Ethics and Public Discourse: Building a Bridge between Theology and the Destitute Sick

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Recommended Citation

https://epublications.marquette.edu/theo_fac/837
Bringing Catholic theological ethics to the public discourse is a challenge that must be faced with humility and prophecy. Whether in Catholic or secular environments, theological ethics is a practical reflection that challenges all interlocutors to turn their faces to the other in a liberating dialogue committed to the promotion of the human being and to the search for the truth. This double commitment must be critical, grounded on values of justice, respect, tolerance, and love, and it must go beyond ideological differences. A common commitment to the promotion of the human being and the search for concrete truths must guide our debate and practice in the public arena. Humbly and open to listening to the other, Catholic theological ethicists engage in the public arena with a discourse able to create a process of mutual learning.

When I was invited to participate on this panel, the invitation letter said that several speakers would be invited “to reflect on their practical experience of engaging in the public square in light of moral issues.” Then it added that the committee believed that I could offer a “constructive and thoughtful reflection given my experiences in Brazil and in the USA alike.” Considering that and the premise above, I will describe four experiences in which I engaged in the public square in the context of global health in the attempt to build a bridge between academic theology and the reality of the destitute sick.

My talk will be very connected to my practice, with specific experiences. On the one hand, this will show concrete attempts to engage in the public square in different contexts from a theological ethics perspective. On the other hand, although examples make issues visible, they limit the problems because examples and experiences cannot represent the full reality of a problem. But it is a starting point. Choosing to deliver this talk from my experience and not from a systematic examination of the bibliography on this topic allows me to show something that we can see in reality and learn from concrete involvements in the public square.

The goal of this conference is to build bridges in our world, bridges that can connect us and connect Catholic theological ethics to issues challenging our world today. Our colleague MT Dávila suggests “public theology as a bridge building,” and that, in her case (and mine as well), “involves bridging two often-distant worlds: those of the academy and the poor.” Therefore, I chose four examples from...
four different countries, serving in different roles in Catholic and secular communities and organizations, in public and private sectors. These experiences are attempts to build a bridge between the two often-distant worlds referred to by Dávila. They are attempts to bring the academic knowledge to the world of the poor and the voices and faces of the poor to the academic world. They are my experiences in (1) the ministry of health in the Brazilian government; (2) a secular nongovernmental organization (NGO) in Haiti; (3) a Catholic community in Bolivia; and (4) a Catholic university in the US.

**Ethics and Public Discourse:**

**Global Experiences**

In the Ministry of Health of the Brazilian Government

My work in Catholic ministry in health care, known in Brazil as *Pastoral da Saúde*, led me to serve on a health care council, that is, an instrument of social participation of the Brazilian people in the decisions and control of the Brazilian public health system: The Unified System of Health (SUS—Sistema Único de Saúde). Health care councils operate at local, state, and national levels. The councils are secular and political environments that help to make decisions of public health care strategy, such as resource allocation, and exercise social control of actions in the application of these decisions. The councils are also a legal instrument for health advocacy, grounded in the Brazilian constitution, which states that health care is a human right. As a political institution, the members of the councils are vulnerable to all kinds of political interests from different ideologies and powers such as the interests of the private health sector and political parties. Corruption is a constant threat. Hot controversial debates around topics, such as abortion, gender reassignment surgery, and health priorities, are all present in the agenda of the councils.

Within this tense, secular, and controversial political environment, my experience of acting on a council of health was marked by dialogue and commitment to the common good. Ethical values grounded in theological roots were presented as a contribution to the search for better policies for population health. This was possible because we usually begin our discussions rooted in reality, addressing concrete problems and considering the faces of those most affected by them. In this sense, my work with the destitute sick in the largest public hospital of São Paulo provided the faces and the voices of the poor whom I brought to the public debate in the council of health, first at the local level, then at the national one. Even in debates around abortion policies or HIV prevention strategies, showing the voices of the poor gave me credibility to be listened to and to shift the debate from palliative policies addressing the consequences of a problem to a search for sustainable policies that could affect the causes of a social issue.

In addition, I have to say that corruption, such as bribery to change my vote, was a constant threat that I faced with spiritual grounding and the support of the
Catholic community of Pastoral da Saúde. This support was essential for strengthening me to be faithful to our ethical values and commitment to the common good.

In a Secular NGO in Haiti

I had an opportunity to serve in a secular NGO in the rural area of Mirabalais, in the central plateau of Haiti. This organization has a commitment to bring health care to the destitute sick. Most people working there were not practicing Catholics but shared the commitment to deliver health care to the poor. I had two roles in this organization: (1) helping them to develop their community-based services in training community health workers and (2) providing bioethical education for the local health professionals acting in the NGO’s hospital.

