Christians and Muslims in the aftermath of terrorist attacks.<sup>231</sup>

One way where staff members could maximize the interaction with Cuban exile patients is by helping them interact very frequently with their family members. This is where the sharing of Cuban food and family gatherings would become vital to develop a sense of empathy and self-value for a person who values his or her culture in such a magnificent way. Staff should be fully aware of the need to learn the language which in this case is Spanish. To learn the language is not only as a way to communicate, but is also considered a sign of respect and a gesture to honor a culture that much of its richness is found in their language. Hospice staff can motivate patients to show their pride for their culture by asking them questions like: Can you tell me about your culture? What is the best celebration you remember?

### **5.3 To Understand their Love for *la Tierra*.**

The third principle is to honor the patient's love for *la tierra*. The land is an intrinsic element of the Cuban exile community. To listen to the stories about their land and the longing to return to the Cuba they love, is extremely important. The land for a Cuban exile is everything they are and is where they belong. The Cuban exiles will always be grateful for the welcoming they received in the United States when nobody else would, but at the same time if this was possible, they would rather go back to their homeland. A comprehensive training for the care of the Cuban exile patients must include an emphasis given to what they want to say about their land. It is also essential to

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<sup>231</sup> Carrie Doehring, "Listening" in *The Practice of Pastoral Care: a Postmodern Approach*, (Louisville, Kentucky: Westminster John Knox Press, 2006), 40-41.

learn to listen to the dying because they have a wealth of information to offer and will help the sick and the dying to express themselves thus helping their physical and emotional state:

Allowing the dying to be heard is one of the greatest gifts that we can offer them. Medical professionals are taught that listening is a way of gathering information and assessing a patient's physical and psychological condition. Even more, listening itself is a powerful way of giving comfort. Loved ones and friends often arrive at the hospital in a panic, afraid to see someone who is facing death. Not knowing what to say, they often turn to the nurse or doctor and ask: "What do we do? What do we say?" The answer is always to listen, just listen. Listen to them complain. Listen to them cry. Listen to them laugh. Listen to them reminisce. Listen to them talk about the weather or talk about death. Just listen.<sup>232</sup>

This is why it is important to listen to their stories about the land. The patient will benefit emotionally, if they are able to express themselves. The use of the Cuban folklore and traditions honoring what the land represents for the Cuban exiles, would be a great asset to this workshop for hospice personnel. There are many ways that healthy memories could be brought about to the patients like the *novelas*, or by helping them so they can communicate via "skype" with a loved one in the island of Cuba. The importance resides not necessarily in the quantity of ways where we can allude to these memories but the quality and the manner these memories are brought about. The Cuban exile patient's love for the land is very special and they are always longing to be closer to these memories of the past. Another way to help the patient remember su tierra is by bringing to them, if possible, food items like *guarapo de caña*, and possibly actual soil from Cuba.

It is important that hospice care train individuals to provide therapies that are known to help patients and bring peace during their struggle:

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<sup>232</sup> David Kessler *The Needs of the Dying: A Guide for Bringing Hope, Comfort, and Love to Life's Final Chapter* (New York, N.Y.: Harper, 2007), 22.



Expressive therapies are also known as creative arts. They include music, art, drama, dance, poetry, and writing. The emphasis of these therapies is placed on personal contact and the value of the individual as a creative person. An individual may use the arts as a vehicle to discuss memories and associations which may arise from the creative process. Life review may encompass places, friends, work experiences, and meaningful life events. The arts serve to stimulate the senses. Music and the spoken word provide auditory stimulation. Paintings, photographs, or a vase full of beautiful flowers provide visual stimulation. Tactile stimulation may be found in petting a dog, receiving a soothing backrub or holding a special hand. The olfactory sense may be stimulated by fragrant flowers, seasonal greens, or the aroma of freshly baked bread. Music and art therapies are sometimes employed by hospice programs.<sup>233</sup>

Many of the Cuban exiles used to love the animals and articles found in the countryside. To bring an article or even an animal familiar to them would be extraordinary because they will bring up great memories that they hold dearly.

#### **5.4 To Allow Expressions of Popular Religiosity**

The fourth principle that should be covered in the training is the popular religiosity that is present in the lives of many hospice patients and is also an intricate tradition in the lives of the Cuban exile community. In many ways this is where their faith resides and is also where they find support, and the ability to deal with their situation. Popular religiosity provides a sense of belonging and spiritual fulfillment, in particular when someone is in the process of dying.

Popular religiosity must be studied in detail to be able to understand and respect the faith expressions of the patients. The Hospice program should be able to provide Bibles and religious articles like rosaries, *escapularios*, *estampas*, medals, crucifixes and other items essential to preserve the religious identity of the Cuban exile patients.

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<sup>233</sup> Lisa Szczepaniak, "Additional Team Members: Expressive Therapies" in Denice C. Sheehan & Walter B. Forman *Hospice and Palliative Care: Concepts and Practice* (Sudbury, Massachusetts: Jones and Barlett Publishers, 1996), 45-46.

Religious observances must be permitted and promoted to maximize the patient's exposure to their faith traditions. This will allow the patient to develop a spiritual framework to deal with the reality that they are being confronted with. Hospice staff can encourage the patients to share the stories related to their *sacramentales* and can also assist in the pastoral care of the patients by asking them questions like these: How can we help you honor your faith? Is there any religious article that would like for us to bring to you? Do you want the priest or pastor to come and visit you?

### **5.5 To Accompany Patients and Families by Making a Safe Space in Impending Death**

Another principle that should be implemented in the training for an effective care of the Cuban exile patients is the theological and anthropological issues in regard to death and the dying. The genre of death is very complex as it involves physical, emotional and spiritual issues. A good pedagogy must seek to impart a practical knowledge about death, and its physical implications while delineating our human limitations, without undermining the medical ones. However, the anthropological implications in the lives of the Cuban exile patients are extremely important and vital to deal with.

