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Westminster Presbyterian Church



Sermons

The Great Physician and the Health Care Debate

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Matthew 9:18-37

Jesus healed the sick. There's no doubt about that! In our scripture passage this morning Matthew relates five different times that Jesus heals someone. The portrait of Jesus as healer is central to the Gospels. Matthew records a total of 19 incidents where Jesus heals someone in his Gospel; Mark 18; Luke 20 and John 5. Jesus healed the blind, the deaf, the mentally insane and a woman who suffered from severe bleeding for 12 years.

Obviously, in these passages, scripture does not use the language of our present health care debate. The narratives of the New Testament are mercifully free of the jargon we are all tired of hearing: universal, comprehensive, public option, and the like. However, if we look we can see some of those words played out in the Gospel narratives.

A story in the Gospel of John provides a parable for a health care system that gives access to all: *Now in Jerusalem by the Sheep Gate there is a pool, called in Hebrew Bethzatha, which has five porticos. In these lay many invalids—blind, lame, and paralyzed. One man was there who had been ill for thirty-eight years. When Jesus saw him lying and knew that he had been there a long time, he said to him, "Do you want to be made well?" The sick man answered him, "Sir, I have no one to put me into the pool when the water is stirred up; and while I am making my way, someone else steps ahead of me. Jesus said to him, "Stand up, take your mat and walk." At once the man was made well and he took up his mat and began to walk. (John 5)*

Through many such stories, the Gospels emphasize the outreach and the scope of Jesus' ministry as a healer. He heals the outsiders; he cleanses lepers; he breaks the hold of demonic and destructive powers that assault the afflicted, and he restores still others to bodily integrity as he empowers them to see, hear, and walk.

Several places in the Gospels Jesus heals the demon possessed. This, to me, seems particularly relevant, because today in America it seems that in our current debate, people want to demonize their opponents and dismiss them or destroy them. Many conservative folks on the right wing want to label those on the left evil or demonic, and many on the left try to do the same thing to those folks on the right. By labeling their opponents evil or demonic, they seek to devalue the humanity of their opponents, fuel their own anger and justify their own hate.

Jesus, on the other hand, actually had compassion for those who were generally considered to be "demon possessed." He did not seek to humiliate them or dismiss them or lampoon them. What a lesson for us as we try to relate to those with whom we disagree.

Ellie Weisel, the Nobel Peace Prize winner and Holocaust survivor, once wrote, "Even if I meet the devil himself on the street, I will treat him as a gentleman; I will speak politely to him; I will try to divine his evil." Now, Weisel is not a pacifist; he is not a naïve person; he is certainly aware of the power and the destruction that demonic forces can do, but he also recognizes the importance of treating every human with dignity.

Besides civility, the other thing that has been largely absent from our health care debate is the moral aspect of the issue. Interestingly, here is one thing that Christian leaders of all persuasions, whether mainline Protestant, conservative evangelical or Roman Catholic, agree on—the need for universal accessibility.

The primary issue for any health care system is a moral question: should a rich society provide health care to everyone who needs it? If a nation answers yes to that moral question, it will build a health care system like the ones in Britain, Germany, Canada, France, and Japan, where everybody is covered. If a nation doesn't decide to provide universal coverage, then you're likely to end up with a system where some people get the finest medical care on earth in the finest hospitals, and tens of thousands of others are left to die for lack of care. Without the moral commitment, in other words, you end up with a system like America's.

Around the world, cultural influences govern much of the nitty-gritty of daily medical practice. British women tend to have their babies at home; American women tend to deliver in the hospital, but go home a day or two after the birth; Japanese women remain in the hospital with the baby an average of 10 days after delivery. In Britain, Spain, and Italy, the basic rule of medicine is that people never get a doctor's bill; health care is funded through general taxation. But, just across the border, in France, patients are expected to make a cash payment for any encounter with the health care system, even though the insurance plan will reimburse most of that co-pay within a week or so. The French have decided that people should be reminded on every visit that health care costs money—even if it's the insurance company's money.

In Germany and Austria, health insurance pays for a week at a spa, if a doctor prescribes it to deal with stress. I want to ask my health care insurance provider if they would do that for me, but haven't gotten the nerve up yet.

The most basic question facing any country's health care system: who is covered?

On this fundamental issue, the United States is the odd man out among the world's advanced, free-market democracies. All the other industrialized democracies guarantee health care for everybody— young or old, sick or well, rich or poor, native or immigrant. The U.S.A., the world's richest and most powerful nation, is the only advanced country that has never made a commitment to provide medical care to everyone who needs it.

Our lack of universal coverage has consequences. According to government and private studies, about 22,000 of our fellow Americans die each year of treatable diseases because they lack insurance and can't afford a doctor. This generally happens to people with a chronic illness who have too much money to qualify for Medicaid, but too little to pay for the drugs and treatment they need to stay alive. Among the rich nations, this happens only in America. Likewise, the U.S. is the only developed country where medical bankruptcies can happen.

