sion in more introductory courses. Miller has provided a creative and stimulating resource for discussion among those committed to serving and promoting the health and well-being of children.

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Jesuit Health Sciences and the Promotion of Justice: An Invitation to a Discussion, by Jos W. M. Welie and Judith Lee Kissell, eds. Milwaukee, WI: Marquette University Press, 2004. 265 pp. Bibliography. Index.

More than one hundred health science degree programs are offered by Jesuit institutions of higher education worldwide. Jos Welie and Judith Lee Kissell, both of the Creighton University Center for Health Policy and Ethics in Omaha, Nebraska, have compiled nineteen essays which address the question of how these programs can respond to the overall vision of the Society of Jesus as expressed by its recent documents from General Congregations—that is, the "service of faith, of which the promotion of justice is an absolute requirement." ¹

One of the contributions is an address by the General Superior of the Society of Jesus, Fr. Peter-Hans Kolvenbach, S.J., to representatives of the twenty-eight Jesuit universities and colleges of the United States who met at Santa Clara University in 2000 for a conference on "Commitment to Justice in Jesuit Higher Education." Fr. Kolvenbach declares that

the measure of Jesuit universities is not what our students do but who they beFr. Kolvenbach gives as a warrant for this *diakonia fidei* (service of faith) and the promotion of justice a citation from the 1971 World Synod of Catholic Bishops:

Action on behalf of justice and participation in the transformation of the world fully appear to us as a constitutive dimension of the preaching of the Gospel or, in other words, of the Church's mission for the redemption of the human race and its liberation from every oppressive situation.²

Kolvenbach lauds the U.S. Jesuit institutions of higher learning for their offering of service learning experiences, where students experience firsthand the lot of the poor and the marginalized and graduate with a "welleducated solidarity." He exhorts faculty to ask themselves "Where and with whom is my heart?" and to become, in the words of Pope John Paul II, "masters of life and moral commitment" 3 (62–63).

An essay by Fr. Thomas Massaro, S.J., of Weston Jesuit School of Theology in Cambridge, Massachusetts, gives theological foundations of an option for the poor and their effect on the early choices of ministry of St. Ignatius and the other first Jesuits. Even the first Jesuit school for teaching non-Jesuits, founded in 1548 in Messina, Sicily, served as a venue where rich and poor could mingle—especially as tuition was free! Massaro jumps to the end of the twentieth century and the experience of the Jesuits and their co-workers at the Universidad Centroamericana José Simeón Cañas (the UCA) in San Salvador, El Salvador. Founded in 1965, this university was organized specifically to addresses issues of poverty, human rights, and unjust social structures in that country so

come and the adult Christian responsibility they will exercise in the future towards their neighbor and their world.

¹ Society of Jesus, "Our Mission Today: The Service of Faith and the Promotion of Justice," Decree 4 of the Thirty-second General Congregation of the Society of Jesus (December 2, 1974–March 7, 1975), n. 2.

² World Synod of Catholic Bishops, "Justice in the World" (1971), n. 6.

³ John Paul II, Address to the Faculty of Medicine of the Catholic University of the Sacred Heart (June 28, 1984).

sharply divided between the rich and poor and by years of civil war. To quote Massaro, "everyone in San Salvador knew what the Jesuits and the UCA stood for in its teaching, research and social outreach" (87) They were even able to navigate through the vexing question of "hiring for mission." The UCA remains committed to this "horizon of concern" for the poor, even more so since six of its Jesuit leaders and two of its female employees were brutally assassinated by members of the El Salvadoran army in 1989. Massaro concludes with an appeal to leaders of health-care systems to apply some of these proven ways of viewing the world through the eyes of the poor, to the specific demands for health care in the United States and other nations.

The next offering is the text of an address by the noted Jesuit theologian and preacher Fr. Walter Burghardt, S.J., titled "Biblical Justice and 'The Cry of the Poor': Jesuit Medicine and the Third Millennium," which was the fourth in a series of lectures on "The Jesuit Tradition and Medicine" given at Georgetown Medical Center in the early 1990s. Burghardt suggests four "signs of the times" which, if read conscientiously, will help Jesuit-inspired health centers respond with boldness and in fidelity to the Ignatian tradition of meeting the needs of the whole person created in the image and likeness of God. These four elements are, first, a recognition of the close connection between social ills, such as homeless and inadequate health insurance coverage, to medical illnesses; second, listening to the cries of the poor, including children suffering from the effects of poverty and illnesses such as AIDS, drug abuse, and gun-related violence, and to the elderly, who have been marginalized by the "youth culture" and big business; third, listening to the cry of our black brothers and sisters, who still disproportionately bear the burdens of poverty and lack of equal access to health care and education; and fourth, hearing the cry of those afflicted with AIDS. Perhaps his thesis is best summarized by his recollection of Hippocrates' dictum that it is better to "know what sort of person has a disease than what sort of disease a person has."