The grief and the grieving should be another aspect that must be considered as part of the renewed pastoral care: "Grief is the intense emotional response to the pain of a loss. It is the reflection of a connection that has been broken. Most important, grief is an emotional, spiritual, and psychological journey to healing."<sup>234</sup> The bereavement counselor

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<sup>234</sup> Elizabeth Kübler-Ross and David Kessler, "The Gift of Grief" in *On Grief and Grieving: Finding the Meaning of Grief Through The Five Stages Of Loss* (New York, N.Y.:Scribner, 2005), 227.

is an essential member of the pastoral care team, and provides comfort and support before and after death for the patient and then for family members respectively:

During this phase of care, pastoral care will take many forms. It will not likely involve the weekly meetings that were part of crisis intervention. Meeting weekly after the acute stage of a crisis has subsided puts caregivers at risk of functioning as psychotherapists. The focus of pastoral care at this point is on the religious and spiritual dimensions of coming to terms with change, and care should include many aspects of religious and spiritual life: individual spiritual practices, communal worship, exploration of religious and spiritual meanings through Bible study or faith-based discussions groups involving reading and reflecting upon religious sources and norms authority. These aspects of spiritual and religious life can help the care seeker fully experience and explore the meanings of his or her suffering, experience a sense of God and the sacred in this process, and become more deeply embedded in a web of being.<sup>235</sup>

The training must include considerations from a physical, psychological, and emotional standpoint so the interdisciplinary hospice team could deal better with the implications of death. An educated team will help in recognizing the specific needs of the Cuban exile patient, and will seek for the appropriate response. The interaction between team members along with faith representatives will be essential to provide support for the patient and family members. We need to keep in mind that when the physical body deteriorates to the point that can barely sustain life as we know it, the pastoral care service would intervene in a stronger role to mediate the situation.

A new life only begins when the Lord calls! It is a gift from God for us humans when we believe what the Word of God says: "For God so loved the world that he gave his only Son, so that everyone who believes in him may not perish but have eternal life."<sup>236</sup>

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<sup>235</sup> Carrie Doehring, "Plans of Care: Seeking Healing and Justice" in *The Practice of Pastoral Care: a postmodern approach* (Louisville, Kentucky: Westminster John Knox Press, 2006), 139.

<sup>236</sup> John 3:16, (New Revised Standard Version).

## **Future Challenges in Hospice Care Ministry to Cuban Exile Patients**

In this last chapter I have presented a renewed praxis for an effective pastoral care to Exiled Cuban patients in the context of Hospice Ministry. I found a number of obstacles that will have to be taken into consideration when developing a new pastoral response for the realities of the hospice patients. Time is a factor that needs attention, because of the limited amount of time that the patient have left to live. Another obstacle is the realization that many of the patients cannot change what already transpired as the result of the Cuban revolution. Sadly, they will not live long enough to be able to see real change in the island of Cuba. Moreover, to properly and justly preserve the memories of the past will also be a real challenge, because of the patient's health condition. In the process of sharing and listening to what they have to say, I found that many people use silent language to deal with their struggles. Once more, this does not mean that silent language is not a type of language. This kind of communication is very much existent, just deep inside of us and very much alive in many of the patients dying in *el exilio*.

## CONCLUSION

The pastoral care service during the dying process is a ministry that requires all of our attention because these are the most crucial moments in the lives of the patients and family members. The following are some of the accomplishments of this thesis project:

- I answered the question about how do we confront, as ministers, in a proper way, the existential questions for the persons who are just about to depart this world.
- I pointed out that the best pastoral care that will deal better with the hospice problem is the one of accompaniment.
- I identified the problems found in this kind of work along with the possible solutions and proposed a number of suggestions to better improve the services at Catholic Hospice here in Miami, Florida.
- I also analyzed pastorally the pain and the suffering experience by humankind in the past and in the present and reviewed the human realities found in the hospice system here in Miami.
- I identified the context in which these realities took place and the search for life's meaning during the process.

Finally, the ministry of the chaplain as a ministry of accompaniment can contribute as a model to the particular and universal church. Ministries of accompaniment can be created or renewed in parishes to visit the lonely persons, the sick and the elderly, leaving the sacramental part of the anointment of the sick to the Priests. This way, the laity will participate also in the threefold mission of the Church and Christ.

In the developmental process of the thesis-project, I shared some of my life experiences. They pointed out very clearly that we as *Latinos y Latinas* experienced injustices by the dominant culture. Also, I discovered that during the course of these difficult experiences God was in the midst helping us to overcome them.

By way of the biblical stories and the work of Francisco Oller we found the dichotomy of life (purpose) and death (traumatic) experiences. Biblical stories clearly pointed out God's intervention at two different levels. I used the *Field of Dreams* as a way to explain and to discuss these two realities of God's miraculous interventions. Although they both take place in an extraordinary realm of circumstances, the second intervention appeared to be God's transcendental presence in our lives.

Abraham was called to a promise land and was granted a very special wish, a son. The son later became the son of promise, by way of the trial and tribulation Abraham had to endure when was asked to sacrifice his son.

Job was blessed by God because he was favored with everything he touched. It was not until Job experienced suffering that Job would eventually experience God in a special way, above and beyond what he had experienced before.

Lazarus and family had the privilege to have walked with God and befriend the Creator. When he died and was later resurrected by Jesus, his family really understood who Jesus really was. When Jesus himself experienced the oppression and sacrifice of the Cross, we understood better that in the case of Lazarus a cadaver was resurrected while in the case of Jesus we were resurrected with him!

In all these stories including the stories and narratives given by the people who are witnesses to the sick and the dying, we discover that we can still experience God's

grace even in the midsts of suffering. The *field of dreams* becomes apparent when suffering is present because God is in the midst of our suffering. Suffering does not mediate God's grace, but God mediates grace by way of our suffering. We must learn how to change the injustices that from the beginning had made us suffer and to better understand our human finitude.

Francisco Oller delivered a scene full of enigmas. The enigma of a child whose death was being celebrated and the number of people who appeared at the *baquiné* played their role as they knew best. A methodology of *Caribbean Aesthetics* by way of *Popular Religion* helped us understand how we react as humans when we are faced by death and solitude. The beauty of *el Velorio* is that it shows the only person who seemed to be grounded in the reality of what just transpired (the death of the child) was a Negro slave.

