

## **“He Who Has Two Coats”**

**a reflection  
by Rev. Bill Gupton**

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There is a passage, near the beginning of one of the biblical gospels, in which a crowd of people is gathered, seeking pearls of wisdom from a local, charismatic prophet. The group is composed of the usual assortment of soldiers and seekers, tax collectors and widows – and they have the following exchange with John the Baptist:

And the multitudes asked him, “What shall we do?”

And he answered them, “He who has two coats, let him share with him who has none. He who has food, let him do likewise.”

Those are two of my favorite sentences in the Bible. There – in two brief lines, in the third chapter of the Book of Luke – is the summation of all the ethics my parents ever sought to teach me – the vision of a compassionate and just society which, at least when I was growing up, was still the articulated goal and dream of this nation.

“He who has two coats, let him share with him who has none. He who has food, let him do likewise.”

Today, I want to talk about that vision – those ethics – and how we, as a culture, have failed to live up to them.

As I say, there was a time – in my own lifetime – when the leaders of this great land spoke of such things. Remember Lyndon Johnson’s “Great Society”? It was both a goal – and a set of specific social programs designed to eliminate poverty, improve health care, and address racism and oppression in America. Remember Martin Luther King Jr.’s “dream”? It inspired a generation.

Yes, there was a time when it was expected that we, as a people, would *work together* for a society in which everyone who was cold would have a coat, in which everyone who was hungry, would have food.

Somewhere along the way, we have lost that vision. Somewhere along the way, we have allowed ourselves to become distracted – by the pursuit of personal and corporate gain, by electronic hedonism, by DVD's and SUV's. Somewhere along the way, we have allowed ourselves to become afraid – wars, assassinations, terrorist attacks, school shootings. We have let these things drive us even further back into our shells, even further behind the walls of separation that perpetuate the kind of “I've got my slice of the pie, so I'd better protect it” mentality, which today grips our culture, everywhere we look.

Maybe it's because I was raised in the Sixties, but I believe that the purpose of a society – any human society – is to take care of its members. All of its members. Not just to *protect* them, in a military or right-to-bear-arms way – which seems to be all that this century's leaders care to focus on – but rather to *share* the wealth, to care for those who cannot care for themselves, to assure a common safety net that affirms the inherent worth and dignity of each person, that insures *everyone* the right to life, liberty and the pursuit of happiness.

Yet we all know that the reality is this: the economic divide in this country grows wider with each passing day. The net worth of the poorest 50 percent of families in America has actually declined, even adjusted for inflation, by six percent in the past six years; meanwhile, corporate America's profits have doubled (that's an increase of *100* percent!) in the same time frame.

In a survey conducted by Pew Research, almost half – 44 percent – of Americans said they (quote) “don't have enough money to make ends meet.”

And more and more people are starting to realize that one of the main culprits in our economic squeeze is the soaring, personal cost of health care. Nowhere in our economy, nowhere in our society, is our failure to take care of one another more evident than when it comes to medical care. Thus, I would argue, nowhere is our moral imperative to make drastic changes more clear, than in what even the popular media has come to call the “health care crisis.”

Nearly 50 million of us – almost one in every five American citizens – has no health insurance. That's an increase of almost 10 million, or 20 percent, from the figure that was being widely quoted just a few years ago, during the 2004 presidential campaign. You may recall that those sobering statistics about health care had little impact on the way most people voted; in fact, they barely made a blip on the issue-meter at the time. But something tells me 2008 will be different; something tells me we've reached a tipping point. Perhaps it is no coincidence that the same figure – about 10 million –

of what one analyst calls “solidly middle-class Americans” are now among those *without health insurance*.

So let’s just get it out on the table right now. When I step into the voting booth next year, one of the top issues on my list – if not *the* top issue – will be the creation of a national, universal health care system. Ever since, as I say, I was raised to believe that the best measure of a society is how it takes care of its sick, its poor, its weak – I have wondered, as have many people around the world, at the fact that a nation so strong and wealthy as ours, can somehow fail to guarantee its citizens medical care.

And though I am fully aware that addressing this grave injustice will amount to a sweeping change to the way we structure our society, and our economy – and thus, cannot, in the end, occur outside the political realm – I just as strongly believe that these changes will never occur until we have a change of *heart*. For I believe universal health care is not so much a political issue, as it is a moral and ethical issue. We will not see the Great Society, we will not *become* a great society, until there is a profound shift in not only our political, but our cultural, will. Until we come to believe – truly *believe* in our hearts – that each person who is cold should have a coat; that each person who is hungry should have food; that each person who is sick should have the best medical care we can provide – until we believe these things, nothing will change.

I have a friend – a middle-class, single mother of two – who works only part-time. She tells me that’s the only way she can guarantee her children health care. Medicaid provides them with basic health coverage, she says, but if she were to earn just a thousand dollars more in any given year, they would become ineligible for that benefit. If she were to earn \$1,000 more a year, she would have to buy her own health insurance, to the tune of literally *thousands* of dollars a year – and so, it would actually cost her more money, to work more hours.

There has got to be a better way.

I have another friend who, though concerned about symptoms of a potentially serious, yet incurable, disease, won’t talk to the doctor about it, for fear of a diagnosis that would make getting health insurance in the future even more expensive, if not downright impossible.

