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Newman on Medicine and Morals

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The field of medical ethics generally, and of Christian and Catholic medical ethics in particular, after a long but tenuous history, has developed prodigiously in the last half of the present century. It has generated an immense literature, even more complex, which continues to expand and ramify impressively. Its subject matter has become an ordinary ingredient of general and popular, as well as of specialized and professional education. And, as with other disciplines which have come of age, it has begun to express a secure sense of identity and maturity by taking keener interest in its remoter history. Thus, for example, the four large volumes of the *Encyclopedia of Bioethics*, itself an eloquent indication of the present amplitude of its subject matter, significantly include a 272-column-long article on the general history of medical ethics, as well as substantial historical introductions to many articles on more specialized topics.¹

Among those of us who have taught medical ethics, some, at least, have become persuaded that not a few of its problems tend to be more essentially grasped in the simpler circumstances of earlier instances, or in the course of gradual development. As in other areas of ethics, this seems especially true with respect to matters of rather broad philosophical principle.

My purpose here is to suggest that a small but significant place in the history, especially of Catholic medical ethics, might well be allotted to a writer whose chief fame derives from quite other fields of intellectual endeavor, but whose cultural stature is of that high order which warrants attention to even rather minor works on occasional topics. I wish to suggest further, however, that the work in question is of more than antiquarian interest, imparting a message of that basic sort which is most resistant to obsolescence.

John Henry Newman's ill-fated enterprise in attempting to create in Ireland, at the middle of the last century, a university for Catholics, is nowadays chiefly esteemed as the circumstance which gave rise to an

acknowledged literary classic, *The Idea of a University*.² The book we know under that title was produced by combining two earlier volumes, one first published in Dublin in 1852 as *Discourses on University Education*, and another published seven years later in London under the title *Lectures and Essays on University Subjects*.³ The latest of the writings included in the latter volume had been published separately in Dublin the year before, as *Relations Between Medical Science and Theology*, just after its delivery as an address to the students in the Faculty of Medicine at the new university.⁴ It was, in fact, Newman's farewell address to his Irish undertaking, being followed in a few days by his formal and final resignation of the university's rectorship. Considering the abundance and variety of both popular and scholarly writing about Newman, this address has been somewhat surprisingly neglected. Even that remarkably serviceable volume in which Rickaby indexed the standard edition of Newman's works, seems to contain no reference to it.⁵ Nor does it appear in the latest bibliographical volume listing secondary literature pertaining to Newman.⁶

Influence Upon History

The year in which Newman delivered this address at his newly-founded medical school was an important one in the history of British medicine and medical education. It was the Medical Act of 1858 which first undertook, by setting up the General Medical Council, to foster public standards, later imposed by law, for the training and practice of medical professionals. The previous half-century had seen a proliferation of unofficial norms and counsels for medical conduct, of which the earliest, influential in North America as well as in Britain, was Thomas Percival's *Medical Ethics*.⁷ It was a time, also, in which professional collegiality progressively gained ground against the currently prevailing spirit of competitive individualism, giving impetus both to a collective maintenance of standards and prerogatives, and to the monopolistic control over the medical market which obtained until the middle of the present century brought in socialized health schemes.

Newman's address was accordingly delivered at a time when there was much lively interest in moral reflections on the practice of medicine. Characteristically, however, the line of thought he pursued was by no means typical of the thought of his time, and focused upon an area of concern to which sensitivities are perhaps stronger now than they were then. What inclined Newman to develop that line of thought rather than more familiar ones were, I believe, two preoccupations which dominate much of his writing relating to the university project: first, the relationship between a university as such and its constituent departments of learning, and second, the relationship in a Catholic university of religion and theology to the interests of secular scholarship. The predominance of the latter preoccupation in his address to the medical students is indicated by

both the title he first gave it, "Relations Between Medical Science and Theology," and the one he afterwards substituted, "Christianity and Medical Science." The former preoccupation is more implicitly present in the address, having been developed already in a general way by the discourse published six years earlier, on "Knowledge Viewed in Relation to Professional Skill."⁸

That discourse was essentially a polemic against the educational utilitarianism of John Locke, adopted in the early 19th century by a group of notable writers in the *Edinburgh Review*, to criticize Oxford's classically-based program as devoid of utility and socially frivolous.⁹ Newman defended the Oxford system as supremely useful. Its utility lay in a cultivation of mind that equipped its possessor to deal competently with any intellectual subject, and therefore to embark with optimal effectiveness on any course of subsequent specialization. The prime accomplishment of liberal education was to make minds capable of functioning with keenness and versatility. And minds which function thus are not only intrinsically valuable, but practically and socially useful. Newman was convinced that persons whose minds functioned best in a general sense made the best physicians, lawyers, and statesmen. He was also convinced that specialized medical, legal, or political curricula were not the best means for getting minds so to function. In his view, professional studies thrived when they built upon a liberal education, but they could not of themselves provide one.