The poor and the oppressed continue to be instruments of God to mediate God's grace although they are constantly reminded of the realities for those who are less fortunate. Somehow the less fortunate know how to celebrate life and even how to celebrate death by way of popular religion.

The Cuban exile community continues to fight for their right to be free. The patients find refuge in the belief that there is a better world free of injustices. They also hope that here *en un aquí y en un ahora* the island and the people of Cuba will eventually be freed.

In the meantime, hospice patients continue to be served by professionals who are giving it all to help those who cannot help themselves. However, the ones who cannot help themselves continue to show and to teach us that God continues to be present in the midst of the sick and the dying.

Miracles are happening all around us, just have faith and maybe we will be blessed to experience them while we are still living, but for sure we will, when we become ready to leave this beautiful world of ours!

Departing from the question of our own human existence we cannot avoid meditate about the people that we love and care. As ministers we need to continue to provide the best possible solutions to the problems found in this type of ministry.

We must continue to provide answers that will address the people who are just about to depart this world with its connotations and consequences. We must remember, that the consequences of the pain and the suffering will leave an indelible mark in the patients as well as the family members as I have mentioned before. In many occasions will also have an effect on the staff, and the people who are part of this effort.

The ministerial answers that we provide for this type of ministry must continue to help satisfy the hunger of the human intellect, and to quench the spirit of the people who are just about to depart this world. After all, the art of dying will continue to be a mystery, and will continue to worry us for the rest of our lives.

A spirituality of accompaniment as part of the mission of the chaplaincy work will allow us to better serve the community of believers, which are being afflicted by the loss of the loved ones. The new pastoral service will need the presence of hope being the first one. Hope understands that there is a better future after death. We will also need faith; an active faith that moves mountains. By preserving the memories of the past has helped us be who we are today, and will help us to be what we are to become. Love will help us be with each other and to cherish our most precious moments. Do I want to serve God? I will serve my neighbor. Do I want to love God? I will love my family, friends,



and even my enemies. Do I want to go to heaven? Go to the hospitals, jails, assisted living facilities, and detention centers, but how about to visit your own family first because everything starts *en casa*.

We need change, change like salt adds flavor, to create new narratives, yes, but even more important to complete our incomplete ones. The narratives of the past, of the traces and of the effacement of our memories must be dealt with in a loving and caring manner. The minister must remember that there is a need for transformation. I need to start anew to awake to a new praxis. A new praxis where we find a person that has been reconciled with the past and the Creator, with a new beginning that is ready to face new challenges with resolve and fresh air. A field of dreams full of meaningful memories of Gods presence in our life narratives. God added color and sound in the perspective of our lives, *flor y canto*. Even in the moments that we thought that there was no way out and felt alone!

## APPENDICES

### Appendix A IRB Letter of Approval



11300 NE Second Avenue  
Miami Shores, FL 33161-6695  
**phone** 305-899-3020  
800-756-6000, ext. 3020  
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OFFICE OF THE PROVOST  
INSTITUTIONAL REVIEW BOARD

#### Research with Human Subjects Protocol Review

Date: November 14, 2012

Protocol Number: 121107

Title: A Call for Life and for Ministry: Towards an Effective Pastoral Care to Exiled Cuban Patients in the Context of Hospice Ministry

Approval Date: 11/14/12

Name: Mr. Carlos Cordova  
Address: 8720 SW 193<sup>rd</sup> Terr.  
Cutler Bay, FL 33157

Sponsor: Dr. Alicia Marill  
Barry University – Theology & Philosophy

Dear Mr. Cordova:

On behalf of the Barry University Institutional Review Board (IRB), I have verified that the specific changes requested by the IRB have been made. Therefore, I have granted final approval for this study as exempt from further review.

As principal investigator of this protocol, it is your responsibility to make sure that this study is conducted as approved by the IRB. Any modifications to the protocol or consent form, initiated by you or by the sponsor, will require prior approval, which you may request by completing a protocol modification form.

It is a condition of this approval that you report promptly to the IRB any serious, unanticipated adverse events experienced by participants in the course of this research, whether or not they are directly related to the study protocol. These adverse events include, but may not be limited to, any experience that is fatal or immediately life-threatening, is permanently disabling, requires (or prolongs) inpatient hospitalization, or is a congenital anomaly cancer or overdose.

The approval granted expires on December 1, 2013. Should you wish to maintain this protocol in an active status beyond that date, you will need to provide the IRB with and

IRB Application for Continuing Review (Progress Report) summarizing study results to date.

If you have questions about these procedures, or need any additional assistance from the IRB, please call the IRB point of contact, Mrs. Barbara Cook at (305)899-3020 or send an e-mail to [LBacheller@mail.barry.edu](mailto:LBacheller@mail.barry.edu) . Finally, please review your professional liability insurance to make sure your coverage includes the activities in this study.

Sincerely,



Linda Bacheller, Psy.D., J.D.  
Chair, Institutional Review Board  
Barry University  
Box Psychology  
11300 NE 2nd Avenue  
Miami Shores, FL 33161

Cc: Dr. Alicia Marill

Note: Note: The investigator will be solely responsible and strictly accountable for any deviation from or failure to follow the research protocol as approved and will hold Barry University harmless from all claims against it arising from said deviation or failure.

## Appendix B Cover Letter

Approved by Barry University IRB a

Date: OCT 14 2012

Signature: *Amelia Basilella, PhD, JD*

Institutional Review Board  
Protocol Form  
February, 00 7

### APPENDIX B: Cover Letter

**Barry University  
College of Arts & Sciences  
Department of Theology & Philosophy**

Request for participation in a research survey

Dear Research Participant:

Your participation in a research project is requested. The title of the study is "A Call for Life and for Ministry: Towards an Effective Pastoral Care to Exiled Cuban Patients in the Context of Hospice Ministry. The research is being conducted by Carlos R. Cordova, a doctoral student in the theology department at Barry University, and is seeking information that will be useful in the field of hospice ministry.

The aims of the research are to identify the needs, beliefs, and concerns in hospice ministry. In accordance with these aims, the following procedures will be used: The employees of Catholic Hospice or "Hospice Care Teams" will participate in this survey. We anticipate the number of participants to be about 30.