There has got to be a better way.

Last week on the radio, I heard the story of an Iraq War veteran who had to have part of his skull removed following a mortar attack. As you might imagine, his condition has caused him to need frequent medical attention – yet, due to a bureaucratic decision in which the military declared

him to be just 10 percent “disabled” – he recently had to pay \$10,000 out of his own pocket for a hospital stay.

There has got to be a better way.

Almost every day brings a similar story. A recent article in the paper told of a self-employed consultant, here in Cincinnati, who spends \$75 a week, out of pocket, for medication, and who recently received in the mail a bill for thousands of dollars in hospital costs. Needless to say, he does not have health insurance.

“We’ve got the best doctors, we’ve got the best hospitals, and nobody can afford it,” he told the reporter. “What kind of sense does that make?”

It makes no sense! And don’t tell me that we can’t pay for it. We are the richest nation in the history of the planet, with more resources at our disposal than any society has ever had. We could give every person in America *two* coats, if we chose.

No, we don’t lack the ability to address this issue – what we lack, or at least what we have lacked to this point, the collective will to do so.

If we can put a man on the moon, if we can put a hundred billion dollars toward the “Star Wars” missile defense research – which is how much we’ve spent in the past two decades on that red herring of an idea – if we can spend what we have spent in the last four years invading and occupying Iraq – then we could just as easily choose to use our money, and our power, and our resources, to take care of our fellow citizens, our human brothers and sisters, when they are sick. It is simply a matter of priority.

Are we so scared of being attacked – and do we cling so desperately to the illusion that we can, somehow, *insure* that we will never be attacked – that we’re willing to fail to insure, what we can insure – *one another*? This nation is perfectly capable of providing adequate health care, and a decent standard of living, for each and every person.

And so my question: Why don’t we?

Do we really believe – as a country, as a culture – in the kind of Social Darwinism that rationalizes away the unconscionable condition in which some among us live, as the natural order of things? Survival of the fittest? Or do we have a higher standard – do we really have values, *family values* – which compel us to share our coat, to share our food, to share our best and brightest energies with one another, so that all may be taken care of?

Imagine what the life of my friend would be like if she could work full-time, contribute in a more meaningful way to our society, and know that, if her children fell ill, they would receive appropriate medical care. Imagine what the life of that veteran of the war in Iraq could be like, if – in

return for his service to his country (heck, if simply as a result of being a *citizen* of his country) he could seek the medical attention he needs, when he needs it – without fear of losing his savings, his home, everything he owns.

But still, many will say, we cannot afford it. Others will want to turn the clock back to a time when we depended on businesses and employers to pay for health insurance. When I was young, my parents – and thus, I – benefited from a system in which those who were able to work, had their health needs paid for through the workplace. Those who didn't work, at least theoretically, fell under the protection of Medicare and Medicaid.

Today, however, 40 percent of all employers provide no health coverage options whatsoever – and of the businesses that still do, more and more of the cost of that coverage is being passed right back to the worker; less and less is being provided by the employer.

Yet I know, from personal experience, that in today's economic climate, finding an employer who can offer at least some kind of group insurance coverage, however limited or expensive, can be *the* deciding factor in making a job choice. Is this really what we want driving the labor market in America?

There has got to be a better way.

And so we continue our slow shift from workplace-oriented health coverage to state-supported medical insurance. The Commonwealth of Massachusetts (note that word, “Commonwealth” – it is more than just a nostalgic throwback to the early days of this nation; it connotes the deeply held values of a people who believed that to share their wealth, for the common good, was the highest form of ethical living) – the Commonwealth of Massachusetts, with bipartisan support, has enacted legislation, taking effect July 1, that requires health insurance for all its citizens.

I applaud this one, small step toward universal health care in America, yet I cannot help but be concerned that – much as has happened with embryonic stem cell research, where the federal government has passed the buck (literally, passed the *buck!*) back to the states – if we end up going down the road of individual, state-sponsored health care, I fear we will end up with a hodgepodge of widely differing state programs that will leave some Americans with better medical care and better service – and some with worse.

The Universalist in me recoils at any solution to our health care crisis that does not address the basic, moral imperative to take care of all our citizens, equally well.

You may say I'm a dreamer, but I'm not the only one. Suddenly these days, “national, universal health care” is a phrase that rolls easily off

politicians' silvery tongues. It wasn't too long ago that to say such words was political suicide – but now, with nearly 10 million middle class Americans among the 50 million who have been “left behind” by our current health care system – there is momentum for change. There is a demand for change.

We *can* find a better way.

I am not a politician, nor am I an economist. I am not a bureaucrat, nor a part of the health care industry. Such experts will be called upon to find that better way – and I am confident that they can do so.

What we are called upon to do – we who compose the too-often silent majority – we whose lives, and whose loved ones' lives, are affected, every day, by the inequities of the health care system in this country – what we are called to do is create a mandate for change – by finding within ourselves the collective will to shift our priorities, away from militarism and materialism, and toward community and compassion.

It is my prayer this morning, that we will search our hearts, and find it within ourselves – as individuals, and as a society – to make that shift.

He who has two coats, let him share with him who has none.

May it be so.

Amen.