Health Care Concern: Government Utilitarianism & the Hippocratic Oath

Written by Heather Zeiger

The government doesn't take the Hippocratic Oath, but maybe it should.

As I was researching for this article, I easily found the over 2,000-page House bill on health care (H.R. 3962), and downloaded it over our high—speed Internet connection without a problem. I glanced at the Table of Contents, made some notes, and tried to go back to the previous page when my browser came crashing down. It could be that the size of the file gave Firefox some problems. Actually, it was fine at first, but when I realized that this monster was too cumbersome, I tried to get back to a page that was easier to navigate only to find that going back within this huge bill is not as easy as downloading it.

If I can use my experience in retrieving this bulky bill as being symbolic of anything, it would be that if passed, we will find the changes to our health care system confusing and unwieldy. And like my problems with trying to go back to an easier page, once we've realized what we've gotten ourselves into, it may not be easy to undo what has been done. There are many areas of concern in this legislation that raise ethical red flags, but I want to address a very fundamental issue in health care—that of authority and accountability.

The health care reform bill that has been passed by the House and its Senate counterpart (deliberations began November 30), both bring to light several key bioethical issues: government funding for abortion, defining end—of—life care, who makes rationing decisions, and our obligation to the weak and

infirm, to name a few. Many aspects of our lives can fall under the umbrella of health care, so this bill has the potential to affect almost every aspect of society. Another contentious (and constitutionally questionable) feature of the bill is the government requirement that everyone purchase health insurance, which marks the first time in history that the federal government has required everyone in society to enter a particular marketplace (car insurance is state—, not federally regulated).

I want to address the nature of health care specifically. Generally, the person administering health care is dealing with someone who finds themselves in a vulnerable state. That is why people, Christian or not, resonate with the idea that doctors take an oath to "Do No Harm." The essence of the Hippocratic Oath, even before it was Christianized, is that of a covenantal relationship between the physician, the patient, and God (or, in 400 BC, the Greek gods) $\{1\}$. This recognition of a deep obligation of the physician to the patient in his or her time of vulnerability has been a vocational standard for the industry for centuries. Granted, after the 1950's these standards began to change into something far more utilitarian and consumer—driven and the Oath is rarely recited at medical graduations anymore. Nonetheless, doctors and patients today still operate under the assumptions of the Hippocratic Oath that the doctor is to "do no harm."

But back to the point of the recently passed House bill and the ongoing debate on the Senate bill. If both of these bills pass and are approved by President Obama in their current form, the government is going to exercise a large amount of fiscal and, therefore, regulatory control over the health industry. The Hippocratic Oath was a vocational agreement, but now the government is in the position of holding an individual's health in its hands. The government makes no such promise to "do no harm" to the individual patient.

In actuality, the very idea of health care for all represents

a distinct and debatable worldview. The language being used to argue these bills represents, at best, an attempt to do the greatest good for the greatest number of people. It no longer speaks on an individual level, but on a societal level. And while individual doctors agree to avoid harming patients, the government views its job as seeking what is best for society at large. That is a very different commitment at a fundamental level. In the United States, the governmental commitment is contractual, {2} while in the Hippocratic tradition, the doctor-patient relationship is covenantal. (See the wording for the Oath of Office and the Hippocratic Oath, below.)

Doing what seems best for society on the whole is fine when we are talking about national security and protecting our borders, or when we are talking about how best to implement and regulate interstate commerce, or even in creating boards that enforce common standards for pharmaceuticals, such as the FDA. This protects society, and protects the individuals within that society. But when it comes to an individual making a decision for his personal health or for his dependents, what is best for society as a whole is not the appropriate ethic. This is called *utilitarianism*, which is generally defined as an ethic that prioritizes "the greatest good for the greatest number of people." {3}

Utilitarianism has a limited place, but seeking the greatest good for society should not be the highest calling. This view elevates society and social good to a higher level than the individual, meaning that what is best for the greatest number of people, or society as an aggregate, may be at the expense of certain individuals. However, medicine deals with helping the weak, the infirm, and the vulnerable, which concerns the individual. Hence, the covenantal nature of the doctor/patient relationship. This care for the individual springs from the idea that all people are made in the image of God. Therefore we cannot value some individuals more than others, even if we (fellow human beings) deem them more or less useful to

society.

As Dr. Kathy McReynolds, a bioethicist and professor at Biola University and public policy director for the Christian Institute on Disability says about the health care bill, "I am concerned that decisions regarding patient care will be made by someone other than the patient and physician working together. A disinterested politician is not going to have a connection to that patient or be able to identify intrinsic factors about that person's disability." {4}

Link: Senate Healthcare bill: help.senate.gov/BAI09A84 xml.pdf

House Bill: The bill, the <u>Affordable Health Care for America Act—H.R. 3962</u>

www.pbs.org/wgbh/nova/doctors/oath classical.html

I swear by Apollo Physician and Asclepius and Hygieia and Panaceia and all the gods and goddesses, making them my witnesses, that I will fulfill according to my ability and judgment this oath and this covenant:

To hold him who has taught me this art as equal to my parents and to live my life in partnership with him, and if he is in need of money to give him a share of mine, and to regard his offspring as equal to my brothers in male lineage and to teach them this art—if they desire to learn it—without fee and covenant; to give a share of precepts and oral instruction and all the other learning to my sons and to the sons of him who has instructed me and to pupils who have signed the covenant and have taken an oath according to the medical law, but no one else.