If you decide to participate in this research, you will be asked to do the following: To fill out the survey following the instructions provided, you will be requested to put it in the manila envelope provided and deposit the same in the locked box located in the staff lounge. The survey will have to be completed within thirty days and if necessary more time will be allowed. Remember that your consent to be a research participant is strictly voluntary. It will be perfectly alright if you decline to participate, omit some questions, or decide not to return the questionnaire. Since each participant's "hospice story" is different, please take your time to fully describe your experiences if you wish to do so.

Your consent to be a research participant is strictly voluntary and should you decline to participate or should you choose to drop out at any time during the study, there will be no adverse effects on your employment.

There are no risks to you from participating in this study. Any psychological or social risk of self-disclosure is minimized by the guarantee of anonymity. There is a minimal risk in case that you may reveal something that you should not. The risk is minimal since the researcher will be filtering the responses making sure that any protected information inadvertently revealed by staff will be kept confidential.

Although there are no direct benefits to you, your participation may increase our understanding of how best to address hospice patients needs and awareness.

As a research participant, information you provide will be kept anonymous, that is, no names or other identifiers will be collected on any of the instruments used. Data will be kept in a locked file in the researcher's office. By completing and returning this survey you have shown your agreement to participate in the study.

If you have any questions or concerns regarding the study or your participation in the study, you may contact me, Carlos R. Cordova, at (786) 339-1871, my advisor and thesis supervisor, Dr. Alicia Marill, at (305) 899-3442, or the Institutional Review Board point of contact, Barbara Cook, at (305) 899-3020.

Thank you for your participation.

Sincerely,

Carlos R. Cordova  
[carloscordova11@att.net](mailto:carloscordova11@att.net)

## **Appendix C Questionnaire**

a. Please tell us about your “hospice story,” as you recall it, without using the real names of the people. The “hospice story” of each individual is unique and we will not be judgmental about it. Please feel free to describe it in as much detail as possible. Every detail is extremely important; we want to know what you felt, and what transpired. Maybe you would like to give a little background of yourself so your story can make sense to us. Remember, this story will be read by people who may not have any idea of what hospice is or how it works. We want to know how you feel about the struggles that patients, families, and staff members endure.

b. What was your experience with some of the Cuban exiled patients?

How about their longing for their homeland?

Do you observe any difference between the exiled Cuban patients, and patients from other communities? If yes, please explain.

What can we do to better serve the exiled Cuban patients by taking into account their particular needs?

c. How do you think we can improve our service in hospice ministry? How about in Catholic Hospice?

d. How do you feel about serving in this type of program?

Please use a separate piece of paper to answer these questions. Feel free to explain in detail your experiences and recommendations.

Appendix D  
*El Velorio*



Francisco Oller y Cestero (1833-1917)  
El Velorio, 1893  
Oil on canvas (96" x 156 ½" (224 x 397 cm)  
Collection Museum of History, Anthropology and Art  
University of Puerto Rico

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University of Puerto Rico

## Appendix E Permission to Use Image



**MHAA**

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### **Museum of History, Anthropology and Art University of Puerto Rico**

#### *Image Request Release*

The Museum of History, Anthropology and Art and the University of Puerto Rico, Rio Piedras Campus grant the permission to Mr. Carlos R. Cordova to use the image below describe for his doctoral thesis in Ministry, at Barry University (College of Arts and Sciences, Department of Theology and Philosophy. The title for his dissertation is: “A Call for Life and Ministry. Towards an Effective Pastoral Care to Exiled Cuban Patients in the Context of Hospice Ministry”

The image is:

Francisco Oller y Cestero (1833-1917)  
El Velorio, 1893  
Oil on canvas (96” x 156 ½” (224 x 397 cm)  
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In need of any other information you can contact, Prof. Chakira Santiago Gracia Museum Registrar, at 787-763-3939 or 787-764-0000 Ext. 2635 or via fax to 787-763-4799.

Sincerely,

Chakira Santiago Gracia  
Museum Registrar  
Museum of History, Anthropology and Art  
University of Puerto Rico  
chakira.santiago1@upr.edu

## BIBLIOGRAPHY

- Adams, Jay E. *The Christian Counselor's Manual: Life Must Have Meaning*. Grand Rapids, Michigan: Zondervan House, 1973.
- Aquino, María Pilar. "Theological Method is U.S. Latino/a Theology." In *From the Heart of our People: Latino/a Explorations in Catholic Systematic Theology*, edited by Orlando O. Espín and Miguel H. Díaz, 6-48. Maryknol, NY: Orbis Books, 1999.
- Azcevedo, Marcello. *Conferencia de Lideres Hispanos: Fe y Cultura en el Nuevo Milenio*. Raices y Alas, 1996.
- Badillo, David A. *Latinos and the New Immigrant Church*. Baltimore: The John Hopkins University Press, 2006.
- Baker, Elizabeth A. "Common Ground: The Importance of Group Support for Visitors." In *Partners in Healing: Bringing Compassion to People with Illness or Loss*, edited by Beverly Anne Musgrave and John R. Bickle, 146-161. New York, Mahwah: Paulist Press, 2003.
- Balthasar, Hans Urs von. "Who Is the Church?" In *Exploration in Theology*, Vol. 2: Spouse of the Word, 143-91. San Francisco: Ignatian Press, 1991.
- Barnard, David. "Ethical Issues in Hospice Care." in *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 115-130. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.
- Battistella, Graziano. "Migration and Human Dignity." In *A Promise Land, A Perilous Journey: Theological Perspectives on Migration*, edited by Daniel G. Groody and Gioacchino Campese, 177-191. Notre Dame, Indiana: University of Notre Dame Press, 2008.
- Bennahum, David A. "The Historical Development of Hospice and Palliative Care." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 1-10. Sudbury, MA: Jones and Bartlett Publishers, 1996.
- Boff, Leonardo & Clodovis Boff. *Introducing Liberation Theology*. Translated by Paul Burns. Maryknoll, NY: Orbis Books, 1987.
- Booth, James W. *Communities of Memory on Witness, Identity, and Justice*. Ithaca, NY: Cornell University Press, 2006.



