

St. John's Newsletter

A Quarterly Newsletter to keep you
up-to-date on
What's happening in YOUR Parish
June, July, August 2020
St. John Byzantine Catholic Church
(Ukrainian Rite)

91 Lakeshore Rd – St. Catharines, ON – L2N 2T6 (905)937-3393
Web: www.stjohnuc.com – email: stjohnukrainian@bellnet.ca



Dear Parishioners:
Welcome to our first quarterly Newsletter to help keep you informed on what is happening in your Parish Community. We hope that you will find it both informative

and enjoyable and that it will help you to better know the many activities that go on throughout the year so that you may participate more fully with your parish family. As you are aware, Covid-19 has impacted parish life as we knew it, but we are challenged by the Holy Spirit to find new ways to spread the Gospel. St. John's has been livestreaming Divine Liturgies for some time now and they are well received, seen between 300 and 400 views weekly. Also our Parish Facebook Page is followed by over 1200 people and we have 1.2 thousand likes. To view the Sunday Divine Liturgy live; if you have Facebook just go to the parish page – St. John Byzantine Catholic Church – Ukrainian Rite- if you do not have Facebook; you can go to the parish website – www.stjohnuc.com – and click on the Facebook Icon, it will take to the parish page. You do not have to be on Facebook to access the parish page.

The Holy Father, our Bishops and our clergy are encouraging you to re-discover the “Domestic Church.” In your home you should have a corner or

space somewhere that you can gather for prayer. It should have an Icon, two candles and a Bible. Here you can gather to pray as a family, when rising in the morning, before retiring for the night, and daily to offer prayer. The community experience of Church is enhanced by our own personal experience of Christ in your life and is enriched when two or three gather. Our Lord Himself said, “Where two or three gather in

My Name, there I am among them.” The domestic Church also keeps us connected to our Parish Church, for we continue to pray for one another.

By now many are growing tired of having to stay home. The weather is nicer, we have been cooped up a long time and we miss each other's company. The government is starting to slowly open things up, and our Bishops are also beginning to work on ways in which we can safely open our Church once again. Things will not be the same for a long time, however “slow and easy wins the race” is a saying we are all familiar with. Your pastor has been praying for you, and hopefully you for him. We thank Roy Barton for being our camera operator for our live streaming, and hopefully we can continue to livestream for our seniors who can no longer come to Church on a regular basis after returning to our normal schedule. For the time being please practice social distancing and stay safe! *Father Anton.*

A Catholic Guide to End-of-Life Decisions An Explanation of Church Teaching on Advance Directives, Euthanasia, and Physician-Assisted Suicide

What are the Church's views on end-of-life decisions, and how difficult will it be to follow them. At a time of serious sickness it is naturally distressing for the one who is ill and for the family and friends of the one who is suffering. Making sound moral decisions in the face of such circumstances may be especially difficult when we consider the emotional strains that are part of watching a loved one suffer. This article helps to describe how someone might approach end-of-life decisions in light of the teachings of the Catholic Church. We consider the redemptive nature of suffering, the difference between morally obligatory and optional means of conserving life, the role of advance medical directives and health care proxies (durable power of attorney), and the advocacy of euthanasia in North America today. As people of faith we should feel great consolation from our faith in God. We should receive pastoral care from the hospital chaplains and Communion from our pastors or Eucharistic ministers. A priest should give us the Sacrament of the Sick, and should it become necessary, to administer Viaticum (Last Rites). Pain and suffering at times may be a profoundly distressing experience that raises deep questions about the meaning of life and even the nature of God. How can a merciful God allow us to experience the suffering of illness? It should be comforting to reflect on the fact that God Himself entered into human suffering through His Son who suffered and died so that we could overcome death. Suffering and death entered the world with the sin of our first parents, but Christ's obedience to the Will of His Father can now infuse these afflictions with great redemptive power. By virtue of our being made one with Christ in Baptism, we can join our suffering to that of Our Savior on the Cross at Calvary and so assist in his work of salvation for the whole human race. Christ is with us during our illness and shares in our suffering as we share in His. For those who have lost their faith in God, the suffering and helplessness of serious illness make little sense. Some may even come to contemplate suicide or euthanasia. Others who accept the existence of God wrongly believe that He does not care whether we shorten our lives. The