I will apply dietetic measures for the benefit of the sick according to my ability and judgment; I will keep them from harm and injustice.

I will neither give a deadly drug to anybody who asked for it,

nor will I make a suggestion to this effect. Similarly I will not give to a woman an abortive remedy. In purity and holiness I will guard my life and my art.

I will not use the knife, not even on sufferers from stone, but will withdraw in favor of such men as are engaged in this work.

Whatever houses I may visit, I will come for the benefit of the sick, remaining free of all intentional injustice, of all mischief and in particular of sexual relations with both female and male persons, be they free or slaves.

What I may see or hear in the course of the treatment or even outside of the treatment in regard to the life of men, which on no account one must spread abroad, I will keep to myself, holding such things shameful to be spoken about.

If I fulfill this oath and do not violate it, may it be granted to me to enjoy life and art, being honored with fame among all men for all time to come; if I transgress it and swear falsely, may the opposite of all this be my lot.

Importantly, the major feature of the traditional version of the Hippocratic Oath is that the doctor recognizes that he is dealing with a patient at a vulnerable time and will do everything with the patient's best interest in mind. He enters into a covenantal agreement between himself, the patient, and the deity. {5}

Oath of Office:

www.senate.gov/artandhistory/history/common/briefing/Oath_Offi
ce.htm

I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter: So help me God.

The distinguishing feature of the Oath of Office is that of protection of those principles found in the Constitution of the United States. While this may protect the citizens of the U.S., this is not a personal obligation towards an individual with the individual's best interest in mind. In this sense it is a contractual relationship between the citizens of the U.S. and their representatives or armed forces.

Notes

- 1. Cameron, Nigel M. de S., *The New Medicine: Life and Death after Hippocrates*, 1991, Crossway Books, Wheaton, IL.
- 2. For some foundational philosophy on Political Theory, see the works of Jean-Jacques Rousseau (*The Social Contract*), John Locke, and Thomas Hobbes (Leviathan).
- 3. For an interesting look at the history of utilitarianism, see the *Internet Encyclopedia of Philosophy* on "John Stuart Mill," www.iep.utm.edu/milljs/#SSH2d.ii; also, Kerby Anderson, Christian Ethics in Plain Language, Nashville, TN, 2005, Thomas Nelson, Inc., pps. 15-17.
- 4. Joni and Friends, www.joniandfriendsnews.com/docs/091125 healthcare.pdf
- 5. Translation from the Greek by Ludwig Edelstein. From The Hippocratic Oath: Text, Translation, and Interpretation, by Ludwig Edelstein. Baltimore: Johns Hopkins Press, 1943.
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Healthcare and the Common Good

One of the hot topics in the presidential election campaign is healthcare and healthcare reform, but is there a Christian perspective on healthcare? If so, what is it? I had the privilege of attending the annual bioethics conference hosted by the <u>Center for Bioethics and Human Dignity</u> and Trinity International University this past July. Guided by this year's theme, "Healthcare and the Common Good," some of the health profession's leading practitioners discussed issues of healthcare and the health profession from a Christian perspective.

What Is "The Common Good"?

Dr. Edmund Pellegrino, chairman of the President's Council on Bioethics, began the conference by distinguishing between first-order healthcare questions and second-order healthcare questions. First-order questions in this case involve the moral or ethical implications of healthcare. These questions include: What do we do with the poor and ill? What are our moral obligations to them? By what criteria do we judge healthcare programs? And, is the healthcare system providing for basic human needs? Second-order questions, often covered by the media, include economic issues, systems, and politics. Usually, this level of inquiry seeks to answer questions like "How is healthcare to be structured?"

Dr. Pellegrino used Aristotelian philosophy to discuss the idea of common good. He describes common good as everyone being enabled to fully achieve their own perfection as men. Essentially, everyone is valuable because he is a human being, and part of giving them value is to provide for them relief from suffering and the opportunity to flourish, whether they merit it or not. Dr. Pellegrino asserts that this is similar

to the biblical idea of being not only your brother's keeper, and your enemy's keeper, but also ministering physically to those who are irresponsible. As Christians we have an obligation to care for the weak and the infirmed, and we, furthermore, cannot make value judgments on the worth of someone's life because of their personal behavior.

Human Dignity

Underlying any area of bioethics based on a Christian worldview is the concept of man as a special part of creation made in God's image. {1} This means that our views on healthcare should reflect the inherent dignity of the individual. Dr. Pellegrino discussed this essential element that part of common good is valuing man because he is man, and I would add that it is expressly because he is made in the image of God.

Many of the sessions at the conference, whether they were on doctor/patient relationships or public policy, centered on this point that man is made in the image of God and that individuals should be valued as unique and important. This presupposes a theistic worldview.

