NATIONAL CATHOLIC REPORTER
Published on *National Catholic Reporter* (http://ncronline.org)

If I had $10 billion dollars

John L. Allen Jr. | Jul. 24, 2009 All Things Catholic

Fans of the TV show ?West Wing? may recall the series? next-to-last episode, when Chief of Staff C.J. Cregg finds herself contemplating life after the White House. A wealthy philanthropist wants her to run his foundation, asking what she would do with $10 billion to make the world a better place. Her answer was to build roads in Africa ... hardly sexy, she warned, but key to developing African economies and ending poverty.

In a similar vein, I asked myself this week what I would do if somebody offered me a blank check to spend on some project in American Catholicism. The more I think about it, the more my CJ-esque reply would be, ?Hire a nurse for every parish in the country.?

As with African roads, parish nursing may not be the most glamorous idea around. But looking down the line it?s tough to imagine a step of greater practical value -- regardless of whatever Washington does or doesn?t do with health care reform.

First, a demographic reality-check: The two most rapidly swelling components of the American Catholic population today are Hispanics and the elderly, and both face particular challenges with health care.

The Pew Forum projects that by 2030, Hispanics will make up 41 percent of the Catholic population, with whites at 48 percent -- the first time white Catholics will have fallen below a numerical majority. Luis Lugo, director of the Pew Forum, has called this the ?browning? of American Catholicism. Among other things, the transition means the Catholic population of the future will be increasingly uninsured or under-insured. A recent study by the Centers for Disease Prevention found that Hispanics are three times more likely than non-Hispanic whites to lack a regular health care provider.

As for the elderly, the President?s Council on Bioethics stated in 2005 that we are on the brink of becoming a ?mass geriatric society.? According to the U.S. Census Bureau, Americans aged 14 and under presently outnumber those 65 and above by almost two-to-one, 60.5 million to 34.7. By 2050, that ratio will have swung strongly in the opposite direction. There will be 75.9 million Americans above 65, as opposed to 59.7 million under 14, meaning the elderly will outnumber the youngest in the country by more than 16 million. The population of ?old olds,? meaning those above 85, will also increase four-fold.

Applying those trajectories to the church, there should be 13.3 million American Catholics 65 and older by the year 2030, more than doubling the present number of 6.5 million. Since people aged 65 and above are more likely than any other demographic cohort to practice their faith, American parishes are looking at a massive ?gray wave? in the years ahead.

Traditionally the front line of elder care has been the family, but a growing share of elderly can?t count on family support. By 2020, 1.2 million Americans aged 65 or older will have no living children, siblings or spouse. In 1990, for every American over 85 years of age, there were 21 between the ages of 50 and 64. In 2030, for every person over 85, there will be only six between 50 and 64, a massive contraction in the pool of potential care-givers.

The risk of this generational imbalance was illustrated in shocking fashion in France in 2003, when a summer heat wave caused 11,000 deaths. Most victims were elderly people living alone, who couldn?t afford air conditioning and who had no one to check on them to be sure they weren?t in danger.

Under any imaginable future scenario, private health insurance as well as Medicare and Medicaid won?t fully meet the needs of the poor, immigrants, and the elderly. Churches will be pressed to step into the gap as the last line of defense for vulnerable people -- especially the Catholic church, since these will be disproportionately our people.

That?s where the parish nurse enters the picture.

Nobody seems to know exactly how many of America?s 19,000 Catholic parishes presently have a nurse, but the best guess of the St. Louis-based International Parish Nurse Resource Center is ?way less than half,? according to Maureen Daniels, who coordinates the center?s international program. For one yardstick, Daniels said the center?s local St. Louis network includes 18 nurses in Catholic parishes, and there may be another dozen or so they don?t know about. There are 192 parishes in the St. Louis Archdiocese, so that?s maybe 30 parishes with a nurse, representing just fifteen percent.

Notably, only about 35 percent of parish nurses are paid, and in most cases, Daniels said, these positions are half-time or less. When parish nurses do draw a salary, it?s typically well below what their peers make elsewhere. The average parish nurse, Daniels said, might get $15 an hour in the St. Louis area, where hospitals usually pay $30 an hour or more.

Forward-thinking parishes ought to be pondering all this right now, because given Catholic demographics in America, most parishes will likely come to think of a nurse the way they presently do of youth ministers, directors of religious education, and even parish secretaries -- as an essential part of the parish team.

Because parish nurses generally do not work directly under a doctor, they can?t perform invasive procedures such as administering injections. Instead, they take blood pressure readings, monitor medications, check general health levels, and answer questions. Many run support groups for parishioners caring for ailing family members, as well as for those who have lost a loved one. The nurse also can act as an advocate for patients as they navigate through health care systems, and organize informal networks of care for people who need various forms of support -- for example, elders who need someone to make sure they?re okay, or to relieve family members struggling to provide in-home care.

Filling that slot is likely to become steadily harder, since nurse shortages are projected to grow in the early 21st century. According to the American Association of Colleges of Nursing, 30 states currently face a shortage, and by 2020, 44 states plus the District of Colombia will not be able to field enough nurses to meet demand. The reasons are fairly simple: the increasing complexity of the job, difficult working conditions, insufficient student assistance, and low salaries.

Daniels said that despite those shortages, parishes would be able to attract nurses if resources weren?t an issue. The promise of being able to deliver holistic care, spiritual as well as physical, packs great appeal. Yet, Daniels said, when nurses respond to job openings in parishes, they often walk away because they simply can?t support themselves and their families on what the position pays.

What all this suggests, at least to me, is that the Catholic Church in America should be worrying a bit less about the priest shortage and a bit more about the nurse shortage. Attracting and retaining qualified nurses for parishes -- and for social service centers, schools, and other Catholic institutions -- may not garner headlines or excite the blogs, but it would be an incredibly valuable service to the Catholic future.

Note to Catholic philanthropists: Give me $10 billion, and I?ll see what I can do.

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Source URL (retrieved on *09/23/2014 - 11:30*): http://ncronline.org/blogs/all-things-catholic/if-i-had-10-billion-dollars