testimony of Sacred Scripture and the constant teaching of the Catholic Tradition speak against ever directly intending one's own death. The Catholic, with a deep faith in Jesus Christ, may not be able to understand suffering, but they know they can offer it up as a powerful source of grace for themselves and others. But we are free to forgo burdensome means of preserving life, even if we are not imminently dying. One of the most important moral distinctions in end-of life situations is that between what is morally obligatory and what is morally optional. What is morally obligatory we are bound to perform; what is morally optional we may include or omit at our own discretion. Moral theologians use the terms "ordinary" and "extraordinary" to make this distinction, in keeping with the words of Pope Pius XII: "Normally one is held to use only ordinary means—according to the circumstances of persons, places, times, and culture—that is to say, means that do not involve any grave burden for oneself or another. A stricter obligation would be too burdensome for most people and would render the attainment of the higher, more important good too difficult. Life, health, all temporal activities are in fact subordinated to spiritual ends" ("The Prolongation of Life," address to the International Congress of Anesthesiologists, November 24, 1957). Generally, a medical procedure that carries with it little hope of benefit and is unduly burdensome is deemed "extraordinary" and is not obligatory. For example, in some circumstances, a person may judge in good conscience that the pain and difficulty of an aggressive treatment for cancer is too much to bear and thus decide to forgo that treatment. Whether a particular treatment is excessively burdensome to an individual patient is a moral question that may require the input and advice of others. Individual patients and their families should seek the guidance of the Church whenever there is any doubt about the morality of a particular course of action. Most medical treatment received during the course of one's lifetime is routine and does not raise serious moral questions. Sometimes, however, medical circumstances require considerable reflection about what procedures are appropriate for a given medical condition and time of life. When aggressive and experimental methods are recommended by a physician, the Church teaches that we are free to pursue such treatment whenever there is a

reasonable hope of benefit to the patient. We are also free, however, to refuse treatment when it is of dubious benefit or when its burdens are significant. The use of extraordinary means always remains optional, and the moral obligation to conserve life obliges us simply to act in the most reasonable manner. For example, I might want extraordinary medical means used to extend my life in order to receive the sacraments of the Church, or to see friends or relatives one last time, or to be reconciled with someone from whom I have been estranged. A person may wish to receive basic care for their illness even though recovery for her is unlikely. Such basic care would include food and water as long as they continue to provide a benefit. To make sound moral decisions, a patient must receive all relevant information about his or her condition, including the proposed treatment and its benefits, possible risks, side-effects, and costs (Ethical and Religious Directives for Catholic Health Care Services [ERD], U.S. Conference of Catholic Bishops, 2009, n. 27). The patient may also consider the expense that the treatment may impose on the family and the community at large (ERD, n. 57). It is important to know of all the morally legitimate options that are available. Normally, the patient's judgment concerning treatment should guide others in their decisions, unless the treatment is medically unwarranted or contrary to moral norms. Ideally, the patient, in consultation with others, decides the course of medical treatment. There should be a presumption in favor of providing food and water to all patients, even to those in a comatose state, but there are exceptions (ERD, n. 58). Obviously, when the body can no longer assimilate food and water, they provide no benefit and may be withdrawn. Sometimes placement of a feeding tube may cause repeated infections. Some patients with advanced dementia may display agitation at the sight of a tube and may pull it out repeatedly. Certain patients may experience other burdensome complications, such as repeated aspiration and the constant need for suctioning of the throat. All of these are factors that may cause one to re-evaluate the placement of a feeding tube. When there are no exceptional circumstances, tube feeding should be considered a part of ordinary care. Normal care always remains morally obligatory; but refusal of additional extraordinary treatments is not the equivalent of suicide.

Such a decision should be seen instead as an expression of profound Christian hope in the life that is to come. An instruction to "avoid heroics," when communicated ahead of time to family and friends, may give great comfort to loved ones during emotionally stressful times. Should it happen that one is no longer able to make decisions on their own, there are family members and friends who are capable of making decisions on their behalf. One must decide whether to designate a particular member of the family to serve as her "proxy" or "agent." There is also the question of whether one should specify which medical procedures they feel will be most appropriate for them in the future should they become unable to make their wishes known. An advance medical directive (sometimes called a "living will") and a health care proxy (sometimes called a "durable power of attorney for health care") are legal documents that take effect if the patient becomes incapacitated or otherwise unable to make health care decisions. These documents can be prepared without the assistance of an attorney. An advance medical directive specifies what medical procedures the patient wishes to receive or to avoid. A health care proxy specifies a particular individual (variously called a "proxy," "agent," or "surrogate") to make medical decisions on behalf of the patient (or the "principal") when the patient is no longer able to do so. When neither of these instruments is drawn up, the task of making important medical decisions usually falls to the family. All hospitals and health care facilities are required by law to provide written information to the patient about the right to accept or refuse medical treatment and the right to formulate an advance directive and designate a health care proxy. Through your advance directive, you may wish to forbid any action that the Catholic faith considers to be immoral, such as euthanasia or physician-assisted suicide. Some advance directives in common use today permit food and water to be ended simply because one is in a comatose state. A Catholic hospital will not follow a directive that conflicts with Church teaching (ERD, n. 24). Once a directive is made, copies should be distributed to the agent and anyone else the patient deems appropriate. One should periodically review the provisions of an advance directive and, if it has been revised, destroy all previous copies. The usefulness of an advance directive, which gives specific instructions for care, is

