



# HEALTHCARE REFORM AND THE “CONSISTENT ETHIC”

*The truth is, of course, that each life is of infinite value. Protecting and promoting life, caring for it and defending it is a complex task in social and policy terms. I have struggled with the specifics often and have sensed the limits of reason in the struggle to know the good and do the right. My final hope is that my efforts have been faithful to the truth of the gospel of life and that you and others like you will find in this gospel the vision and strength needed to promote and nurture the great gift of life God has shared with us.*

—Card. Joseph Bernardin<sup>1</sup>

In his living, and especially in his dying, Card. Joseph Bernardin embraced the innate dignity of every human being as God's creation. He was compassionately connected to others, especially, at the end of his life, to those who also suffered from cancer. These personal qualities gave testimony to three core themes of the Catholic moral vision:

- The sacredness of our human life
- Our call to be responsible stewards of that life
- The interwoven social fabric of our human existence<sup>2</sup>

Card. Bernardin's life was based on Catholic belief and practice. The articulation of a simple phrase—"the consistent ethic of life"—was one of his great contributions, drawing together as it



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does the richness of the Scriptures, our Catholic tradition, our experience of ministry, and human reason. Within the Catholic community, the *consistent* ethic has allowed believers to embrace both the prolife and the projustice efforts of the church. Although the media sometimes seem to take great delight in reporting disagreements among various groups within the U.S. Catholic Church, the consistent ethic of life acts as a counter to that phenomenon. The consistent ethic binds us together in a way that enhances the Catholic community. Equally important, it enables us to be a stronger witness of Gospel values to the wider public. It calls us to a deeper concern for all people, particularly for the weak and vulnerable, whose dignity is threatened and whose potential is blocked by unjust conditions.

## CONSISTENT ETHIC OF LIFE: SOURCES AND MEANING

To understand the consistent ethic of life, I begin with Pope John Paul II's *Evangelium Vitae*.<sup>3</sup> This encyclical proclaimed the "gospel of life" as central to Jesus' message. It called on the community of faith to mobilize a new culture to counter the moral decline that allows so many kinds of violence—war, abortion, and capital punishment, among them—to threaten life. John Paul II called on "people of life" to share the good news of the gospel of life. I believe that employing the consistent ethic as an intellectual and moral framework—inspired as it is by Scripture, rooted in church tradition, born out in experience, and known through reason—is one way to share that good news.

**Scripture** Throughout Scripture, there is an undeniable affirmation of the sacred nature of human life, our duty to steward it wisely, and our obligation to protect and nurture the lives of others, particularly the weak and vulnerable. In Genesis, we read that humankind was created in the image



of God. "God saw everything that he had made, and indeed, it was very good" (Gn 1:31). At the end of his long life, Moses exhorted the Israelites to "choose life" (Dt 30:19).

Not only are we called to life; we are called also, through Christ, to "have life, and have it abundantly" (Jn 10:10). We are to treasure our life and, as in the parable of the talents, to be *trustworthy servants who use our gifts wisely* (Mt 25:14-30).

As a way of recognizing life's sanctity and our own potential, we are also called to protect and nurture the lives of others. St. Paul exemplified this when he wrote to the Thessalonians, "So deeply do we care for you that we are determined to share with you not only the gospel of God but also our own selves" (1 Thes 2:8). At the end of time, all people, indeed all nations, will be judged by how well each gave to the least among them.

**Tradition** These scriptural themes are a consistent thread woven through the theological tradition and teachings of the Catholic Church. We can turn to the Catechism of the Catholic Church and find there the church's teaching in favor of human solidarity, love for the poor, a just social order, and charity. In those same pages, the church's condemnation of homicide, abortion, euthanasia, and the use of the death penalty is explicit. All these teachings are linked by the central affirmation of the dignity of every human being and are given special attention in church teachings such as *Gaudium et Spes*, *Pacem in Terris*, and, more recently, *Evangelium Vitae*.

