A Catholic Case for Public Health

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10 October 2014

Learning Objectives

• Understand the difference between ethical demands of public health practice and clinical medicine

• Consider the gaps in current Catholic health care ethics as they relate to public health practice

• Appreciate the potential for a Catholic contribution to public health ethics
Christian Imagination & Catholic Health Care’s Foundation

“A man was going down from Jerusalem to Jericho, and fell into the hands of robbers who stripped him, beat him, and went away, leaving him half dead. ... Jesus said to him, “Go and do likewise.”

-Luke 10:30-37

Why Medicine Captures the Public Imagination

**Medicine**
- Disease diagnosis and treatment
- Individual level
- Effects are more immediate and visible
- Increasingly dependent upon technology
- Requires highly-trained clinicians
- Focus on tertiary prevention

**Public Health**
- Health promotion and disease prevention
- Population level
- Long-term thinking and effects are an absence
- Behavioral, environmental, policy
- Professionals have less training
- Focus on primary prevention
Moral Reflection on Health Care

• Scripture
  • 18 unique healing stories in the Gospels

• Tradition
  • History of Christian involvement
  • Magisterial teaching on importance of health care as ‘love of neighbor’

• Human Experience

• Rational Reflection
  • Experience of World War II and subsequent norms of medical practice and biomedical research
  • Autonomy emerges as triumphant principle

Key Issue:
Less Moral Reflection on Public Health

• Scripture
  • Prevention not a hallmark of preaching, teaching, healing

• Tradition
  • “Prevention” mentioned in Charter for Health Care Workers
  • Social structures in moral reflection is relatively recent

• Human Experience
  • Professional field of public health is relatively new and public health ethics is even more nascent
  • The experience of the Church in public health is less explicit

• Rational Reflection
Solution, regarding Scripture:
Does public health have Gospel roots?

- “Disease has a preferential option for the poor”
  - Public health also has a built-in preferential option for the poor

- Works of mercy is just one source of moral reflection on social determinants of health
  - Hunger, Shelter, Material Resources, Social Connectedness

- Triumph of autonomy was never particularly Catholic
  - We can acknowledge the centrality of human dignity without falling into this trap

Solution, regarding Tradition:
Many sources are largely unexplored
Some Leading Causes of Morbidity and Mortality (U.S.)

- Ischemic heart disease
- Lung, tracheal, bronchial cancer
- Road traffic injuries
- HIV/AIDS
- Alcohol use
- Diabetes
- Chronic obstructive pulmonary disease
- Cerebrovascular disease
- Unipolar major depression

Some Leading Causes of Morbidity and Mortality (Global)

- Ischemic heart disease
- Cerebrovascular disease
- Lower respiratory infections
- Diarrhea
- Road traffic injuries
- HIV/AIDS
- Malaria
- Prematurity
- Unipolar major depression

Clarifications & Conclusion

- What I don’t mean:
  - This is not achieved by simply moving medical care out of hospitals and into the community
  - The problem is also not solved by substituting an emphasis on justice for the emphasis on autonomy

- Historically, public health emerged from government action, but Catholic hospitals are in a position to provide collective, population-level action
  - How might Catholic health care entering an arena of public health interact with existing social service agencies? Sharing expertise without duplicating efforts?
Revisit the Learning Objectives

• Understand the ethical demands of public health practice and how they differ from clinical medicine

• Consider the gaps in current Catholic health care ethics as they relate to public health practice

• Appreciate the potential for a Catholic contribution to public health ethics

Thank You

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Questions for Discussion (if needed)

• What does success in Catholic health (health care) look like?

• Am I misrepresenting the need for public health ethics as distinct from medical ethics?

• What are the most promising sources of reflection for a Catholic contribution to public health ethics?