The Moral Principle of Cooperation: the Recent Health Care Mandate & Subsequent Accommodation

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Human persons are, by nature, both individual and social beings, who must necessarily interact with other human beings in order to meet basic human needs throughout life. In other words, human persons cooperate with others in order to survive. Moreover, the world in which human persons live and relate is a world filled with contraries of light and darkness, sadness and joy, good and evil. It is, therefore, within the purview of human persons—independently and socially—to interact within the context of these contraries...and it is here that we find the challenge to cooperate well.

Within this context, persons find some matters to be simple, others complex. Some matters fall to a person out of necessity, while others offer a person the freedom to choose. This latter, further involves a person’s intention or will or desire...a motivation for choosing one thing over another. Within the scope of these simple sentences, we’re already witnessing the ever-growing complexity of existing as social, interdependent beings, and our questions begin to arise: how does one lead a good life without being tainted by a very real struggle between good and evil in the world? can a person always avoid cooperating in the evil activity of others? if one cooperates in evil, or simply tolerates or accommodates evil, what is the extent of his or her culpability? and so on. Thus the dilemma regarding our interactions and interdependence with others in society becomes clear, and our response to the problem of cooperating in moral evil even more urgent.

In response to such matters, the tradition of the Catholic Church has developed the moral principle of cooperation. This principle recognizes the dilemma of our interdependence as human persons in society and the existence of good and evil in the world. Moreover, this principle establishes specific criteria by which persons can act as moral agents even while accepting the presence of evil in various outcomes.

“Formal” vs. “Material” Cooperation

First, the Church specifies two different categories or types of cooperation: formal cooperation and material cooperation. Alphonsus Liguouri, the father of this classic formulation of moral theology, writes, “that cooperation is formal which concurs with the bad will of another”. In other words, the cooperator’s will is the same as the wrongdoer’s will. When this is the case, it is never morally acceptable. He continues, “by contrast, that cooperation is material which concurs only with the bad action of the other, outside the intention of the cooperator.” In other words, the distinction between “formal” and “material” cooperation is whether or not the intentions of both wrongdoer and cooperator are the same. In my estimation, the Catholic Church of the United States—comprised of its various entities and its individual constituents (the Catholic faithful collectively and individually)—is currently being mandated to cooperate materially in the recent mandate issued by the U.S. Department of Health & Human Services.

Material Cooperation: “Proximate/Immediate” vs. “Remote/Mediate”

In some cases, material cooperation is legitimate. For example, acting as a defense attorney for obviously guilty clients; paying taxes; working as a corrections officer over death row inmates; attending
the wedding of a Catholic person who is marrying outside the Church; casting a vote for a pro-choice candidate. One materially cooperates in another’s wrongdoing without sharing the bad will of the wrongdoer, but still secures a benefit (lawyer’s salary, family cohesion, etc) or avoids a harm (unemployment, prosecution for tax evasion, etc). In other words, one does not cooperate in order to facilitate the wrong; the wrong falls outside the cooperator’s intention…it is unintentional.

But there is still a further distinction within material cooperation: whether the cooperation is distant or remote or mediate; or whether the cooperation is near, proximate or immediate. This final distinction is extremely dense, yet it suffices to say, the closer or nearer the cooperation, the more peril exists and the more responsible to cooperator becomes. To our current question relative to the recent HHS health care mandate and its subsequent accommodation, Marie Hilliard, J.C.L., Ph.D., R.N., ethicist and Director of Bioethics and Public Policy of the National Catholic Bioethics Center states,

“There is nothing more essential to the completion of an act than the payment for the act, which would not be completed without such payment, thus, making the material cooperation immediate. Even if one did not agree with this premise, and held that cooperation with contraceptive mandates [including abortifacient and sterilization procedures] constitutes mediate [or remote or distant] material cooperation, one would have to analyze the good being preserved and the grave evil to be avoided in determining whether the cooperation is licit [legal].”

Response to the Mandate & Accommodation

Based on all that has been stated, no matter the position one adopts, the material cooperation that the Catholic Church and her people are being required to assume by governmental mandate is beyond acceptable according to the principle of cooperation. Individual versus institutional involvement notwithstanding, the profession and the living out of the Catholic Faith is in direct opposition to the recent mandate, including its subsequent accommodation.

In the end, no one can rightly nor reasonably state that the Catholic Church desires that human persons not be well served in their sojourn throughout earthly life. The Church acknowledges the grave challenges of living within a world filled with perilous contraries, thus, the Church seeks to serve the good of all human persons, individually and in society: their authentic health needs—physical, psychological, emotional and spiritual—all while remaining faithful to our religious charter and profession of faith, both spoken and lived. It is in this way that the Church hopes to share authentic life with all.

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1 Catholic Health Care Ethics, 2nd ed. Furton et al, eds. [The National Catholic Bioethics Center: Philadelphia, PA, p. 279]