**Experience** The church's experience in the healing, teaching, and serving ministries also shapes and reflects these commitments to life's sacredness and our obligation to nurture and protect the lives of others, especially the poor. Through the healing ministries, we are reminded how precious and fragile life is. It becomes clear that for any one person to preserve his or her life and live it responsibly, a certain dependence on the goodwill and care of others is necessary.

**Reason** Within the Catholic tradition, reason and faith are not contradictory but mutually supportive. By virtue of reason, we have the ability to distinguish between good and evil. In *Veritatis Splendor*, John Paul II noted that "it is in the light of the dignity of the human person—a dignity which must be affirmed for its own sake—that reason grasps the specific moral value of certain goods toward which the person is naturally inclined."<sup>4</sup> The light of reason enabled Aquinas to posit that there is a natural essence to every being.<sup>5</sup> Every human being possesses a built-in dynamism that moves him or her toward fullness.

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This human trait marks what it means to be human and is deserving of deep respect.

The respect due every individual life because of our innate human dignity is a concept embraced by ancient philosophers, articulated by enlightened thinkers, and immortalized in our Declaration of Independence. Plato, Aristotle, and Kant all saw the human person as a creature imbued with *intrinsic value, intended for a meaningful purpose*, and understood in the context of relationships.

That the consistent ethic is consonant with reason—as well as with Scripture, tradition, and experience—is important. It enables adherents to speak to those outside the Catholic tradition and share with them a coherent, persuasive rationale for the defense of life.

#### VALUE OF CONSISTENT ETHIC IN PUBLIC DEBATE

I believe the consistent ethic of life echoes certain American values. It is consonant with—and can enrich our understanding of—such quintessential American concepts as liberty, equality, the pursuit of happiness, civic duty, and the "American dream" of success and achievement. As Abraham Lincoln said in the Gettysburg Address, this country was "conceived in liberty and dedicated to the proposition that all men are created equal." Implicit in the Declaration of Independence and the Constitution is recognition of the essential dignity of every human being. By virtue of being human, all people are endowed with certain inalienable rights. But also deeply embedded in our national heritage is the premise that we are not disconnected individuals pursuing our own interests. In the words of our Constitution, we are "a people" attempting to form a "more perfect union" intended "to establish justice, insure domestic tranquillity, provide for the common defense, promote the general welfare, and secure the blessings of liberty to ourselves and our posterity."

Throughout our history, Americans have differed over the interpretation of American values and what it means to be "a people." One need only look at our current conservative and liberal strains in politics. Conservatives tend to wax poetic about their interest in liberty when it comes to economics, but are far less libertarian when it comes to social values. Liberals, by contrast, seek to restrain freedom in the sphere of economic activity but hold that freedom should reign in such areas as abortion and euthanasia.



The consistent ethic of life reinforces the ideas of freedom, greatness, and equality of opportunity, but always with an underlying awareness of the relational nature of being human. Our nation's founders did not view the pursuit of happiness as a selfish chase after whatever happened to please us, but rather as the seeking of a worthy and virtuous life. The consistent ethic of life brings us back to that original meaning of *life* as precious, of *liberty* as the condition for pursuing a happy—meaning worthy and virtuous—life, and finally of *equality* as requiring an atmosphere in which disparate people might flourish.

### OUR CONTEMPORARY CONTEXT

At this point in our nation's history, we are in great need of the consistent ethic as a kind of corrective lens through which we can take a fresh look at traditional American values. How might the ethic counter the fragmentation, individualism, and commercial orientation that mark our culture?

**Fragmentation** As we begin a new century, John Courtney Murray's insights in *We Hold These Truths* gain a deeper significance.<sup>6</sup> When he wrote in 1960, he called attention to the common values operative in our country. "The whole premise of public argument," he wrote, "if it is to be civilized and civilizing is that the consensus is real, that among the people everything is not in doubt, but that there is a core of agreement, accord, concurrence, acquiescence. We hold certain truths; therefore we can argue about them."