During my paper session at this conference, I emphasized the importance of a worldview approach for laying the foundation of how to evaluate specific bioethical issues. This is also essential in evaluating healthcare policies and our moral obligation to the weak and infirmed. How does one's worldview affect their various views on healthcare?

As Nancy Pearcey points out in *Total Truth*, {2} every worldview answers three basic questions: Where did we come from? What happened to us (why is there evil)? And, how can things be made right? As Christian theists we would answer these questions with "Creation-Fall-Redemption." Naturalists, on the other hand, would answer with the triad "Darwinism—Evil is an illusion—Survival of the fittest." A naturalist's creation

story is that of Darwinism. {3} Therefore, man is nothing more than a product of natural selection. He does not hold a unique position above other animals, and he was not specifically created with a purpose.

One's view on origins is fundamental to how man is regarded, and it determines which ethical system is used to determine right and wrong views on healthcare. The tension is between the theistic view that man has inherent dignity and worth, despite his capabilities or lack thereof, and the naturalistic view that man's worth is based on whether or not he is a burden on society as a whole.

One view places an absolute value on a person while the other places a relative value. This, in turn, determines whether or not we share a moral obligation to help the weak and infirmed.

But We Vote on Second-order Questions!

While the ethical implications on healthcare are of primary importance, usually we are asked to evaluate healthcare based on second-order questions: How much does healthcare cost? Who should get subsidized? How are they subsidized? Should healthcare and health insurance be privatized? Which candidate's plan do I agree with?

Several of the speakers at this bioethics conference addressed specific plans by candidates and their opinions about them (For more information on second-order analyses, see the <u>Women of Faith Blog post</u> which summarizes Dean Clancy's discussion on McCain/Obama Healthcare plans. See also James Capretta's <u>discussion on policy analysis</u>, PowerPoint® <u>presentation</u> from the conference and a related <u>article</u>.) But the emphasis at the conference was not in endorsing one candidate over another as much as evaluating healthcare from the perspective of a Christian worldview. In other words, we first must answer the primary questions and then use that analysis to guide our views on the secondary questions in healthcare.

I came away from the conference with an understanding that there are several problems with the current healthcare system, from overuse of technology to doctor/patient relationships to how the government subsidy system works. However, these problems are really the fruits of a deeper problem having to do the worldview approach that medical health professionals, politicians, and we, as a culture, take on the issue of health and healthcare. Healthcare is becoming more and more a consumer business or a commodity, and less and less a moral obligation to help those that are weak and infirmed (or a moral obligation to help prevent people from becoming weak and infirmed).

There is no one solution; thus, no one candidate has the solution to all of our healthcare problems. And deciding between expanding government subsidies and privatization is not the root of the problem, so it is not the ultimate solution. As Dean Clancy, former member of the President's Council on Bioethics, pointed out in his session on "Solutions," society can achieve four levels of "happiness": 1) the ultimate good, 2) good beyond oneself, 3) personal achievement, and 4) immediate gratification.

As a culture we are stuck at levels 3 and 4 (personal achievement and gratification), and this means our priorities and decisions are stuck there. This is directly tied to our worldview. From a naturalistic vantage point, it would be logically inconsistent to move beyond levels 3 and 4. However, on a theistic worldview, 1 and 2 follow from the biblical perspective on priorities such as, "You shall love the Lord your God with all your heart and with all your soul and with all your mind...You shall love your neighbor as yourself." {4} God is the ultimate good, and then we are to love others by doing good beyond what benefits ourselves.

What Can I Do?

We can serve a witness to our culture by modeling the biblical perspective on healthcare and human dignity. Maybe not necessarily on the voting ballot, but oftentimes this mindset is modeled on a very personal level by providing for the weak and infirmed in our churches and communities. Or by treating individuals with value, even if they are irresponsible with their health. Or through the way doctors and nurses treat their patients. These are all very tangible ways that people can see the love of Christ and may very well be one way to change some of the problems in our healthcare system from the grassroots level.

Notes

- 1. "So God created man in his own image, in the image of God he created him; male and female he created them" Genesis 1:27 (ESV).
- 2. Pearcey, Nancy, Total Truth: Liberating Christianity from Its Cultural Captivity, Crossway Books, 2004, pgs. 45-46.
- 3. This is referring to Darwinism as a philosophy: The presupposition that there is no God, only nature.
- 4. Matt 22:37, 39 (ESV).
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Michael Moore's Sicko Healthcare Perspective

June 29, 2007 marked the official opening of Michael Moores newest mockumentary, *Sicko*. And in true Moore form, it is controversial and in-your-face. The subject this time is a

critique on the American Healthcare system, and as before, Moore takes a liberal stance on a pet cause: healthcare reform. Here is a summary of his proposal: {1}

- 1. Every American must have full, uninterrupted healthcare coverage for life.
- 2. Private, for-profit health insurance companies must be abolished.
- 3. Profits of pharmaceutical companies must be strictly regulated like a public utility.

After researching several movie reviews from every part of the political spectrum, I am concerned about Moore's use and misuse of statistics and convolution of facts that are taken out of context. However, I think this provides an excellent opportunity to open the discussion on the Christian perspective on healthcare. I will mainly address the idea of universal healthcare coverage (Moore's point 1) and offer a slightly different perspective on private health insurance companies (Point 2). I'll save pharmaceutical company regulation for another article.