- Bouley, Allan, Editor. *Catholic Rites Today: Abridged Texts for Students*. Collegeville: The Liturgical Press, 1992.
- Brueggemann, Walter. *The Land: Place as Gift, Promise, and Challenge in Biblical Faith*. Minneapolis: Fortress Press, 2002.
- \_\_\_\_\_. "Rethinking Church Models through Scripture." *Theology Today* 48 (1991): 128-38.
- Camus, Albert. *The Plague*. USA: Vintage International, 1975.
- Catholic Hospice. *A Sacred Journey*. Miami, FL: Pamphlet, 2010.
- Cone, James H. *God of the Oppressed*. Maryknoll, NY: Orbis Books, 2008.
- Crespo, Orlando. *Being Latino in Christ: Finding Wholeness in Your Ethnic Identity*. Downers Grove, IL: InterVarsity Press, 2003.
- Dávila, Alvaro. "Re-discovering My Spiritual History: Exodus and Exile." In *Así Es: Historias de Espiritualidad Hispana*. Eds. Arturo Pérez, Consuelo Covarrubias and Edward Foley. Translated by Sarah C. Pruett and Elena Sánchez Mora, 87-92. Collegeville: Liturgical Press, 1994.
- Davis, Kenneth G. and Yolanda Tarango, ed. *Bridging Boundaries: The Pastoral Care of U.S. Hispanics*. Tonawanda, NY: The University of Scranton Press, 2000.
- De Gruchy, John. *Reconciliation: Restoring Justice*. Minneapolis: Fortress Press, 2002.
- Delgado Mercado, Osiris. *Tragedia y Glorificación de El Velorio de Francisco Oller*. Puerto Rico: Publicaciones Puertorriqueñas Editores, 2009.
- Deck, Allan Figueroa. *The Second Wave*. New York: Paulist Press, 1989.
- Díaz, Miguel. *On Being Human: U.S. Hispanic and Rahnerian Perspectives*. Maryknoll, NY: Orbis Books, 2001.
- Doehring, Carrie. *The Practice of Pastoral Care*. Louisville, Kentucky: Westminster John Knox Press, 2006.
- Dodd, C. H. *The Parables of the Kingdom*. New York: Charles Scribner's Sons, 1961.
- Dulles, Avery. "The Church, the Churches, and the Catholic Church." *Theological Studies* 33 (1972): 199-234.
- \_\_\_\_\_. *Models of the Church*. New York: Doubleday, 1974.

- \_\_\_\_\_. "From Symbol to System: A Proposal for Theological Method." *Pro Ecclesia* 1 (1992): 42-52.
- Eliade, Mircea. *Tratado de Historia de las Religiones: Morfología y dinámica de lo sagrado*. Madrid: Ediciones Cristiandad, 1981.
- Elizondo, Virgilio. *Galilean Journey: The Mexican-American Promise*. Maryknoll, NY: Orbis Books, 2005.
- \_\_\_\_\_. *Guadalupe: Mother of the New Creation*. Maryknoll, NY: Orbis Books, 2008.
- \_\_\_\_\_. "Popular Religion as Support of Identity." In *Beyond Borders: Writings of Virgilio Elizondo and Friends*, edited by Timothy Matovina, 126-132. Maryknoll, New York: Orbis Books, 2000.
- \_\_\_\_\_. "Theology's Contribution to Society." In *From the Heart of our People: Latino/a Explorations in Catholic Systematic Theology*, edited by Orlando O. Espín and Miguel H. Díaz, 49-53. Maryknoll, NY: Orbis Books, 1999.
- Empereur, James and Eduardo Fernández. *La Vida Sacra: Contemporary Hispanic Sacramental Theology*. New York: Rowman and Littlefield, 2006.
- Enright, Robert and Joanna North. *Exploring Forgiveness*. Madison, WI: The University of Wisconsin Press, 1998
- Espín, Orlando O. *The Faith of the People: Theological Reflections on Popular Catholicism*. Maryknoll, NY: Orbis Books, 1997.
- \_\_\_\_\_. "Grace and Humanness: A Hispanic Perspective." In *We Are A People!: Initiatives In Hispanic American Theology*, edited by Roberto S. Goizueta, 133-164. Eugene, OR: Wipf and Stock Publishers, 2001.
- \_\_\_\_\_. "Tradition and Popular Religion: An understanding of the Sensus Fidelium." In *Frontiers of Hispanic Theology in the United States*, edited by Allan Figueroa Deck, 62 -87. Maryknoll, NY: Orbis Books, 1992.
- Espín, Orlando O., ed. *Building Bridges, Doing Justice: Constructing a Latino/a Ecumenical Theology*. Maryknoll, NY: Orbis Books, 2009.
- Espín, Orlando O. and Gary Macy, ed. *Futuring our Past: explorations in the Theology of Tradition*. Maryknoll, NY: Orbis Books, 2006.
- Fernández, Eduardo C. *La Cosecha: Harvesting Contemporary United States Hispanic Theology (1972-1998)*. Collegeville, Minnesota: The Liturgical Press, 2000.

