

Utilitarian norms pose threat to society's aged

By John Thavis
Catholic News Service

VATICAN CITY — The tendency to measure the elderly's value in utilitarian terms exposes them to a growing threat of euthanasia, a document from a Vatican-sponsored meeting declared.

The document encouraged governments, legislators and church groups to better protect the rights of society's aged and, when necessary, to seek "just and creative" ways of caring for them.

The statement arose from a meeting in Toronto last December on the Rights of Aged People and the Family, sponsored by the Pontifical Council for the Family. It was published by the Vatican newspaper, L'Osservatore Romano, on March 4.

While some cultures continue to give special respect to the elderly and consider them a treasure for younger generations, others have adopted a "false and inhumane utilitarian attitude which measures a person by

what he or she can produce," the statement said.

The elderly should neither be exploited as a means of production nor regarded as economically "useless," it said. When treated as "a burden and obstacle, aged persons are placed at great risk," it said.

"This negative mentality concerning the elderly is the fertile soil in which the 'eugenic' temptation for euthanasia grows — and euthanasia is the result of contempt for the integrity of the gift of human life," it said.

It said that above all, those entrusted with the care of elderly must be "living witnesses to the innate value of their existence" and must protect all their rights.

The statement recognized that, particularly in the large cities of wealthy societies, the family no longer seems to make a place for the elderly. In other situations, it is the elderly person who wants to be independent and live in a house or institution.

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Proposed cuts jeopardize programs

By Carol Zimmermann
Catholic News Service

WASHINGTON — Just hours before Congress approved a budget plan that will trim Medicare and Medicaid, 76-year-old Edna Faris said she wasn't sure what the proposed cuts would do to her.

And Catholic leaders are asking the same questions on behalf of other elderly and poor people across the country.

"I honestly don't know," said Faris at a June 29 hearing on Capitol Hill. The Alexandria, Va., woman relies on Medicaid to pay the nursing home costs for her husband, who has Alzheimer's disease.

"Although we have been hard-working citizens, we have no choice but to rely upon Medicaid," she said. "We are unfortunate. My husband has the wrong disease. If he required lots of doctors and surgery, Medicare and insurance would cover most of his bills, but because Alzheimer's requires long-term care, we have no choice but to look to Medicaid for help."

Such help might become harder to find for Faris and many other elderly, poor and disabled people as Congress plans to cut federal health care programs by \$452 billion over the next seven years.

The plan, approved by Congress June 29, is an attempt to balance the country's trillion-dollar budget while also providing middle-class Americans with a promised tax cut. Still in the blueprint stage containing suggestions for changes and cuts, the budget plan will go to committees to work out specifics by Oct. 1, the start of the new fiscal year.

Democratic leaders say the proposed cuts in Medicare and Medicaid will benefit the wealthy at the expense of lower-income Americans. Medicare is the federal health insurance program for the disabled and people 65 and over, and Medicaid is the federal-state program that helps pay for health care for low-income families with children and for the needy individuals who aged, blind or disabled.

Now "the heavy lifting begins," says Bill Cox, the Washington-based vice president of government services for the Catholic Health Association.

The CHA, a St. Louis-based organization that represents more than 1,200 Catholic health care

facilities and organizations, "intends to be very much involved in the discussion," Cox said.

Although he agrees that Medicare and Medicaid cannot continue to grow at the rate they have, such "mammoth" cuts are, "too large and in too short a period of time." He added that the cuts also will affect private payers and may close hospitals that primarily serve lower-income Americans relying on Medicaid.

As the CHA sees it, Medicare and Medicaid spending should definitely be reduced, but not through sudden, drastic cuts. Instead, it says, the programs should be restructured, to take advantage of managed-care options and other practices used in the private marketplace.

CHA also thinks Congress should reassess the idea of tax breaks and make cuts in all federal programs, including Social Security, which is exempt from cuts, and defense spending, which currently stands to gain \$58 billion in the new budget.

Another danger the CHA sees with the federal health care cuts is the suggestion that states take control of Medicaid programs through block grants.

The governors who are saying "we can live with this," and think they can save money, will instead find themselves in the position of primarily caring for

elderly people who need long-term care, Cox warned.

Sharon Daly, deputy director for social policy of Catholic Charities-USA, also disputes aspects of the budget cuts.

Daly told Catholic News Service that switching Medicaid programs to state-run block grants is a "big danger" because it is likely to cut eligibility requirements for poor families.

"We don't want the states competing to see who can have the worst care for the poor and elderly," she added, saying that is what the program will become if states hope to save money.

Faris puts it even more succinctly. If Medicaid is cut, "my husband could become ineligible," she said, or "the program could severely limit the services he would get."

"I couldn't face worrying every year about whether his care will be paid for," she said. "It sounds like the lottery to me, and I don't have anything more that I can risk."

Although we have been hard-working citizens, we have no choice but to rely upon Medicaid.

Edna Faris, 76

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