

Forging a Future For Catholic Healthcare

BY SR. BERNICE COREIL, DC

Some eight years ago major superiors whose congregations sponsor healthcare entered into a serious national dialogue. The purpose of this dialogue was to address concerns about the changes in the Church and in society that were having a profound impact on the Catholic healthcare ministry. Throughout the years, religious congregations have been responsible for a vitally important aspect of the Church's mission: the healing ministry of Jesus. We have a rich tradition that has endowed us with healthcare institutions, projects, and programs. We continue to be vigilant, innovative stewards of the gifts of the Spirit, but we are faced with many changes that challenge the Catholic healthcare ministry in the United States.

A COLLABORATIVE APPROACH

We began our efforts with those congregations who hold in trust the charism, human resources, and material assets of the healthcare ministry. We extended our dialogue to include the entire Catholic Church in the United States, which holds in trust the entire people of God and the Gospel message. This inclusive approach afforded the whole Church—hierarchy, religious, and laity—the opportunity to confer on the future of the Catholic healthcare ministry. It enabled collaboration among congregations, bishops, parishes, social services, and laity.

Such collaboration is vital as the Catholic healthcare ministry is facing unprecedented challenges to its future. The Catholic healthcare ministry is the activity of the whole Church—individual members, parish communities, religious congregations, dioceses, and institutions—responding to human suffering with a range of personal and corporate resources. Yet healthcare at the end of this century poses nearly impossible choices for providers. Technological advances that improve the quality of diagnosis and treatment also require enormous outlays of money and create new ethical dilemmas. In addition, the specialized services of complex modern healthcare facilities,



*Sr. Coreil is
chairperson of the
board of trustees,
Hotel Dieu
Hospital, New
Orleans, and chair
of the Catholic
Health
Association's
Leadership Task
Force on National
Health Policy
Reform.*

On November 15, 1992, the day before the national bishops' meeting opened in Washington, DC, the National Coalition on Catholic Health Care Ministry sponsored a series of workshops. In their addresses, Sr. Bernice Coreil, DC, and Card. Joseph Bernardin encouraged the bishops to play a collaborative role in shaping the ministry's future.

the sophisticated processes of professional agencies, and the informal and uncoordinated efforts of individuals and local church groups have contributed to a fragmentation of responsibility for the healthcare ministry. This sense of fragmentation is further complicated by the decline in membership and shifting ministerial priorities of the clergy and religious, who have historically led the Catholic healthcare ministry.

A RENEWED COMMITMENT

The challenges posed by these changes in medical care and in those who lead the healthcare ministry are being addressed by efforts to call the laity to accept greater responsibility for ministry within healthcare. A growing number of Catholic women and men are embracing the opportunity to witness to their religious beliefs and commitment through Catholic healthcare leadership.

At an institutional level, the traditional model of sponsorship is also being reexamined. As the structure and membership of religious congregations change, this mode of sponsorship is proving less and less viable. New models of sponsorship that ensure continuity and stability and maintain authority and accountability to the Church are being examined and implemented. This is especially important since, through the development of Catholic healthcare institutions and systems,

Continued on page 28

The Bishops' Role

Continued from page 22

Bishops must participate to ensure that our healthcare ministry practices what we preach.

cially for poor families and children.

The unrestrained escalation of healthcare costs has spawned an unprecedented problem of coverage and access. Americans without health insurance now number close to 40 million. An almost equal number have inadequate insurance. Nearly three-quarters of the uninsured are full-time workers and their families. Most disturbing of all, 11 million children are among the uninsured.

Despite huge expenditures, first-class technology, and an excellent medical education system, serious questions persist about the quality of healthcare in the United States. The symptoms of a failing healthcare system are everywhere: an unconscionable rate of infant mortality, increased malnutrition, increasing numbers of sick and homeless.

This is not a new issue for the Church. We have advocated comprehensive reform for more than two decades. We bring several essential perspectives to the discussion—as defenders of human life and human dignity, as providers of healthcare, as purchasers of insurance coverage for our employees, and as a community that serves and advocates for the poor and vulnerable. The Church must bring a constructive and distinctive voice to this debate at both the state and the national levels.

ENSURING THE MINISTRY'S VITALITY

The bishops' role is central in light of the challenges facing the Catholic healthcare ministry at this time of immense change. The significance of

the healing ministry in the overall mission of the Church demands the commitment of episcopal leadership. We must move now in a dramatic fashion to ensure the continued vitality of the Catholic healthcare ministry. Bishops must participate to ensure the continuing Catholic identity, the commitment to the poor, and the connection to the Catholic community. We must participate to ensure that our healthcare ministry practices what we preach about human life, human dignity, the rights of workers, and the common good.

Several questions provide focus to the task before us:

- How can bishops be involved and informed on relevant trends and issues in the healthcare ministry?
- How can Catholic laymen and laywomen be challenged to greater responsibility for their role in this ministry, and to demonstrate their personal commitment to its continued presence and vitality?
- How can bishops implement effective programs of advocacy on behalf of issues?

In these days of change and stress, there is simply no substitute for stronger relationships and greater collaboration between bishops and the leaders of Catholic healthcare. We need more dialogue—nationally and locally—about how we work together to enhance and preserve the Catholic commitment to healthcare. We also need to stand together in advocating national reform of healthcare, which will protect and enhance the life and dignity of all our citizens, especially the poor and vulnerable. □

Forging a Future

Continued from page 20

the Church has become the steward of significant resources on which society has learned to depend.

The healthcare ministry has been, continues to be, and should remain a vital part of the Catholic Church's mission. A prerequisite to facing the challenges that confront our ministry is a renewed commitment to the healthcare ministry by the whole community of faithful. Such a commitment will entail significant collaboration among those who share the Church's values.

A variety of alliances and cooperative arrangements among Catholic institutions and agencies will make it possible to continue the ministry and to extend its reach into areas of greatest need. Agreements entered into with those who do not acknowledge the Church's authority or accept its teaching will call for special sensitivity. These arrangements must be guided by the traditional Catholic moral principles regarding cooperation in determining how to proceed.

TRANSFORMING THE HEALTHCARE SYSTEM

The ability to set national directions on issues and strategies central to the Church's healing mission is a vital characteristic of the Church's future healthcare ministry. In particular, society will look to Catholic healthcare providers to seek out the poor and underserved. Leaders of the Catholic healthcare ministry must keep the needs of the poor before the public and try to transform the system of access and financing in favor of the needy and most vulnerable in society.

The bishops have an important role in helping bring about greater collaboration, new models of sponsorship, and healthcare reform. We can be separate no longer, each going our own way. To paraphrase St. Francis, we must seek to teach with Jesus' love and to heal together—to bring about unity and to find the lost and bring them home to Jesus together. Only by working together can we bring the healing ministry of Jesus into the twenty-first century, because without the bishops there will not be a Catholic healthcare ministry in the twenty-first century. □