

STATEMENT OF FRANCIS CARDINAL GEORGE, O.M.I. ARCHBISHOP OF CHICAGO

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Dwell In My Love
A Pastoral Letter on
Racism
by Francis Cardinal
George, O.M.I.

Testimony Of Francis Cardinal George, O.M.I. Before A Committee Of the American Medical Association

CHICAGO (June 12, 2000)

I am Cardinal Francis George, the Catholic Archbishop of Chicago. I have an interest in Resolution 218 for several reasons: as a religious leader, as head of an archdiocese with a large nonprofit health care system, and as a citizen of this state and nation. From all three perspectives I am deeply troubled by this resolution.

Through Resolution 218, the California Medical Association seeks your support for legislation to require all hospitals receiving federal funds to provide "a full range of reproductive services," including "temporary or permanent birth control." Clearly this includes requirements for contraception, sterilization and abortion with which Catholic hospitals simply cannot comply. Effectively, the American Medical Association is being asked to help abolish Catholic health care in this country.

If there were any doubt about this, one need look no further than the documentation in the AMA briefing book provided by medical groups supporting Resolution 218 – documentation especially from "Catholics for a Free Choice." This is a group with no medical expertise – indeed, a group with no relationship to the Catholic Church, except as adversary to the teaching of the Catholic faith about the gift of human sexuality.

One would have to look back to the 1920's - when the state of Oregon, where I was previously Archbishop, banned Catholic schools - to see a comparable attack on the right of religiously motivated Americans to participate in public life and serve the public good. Reversing Oregon's law required a U.S. Supreme Court decision, *Pierce v. Society of Sisters*. I believe that the legislation proposed by the California Medical Association would, and should, meet a similar fate. In the meantime, I urge the American Medical Association, as strongly as I can, not to join this campaign against religious freedom.

As an active participant in and sponsor of the largest nonprofit healthcare network in this area, I find the quiet little note at the end of this resolution strangely naïve. It says: "No Significant Fiscal Impact." Does anyone really believe that driving the largest not-for-profit health care network in the nation out of business would have no significant fiscal impact? It would have a fiscal impact on for-profit health plans, which could set their own prices with less fear of competition. It would have an enormous adverse impact on some of the poorest people in our nation, who turn to Catholic health facilities to receive help in times of need regardless of their ability to pay.

The sponsors of this resolution say it is needed because "non-secular health systems have become the exclusive healthcare providers in some communities." But we should stop and ask ourselves: WHY are Catholic and other "non-secular" health systems the only providers in some communities? It is because for-profit systems see these communities as unprofitable, as a bad risk. It's because they are unable or unwilling to serve the needs of such communities. If you drive the churches out of health care by making it impossible for them to operate in accord with their ethical and religious mission, who will take care of these people? Will the National Abortion Rights Action League take care of them? Will Catholics for a Free Choice? You and I know they will not. Secularizing all healthcare institutions through state coercion is to transform this country into a totalitarian state.

As a citizen of Illinois and this country, I regret this resolution's disdain for the U.S. legal tradition respecting freedom of conscience. Since 1973, federal law has sought to ensure that no healthcare entity is discriminated against for its refusal to perform or assist in the performance of abortions or sterilizations contrary to its religious beliefs or moral convictions (42 USC 300a-7). Since 1996, federal law has forbidden any federal agency or any state receiving federal funds to discriminate against any healthcare entity, secular or religious, for refusing to perform, provide training in, or refer for abortion (42 USC 238n). And the vast majority of states have similar laws protecting the ethical integrity of healthcare institutions. The laws of my own state of Illinois are especially careful to protect the right of healthcare institutions to make conscientious decisions about medical procedures – specifically including abortion, sterilization and family planning and all counseling and referral related to these – free of government coercion. With your kind permission, I will submit samples of these laws for the record.

Distinguished committee members, I urge you to recommend the unanimous rejection of Resolution 218, so that all of us who wish to support and contribute to the health and well-being of vulnerable members of the human family can do so conscientiously, in our own best medical and ethical judgment, and without the threat of government reprisals. Thank you.

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