The Biblical Perspective

Before we can apply biblical truth to today's cultural issues, let's make sure we know what is biblically clear about healthcare. Several places in the Bible, God admonishes his people to care for the orphans and widows. {2} Orphans and widows are the vulnerable in society. In today's society, that status falls mainly to the elderly, the chronically ill, the poor, etc. The Bible is quite clear about the need to care for these people as well as an individual's responsibility in the matter:

When you reap your harvest in your field and have forgotten a sheaf in the field, you shall not go back to get it; it shall be for the alien, for the orphan, and for the widow, in order

that the Lord your God may bless you in all the work of your hands. When you beat your olive tree, you shall not go over the boughs again; it shall be for the alien, for the orphan, and for the widow. When you gather grapes of your vineyard, you shall not go over it again; it shall be for the alien, for the orphan, and for the widow. And you shall remember that you were a slave in the land of Egypt; therefore I am commanding you to do this thing. {3}

This principle is exemplified when Boaz allows Ruth to glean from his field, drink from his water vessels and eat at his table. {4}

The biblical model seems to be that those with plenty are to take responsibility for those that are vulnerable. While government intervention is not explicitly mentioned, the mention of orphan- and widow-care in the Law implies a universal understanding of a duty to care for the least of these. It also seems to indicate that those who are healthy (i.e. who can work in the field, harvest their own crops, etc.) are to be held accountable and responsible for themselves. In practical terms, how do we apply this to our own culture and healthcare systems?

Modern-Day Applications

In Kerby Anderson's <u>article on National Healthcare</u>, {5} he suggests three needs in today's healthcare structure, each related in such a way that one would perpetuate the others:

The Need for Personal Responsibility

He brings to light an important point about human nature: when someone else pays, we are less likely to consider the quality and cost before buying. When the government subsidizes healthcare or health insurance, people tend to be less thoughtful on cost, and the result is the high prices of healthcare. If there were more personal accountability, people

would comparison shop and bring market pressures to bear on some of the healthcare costs.

I find it fascinating that health insurance requires so little personal responsibility, while car insurance demands so much. When I buy car insurance, it is only used in the event of an accident, either caused by nature or another driver. I have my own account that I use for my basic car care needs (gas, oil change, registration, tires, cleaning, brakes, etc.). I shop for the cheapest gas prices, the best bang for my buck on oil changes, and will go out of my way for a cheaper car wash. Why? Because it is coming out of my pocket. When I was in an accident, the insurance company was paying, so my car went to the body shop they specified and the company paid the price the shop requested. Honestly, I was less concerned about how much the insurance company paid than whether I got my car back in one piece.

Why is it that most people want insurance to pay for their basic check-ups that occur annually or biannually? If individuals paid for their regular maintenance, this would not only decrease the cost of health insurance, but it would also free up some resources for the orphans and widows of our society so that they, too, might have regular, preventative healthcare.

The Need for Portability

Anderson continues:

Americans usually cannot take their health insurance with them if they change jobs. A fair tax system would offer no tax subsidy to the employer unless the policy was personal and portable. If it belongs to the employee, then it would be able to go with the employee when he or she changed jobs. Health insurance should be personal and portable. After all, employers don't own their employees' auto insurance or homeowners insurance. Health insurance should be no This is a critique on the requirement of employers to provide health insurance, and also argues for private companies to be made available to individuals. My husband and I are young, healthy individuals, and were paying \$450 per month on his prior health insurance, until he changed jobs. The problem is that \$450 counted as part of his earnings, and when he left his job, we lost the amount paid into the insurance. Our car insurance and renters insurance was unaffected by his job change, but our health insurance ceased. We now see that it would have been more valuable to have a portable insurance option, such as a private company or a tax-deductible health account into which we would deposit money directly. This would also tie into the idea of individual responsibility for one's health finances, and, again, applies to those that can afford it while the vulnerable are provided for.

The Need for Price Fairness

Anderson writes:

Price fairness is another issue. Proponents of socialized medicine would force people with healthy lifestyles into a one-tier system with people who smoke, drink too much, use drugs, drive irresponsibly, and are sexually promiscuous. A better system would be one that rewards responsibility and penalizes irresponsibility. Obviously we should provide for the very young, the very old, the chronically ill, etc., but we shouldn't be forced into a universal risk pool and effectively subsidize the destructive behavior of those who voluntarily choose sin over righteousness. {7}

Going back to our car insurance/health insurance comparison, my husband and I have been with our car insurance company with a clean record for so long that our rates went down. Also, our rates decreased when he turned twenty-five because he was no

longer a high-risk driver. This encourages cautious driving and places the responsibility on the driver. The universal healthcare model does just the opposite, because no matter your lifestyle, the government will take care of it. I think if we're honest with ourselves about human nature, a monetary compensation or savings for maintaining proper health would be one effective way to combat behavioral diseases such as obesity and type II diabetes.

