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Catholic Physicians' Guild

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can be made available to all dioceses. Obviously, since each bishop is the authentic religious and moral teacher in his own diocese, he has a right to supply his own code if he wishes to do so.

One final point: In my introductory paragraphs it was said that the *Catholic* members of the medical profession need and expect the guidance of Church authorities. What about the *non-Catholic* personnel in our hospitals? This question has its delicate aspects; and I can hardly deal with it adequately in this brief conclusion. However, I think I can safely say that many of the non-Catholics are just as eager as Catholics to consult Catholic moralists and

to follow their guidance, especially when treating Catholic patients. The extremely delicate problem concerns only those who may feel that they are being forced to conform to specifically Catholic views, even when treating non-Catholic patients. The correct solution to this problem lies in the fact that, at least with regard to the ethical directives of our codes, the principles enunciated pertain not merely to Catholic teaching, but to the moral law. At any rate, that is the way the Church and her theologians look on these principles; and, such being the case, we could not admit a double-standard—one for Catholics, the other for non-Catholics—in our hospitals.



NON-CATHOLICS AND OUR CODE

Question: In the July number of Hospital Progress (XXIX, 259) you stated that, with regard to the ethical directive of our codes, the principles enunciated pertain not merely to Catholic teaching, but to the moral law, and for this reason a double standard (one for Catholics, the other for non-Catholics) is not admissible. Some of our non-Catholic personnel would appreciate it if you would explain this more fully.

The Catholic hospital codes that I have seen consist mainly of three classes of regulations:

1. *Provisions for the religious care of patients:* These include directives concerning the administration of the sacraments, the care of the dying, Christian burial, and so forth.

2. *A statement of some moral principles and practical applications:* A moral principle would be,

for example, that the direct killing of an innocent person is never permitted; and a practical example of this principle is the forbidding of craniotomy of a living child. That contraceptive sterilization is against the natural law is another moral principle; and one of its practical applications is the prohibition of fallotomy for the purpose of rendering conception impossible. Still another example of a moral principle is the statement that mutilation of the human body is permitted insofar as it is required for the well-being of the patient, and a practical application of this is the allowing of orchidectomy in the treatment of carcinoma of the prostate gland.

3. *Certain precautionary regulations,* for example, that excised organs be sent to the pathologist, that surgeons give notice of the operation they intend to perform, and so forth.

With regard to the first class of regulations, I may say that these generally pertain to specifically Catholic teaching. The question proposed at the beginning of this discussion does not refer to them. The cooperation of non-Catholic personnel is of course highly desirable in these matters; but I think I can safely say that Church authorities would not insist on the observance of these prescriptions by non-Catholics who could not render such assistance without violating their own religious convictions. However, in such a case of conscientious objection, the non-Catholics would be expected to notify the hospital authorities so that due provision could be made for the religious care of the patients.

The regulations of the third class are "ethical directives," in the sense that they are wise prescriptions made to prevent abuses and carelessness. They are not specifically religious; nor are they in themselves moral principles or direct applications of such principles. They are made by civil law, or by a medical association, or by hospital authorities. They are merely *human* directives that can be changed by the authority that made them; but as long as they exist in a hospital they must be observed by the entire hospital personnel. The question we are answering does not refer to regulations of this kind.

The question is particularly directed to the regulations of the second class. To explain to our non-Catholic inquirers just why these prescriptions cannot admit of a double standard, we must discuss these two points: (1) the meaning of the natural law; and (2) the competency of Catholic moralists to declare what is and what is not against the natural law.

The Natural Law

A rather time-worn, but still instructive, analogy may help to explain the meaning of the natural law.

Suppose that an inventor-mechanic would construct a new type of machine, e.g., a special type of automobile; and suppose that he would then sell it to me and would present me with a book of instructions concerning its correct and incorrect use. Granted that the mechanic acted reasonably, these instructions would not be a merely arbitrary afterthought without any reference to the nature of the machine. Rather, they would be a written formulation of "do's and don't's" based upon his own intimate knowledge of the machine. He planned it for a certain purpose; he chose the materials and arranged them according to a certain design; he knows what is in it, and his instructions express this knowledge in a practical way. Another talented mechanic might examine this same machine and, by perceiving its materials, its arrangement, and its purpose, he could reach substantially the same conclusions as the inventor had expressed in his book of instructions. In other words, both the inventor and the examining mechanic would know that the very nature of the machine requires that it be operated in a certain way, or in certain ways, in order to accomplish its purpose.

Something similar, but in a much higher order, took place when God created human nature. He had a plan for this new being. He endowed it with certain powers and functions. When the nature is used according to its inherent design it will accomplish its purpose; when it is used contrary to this design, its purpose is defeated. Obviously, in creating it with this particular design, God expressed

His will that it be used in accordance with the design.

When God gave Moses the Ten Commandments, He gave him what might be called a book of instructions containing the main points concerning the right and wrong use of human nature. These Commandments were not merely arbitrary afterthought, not something "added" to human nature; they were, except for the detail concerning the Sabbath, a divine formulation of something already existing in that nature. Any man with sufficiently developed reason and with sufficient opportunity could arrive at the same conclusions, and even more detailed ones, by an intense study of his own nature.

This law of human nature, existing in the nature itself, is called the *natural law*. It is called a *divine law*, to indicate that it originated directly from God, not from man. It is sometimes referred to as the natural *moral law*, to distinguish it from the laws that express the nature and properties of irrational things (e.g. the law that certain things will burn under certain conditions). It is often said to be "written in the heart of man," to signify that God expressed His will in the very creation of human nature, and that this will exists independently of any written or oral formulation—also to show that it binds all men, not just a certain group.

