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Justice in Medicine

Rupert J. Ederer, Ph.D.

This talk was delivered at the 1978 annual meeting of the National Federation of Catholic Physicians' Guilds in New Orleans, Louisiana.

The title assigned to me sounds somewhat "preachy" so I will take the liberty of starting my talk with a scriptural passage. It is one which I feel is especially appropriate here, and it reads: "But everyone to whom much has been given, from him much will be required" (Luke 12:48).

There is no doubt in my mind that your profession — the medical profession — is one of, if not *the* most highly rewarded of all of the *learned* professions, and I mean rewarded not only in terms of income, but also in terms of public esteem. Let me hasten to add that, so far as I am concerned, you are fully entitled, in principle, to both a comfortable income and also to high popular esteem. You will note that I used the modifier "learned" in speaking of professions. That is because I am well aware that our society does not hesitate to make multi-millionaires out of its professional entertainers — its "show biz" people, and its professional sportsmen. That includes youngsters just out of college! Any society which is affluent enough to afford such extravagance cannot in justice expect its doctors to live along the borderline of poverty and drive jalopies that are liable to break down en route to the hospital! So relax. I won't tell you that you charge your patients too much, though I am not unaware that in your profession, as in every other, there are some profiteers at large. But I have to accept that, by and large, a highly educated and skilled professional who begins private practice somewhere around the age of 30, works too hard for too long hours and sees too little of his family, and dies before the normal life expectancy allowed to average mortals, is entitled to the good income which frees him of unnecessary economic anxieties. Perhaps you, above all, ought not to be victims of a condition which good Pope John XXIII scored in his encyclical *Mater et Magistra*:

Moreover, in the economically developed countries, it frequently happens that great, or sometimes very great, remuneration is had for the performance of some task of lesser importance or doubtful utility. Meanwhile the diligent and profitable work that whole classes of decent and hard-working citizens perform, receives too low a payment and one insufficient for the necessities of life, or else one that does not correspond to the contribution made to the community, or to the revenues of the undertakings in which they are engaged, or to the national income (*Mater et Magistra*).

Now quite obviously not many medical practitioners are suffering in this regard at present, but those words state an important principle which applies in your case, and they also indicate a disorder that applies to our American society at present.

I would rather address myself to the problem which is facing the entire medical profession at present. It is one which is also not without grave implications that extend far beyond the profession to affect all of us, because the medical profession represents one of enormous public utility and accounts for nearly a quarter of a trillion dollars of national expenditure! Permit me to say that I see certain similarities between what may be about to happen to your profession and what happened to another important occupational group some years ago — our nation's farmers!

Strange bedfellows, you say — doctors and farmers? Yes and no. Both are vital to mankind's survival, unlike some of the occupations which, while highly rewarded, generate luxuries that our affluent society could easily dispense with if it had to. And both are, by and large, passionately attached to their way of life. Perhaps that is where the similarities end. Doctors are generally held in high esteem and are well remunerated for their vital services. Farmers do not always enjoy the public esteem which they deserve, and more often than not, a good percentage of them do not get the share of the national income which they deserve. But what is it that happened to our farmers which may soon befall your profession? You may have guessed it. American agriculture today represents the most nearly socialized sector of our economy. That happened, mind you, even though no single occupational group traditionally put more stock in competition and trust in the so-called free forces of the market, or took more pride in its individualism. And today, no other major industry is more cluttered up with regulated prices and enervating controls on its output and subsidies of various kinds except perhaps the railroads, and we all know what has happened to them! (I have to regard public utilities as a separate case, since they represent a sector of our economy where for the most part, competition not only does not operate but also cannot be permitted because it would run counter to the public interest.) That is the frightening parallel, the hair-raising prospect which now faces your profession. Doctors too, individually and through their organizations, have been generally stalwart champions of private and free enterprise,

not only for their own profession, but also for our society. Is it possible that the practice of medicine will sometime soon become a socialized or near-socialized and over-regulated sector of our society as agriculture became back in the 1930's? There are ominous rumblings out of Washington as politicians jockey for positions with an eye to future elections!

Given the general conditions of our culture — which I have to concede is post-Christian — and given the prevailing trends at large ever since the 1930's, I would have to say that the prognosis is *not* favorable. There has long been an ongoing weakness of our resolve to solve our own problems without running to Washington for solutions. I would have to add a discomforting reminder that our culture is also handicapped by its British heritage, and we all know what has happened to Great Britain and British medicine. We still, at times, manifest our umbilical cultural connection to England and what the English do, even though we see before our eyes the dismal decline of Great Britain that is no longer great! Our bright young economists still maintain a bright-eyed, bushy-tailed devotion to Keynes and the pollution he introduced in the economic mainstream!