- Fitzgibbons, Richard. "Anger and the Healing Power of Forgiveness: A Psychiatrist's View." In *Exploring Forgiveness*, edited by Robert D. Enright and Joanna North, 63-74. Madison, Wisconsin: The University of Wisconsin Press., 1998.
- Flannery, Austin, ed.. *Vatican Council II: constitutions, Decrees, Declarations, revised translation in Inclusive Language*. New York: Costello Publishing Company, 1996.
- Floristán, Casiano. *Teología Práctica: Teoría y Praxis de la Acción Pastoral*. Salamanca: Ediciones Sígueme, 2002.
- Frankl, Viktor E. *Man's Search for Meaning: An Introduction to Logotherapy*. Boston, MA: Beacon Press, 1963.
- Fromm, Erich. *The Art of Loving: The Love of God*. New York: Harper and Row Publishers, 1974.
- García, Ismael. *Dignidad: Ethics through Hispanic Eyes*. Nashville: Abingdon Press, 1997.
- García, Sixto J. "United States Hispanic and Mainstream Trinitarian Theologies." In *Frontiers of Hispanic Theology in the United States*, edited by Allan Figueroa Deck, S.J., 88-103. Maryknoll, New York: Orbis Books, 1992.
- García-Rivera, Alejandro. "A Different Beauty" in *The Community of the Beautiful: A Theological Aesthetics*, 39-61. Collegeville: Liturgical Press, 1999.
- \_\_\_\_\_. *A Wounded Innocence: Sketches for a Theology of Art*. Collegeville: Liturgical Press, 2003.
- \_\_\_\_\_. "Creator of the Visible and Invisible: Liberation Theology, Postmodernism and the Spiritual." *Journal Hispanic Latino Theology* 3:4 (May 1996): 35-56
- \_\_\_\_\_. *St Martín de Porres: "The Little Stories" and the Semiotics of Culture*. Maryknoll, NY: Orbis Books, 1995.
- \_\_\_\_\_. "Wisdom, Beauty, and the Cosmos in Hispanic Spirituality and Theology," in *El Cuerpo de Cristo: The Hispanic Presence in the US Catholic Church*, 106-33. New York: Crossroad, 1998.
- Geweke, Deborah L. *Hope in Hospice? Accompaniment of the Spirit through Life's Journey*, (World & World, Volume 30, Number1, Winter 2010), 81-90.
- Goizueta, Roberto S. *Caminemos Con Jesús: Toward a Hispanic/Latino theology of Accompaniment*. Maryknoll, New York, Orbis Books, 2003.

Goizueta, Roberto S., ed. *We Are a people!: Initiatives in Hispanic American Theology*. Eugene, OR: Wipf and Stock Publishers, 2001.

Gómez O., Luis and Roberto Torretti. *Problemas de la Filosofía: Textos Filosóficos Clásicos y Contemporáneos*, Segunda ed.. San Juan, P.R.: Editorial de la Universidad de Puerto Rico, 1995.

Gonzalez, Adele. "Pastoral Care of *Los Marielitos*" in *Bridging Boundaries: The Pastoral Care of U.S. Hispanics*, edited by Kenneth G. Davis and Yolanda Tarango, 51-63. Tonawanda, NY: The University of Scranton Press, 2000.

Gonzalez, Justo L. *Mañana: Christian Theology From a Hispanic Perspective*. Nashville: Abingdon Press, 1990.

\_\_\_\_\_. *Santa Biblia: The Bible through Hispanic Eyes*. Nashville: Abingdon Press, 1996.

Griffin, Mark and Theron Walker. *Living On The Borders: What The Church Can Learn From Ethnic Immigrant Cultures*. Grand Rapids, Michigan: Brazos Press, 2004.

Groody, Daniel G. *Globalization, Spirituality and Justice*. Maryknoll, N.Y.; Orbis Books, 2010.

Groody, Daniel G. and Gioacchino Campese, ed. *A Promised Land, a Perilous Journey: Theological Perspectives on Migration*. Notre Dame, Indiana; University of Notre Dame, 2008.

Gula, Richard M. *Ethics in Pastoral Ministry*. New York: Paulist Press, 1996.

Haight, Roger. "Historical Ecclesiology. Part I: An Essay on Method in the Study of the Church." *Science et Esprit* 39, no. 1 (1987): 27-46.

Heller, Rabbi Zachary I. "Death through Some Other Windows: The Jewish View of Death: Guidelines for Dying." In *Death: The Final Stage of Growth*, edited by Elisabeth Kübler-Ross, M.D., 38-43. New York: Simon & Schusyer Inc, 1975.

Hinojosa, Juan Lorenzo. "Culture, Spirituality, and United States Hispanics." In *Frontiers of Hispanic Theology in the United States*, edited by Allan Figueroa Deck, 154-64. Maryknoll, NY: Orbis Books, 2006.

Houben, Ligia M. *Transforma Tu Perdida*. Miami: Insight Publishing, 2007.

Isazi-Díaz, Ada María . *La Lucha Continues: Mujerista Theology*. Maryknoll, N.Y.; Orbis Books, 2004.

- \_\_\_\_\_. *Mujerista Theology*. Maryknoll, N.Y.; Orbis Books, 1996
- Johanson, Gary A., and Ines V. Johanson. "The Core Team." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 31-40. Sudbury, MA: Jones and Bartlett Publishers, 1996.
- Kessler, David. *The Needs of the Dying: A Guide for Bringing Hope, Comfort, and Love to Life's Final Chapter*. New York: HarperCollins Publishers, 1997.
- Kübler-Ross, Elisabeth, ed. *Death: The Final Stage of Growth*. New York, N.Y.: Simon & Schuster, 1975.
- Kübler-Ross, Elisabeth. *On Death and Dying: What the dying have to teach doctors, nurses, clergy, and their own families*. New York, N.Y.: Scribner, 1969.
- \_\_\_\_\_. *Questions & Answers on Death and Dying*. New York, N.Y.: Simon & Schuster, 1974.
- Kübler-Ross, Elisabeth and David Kessler. *On Grief and Grieving*. New York, N.Y.: Scribner, 2005.
- Lederach, John Paul. *The Journey Toward Reconciliation*. Scottsdale, Pa: Herald Press, 1999.
- \_\_\_\_\_. *The Moral Imagination: The Art and Soul of Building Peace*. Oxford University Press, 2005.
- Lohfink, Norbert F. *Option for the Poor: The Basic Principle of Liberation Theology in the Light of the Bible*. Duane L. Christensen, ed. Translated by Linda M. Maloney. N. Richland Hills, TX: Bibal Press, 1987.
- Long, J. Bruce. "Death through Some Other Windows: The Death That Ends Death in Hinduism and Buddhism." In *Death: The Final Stage of Growth*, edited by Elisabeth Kübler-Ross, M.D, 52-72. New York, N.Y.: Simon & Schuster, 1975.
- Maldonado Jr., David. "Doing Theology and the Anthropological Questions." In *Teología en Conjunto: A Collaborative Hispanic Protestant Theology*, edited by José David Rodríguez and Loida I. Martell-Otero, 98-111. Louisville, Kentucky: Westminster John Knox Press, 1997.
- Mantovina, Timothy and Gerald E. Poyo, ed. *¡Presente! U.S. Latino Catholics from Colonial Origins to the Present*. Maryknoll, NY: Orbis Books, 2000.
- Mantovina, Timothy, ed. *Beyond Borders: Writings of Virgilio Elizondo and Friends*. Maryknoll, NY: Orbis Books, 2000.