It was that very premise that enabled Martin Luther King Jr. to be so persuasive and effective in the civil rights struggle. The founding fathers' underlying assumptions about human dignity and liberty—coupled with the religious vision of a society in which all could flourish—gave shape and purpose to King's leadership. The dramatic progress made in the 1960s to ensure the civil rights of blacks in America was due in large part to that common heritage.

But it may not be immediately obvious, a generation later, that we still "hold certain truths." Recent decades have been marked by a decided lack of common ground. Commentators offer diverse reasons for the fragmentation that pervades our culture. Some say it has emerged from the "specialization" of politics, an ironic byproduct of the civil rights movement, with groups devoted exclusively to one or two specific agendas or issues. Others blame (or credit) the proliferation of information through such media as the Internet and cable television. This results in a bewildering multitude of voices and at times hampers common con-

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versation. Still others claim it is enthrallment to the media themselves—in particular, to the TV sets before which so many of us spend so many hours—that increasingly dissuades people from joining social and community groups.<sup>7</sup>

**Individualism** Another dimension of this fragmentation can be seen in the way "morality" has come to be viewed as personal and individual. People refer to "your morals" versus "my morals," as if there were no moral principles that bind together all people. A central principle—the dignity and rights of every individual—seems to have been skewed into something almost unrecognizable as a valid moral starting point. In *Evangelium Vitae*, John Paul II identifies this disintegration as "postmodern relativism."<sup>8</sup> In *Veritatis Splendor*, he insists that "the primordial moral requirement of loving and respecting the person as an end and never as a mere means also implies, by its very nature, respect for certain fundamental goods, without which one would fall into relativism and arbitrariness."<sup>9</sup>

In our culture, we have so emphasized the status of individual freedom and independence as to have seemingly forgotten the underlying beliefs that guard human dignity and human rights: that each life is precious, that each life is meant to flourish, and that each of us has a responsibility to ensure that all people have the opportunity to find fulfillment. When these convictions are neglected, the individual is elevated—but there is emptiness below. The moral terrain becomes barren and dry.

**Market Values** A third force meriting attention is our culture's insistence on effectiveness as judged in the market. In the technological revolution of the past century, it became tempting to measure a person's worth by his or her usefulness. Now, in the 21st century, we struggle to uphold the true dignity of each individual as a person, a unique and special reality, not a commodity or utensil.

### CONTEMPORARY SIGNS OF HOPE

But these three facets of contemporary life, as discouraging as they may seem, may actually be helping to create fertile ground for the cultivation of the consistent ethic of life in the public square.

**Spiritual Yearning** Perhaps as a reaction to the pace of modern life, with its emphasis on utility and function, a popular yearning for great personal spirituality has emerged. Today's spiritual gurus encourage their followers to seek spiritual fulfillment not only in personal well-being, but in serving others as well. John Paul II, in *Evangelium Vitae*, said that the gospel of life is not for believers alone, but for everyone and for "every human



conscience which seeks the truth and which cares about the future of humanity."<sup>10</sup>

For all those who seek answers to the question of life's meaning, the consistent ethic of life has this to say: Every life is valuable and meaningful. Each person's life is meant to be lived as fully as possible. We are all meant to be in relationships and to work together to create conditions that promote human flourishing. By reiterating this truth, the consistent ethic of life can help answer the spiritual and moral yearnings even of those not rooted in the Catholic tradition.

**Dissatisfaction with Autonomy** On one hand, the individual enjoys an elevated place in our culture. On the other, people are increasingly dissatisfied with autonomy as the guiding light in moral analysis. Bruce Jennings, a moral philosopher at the Hastings Center in New York, describes the triumph of autonomy as "the terrible singularity, the chilling aloofness of the sovereign moral will."<sup>11</sup> The "good" cannot be judged solely by its ability to satisfy an individual's choice, because there are good and bad choices.