Problems with Universal Healthcare, or Why Michael Moore May Not Know What is Best for the Country

Business Costs

I am no economist or a business analyst, so I will defer to Anderson's example of Herman Cain, president and CEO of Godfathers Pizza. Mr. Cain confronted President Clinton about many of the hidden costs of healthcare reform that affect businesses. He came with spreadsheets that pointed out just how much it would cost his business if employer mandates were put in place, and it also pointed out how President Clinton had vastly underestimated the cost on businesses.

Or what about Michael Moore's suggestion of having totally socialized healthcare? He gives several countries as an example, including France, but never mentions that all of these countries pay significantly higher tax rates than we do. This would place a burdensome cost on individuals and companies.

As Kerby warns in his article, Healthcare reform may cost much more than we think it will. The direct costs may not seem like much, but don't forget to count the indirect costs to you and to American business.

Moral Costs

There are several issues to consider here, but let us focus on the one that is already taking place in many other countries with socialized healthcare: rationing. Universal coverage of healthcare increases overall demand, which means that you will have to decrease the supply of health care benefits provided to each individual citizen, especially since there is less profit and hence less reason to increase overall supply. This is inevitable in a universal healthcare system, and, as recently reported in the *Scotsman*, is already happening in countries with socialized healthcare:

It is no longer possible to provide all the latest [medical technology] to absolutely everybody without notable detriment to others. Rationing is reduction in choice. Rationing has become a necessary evil. We need to formulize rationing to prevent an unregulated, widening, post code lottery of care. Government no longer has a choice. When it comes to the list of conditions, it's all about quality of life. It would be about the prioritization of clinical need. {8}

A utilitarian approach to a person's quality of life is definitely not within the Christian worldview, {9} but that is precisely and inevitably the direction of a socialized healthcare system.

Our current healthcare system does have some flaws, but I do not think throwing government money at the problem is the best solution. Looking at the biblical model of individual responsibility, we can glean from the text how God's timeless truths can be effective when applied to our culture today.

Notes

- 1. www.michaelmoore.com
- 2. Exodus 22:22, Jeremiah 7:6,7, Isaiah 1:17, 1 Timothy 5:3, James 1:27, English Standard Version (ESV).

- 3. Deuteronomy 24:19-22 (ESV).
- 4. Ruth 2:8,9,14-16 (ESV).
- 5. Kerby Anderson, "National Health Care," Probe, 1994, www.probe.org/national-health-care/.
- 6. Ibid.
- 7. Ibid.
- 8. Moss, Lyndsay "NHS rationing is 'necessary evil,' say doctors" *Scotsman*, June 26, 2007, news.scotsman.com.
- 9. See Kerby Anderson, "Utilitarianism: The Greatest Good for the Greatest Number," 2004,

www.probe.org/utilitarianism-the-greatest-good-for-the-greates
t-number/

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Not a Threat: The Contributions of Christianity to Western Society

Rick Wade provides a solid argument for the beneficial contributions of Christianity to Western culture in the areas of science,

human freedom, morality, and healthcare.

What If You'd Never Been Born?

Do you remember this scene in the movie It's a Wonderful Life?

GEORGE (cont'd): Look, who are you?

CLARENCE (patiently): I told you, George. I'm your guardian angel. [George, still looking at him, goes up to him and pokes his arm. It's flesh.]

GEORGE: Yeah, yeah, I know. You told me that. What else are you? What . . . are you a hypnotist?

CLARENCE: No, of course not.

GEORGE: Well then, why am I seeing all these strange things?

CLARENCE: Don't you understand, George? It's because you were not born.

GEORGE: Then if I wasn't born, who am I?

CLARENCE: You're nobody. You have no identity. [George rapidly searches his pockets for identification, but without success.]

GEORGE: What do you mean, no identity? My name's George Bailey.

CLARENCE: There is no George Bailey. You have no papers, no cards, no driver's license, no 4-F card, no insurance policy . . (he says these things as George searches for them) [George looks in his watch pocket.]

CLARENCE (cont'd): They're not there, either.

GEORGE: What?

CLARENCE: Zuzu's petals. [George feverishly continues to turn his pockets inside out.]

CLARENCE (cont'd): You've been given a great gift, George. A chance to see what the world would be like without you. {1}

Do you remember George Bailey's encounter with Clarence the angel? George didn't think life was worth living, and it was Clarence's job to show him he was wrong. To do so, he showed George what Bedford Falls would have been like if George had

never been born.

In desperation, George races through town looking for something familiar. After observing him for a little while, Clarence utters this bit of wisdom: "Strange, isn't it? Each man's life touches so many other lives, and when he isn't around he leaves an awful hole, doesn't he?"{2} Inspired by the plot of It's a Wonderful Life, in 1994 D. James Kennedy and Jerry Newcombe wrote a book titled What If Jesus Had Never Been Born?{3} The authors determined to show what the world would be like if, like George Bailey, Jesus had never been born.

Christianity has come under attack from many different directions. It is often derided as the great boogeyman of human civilization. It is presented as an oppressive force with no regard for the higher aspirations of humankind. To throw off its shackles is the way of wisdom.