Closely related to Newman's opinion about the professional usefulness of liberal education was his belief that professional education was itself best carried out within a university as, in his day, it usually was not.

In saying that law or medicine is not the end of a university, I do not mean to imply that the university does not teach law or medicine. What indeed can it teach at all, if it does not teach something particular? It teaches all knowledge by teaching all branches of knowledge, and in no other way. I do but say that there will be this distinction as regards a professor of law, or of medicine, or of geology, or of political economy, in a university and out of it, that out of a university he is in danger of being absorbed and narrowed by his pursuit, and of giving lectures which are the lectures of nothing more than a lawyer, physician, geologist, or political economist; whereas in a university he will just know where he and his science stand; he has come to it, as it were, from a height, he has taken a survey of all knowledge, he is kept from extravagance by the very rivalry of other studies, he has gained from them a special illumination and largeness of mind and freedom and self-possession, and he treats his own in consequence with a philosophy and a resource, which belongs not to the study itself, but to his liberal education.¹⁰

Thus for Newman, the school of medicine, or other specialized faculty, gains from its situation within a university in the same way that the student of medicine, or of other practical specialties gains from his background of liberal education. It gains a breadth and suppleness of mentality which both stimulate and moderate its own proper pursuits. It is on this last consideration that Newman built his argument six years later, in

addressing the medical students of his own university.

Letter to Irish Catholic Hierarchy

He had written two years before to the Irish Catholic hierarchy that one of "four immediate objects to be compassed by the University" was that of "securing the moral and liberal education of the medical profession, a profession which can, of all others, be an aid and support to the parish priests in the country at large." This was to be done by "establishing a medical school in Dublin, and in providing burses for students in connection with it."¹¹ That formulation was designed, evidently, to commend the medical school project to the practical interests of a clergy whose own acquaintance with universities was meager, and whose educational philosophy was often pedestrian. Still, for Newman himself, the benefit to a medical school of being situated within the kind of university he envisaged, emphatically included its being exposed to the influence of theology. Nor was this consideration external to his argument for locating professional education in a university, for he had argued at length, in his first three *Discourses on University Education*, that theology is an essential component of liberal education.¹²

It seemed to Newman that the chief danger besetting the best elements of any profession was a spontaneous tendency to treat the proper interests of that profession as exclusive or overriding. What concerned him most were not unprofessional activities, but relentlessly professional attitudes. His moral message was not to quacks and mountebanks, whom he could only denounce in the same way their conscientious colleagues habitually denounced them. He was addressing competent, dedicated professionals, whose very assiduity was conducive to a particular sort of narrowness of mind.

All professions have their dangers, all general truths have their fallacies, all spheres of action have their limits, and are liable to improper extension or alteration. Every professional man has rightly a zeal for his profession, and he would not do his duty towards it without that zeal. And that zeal soon becomes exclusive, or rather necessarily involves a sort of exclusiveness. A zealous professional man soon comes to think that his profession is all in all, and that the world would not go on without it.¹³

Newman goes on to illustrate this hyper-professionalism from a sphere where its manifestations are typically less subtle and more publicly apparent, the sphere of military professionalism. It may be recalled that the year when Newman addressed his medical school at Dublin, 1858, was the climactic year of Britain's wars of imperialism in India, during which the press had repeatedly drawn public attention to conflicts of opinion between the nation's political and military leadership. What Newman found instructive about these disputes was the fact that the military recommendations were, on strictly military grounds, usually persuasive, whereas it was on the quite different grounds of statesmanship that their

wisdom came into question. Newman could appreciate the obstinacy, in such circumstances, of a seasoned, skilled, and dedicated commander.

How hard it must be for the military man to forego his own strategical dispositions, not on the ground that they are not the best . . . but . . . because the interests of the council and the cabinet require the sacrifice, that the war must yield to the statesman's craft, the commander-in-chief to the governor-general.¹⁴

Still, there could be no question in such a contention of who must finally give way to whom. Evidently, the most complete military success is not inevitably harmonious with the highest national good. Military victories can be political and moral defeats. And the task of professional soldiers is to do their military best only insofar as they are bidden to do so by the nation, through its government, in its just interests.

