The Linacre Quarterly

Volume 24 | Number 1 Article 2

February 1957

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Recommended Citation

Roche, Edward D. (1957) "Doctor! ... Is There a Father in the House?," The Linacre Quarterly: Vol. 24: No. 1 , Article 2. Available at: http://epublications.marquette.edu/lnq/vol24/iss1/2

Doctor! ...

Is There a Father in the House?

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THE VERBAL switch in the title is not a little trick made just to be facetious. It states a real problem which needs a realistic solution. I am hoping by the title not only to catch your eye, but also to hold your mind and encourage you to look into your conscience.

The traditional call for a doctor indicates a need; a need at once urgent and immediate, demanding the special care of a medical man. Here, too, is a call also indicating a need — a need which is also pressing, demanding the special care of a dedicated man. This is the doctor's own family calling . . . calling him to come home, because of the desperate need of a husband and a father. It can be a very pitiful, sometimes tragic, plea — "We need a father in the house!"

This is not a simple problem for which there is any easy solution. This is not a question of "close the shop and go on home," or "don't delay in the tavern after work," or "cut down on the business trips and stop entertaining the clients at night." Nor am I concerned with the type of man who could, but just doesn't want

to be home, one who is looking for excuses to stay away. I am talking about a man who is good, honest and sincere, one who loves his wife and children and wants to be with them. He feels the lack of time he has with them as keenly as they do. But he is a doctor and he just can't seem to get home because there are too many other people consuming his time.

Obviously, then, the doctor is faced with a basic conflict of obligations. This is not just an apparent conflict. It is real, because the two-fold obligation of the doctor is serious and binding in conscience. He has an obligation to his family which he assumed freely and willingly when he received the sacrament of matrimony. More than just providing food, clothing and education, he owes himself as the head of the house, giving love and affection and assistance to his wife in caring for and training the children. He cannot do this and be absent from them the greater part of the time.

He also has an obligation by reason of his profession to his patients. He is a doctor, again, because he freely and willingly chose a medical career. When he became qualified to practice medicine, he sincerely dedicated himself to the care and cure of those who are ill. He is obliged not only to provide this care to those who seek it and who place themselves in his hands, but he must also necessarily continue his medical education, studying and appraising himself of new and approved procedures in the field.

Here is the conflict. How can he fulfill both of these serious, time-demanding obligations during a twenty-four hour day and a seven-day week?

Let us analyze this conflict a little further. Here is a man - honest, sincere and mature. He chose a medical career, not only because he wanted to be a physician, but because he also sincerely felt that this was what God wanted him to be. He thought long about it, prayed frequently and considered it carefully. When he decided, it was the same kind of a decision that a young man makes when he becomes a priest. This is a vocation - to be a doctor. Through his long training he learns the meaning of and accepts the obligations of his vocation. He knows that this vocation will make demands on his time and talents, that he will often have to defer his personal wishes and desires in favor of his patients. He accepts and is sure that with God's help he will be able to fulfill his obligations to his vocation.

However, either before he has finished his training in medical school or frequently it happens before he has finished his internship and residency program, he has

made another choice and it is also the choice of a vocation. He has chosen the marriage state and this, too, after prayerful consideration and with even more dependence upon God. Thus, he has assumed further obligations which are sacred and solemn, the primary one of which is to bring children into the world, care for them and prepare them for eternity. Both of these obligations are assumed when the surrounding circumstances make it most difficult. As an intern or resident, there is the constant "on call" schedule. If not that, then there is the struggle to establish a practice and try to live at the same time. He has to take everything and anything he can, from insurance examinations to industrial health clinics, in order to subsist.

During this time, the family is increasing. The wife is alone so much of the time her tasks become more and more wearisome and the babies seem to be burdens rather than blessings. When the father is home, he is so tired he just wants to rest and be left alone, or he has to study or read. The result is increasing strain and tension which releases itself in mutual blame and exaggerated emphasis on each other's faults.

As time goes along, the problems remain, but for opposing reasons. After a few years, the doctor's practice has grown extensively and he is so busy that he still isn't home very much. The mother is still deciding the home problems and although she now has help with the housework, she still enjoys only a short vacation now and then when there is a medical convention somewhere.

