

Address of the President of the National Association of Catholic Nurses-U.S.A.
USCCB Convocation of Catholic Leaders: The Joy of the Gospel in America
July 1-4, 2017, Orlando, Florida
Breakout Panel on July 3, 2017, 11-12:30am (B18):
Catholic Health Care: Ministering to the Spiritual and Physical Needs of All People.

I will address conscience protection, challenges in nursing education and then suffering and euthanasia

Conscience protection but not relativism. We have beautiful Church documents that outline what is moral in health care, *Humane Vitae*, *Evangelium Vitae*, the *Declaration on Euthanasia* to name just a few.

Sometimes I worry when we speak in global categories like religious liberty and conscience protection without specifically addressing the Truth, for instance the truth about contraception and the harm this does to marriages, women's bodies and the biological effect it has on the culture as a whole...we miss the opportunity to educate the culture and bring to the culture the light of truth.

If I do what my conscience dictates, but I do not have a well formed conscience based upon the Church's teaching of the objective moral law, my actions become **subjective and relative**.

Nursing Education – Check your conscience at the door.

An assistant professor in a college of nursing became alarmed when she heard undergraduate students mention that their nursing instructors tell them that they must “set aside their conscience if they want to be a nurse.”

As an assistant professor she wanted to study conscience but was not supported. When she studied for her PhD, she was explicitly told by a high ranking nursing professor that if she even mentioned abortion in her doctoral studies, she would never graduate. Some in power do not want certain things studied or published.

Bishop Conley mentioned that Catholic healthcare institutions and Catholic healthcare workers need to live, promote and witness to the faith.

Serving in the military 25 years, I noticed that at many medical appointment we were asked what method of contraception we used --- as though this was expected. Later when I revised a physical exam form, I removed “method of contraception” from the form. I was not going to suggest to women that it was expected that they use contraception. I figured if they were taking hormonal contraception, I would glean this when they listed their medications.

We may be responsible for redefining marriage by our duplicity or silence. Have we been silent on the adverse health consequences of certain medications, treatment or behaviors?

I propose that every Catholic Family Practice and OB/GYN office offer Natural Family Planning classes. Teach women to know their bodies and cycles. Every parish should teach mothers how to teach their young daughters. Having this education as part of the marriage preparation is important too but sometimes at this point 80% of the couples are already contracepting and cohabitating.

Additionally **just like the talking points in apologetics**, we should have key evidence based talking points regarding moral health issues. Each Catholic Nurse and physician should be prepared to educate the public with gentleness and reverence on the Truth.

Conscience and our duplicity in the questions we ask or in our silence.

Euthanasia & Redemptive Suffering

For my third point, I would like to journey to the other end of the spectrum.

As many of you know, physician assisted suicide is now legal in at least six (6) states. Both the American Nurses' and the American Medical Associations' position against Assisted Suicide have been questioned.

In health care, each situation is unique. One of our young nurses working in an ICU found herself pondering, "*When does the soul leave the body?*" She stated, "*We take a lot of heroic measures to save lives and sometimes it is difficult to find the ethical line where perhaps we are bringing people back that we should just let go to be with God...*"

On the other hand, we certainly should not be hastening people's demise with active or passive euthanasia.

In writing my **Theology Masters** Thesis on Redemptive Suffering I was approached by many people who shared about the rapid death of their loved ones following entrance into hospice care. In each story, the relative was given a medication, presumably an opioid, became sedated, could not eat or drinking and died much sooner than expected.

This certainly does not occur with all hospice care but it is occurring. I recently prevented one hospice from stopping a patient's blood pressure, heart and diabetes medications which they said were no longer needed. They encouraged the signing of a POLST (Physicians Orders for Life Sustaining Treatment) and frowned upon the patient's desire to have infections treated and receive food and fluids through a g-tube. It was explained to me that **patients can live a long time** if we feed them. This patient was mentally intact, wanted to live but require 24 hour nursing care. We have to protect the most vulnerable in our society.

Finally suffering can have redemptive value. We can unite our suffering with the suffering of Christ and cooperate with Him in saving souls, in redeeming the world. We as health care professionals are in a key position to re-introduce the concept of redemptive suffering.

In his 2007 encyclical *Save by Hope*, **Pope Benedict XVI** asked if it might be judicious to revive this practice of “Offering it up.”

We ALL have the opportunity and responsibility to transform the culture of healthcare as missionary disciples. May God bless us with wisdom and courage. Thank you.