Like other analogies, this one may limp and may be inadequate to express the full truth; yet I trust that it sufficiently explains what is meant by the natural law. And I hope that it also makes clear why a double standard cannot be admitted when there is question of the principles of natural law and of their application to medical cases. For, since this law is the same for all human nature, it holds

equally for non-Catholic patients and Catholic patients, for Catholic doctors and non-Catholic doctors.

Competence of Moralists

I believe that all who really understand the meaning of natural law will readily concede that its basic principles are the same for all men, regardless of creed. But non-Catholics may legitimately raise this question: "By what authority do Catholic moralists claim to have the only correct expression of the natural law? They may be erroneous in their statement of principles; and they may thus be imposing an unjust burden on those who consider that the natural law allows certain things (e.g. contraceptive sterilization) which Catholic moralists claim to be wrong."

Before I answer this fair question, I should like to make two observations. First, the question should not be so understood as to give the impression that this is a matter of "the Catholic moralists against the world." As a matter of fact, many who are not Catholics accept and rigidly adhere to the moral principles and applications contained in our codes. Hence, though our moralists may claim to have the only correct expression of the natural law, they do not claim to be the *only ones* who possess this knowledge.

My second observation is this: the answer to the question really touches two spheres, the *religious* and the *scientific*, because the opinions of Catholic moralists have both a religious and a scientific value. I could hardly expect non-Catholics to accept the religious authority of the moralists, because this would imply acceptance of the teaching authority of the Church; hence I will stress the explanation of scientific competence and will later add merely for information, a few words concerning the religious aspect.

Scientific Aspect

What do I mean when I speak of the moralists' *scientific* competence? I certainly do not mean that they are experts in the science of medicine. An occasional moralist may also be a physician and may have acquired a profound knowledge of medicine; but as a group the moralists neither are nor claim to be medical experts. They are not judges of good and bad medicine (except in obvious cases that should be apparent to anyone: e.g. that a pathological condition of a fetus is not remedied by craniotomy); they leave such judgments to competent medical men.

But the Catholic moralists do have a just claim to special competence in the *science of ethics*, the science of moral right and wrong. They are highly trained and experienced men in this particular field. Their preparation for this professional capacity is intense and comprehensive; they usually teach the science of morality over a number of years, and they are constantly dealing with practical applications of this science. Aside from any question of religion, the Catholic moralists represent by far the world's largest group of specialists in the science of ethics. And they have a tradition of scientific study that extends over centuries.

When such men agree on the statement of a principle of the natural law or on the application of a principle to a definite type of ethical problem, their unanimity is worthy of at least the same intellectual respect that is accorded the agreement of expert mechanics, physicians, lawyers, chemists, and so forth, in their respective fields. Their united opinion can reasonably be challenged only by those who have made a penetrating study of the natural law and who can offer sound reasons for their dissent.

(I have insisted here on "agreement" among the moralists. Such agreement gives a sound scientific argument for the correctness of principles and of many applications. As a matter of fact, there are many points of ethics, and particularly of medical ethics, in which the issues are not yet clearly defined and in which, therefore, there is a legitimate difference of opinion. In these cases, our codes do not force either opinion on physicians.)

To this brief discussion of the moralists' scientific competence, I might add one observation, which many non-Catholic medical men have no doubt already noted. Catholic moralists are not sour individuals who are bent on projecting their own frustrations on other people by trying to make life hard for them. Physicians surely experience no morbid satisfaction when the sound principles of their own science force them to tell some disconsolate patient that he must undergo a serious operation or go on a heroic diet in order to save his life. Nor are moralists without sympathy when they must give similarly "hard answers" because the law of God, expressed in human nature, demands such answers.

Religious Aspect

I should like to add a word concerning the religious competence of Catholic moralists. To do this I shall have to explain something of the Catholic position on the authority of the Church in moral matters. Let me repeat that my purpose here is merely *informative*; I have no intention of turning this article into a one-sided debate.

The Church, as Catholics conceive it, is a perfect society founded by Christ (whom we believe to be the Son of God). The Church

can make laws for its own subjects, just as civil governments can legislate for their subjects. Laws made by the Church are *human* laws; and as such they bind only the subjects of the Church. It should be carefully noted that, contrary to the impression that some people have, the Church does not claim the power to make laws for those who are not baptized.

But the Church does claim that, besides lawmaking power, it also has *teaching* authority; and this teaching authority includes in its ambit the whole of divine revelation, as well as the moral law; and it extends to all mankind because both revelation and the moral law are for all mankind. Thus, though the Church cannot *make* the natural law, it does have the power to *interpret* that law, that is, to officially declare the true meaning and extent of that law. The encyclical on Christian Marriage contains several examples of such official teachings regarding medical questions: e.g. therapeutic abortion, eugenic sterilization, contraception, and the general principle concerning justifiable mutilation.

The Catholic moralist accepts these official declarations and is willing to be guided by them. I might add, however, that as re-

gards medical questions, the study and united teaching of the moralists has usually preceded the official declarations, so that these declarations were rather a religious confirmation of the moralists' teaching than a guide to that teaching. Moreover, official declarations on moral questions have been comparatively infrequent; the usual procedure of the Church is to allow the moralists to discuss and clarify questions of morality and to sanction their conclusions more by "quiet acceptance" than by official pronouncements.

Conclusion

A brief statement will conclude this discussion. We Catholics consider that the moral principles and practical applications in our codes *do have religious authority* because the Church has either explicitly pronounced on them or at least tacitly approved of them by allowing approved moralists to teach them. Yet we also consider that, aside from religious authority, the certainty of these same principles and applications has been firmly established on a *purely scientific basis*. They are, in other words, sound ethics, sound expressions of the natural law; hence we fear no injustice in insisting that they apply to all men, not merely to Catholics.