Another Remedy

I would like to promote another remedy, not widely known, given our post-Christian condition, and for the same reason it is not likely to be highly regarded by your contemporaries. Nevertheless, if we are once again to Christianize our society — and we have the mandate to do it — I can think of no group that is in a better position than your Federation to act as the all-important *leaven*, not only within your own profession but also in society at large. That is precisely because of the high esteem in which you are held by the general public. A materialistic society is more likely to go to its medical men for advice than to its priests — and that is true even in matters not strictly medical! If you have any doubt about the mandate I refer to, it was expressed by St. Paul when he told us, “. . . to re-establish all things in Christ, both those in the heavens and those on the earth” (Eph. 1:10). That was reaffirmed most recently by his namesake, our late beloved Pope Paul VI in an important and prophetic Apostolic Letter, *Evangelii Nuntiandi* (Dec. 8, 1975). The burden of that message was that we have to be prepared to evangelize the modern world — to reinfuse Christian principles in it.

That may sound trite to you. If it does, it may be because you are not aware that in a certain significant sense the Catholic Church had given up on the modern world as early as 1931. Otherwise it would not, in the person of Pius XI, have issued an important encyclical: *On Reconstructing the Social Order and Perfecting It Conformably to the*

Precepts of the Gospel. One does not reconstruct what has not been destroyed; also *reconstruction* implies that there once was a structure — in this case, a Christian social order — now gone! The best supporting evidence of that collapse is the routine unchallenged manner in which the men of our time speak of ours as a post-Christian society. Do not misunderstand me. Christianity will never die. We have that on the highest Authority! But we no longer have a society which operates on Christian principles. A Christian society does not destroy its young in the mother's womb, nor contracept human life by chemicals which, from all reports, are not even good medicine. Its women do not busy themselves trying to do all the things men have always done while avoiding what *only* women can do — assuring the continuance of the human race. You are no doubt aware that Pope Paul, who told us to evangelize the world, also told us, "The world is sick" (*Populorum Progressio*).

For each of us, evangelization begins in our own hearts, then extends to our families, and on to our professional group — our place of work. Those are the circles in which most of us spend most of our waking hours; and most of us have neither the time and the energies nor the talents — and therefore the vocation — to remake the world from the top, from the halls of Congress or the United Nations General Assembly. The top will one day conform to our Christian convictions if our personal lives and our families and our work places are put back in order. I feel there is too much misplaced energy going into reform at the top — with predictable, evident failure. I am in no position to preach personal reform to you, but I have been asked to address myself to the problem of what measures your profession might consider for perhaps restructuring itself along lines that are more just, therefore more Christian. With God's help, permit me to try to do that.

A world obsessed with motion and fads and modernity has blithely bypassed the vital message contained in what is still the basic blueprint for reconstructing social order on Christian principles, which are also natural law principles. The master architect for restoring order in the economic sector was, and remains, Pius XI. The guidelines contained in *Quadragesimo Anno* in 1931 are as valid now as then, and unfortunately even more ignored now than in the 1930's when our economy had collapsed. They are valid for all time. To be quite specific, I believe they offer also the best prescription for what ails or threatens your distinguished profession. Let me present them to you briefly in case you have forgotten them or were never exposed to them at all. They present a kind of *triad* of fundamental social principles which were never intended to operate in isolation from each other. Unfortunately, they suffered much, among other things, in translation from the original Latin, but we have to have the patience and endurance to get a proper understanding of them.

Pius XI and his successors urged the re-establishment of Christian social order on three principles: the reintroduction of the basic social virtues — *social justice* and its twin, *social charity*; *the principle of vocational orders or functional groups*; and the last, operable only if the other two are in place and functioning, *the principle of subsidiarity*. You might bear in mind that verse in some musical: “You can’t have one without the other.” Some unfortunate failures in ostensibly Catholic nations like Italy, Spain, Portugal, and Austria were traceable to attempts to implement the papal program while neglecting one or the other of the principles in this triad. Too often, reform began at the top while the support at the bottom was weak, or worse — rotten.

Let’s begin with *social justice* and *social charity*, which have as their object, not the good of one or the other individual, but the common good of one or the other society and of society as a whole. Unlike commutative justice, which requires that I render to each individual what I owe him, social justice requires that I render according to my capacities to any and all societies to which I belong and from which I derive benefits, what the good of such societies requires, i.e., their common good. That means that if I happen to be in a position of authority (father of a family, head of an organization, mayor, governor, president, king), I have to be sure that I deal fairly with those subject to my authority in apportioning tasks and rewards (distributive justice). On the other hand, it means that if I am subject to authority — a member of a society (family, professional group, city, nation) — I have to do what the just laws and decrees of that society require (legal justice), and beyond that, what the good of each such society requires (contributive justice). All of those obligations have to do with the common good and that is the object of social justice. (Cf. *Atheistic Communism*, Pius XI.)