limited because of its inflexibility. If circumstances change significantly between the writing of the advance directive and its implementation, the instructions may be of little value to those acting on a patient's behalf, and could even hinder their freedom to make good decisions. There may also be a problem of interpreting the document when it is not clearly written. An advance directive often does not allow for adequate informed consent, because one must make a decision about a future medical condition which cannot be known in advance. When drawing up an advance directive, therefore, one should focus on general goals and concerns rather than on specific medical procedures. Assigning a health care proxy is preferable to drawing up an advance directive because it leaves decisions in the hands of someone whom the patient has personally chosen. A proxy agent also can be more sensitive and responsive to the particulars of a given case. When assigning a health care proxy, one should choose an agent of good moral character—someone who is known to be capable of making sound decisions under stressful circumstances. The agent should know the teachings of the Church and possess the practical wisdom to apply them to changing circumstances. An agent, of course, must also survive the patient. One may designate alternative agents in case one's first choice, for some reason, is unable to act. A good agent makes decisions for the patient in light of what the patient would choose if able to do so. The proxy, therefore, should be very familiar with the moral convictions and wishes of the principal. When there is an advance directive from the patient, this can provide guidance. When there is not, the agent must act on the oral instruction that has been given. Sometimes, however, acting in the best interests of the patient means ignoring instructions that are obviously unwarranted or clearly immoral. No agent is bound to carry out actions that conflict with sound morality or good judgment. Human life is a precious and inviolable gift from God. Our love of God and His creation should cause us to shun any thought of violating this great gift through suicide or euthanasia. We read in Wisdom, "God did not make death, nor does He rejoice in the destruction of the living. For He fashioned all things that they may have being" (1:13). St. Paul reminds us, "If we live, we live to the Lord, and if we die, we die to the Lord" (Rom. 14:8).



FROM OUR PATRIARCH SVIATOSLAV: We call repentance a person's approach to God. "Every time we try to free ourselves from our own difficulties and sins, when we take a step towards the Lord God, we repent," the Primate explained. St. Augustine compared the inner world of humanity with the underground labyrinths,

which have many interesting inner passages. As the Head of the UGCC noted, we often do not even know and are not aware of those passages, labyrinths, and tunnels. However, it is our prayer of repentance that allows God to enter our inner world and enlighten it. The Primate warned against a possible attempt by a prayer anyone to present themselves to God as better than they really are. The Patriarch believes that there is no need to hide anything from the Lord. "Only then our prayer will be true and sincere. And the Lord God, seeing our sincerity, will open our heart to Him, will approach us, enlighten us, heal us, lift us up," said the Head of the UGCC.

Repentance is the key to moving to a qualitatively new level of prayer. By asking God for forgiveness of all sins, a prayerful person will better understand how to pray further. Concluding the third lesson about prayer, His Beatitude Sviatoslav emphasized that by standing before God in all the truth about ourselves, we will be able to know the fullness of the truth about our God, who is our Father. "May the Lord God visit each of you, and may the prayer of repentance make us better, healthier, and capable of growing in our spiritual life!" - The Head of the UGCC wished in conclusion.



Mrs. Jones got a little too used to watching online worship from home.

A LITTLE CHUCKLE FOR YOU...

Glory be to Jesus Christ!

Dear members of St Johns;



I hope that you're all finding some peace during this isolation and that you and your families are safe and healthy. As we progress through these unprecedented times, council will begin to reach out with regular updates as to how things are

progressing here at the church and to let you know **you are not alone!**

Monsignor Anton continues to be an Internet sensation!... and because of his ability to adapt to our ever-changing world and technology, St John's digital following on Facebook is now over 1200! We may be a small church in St Catharines, but our digital community is larger than similar churches in Toronto and GTA.

