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The Members and Staff of the New York State Task Force on Life and the Law

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REMEMBERING JOHN J. REGAN

*The Members and Staff of the New York State Task Force on Life and the Law**

Concerned that medical science had far outpaced society's ability to confront the legal and ethical dilemmas posed by medical advances, Governor Mario Cuomo convened the New York State Task Force on Life and the Law in March 1985. Governor Cuomo challenged the Task Force to develop concrete recommendations for public policy and to forge the consensus needed to carry New York State forward on the potentially divisive issues that arise at the intersection of medicine, ethics, religion, and law. The Task Force's agenda ranged from questions at life's end, such as the determination of death and decisions to stop life-sustaining treatment, to issues presented at life's beginning, including use of assisted reproductive technologies and treatment for disabled newborns.

The only standing body of its kind devoted to the development of policy on bioethics issues at the state level, the Task Force has been recognized as a national model for tackling the sensitive issue posed by medical advances. Five of six of its proposals for legislation have been enacted in New York State and used as guideposts in other states. The Task Force reports have served as a resource for diverse audiences, reaching legal, medical, and civic organizations that participate in the policy-making process as well as academics and government officials in the United States and abroad.

* Karl Adler, John A. Alesandro, John Arras, Yvonne W. Asamoah, David Ball, J. David Bleich, Evan Calkins, Carl H. Coleman, Richard J. Concanon, Myron W. Conovitz, Anna Maria Cugliari, Saul J. Farber, Carol G. Farkas, Alan R. Fleischman, Samuel Gorovitz, Jane Greenlaw, Denise Hanlon, Cassandra Henderson, Donald W. McKinney, Kathryn C. Meyer, Tracy E. Miller, Maria I. New, Elizabeth Peppe, Jean Pohoryles, A. James Rudin, Betty Bone Schiess, Barbara Shack, Robert S. Smith, Elizabeth W. Stack, Rogelio Thomas.

Among the first members appointed, John Regan served on the Task Force from its inception in 1985 until his death in 1995, contributing immeasurably to the Task Force's achievements. As chairman of the Task Force Committee on Decisions About Life-Sustaining Treatment, John played a critical leadership role in the development of three legislative proposals that have become law in New York, authorizing the creation of health care proxies and do-not-resuscitate orders in hospitals and in the community. These proposals empower individuals to decide for themselves the type of medical treatment they would want when they are seriously ill, consistent with John's commitment to individual self-determination in matters of medical care. John also was instrumental in developing a proposal that would authorize family members to make decisions regarding the treatment of incapacitated patients who have not left advance instructions. The proposal tackles many difficult legal and ethical issues. It is now pending before New York's Legislature and has received far-reaching public support.

John also lent more intangible, but no less valuable qualities to our deliberations. In all our discussions, he brought his keen intellectual strengths, an unfailing sense of balance, and respect for the views of the Task Force members that differed sharply from his own. It was always wonderful to have John on your side on a particular issue, but he was an equally enjoyable adversary. He had a unique ability to criticize positions forcefully but gently, challenging arguments and conclusions, but never individual members or their personal views. As one of the members stated in the homily at John's burial, "John had a knack for approaching a discussion with his own opinion or position fairly well worked out while truly remaining open to persuasion. It is often a lost art these days when polarization and politics are in vogue. It is, indeed, the stuff of peacemaking—for if John were truly willing to be persuaded by you, you would find it very difficult to enter the conversation without allowing yourself to be persuaded otherwise by him."

For John, the law was a practical and humane tool. It was a way to shore up the rights of those who are vulnerable, especially the elderly and the ill. John subjected any proposal for legislation to a rigorous intellectual analysis, but never lost sight of the human goals he believed the law ought to attain. As one member wrote recently, "He helped me, a skeptic, understand and respect the law in a way no one else could. For those who listened carefully as John began 'I would argue that . . .,' there was a wealth of wisdom to be gleaned, wisdom which cannot be replaced."

On each of eight sensitive issues we have addressed since the

inception of the Task Force, we have sought the common ground to guide our recommendations, and to bring about a broader consensus within the pluralist society that characterizes New York State. John devoted himself to the process of devising that consensus, and epitomized the qualities needed to do so: a willingness to listen and learn from others; the capacity to persuade and explain in sound, dispassionate terms; a flexible, lively intelligence; and at times, endless patience for discussions that often followed a meandering path to shared acceptance rather than a straightforward statement of reasons or rationale.

Evident too throughout all our deliberations was John's unflagging commitment to identify and pursue the public good. He was neither wedded to ideas for their own sake, nor to the promotion of an individual agenda. He held firm principles, and yet remained willing to test his assumptions and conclusions against the rational arguments and strongly held beliefs of others. For example, while a staunch supporter of individual autonomy, John recognized that autonomy sometimes had to be sacrificed to achieve other values, including equality, dignity, and the best interests of those who are vulnerable. John rejected the temptation of simple solutions, and helped us draw difficult distinctions based on principled policy goals. This integrity was fundamental to John's approach to any problem, enriching the intellectual and personal skills he contributed to our efforts to craft health care policy for New York State.

Over our ten years of working with John, we prized not only his professional contributions, but also his companionship and his kindness. He was gentle and considerate, even in the midst of our most impassioned discussions. It was always a great pleasure to work with John. With his death, we lost a wonderful and much valued colleague and friend. We feel his absence keenly as our work continues.

