

“The Moral Imperative of Health Care”

a reflection

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Heritage Universalist Unitarian Church

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I begin my reflection today with a simple question: “Why?”

Why are there now more than 38 million Americans living below the poverty line? Thirty-eight million, hanging on by their fingertips. Why?

People having to choose between medicine that keeps them alive, and food that keeps their children alive. Why?

While some people yell and scream at one another in town hall meetings all across this country – other people come home, gather their family around the dinner table, and quietly have to tell them that they’ve lost their job. That they’ve lost their health insurance. Why?

And why are there now 47 million of us, who do *not* have health insurance – millions more than just a couple of years ago? Those who are uninsured no doubt include most of the 38 million living below the poverty line – but in addition, an estimated 10-20 million otherwise “middle class” Americans. Why?

Why are one out of every seven of us – one in seven citizens of the most prosperous nation in the history of humanity – why are one in seven of us just one accident, just one serious illness, just one bad medical diagnosis, away from being wiped out?

Why is it that an estimated *18,000 people* will die this year, because they are un- or under-insured?

...Why is it that – this weekend and next – ministers and rabbis, priests and pastors all over America feel they must collectively speak out about the *moral*

imperative of health care? Have we done our jobs so poorly, that the people in our churches and synagogues, in our mosques and temples – people of faith in America, religious people, spiritual people – still do not, in overwhelming numbers, *believe* that the hungry should be fed, that the thirsty should have water, that the sick should be cared for?

Here's what *I* believe: This is a moral issue. This is an ethical issue. This is a *political* issue – and a religious issue. And in case you don't think your minister should be wading into these waters, I refer you to the quote, at the top of your order of service this morning, and remind you whose words they are: "Those who say religion has nothing to do with politics do not know what religion means."

"*Mahatma*" ... means "Great Soul." As a spiritual leader, Mahatma Gandhi earned that title – yet we all know the great things he also accomplished, politically. And certainly America has never known a more influential spiritual leader than Martin Luther King – yet we all know how much *he* accomplished, politically.

Important social change in this world, more times than not, comes from *within* the faith community.

Gandhi. King...

And Tommy Douglas.

Chances are, most of you have never *heard* of Tommy Douglas. But like Gandhi – like King – Tommy Douglas saw an injustice in his society, felt a moral imperative to care for his fellow citizens, and create a better social system – and by following that inner voice, he changed the world.

Here, is his story. Born in Scotland, he moved to Canada when he was six years old. At the age of 10, living in the rough-and-tumble western province of Saskatchewan, Douglas seriously injured his leg, and it became infected. He would have had to have it amputated, were it not for the services of a teaching doctor who agreed to care for him, long-term, free of charge, as a case study for his own medical students.

Tommy Douglas was able to keep his leg – and he grew up to become a Baptist minister. In the course of his ministry, he continued to be confronted with the very un-Samaritan nature of the health care system in Saskatchewan. In describing his time as a minister, he later he wrote, "Again and again we would leave some[one] sitting in the hospital waiting room, while we went out and borrowed or begged a few dollars here and there till we'd make up enough to pay the bill. In some cases I knew people who simply died. I remember burying a girl, 14 years of age, who had died with a ruptured appendix.

“It was in those days I made up my mind, that if ever I had the power, I would, if it were humanly possible, see that the *financial barrier* between those who needed health services, and those who *gave* health services, was forever removed.”

Which is exactly what Tommy Douglas did. He became active in politics, and eventually rose to head the government of Saskatchewan – a position he used to advocate for health care reform legislation. As a result, Saskatchewan became the first political jurisdiction in North America, to provide universal health care for its citizens. Within four years, all of Canada had adopted the Saskatchewan model.

Douglas, in other words, was the father of what is now the Canadian health care system.

