

OUR INTERDEPENDENCE IS BOTH CAUSE AND CURE

Laying both hands on [the live goat's] head, he shall confess over it all the sinful faults and transgressions of the Israelites, and so put them on the goat's head. He shall then have it led into the desert by an attendant. Since the goat is to carry off their iniquities to an isolated region, it must be sent away into the desert. —Leviticus 16:21-22

The Old Testament text from Leviticus echoes throughout literary history. Placing the sins of the community onto an animal or, in some cases, another human being, has served as a tool for atonement and a path towards healing. The French philosopher René Girard recognized this pattern of assigning blame to something or someone other, which he defined as the “scapegoat mechanism.”



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In *Violence and the Sacred*, Girard describes the human default to blame and the hope that casting out the perpetrator, or a surrogate, will therefore cast out the affliction.¹ He points to the tragic figure of Oedipus and even to the life and death of Jesus Christ as examples of the default reaction.

While recognizing the reaction, Girard acknowledges that it provides only a temporary solution; the underlying affliction or sin will rise again.

I began to think of the scapegoat default as I heard story after story about the opioid addiction in our midst. Members of the press, government representatives and neighbors down the road all bemoan the epidemic that is destroying people in our communities. We begin to ask, “What can we do?” and “Who is to blame?” as if we could discover rational answers to an irrational problem.

We especially want to find and punish those responsible in order to defend the purity of the community. We want to find the outsider who has corrupted the individuals who are properly inside

and who has brought pain, sin and shame into the community. People in power have named almost every potential group as the outsider: drug addicts, physicians who overprescribe pain killers and drug companies that market them. Now, I am not implying that any of these groups is an example of Girard’s innocent scapegoat. But I am sug-

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gesting that the problem with naming and blaming is that it fails to recognize the pervasive sin afflicting the community at large. It conveniently invites the community to look beyond itself to find an external sinner, rather than take the risk of self-examination. Fortunately, our tradition gives us a different lens with which to approach such a crisis.

St. Pope John Paul II wrote extensively on the Catholic social tradition and highlighted one element that pertains to this situation: structural sin. John Paul II recognized that in a moment such as this, in which an affliction becomes overwhelming to a community, such a crisis may be the symptom of a larger problem. The cause might extend beyond any one individual to inherent attitudes “opposed to the will of God” and “the good of neighbor.” These are identified as a thirst for power and an all-consuming desire for profit.²

It is true, as Sam Quinones’s book *Dreamland* shows, that certain pharmaceutical companies and physician clinics have contributed to the problem.³ We also can point to regulatory agencies, government oversight and the marketplace at large. But John Paul II challenges us to go beyond the obvious sinners to a recognition that our emergency “is a question of a moral evil, the fruit of many sins...”⁴

Therefore, we must ask ourselves: What sins serve as building blocks? In what ways have my actions and those in the greater community contributed to this immoral structure? What everyday vices do we indulge that are the many nails holding this structure in place?

In this kind of self-reflection, we “identify precisely, on the level of human conduct, the path to be followed in order to overcome it.”⁵

This is not an easy task. No one likes to self-identify as a sinner. No one wants to be a builder of structural sin. Yet, understanding the ways we contribute to a crisis can give us some control. It allows everyone to be a force for good. When we acknowledge the combination of inherent vices and individual actions, “the correlative response as a moral and social attitude, as a ‘virtue’, is solidarity.”⁶ That kind of solidarity is not “a feeling of vague compassion or shallow distress at the misfortunes of so many people, both near and far.” Rather, as John Paul II argues, it is a solidarity that “is a firm and persevering determination to commit oneself to the common good; that is to say to the good of all and of each individual, because we are all really responsible for all.”⁷

What a different response! What a powerful recognition that a community in need would require a community to heal. It replaces the rush to

blame with an attitude of compassion and virtue.

Looking beyond the opioid emergency, we may be able to see how these tendencies to blame and our individual sins and vices have created a cultural structure that underlies many of our most problematic ethical issues. Perhaps the desire to

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escape physical pain is a similar motivation when people consider physician-assisted suicide a viable option. Maybe our difficulty in expanding access to affordable health care keeps falling victim to the “thirst for power” and “all-consuming desire for profit” identified by John Paul II.

Does our yearning for immediate solutions for the opioid epidemic blind us to the interconnectedness of many social sins afflicting our community? Unless we see the wider picture as our faith teaches us, we may remain in the system that Girard described: a system that is reactionary rather than visionary. Fortunately, we are invited to delve deeper to reveal how our interdependence is both a cause and a cure. The church calls each one of us to be a builder. It is our decision whether we build a structure of sin or a structure of solidarity.

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NOTES

1. René Girard, *Violence and the Sacred* (New York: W.W. Norton, 1979).
2. John Paul II, *Sollicitudo Rei Socialis*, no. 37.
3. For an excellent commentary on the history of this crisis, see Sam Quinones, *Dreamland: The True Tale of America’s Opiate Epidemic* (New York: Bloomsbury Press, 2015).
4. *Sollicitudo Rei Socialis*, no. 37.
5. *Sollicitudo Rei Socialis*, no. 37.
6. *Sollicitudo Rei Socialis*, no. 38.
7. *Sollicitudo Rei Socialis*, no. 38 (emphasis added).

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

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HEALTH PROGRESS®

Reprinted from *Health Progress*, March - April 2018

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