Dear Mr. Lunte,

Allow me to thank you for all that you did in organizing the Dialogue Seminar that took place in Brussels, particularly for the hospitality and interest you showed in the European Network of Health Care Chaplaincy (ENHCC).

The Dialogue Seminar gave our organization the chance to come in direct contact with the COMECE. Now that we have made initial contact, I am hopeful that we can maintain a direct and open line of communication so as to synchronize our efforts for the improvement of social and health services in Europe.

As you noticed in the booklet I gave you describing the ENHCC, all the health care chaplaincy organizations of the Roman Catholic Church participate in the Network. Attached you will find two documents that I did not give you with the booklet. The first is our “mission statement”, which we call the “Cretan Declaration”, written upon the founding of the ENHCC in 2006. It expresses the desire for sharing and learning on a multi-disciplinary level so as to improve the way we minister to the spiritual needs of patients and staff in health care settings. The second document lists the Standards of Health Care Chaplaincy in Europe. These standards express the high quality of care and the seriousness we has chaplains try to maintain in our ministry. If you recall, both of these elements (sharing on a multi-disciplinary level and high quality care) were discussed in the Dialogue Seminar.

It is imperative to restate that spiritual health care (chaplaincy) is encountering major obstacles in light of the further trend toward secularization of our post-modern society. In many countries, chaplains are being excluded from the therapeutic team. In other cases, they are not allowed to be informed of those being hospitalized. Even more disheartening is that in some countries, chaplains are not allowed to wear any type of religious dress. As was agreed by all that attended the debriefing meeting in Brussels, chaplains are on the front line in providing spiritual care in health institutions, serving as the main link between the health care providers and the elements of faith and spirituality. Steps must be made to reassure the sick the full possibility of obtaining spiritual care.
In closing, I would like to ask that you continue informing the ENHCC of the workings of the COMECE. Maybe we can add each others links to our respective web sites. In the future, I will send you all the reports that we issue, hoping that you too will post me accordingly of yours.

With the hope that we will meet again soon, I remain,

Sincerely,

Rev. Dr. Stavros Kofinas  
Coordinator of the European Network of Healthcare Chaplaincy  
(Representative of the Ecumenical Patriarchate)

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