...Now when I say those words – “the Canadian health care system” – I recognize that the desperate voices of fear and misinformation which have been so loud, for so long, in the slavish service of our American status quo, have questioned and mocked the Canadian system to the point that many in our country almost instinctively cringe when they hear the words. I realize, too, that I am not a Canadian – so while I admire their health care system from a distance – I am not as qualified to speak about (or should I say, speak “a-boot?”) their system.

So I’ll let *them* do the talking – and all the talking I think we need to hear, took place in 2004, when – in a nationwide poll, Canadians voted the man you have probably never heard of – Tommy Douglas – as the “Greatest Canadian of All Time.”

Now ... if they didn’t like their universal health care, do you think the man who was responsible for instituting it, would have gotten that honor?

Not bad for someone born in Scotland – and it speaks volumes about how satisfied our neighbors to the north are, with their health care system.

So again I ask a simple question: “Why?”

Why is that, in the 21st century, every industrialized nation in the world – except ours – seems to have come to the conclusion that part of being in a society, together – part of the natural moral and ethical (not to mention political) social order – involves a responsibility to care for one another’s health and well-being? Why is it that every industrialized nation in the world, except ours, offers its citizens universal health care? I’m not talking about some quote-unquote “public option” here – I’m talking about universal health care.

Notice that word: *Universal*. As in, Universalist. As in, for *everybody*. No exceptions. No one left behind.

Why is this concept accepted in every – there’s no other way to put this – why is this idea accepted in virtually every *non-American* culture?

I’m a proud American – but this is something I am not proud of. And so, I have pondered this question of “why,” long and hard – and I have come to the conclusion that there are two main reasons we stand alone in the civilized world on this most basic of ethical tests. The first, I believe, is our deeply held American sense of “rugged individualism.” For as long as we have *been* a society, we have placed a high value on the individual, and on his or her (but, let’s be honest, mostly his) ability to take care of himself, and stand alone against the world, if necessary.

Thus, we are much more susceptible to the argument – even those of us who pride ourselves on our progressive values and compassionate hearts – we are much more susceptible to the argument that someone who is sick, or poor, or homeless, or hungry, is *to blame* for their situation – much more likely to think that “it’s their own fault” or “if they amounted to anything, they could pull themselves up by their bootstraps.” The mythos of the rugged individual, the self-made man – the belief that, if we are doing well in the world, it is because of our own skills and hard work – rather than privilege or luck or the help we’ve received along the way from others – this conviction is almost uniquely American – and thus, I believe, is a major factor in “why” we continue to be able, as a culture, to take the path of the self-righteous priest and the smug Levite, rather than the Good Samaritan.

But the elephant in the living room – the *primary* reason we as a nation, as a body politic, seem so tragically paralyzed in our effort to enact any kind of meaningful health care reform – is money. The profit motive.

There is something perversely wrong, in my opinion, about a social system that allows some to profit, from the sickness of others. I’m not talking here about making a living – I believe doctors and nurses and ambulance drivers and all the *individuals* who are involved in caring for the sick and the dying should be paid – well-paid – for what they do. The truth is, their service to their fellow man and woman is, in the words of the credit card commercial, priceless. It is one of the most important roles anyone can play in a civilized society.

No, what I find unconscionable is the idea that *corporations* – the drug companies, the insurance companies, the HMO’s and PPO’s – that such institutions exist *for the purpose of making a profit*. If you ask me, a human being’s health should not be a corporate profit-making venture – rather, it should be the shared responsibility of the community.

Go ahead. Call me a socialist. I’ve been called worse. But here’s a reminder of what rampant, unrestrained *capitalism* has done to American health care:

The profits of the ten largest health insurance companies in this country have risen 428 percent – I’ll say that again – a 428 percent increase in profits – since the year 2000.

There have been more than 400 mergers of health insurers and managed-care organizations in the past dozen years – such that today, four mega-corporations effectively control the entire, massive health industry in America.

In Cincinnati, WellPoint Inc. controls 71 percent of the market.

