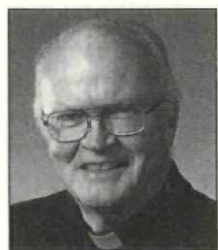


PRESERVING A PRESENCE IN MEDICAL EDUCATION

*Universities Need Church Leaders' Support
To Promote Catholic Values in Healthcare*

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Two central elements in a Catholic university are commitment and community. Commitment creates a Catholic learning community, a climate of inquiry that acknowledges without apology the compatibility of faith and reason. Such an academic community locates itself in relation to the transcendental—not simply to a transcendental idea but to someone who transcends the limits of time and space, to someone who created us and our material universe, to someone who stepped decisively into our human history and opened, for all who believe, a way to become more fully free, human, and eternally secure.

A FAITH COMMITMENT

Being Catholic means, first of all, that the university is committed to the person and Gospel of Jesus Christ as the primary source of values and attitudes reflected in the campus culture and community. Chief among these values is faith. Quite literally, a Catholic community is a *confident* community—not arrogant but humbly confident, entrusting itself to the triune God who is the all-powerful source of everything good, true, and beautiful.

This faith commitment is not only to the person and Gospel of Jesus Christ and to truth in every form, but also to the Church community. That the university is Church related does not mean it is “owned and operated” by the Church through a diocesan structure or in

the person of the bishop. But the Catholic university does have a special relationship to the local bishop—ideally, one of mutual affection, respect, service, support, and reciprocity in the roles of teacher and learner. Both university and bishop must learn in order to teach. The university has much to learn from the bishop; the bishop has much to learn from the university. In this reciprocal relationship, each must retain an appropriate freedom, recognizing the other’s unique responsibilities in responding to the Gospel mandate to “teach all nations” (Mt 28:19) a “truth [that] shall make you free” (Jn 8:32).

SAFEGUARD AND PROOF

The university movement owes its very origins to the Church. In this country, the rich diversity of the Church-university relationships is one of the glories and strengths of our higher education system. The Church needs the university as the safeguard and proof of the compatibility between faith and reason. And the university needs the Church for its own integrity, to ensure complete coverage of the full range of intellectual exploration.

Persons who spend their working lives in Catholic universities and colleges should pause on occasion to remind themselves that the Church they serve exists for no other purpose than to bring people to God. This God, who creates and draws men and women to himself, is infinite in all his attributes—infinite in power, truth, love, beauty, justice, mercy, wisdom,



and so much more. Educators should permit themselves occasionally to be astounded by the scale and sweep of their mission.

It is therefore not surprising to find medical education in the Catholic university setting. Regrettably, the rising costs of providing healthcare and educating physicians have forced some Catholic universities to withdraw from medical education and dis-

couraged others from entering the field. This is regrettable for at least three reasons: the urgent moral questions that medical education should address, the need for value-focused humanistic healthcare, and the growing absence of an ethical dimension in medical research and experimentation.

These problems now appear to be so large and so far removed from the Catholic university that Church leaders give little attention, relatively speaking, to medical education in Catholic settings. Now these leaders place more emphasis on seeking legislative restraints for immoral medical practices and on providing pastoral care for the ill, particularly those in Catholic healthcare facilities.

CHURCH SUPPORT NEEDED

However, it would be foolish—"scandalous" might be a better word—for the Church to lose interest in and withdraw support from the medical schools Catholic universities now sponsor. The Church, of course, is the entire faith community, not just the hierarchy. But hierarchical leadership is visible and vocal, and Catholic medical education needs its support.

Sounding the moral alarms in the public square is one thing; supporting research into ethical issues is quite another. Such research is unlikely in secular and state-supported medical centers. If not there, where?

The Catholic medical school is, at least in theory, one such setting. But converting that theory into reality requires the presence of faith-committed and scientifically competent teachers and learners, persons whose respect for human life and human dignity are integrated with their professional commitment to medicine. The teaching Church—the magisterium—should accord them

The Church- university relationship is a strength of our education system.

respect for their intellectual lives and professional dignity.

Intellectual exploration of moral matters in medicine involves some risk and uncertainty. Dialogue with the teaching Church will be expected of those who explore moral questions in Catholic-sponsored medical centers. Those investigators, for their part, have the right to expect an appropriate range of freedom, a

generous measure of trust, and a realistic level of financial support from the entire Catholic faith community.

The healing ministry of Jesus has been part of the Christian tradition from the beginning. How to preserve a practical healing ministry in the Church of Christ in a modern, complex, medically sophisticated world is a question worthy of serious consideration today. If American Church leaders are discussing that question, their discussion is not getting public attention.

Given the advanced state of medical research and practice in the United States, the contribution of American Catholic medical schools appears to be of strategic importance to Church leaders. However, this presumes the medical centers to be Catholic in theory and practice; it also presumes that Church leaders have not decided to look beyond the few remaining centers of Catholic medical education for answers to research questions and for the professional education of the next generation of Catholic physicians.

A SPECIAL SETTING

Perhaps loss of the Catholic university medical centers is inevitable, although I do not think so. Nor do I suppose that those now working in the medical schools at Creighton, Georgetown, Loyola of Chicago, New York Medical College, and Saint Louis University would concede they have nothing special to offer the Church. What they have to offer is a special setting other medical educators cannot or choose not to provide. The characteristics of that setting spell out their Catholic identity and their Catholic purpose. If unexamined and unprotected from within, and neglected from without, that identity and purpose could be lost in a sea of rising costs, increased complexity, and secular drift. □