

REPORT FROM THE CAPITAL

BAPTIST JOINT COMMITTEE ON PUBLIC AFFAIRS



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HOSPITAL RELATIONS ANALYZED

When is a "hospital" a "community hospital"? Can a "denominational hospital" be a "community hospital" at the same time?

These questions have come sharply into focus in the Skokie Valley, just outside of Chicago, Illinois. In an area reported to contain a population which is 45% Protestant, 32% Jewish, and 23% Roman Catholic, the people are being approached in behalf of three hospital projects, two of which are seeking to be the hospital for Federal District C-36 and thereby to be permitted to draw Hill-Burton funds for one-third of the cost of the project.

The Old Orchard Association was planning a Community Hospital when the Roman Catholic administration proposed to relocate their St. Joseph's Hospital into the area. Meanwhile a Lutheran General Hospital, while located outside of District C-36, was near enough to serve the area and was also seeking the people's contributions for an expanded institution.

The clergy of the area were mindful of the conflicting special interests, but they were also mindful of the importance of adequate spiritual care together with the proper physical care. "In recent years," they said, "religious faith has come to be recognized as a decisive factor in the health of people. Many competent medical authorities say that at least 40% of all illnesses are caused by other than organic causes.

Others say that as much as 85% of all illnesses are emotional or spiritual in nature. Furthermore, it is agreed that religious faith, which can be encouraged by sound religious practice on the part of clergymen and doctors working as a team, has very much to contribute to the health of patients who are served by hospitals."

If a hospital is owned and operated by a denomination one might well hold it to be part of the denomination's program and as such not a community institution. However, many communities, like Skokie Valley, need only one hospital, being so fortunate in health as to be unable to provide patronage for an assortment of hospitals. If that one hospital is a "denominational" institution, it may be difficult to give equally adequate spiritual care to people from all religious groups. If such a hospital undertakes to serve the whole community, what standards of freedom and equality ought to be imposed on its administration?

The ministers in the Skokie Valley projected some possible standards for any institution which undertakes to serve their community. These are stated under five headings:

I. Admission Practice

"The admission practice of such hospitals shall be to admit all persons without discrimination....

"There are technical questions involved in admission practices which it is not the purpose of this policy statement to define. The concern here is with the general principle that any hospital in Skokie Valley which expects to receive support from general community or Federal sources must have an open and above board policy of non-discrimination; it must serve all members of the community or anyone else in cases of emergency without discrimination."

II. Professional Freedom

"The doctors on the staff shall have professional freedom to practice according to the best standards of the profession and according to needs and wishes of the patients; and shall be selected on the basis of competence without discrimination....

"Again there are technical questions involved which this policy statement does not attempt to define. Its clear intent is to say that a community or Federally supported hospital must practice non-discrimination for any reason except professional competence.

"No members of the medical staff shall be required to enter into agreements, written or verbal, concerning the medical care of patients in maternity or other wards which are based in any way on sectarian requirements or religious codes--for example, restrictions on therapeutic abortions when the lives of mothers are in jeopardy; or giving of information regarding planned parenthood and birth control."

III. Respect for Religious Preferences

"The religious preference or relationship of patients shall be respected at all times; a coordinating chaplain provided or recognized by the hospital shall be responsible for seeing to it that there is no intrusion of any particular religious faith upon patients or their families against their wishes.

"There are many ways in which this principle may or may not be recognized which cannot be defined in detail. The purpose of this statement is to say

that any hospital which expects to receive support from the community or from Federal funds has an obligation to maintain a policy which is positive and not merely permissive in this respect. For example, the nursing staff in cases of emergencies should be required by the hospital to take the initiative in informing priests, rabbis and ministers about patients in need of spiritual ministries. The hospital shall have no requirement which will restrict nurses in meeting such requests of patients.

"Most hospitals cooperate fully in this regard, but there are exceptions, and the citizens of Skokie Valley are entitled to know the hospitals they support follow accepted practice in this matter."

IV. Chapel Facilities

"In church sponsored hospitals of all denominations chapels are usually provided. Wherever the conscience of the sponsoring Church permits it to do so these chapels should be so arranged as to permit the use of the facilities by the accredited Priests, Ministers or Rabbis. When this is not possible other facilities should be provided so that the full values of religion and its ministry to healing may be possible.

"In the case of a community sponsored hospital it is highly desirable that provision be made in the basic hospital plan for a chapel. In principle this may be done as is approved policy in the Armed Forces of the United States, where provision is made for the essential equipment needed by clergymen, priests and rabbis for the administration of services according to their respective faiths."

V. Citizens Advisory Committee

"The hospital shall agree to recognize a citizens advisory committee which shall be broadly representative of the community, and it shall have the right to present its suggestions and recommendations to the governing board of the hospital and to the community as often as it considers necessary.

July 1957

"Hospitals often include representatives of the community on their boards of directors, which is a desirable practice but should not take the place of the widely representative advisory committee as outlined above."