Nineteen out of every twenty metropolitan areas in this country meet the federal anti-trust definition of “highly concentrated” market control (translation: monopoly).

Meanwhile, since the year 2000, health insurance premiums in the state of Ohio have increased 76 percent.

Hmm... Do you think these things are related?

The sad truth is, this is not a new problem. Shortly after the last failed attempt to revamp our ailing health care system, a federal whistle-blower told a very chilling story to Congress. In testimony in 1996, Dr. Linda Pino, a former medical reviewer for Humana, said the following to a congressional panel:

“I am here ... today to make a public confession. In the spring of 1987, as a physician, I denied a man, a necessary operation that would have saved his life – and thus, I caused his death. No person, and no group, has held me accountable for this – because in fact, what I did was save the company half a million dollars.

“Furthermore, this particular act secured my reputation as a good medical director, and insured my continued advancement in the health care field. I went from making a few hundred dollars a week, as a medical reviewer, to an escalating six-figure income as a ‘physician executive.’

“In all my work, I had one primary duty ... to use my medical expertise, for the financial benefit of the organization for which I worked... [And] I am haunted by the thousands of pieces of paper on which I have written that deadly word: ‘denied’.”

And so again, I ask the simple question: Why? Why would *anyone* be denied a drug, or a medical procedure, that would make them well? Why would anyone be denied an operation that would save their life? Why?

It was a question Tommy Douglas asked, in Canada, three generations ago – and for asking, he was chosen “The Greatest Canadian of All Time.”

But I don't have to look to Canada, or to a list of statistics, or to Congressional confessions to be motivated to speak out for universal health care. I need look no further than my own family.

Last winter, the fiancée of Jennifer's father fell and injured her shoulder. After six months of X-rays and MRI's and orthopedic visits and chiropractic visits and doctor visits, she was at last scheduled for surgery in July. She was at the hospital undergoing pre-operative procedures, when a call came in that coverage for the surgery was being denied. Because she had injured the same shoulder several years earlier – an injury that two different doctors said was fully healed – the review board denied the surgery, on the grounds of pre-existing condition.

This past Thursday, after more than a month of ongoing bureaucratic hassle, she finally had her surgery.

Hers is not an uncommon story. In fact, I'm sure many people in this sanctuary know someone who has had a similar experience. What is important is that we tell these stories, and tell them as many times as is necessary, to as many people as possible, until something *changes* in this country. Until minds change, and hearts open.

As for me, I have just one more story to tell this morning. This one may be a little hard for me to get through...

Two years ago, my son had surgery to correct a rather rare, and progressively debilitating, condition. I can remember when he was six years old, and used to run up and down the soccer field with a huge smile on his face. I can also remember when he was 11 years old, right before the surgery, when he would have gotten out of breath just running from here to the Great Hall.

By the time he was my age, the doctors told us, he would have probably had difficulty getting up and down stairs – and it would have gotten worse from there.

If we had not had insurance – and *good* insurance – through Jennifer's employer, we could not have afforded the very expensive, highly specialized surgery that has completely changed our son's quality of life, for a lifetime.

What would we have done? I'm sure that we would have done whatever was necessary – gone into debt, to pay for the surgery out of pocket. We both have good jobs, and have sufficient means and assets that we could have done that. But I think of *other* children, of *other* families, who do not have those means, and who do not have medical insurance – and my heart simply breaks to think of them watching their children growing into adulthood living with this condition, because they could not afford, to get it fixed.

Who should decide which child gets the surgery he or she needs? A for-profit insurance company? The marketplace? As long as that's who decides, there will be no justice in this land.

But if we decide – we the people – if we decide that *every* child who needs surgery, every grandmother who needs medication – every man, woman, and child in this country who needs medical attention, will get it – then, and only then, will justice roll down like waters.

Then, and only then, will we know what it means to be a truly *great* nation.

“Why?” I’d rather leave you to ponder a different question...

“*Why not?*”