

CHA Pursues a National Consensus on Healthcare Reform

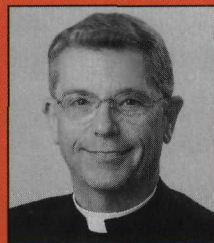
BY REV. MICHAEL D. PLACE, STD

In the next few months, I hope to engage all participants in the Catholic health ministry in an exciting new Catholic Health Association initiative. The CHA board has set a three-year goal of working to achieve a national consensus on the need for accessible and affordable healthcare for all. This effort is vital to the flourishing of our nation, the Catholic health ministry, and every person residing in our country, no matter their age, religion, employment status, or income.

You may wonder what I mean when I say the initiative is “new.” Many of you remember that in 1993 CHA set forth a specific plan for systemic healthcare reform in *Setting Relationships Right*. In contrast, our new initiative focuses on promoting dialogue among groups and individuals in our pluralistic society. Such discussions can illuminate how the American values of independence and enlightened self-interest have resulted in our commitment to address problems that ultimately reduce people’s independence by limiting their abilities to achieve all they are capable of.

Two specific problems come to mind: illiteracy and intolerance. In the past, as these problems have come to the nation’s attention, we have responded by providing education and equal opportunity for all. We hope, in dialogue, to deepen our country’s understanding that we must address illness—the third “I”—as we have other barriers to true independence so that no one’s ability to function independently is limited by inadequate care, especially preventive care.

We believe this conversation will lead to consistent, effective approaches to fix our seriously flawed delivery system. On any given day in America nearly 44 million people (the equiva-



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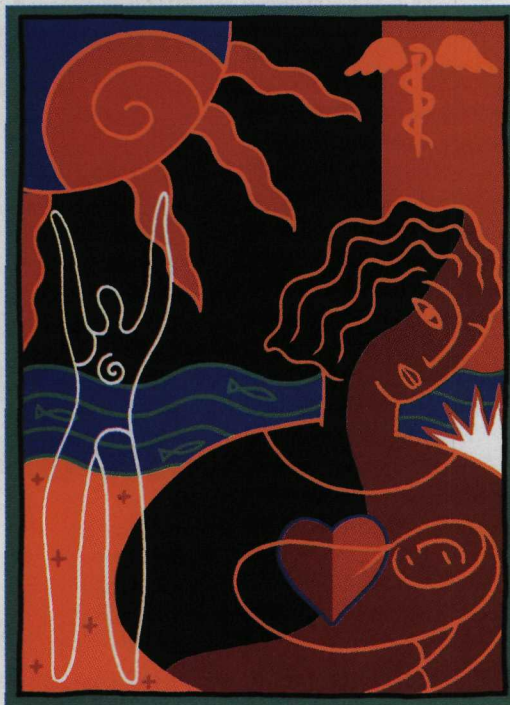
lent of the combined populations of 10 Midwestern states) do not have health insurance. Many of these people are the working poor, but they are also middle-class employees who have joined the ranks of the “downsized.” And they are children. Compared with insured children, these young people receive fewer preventive services and treatments for their injuries or chronic conditions.

CHA’S PETITION DRIVE

If you believe, as I do, that this nation must take steps *now* to redress the tragedy of the uninsured, you can become part of the solution. CHA is asking its members and the public at large to sign a petition as part of CHA’s “Be Heard” campaign (see insert between pp. 64 and 65). This effort will demonstrate to presidential candidates and Congress that there is widespread grassroots support for reform. The petition reads:

I believe that too many Americans do not have access to affordable healthcare coverage. It’s time for a national discussion on healthcare reform—we need to put healthcare reform back at the top of the American agenda. I commit myself to participating in this dialogue and I urge all presidential candidates to do the same by signing the CHA presidential pledge.

As the petition mentions, CHA has also asked the 14 declared presidential candidates to sign a commitment to making accessible, affordable healthcare for all an issue in their presidential campaigns and a priority in their administration. U.S. Rep. John Kasich, R-OH, was the first to sign the pledge last June. Despite his subsequent withdrawal from the race, we hope that other candidates will follow suit.



ESSENTIAL BUILDING BLOCK

Our self-image as a society is one in which opportunity, especially for our children, is limited only by the ability to dream. I dream of a day when everyone accepts healthcare as an essential building block for a free society, just as they accept education and nondiscrimination—as well as police and fire protection, roads, and drinking water—as essential elements. Would we expect 44 million citizens to go without fire protection or safe water?

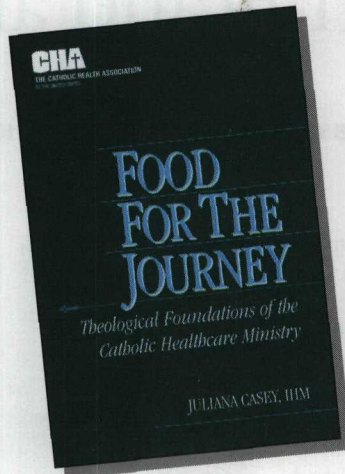
We may not fulfill this dream in one single, sweeping change, so CHA is already engaged in taking smaller steps toward it by advocating reforms such as the Children's Health Insurance Program. But even as we pursue incremental changes, we must strive for a long-term vision and ultimate goal. As part of the national dialogue, CHA will discuss new strategies with the Catholic community—for example with Catholic Charities—and with other organizations that share our commitments, such as the American Hospital Association and the American Medical Association.

We believe our part in this fresh effort will be effective if we can foster conversations in which people come to see the congruencies among the values they hold. I would hope that in dialogue they will realize that reform is essential not only because our current system is unjust but also because reform serves society's legitimate self-interest in promoting a productive, independent population. □

SIGN THE "BE HEARD" PETITION

The petition (see insert at p. 64) is also accessible on CHA's Web site at www.chausa.org/beheard, where it can be submitted electronically. In addition, updates and background information about the "Be Heard" and presidential pledge campaigns are available to the public at www.chausa.org. Organizations interested in quantities of printed petitions should contact Fred Caesar at 202-296-3993, or by e-mail at fcaesar@chausa.org.

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