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The Justification for a Catholic Medical School

LEONARD W. WORMAN, M.D.

Answers to the question of the need for Catholic medical schools differ. Harassed university presidents, frustrated deans, ambitious department chairmen, impecunious faculty, tuition-poor parents and status conscious students reply briefly or expound at length, not necessarily proportionate to the thought they have given the subject. History and tradition are invoked. The value of atmosphere and hope of transmitting virtue by proximity or by a table of organization that includes a religious, the fear of secularism, the vanity that we are just as good as "they," the taint of smugness that we are unique when we advocate ethical practice and high moral standards and emphasize the true worth of the individual, the needs of small Catholic hospitals that could not be staffed were it not for the kind of physician (?) graduated by Catholic medical schools, the suspicion that Catholics seeking admission to private and state medical schools are discriminated against, the role of physicians as community leaders, the shortage of physicians, and the fact of present ownership are among reasons that have been offered to justify the existence of Catholic medical schools.

Running through these answers is the recurring theme of some kind of moral obligation to have Catholic medical schools. It is implied that there is a moral medical science, and that in order to know it and teach it Catholic medical education is necessary. It would seem more appropriate to consider medical science as correct or incorrect. Correct medical science will not propose illicit conduct, but the validity of our moral judgments cannot be based solely on our current scientific understanding. Physicians and patients insofar as they are capable of human acts, i.e., those proceeding from deliberate reason and free will, are the determinates of the morality of what is done. It is people who are moral, not medical science and the norms of morality must come from outside the medical school, from philosophy and theology and the Church.

This distinction is important. If we have an obligation to have medical schools, then we must simply do the best we can with what we have. If we are exercising a right that is not a strict obligation, then justice demands that we fulfill all the requirements of quality medical education.¹ I am not at all sure that we have a clear view of this respon-

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¹ Objectives of Catholic Physicians and Catholic Hospitals. John J. Flanagan, S.J. LINACRE QUARTERLY, 32:109-112, 1965.

sibility to quality, and glossing over our defects with the idea that we are obliging a moral need is a confusion of ends and means that ill suits us.

Is our curriculum really unique?² At least in one school only 0.51% of the curriculum hours for four years of medical school is devoted to medical ethics. This, plus a student retreat each year, are requirements that could easily be met anywhere. Even if one were to grant the possibility of achievement by osmosis in the milieu of the university, the site of medical education is sufficiently remote from the university to doom the student to spiritual starvation if the aura of sanctity is the only source of such nourishment. Then there are the four or more years of post-graduate work for which we also have responsibility, with even less offered that is uniquely Catholic.

Theoretically, Catholic medical schools witness that the Church considers the pursuit of (scientific) truth and its communication to others as worthwhile activities.³ Practically, it is discouraging to discern among graduates of Catholic as well as non-Catholic schools a sizable physician population, hostile, fearful and scornful of educators and research scientists in general. It is a mystery that Catholic medical schools and Catholic hospitals continue to pursue their altruistic, divergent ways. This distrust and lack of mutual goals among the Catholics

in the community, regardless of who is at fault, witnesses a narrowness that merits the distrust of non-Catholics who cannot but wonder at our motives.

We have been admonished by Pope Paul, VI and the Second Vatican Council, "Therefore, by their competence and secular training, and by their activity, elevated from within by the grace of Christ, let them vigorously contribute their effort, so that creative goods may be perfected by human labor, technical skill and civic culture for the benefit of all men according to the design of the Creator and in the light of His word."⁴ The call to perfection in carrying out daily human tasks is not new in the Church, but it is newly specified. It is not sufficient to be well intentioned, not even to be well intentioned and pious. Work is an essential part of the prayer life of the laity, and technical competence is an obligation imposed by the call to perfection required for salvation.

Character formation is not a goal peculiar to Catholic medical schools and perhaps is not even a suitable primary objective for any medical school. Physicians would fare much better as Catholics if they went to medical schools (in any university) only after becoming well founded in principles of philosophy and theology and doctrine, with piety developed through religious practices somewhat more austere than those

achieved by viewing football movies at a Holy Name communion breakfast. The preservation of the faith is the concern of the Church and all of us who individually make up the Church regardless of where we are. Grace is mediated through the sacraments, not through medical science.

A medical school to justify its distinction as Catholic must have a faculty distinguished for its learning, and must have among its objectives the education of physicians who will distinguish themselves by their skill in the practice of medicine. Witnessing through technical perfection is

newly commanded. If this kind of medical school is a worthwhile objective justified by community needs, then it must become the concern of the Church to bring about to this end more cooperative efforts of its diverse members than has been the rule. We must not engage in activities in the name of the Church in a way that will disparage her. If professional excellence is not a suitable primary goal, then medical education should be abandoned by Catholic universities since the whole process can be accomplished more cheaply and more effectively elsewhere.

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² The Need for Catholic Medical Schools. Richard L. Egan, M.D. LINACRE QUARTERLY, 32:48-49, 1965.

³ Why a Catholic Medical School? Rev. E. J. Drummond, S.J. LINACRE QUARTERLY, 32:294-297, 1965.

⁴ Constitution on the Church, the Second Vatican Council. Page 36, Pamphlet, National Catholic Welfare Conference, 1312 Massachusetts Avenue, Washington, D. C., 1964.