Social Charity Ignored

Social charity, which Pius XI established as the twin virtue of social justice, has been largely ignored, and that helps to explain why the beautiful and important concept, social justice, has come to be so horribly misinterpreted and abused. Social charity is the virtue of charity, i.e., love or active concern directed not to one or the other individual, but to the general well-being or good — the common good — of any and every society to which I belong and from which I derive benefits. Among other things, *social charity* makes it more likely that I will practice *social justice* and do it in a more humane and loving, i.e., willing, way than I might otherwise. If all that sounds too abstract and if the entire notion of the common good seems too ethereal, consider for a moment what kind of life we would have if each of us lived in isolation without benefit of any human commerce

or social contact. The food on our table, the children at our table, the schools they attend, the sophisticated instruments of our profession, the concerts at which we relax — all are the results of human commerce and of living in society. They are a part of the *common good* resulting from social living. They are the reason why we have an obligation to be concerned for the good of any and every society to which we belong, from the family up to the state and, even beyond, to the community of nations. Those societies include the professional groups to which we belong — what comes across in imperfect translation as *vocational orders* or *functional groups* in the encyclical *Quadragesimo Anno*. We shall have more to say about the application of the social virtues when we address ourselves specifically to the problems now facing the medical profession. We must turn to those vocational orders or functional groups.

The second part of the triad of social principles calls for the re-establishment of functional groups made up of all who work at a profession or occupation or industry, whether they happen to work in, own, or manage such occupation or industry, i.e., functional group. Having so organized, the members of the respective vocational groups will be in a position to not only promote the well-being, i.e., common good, of their occupation or profession, but also to keep it orderly and to regulate it within the framework of the general common good. Now to generations which have been oversensitized against whatever sounded the least bit “medieval” (write “Catholic”), such a notion has become abhorrent. It smacked of restoring *guilds*, and everyone knows that guilds were “Catholic.” Here I am fortunate! The idea of regulating an occupation or industry by a guild-type structure should not sound outlandish to members of the *National Federation of Catholic Physicians’ Guilds*, should it? In fact, it should seem almost downright natural to the members of a profession which more nearly conforms to the idea of self-regulation by guilds, or academies, or associations, than almost any occupational group in our post-Christian society.

Believe me, the idea does sound strange and medieval in a post-Christian society where men are organized not into self-regulation bodies but into warring camps where the name of the game is: extract so much as possible from the other party while giving as little as possible in return to what still happens to be the product of our joint efforts. (It is that deplorable condition which helps to explain why the Japanese and West Germans, who don’t operate on that principle in the main, are beating our hides off in foreign trade!) But, you see, you physicians are already half-way home. That is, of course, partly because you do not, for the most part, operate in the employee-employer situation which has fragmented our labor market all too generally into what Pius XI called, “. . . an arena where the two armies are engaged in combat” (*Quadragesimo Anno*). What remains to be done, in your case, has more to do with re-establishing the social vir-

tues among the members of your profession. And I don't have to tell you that is done far more effectively by example than by preaching. To the extent that you succeed in this leavening process, your profession can succeed in fighting off the inroads of Big Brother, the State. And that brings us to the third and final part of the triad of Christian social principles.

The *principle of subsidiarity* is only a little less widely misunderstood than the other basic social principles. It rests on the common sense, i.e., natural law, notion that the purpose of societies, including the highest secular form, the State, is to serve man and to help him reach his ultimate destiny. The reverse of this is unnatural, and we call it *totalitarianism*. Accordingly, one does not turn over to higher up and farther away organs of society functions which can be done at the lower levels or even by the individual, who are after all more familiar with and concerned about problems at hand. That process — all too prevalent in our time — Pius XI called “a disturbance of right order” (*Quadragesimo Anno*). With such disturbances of right order come not only a loss of legitimate individual freedom of action, but also inefficiency and the unnecessarily high costs with which we are all too familiar in our age of big government. People do not have too much difficulty understanding and accepting that principle precisely because it appeals to common sense. In fact, the paragon of native American common sense, Abraham Lincoln, proposed basically the same principle in a speech way back in 1854! However, what many fail to appreciate is the other side of the subsidiarity coin.

