



"THE LIBERAL MENTALITY AND THE MAL-PRACTICE MESS"

by Patricia S. Coyne

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Mrs. Coyne delivered this paper in a seminar of the Center for Constructive Alternatives at Hillsdale College on nationalized health care.

Not long ago at a party, I found myself in conversation with a young liberal student. He was typical of his kind, I thought — intelligent, in tune with current events, articulate and very activist. He was in law school and he hoped eventually to be involved in politics.

But like so many others, he felt misunderstood at home. He and his father argued violently about politics. It had gotten to the point where they were hardly speaking. And the youth criticized his father to me for being unable to see things from other points of view.

It had been my experience that young liberal activists were apt to be as narrow-minded as their fathers, and so I asked the young man how *he* would react if his son came home espousing activist *conservative* ideas.

The young man was puzzled for a moment. It had never occurred to him that he might spawn such a monster. But he brightened almost immediately.

"The first thing I would do," he told me in a way which attempted to demonstrate that he, unlike his own father, would handle the situation wisely, "would be to take him to a psychiatrist to find out *why* he feels the way he does."

The implications of what he was saying were obvious and I feel that his attitude is typical of the liberal mentality as a whole. This attitude, simply stated, is that deviation from accepted liberal prin-

ciples indicates psychological deviation, subject to cure by a trained psychologist. The liberal mentality feels a very limited need to heed its opponents' arguments. Instead it looks for flaws in the psyche of its opponents to explain away its opponents' beliefs.

And this kind of mind-set is the most difficult of all attitudes to deal with, for it assumes that its own beliefs are right in an absolute, universal sense, and that deviation from those ideas is, by very definition, proof of maladjustment. Logical argument cannot sway this attitude; facts and statistics, unless they support its position, are faulty. And even worse, the actual political philosophy which forms the assumption it holds remains hazy and oblique.

A liberal politician will tell you he wants equal opportunity for all men, but he almost never admits that the only way he can conceive of achieving this end is to strengthen the federal government's control over the various affairs of the country. Such a statement would be political suicide. He will admit only, and perhaps he even believes, that in this particular case the government ought to take this particular action . . . Right thinking men of good will will naturally agree, for to disagree indicates psychological malfunction, due perhaps to a warped childhood or sexual problems.

And since the liberal mentality cannot possibly hope to convince the public that more government

imprimis (im-pri' mīs) adv. In the first place. Middle English, from Latin *in primis*, among the first (things). . .

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is good for it, in all too many cases it resorts instead to an attack on those people and institutions that it feels the government ought to control.

The theory, never spelled out and, I suspect, never even clearly thought out by those who perpetuate it, seems to be that if the people can only be educated to understand the miserable condition they are in without federal control, then they will welcome it. And again in all too many cases, this education consists of an attack on the character, integrity and competence of the professionals who control the institutions which the liberal mentality would prefer a liberal government to control. I am thinking most specifically just now of the members of three of our institutions: our law enforcement personnel, our businessmen, and our physicians.

The case of law enforcement is a difficult one, replete with ambiguities, and, except that it is under attack, bears little resemblance to the subject I wish to consider. But the attack on the character of the American businessman in many ways parallels the current attack on the character of the American physician, and I believe an inquiry into it might help to illustrate my major thesis.

The motivation for the attack is inherent in the liberal mentality. If the federal government is to assume increasing control over the nation's economic sector, then that control must be taken from those who have it now. And that control lies largely now in the American business sector.

The assumption, then, never clearly stated but implicit in the liberal mentality nonetheless, is that government can do a better job of handling the nation's commodities than can its private sector. But what is stated, time and again, is that the public needs to be protected from the businessman. And to back this claim, the public is told, time and again, that businessmen are self-serving, corrupt and unscrupulous. And this vilification, I submit, has been so successful that the terms industrialist and capitalist are now in themselves derogatory terms, associated in the public mind with greed and corruption. And any influence that business might exert over the government is in itself bad and indicates scandalous and unscrupulous dealings.

Every one tinkers behind the scenes in government—librarians, laboratory technicians, labor unions. But when business does it it is evil. No one bothers to explain why business should not exert at least as much influence over the drawing up of legislation as, say, the American Association of University Professors. We are merely left with the hazy idea that higher education is good for the country and that private business is bad.

Now I did not come here today to plead the cause of the American businessman, but simply to use his

case as an example of the way in which the liberal mentality works as it seeks increasing power over the governing of the country. But I cannot criticize the liberal mentality's vilification of the American business sector without attempting to demonstrate that that vilification is at least partly unjustified. And so I would like to acquaint you with one statistic.

By official governmental standards based on buying power, in 1920 half of the people in the United States would have been considered poor. Now the figure stands at 9 percent. If the function of American business, then, is to improve Americans' living standard, it has been quite strikingly successful. The charge that private business is by its very nature unresponsive to the needs of the poor is simply unsupportable.



