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E. J. Drummond

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Why A Catholic Medical School?

Reverend E. J. Drummond, S.J.

The first, immediate, and best answer to that question is—to educate capable doctors. Actually, however, the question in the title is but the label for a whole bundle of questions some of which are not so simply answered but which are often thought about and frequently asked. We select a number. What effect does Catholic medical education have that is specific or particular to it? Is there such a thing as Catholic medicine? Catholic psychiatry? Catholic obstetrics? Catholic schools recruit non-Catholic students and non-Catholic faculty members; what are their rights and responsibilities? What is the purpose of the time and money and dedication involved in Catholic medical education? Why not leave it to the schools with state support? What is the role of Catholic medical education in the United States in the decade ahead?

When we make such inquiries or try to answer them, we might ask one more question—are we talking about a profession, an educational formation, a theology, a culture, or what?

Father Drummond is Vice-President of Medical Administration, St. Louis University School of Medicine.

My purpose in these remarks is only to leave some ground for common understanding and to fix the dimensions of the general problem, so that proper approaches may be made to more specific questions when these are discussed.

What are the objectives of Catholic medical education? The answers tend to be one of three kinds—that of history which says that since the decision has already been made at some Catholic universities to have medical schools, we cannot do otherwise than to carry the venture forward as long and as well as possible. The second kind of response is that such medical schools provide a religious setting or atmosphere for students during their years of study. The third answer endeavors to relate a Catholic university and medical education to more basic issues, and I think of the university and the school of medicine on firmer grounds.

To take the first category. Jesuit universities developed in the United States some of them adding medical schools to their university structure and so committed themselves to medical education. Saint Louis University was the first to do this back in the 19th century. Social institutions are products of their history, genetic and environmental, and in their development must remain vitally connected with that history; nevertheless institutions like individuals have something of their destiny within their own hands. Within limits, institutions and persons can say and do something about what they are and what they are going to be. So I do not regard "historical determinism" as an adequate explanation of Catholic medical education.

Again, while it is true that a Catholic medical school can and should provide an atmosphere which affords a kind of protection for the student from the secular or a-religious or a-moral influences he may encounter on this or that campus, that can hardly be made the goal of Catholic medical education. First of all, it is a negative or at best a defensive position. Furthermore, the providing of an atmosphere or climate, however important these may be, is not precisely the same thing as providing an education.

In the United States higher education, for all our present concern about it at national levels, grew and developed initially because of concern and support at the local and community level. The churches were among the first and most active to show this concern and support. So it was understandable and appropriate that such groups right from the beginning had a religious or moral purpose in founding colleges and universities. The same kind of motivation led also to the founding of many of our hospitals. While immediate church support and affiliation has lessened between many colleges and the churches which founded them (this is less true of hospitals), it is far less the case for Catholic institutions; and it is quite certain that there is no such thing as a good Catholic hospital unless it is a good hospital, nor a good Catholic college or medical school unless it is a good educational institution. It then becomes quite clear we must make some distinctions about purposes.

To illustrate, let us use an appendectomy as an example. As a piece of surgery its purpose is to give the body an improved opportunity to maintain or restore its normal functioning. As something done by a particular physician, its purpose may be to earn a fee, save a life, perform an act of charity, or demonstrate clinical skill. Or to take an analogy from literature. By making distinctions we can say quite properly that the purpose or objective of a poem is to provide a kind of enjoyment; but the purpose of the poet may have been the same or very different—to earn money, to get something off his chest, or to unfold a particular vision to a hoped for audience. So there are purposes and purposes.

I do not, therefore, wish to overstate or underestimate the influences of secularism in or out of educational institutions, nor much less omit the value of the sacraments to which a student has such ready access at a Catholic school. Certainly the impact that Catholic students have on...
one another is important in the education process. Nevertheless, in terms of strictly educational purpose there are difficulties in accepting the religious setting or atmosphere as the only answer or as fully adequate to justify the effort and expense in time, in men, in money it takes to manage a Catholic medical school.

There are more basic reasons for Catholic universities and Catholic medical education. We speak briefly about one reason—that of witnessing. Universities are committed to the pursuit of truth and to its communication to others. In this a Catholic institution is no different from others. Still the pursuit of truth can be carried out under various organizational structures and according to various philosophies and traditions. In a pluralistic society like our own, if it is not to become a mere mishmash and operate at its lowest common denominator, there must be examples of what the units in that pluralistic society hold together. And these examples must be given by witnessing in a fully committed way.

The Catholic Church through her universities can show her concern for the pursuit of truth, being eager, committed, zealous. Today it is easier for all of us in and out of the Church to comprehend in more positive terms the Church's desire to build "a bridge to the contemporary world." In that contemporary world the universities are concerned with the expansion of knowledge and the communication of it to others. Universities are important because within them are dedicated men, because in them new ideas to aid man as well as to shape the destinies of continually being forced and because from them come the readers of tomorrow. So if there is to be a bridge to the contemporary world, part of the Church's building must reach out to the world of learning, the scholar and the university. In what she currently does in the pursuit of truth at Catholic universities she actually and really witnesses her belief that truth is worth pursuing—because knowledge can assist him to a better life in a hundred ways, because knowledge makes freedom possible, because all we know is a part and further revelation of God.

The Church does not bear witness through her universities and they are to be her witness to the world. This also applies to her medical schools and for the same reason. Today there are problems facing man with which the medical schools are and must be concerned—the old problems of pain and disease, as well as problems of genetics, problems in molecular biology, problems of genetics and population. However, in solving these schools and scholars must be sure they do not further speed up the process and increase the pressures that appear bent on depersonalizing man. In this world of change in which we live, the most significant social change is our increasing sense of alienation from each other and from the deep inner self. In the daily context of our living we feel so caught up in forces not our own nor of our own controlling that we exert little personal responsibility and without which we will be caught in a tangle of pulls and pushes. Our pluralism is rapidly becoming one of interdependence rather than of integration. We are becoming fragmented, decentralized, and await direction.

In our own time we have seen the air age, the age of synthetics, the atomic age, and the space age. In consequence of the new discoveries in molecular biology tomorrow may be a DNA age with implications beyond our present guessing. It is important that the Catholic medical school indicate the same zeal in the quest for biological and clinical truth as any great medical school will evidence, and at the same time it is necessary that it bear witness always to the importance of the human person.

Ignatius of Loyola who founded the Jesuits said that love is proved by deeds rather than by words. So it is not enough to speak of good deeds and corporal works of mercy, to talk of charity and the healing art. There must be good Samaritans who do and who bear witness. Because it becomes man to know, because knowledge can improve his life and way of living it, and because knowledge tells us more of God, the Catholic Church reverences learning and research in the medical sciences and states that she does. But statement is not enough. She must witness her belief by deeds—by having medical schools.

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