What happens then? Generally a very vicious family circle. The doctor's hours become irregular: when he does come home, the wife is angry; she is unpleasant and blames him. He must continue to be a doctor and to avoid the constant bickering, he escapes into his practice and becomes that "won-......' who is derful Dr. always in his office or at the hospital - or at the club. Or perhaps it is the busy surgeon who has operations scheduled every morning and so he must retire at ten or eleven, which is too early to allow for a movie, or an evening party must be interrupted. So the wife, whose social life is much restricted all too frequently, must go home early.

And so it goes in one way or another. The doctor is away from home so much that there just is not time enough to be a good husband and father. What's the solution? Once all of this is clearly and mutually recognized by the doctor and his wife and soberly discussed without rancor and with patience and understanding, then some practical conclusions can be formed and practical applications made.

First, to resolve the problem of these conflicting obligations, it is vitally necessary to remember and to realize fully that these obligations derive from and are subject to an even more fundamental obligation of the man, as father and doctor, to God. Thus, it is absolutely essential to set up a right order of values. What comes first?

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Can the conflicting obligations take a definite order of precedence? The answer is - yes. The order is: God - Family - Medicine. God comes first, because He is the ultimate End: the final goal of all of life. The family is second to God. This is the primary vocation - to be a father, to have a family. This is the means here on earth whereby he is going to attain his final goal and ultimate End, God. And following these in order is medicine which is merely a means of helping him to attain the other two. Medicine is not an end in itself. It is a vocation within a vocation, but the practice of medicine must be a help to his being a father, not a hindrance - or else the doctor fails in both.

This does not automatically resolve the conflict in practice, but it should solve the conflict in the mind, which then should be put into practice. The family, as a unit. must see the dual obligation of the father-doctor and all must accept it in the spirit of mutual sacrifice! There is the key to the problem sacrifice. To be a doctor demands sacrifice. To be the wife of a doctor demands sacrifice. To be the children of a doctor demands the same. But if all are making these sacrifices willingly, then the very sacrifices will draw them together as nothing else could. For the obligations with their sacrifices are also privileges. The doctor and his family are set apart. They are all dedicated people. So when the doctor can't get home or is called away in the middle of the birthday party or has to cancel a vacation because of an emergency operation, the wife and children know he wants to be with them but that he must sacrifice them. They, in turn, sacrifice him to the needs of others. Thus it is that when they are together, it means more to them and they enjoy one another more, because it is more deeply appreciated.

At the same time, the doctor should make a real effort to find ways of making up to his family for his unavoidable absence from them. He should at times sacrifice himself for them as he so readily does for his patients. Or he may have to refuse the demands of an unreasonable patient for the sake of his family. It may even eventually come to the point where he will be obliged to limit his practice to allow more time with his family. One very practical way for the

doctor's family to be together more often is for the doctor and his wife to entertain as a family. Include the children in the visits with friends and encourage them to bring their children when they return the visit. There are so many couples who know each other so very well, but their children are not acquainted.

And so it is a matter of putting first things first . . . God, Family, Medicine. In this age of increasing emphasis on the specialist, the doctor should apply himself to the greatest specialty of them all—that of being a good father. The medical profession has grown away from the family doctor. What is needed now is to bring the doctor back to the family—his own. Yes, doctor, there must be a father in the house!

Father Roche, ordained in 1943, is a member of the Congregation of the Mission, the Vincentian Fathers. For three years he served as Catholic Chaplain at St. Louis City Hospital and has been with De Paul Hospital since July of 1956. Acquaintance with many internes and residents as well as staff doctors prompted this sympathetic approach to a problem which certainly needs thoughtful consideration.

TRAVEL ASSISTANCE AVAILABLE ...

The well-known O'Scannlain & English Travel Service, 62 W. 46th St., New York 36, N. Y. has been appointed the official Travel Agency for the Jubilee Celebration of the Federation of Catholic Physicians' Guild in New York, June 5.

The Agency belongs to ASTA (American Society of Travel Agencies) and WATA (World Association of Travel Agencies), and consequently has excellent facilities for handling the Jubilee Celebration. It will arrange transportation for groups and individuals, to and from the Convention of the A.M.A. scheduled in New York City June 3-7, hotel accommodations, tours to Bermuda and the New England States, and other interesting places, and excursions in New York City and vicinity.

Mr. Jack Lampe will be in charge of the Agency's arrangements for the Jubilee Celebration. He will cooperate closely with the Jubilee Committee in order to give the Guild members maximum service. We urge you to inform Mr. Lampe as early as possible as to their service requirements. The Agency and Jubilee Committee will mail further information regarding plans for the Jubilee Celebration.