Jürgen Habermas affirms that material spaces affect profoundly the public debate. When theologians engage in public discourse, they must be aware of who their audience is and where the public square is. This helps us to choose the language and the way to approach our interlocutors and our concerns with the common good. MT Dávila suggests that public theology is an encounter in which a theologian speaks to a location and to people to whom the Christian message “first make sense.”

In my experience with this NGO, the first step was to create a culture of encounter in which all of us could be open to learning from one another, while having always the same horizon: those whom we were there to serve, the destitute sick. The culture of encounter did not eliminate conflicts, but they were handled in a healthy way because this culture created an atmosphere of respect. As a Catholic theologian and a health professional, I could openly speak my message, but I had to learn to be humble in order to hear the perspectives of those I served.

In a Catholic Community in Bolivia

In this community, the challenge was huge because the leadership of the Catholic organization was not open to listening to perspectives that were not aligned with the traditional view of Catholic moral theology, especially regarding family planning and HIV prevention. Naturally, one would think that a Catholic organization would be an easy space for a Catholic ethicist to engage in ethical debates that would ground our discourse in the public arena. Unfortunately, this does not always happen.

My experience with this community shows that sometimes inside Catholic groups, debate is difficult, or does not exist at all. The relationship is in a vertical line. Therefore, the voices of the poor and those who are interested in understanding their reality and suffering do not count, because the leadership knows all the questions and answers. Singularly vertical accountability to authoritative teaching is an approach that harms the credibility of the Catholic Church in the public sphere. This is paternalistic and infantilizes the other; it ignores the contri-
bution of those who are the faces and voices of the local public area. This approach is not different from the actions of the colonizers who invaded Latin America and brought the Catholic faith with the force of their sword.

I share this experience because it shows what I do not believe it is: a way for engaging in a public discussion committed to the common good. Vertical approaches alone do not liberate or empower people. Rather they create dependency. I believe that theological ethics in the public square—as a bridge between our academic studies and the reality of those who are suffering—must begin from below: in a culture of encounter that creates a process of mutual learning. This makes us and our faith vulnerable, but we need to take this risk if we want to say something relevant, if we want to respect the other and contribute to the common good as a partner of peoples.

In a Catholic University in the US

I teach theological ethics to undergraduates in a Catholic university in the US. Taking theology classes is mandatory in this institution. Most students take these classes because they have to, not because they want to. I teach a course entitled: Theology and Global Health. It mostly attracts students from health majors. My way of approaching global health issues from a theological perspective is from below; thus, I can bring the voices of the poor to our discussions. From below is also the pedagogy used in my classes. I am inspired by the liberating method of Paulo Freire, to whom “Nobody educates anybody else, nobody educates himself, people educate among themselves mediated by the world.” What students think, want, and have with them as their cultural and educational background matters. I often emphasize to my students that I am also there to learn from them. They can at least teach me how to speak English better, but I know they have much more than that to teach me.

We discuss health care and Catholic theological ethics with a common interest: understanding health care issues and the theological concepts that can help us address global health challenges. At the same time, I want to understand how students think they can address health care issues and how the degree they are pursuing can help us in this global endeavor. So far, the result of this experiment has been a good dialogue in which the voices of the poor are presented in a classroom.

Ethical discourse in the public arena requires that the “Other” matters, that we all matter and have something to teach and to learn in the common task of searching for comprehensive and integral solutions to problems that impact the common good.

Conclusion

Our colleague Bryan Massingale says that doing public theology means “(1) addressing issues of public concern, urgency, and import (2) to a religious pluralistic and diverse audience of fellow members of a civic community (3) in a way
that is accessible to people of any or no faith tradition or commitment (4) while rooted in and inspired by one’s own faith perspective, commitments, and beliefs.5 These four experiences are only particular examples originating from my attempts to embody the meaning of public theology suggested by Massingale. These experiences are limited to their contexts and interlocutors; therefore, they are not a guide for engaging in public discourse. But they reflect my belief that theological ethics in public discussion, as a bridge between the academic world and the world of the poor, must begin from below with an ethical encounter that recognizes the other. Simone Weil suggests that social relationships as an ethical encounter recognizes that the other demands self-dispossession.6 This takes us from our own self to bring our attention to the other’s permanent vulnerability to force and suffering. In the public arena, creating a bridge between the academic work of theological ethics and the reality of the poor is an exercise of attention to the other in his/her beauty and vulnerability, a humble exercise of mutual learning.

Notes