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## Editorials

Catholic Physicians' Guilds

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## EDITORIALS

### PROPAGANDA

Abortion is the planned propaganda theme for 1965.

In prior years, a well-engineered sales campaign for contraception paid dividends beyond the hopes of its promoters. Heralded as a significant contribution to humanity, hormonal birth control was popularized in magazines, the press, radio and television. Impartial(?) panel discussions lulled an emotional citizenry into developing a blind spot toward subtle bias. In a nonce, champions of *change in the thinking* of the Church arose within the ranks. This conversion accomplished, the promoters relaxed and diverted interests and funds to phase two:

The Association for Voluntary Sterilization, Inc. announced the new front in the Jan. 15, 1965 issue of *Time* magazine. A spring letter states: "This Association carries on a threefold program of research, education and service 'to make known the benefits of voluntary sterilization in the solution of family and population problems.'" It alleges a roster of 1500 cooperating physicians. The name signed to this letter, as chairman of the Medical Committee, is unmistakably similar to that of the president of Planned Parenthood.

Phase three is humane abortion, substituting sentimentality for principle, the programmers are using the same communications media, the same appeal to emotionalism, the same efforts to seduce existing laws. Indeed, it appears that even the good graces of ecumenism are being subverted for erroneous ends.

Rebuttal is needed — nay, repudiation! 1. This propaganda, followed logically to ultimate conclusion, can lead only to a justification for another Hitler, or Dachau, or Austerlitz. 2. No physician has a right to take life; his duty is to preserve and protect it. 3. Again, this brain-washing is in sharp contrast to the proposal of the present administration whose image of the Great Society is based on the right to life and on the rights life gives to the individual. 4. Finally and unequivocally, abortion is murder!

**W.J.E.**

## ATTITUDES

In 1921 Msgr. William J. Kerby, founder of The National Conference of Catholic Charities and instrumental in founding The National Catholic Welfare Conference and establishing The Catholic University of America, wrote:

Poverty is . . . our common concern.

[But] "there are many assumptions floating around in the world that do great harm to the service of the poor. To assume, for instance, that the poor exist in order that the rich may have occasion to exercise certain virtues toward them; to assume that the poor are entirely to blame for their poverty or not to blame at all; to assume that they are born to their lot and should not be disturbed by any attempt for better things cannot fail to work disaster upon both strong and weak. There is no other field of human endeavor wherein painstaking observation, freedom from bias, docility of mind and discipline of purpose are so necessary as in working for the poor. . . ."

It is a challenge to Christianity. The individual Christian gifted with powers and resources is called upon to examine his conscience and test his philosophy of life and his schedule of values by the spirit and commands of Christ. . . .

If we are quite content with the results of our work for orphan and wayward children who come before the juvenile court, the aged poor, dependent families, particularly those in need of medical attention, foundlings, widows with little children and the like, we shall neither seek nor make progress. . . .<sup>1</sup>

Today it still is customary in some quarters to ignore the health care of the poor and to assume that most municipal health facilities and programs for them are adequate and readily accessible. But the Judeo-Christian conscience cannot ignore the poor. Nor can the vocation of medicine bewail the effects of social and economical influences on the health of mankind. For medicine is not parochial; its boundaries and limitations are not social and economical status, color and race, nor age and religion; its sole aim is to provide the greatest number of human beings with the best possible medical care.

The vocation of medicine is the kind reflected in the attitudes of innumerable good physicians who deal comprehensively with all patients as human beings without being less scientific. Call it what one will, even social or environmental medicine, it is the kind that expresses concern for the health of society and its communities. Indeed it is the kind of concern that realizes the security of medicine as a profession is in its service to mankind.

<sup>1</sup>Kerby, W. J.: *The Social Mission of Charity*. The Catholic University of America Press, Washington, D. C., 1921.

In this regard, almost 45 years after the publication of Msgr. Kerby's, *The Social Mission of Charity*, Dr. Lowell T. Coggeshall, vice-president of The University of Chicago, in a report submitted to the executive council of The Association of American Medical Colleges, states:

Advances in science and in health care have stimulated the health expectations of individuals . . . people today are being taught to expect good health care. . . . Only in the present century have men begun to find that most health hazards can be eliminated, controlled, or subjected to amelioration. With this knowledge has come the expectation that health care will be made available. . . .

In addition, the report continues,

Not only have expectations risen, but, more importantly, an attitude of 'entitlement' is becoming increasingly prevalent. This is doubtless a product of the social and educational changes of the past half century. As in the instances of police and fire protection—long accepted services to which the individual is 'entitled' in time of need—the growing attitude is likely to be expressed in terms of expecting general health protection regardless of individual ability to pay.<sup>2</sup>

<sup>2</sup>Coggeshall, L. T.: *Planning for Medical Progress Through Education*. Association of American Medical Colleges, Evanston, Illinois, 1965.

F.M.T.