No one can name exactly the moment at which the country's liberals began to attack—in the same way and by the same method—the American physician. But I suspect that by the time most of you were aware of the things that were going on around you, the character and skills of the nation's medical community had already been called into question. And like the businessman, the attack was fostered not because the country was suffering incompetent medical attention, but rather, I believe, because the American liberal had become increasingly enchanted with the idea of nationalizing the country's health industry—with placing the medical community under governmental control.

And again the underlying assumption — that the government is better equipped than the doctor to oversee the nation's health needs or that money paid directly to the physician is less efficiently spent than it is sent to Washington, sifted through the bureaucracy and then returned to the physician — is never spelled out. The public simply wouldn't believe it.

Instead, the nation's liberal thinkers work to convince the public that it receives incompetent medical care and that the American physician cannot be trusted with the kind of economic control he now exerts over his patient. The effect of this attack has not yet blanketed the country in the same way that it has in the case of the businessman. The term "rich doctor" is not yet as derogatory a term as "rich industrialist," and television series can still feature physicians as heroes in a way they would never dream of doing with an industrialist.

But it is beginning to happen and there is by now a general feeling in the country that those who are really in the know, who are really on top of the situation, understand that the average physician doesn't really care about the health of his patients but only about the size of his pocketbook. He involves himself at the slightest opportunity with get-rich-quick schemes. And if not that, then he's a doddering old fool. He has no idea at all about the effects of the medicine he gives you and he jeopardizes your life by treating your gall bladder when you have appendicitis. And here again you are asked to believe all this not so much through facts and statistics as through the subtle implication that if you do not believe it you are rather naive.

"Oh, come now, don't give me that," the liberal sympathizers will say if you suggest to them that American physicians are by and large doing a decent job. "Oh, come now, do you really *believe* that?" They *know* that doctors are either greedy or incompetent, or in not untypical cases, both. And the reason they know it is not because they have done in-depth studies of the situation and have come sadly and reluctantly to that conclusion — they know because they have been told of cases here and there where it was true, and these cases have been presented to them as typical of the medical community as a whole. But, even more importantly, they know because they have been instructed by insinuation and innuendo that this is the enlightened way to think. And above all else, they want to consider themselves enlightened people.

I am not saying of course, that all physicians are men of exemplary character and competence. But then neither would I suggest such a thing about lawyers, engineers, scientists, professors or even writers. But nowhere except as I mentioned before in the case of law enforcement officials and business-

men have I witnessed a comparable effort to discredit the equally fallible and human members of other American professions.

This campaign of vilification began, as I have charged, at the same time that the federal government began seriously to lust after control of the nation's health industry. It cannot help but have a detrimental effect on the nation's health care.

It has resulted in legislation which unnecessarily hampers the physician's ability to treat his patient.

It threatens legislation which will hamper him even more.

And it has set up an adversary relationship between doctor and patient which cannot be beneficial to the good health of either.

Nowhere is this largely liberal inspired mistrust of the patient toward his physician more manifested just now than in the current malpractice crisis. The problem, simply stated, is that the nation's medical patients are suing their doctors blind. They are increasingly being awarded hundreds of thousands and even millions of dollars against physicians who are often guilty only of a suspicion of lack of judgment or human error. They are considered guilty now before they enter the court room and must prove their innocence.

And the nation's insurance companies are reacting with understandable alarm to this snowballing national preoccupation. In many states they are refusing to underwrite insurance policies at all, and in other states, in a very short time, their coverage rates have gone up a hundred, two hundred and even three hundred percent.

Physicians absolutely refuse to practice medicine unless they are covered by an insurance policy, for one out of every three physicians can expect to be sued. And in the more litigation-minded areas of the country more than half of the practicing physicians can expect to fight a law suit.

But even some of those physicians who can get insurance are threatening to stop practice or have stopped already. Older physicians who have limited the number of their patients, women physicians who practice only part-time, young specialists in some of the more high risk fields—people like these find that they simply can no longer afford to practice medicine.

My own feeling is that it is demonstratively unfair to demand upon pain of liability a kind of perfection from our physician which we demand from no other similar profession. Lawyers, teachers, social workers—in all these cases we assume that since they are human they will make errors in judgment and honest mistakes, and I know that if I as a writer were to be

ed whenever I misjudged a situation or misstated
ct, then I would be a poor insurance risk indeed.

But since physicians are dealing with problems of
e and death, then at the same time that their
nancial rewards ought to be substantial, so ought
e to hold them more accountable when they grossly
isperform.

