

Human Dignity: An “Energizing Vision” of Health Care



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In February 2007, I had the honor of speaking at a symposium in honor of the late Joseph Cardinal Bernardin sponsored by the Bernardin Center at Catholic Theological Union in Chicago. My topic was the Cardinal's leadership in health care. Given the theme of this issue of *Health Progress*, it seems fitting to recall some of Cardinal Bernardin's thinking on the subject of health care and to reflect on what we might carry forward.

In a 1995 speech to the Harvard Business School Club of Chicago, Cardinal Bernardin said: “Because of its central importance to human dignity, to the quality of our community life, I have felt a special responsibility to devote a considerable amount of attention to healthcare at both the local and national levels” (*Celebrating the Ministry of Healing [CMH]*, St. Louis, Catholic Health Association, 1999, p. 83). And, indeed, he did. During his tenure as archbishop of Chicago, Cardinal Bernardin delivered well over a dozen addresses on topics related to health care to a wide variety of audiences. These do not include his numerous addresses on issues of health care ethics, such as abortion, euthanasia, and AIDS, or on the consistent ethic of life which obviously has direct relevance to health care.

In a speech on managed care delivered in 1996, six months before his death, Cardinal Bernardin said “the paramount issue of our time is the affront to human dignity that is occasioned by the lack of universal insurance coverage for even basic care” (*CMH*, p. 141). That was over 10 years ago! For him, health care reform was a *moral* challenge requiring the reshaping of a major part of our national life to better protect the life and dignity of all persons. He believed the situation at the time to be fundamentally unjust. As he put it: “The current healthcare system is so inequitable, the disparity—between rich and poor, between the sick and the well, and between those with access and those without—is so great, that it is clearly unjust” (*CMH*, p. 67). It did not, he maintained, meet even the minimal standards of social justice.

What lies behind Cardinal Bernardin's observations? His many addresses on health care were guided by a “single-minded commitment to the dignity and worth of human persons” (*CMH*, p.

2). This theme runs through all of his reflections on various aspects of health care. In some ways, it is not particularly novel, but it is, nonetheless, profoundly important. Standing before thousands of people who worked in health care over the course of some 13 years, Cardinal Bernardin honed in like a laser on what health care is all about and continuously reminded his audiences what they should be about. In fact, he urged that “the energizing vision of healthcare should be this commitment to the dignity of human persons” (*CMH*, p.3). Human dignity was the lens through which Cardinal Bernardin viewed and analyzed issues, and it is what he called his audiences to commit themselves to.

This lens led Cardinal Bernardin to view health care as a “good essential to human dignity,” a critical element for human flourishing. And because it is a good essential to human dignity and for human flourishing, it ought not to be seen as a commodity like any other product, but as a basic good and service, akin to education. As Cardinal Bernardin put it, “healthcare—like the family, education, and social services—is special. It is fundamentally different from most other goods because it is essential to human dignity and the character of our communities. It is . . . one of those ‘goods which by their nature are not and cannot be mere commodities’” (*CMH*, pp. 87-88). If this is the case, if the purpose of health care is the advancement of human dignity, then it should not be seen merely as a business. It is providing a *basic service* for the well-being of individuals and the community.

Repeatedly, Cardinal Bernardin referred to a concern for human dignity as constituting a “moral vision.” At the core of this vision is a belief in the inherent dignity of every human being and the sacredness of all human life. It is a vision that should affect what we see and how we see, that should sensitize us to and bring to the forefront of our consciousness the many threats to human dignity and to human life in our society, including in health care. It should also motivate us to transform these situations. In one of his non-health care-related lectures, Cardinal Bernardin, alluding to Proverbs 29:18, said “Without vision, people perish; we need all the resources we can muster today in developing an adequate vision for society” (John

Langan, ed., *A Moral Vision for America*, Washington, DC, Georgetown University Press, 1998, p. 148). The vision he had in mind, of course, is one centered on human dignity and the sacredness of all human life.

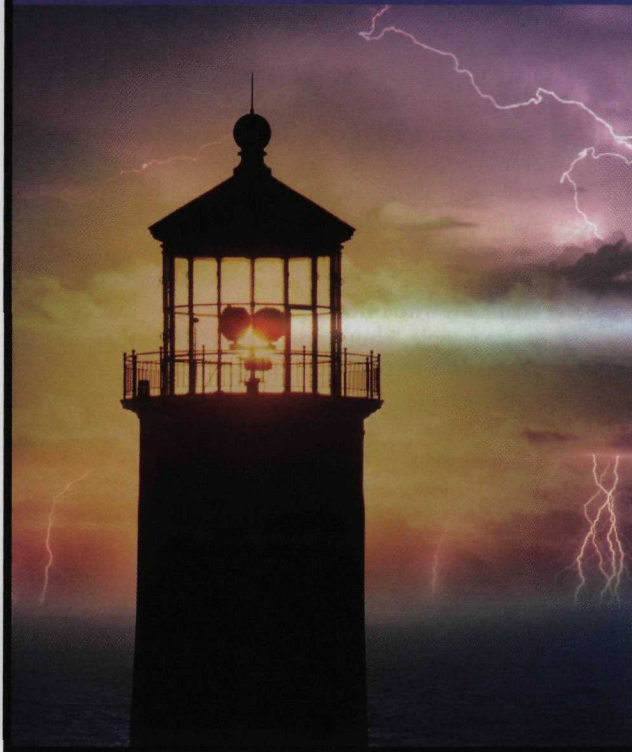
It seems quite obvious that Cardinal Bernardin's vision of the human person, his single-minded commitment to the dignity of the person as it relates to health care, is as fresh and relevant today as it was when he delivered his addresses on health care. In some ways, this is unfortunate. It means that Cardinal Bernardin's vision has not taken hold in society. There has not been the transformation in attitudes that he believed was so necessary. We have not made much progress, though there are signs of hope—several state initiatives to cover all citizens, important programs to cover more children, critical collaborations by major health care related organizations, promises by politicians. But there are also more uninsured in

our midst than there were when Cardinal Bernardin was alive, health care continues to take on the character and the practices of a business, significant numbers in our society do not see health care as a basic human good, and our nation still lacks the will to pursue health care reform with any degree of seriousness. There remains much to be done. Cardinal Bernardin's vision is more necessary than ever as a corrective to current social realities, a framework for moral analysis, an instrument for sensitizing us to the many threats to human dignity, and a motivation for action and social transformation.

If we are ever to make progress in covering the uninsured and in reforming a fundamentally unjust health care system, a moral vision focused on human dignity must truly become the "energizing vision of healthcare," and the core of a moral vision for society. Otherwise, it might well be that the people perish. ■



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