Kennedy quotes Friederich Nietzsche, a nineteenth century philosopher whose ideas continue to have a profound effect on our society. Said Nietzsche: "I condemn Christianity; I bring against the Christian Church the most terrible of all the accusations that an accuser has ever had in his mouth. It is, to me, the greatest of all imaginable corruptions; it seeks to work the ultimate corruption, the worst possible corruption. The Christian Church has left nothing untouched by its depravity; it has turned every value into worthlessness, and every truth into a lie, and every integrity into baseness of soul." {4}

This article will—we hope¾show just how beneficial Christianity has been, even for its critics. Drawing from Kennedy and Newcombe's book in addition to other literature, we will examine the impact of Christian beliefs on society. The four areas we'll consider are science, human freedom, morality, and healthcare. A theme which will run throughout this discussion is the high value Christianity places on human

beings. Far from being a source of oppression, the message of Christ serves to heal, set free, and provide protective boundaries.

Contributions to Science

Perhaps the area in which Christianity has been the most vociferously attacked in this century has been the area of science. Religion and science are thought by many to be like oil and water; the two simply don't mix. Religion is thought to offer superstition while science offers facts.

It would seem, however, that those who make such a charge haven't given much attention to the history of science. In their book, *The Soul of Science*, {5} authors Nancy Pearcey and Charles Thaxton make a case for the essential role Christianity played in the development of science. The authors point out four general ways Christianity has positively influenced its development. {6}

First, Christianity provided important presuppositions of science. The Bible teaches that nature is real, not an illusion. It teaches that is has value and that it is good to work with nature. Historically this was an advance over pagan superstitions because the latter saw nature as something to be worshipped or as something filled with spirits which weren't to be angered. As one theologian wrote, "Nature was thus abruptly desacralized, stripped of many of its arbitrary, unpredictable, and doubtless terrifying aspects." {7}

Also, because it was created by God in an orderly fashion, nature is lawful and can be understood. That is, it follows discernible patterns which can be trusted not to change. "As the creation of a trustworthy God, nature exhibited regularity, dependability, and orderliness. It was intelligible and could be studied. It displayed a knowable order." [8]

Second, Christianity sanctioned science. Science "was justified as a means of alleviating toil and suffering." {9} With animistic and pantheistic cultures, God and nature were so closely related that man, being a part of nature, was incapable of transcending it, that is, of gaining any real control over it. A Christian worldview, however, gave man the freedom to subject nature to his needs-with limitations, of course-because man relates primarily to God who is over nature. Technology-or science applied-was developed to meet human needs as an expression of our God-given duty to one another. As one historian put it, "the Christian concept of moral obligation played an important role in attracting people to the study of nature." {10}

Third, Christianity provided motives for pursuing scientific knowledge. As scientists learned more about the wonders of the universe, they saw God's glory being displayed.

Fourth, Christianity "played a role in regulating scientific methodology." {11} Previously, the world was thought to work in perfectly rational ways which could be known primarily through logical deduction. But this approach to science didn't work. Planets don't have to orbit in circular patterns as some people concluded using deductive logic; of course, it was discovered by investigation that they didn't. A newer way of understanding God's creation put the emphasis on God's will. Since God's will couldn't be simply deduced through logical reasoning, experimentation and investigation were necessary. This provided a particular theological grounding for empirical science.

The fact is that it was distinctly Christian beliefs which provided the intellectual and moral foundations for the study of nature and for its application through technology. Thus, although Christianity and some scientists or scientific theories might be in opposition, Christianity and science are not.

Contributions to Human Freedom

One of the favorite criticisms of Christianity is that it inhibits freedom. When Christians oppose funding pornography masquerading as art, for example, we're said to be unfairly restricting freedom of expression. When Christians oppose the radical, gender feminism which exalts personal fulfillment over all other social obligations, and which calls for the tearing down of God-given moral structures in favor of "choice" as a moral guide, we're accused of oppression.

The problem is that people now see freedom not as self-determination, but as self-determination unhindered by any outside standard of morality. Some go so far in their zeal for self- expression that they expect others to assist them in the process, such as pornographic artists who expect government funding.

There are at least two general factors which limit or define freedom. One we might call the "rules of the game." The other is our nature.

The concert violinist is able to play a concerto because she knows the "rules of the game." In other words, she knows what the musical notation means. She knows how to produce the right sounds from the violin and when to produce them. She might want the "freedom" to make whatever sounds she wishes in whatever key and whatever beat, but who would want to listen? Similarly, as part of God's universe, we need to operate according to the rules of the game. He knows how life on earth is best lived, so we need to live according to His will and design.

Our nature also structures our freedom. A fish can try to express its freedom by living on dry land, but it won't be free long; it won't be alive long! We, too, are truly free only in so far as we live according to our nature-not our fallen nature, but our nature as created by God. This is

really another way of looking at the "rules of the game" idea. But it's necessary to give it special focus because some of the "freedoms" we desire go against our nature, such as the freedom some want to engage in homosexual activity.