Diana Ruzicka, RN, MSN, MA, MA, CNS-BC
President, National Association of Catholic Nurses-USA

PRESENTATION ENDS HERE

I would like to thank **Rev. Joseph Lebrano, S.D.S.**, Pastor of St. Joseph Catholic Church in Huntsville for our brief discussion on conscience formation following daily mass which helped form my initial comment. Thank you to **Dr. Carolyn Laabs, PhD, MA, FNP-BC, RN**, NACN-USA Chair, Ethics and Spirituality Committee, **Christina Freeman, BSN, RN**, Facebook Editor and **Dr. Mary Lee Barron, PhD, APRN, NP-BC**, Midwest Regional Director, who contributed materially to this presentation with their comments which were incorporated. Also to **Dr. Marie Hilliard, MA, MS, JCL, PhD, RN**, President-Elect for her review and encouragement. Thank you all for your prayers.

Panel Members:

Bishop James Conley, Diocese of Lincoln – Prayer & Opening Remarks
Dr. Steven White, Catholic Medical Association (CMA) (Lead Panelist/Moderator)
Diana Ruzicka, President National Association of Catholic Nurses-USA
Bradley Hahn, Solidarity HealthShare
David Archer, Faculty, Christian Brothers University, School of Business (retired from St. Francis Healthcare) Memphis, TN
Louis Brown CMF CURO health care sharing ministry
John Brehany, National Catholic Bioethics Center
Dr. Marie-Alberte Boursiquot, MD, FACP, President, CMA
Archbishop Peter Smith, Archdiocese of Portland in Oregon – Closing Remarks & Blessing

Greg Schleppenbach, Secretariat of Pro-Life Activities, USCCB
Tyler Lomnitzer, Convocation of Catholic Leaders Staff Assistant, USCCB

Convocation Overview

USCCB Convocation: From July 1-4, 2017 in Orlando, the United States Conference of Catholic Bishops (USCCB) convened the *Convocation of Catholic Leaders: The Joy of the Gospel in America*. This unprecedented gathering, led by the bishops of the United States brought together between 3,000-4,000 key leaders from dioceses, apostolates, and Catholic organizations from across the United States to assess the challenges and opportunities of our time, particularly in the context of the Church in the United States. The gathering will assemble Catholic leaders for a strategic conversation, under the leadership of the bishops, on forming missionary disciples to animate the Church and to engage the culture.

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USCCB Convocation Goal: Inspired by *Evangelii Gaudium*, this Convocation will form leaders who will be equipped and re-energized to share the Gospel as missionary disciples, while offering fresh insights informed by new research, communications strategies, and successful models. Guided by Pope Francis's apostolic exhortation on the proclamation of the Gospel in today's world, diocesan delegations and leaders of National Catholic organizations will reflect, with their bishops, on topics such as:

- What does social analysis tell us about the “landscape” of the United States today?
- How can we respond?
- How does the call to Missionary Discipleship affect the way we structure Church programming?
- How do we witness to, live out, and celebrate our faith in the public square?
- What is the spirituality of a missionary disciple and what does the communion of saints have to teach us?
- What does it mean for parishes, dioceses, and Catholic organizations to go to the peripheries?
- While conversations like this are already happening on a local level, a national conversation led by the bishops will deepen and widen the conversation for the whole Church, at the service of these local efforts.

Goal: Connect with thousands of Catholics and numerous Church leaders from diverse geographic areas, and ministries for four days of informative plenary presentations, briefings, and workshops that address current topics essential to our various ministries and better prepare us to meet present and future challenges.

Breakout Panel: "Catholic Health Care: Ministering to the Spiritual and Physical Needs of All People." July 3, 2017, 11-12:30am (B18).

“Catholic health care offers a distinct ministry, following the example of Christ, the Great Physician. This session will discuss the unique role of Catholic health care, which cares for the physical as well as the spiritual needs of all people.” These sessions will bring the attendees into a deeper understanding of Pope Francis' *Evangelii Gaudium* and the call to form missionary disciples.

Excerpt from Bishop Conley's introduction, “Catholic healthcare institutions and Catholic healthcare workers need to live, promote and witness to the faith.”

NACN-U.S.A. President's Topics:

- 1) Conscience Protection & Nursing Education
- 2) Euthanasia & Redemptive Suffering

Overall Panel Goal: Participants will understand the opportunities and responsibilities we all have to transform the culture of healthcare and will go forth from the session as missionary disciples bringing the Truth, that is Jesus Christ, to their practice.

High Priority Objective: Our role as health care professionals to listen to the Holy Spirit and guided by the Holy Spirit to bring Jesus Christ to the world in each interaction.