Health Care as a Basic Human Right

Every person has a right to adequate health care. This right flows from the sanctity of human life and the dignity that belongs to all human persons, who are made in the image and likeness of God.

—United States Conference of Catholic Bishops
A Framework for Comprehensive Health Care Reform, June 1993

Since the early 20th century efforts have been made by several presidential candidates and administrations to provide health care benefits for all Americans. To date, all have failed for a variety of reasons: partisanship, divided congresses, cost concern, a lack of leadership, heavy influence by special interest groups, just to name a few. Theodore Roosevelt in 1912 appears to be the first presidential candidate who campaigned on a platform that included health care. But the “Bull Moose” candidacy was rejected as the country elected Democrat Woodrow Wilson the 28th president of the United States, effectively shelving the concept of universal health care benefits for decades.

Future presidential administrations, however, would pick up the health care banner as Presidents Truman, Carter, Clinton and Obama attempted to pass legislation that provided insurance coverage for all. President Franklin Roosevelt sought to include health care coverage in the New Deal, but legislation never materialized as prominent health care associations cited myriad reasons for opposition. In 1971 President Nixon backed a proposal that would have mandated employers to provide a minimal level of insurance, and Senator Ted Kennedy that same year began his crusade for universal health care that would last until his death in 2009.

While numerous efforts have been made throughout the 20th and early 21st centuries to provide universal health care benefits, perhaps no organization or institution has supported the issue as strongly as the Catholic Church. First addressed by Pope John XXIII in the landmark encyclical letter Pacem in Terris, health care is deemed by the Church as a basic human right, along with life, food, clothing and shelter. The Catechism of the Catholic Church explains that the political community has a duty to ensure the right to medical care (par. 2211), and further states that the pursuit of the common good must include health care in order to attain acceptable living conditions (par. 2288). In fact, the Catholic Church has supported efforts to provide universal health care coverage for at least 90 years.

The purpose of this FOCUS is to advance the Church’s support for universal health care, to detail what policy positions must be included in any effort to reform the nation’s health care delivery system, and to provide additional resources for Catholics to learn more about this critical, and morally relevant public policy.
HEALTH CARE AS A MINISTRY

Just as Jesus Christ performed several miracles that pronounced both his divinity and his healing power, the Church for over two millennia has cared for the sick and dying. The presence of some 624 Catholic hospitals throughout the country may be the first obvious indication of the Church’s dedication to health care. Yet in recent decades, the Church has continued to care for the ill while other institutions or facilities have folded under a broken system. In a May 2009 statement to the United States Senate Committee on Finance, Bishop William F. Murphy, chairman of the United States Catholic Conference Committee on Domestic Justice and Human Development testified: “Health care involves fundamental issues of human life and dignity, and is a critical component of the Catholic Church’s ministry. The Church provides health care, purchases health care and picks up the pieces of a failing health care system. The Catholic community encounters and serves the sick and uninsured in our emergency rooms, shelters and on the doorsteps of our parishes. One out of every six patients is cared for in Catholic hospitals. We bring strong convictions and everyday experience to the issue of health care.”

As indicated by Bishop Murphy, the Catholic Church is the largest health care provider in the United States. Therefore, it is a credible voice and a significant “player” in any debate surrounding health care reform and the many Americans who will be affected by it. According to the Official Catholic Directory, twenty-six Catholic hospitals assisted more than 4.7 million persons throughout the seven (arch) dioceses of Michigan in 2008. In 2009 there were more than 16.9 million emergency room visits in Catholic hospitals across the country, more than 92.7 million outpatient visits, and some 5,542,314 admissions, according to the United States Conference of Catholic Bishops.