Ethicists and philosophers are beginning to question our culture's emphasis on autonomy and are calling to mind other values that affect moral virtue. The consistent ethic of life recognizes the innate value of the individual and the need for that individual to flourish—but to flourish always in the context of the social fabric of life and his or her obligation to help others flourish as well.<sup>12</sup>

**Power of the Media** Images possess undeniable power in our media-saturated society. The images of a little girl being rescued after having fallen in a well, of a woman being pulled from earthquake wreckage, of a small boat carrying a man to safety in a flood—all have something in common. They have the power to bring people together, to communicate values, and to trace connections between people and events. Because we belong to a society fascinated with images, it may be possible for us who believe in the gospel of life to employ such symbols to express some of our nation's fundamental values. Allow me to present a few examples.

When Mother Teresa died, the media showed powerful images of her reaching out to the most physically vulnerable, the poorest of the poor. Her life, as seen in these images, was a witness to the moral impulse to address the most basic human needs of others. Her caring for others captures and expresses the respect due to every person.

Another strong image was that of American rescue workers helping to pull trapped people out of the wreckage of the earthquake in Turkey. This was a clear example of people who, having developed their own potential, were using it in

the service of others. In living color, we witnessed a powerful moral drama unfold.

Such images convey an alternative to the dramas involving polarization and individualism we normally see on TV. They reveal that what is best in the human person is the impulse to use our gifts and talents to benefit others, not just ourselves.

There is a noble purpose in being human, an inexorable pull toward realizing our dignity, our potential, and our connection to others. The consistent ethic of life celebrates life as a gift, liberty as the freedom to develop one's potential for greatness, happiness as a reward for pursuing that greatness, and the common good as the condition that promotes the true dignity and potential of all people.

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#### AMERICAN HEALTHCARE REFORM

Our fragmented, individualistic, and market-driven healthcare system—marked by many of the same traits that define our broader culture—could benefit from the consistent ethic of life. Card. Bernardin began some of this work, particularly in his last years. For example, he reflected on the link between the consistent ethic and healthcare reform in a speech at the National Press Club in Washington, DC, in 1994.<sup>13</sup>

**Fragmentation** One symptom of our diseased healthcare system, like the larger society, is fragmentation in *all* its facets—health insurance, healthcare delivery, and health policy. Let us start with health insurance.

As we know, the American insurance system is a combination of public and private payers and providers. There is nothing inherently wrong with a system as diverse as ours, but in practice it leaves many gaps. The most glaring is that at the moment there are some 44 million people in this country, or about 16.3 percent of our population, not covered by any of those options. Our health insurance system is based on the presumption that employers will provide the insurance. But many small businesses are unable to afford the high cost of doing so.

Looking at our health insurance system, one gets the feeling that it is patched together—but without glue. A patchwork system like ours might work if it had some explicit underlying principles consonant with a consistent ethic of life and American ideals. But, as it is, our system is built on values that, although they *seem* distinctly American, actually conflict with the values we hold true.

One serious consequence of this fragmentation is that many who lack health insurance delay seeking medical attention and use emergency room



care when it can no longer be avoided. Hospitals end up, when they can, shifting the cost of uncompensated care to the insured, thereby increasing the cost of insurance—putting it even further out of reach for those who lack it. Or hospitals accept bad debt, thus limiting the resources they might use in other areas of healthcare delivery. Healthcare delivery is also fragmented in the sense that health insurance is tied to employment, so that a change in health plans or a loss of insurance inevitably accompanies any job change.

Finally, our nation has no coherent healthcare policy. The current system provides outstanding episodic rescue care but lacks the coordination needed for treatment for chronic illness, despite the fact that chronic illness is much more prevalent. Similarly, care for a presenting illness often does not address its root cause, especially when these roots are such social ills as poverty, inadequate housing, or a polluted environment. A good example of this fragmentation is the absence of a coherent federal policy regarding the long-term care needs—including affordable housing, home care, assisted living, or nursing home care—of our rapidly increasing elderly population.

