Health care

Continued from page 1

"In that sense, the bishops have marked out a unique position in the public debate," King stated.

King pointed out that many universal health-care advocates in Congress can be found in the pro-choice camp. At the same time, a number of congressional pro-life proponents are unwilling to push for a health plan promising universal coverage, especially at the expense of any constituencies that see themselves as losers under a national health plan, she remarked.

"This is a \$1 trillion sector of the economy," King said. "Those with interests in it don't want it changed to disrupt them."

Among those concerned with such disruption are Rochester-area health providers, insurers and businesses. Last weekend, U.S. Sen. Daniel Patrick Moynihan, D-N.Y., and U.S. Rep. Louise Slaughter, Dem.-28th District, reportedly announced that Rochester would seek exemption from a national healthcare plan due to the area's strong history of cooperation between various sectors on health insurance.

The Catholic Courier contacted the offices of Slaughter and U.S. Rep Amory Houghton Jr., Rep./Cons.-31st District, for comments regarding health-care reform and the church's position on such matters. Both representatives' districts cover portions of the diocese, but neither office responded to the paper's queries.

Republican Bill Paxon, whose 27th Congressional District includes the counties of Monroe, Wayne, Ontario and Livingston, sent the following statement on his health reform position by facsimile to the Courier.

"I support federal legislation employing major elements of the non-governmental Rochester health-care system to expand access nationally," the statement said. "And, I vigorously oppose bureaucratic reforms that will destroy all we have achieved in the Rochester area."

Paxon's statement added that: "As a Roman Catholic, I will oppose any health reform which would force all Americans to pay for abortions ..., a position supported by three-quarters of Americans in most surveys.

Yet another factor working against the church's position on health-care reform is the "us vs. them" mentality that divides different constituencies across the nation, King said.

"In general, this culture does not share the Catholic social justice concept of solidarity," King continued. "It's easier to pay attention to the partisan special interest groups who say 'do nothing."

Given such realities, both King and LaFalce acknowledged that under any politically feasible plan, expanded health coverage will be gradually phased into U.S. society at a slower pace than reformers first wished. They added that it is unlikely universal coverage will be in place by 1998, the year at which President Bill Clinton and the U.S. bishops were aiming.

Still, King argued that the public is on the USCC's side, and pointed to polls indicating that most citizens want universal coverage - without abortion.

Indeed, Catholic News Service reported that a national survey released July 13 by the U.S. bishops showed that 70 percent of Americans support universal coverage.

FROM PAGE

At the same time, however, the inclusion of abortion coverage in all major plans currently under consideration in Congress erodes overall support for any reforms, the poll said.

The survey was conducted late last month for the U.S. bishops by The Tarrance Group, a Texas-based national survey research firm. Only 26 percent of respondents were Catholics.

Catholic News Service also reported that a National Quorum poll conducted earlier in June by the Wirthlin Group showed 66 percent of people surveyed would be unlikely to vote again for members of Congress who supported a law requiring that tax money be used to include abortion in a national health plan-

Both King and LaFalce agree that universal coverage is under fire in Congress, and that including abortion in any benefits package can only make the situation worse for health-care reform advocates.

"It makes no sense at all to add to the obstacles the difficulty of getting a consensus on so controversial and difficult an issue," King said.

LaFalce and King predict that if any final bill has a chance of passing, the plan must allow citizens to choose insurance carriers who do not include abortion in their benefits package, and assure the right of Catholic institutions to refuse to perform procedures contrary to the church's teachings.

As for some of other positions taken by the USCC and the diocese on healthcare reform, some clearly have no chance whatsoever in Congress, according to LaFalce and King.

For example, the church's stance on health-care reform expresses concern that care be given to a series of "uns" - the unborn, the unserved, the uninsured and the undocumented.

But what should describe the last group in that series is another "un" word – unpopular.

The USCC and the diocese have both called for national health care to extend to undocumented residents, but such measures seem to have zero chance of gaining support.

"It's not doable politically," LaFalce stated.

King agrees.

"The bishops' conference has been advocating this since the beginning," King said of health care for illegal aliens. "They have been fairly isolated in their advocacy. As many of the church's positions are countercultural, this one is tóo."

She recalled that only one bill out of the U.S. Senate contained insurance coverage for undocumented workers - and none for their families. The nation has become hostile toward illegal aliens, she said, and their welfare concerns few citizens.

"There's a climate of antagonism toward legal immigrants," she added.

Nonetheless, the church hopes to see federal funds continue to flow to programs that benefit illegal aliens, among them community migrant worker healthcare centers, she said.

The USCC figures to have more luck advocating on behalf of rural citizens' health care, King explained. For example, she noted that the USCC is pushing for the development of a computer communications network linking rural health centers to central facilities under a national health plan.

The USCC also hopes Congress will expand funding of efforts aimed at luring health-care workers born in rural communities back to the areas in which they were raised and that currently lack adequate health care, she said

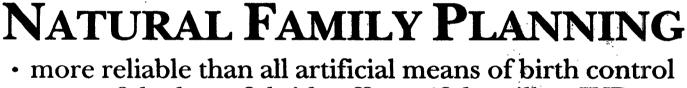
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Correction

Due to erroneous information provided to staff writer Mike Latona, last week's front-page story on female altar servers mistakenly reported that St. Margaret Mary Parish in Irondequoit did not use female altar servers.

According to Charles Prindle, director of religious education, altar girls have served at St. Margaret Mary's Masses for approximately the last 10 years.

We regret any inconvenience this misinformation may have caused.



- none of the harmful side effects of the pill or IUD
- helps women become pregnant
 low divorce rate among couples who use it: under 5%. The national average is 40%
- Is not rhythm

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