Sometimes Big Brother moves in to take over functions, not because of malice or arrogance on his part, but because “Little Brothers” are failing to do what they can and ought to be doing. In other words, *the principle of subsidiarity* can be violated by sins of omission as well as by sins of commission! Specifically, such sins of omission occur when the other two principles of our triad fail to operate. If individuals are lacking in the requisite social virtues, and when they fail to structure themselves into self-regulating orders which make the practice of the social virtues much easier on the individual, that is when we get the massive incursion by Big Brother, the State, moving in to do what has to be done but what those who are in a far better position to do are failing to do! I think you are beginning to discern what we are talking about in our own specific context. In fact, at this point I could head for the exit and say simply, “You are uncommonly intelligent men — prudent men — see to it. Apply these splendid principles, and good luck.” But permit me to linger just a moment longer. Sometimes the mere repetition of principles, no matter how splendid, without attempting to apply them to our specific concrete situation, renders them sterile. People tend to become impatient with high-sounding platitudes.

Your profession is face-to-face with some kind of nationalized

health insurance, and that could vary from the more benign type like that operative in Germany since Bismarck's time, to the more malignant form that has gone far, we are told, to ruin medical practice in Great Britain. I suspect that if the worst comes, it may well be because of what your profession has failed to do or not do. I have had various good doctors tell me over the years that, in effect, if socialized medicine finally does come in our country, the blame will rest squarely on the medical profession itself. That sounded to me like a cry of exasperation, dissatisfaction with what perhaps too many members of their own profession were doing or not doing! In terms of our Church's social teachings, it suggests that one or all of three things may be happening.

'Market Mentality' Adopted

First, too many members of the profession may be failing in their active concern for the overall common good (social charity). Accordingly, they have perhaps adopted a market mentality which persuades them they have to get what they can get out of our affluent society "while the getting is good." And they set about doing this without fretting about their responsibilities to the good of society (social justice). For example, local newspapers back home twice within the past year gave front page play to the results of studies showing that the fees and incomes of medical practitioners are outpacing the rate of inflation. You may be certain that such journalism does little for the esteem in which the public has normally held your profession. More for you means less for me, after all, and those who lose in the scramble begin to appeal to Big Brother for help, as kids have always done when they felt they were taking a beating at the hands of the neighborhood bullies. Now here we come face to face with a practical problem. An individual in a general market situation is more likely to exercise restraint if he feels reassured that his competitors, rivals, colleagues or whatever, will exercise the same restraint. If not, he feels like a victim and is inclined to join in the mad scramble, come what may. That brings us back to the second of our social principles.

Functional groups, vocational orders, professional organizations, guilds — call them whatever you will but be sure to cultivate them — have as their precise purpose to make it easier for the socially responsible individual to perform according to his better judgment — his conscience. Operating within their structure, he feels reassured that other members of his occupational group are following the same rules as he. You doctors have the advantage that you already have such organizations. You have only to be sure that they are on the right track, i.e., fostering not merely the interests of your profession, but doing so always with an eye on the broader common good! You are in a far

better position to determine precisely what concrete measures are to be taken in the 1978 context of American society than Jimmy Carter who has many problems, or even the HEW which, to say the least, has more responsibilities than it can even now handle. For example, could I suggest that doctors' organizations, all of them, study very carefully the working of medical plans already now operative — like various health maintenance organizations? If you find them suitable for providing general health care, do not hesitate to promote them and encourage their introduction on a wide scale. If not yet suitable, work to make them so. That is social justice and social charity in operation, and that makes subsidiarity operative.

May I point out that if the nation's employers had, in the 1920's and 30's, introduced on a grand scale the kinds of profit-sharing plans that are so highly successful in many firms today, we might have been spared the cumbersome, costly and nearly bankrupt social security system for providing pensions in old age. We could have saved ourselves billions and avoided that heavy albatross that hangs around our necks and threatens to pull us under.

Now the battle line is around national health care. *If it is not already too late*, we could all spare ourselves being burdened by another such overweight bird with which some politicians are even now preparing to saddle us. I don't have to tell you, the hour is late. It is precisely the third principle of the social triad that is fighting for its life now, perhaps because we have failed to implement the other two! The *principle of subsidiarity* requires that individuals and the lower organs of society do what they can do to solve urgent problems before higher levels usurp these functions. That presupposes, again, individuals who act as socially responsible and concerned persons, aided by appropriate and socially responsible intermediate social bodies which can shoulder the burdens and perform the functions that individuals by themselves cannot manage. If these two parts of the triad are in place, or, once again, if the "Little Brothers" are doing what they ought, then Big Brother, whose increasing incursions into our lives we would like to limit and forestall, can be left to do what only he can do. And he can do that far better if he is unencumbered by myriads of tasks which are making him highly inefficient and suffocating us all by an encroaching socialism.
