
Mary J. Lorsung

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a middle ground between romantic fantasy and continued hostility. It's here that they develop a working relationship which is real, human, and satisfying.

Marriage counseling will not solve everyone's problems, and many couples should not have married in the first place. But the priests in New Jersey feel that their efforts at least break the destructive pattern of unhappy marriage in some cases, and are therefore of greater value for future generations.

These examples — referral agent and marriage counselor — certainly do not describe all the roles that the priest can play. They are chosen to illustrate the possibilities and the limits of pastoral care in regard to persons with some specific problems. All priests, however, should have a basic confidence in and respect for the counseling disciplines of psychiatry and psychology. At the same time, the priest should be cautious about sending everyone with some anxiety or insecurity to the mental health professions. And, as indicated at the outset of this article, the priest should seek out new ways of cooperating with physicians, psychiatrists and psychologists, and community mental health facilities.

Accepting his own limitations and spurred on by a deep reverence for personal integrity as well as a dedication to his pastoral responsibilities, the parish priest can be a valuable member of the mental health team, and also a great help to those persons who need a stabilizing influence on their way to personal maturity.

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**Catholic Physicians' View — St. Luke's Guild of Boston**

A Study Conducted for St. Luke's Guild of Catholic Physicians

_Synopsized by Mary J. Larsung, Assistant to the Editor_

“At a time when traditional moral values are challenged and the fundamental question of human life is attacked, the need for intelligent direction, guidance and counsel especially within the discipline of medical ethics seems conspicuously appropriate today.”

“Through this study Catholic physicians say they recognize the need and have the strong desire to receive such counsel.”

“In fact, these physicians both recognize and endorse the efforts and contributions of St. Luke's Guild. They say that the guild has been true to its purpose: to promote a better understanding of the moral and ethical principles that should guide the medical profession.”

Thus begins the summary of a survey of active and inactive members of the St. Luke's Guild of Boston by Becker Research Corporation conducted in the fall of 1970.

One hundred and five physicians (50 inactive members; 55 active members; For purposes of the survey inactive members are referred to as “non-members”) were the sample questioned by the independent research group to: determine the present image of the Guild as perceived by its members and the difference in this image between active members and potential but inactive members; obtain the membership's evaluation of the Guild's present purposes and activities; determine whether the membership believes that the Guild still has an appropriate role to play in 1970's, and if it does what they feel the organization's objectives, activities and programs should be; explore the reasons why inactive members are not active, and to examine ways in which they might be motivated to undertake more active participation in the Guild.

Those physicians, surveyed by telephone, were selected by systematic sampling procedures from alphabetized lists of both active and inactive members — a total of 509 names. Some of the results and highlights of this survey are presented in this issue of _Linacre Quarterly_ because of continuing interest in the study by many people associated with local guilds, as well as the National Federation of the Catholic Physicians' Guilds, and because the information gath-
At least undoubtedly be of interest to many guild members and officers facing similar questions within their own organization.

Among the "highlight and implications" listed in the summary section of the reports of findings of the survey, prepared by the research organization, are the following points: (numbering below is not that of the survey)

1. Physicians strongly endorse the Guild to have an appropriate role for this decade and they feel that it provides a forum that is not found elsewhere.

2. Likewise they feel that addressing itself to those medical-moral issues is the appropriate role today for the Guild, a valid reason for its continuance.

3. Catholic physicians favor direct involvement of the Guild in active lobbying efforts in the legislature as well as pledging professional services to health-care projects in the inner city.

4. The majority of physicians believe a wide range of medical ethical opinion may be found among the Guild members.

5. Younger physicians are disposed to become Guild members but presently the majority of the members are over fifty years of age.

6. Membership appeals equally to physicians who have not received undergraduate degrees from Catholic colleges and universities and those who have received these degrees.

7. Personal religious thinking does not determine Guild membership. A balance of thought from conservative to liberal is to be found among the members.

Some of the questions — an responses — which were used by the researchers in obtaining the information from which the conclusions and implications of the survey were formed are presented below.

In determining the image of the Guild and whether physicians feel it is fulfilling its purpose, they were asked their opinion of each of the six positive statements.

Among these statements were:

The Guild provides visible leadership in proclaiming the medical ethical implications on current medical practices.

The respondents were also asked their opinions on a set of six negative statements which included: The Guild is old-fashioned and behind the times.

The Guild seems to have resisted the changes in the Church urged by Vatican II.

The range of medical ethical opinion represented among Guild-associated Catholic physicians was ascertained by including a general statement as to this subject among the six positive statements and later asking specific questions regarding attitudes toward abortion and birth control: A wide range of medical ethical opinion may be found among the Guild members from very liberal to very conservative.

Would you be for or against passing a state law in Massachusetts making it legal for a pregnant woman to have an abortion on demand?
Would you be for or against extending the present state birth control laws in Massachusetts to make it legal for unmarried females to obtain birth control information, pills, and devices?

Reply: For Against Qual. Don’t know
Total 30% 60% 5% 5%
Members 33% 62% 2% 3%
Non-members 28% 58% 8% 6%

The physicians were also asked: In your religious thinking, especially in relation to the current changes in the Catholic Church, do you consider yourself more of a liberal, more of a conservative, or more middle of the road?

Reply: Liberal Conservative Middle Don’t know
Total 30% 30% 38% 2%
Members 33% 27% 38% 2%
Non-members 28% 34% 36% 2%

Using results from a list of various activities planned or proposed by the Guild about which respondents were asked to indicate the strength of their interest in participating or attending, the researchers concluded that, Catholic physicians want information on current medical-moral problems and they want to discuss these issues with non-Catholic physicians.” It is also noted that “... a program designed to help physicians with personal alcohol and/or drug problems elicit very positive responses from the majority of physicians.”

Besides many other specific questions relating especially to the details of Guild functions, leadership, meetings, etc. the following question was asked: If you were the President of the Guild, what would you consider its principal role over the next few years?

The following are just a few of the many and varied responses received which might be of interest to any Guild member officer and, we expect, many of our readers.

Members
Guild should build up opportunities for interchange of opinion between Catholics and non-Catholics as well as more programs in the medical-legal field.

Voluntary group for religious exercises for discussion on moral problems especially with members of other professions.

Evaluate medical-morally current documents in scientific medicine and delivery of medical care: include pre-med and medical students from the standpoint of moral problems.

Keep as active as possible on medical-moral issues - keep up to date and participate in state legislation.

Delivery of medical care to disadvantaged people.

Role: medical-moral aspects of youth - young adults - educational aspects.

Professional group should provide lectures with leading figure less emphasis on lobbying, more inner city activity — providing funds.

Non-members
Coming to grips — basic changes in modern theological thinking and thereby re-evaluating moral problems in medicine. To encourage active theological controversy among physicians.

Get involved in politics, in church politics, drugs, alcoholism.

Should give post-graduate courses in medicine-moral issues relating to Catholicism.

More interest in community health problems.

Our readers are reminded that the thorough, authoritative interpretations of the findings obtained through the use of forty-eight questions took nearly fifty typed written pages. The present collection of sample questions and conclusions are meant only to acquaint our readers with those points which seemed to be of most general interest, without repeating lengthy rationale for questions and/or interpretations of results. We also have not attempted to present the Becker Research Corporation’s full explanation of methods and procedure. We have attempted to briefly indicate sample areas of concern by the officers of one of our member guilds and a sampling of responses received which, depending on many factors of size, geography, activity, will be of greater or lesser pertinence and interest to other affiliated guilds.