

# That We May Know, Lord, Your Way on Earth



**BY SR. CAROL  
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**T**his prayer of the psalmist is what so many caregivers, patients and family members struggle to know, especially in challenging health situations.

As Catholics, we have had wonderful guidance that has stood the test of time as medical technology has progressed. Starting with Pope Pius XII, who beautifully affirmed the dignity and rights of patients at various stages of illness, we have always known that the basis for making decisions always starts with the sacredness of life.

This conviction about the sacredness of life has for centuries led Catholic health care to provide hospital, nursing home, hospice and many other forms of care to our most vulnerable brothers and sisters. In every age, providing this care has always been challenging and demanding, but it has always been the clearest affirmation of our belief in the sacredness of life.

Our Holy Father, Pope Benedict XVI, said last year speaking about abortion, "We are acting as advocates for a profoundly human need, speaking out on behalf of unborn children who have no voice. . . . I do not close my eyes to the difficulties and the conflicts which many women are experiencing, and I realize that the credibility of what we say also depends on what the Church herself is doing to help women in trouble."\*

I am sure Pope Benedict would agree that the credibility of our belief in the dignity of the frail, the elderly and the dying is likewise dependent on what we do for them. Are we willing to maintain programs that support them and their families in their times of need, even at great cost and effort? You will read about some great programs in this issue that do remarkable service for frail, elderly and dying patients. Day in and day

\* Pope Benedict XVI's address to Austrian political leaders, Vienna, Austria, Sept. 7, 2007.

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out, these types of programs are the clearest affirmation of the church's teaching on the sacredness of life.

There will continue to be questions about what is ordinary and extraordinary treatment, proportionate and disproportionate care. These questions need to be carefully considered in light of each individual patient and the teachings of the church. Those of us in Catholic health care have a responsibility to work with the leaders of our church to discuss these issues in ways that are helpful to patients and their families. We must be careful not to add to their burdens.

If all of our discussions begin with an affirmation of the sacredness of life, we can then consider the individual clinical situation, the patient's wishes, medical options available, and the teachings of the church and arrive at recommendations that both support the patient and family and uphold our affirmation of the dignity of life. We are dealing with individual patients who are made in the image and likeness of God; there is no one-size-fits-all answer to questions about what is best.

Joining with the Psalmist in the humble prayer, "That we may know, Lord, your way on earth," is a wonderful way to start any discussion about treatment options. ■