Some people see Christianity as a force which tries to inhibit proper expression of who we are. But it is the idea of helping people attain the freedom to be and do as God intended that has fueled much Christian activity over the years. For example, Christians were actively engaged in the battle against slavery because of their high view of man as made in God's image.{12}

Another example is feminism. Radical feminists complain that Christianity has been an oppressive force over women. But it seems to have escaped their notice that Christianity made significant steps in elevating women above the place they held before Christ came. {13}

While it is true that women have often been truly oppressed throughout history, even by Christian men, it is false that Christianity itself is oppressive toward them. In fact, in an article titled "Women of Renewal: A Statement" published in First Things, {14} such noted female scholars as Elizabeth Achtemeier, Roberta Hestenes, Frederica Mathewes-Green, and May Stewart Van Leeuwen stated unequivocally their acceptance of historic Christianity. And it's a sure thing that any of the signatories of this statement would be quite vocal in her opposition to real oppression!

The problem isn't that Christianity is opposed to freedom, but that it acknowledges the laws of our Creator who knows better than we do what is good for us. The doctrines of creation and redemption define for us our nature and our responsibilities to God. His "rules of the game" will always be oppressive to those who seek absolute self-determination. But as we'll see, it is by submitting to God that we make life worth living.

Contributions to Morality

Let's turn our attention to the issue of morality. Christians are often accused of trying to ram their morality down people's throats. In some instances this might accurately describe what some Christians have done. But for the most part, I believe, the criticism follows our simple declaration of what we believe is right and wrong and our participation in the political and social arenas to see such standards codified and enforced.

The question that needs to be answered is whether the high standards of morality taught in Scripture have served society well. Has Christianity served to make individuals and societies better and to provide a better way of life?

In a previous article I wrote briefly about the brutality that characterized Greco-Roman society in Jesus' day. {15} We often hear about the wondrous advances of that society; but do you know about the cruelty? The Roman games, in which "beasts fought men, men fought men; and the vast audience waited hopefully for the sight of death," {16} reveal the lust for blood. The practice of child exposure shows the low regard for human life the Romans had. Unwanted babies were left to die on trash heaps. Some of these were taken to be slaves or prostitutes. {17} It was distinctly Christian beliefs that brought these practices to an end.

In the era following "the disruption of Charlemagne's great empire", it was the Latin Christian Church which "patiently and persistently labored to combat the forces of disintegration and decay," and "succeeded little by little in restraining violence and in restoring order, justice, and decency." {18}

The Vikings provide an example of how the gospel can positively affect a people group. Vikings were fierce plunderers who terrorized the coastlands of Europe. James Kennedy says that our word *berserk* comes from their fighting men who were called "berserkers." {19} Gradually the teachings of Christ contributed to major changes in these people. In 1020 A.D., Christianity became law under King Olav. Practices "such as blood sacrifice, black magic, the 'setting out' of infants, slavery and polygamy" became illegal. {20}

In modern times, it was Christians who led the fight in England against slavery. {21} Also, it was the teaching of the Wesleys that was largely responsible for the social changes which prevented the social unrest which might have been expected in the Industrial Revolution. {22}

In an editorial published in the *Chicago Tribune* in 1986 titled "Religious Right Deserves Respect," {23} Reo Christenson argues that conservative Christians have been vindicated with respect to their concerns about such things as drinking, the sexual revolution, and discipline in schools. He says that "if anybody's values have been vindicated over the last 20 years, it is theirs." He concludes with this comment: "The Religious Right is not always wrong."

To go against God's moral standards is destructive to individuals and societies. In a column which ran in the *Dallas Morning News* following the shootings at Columbine High School, {24} a junior at Texas A&M University asks hard questions of her parents' generation including these: "Why have you neglected to teach us values and morals? Why haven't you lived moral lives that we could model our own after?" {25}

Why indeed! In time, our society will see the folly of its ways by the destruction it is bringing on itself. Let's pray that it happens sooner rather than later.

Contributions to Healthcare

Healthcare is another area where Christianity has made a positive impact on society. Christians have not only been

involved in healthcare; they've often been at the forefront in serving the physical health of people.

Although some early Christians believed that disease came from God, so that trying to cure the sick would be going against God's will, the opposite impulse was also seen in those who saw the practice of medicine as an exercise of Christian charity. {26}

God had already shown His concern for the health of His people through the laws given through Moses. In his book, *The Story of Medicine*, Roberto Margotta says that the Hebrews made an important contribution to medicine by their knowledge of personal hygiene given in the book of Leviticus. In fact, he says, "the steps taken in mediaeval Europe to counteract the spread of 'leprosy' were straight out of the Bible." {27}

Of course, it was Jesus' concern for suffering that provided the primary motivation for Christians to engage in healthcare. In the Middle Ages, for examples, monks provided physical relief to the people around them. Some monasteries became infirmaries. "The best- known of these," says Margotta, "belonged to the Swiss monastery of St Gall which had been founded in 720 by an Irish monk; . . medicines were made up by the monks themselves from plants grown in the herb garden. Help was always readily available for the sick who came to the doors of the monastery. In time, the monks who devoted themselves to medicine emerged from their retreats and started visiting the sick in their own homes." Monks were often better doctors than their lay counterparts and were in great demand. {28}

Christians played a significant role in the establishment of hospitals. In 325 A.D., the Council of Nicea "decreed that hospitals were to be duly established wherever the Church was established," says James Kennedy. {29} He notes that the hospital built by St. Basil of Caesarea in 370 even treated lepers who previously had been isolated. {30}

In the United States, the early hospitals were "framed and motivated by the responsibilities of Christian stewardship." [31] They were originally established to help the poor sick, but weren't intended to provide long-term care lest they become like the germ- infested almshouses.