Because we have no coherent healthcare policy, we are forced to change the system bit by bit, here and there, with little overarching strategy or agreed-on principles to guide those changes. Even those changes are made difficult by special interests, such as those of insurance companies, doctors, hospitals, and patient groups defined by specific diseases. And these groups, when lobbying on proposed legislation, tend not to have the larger picture of the healthcare system in mind.

**Individualism** Individualism also significantly affects our health policy. This is most evident in the difficulty we have had in sparking public interest in reforming the system. Most insured people probably view their own health insurance and healthcare as being adequate. Losing one's insurance and being unable to find coverage is seen as an individual problem, rather than a systemic one. As long as *I* am healthy and happy, I'm not worried about the healthcare system.

But we should consider the possibility that those who are without health insurance may be too busy battling illness while trying to make ends meet to bring their problems before the public. They may, for those reasons, be voiceless. It may be those who benefit from the current system, or are at least reasonably well served by it, who have the responsibility for ensuring that *everyone* shares in it. Unfortunately, those who benefit have been all too silent.

**Market Values** Historically, healthcare delivery—or

more correctly, acute care delivery and later insurance coverage such as Blue Cross—was carried on in the voluntary or not-for-profit sector of our society. I would argue, as Card. Bernardin did quite forcefully in his Harvard Business School Chicago Alumni Club address,<sup>14</sup> that this is the preferred focus because of the nature of healthcare as a social good.

In recent years, however, the delivery and financing of healthcare have increasingly been seen as belonging to the investor-owned, publicly traded sector of our society, with healthcare often offered as a commodity like any other in the market. As a result, those who provide healthcare are too often seen as business owners, rather than service providers. Patients are seen as consumers, rather than as vulnerable people needing help or as citizens seeking to improve their community's health status.

This transition from a local service industry to a huge, multibillion-dollar and multinational corporate endeavor has happened so quietly and gradually that we have failed to take adequate note of it. For many people, the logic of a market-based system must inevitably be the market's efficiency, cost control, and profit margins. As long as healthcare is viewed primarily in economic terms, it will be difficult to galvanize support for changes beyond market reform.

#### THE NEED TO TAKE A STAND

The consistent ethic of life comes into play as an antidote to the fragmented, individualistic, and market-based nature of our healthcare system. A system based on the consistent ethic would rectify the fragmentation of our current system, in which some are served very well and others not at all. As a framework for evaluating any policy, the consistent ethic would insist that all life be valued. Any practice, any law would have to institutionalize that value. Ensuring that every person has access to healthcare would be more than a policy objective; it would be viewed as a moral imperative.

But can this happen? Are not the forces just noted too strong, the trend irreversible? I think not. The language of the consistent ethic can further the growing search for meaning, ease increasing dissatisfaction with unbridled autonomy, and employ images and symbols in a way that can invite profound change.

Inviting and nurturing such a sea change would not be something new in the American



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experiment. In this country, we have been able to free slaves; enfranchise women; guarantee all a public education; and protect civil rights based on the fundamental principles of dignity, freedom, and the equal right of each person to pursue happiness.