Ethic Presupposes Norms

Thus a military ethic must presuppose norms not only of how to behave in the course of a campaign, but of when to modify military efforts or suspend them altogether. In the case of the military, since the superiority of broadly political aims to narrowly military ones is constitutionally established, cases of insubordination can be disposed of without much soul-searching. But such reliably institutional provisions are not available to other, civilian professions, for which, nevertheless, similar problems arise, and must be solved more reflectively.

That they arise for the medical profession seemed obvious to Newman. Just as the militarily right thing is not always the politically wise thing, so also, what is medically indicated is not always or automatically what, from a higher point of view, appears to be humanly indicated. For just as martial aims, interests, and values cannot claim supremacy in national life, neither can medical aims, interests, and values claim it in the life of humanity at large. No matter how important is the proper business of medicine, it is not all-important.

Its province is the physical nature of man, and its object is the preservation of that physical nature in its proper state, and its restoration when it has lost it. It limits itself, by the very profession, to the health of the body; it ascertains the conditions of that health; it analyzes the causes of its interruption or failure; it seeks about for the means of cure. But, after all, bodily health is not the only end of man, and the medical science is not the highest science of which he is the subject. Man has a moral and a religious nature, as well as a physical. He has a mind and a soul; and the mind and soul have a legitimate sovereignty over the body, and the sciences relating to them have in consequence the precedence of those sciences which relate to the body.¹⁵

Newman adopted a curious phrase — and not a very felicitous one — to express the moral error to which he thought the medical profession susceptible.

It is a certain sophism of the intellect, founded on this maxim, implied, but not spoken or even recognized — 'What is true is lawful.'¹⁶

What he meant is clarified by what follows.

What is true in one science is dictated to us indeed according to that science, but not according to another science, or in another department . . . And so what is true in medical science might in all cases be carried out were man a mere animal, . . . but since he is a rational, responsible being, a thing may be ever so true in medicine, yet may be unlawful in fact, in consequence of the higher law of morals and religion¹⁷

Thus, by “what is true is lawful”, Newman wished to express the idea that what seems feasible and advisable in the light of a particular discipline’s basic premises and values, may seem, in the light of a more comprehensive philosophy, plainly wrong. The “truth” he refers to is not empirical or theoretical, but practical. It is the feasibility of a professional course of action consistent with professional goals. Thus, in Newman’s sense, “what is true is lawful” means that whatever can be done, as long as it furthers the legitimate purposes of a profession, ought to be done simply for that reason. For Newman that is a fallacious principle because it ignores the possibility that the legitimate purposes of any profession may be overruled by other and higher purposes. And it seemed to him a fallacy to which one is especially prone whose education has been over-specialized, who has had insufficient opportunity to contemplate and appreciate the full range of human values, to become sensitive to those not cultivated by one’s own profession, and to establish effective priorities accordingly.

It may easily happen that the impressions made on a man’s mind by his own science may be indefinitely more vivid and operative than the enunciations of truths belonging to some other branch of knowledge, which strike indeed his ear, but do not come home to him, are not fixed in his memory, are not imprinted in his imagination. And in the profession before us, a medical student may realize far more powerfully and habitually that certain acts are advisable in themselves according to the law of physical nature, than the fact that they are forbidden according to the law of some higher science, as theology; or again, that they are accidentally wrong, as being, though lawful in themselves, wrong in this or that individual, or under the circumstances of the case.¹⁸

Philosophically Limited Medicine

Medicine, as Newman perceived it, is philosophically limited on both its theoretical and its practical side. Theoretically, it views human individuals as biological organisms, and practically, it seeks to preserve the lives and improve the health of those organisms. Thus it proceeds on a certain understanding of what human beings are, and on a related understanding of what is good for them. Obviously these understandings are neither false nor frivolous. But equally obviously, they are partial. Newman’s point is that it is all too easy for medical professionals to forget they are partial, and that such forgetfulness can have morally damaging consequences.

A medical philosopher who has so simply fixed his intellect on his own science as to have forgotten the existence of any other, will view man, who is the subject of his contemplation, as a being who has little more to do than to be born, to grow,

to eat, to drink, to walk, to reproduce his kind, and to die . . . His practice, then, is according to his facts and his theory. Such a person will think himself free to give advice, and to insist upon rules, which are quite insufferable to any religious mind, and simply antagonistic to faith and morals.¹⁹

The remedy is not, for Newman, to depreciate medical theory or frustrate medical practice. Indeed, it is not to interfere with medicine itself in any direct fashion. Rather it is to try to ensure that a physician will be educated in such a manner as to be able and inclined to view his science and his art in the widest and truest perspective.