Under a perfect system the whole question of mal-
practice would be taken out of the courts altogether
d local communities would set up panels who
viewed each case alone on its merits. Such a panel
ight consist of a physician, a layperson and perhaps
registered nurse who would be unbiased but who
ould understand the medical situation. Errors,
cept for errors which indicate positive incom-
petence, then would not be punished. But in a
uation which demonstrated willful negligence or
isconduct the physician ought not only to pay the
ffended party but to lose his license to practice.



ost of the rest of the nation's workers suffer loss
occupation if they are found guilty of gross
gligence or incompetence, and I feel that the
ysician ought to be held accountable in the same
y. But the present trial system not only causes
voc among the competent members of the medical
ofession, but is not even successful at weeding out
ose few incompetent members.

Now while the liberal mentality is not entirely to
ame for the current malpractice insurance crisis,
is surely guilty of creating an atmosphere in which
ch a crisis can occur. The attitude being fostered

among the American people just now— that doctors
practice shoddy medicine — is one which encourages
patients to assume that if they are not quickly re-
stored to good health then it is the fault of incom-
petent medical treatment. And the current wisdom,
which insists that your doctor does not give a fig
for your health but is interested only in transferring
large sums of money from your bank account into
his, encourages the kind of adversary patient-physi-
cian relationship in which large numbers of patients
can turn upon their doctors, and, as the title of a
recent how-to book on the subject reads, *Sue the
B*****ds*.

"Let them suffer," said a legislative representative
for the Americans for Democratic Action; "then
they might be more sensitive to their patients' needs
instead of their own pocketbooks."

And Ralph Nader's director of health research put
it this way: "People sue because they are
disenchanted with their lousy health care. I would
encourage more malpractice suits. Then maybe the
physicians in this country would start pulling them-
selves into shape." Statements like these illustrate
my point.

Now while it is nice on the one hand to think of,
say, the parents of a congenitally deformed infant
receiving from an impersonal insurance company
millions of dollars like manna from heaven, I suspect
that most of you are unaware of what such a case
and hundreds like it can do for your own individual
medical care.

In the first place, physicians are more and more
apt to practice on you what they call "defensive
medicine." That means that if you are injured and
admitted to a hospital you will be put through a
barrage of x-rays and tests which not only increase
your bill, but your radiation exposure as well. But
physicians now must do it to protect themselves in
case they are called upon to prove to a skeptical
jury that they had inspected your injury thoroughly.
Even the mildest kind of head injury now is x-rayed.

It means that more and more often the call, "Is
there a doctor in the house," will go unanswered.
"Don't treat anybody for anything unless you have
his medical records in front of you," says one doctor.
The American physician simply no longer *dares*
to be a good Samaritan.

It also means that your own family doctor is more
apt to suggest time consuming and costly consulta-
tions with other physicians, and is more apt to refer
you to expensive specialists for problems that before
he would normally have handled himself. The average
GP won't even set your wrist or take out your ton-
sils any longer. His insurance doesn't cover it.

It also means that if you live in one of the higher
risk areas of the country, and you here in Michigan

do, then there will be fewer and fewer doctors to treat you.

The reasons: part-time and older doctors are dropping out of practice; established physicians are moving to other areas; younger doctors are setting up practice in safer areas. And it means that your own doctor is spending an increasing amount of time in the courts or in his lawyer's office and consequently spending correspondingly less time caring for you. And finally, it means that your medical bills inevitably must go up.

But the most significant thing about the cost of spiraling insurance is that nobody, least of all the insurance companies, believes it has peaked — there is no end in sight. Both the number of suits and the amount of the awards are rising astronomically. About once a month now in California a patient is awarded a million dollars or more in a malpractice suit.

The Washington liberal mentality sees the whole crisis, of course, as a way to gain further control of the nation's health field. Under a bill introduced in the Senate, the government would set up and subsidize malpractice insurance. But at a price. First of all, all government-insured physicians would be forced to handle a quota of medicare and medicaid patients. But more importantly, the government would have control over who it did and did not wish to insure. With this kind of control the government could not only tell a physician how to practice medicine but it could control his political activities as well. And we have seen that our government is not above that kind of political pressure.

Since it is likely only a minority of you plan to study medicine, this last threat is probably only of academic concern to you. But I submit that the possibility of governmentally controlled health care is dangerous in ways you may not have thought about. In Canada, the country which most nearly resembles our own and in which health care is governmentally controlled, some disquieting trends are developing. In the first place the government is beginning to discover what physicians have known for years—that a very large percent of the population's health problems stem from the population's life styles. People eat, drink, and smoke too much. They do not exercise properly. They drive their cars unsafely. And the government has begun to hint darkly that unless Canadians assume more responsibility for their own health then it will have to do something about it. And I think most of us would rebel strenuously against a government which could legislate us into good health.

