

How to Change the Course of Healthcare's Massive Ship

Maybe you remember the desperate and destitute sharecropper in John Steinbeck's "The Grapes of Wrath," who was being evicted from farming the land by its owners who had to return it to the bank.

The "owner men," as Steinbeck called them, "were all caught in something larger than themselves. Some of them hated the mathematics that drove them and some were afraid, and some worshiped the mathematics because it provided a refuge from thought and from feeling. If a bank or finance company owned the land, the owner men said, The Bank - or the Company - needs - wants - insists - must have - as though the Bank or the Company were a monster, with thought and feeling, which had ensnared them."

When the sharecropper asked for some mercy and claimed that the bank "is only made of men," the owner countered, "The bank is something more than men. It happens that every man in a bank hates what the bank does, and yet the bank does it. The bank is something more than men, I tell you. It's the monster. Men made it, but they can't control it."

I've had that sharecropper on my mind lately.

Western North Carolina's major healthcare provider of health care is Mission Health, a large "nonprofit" medical center with myriad associated clinics, labs and practice groups.

For the last three or so years, I've been receiving treatment for multiple myeloma at its affiliate, Cancer Care of WNC. I've gotten excellent care.

My previous and present employers provided medical insurance for me with Blue Cross-Blue Shield of North Carolina. I don't have any serious complaints about

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the service I've gotten from BCBS. Even during a very expensive stem-transplant process, they were reasonable and responsive.

As of today, Mission Health is "out-of-network" with BCBS because of a dispute about the terms of their contract(s) with each other.

Like almost 260,000 other western North Carolinians, my health care options are drastically reduced and frustratingly complicated.

Each organization blames the other. The more I hear from both of them, the more I feel that ordinary people are caught in a system where no one seems responsible, but, in fact, many people are responsible.

Among the responsible: the U.S. Congress for being unable to transcend partisan wrangling to address the healthcare crisis; those who assume that healthcare is an earned benefit not a human right; drug companies that prefer to make a killing to making reasonable profits while also saving lives; and all of us who refuse to acknowledge that the death rate is 100 percent and that there comes a time when costly treatment is no longer beneficial.

The New Testament doesn't use words like "corporation," "institution," "bureaucracy," "market dynamics," "ideology" and "bottom line." Instead, it speaks of the "principalities and powers."

Attorney, theologian and activist William Stringfellow, in his book "An Ethic for Christians and Other Aliens in a Strange Land," said that the principalities and powers "include all institutions, all ideologies, all images, all movements, all causes, all corporations, all bureaucracies, all traditions, all methods and routines, all conglomerates, all races, all nations, all idols. ... The principalities and powers are legion."

In the grip of these powers, many of which are abstractions far removed from the flesh-and-blood human beings they affect, people will do things to faceless groups - like "patients" or "customers" or "strangers" or "immigrants" or "the poor" -

which they'd never do to an individual whose name, story and humanity mattered to them.

The only way to break the spell of the powers is by means of love.

I don't mean soft and sentimental love. I mean reordering and transformational love which, as Cornel West says, takes the form of justice in public life.

I mean creative love that refuses to settle for the unimaginative status quo that leaves sick people without care and broken people without hope.

I mean love that casts out the fear that there is, or there won't be, enough. This fear of scarcity (and the greed it generates) keeps insurance companies and medical providers from seeking a rationally achievable and sustainable balance of profits and patient care.

Behind the fog and haze of rhetoric that pays lip service to the priority of patient care, I sense a drive for domination of the marketplace. That drive is fueled by fear.

I also mean love for the people who work in and lead the institutions that are in thrall to the powers.

Leslie Newbigin, echoing the Apostle Paul's words in Ephesians 6, said, "We are not fighting against the individuals who perform their roles within these institutions. We know well that when we get a chance to talk intimately with them, they feel themselves powerless. To the outsider they appear to wield great power, but they know they are under the control of forces greater than their own and their own freedom to change things is narrowly limited."

The powers want us to feel powerless. That's how they stay in charge.

We can, though, change things. If we insist on what just-love requires and makes possible, we can shake off the lethargy and learned helplessness that institutional imperatives cultivate in us.

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What would we do if we loved our fellow human beings – all of them, all of us – in a way that caused us to want what is just for them, that created conditions in which they may flourish, and gave them opportunities to become their truest selves?

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