In his essay, "For Whom and For What? Education and Research in the Medical and Dental Sciences," Welie shares his experience as ethicist for the Creighton University School of Dentistry. We often hear of the one in seven Americans who lack health insurance, but more than two and a half times this number lack dental insurance. Over one hundred million Americans have no access to fluoridated water, a proven public health strategy for preventing cavities. Welie suggests that dentists and dental hygienists develop a sense of personal responsibility for this lack of access to dental care. Dental students are exposed to indigent patients as part of their training, but they seldom are encouraged to reflect on the fact that their patients' poverty or lack of basic services has contributed to the severity of their condition. Students are seldom taught options for dental care that would be, though perhaps not optimal, acceptable and affordable.

Welie wonders why so few representatives of Jesuit health-care facilities attended the Santa Clara meeting in 2000, in contrast to the substantial representation from law and business schools. He attributes this to the mistaken thought on the part of some faculty that, because their schools offer health care, and indigent health care at that, these facilities already embody the Jesuit tradition. Welie disputes this assumption, stating that if it were true, any school of nursing or medicine could be called "Jesuit." The Jesuit schools of medicine, for example, appear to have arranged their curricula to be as close to that of the public schools as possible, at least in part because the graduates need to pass national standardized tests for licensure.

William E. Stempsey, S.J., of the Department of Philosophy at Holy Cross College, advocates a renewal of the system of medical education so that "physicians (will) feel so strongly about caring for the most needy that they will do it!" (133). In his thought-provoking essay "Forming Physicians for the Poor: The Role of Medical and Premedical Education," Stempsey cites Sidney Dean Watson's observation that bioethics has treated justice merely at the macroeconomic level, because poor patients seldom get to see physicians at all and so fail to provide material for ethics-class case discussions. Medical and premedical education needs to assume

more responsibility for the production of socially responsible physicians who will contribute to the common good enough to justify the large expenditure of public funds given for their education. At least one study showed that when residents rotate through a clinic in a homeless shelter, they were more likely to have a positive attitude about caring for indigent patients.

The third section of the book consists of nine examples of settings in which this "promotion of justice" has become a significant part of the education of young people. In one of these inspiriting scenarios, Rachel Bognet, a premedical student at the University of Scranton, describes her work in a clinic in Haiti. She was struck by the gratitude of the patients who let her practice taking bloodpressure readings on their frail arms while clutching tattered three-by-five cards on which the readings were recorded.

Frank Bernt and Peter Clark, S.J., of St. Joseph's University in Philadelphia, describe an innovative undergraduate minor program in interdisciplinary health services, which exposes students to such issues as economic disparities and racism in health-care delivery and dying with dignity, and culminates in a two-week "justice study tour" in the Dominican Republic. Students come to see how health care could be delivered in entirely differently ways, ways that would be more just and inclusive.

Miriam Schulman of Santa Clara University describes a unique partnership between the University's Markkula Center for Applied Ethics and the O'Connor Hospital in San Jose, California. Fifteen students each year visit patients in several clinical settings and reflect on ethical issues they encounter. Many gain experiences which either confirm their aspiration to pursue medical careers or help them realize that they might be more suited for other lines of work.

In "Teaching Medical Students about Vulnerable Patients," Judith Lee Kissell, co-author of this collection, describes a week-long course on socially marginalized patients during the second year of medical school at Creighton University. Designed to complement and bring down to earth the scientifically

oriented second-year curriculum, this student-facilitated program exposes the students to a wide variety of situations in which they encounter marginalized persons, such as hospices, Native American reservations, and prisons. Students learn to coordinate their visits with the demands of harried staff members, take responsibility for preparing pertinent questions, and present focused reports to their peers on two or three main points which impressed them during their visits.

Frank Ayers, D.D.S., associate dean for student Affairs and director of admissions at the Creighton University School of Dentistry, describes the pioneering Institute for Latin American Concern (ILAC), which has for almost thirty years provided an opportunity for students and health-care professionals to deliver primary care in a very underserved region of the Dominican Republic. Ayers notes that there are many programs with which conscientious dentists might become associated, but the Creighton program "takes place in the structure of a spiritual journey that is calling individuals to look at themselves, their values and their relationship with humankind and the God that (s)he worships" (191).