As a nation, however, we have yet to take the same stand against lack of care for the uninsured ill that we have taken against illiteracy and intolerance. I believe we must take a stand. In a lecture delivered last April, I proposed a national dialogue that, if carried on well, would result in a consensus that access to basic healthcare is an "essential building block" for our free society.<sup>15</sup> I suggested that the foundational themes of the consistent ethic of life—human dignity, stewardship, and the common good—could deepen some of our society's core values in a way that changes our perspective on healthcare. From that new perspective, we will regard ill health as a threat to the pursuit of a fulfilling and purposeful life. We will not allow access to our healthcare system to depend on individual circumstances—the good fortune of working for an employer who provides adequate insurance, for example, or of qualifying for Medicaid or Medicare. No. *Accessible and affordable healthcare for all will be a central tenet of our healthcare system.* That system will guarantee an adequate level of care to all people and will do three things to ensure that all people are able to develop their potential to live a fulfilling and purposeful life. It will:

- Seek to prevent illness
- Promote the well-being of those who are ill
- Protect the health of the entire community

Certainly we have made great strides in preventing and combating illness. Yet, just as a healthy delivery system will strive to prevent and cure sickness to ensure the full participation of all in the pursuit of happiness, it will also recognize the frailty of human life and the inevitability of sickness and death. It will recognize what all humanity holds in common: our mortality. It will recognize our responsibility in the face of that mortality to create a system that cares for the chronically and hopelessly ill in a way that promotes their wholeness and upholds their humanity.

Promoting the well-being of the ill is a dimension of healthcare that obviously cannot be quantified. This is another reason why healthcare cannot be left to the vagaries of the marketplace. Healthcare cannot be shaped the way other industries are shaped, because it is different in kind. It goes to the heart of the conditions necessary to sustain a common good in which every person can flourish.

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A responsive healthcare system that takes account of human solidarity will also be needed if we are to identify and forestall threats to the health of the community, including environmental hazards, gun violence, and suicide. The wholeness, or health, of the community depends on the existence of healthy and safe environments in which people can live.

Our consistent ethic of life, then, challenges the fragmented nature of our healthcare system. It deplores the notion that individuals must struggle alone to find a way into the healthcare system. And it counters the notion that healthcare is purely a commodity to be bought and sold, rather than a precondition for pursuing happiness.

#### ALLOCATION OF HEALTHCARE RESOURCES

One other foundational category related to the common good is responsible stewardship of resources. How can the common good, as a dimension of the consistent ethic of life, assist us in determining how to allocate our healthcare resources? Obviously, this is a complex issue. Currently 15.5 percent (\$1.1 trillion) of our domestic national product (DNP) is spent on the various aspects of healthcare. Just 18 years ago, it was 8.9 percent of DNP. Such an increase raises the question: Should there be any limit on these expenditures and, if so, how as a nation should we make such a determination?

For example, should how much we spend on healthcare be determined simply by market forces or by federal mandate, or in some other way? What would be the criteria guiding such a decision-making process? Is national defense, for example, more important than the nation's health? If so, by how much?

As if those questions were not complex enough, there is also the parallel issue of how we allocate the existing resources—that \$1.1 trillion—in a just and equitable manner. If the efforts of groups such as the Catholic Health Association and others to make accessible and affordable healthcare a national priority are to be successful, we will have to give a great deal of attention to the question of resource allocation. Such a conversation will not come easily. Allocation is often taken as being the same as "rationing," and the concept of rationing does not sit well given America's dedication to a certain understanding of liberty.

But one could argue that rationing is being done now, although that word is never used to



describe it. For example, health plans (or the employers who purchase them) decide which health problems they will or will not cover—they ration coverage. And our nation's failure to institute universal coverage ensures that many of the 44 million uninsured get only that care available in emergency rooms and free clinics. This, too, is a form of rationing.

In recent years, there have been various proposals to develop more explicit criteria for allocating healthcare resources. Oregon, for example, received a federal waiver to develop for citizens on Medicaid a statewide health system with a guaranteed "basic benefit package" set by state policy.

As we begin to think about resource allocation, we will again find the consistent ethic of life helpful. Our understanding of human dignity, for example, will require any allocation decisions to be applied equitably and without discrimination. Similarly, because access to adequate healthcare is a fundamental human right, there must be a baseline of services not subject to political trade-offs. That same inalienable dignity would require an open and participative process involving all those affected by allocation decisions. And any allocation must have an ethical priority ensuring that resources are provided to the disadvantaged. Good stewardship also requires monitoring the social and economic effects of allocation decisions to make sure that the consequences of those decisions were the ones intended.