- Marías, Julian. *History of Philosophy*. Translated by Stanley Appelbaum and Clarence C. Strowbridge. N. Y.: Dover Publications, 1967.
- \_\_\_\_\_. *Reason and Life: The Introduction to Philosophy*. New Haven: Yale University Press, 1956.
- Marill, Alicia C. "Youth and Culture." In *Perspectivas: Hispanic Ministry*, edited by Allan Figueroa Deck, Yolanda Tarango and Timothy M. Matovina, 46-52. Kansas City, MO: Sheed & Ward, 1995.
- Martinez, Jeanne M. "The Interdisciplinary team." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 21-29. Sudbury, MA: Jones and Bartlett Publishers, 1996.
- Martorell, Antonio. *El Velorio Novela: Martorell's Wake*. Translated by Andrew Hurley. San Juan: Ediciones R.I.P., 2010.
- Maslow, Abraham H. *Toward Psychology of Being: Values, Growth and Health*. N. Y.: D. Van Nostrand Company, 1968.
- McBrien, Richard P. *The Church: The Evolution of Catholicism*. New York: HarperOne, 2008.
- Merlau -Ponty, Maurice. *Problems of Philosophy: Primacy of Perception*. San Juan, Puerto Rico: University of Puerto Rico Editorial, 1979.
- Merrigan, T. "Models in the Theology of Avery Dulles: A Critical Analysis." *Bijdragen* 54 (1993): 141-61.
- Miller, James E. *The Art of Listening in a Healing Way*. Indiana: Willowgreen Publishing, 2003.
- Miller, James E. and Susan C. Cutshall. *The Art of Being a Healing Presence*. Indiana: Willowgreen Publishing, 2001.
- Moltman, Jürgen. "The Crucified God: A Trinitarian Theology of the Cross." *Interpretation* 26.03 (1972): 278-99.
- Moschella, Mary Clark. *Ethnography as a Pastoral Practice: An Introduction*. Cleveland: The Pilgrim Press, 2008.
- Musgrave , Beverly Anne. "Empathy: The Caregiver Looks Both Ways." In *Partners in Healing: Bringing Compassion to People with Illness or Loss*, edited by Beverly Anne Musgrave and John R. Bickle, 31-44. New York, Mahwah: Paulist Press, 2003.

- \_\_\_\_\_. "The Costly Business of Being a Care Partner." In *Partners in Healing: Bringing Compassion to People with Illness or Loss*, edited by Beverly Anne Musgrave and John R. Bickle, 84-100. New York, Mahwah: Paulist Press, 2003.
- Musgrave, Beverly Ann and John R. Bickle, ed. *Partners in Healing: Bringing Compassion to People with Illness or Loss*. Mahwah, NJ: Paulist Press, 2003.
- Musgrave, Beverly Ann and Neil J. McGettigan, ed. *Spiritual and Psychological Aspects of Illness: Dealing with Sickness, Loss, Dying, and Death*. Mahwah, NJ: Paulist Press, 2010.
- Nanko-Fernandez, Carmen. *Theologizing in Espanglish*. Maryknoll, NY: Orbis Books, 2010.
- National Conference of Catholic Bishops. *Hispanic Ministry: Three Major Documents*. Washington, D.C.: 1998.
- \_\_\_\_\_. *Proceedings of the II Encuentro Nacional de Hispano de Pastoral*. Washington, D.C.: 1978.
- Nava, Alex. God in the Desert: Searching for the Divine in the Midst of Death. In *A Promised Land, a Perilous Journey: Theological Perspectives on Migration*, edited by Daniel G. Groody and Gioacchino Campese, 62-75. Notre Dame, Indiana; University of Notre Dame, 2008.
- Nickoloff, James B., ed. *Gustavo Gutiérrez: Essential Writings*. Maryknoll, NY: Orbis Books, 1996.
- Niklas, Gerald R. and Charlotte Stefanics. *Ministry to the Sick*. New York: Alba House, 1982.
- Ortiz, Manuel. *The Hispanic Challenge: Opportunities confronting the Church*. Downers Grove, Illinois: Intervarsity Press, 1993.
- Pineda, Ana María and Robert Schreiter, eds. *Dialogue Rejoined. Theology and Ministry in the United States Hispanic Reality*. Collegeville, Minnesota: Liturgical Press, 1995.
- Poyo, Gerald E. *Cuban Catholics in the United States, 1960-1980: Exile and Integration*. Notre Dame, Indiana: University of Notre Dame Press, 2007.
- Power, David N. *Sacrament: The language of God's Giving*. New York: Crossroads, 1999.