This moral health commitment is so basic in the other industrialized democracies that virtually all of them have included some version of a "right to medical care" in their national constitution. All European countries, except Russia, have signed on to the European Union's Charter of Fundamental Rights, which serves as a sort of continent-wide Bill of Rights, enforceable by the courts. "Everyone has the right of access to preventive health care and the right to benefit from medical treatment," the charter says.

The new democracies that have emerged in the two decades since the fall of the Soviet Union generally include a "right to health care" in their constitutions. The Czech Constitution, written in 1992, is typical. "The state is obliged to guarantee the right to life and the right to protection of health, and health care for all," the document declares.

In the U.S., in contrast, neither the federal Constitution, nor any state, guarantees "health care for all." Some Americans have gone to court claiming a right to care. The legal theory is that our Declaration of Independence says we all have "inalienable rights," including a right to life, and you can't have life without medical care to keep you alive. No U.S. court has ever bought this argument.

The facts are daunting: in this country there is a baby born every 51 seconds to a family with no health insurance. In this, the wealthiest nation in the world, our infant mortality rate is second highest in the industrialized world. Forty-seven million Americans are uninsured (50 percent employed; 25 percent children; 20 percent out of the labor force as students or disabled; 5 percent unemployed). The U.S. spends nearly twice as much per capita than any other country on health care, but we rank poorly in the 37 categories of health status measured by the World Health Organization.

We are warned by the prophets not to heed the wounds of God's people lightly; yet in 2006 the aggregate profits of the health insurance companies in the United States were \$68 billion. During that same year more than 15,000 families were forced into bankruptcy because of medical expenses.

For over 60 years, Presbyterian Church (U.S.A.) General Assemblies have been calling for reform of the U.S. health care system, urging the establishment of a national medical plan that will ensure health coverage for all persons residing in the United States. Back in 1976 the GA said, "Because the right to acquire adequate health care springs out of our worth as living human beings, rather than out of any particular merit or achievement belonging to some, but not to others, adequate health care should be defined equally for all people."

Listen, none of this is easy—major change never is. As I struggle with the health care debate, I find myself drawn to a few core conclusions:

I am to pray and act for the well-being of all others. Among other things, this suggests I am not to seek to protect only myself or those like me, but instead to be willing to run some risk and make some sacrifices for the sake of other women and men. To put it another way, I am my brother's and sister's keeper, and if I understand Jesus rightly, all persons are my brothers and sisters. When I translate that sentiment into policy, I become more comfortable with the idea that some challenges require the wisdom and resources of the entire nation. While I may not yet discern the particulars, I accept that any solution must work for all of us.

I am to seek and speak the truth. We Americans have become far too tolerant of lies told to advance an agenda. I'm afraid we've also become far too willing to accept and use lies ourselves, especially if we think a lie will help us "win." I cannot imagine Jesus condoning the use of a lie for any purpose. Can you? If Christians are to play their proper role in the current debate, we must once again become people who seek and speak truth.

I must lay aside all hatred. A while ago, a Christian woman said to me, "I don't want any of my money going to help those people." Whoever "those people" might have been to her, she despised them. Take a little self-test. Use her phrase ("I don't want any of my money going to help those people") and try inserting a specific term in place of "those." Try inserting terms like "poor," "black," "Hispanic," "unemployed," "liberal," "conservative," "pregnant out of wedlock" "Muslim" "undocumented aliens" and the like. Keep doing so until you find a term that makes your blood boil. That's when you will have identified the group of people Jesus calls you to stop hating. Jesus forbids his followers to hate or to allow hatred to govern their lives in the world.

Jesus healed all kinds of sickness as a sign of God's rule. Isaiah speaks God's word when he sees a future where, "No more shall there be...an infant that lives but a few days, or an old person who does not live out a lifetime" (Isa. 65:20a).

Let us pray...

"We know deep down in our hearts that without Thy guidance we can do nothing, but with Thee we can do all things. Let us not be frightened by the problems that confront us, but rather give Thee thanks that Thou hast matched us with this hour. May we resolve, God helping us, to be part of the answer, and not part of the problem; for Jesus' sake. Amen." (Prayer by Peter Marshall, 1947, Chaplain of the Senate.)

This sermon drew from the following resources:

- *Cost and Choice the Ethics of Rationing Health Care* by Ron Hamel
- *No Country for Sick Men* by T. R. Reid
- Presbyterian Church (U.S.A.) *Call for Just Health Care Reform* by Bruce Reyes-chow, Moderator of the 218th General Assembly
- *The Miracle Stories of the Gospels* by Alan Richardson
- *Health Care Debate? It's More About Shouting Slogans* by Mike Smith
- *Keeping Covenant and Health Care Reform* by William F. May