Finally, an integral understanding of the common good will provide an important framework for decision making. It will insist that allocation decisions focus not just on individuals but also on the health status of communities and those social forces which can better enhance personal and communal health. A rich understanding of the common good challenges a notion of "liberty" that says individuals should be able to receive whatever health services they desire even if, medically speaking, those services are considered futile.

When we view healthcare reform through the lens of the consistent ethic of life, we are left with the certainty that life is indeed precious and full of possibilities, that together we must establish the conditions that allow all to share in those possibilities. We are left with a sketch of a healthcare system that recognizes the need for limits, that acknowledges the inevitability of decline and death, that treats healthcare as a service, that upholds the dignity of every person, and that promotes the health of our whole society.

I believe we can have such a system, and I believe this system could be crafted entirely in the private sector, or entirely in the public sector, or

as a mix between the two. What it must *not* be is the fragmented, individualistic, and market-driven system we have now. What it cannot be is a system with no design, without the underlying values that embrace life and seek justice. It must be a healthcare system that is consistent. It must have an ethical foundation. And it must be a system that celebrates life in its fullest sense—a system that promotes human purposes and ends, even in the midst of sickness and death. In utilizing the consistent ethic in this way, we will be acting as the cardinal often asked us to act. We "will have the courage to move beyond the past and the creativity to address the future."<sup>16</sup> □

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#### NOTES

1. Joseph Bernardin, "Remaining a Vigorous Voice for Life in Society," *Origins*, September 26, 1996, p. 242.
2. See J. Bryan Hehir, "Identity and Institutions," *Health Progress*, November-December 1995, pp. 17-23.
3. John Paul II, *Evangelium Vitae*, reprinted in *Origins*, April 6, 1995, vol. 24, no. 42.
4. *Veritatis Splendor*, reprinted in *Origins*, October 14, 1993, vol. 23, no. 18, p. 312, para. 48.
5. See Thomas Aquinas, *The Summa Contra Gentiles*, third book, chapter III, in Anton G. Pegis, ed., *Introduction to Saint Thomas Aquinas*, Modern Library, New York City, 1948.
6. John Courtney Murray, *We Hold These Truths: Catholic Reflections on the American Proposition*, Sheed and Ward, New York City, 1960.
7. See Robert D. Putnam, "Bowling Alone: America's Declining Social Capital," *Journal of Democracy*, January 1995, pp. 65-78. Putnam argues in his now famous article that Americans are today much less apt than formerly to build "social capital" by joining civic and social organizations. "The most obvious and probably the most powerful instrument of this revolution is television."
8. *Evangelium Vitae*, p. 697, para. 20.
9. *Veritatis Splendor*, p. 313, para. 48.
10. *Evangelium Vitae*, p. 724, para. 101.
11. Bruce Jennings, "Active Euthanasia and Forgoing Life-Sustaining Treatment: Can We Hold the Line?" *Journal of Pain and Symptom Management*, July 1991, p. 316.
12. *Veritatis Splendor*, p. 308, para. 32.
13. Joseph Bernardin, "The Consistent Ethic of Life and Healthcare Reform," in *Celebrating the Ministry of Healing: Joseph Cardinal Bernardin's Reflections on Healthcare*, Catholic Health Association, St. Louis, 1999, pp. 70-82.
14. Joseph Bernardin, "Making the Case for Not-for-Profit Healthcare," in *Celebrating the Ministry of Healing*, pp. 83-93.
15. Michael D. Place, *Healthcare: Essential Building Block for a Free Society*, Catholic Health Association, St. Louis, 1999.
16. Joseph Bernardin, *A Sign of Hope*, Archdiocese of Chicago, 1995, p. 11.