It is not, I repeat, that he says what is untrue, supposing that man were an animal and nothing else: but he thinks that whatever is true in his own science is at once lawful in practice — as if there were not a number of rival sciences in the great circle of philosophy, as if there were not a number of conflicting views and objects in human nature to be taken into account and reconciled, or as if it were his duty to forget all but his own.²⁰

To become acquainted with such “rival sciences” with their conflicting aims and objects” and to learn to bring their various interests and claims into some rational order was, for Newman, the very point of a university education. That is why the location of medical faculties within universities seemed to him a matter of genuinely moral importance, because it discouraged the isolation of medical values from other human values with which, in the world as it is, they must come to terms.

Newman did not, of course, concern himself with anything like the highly specialized casuistry which currently occupies much of the attention we pay to medical morality. But the more fundamental matter he did attend to has scarcely lost its relevance. A very significant part of contemporary moral concern about medical research and medical practice belongs precisely to the question of when what is medically indicated may be humanly contraindicated. Nothing, perhaps, illustrates that point more poignantly than the distinctively modern form of preoccupation over “death with dignity”, with its implication that even so basic a medical interest as the preservation of life can, in certain circumstances, be dreaded as an indignity and almost as an act of violence. It is a phrase which eloquently typifies a profound human conviction that there are more important values even than staying alive and keeping alive. They are not values which medicine, as such, knows anything about. And insofar as medical practitioners do know about them, it is because they are something more than simply medical practitioners, and know something more than medical science.

A Prophetic Anticipation

Newman’s criticism of the view that “what is true is lawful” was a prophetic anticipation of that “technological imperative” which has since, on so many occasions, threatened to turn medical zeal into a kind of fanaticism and medical progress into a kind of tyranny. No doubt, such

dangers must be dealt with as they arise, and new policies and procedures evaluated on their separate merits. Newman offers us no practical substitute for unravelling, one by one, the intricacies of modern bioethical dilemmas. But he does remind us that all such efforts are doomed to futility unless doctors, or at least significant numbers of them, are persons of enlightened conscience, broad sympathies, and ordered values; persons who know there are things worth the sacrifice even of medicine's highest goods, things worth enduring pain for, curtailing life for, dying for. Such persons readily understand why some prices are, in the economy of human and moral values, simply too high for bodily comfort, health, and life.

Newman, for his part, knew of only one institution on earth that never failed to acknowledge such priorities and insist upon them.

The world is a rough antagonist of spiritual truth: sometimes with mailed hand, sometimes with pertinacious logic, sometimes with a storm of irresistible facts, it presses on against you. What it says is true, perhaps, as far as it goes, but it is not the whole truth, or the most important truth. These more important truths, which the natural heart admits in their substance, though it cannot maintain — the being of a God, the certainty of future retribution, the claims of the moral law, the reality of sin, the hope of supernatural help — of these the Church is in matter of fact the undaunted and the only defender.

Even those who do not look on her as divine must grant as much as this.²¹

Only in a university, Newman believed, could medical science hope to occupy both an honored and an ordered place. But only a university which did not exclude religion from the world of learning seemed to him capable of providing either the right honor or the right order.

References

1. Reich, Warren T., editor, *Encyclopedia of Bioethics* (NY: Macmillan, 1978), pp. 876-1007.
2. Newman, John Henry Cardinal, *The Idea of a University* (London: Longmans, 1907).
3. Newman, John Henry, *Discourses on University Education* (Dublin: Duffy, 1852); *Lectures and Essays on University Subjects* (London: Longman, 1859).
4. Newman, John Henry, *Relations Between Medical Science and Theology*, (Dublin: Fowler, 1858).
5. Rickaby, Joseph, *Index to the Works of John Henry Cardinal Newman*, (Westminster, MD: Christian Classics, 1977).
6. Griffin, John R., *Newman: A Bibliography of Secondary Sources* (Front Royal, VA: Christendom College, 1980).
7. Percival, Thomas, *Medical Ethics* (Huntington, NY: R. E. Krieger, 1975).
8. Newman, John Henry Cardinal, *The Idea of a University*, pp. 151-178.
9. *Ibid.*, 2, pp. 153-161.
10. *Ibid.*, pp. 166-167.
11. Dessain, Charles Stephen, ed., *The Letters and Diaries of John Henry Newman* (London: Nelson, 1963), vol XVII, p. 281.
12. Newman, John Henry Cardinal, *The Idea of a University*, pp. 19-98.
13. *Ibid.*, pp. 506-507.
14. *Ibid.*, p. 507.
15. *Ibid.*, pp. 508-509.
16. *Ibid.*, p. 509.

17. *Ibid.*, p. 510.
18. *Ibid.*, pp. 510-511.
19. *Ibid.*, pp. 512-513.
20. *Ibid.*, p. 513.
21. *Ibid.*, p. 516.

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