Special thanks to Roy Barton for managing the live video links, now we can share our good fortune with others, and people are taking notice!! Our Masses have become some of the most viewed around, some of our Masses have had over 350 views, we have people watching from the United States, Ukraine and even Australia. Father Anton's message of hope and reflection are making its way around the world! The comments from the viewers reinforce how blessed we are at St. Johns with having a leader like Monsignor Anton, someone who can relate the scripture readings to what is happening today. From all of us, thank you Monsignor and Roy, for keeping our faith available to us during these times.

Chrystine reports things in the office are going quite well. Parishioners are calling to see how things are going and to hear her cheery voice!

- Donations are coming in through many different channels and automatic debit is gaining popularity. The expenses are not as high as usual, but we still do have ongoing operating costs that must be covered. For those who are interested in signing up for direct deposit, please reach out to Chrys and she can set you up.
- The kitchen has been able to sell some frozen product to people who have called ahead as we do not want it to go to waste.
- Our sound system in both the Activity Centre and the Church is repaired and paid for.
- Our security system has been upgraded.
- Stove repairs and maintenance are getting done while the kitchen is closed and we are following through on upgrading all of our doors to automatic openers to meet accessibility compliance requirements.
- Some refunds were issued for event bookings that were scheduled for later this year as we are unsure when they can resume.

We remind all that if you need to attend the office, please **make an appointment ahead of time, walk-ins are not permitted!**

Allan our Treasurer continues to investigate wage and salary recovery programs that may be available to us. We have given him the go ahead to make decisions in consultation with Father Anton as he is well informed in this field. As things are changing daily, he is keeping on top of all the updates. The Eparchy has also sent information to the office regarding these issues and all recapturing is being considered

Our outdoor maintenance crew is working hard to keep our facilities looking beautiful; thank you Mike and Christine Dzugan and Bill Trush. The lawn and flower planting are ongoing and we have a large tree on the property that is scheduled to be removed as it is in poor condition and may pose a liability.

What will be our new normal?

- The use of masks in the church may become a reality until a vaccine is created.
- Monsignor informs me that the store has had a plexiglass separation installed (as seen in grocery stores now) to protect the workers and customers

from any potential contamination issues once sales resume and a drive through type of window is being used to limit contact.

- Work in the kitchen will be able to resume in the next couple of weeks, however very limited, and the wearing of protective masks and/or gloves will be mandated. Monsignor is asking that if any parishioners can sew, you can help us by sewing reusable/washable cloth masks (the disposable ones are very costly). Pre-shrunk cotton (tight weave) is best for this and they must be three layers.

While all of this may seem overwhelming, we assure you that life will carry on. As a parish family we have the strength and ability to work through these unusual times and once again gather together in prayer and fellowship. Council and Monsignor Anton are meeting to regularly discuss these and many more issues and are working for the parish's best interests.

Please forward any questions, concerns or comments to myself or Father Anton for discussion.

We will continue to monitor this issue and we will send updates as things change

We are developing an Newsletter to share with our parishioners that will be available through email and Canada Post. We request if you have email to send us your email address to the parish at the link below.

Please contact the office or **email us at stjohnukrainian@bellnet.ca and supply us with your email address.** We will begin to update our database and contact you with further changes as they develop.

Please stay safe and continue to pray for those who need help during these unusually difficult times.

Yours in Christ,

Bob Oleksiw (boleksiw@hotmail.com)
Chair-Pastoral Council

PLEASE REMEMBER IN YOUR PRAYERS THOSE FROM OUR PARISH WHO HAVE PASSED AWAY SINCE MARCH 2020 - AND THOSE WHO HAVE LOST A LOVED ONE.

+Michelina Juskiw, +Sophie Baczynski, +Helen Szakacz, +Tamara Tkachuk, +Joe Kozela (Paul Kozela's brother.) Grant them rest with Your saints, O Christ! May their memory be eternal.

Join St. John's for Sunday Masses on Facebook. You do not have a Facebook account! Simply log on to the Parish website www.stjohnuc.com and click the facebook icon, it will take to directly to the parish page.

If you are in a position to continue to support your parish financially we ask that you do so. Bills still have to be paid. You can now sign up for automatic debit through the office, donate through e-transfer or through PayPal on the parish webpage. You can also send donations via Canada Post. We thank you for your consideration.