Much might be said on each of the standards proposed by the Skokie Valley ministers, but they do point to the need for analysis and clarity in the relations of the churches to the community. While hospital problems are currently most sharply in focus, fundamentally the same problems are present in the relations of homes for the aged, homes for children, and in all the other forms of welfare now being offered with tax funds. If the services are rendered through public agencies the need for providing proper spiritual care raises church-state issues. On the other hand, if the services are provided by church agencies the questions of tax support and equality of service again raise church-state problems.

THE ATLANTIC CITY CONFERENCE

In May several hundred leaders in Protestant social welfare work spent four days in a workshop conference seeking to untangle these relationships. The conference was sponsored by the Department of Social Welfare and the Division of Home Missions of the National Council of Churches of Christ. The report of the Findings Committee included a statement on "Relationships." The statements dealing with community relations read as follows:

"The Church is an integral part of the community and stands in relationship to all forces in the life of the community. In ministering to the whole man, it must express this relationship by working constructively with all those institutions and agencies which affect his welfare. Among such institutions and agencies are:

- government, national, state, and local;
- public health, welfare, and educational services;
- community-wide organizations for planning and financing social welfare;

voluntary non-church-related health and welfare services;
councils of churches;
church-related agencies.

"The Church carries out its relationship to the community's institutions and agencies through coordination of services; the shared use of personnel, skills, and facilities; joint planning, research, and fund-raising; and cooperation in interpretation and communication.

"Implicit in the consideration of this matter is that the Church's health and welfare services have their primary relationships to all other phases of the Church's life. They are not only related to but are also a part of worship, the pastoral ministry, Christian education, home and foreign missions, stewardship, and evangelism. The insights and skills of social welfare should be fully utilized in each of these fields."

Community-wide Groups

"There is real conviction that all church-related health and welfare services should actively participate in the work of local councils of social agencies or welfare councils.

"Furthermore, many church-related health and welfare services receive support from community chests or united funds. The use of community funds carries responsibilities on the part of the recipients to meet certain standards of service, but should not affect the freedom of church-related services to continue to meet their institutional responsibility for worship and religious instruction financed from church funds. There should be careful and continued consideration of these responsibilities by church-related agencies and councils of churches so as to determine in each case which are consistent with the basic objectives of the specific agency and under what conditions community funds should be accepted. Church-related agencies including those receiving community chest or united fund support should be willing, and entirely free, to include persons of all races in their programs."

July 1957

Government and Public Agencies

"Since government at federal, state, and local levels is inevitably and rightly involved in serving the health and welfare needs of all citizens, the churches and church-related agencies cannot avoid relating to government both in the making and enforcement of laws and in the administration of public agencies.

"Cooperation by church and state for the good of the citizen and the community need not compromise the integrity of either. The desirable arrangements and conditions of such cooperation constitute an important field for further study by the churches. Among the questions to be resolved are:

Under what circumstances may church-related agencies or institutions accept public funds to defray the cost of services rendered to citizens?

Under what circumstances may government funds for the erection of buildings or the extension of facilities be accepted?

What are the obligations of agencies receiving such assistance?

How can the sponsoring church body's freedom for prophetic witness be safeguarded?

"To answer such questions concerning acceptance of governmental funds, the positions of the Protestant and Orthodox churches on relationships of church and state need to be set forth with greater clarity so that these practical questions will be decided on the basis of principle rather than expediency. To this end, we recommend that a further study of the principle of the relationships of church and state and their application in today's society be made. We further recommend that this question be referred to the National Council of Churches and suggest that a special conference, called for this purpose, be considered." (Emphasis added.)

OTHER STUDIES

For some years past the Baptist Joint Committee has been urging careful

thought in these matters so that we may be clear regarding the implications of our spiritual insights to the relationships between church agencies and their communities. Several conferences have dealt with different aspects of the same issues. Representatives from all Baptist state conventions, editors, and representatives of Committees on Public Affairs have been invited to participate in a two-day conference to be held in Washington in October.

The complexity of the problems is recognized by Roman Catholic leaders in that they have recently established an Institute of Church and State, with headquarters in connection with the Villanova University's School of Law. The Institute's first public session was held at Villanova a few weeks ago. As reported by the Roman Catholic press, the two-day session included participation by some 35 attorneys, law professors, social workers, and others, from various faiths. "The Juridical Status of Churches" and "Religion in Adoption and Custody" were reported as major points of discussion.

Other religious fellowships are also arranging to rethink their positions. The Lutheran Church-Missouri Synod has been reported as setting aside \$25,000 for a study involving a score or more of their more competent people in the field.

Several Jewish organizations have been working for some decades on their particular problems. The American Jewish Committee recently celebrated its 50th anniversary, at which time several important policy statements were adopted.

This upsurge of intellectual effort is long past due. America has fared well on the thinking done by Jefferson, Madison, and the other "founding fathers", bolstered as they were by the zeal of Baptists and others of deep convictions. But society is constantly changing. Truth in the form of fundamental principle must be periodically refurbished and its meaning refreshed in current applications.