- Presmanes, Jorge and Alicia Marill. "Hispanic Ministry and Theology." In *Hispanic Ministry in the 21st Century: Present and Future*, edited by Hosffman Ospino, 83-97. Miami, FL: Convivium Press, 2010.
- Rahner, Karl. "Thoughts on the Possibility of Belief Today." *Theological Investigations* 1961-1991, volume.V, 3.
- Ramirez, Ricardo, C.S.B. "Tia Petra's Novena." In *Así Es: Historias de Espiritualidad Hispana*. Eds. Arturo Pérez, Consuelo Covarrubias and Edward Foley. Translated by Sarah C. Pruett and Elena Sánchez Mora, 32-38. Collegeville: Liturgical Press, 1994.
- Rodríguez-Holguín, Janet. "La Tierra: Home, Identity, and Destiny." In *From the Heart of our People: Latino/a Explorations in Catholic Systematic Theology*, edited by Orlando O. Espín and Miguel H. Díaz, 189-208. Maryknol, NY: Orbis Books, 1999.
- \_\_\_\_\_. "Sangre llama a Sangre." In *Hispanic/Latino Theology: Challenge and Promise*, edited by Ada María Isasi-Díaz and Fernando Segovia, 117-33. Minneapolis: Fortress Press, 1996.
- \_\_\_\_\_. *Stories We Live, Cuentos que vivimos: Hispanic Women's Spirituality*. New York: Paulist Press, 1996.
- \_\_\_\_\_. "U.S. Hispanic/Latino Theology: Context and Challenge." *Journal Hispanic Latino Theology* 5:3 (Feb 1998): 6-15.
- Rodriguez, Pedro. "Theological Method for Ecclesiology." In *The Gift of the Church: A Textbook on Ecclesiology in Honor of Patrick Granfield*, O.S.B., 129-56. Collegeville, Minnesota: The Liturgical Press, 2000.
- Sartre, Jean Paul. *Problems of Philosophy: Liberty*. San Juan, Puerto Rico: University of Puerto Rico Editorial, 1979.
- Schmoll, Betty L. and Carol E. Dixon. "Hospice Care Settings." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 51-59. Sudbury, MA: Jones and Bartlett Publishers, 1996.
- \_\_\_\_\_. "Quality Care in Hospice." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 61-70. Sudbury, MA: Jones and Bartlett Publishers, 1996.
- Schreiter, Robert. *Constructing Local Theologies*. Maryknoll, NY: Orbis Books, 1997.
- \_\_\_\_\_. Migrants and the Ministry of Reconciliation. In *A Promised Land, a Perilous Journey: Theological Perspectives on Migration*, edited by Daniel G. Groody



and Gioacchino Campese, 107-123. Notre Dame, Indiana; University of Notre Dame, 2008.

\_\_\_\_\_. *Reconciliation*. Maryknoll, NY: Orbis Books, 1992.

\_\_\_\_\_. *The Ministry of Reconciliation*. Maryknoll, NY: Orbis Books, 1998.

\_\_\_\_\_. *The New Catholicity: Theology between the Global and the Local*. Maryknoll, NY: Orbis Books, 2004.

Schmoll, Betty L. and Carol E. Dixon. "Hospice Care Settings." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Foreman, 51-59. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.

Segovia, Fernando F. "In the World but Not of It: Exile as Locus for a Theology of the Diáspora." In *Hispanic/Latino Theology: Challenge and Promise*, edited by Ada María Isasi-Díaz and Fernando Segovia, 195-217. Minneapolis: Fortress Press, 1996.

\_\_\_\_\_. "Two Places and No Place on Which to Stand." In *Mestizo Christianity: Theology from the Latino perspective*, edited by Arturo J. Bañuelas, 28-43. Maryknoll, NY: Orbis Books, 1995.

Sheenan, Denice C. "Common Questions and Concerns." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 99-106. Sudbury, MA: Jones and Bartlett Publishers, 1996.

Sheenan, Denice C. and Walter B. Forman, ed. *Hospice and Palliative Care: Concepts and Practice*. Sudbury, MA: Jones and Bartlett Publishers, 1996.

Sheehan, Denice C. and Walter B. Forman. "Pain Management in the Cancer Patient." In *Hospice and Palliative Care: Concepts and Practice*. edited by Denice C. Sheehan and Walter B. Foreman, 71-82. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.

\_\_\_\_\_. "Symptom Management." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Foreman, 83-98. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.

Skinner, B.F. *Beyond Freedom and Dignity: What is Man?* New York: Bantam Books, 1980.

Smith, Fran and Sheila Himmel. *Changing The Way We Die: Compassionate End-Of-Life Care and The Hospice Movement*. California: Cleis Press Inc., 2013.

Sosa, Juan. <sup>S</sup>outh East Pastoral Institute. *Popular Religiosity and Religious Syncretism: Santeria and Spiritism*. Miami, Florida: Documentaciones Sureste, 2000.

<sup>S</sup>outh East Pastoral Institute. *Inculturation and New Evangelization*. Miami, Florida: Documentaciones Sureste, 2nd Edition, 2007.

\_\_\_\_\_. *Evangelization and Culture*. Miami, Florida: Documentaciones Sureste, 4th Edition, 2007.

Szczepaniak, Lisa. "Additional team Members." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Forman, 31-39. Sudbury, MA: Jones and Bartlett Publishers, 1996.

Torrens, P.R. ed. *Hospice Programs and Public Policy*. Chicago: American Hospital Publishing, American Hospital Association, 1985. Quoted in David A. Bennahum, "The Historical Development of Hospice and Palliative Care." In *Hospice and Palliative Care*, edited by Denice C. Sheehan and Walter B. Forman, 1-10. Boston, Massachusetts: Jones and Bartlett Publishers, 1996.

Turabian, Kate L. *A Manual for Writers of Research Papers, Thesis and Dissertations*. 7<sup>th</sup> ed. Chicago: The University of Chicago Press, 2007.

Tweed, Thomas . *Our Lady of Exile: Diasporic Religion at a Cuban Catholic Shrine in Miami*, 84. New York: Oxford University Press, 1997. Quoted in Gerald E. Poyo, *Cuban Catholics in the United States 1960-1980*. University of Notre Dame Press, Indiana, 1950.

United States Conference of Catholic Bishops. *Ethical & Religious Directives for Catholic Care Services*, Nov. 2009.

Vorgrimler, Herbert. *Sacramental Theology*. Collegeville: Liturgical Press, 1992.

Walsh, Bryan O. *Religion in the Cuban Diaspora: A Critical Profile* (Paper delivered at the 2000 meeting of the Latin American Studies Association), Miami, March 2000. Quoted in David A. Badillo, *Latinos And The New Immigrant Church*. Baltimore Maryland: The John Hopkins University Press, 2006.

Zamborsky, Leonard J. "Support Groups for Hospice Staff." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Foreman, 131-137. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.

Zeefe, Lauren N. "Death Education: Teaching Staff, Patients, And Families: Death Education for Patients and Families by Staff." In *Hospice and Palliative Care: Concepts and Practice*, edited by Denice C. Sheehan and Walter B. Foreman, 107-114. Sudbury, Massachusetts: Jones and Barlett Publishers, 1996.