With such a large footprint in the nation’s health care system, the Catholic Church and her institutions witness on a daily basis the fundamental problems facing health care delivery. First and foremost is the issue of access, as some forty-five million Americans are without any health care coverage outside of the emergency room. This is a moral and social wound for the United States. The problem is also growing worse each day from a financial perspective as businesses that provide health care benefits to their employees struggle with skyrocketing costs. Many experts agree that a failure to reform health care will only lead to more citizens without coverage and fewer businesses that provide benefits. It is for these reasons that the Church urges Congress to recommit itself to genuine health care reform, and calls for a system that ensures access for all, does not harm immigrants, upholds institutional and individual conscience rights in the delivery of health care services, and prohibits any federal funding of elective abortions.

Since 1976 Congress has prohibited, through an amendment in the Health and Human Services annual appropriation, the use of tax dollars for elective abortions and has prohibited the federal government from providing health benefits that includes coverage for abortion. This “Hyde Amendment,” named after former Illinois Congressman Henry Hyde, must be included in any health care reform effort so that no tax dollars are used to pay for abortion. After all, abortion is not health care, and no legislation reforming the nation’s health care delivery system can be supported if in any way it allocates tax dollars toward elective abortions. True health care reform will not advance a pro-abortion agenda.
GENERAL GUIDELINES AND CRITERIA FOR HEALTH CARE REFORM

RESPECT FOR LIFE

Whether it affirms and respects the sanctity and dignity of human life from conception to natural death. Whether it preserves the longstanding prohibition on federal funding for abortion.

COMPREHENSIVE BENEFITS

Whether it provides comprehensive benefits sufficient to maintain and promote good health; to provide preventive care; to treat disease, injury and disability appropriately; and to care for persons who are chronically ill or dying.

PLURALISM

Whether it allows and encourages the involvement of the public and private sectors, including the voluntary, religious, and nonprofit sectors, in the delivery of care and services; and whether it ensures respect for religious and ethical values in the delivery of health care, for patients and for individual and institutional providers.

QUALITY

Whether it promotes the development of processes and standards that will help to achieve quality and equity in health services, in the training of providers, and in the informed participation of individuals and families in decision making on health care.

COST CONTROLS

Whether it creates effective measures to reduce waste, inefficiency, and unnecessary treatment; measures to control rising costs of competition that provide incentives to individuals and providers for effective and economical use of limited resources.

EQUITABLE FINANCING

Whether it assures society’s obligation to finance universal access to comprehensive health care in an equitable fashion, based on ability to pay; and whether proposed cost-sharing arrangements are designed to avoid creating barriers to effective care for the poor and vulnerable.

*These points have been identified by the United States Conference of Catholic Bishops as criteria that should help in framing public policy as it pertains to health care reform.
CATHOLIC TEACHING ON HEALTH CARE

"But first we must speak of man’s rights. Man has the right to live. He has the right to bodily integrity and to the means necessary for the proper development of life, particularly food, clothing, shelter, medical care, rest, and, finally, the necessary social services."

—Pacem in Terris, (Peace on Earth), Encyclical Letter of Pope John xxiii, April 1963

"The demands of the common good are dependent on the social conditions of each historical period and are strictly connected to respect for and the integral promotion of the person and his fundamental rights. These demands concern above all the commitment to peace, the organization of the State’s powers, a sound juridical system, the protection of the environment, and the provision of essential services to all, some of which are at the same time human rights: food, housing, work, education and access to culture, transportation, basic health care, the freedom of communication and expression, and the protection of religious freedom."

—Compendium of the Social Doctrine of the Church, Pontifical Council for Justice and Peace, 2004

"...the common good requires the social well-being and development of the group itself. Development is the epitome of all social duties. Certainly, it is the proper function of authority to arbitrate, in the name of the common good, between various particular interests; but it should make accessible to each what is needed to lead a truly human life: food, clothing, health, work, education and culture, suitable information, the right to establish a family, and so on."

—Catechism of the Catholic Church, paragraph 1908

"Besides wages, various social benefits intended to ensure the life and health of workers and their families play a part here. The expenses involved in health care, especially in the case of accidents at work, demand that medical assistance should be easily available for workers, and that as far as possible it should be cheap or even free of charge."


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