But even more disturbing is the fact that the Canadian government is increasingly beginning to set up clinics which combine both physical and

psychological care. Physicians are not allowed to treat certain symptoms now until their patients are given psychiatric counseling. And I submit to you that a government which can force its people to submit themselves to psychological treatment is a very dangerous one indeed. We have seen other countries in the world today which assume that if a person dissents from it then he is insane. The trend is here in America today. It is a trend toward which the liberal mentality naturally leans for it honestly tends to feel that its philosophy is the only sane and decent one to hold. And much like the young man in the beginning of this talk who would send his dissenting son to a psychologist, I maintain that a government with the same kind of mind set could do the same to its dissenting citizens.

The liberal mentality marches now under an anti-authoritarian banner, but it tends to encourage rebellion only against those people and institutions that it does not control—law enforcement agencies, businessmen, and most recently, physicians.

The liberal mentality insists that our criminal system is unjust, that the causes of crime are economic and psychological. It would find a better way. But I believe that the criminal system it would substitute for our own would result in less justice and less freedom.

The liberal mentality insists that American business creates unsatisfactory products and distributes them inequitably. It would find a better way. But I suggest that the economy it would set up would result in poorer products, less freedom and more control over the consumer.

The liberal mentality insists that America's medical system does not deliver beneficial or equitable health care. But I am convinced that the health system it would set up would result in poorer care, higher costs and less freedom for the patient.

And perhaps even more, I object to the methods the liberal mentality employs as it attempts to set up what it calls a more workable system. For all too often it insists that you must mistrust and despise if you are to march in step with it.

"Industrialists and capitalists are fat cats. They are greedy and corrupt and uncouth. You and I, we operate on a higher level. Tax them. Control them. Restrict their power.

"Law enforcement officials are bad. They are sadistic and corrupt and stupid. You and I, we operate on a higher level. Disregard them. Rise against them. Control their power.

"Physicians are incompetent and corrupt and generally rather dull people. You and I, we operate on a higher level, control them, turn on them. Sue the B*****s. Make them pay *you* for a change."

And the malpractice crisis is just one of the many instances in which the liberal mentality has tended to create chaos in an institution which it has decided is in need of its guidance and control. These are tactics men have always used when they seek to vest themselves with power and influence over others.

So in closing then, I would ask you to be suspicious of any movement from the left or the right which tells you that it is working for such things as equality and justice but which is not frank with you about its plans to achieve its ends.

Distrust any movement from the left or the right which implies that it is right in a universal sense, that if you question its assumptions then you are deficient or deranged.

Even more importantly, question any movement from the left or the right which asks your distrust, disdain and even hate of the people who stand in the way of its aims.

But perhaps most important of all, distrust any movement from the left or the right which substitutes a smirk of condescension, an ironically raised eyebrow, and with these gestures, an invitation to share in a more enlightened way of thinking—which substitutes this for an honest call to action. Distrust

any movement that invites you to join a charmed circle, an inner ring composed of higher types of people that tells you that by becoming part of it you are rising beyond the common herd, that you are becoming more sophisticated than you once were, more enlightened, the right sort of person.

For if a movement attracts you through your vanity rather than through your sense of decency and fair play then you are surely a slave in its grip. And if you hold a set of political beliefs, not so much because they seem right to you but because you like to think of yourself as the sort of person who holds those beliefs, then you are capable of committing a wealth of excess in the name of those beliefs.

"Of all passions," said C. S. Lewis, the British moralist, "the passion for the inner ring is the most skillful in making a man who is not yet a very bad man do very bad things."

This tendency is not unique with the liberal mentality, of course, for it operates wherever men form themselves into groups. But it seems to me that just now in this country it is most apt to be the political left which asks you to follow by enticing you to join the inner ring. Under its influence vast crimes have been committed. Beware of its pull. Guard against it. Eschew it.

The 1976-77 Ludwig von Mises Lecture Series opened September 23 with Dr. Rhodes Boyson, Conservative Member of Parliament, who spoke on "Paternalism: The Good Man's Evil Enemy of Liberty." The series will continue throughout the year with the following speakers. IMPRIMIS readers are welcome to join us at Hillsdale for any of these presentations. We hope to see you here.

October 18, 1976	Leonard E. Read president The Foundation for Economic Education	"The Something-for-Nothing Syndrome"
December 7, 1976	The Hon. Dr. Philip M. Crane Representative from Illinois	
February 2, 1977	Anthony H. Harrigan executive vice president United States Industrial Council	"Economics and the Future of the Nation"
March 9, 1977	Henry Hazlitt economist and author	"How Inflation Demoralizes"
April 19, 1977	Dr. Roger Freeman formerly of The Hoover Institution	"The Growth of American Government"

All presentations are given at 8 p.m. in The Michael Alex Mossey Learning Resources Center on the Hillsdale campus.