A key factor in making long-term medical care possible was the "professionalization of nursing" because of higher standards of sanitation. {32} Before the 16th century, religious motivations were key in providing nursing for the sick. Anne Summers says that the willingness to fracture family ties to serve others, a disciplined lifestyle, and "a sense of heavenly justification," all of which came from Christian beliefs, undergirded ministry to the sick. {33} Even if the early nursing orders didn't achieve their own sanitation goals, "they were, nevertheless, often reaching higher sanitary standards than those previously known to the sick poor." {34}

There is much more that could be told about the contributions of Christianity to society, including the stories of Florence Nightingale, whose nursing school in London began modern nursing, and who saw herself as being in the service of God; or of the establishment of the Red Cross through the zeal of an evangelical Christian; or of the modern missions movement which continues to see Christian medical professionals devote their lives to the needs of the suffering in some of the darkest parts of the world. [35] It is obvious that in the area of medicine, as in a number of others, Christians have made a major contribution. Thus, those who deride Christianity as being detrimental are either tremendously biased in their thinking or are ignorant of history.

Notes

1. Downloaded from the Internet at http://www.clarence.com/iawl/script/script_19.html on May 11, 1999.

- 2. Downloaded from the Internet at http://www.clarence.com/iawl/script/script_20.html on May 11, 1999.
- 3. D. James Kennedy and Jerry Newcombe, What If Jesus Had Never Been Born? (Nashville: Thomas Nelson, 1994).
- 4. Ibid., 5.
- 5. Nancy R. Pearcey and Charles B. Thaxton, *The Soul of Science: Christian Faith and Natural Philosophy* (Wheaton, Ill.: Crossway Books, 1994).
- 6. Pearcey and Thaxton, 36-37. Taken from John Hedley Brooke, *Science and Religion: Some Historical Perspectives* (Cambridge: Cambridge University Press, 1991), 19-33.
- 7. Pearcey and Thaxton, 25.
- 8. Ibid.
- 9. Ibid., 36.
- 10. Ibid.
- 11. Ibid., 36-37.
- 12. Encyclopedia Britannica, 15th ed., s.v. "Christianity."
- 13. Joachim Jeremias, *Jerusalem in the Time of Jesus* (Philadelphia: Fortress Press, 1969), 376.
- 14. "Women of Renewal: A Statement," First Things No. 80 (February 1998): 36-40.
- 15. Rick Wade, "The World of the Apostle Paul."
- 16. Will Durant, The History of Civilization: Part III, Ceasar and Christ: A History of Roman Civilization and of Christianity from their beginnings to A.D. 325 (New York, Simon and Schuster, 1944), 133-34.
- 17. Everett Ferguson, *Backgrounds of Early Christianity*, 2nd ed. (Grand Rapids: Eerdmans, 1993), 72.
- 18. Joseph Reither, World History at a Glance (New York: The New Home Library, 1942), 144; quoted in Kennedy, 165.
- 19. Kennedy and Newcombe, 164.
- 20. Sverre Steen, Langsomt ble Landet vaart Eget (Oslo, Norway: J.W. Cappelens Forlag, 1967), 52-53, quoted in Kennedy, 164-65. See also Encyclopedia Britannica, s.v. "Scandinavia, History of."
- 21. Earl Cairns, The Christian in Society: Biblical and

Historical

- Precepts for Involvement Today (Chicago; Moody Press, 1973), 78-91.
- 22. Ibid., 67.
- 23. Reo M. Christenson, "Religious Right Deserves Respect," *Chicago Tribune*, September 1986.
- 24. Littleton, Colorado. Two young men killed 12 students and a teacher, and then killed themselves.
- 25. Marcy Musgrave, "Generation has some questions," *Dallas Morning News*, 2 May 1999.
- 26. Irvine Loudon, ed., Western Medicine: An Illustrated History (New York: Oxford University Press, 1997), 55.
- 27. Roberto Margotta, *The Story of Medicine*, ed. Paul Lewis (New York: Golden Press, 1968), 36. Referenced in Kennedy, 142.
- 28. Margotta, 117-18.
- 29. Kennedy, 145.
- 30. Ibid., 146. From Margotta, 102.
- 31. Charles E. Rosenberg, *The Care of Strangers: The Rise of America's Hospital System* (New York: Basic Books, 1987), 8. From Kennedy, 147.
- 32. Kennedy, 148. Quote is from Rosenberg, 8.
- 33. Anne Summers, "Nurses and Ancillaries in the Christian Era," chap. 12 in Western Medicine: An Illustrated History, 134.
- 34. Ibid.
- 35. See Kennedy, 149-154.
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