Several essays describe innovative research projects undertaken by faculty at Jesuit institutions, such as programs to improve self-confidence in women who are victims of spousal abuse and a project that films interviews of HIV-positive African American women and their advice to younger, at-risk members of their community.

The volume concludes with the experiences of two administrators—Dr. Fortunato Cristobal, the dean of the Zamboanga Medical School in the Philippines, and F. Daniel Davis, the associate dean for educational planning at Georgetown University School of Medicine. Cristobal helped spearhead the foundation of a school whose mission is unabashedly "to help provide solutions to the health problems of the people and communities of Western Mindanao," while Davis proposes ways that the initial altruism of medical students would not be stifled by the demands of clinical training.

Readers of the essays contained in this volume cannot help but come away asking

themselves whether people studying or working in their institutions would be able to tell, along the lines of the Jesuits at the UCA, what they stand for in their teaching, research, and social outreach. One of the strengths of the collection is the wide variety of sources compiled, from addresses given by officials of the Jesuits to works by students, administrators, and faculty on the front lines. The book should be a helpful addition and a spur for discussion to any group attempting to secure its religious and service identity in the face of the challenges of these less-than-altruistic times.

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Books Received

After Harm: Medical Error and the Ethics of Forgiveness. Nancy Berlinger. Baltimore: The Johns Hopkins University Press, 2005. 174 pp. Hardcover.

The Baby Business: How Money, Science, and Politics Drive the Commerce of Conception. Debora L. Spar. Cambridge, MA: Harvard Business School, 2006. 318 pp. Hardcover.

The Catholic Citizen: Debating the Issues of Justice—Proceedings of the 26th Annual Conference of Catholic Scholars. Kenneth D. Whitehead, ed. South Bend, IN.: St. Augustine's Press, 2004. 254 pp. Paper.

Christian Faith and Human Understanding: Studies on the Eucharist, Trinity, and the Human Person. Robert Sokolowski. Washington, D.C.: Catholic University of America Press, 2006. 331 pp. Paper.

Contemporary Issues in Bioethics: A Catholic Perspective. James J. Walter and Thomas A. Shannon. Lanham, MD: Rowman & Littlefield, 2005. 306 pp. Paper.

Cooperation, Complicity and Conscience: Problems in Healthcare, Science, Law and Public Policy. Helen Watt, ed. London: The Linacre Center, 2005. 328 pp. Paper.

Cutting to the Core: Exploring the Ethics of Contested Surgeries. David Benatar, ed. Lanham, MD: Rowman & Littlefield, 2006. Paper.

Darwin's Nemesis: Phillip Johnson and the Intelligent Design Movement. William A. Dembski, ed. Downers Grove, IL: Inter-Varsity Press, 2006. 358 pp. Paper.

Death in the Clinic. Lynn A. Jansen, ed. Lanham, MD: Rowman & Littlefield, 2006. 172 pp. Paper.

Designing Our Descendants: The Promises and Perils of Genetic Modifications. Audrey R. Chapman and Mark S. Frankel. Baltimore: The Johns Hopkins University Press, 2003. 384 pp. Paper.

Health and Human Flourishing: Religion, Medicine, and Moral Anthropology. Carol R. Taylor and Roberto Dell'Oro, eds. Washington, D.C.: Georgetown University Press, 2006. 292 pp. Paper.

Is Life Sacred? Geoffrey G. Drutchas. Cleveland, OH: Pilgrim Press, 1998. 224 pp. Paper.

The Meaning of Marriage: Family, State, Market and Morals. Robert P. George and Jean Bethke Elshtain, eds. Dallas, TX: Spence Publishing, 2006. 338 pp. Hardcover.

Patient Autonomy and the Ethics of Responsibility. Alfred I. Tauber. Cambridge, MA: MIT Press, 2005. 342 pp. Paper.

ProLife Feminism: Yesterday and Today, 2nd ed. Mary Drane Derr, Rachel MacNair, and Linda Naranjo-Huebl, eds. Kansas City, MO: Feminism and Nonviolence Studies Association, 2005, 474 pp. Paper.

Renewing Christian Ethics: The Catholic Tradition. Michael E. Allsopp. Scranton, PA: University of Scranton Press, 2005. 288 pp. Paper.

If you would like to receive a complimentary copy of one of these books to review for a future issue, or if you know of another book that should be reviewed, please e-mail Rebecca Robinson at rrobinson@ncbcenter.org.