

## Health Care *A basic human right*

by Fr. Myles Sheehan, SJ, MD

While the health-care debate continues on Capitol Hill and on Main Street alike, Jesuit Myles Sheehan, MD, calls for effective and affordable ways of “supporting the vulnerable in our midst.”



ELAINE THOMPSON/ASSOCIATED PRESS

**H**ealth care is a basic human right. It should be accessible and affordable for all. These statements are rooted in natural law—reflection on what it means to be human and the consequences that follow in reason—as well as in our tradition as Catholics—based in Scripture and the living witness of our 2,000-year journey as disciples in Christ’s Church.

I bring two perspectives to the debate on health reform. I am a physician, specializing in internal medicine and geriatrics, with a special interest in the care of the dying.

I am also a Jesuit priest, until recently responsible for medical education at Loyola University Chicago’s Stritch School of Medicine; I’m now serving as the provincial for the Jesuits’ New England Province. From these two vantage points, I will share with you why I believe health-care reform to be a moral imperative.

### As a physician

I graduated from medical school in 1981. In the 28 years that have followed, providing care for people without health-care insurance has been a con-

stant struggle for me and for other practitioners. My colleagues and I have worked to get good preventive care for people who are laid off and lost insurance. We have tried to obtain supplies for diabetics without insurance. We have been frustrated and angry when people come to the emergency room seriously ill from a stroke that could have been prevented by regular care for high blood pressure.

The current system works for some, but not for many. In general, individuals with insurance receive good care. Those who are below a minimum income receive Medicaid, which provides health-care coverage for the poor. For many people, making just enough to be ineligible for Medicaid but not enough to afford health insurance, regular health care is not possible. In my practice of geriatrics, things are a bit better because of the presence of the safety net of Medicare, which covers some health-care costs for those 65 and older. But even in an older age group, not all individuals have adequate coverage for regular outpatient care. It is frequently a nightmare trying to coordinate resources to provide for a frail older person with multiple medical needs who requires either home care or a nursing home.

## As a Jesuit

As a Jesuit priest, I am called to serve the Church, promote the faith, and participate in the struggle for justice that is part of following Christ. Although one does not need to be a believer, much less a Catholic, to realize the fundamental truth that human life is special and deserves protection, the story of Jesus makes this even more urgent. God became human, taking on our human weakness, living a human life, and dying as a man. That strikes me as a compelling reason to value human life. The special nature of human life, what is termed human dignity, requires more than simply an absence of killing. The protec-

## Remarkable silence

Failing to provide for the poor and vulnerable is contrary to the best of what it means to be America. I am dismayed by the sleaziness of the current debate with the exaggeration, downright lying, and lack of will to do what is right. The pundits who bloviate on the cost of government intervention seem remarkably silent on how much we are all currently paying to provide emergency services and care for the uninsured. These expenses are part of the hidden costs of health care, whether it is in hospital bills or insurance premiums.

*The Incarnation calls us to honor the dignity of our shared human nature.*

tion of life is a constant from conception to natural death. It requires freedom from threats to one's basic security as a human being or conditions that limit our ability to grow into the person whom God has created out of love. A pro-life position is not simply against abortion or euthanasia. It looks to a civilization of love where individuals can expect freedom from fear, coercion, and persecution as well as health care, basic housing, food, and clean water. The absence of universal access to health care in the United States is a moral wrong. The twenty-fifth chapter of Matthew's Gospel gives the criteria for the last judgment where Christ identifies himself with the most vulnerable. The failure to provide health care for those in need puts the United States on the side of the goats rather than the flock of Christ's sheep.


## A level of protection

The Church teaches that the individual is in danger unless the community provides a level of protection for all. We already have health-care rationing. It is based on money, class, and status. It makes individuals vulnerable to illness, keeps them from basic care, and can lead to bankruptcy when a serious health crisis occurs. The Incarnation calls us to honor the dignity of our shared human nature. We are likewise called in our faith in God as Trinity to build a community of love. Father, Son, and Spirit exist in a relationship of love and care for the other.

We will not be able to duplicate that community perfectly, just as we cannot duplicate the perfection of Christ's humanity, but that is not an excuse for ignoring both the dignity of the individual and the responsibility of the community in ensuring that individuals have a decent minimum of health care.

There also is a profound lack of comment on exactly what should be done with those without health care. Continue as we do now and pretend they do not exist? Ignore that it could be any one of us if we lose a job and insurance? Turn away from the face of those in need since it is not our problem? Avoiding our responsibility is an offense against God, whose love calls for protection of the individual and solidarity among people.

Let me express some specifics of what I hope for in health-care reform. I would not want to see a government takeover of health care out of fear of a lack of efficiency or a sapping of initiative: I do not believe in a single payer. I would like to see a government option to keep the insurance companies honest and competitive. I have not been impressed by these companies' desire to provide coverage to those most in need. Their lack of innovation in this area of the market suggests a need for limited intervention. I do not wish to see public funding for abortion as abortion is not about health care but about destroying life. It is important to realize that our current health-care debate will not be over with the passage of a health-care reform bill. It will be part of an ongoing conversation regarding what is effective, what is affordable, and what the community can do to support the vulnerable in our midst.

As an American who loves this country and who has had good health care, as a physician who has seen the devastation that a lack of access and health care coverage can cause, as a Catholic priest who preaches about human dignity and the need for the community to care for the vulnerable, I believe health-care reform is a patriotic and religious necessity. 



Fr. Myles Sheehan, SJ, is a member of the board of trustees of the Catholic Health Association. He has written and presented extensively about his work in end-of-life care and improving palliative care, especially in Catholic health care.