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## A Case for Manners

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NCR Today

The news that a major medical school had received a \$42 million grant to teach its students bedside manners left me wanting to laugh and cry.

The laugh part is its apparent absurdity. Wouldn't it have already been covered in medical training? Wouldn't it be like teaching electrical circuitry to electricians already installing wires?

We're aware, of course, that relationships in general have increasingly become reduced to impersonal and practical exchanges. When you actually get a human being on the other end, that is.

Doctors follow this trend, even lead it to an extent. Recently I took an old man to the emergency room. The place was empty. Two hours later a resident strolled in, glanced at the chart, asked the patient why he hadn't come in earlier, ordered some tests and walked out.

He's just one physician and doesn't represent the whole lot, but most of us know the routine. Few words; the testing does the talking. So there are hints everywhere that medical students need some human conditioning.

But there are many reasons to doubt that this University of Chicago initiative can provide much of a remedy. Studies show that most would-be doctors are selected on the basis of their quantitative skills. They're good with numbers, scientific reasoning and objective problem solving. They aren't for the most part "people persons."

They must not be blamed for being what they are. It is the job of medical schools to adapt admissions standards to admit more caring, compassionate candidates. Nothing wrong with left-hemisphere people in medicine. We just need more of the others.

Given the dominance of the empirical type of student, is it fair to expect that the new Institute in Chicago can do more than rehearse them in the forms of bedside ethics without evoking genuine empathy and emotional connection? Can they be applauded for at least being taught to go through the motions that don't come naturally? Most are well-intentioned, I assume, but they are in a sense fish out of water through no fault of their own.

The crying side is that the doctor-patient experience has become as objective and empty as it so often is. The Bucksbaums of Chicago, who donated the money, said they were motivated by their own neglect by medical personnel. And they have loads of money. The poorer one is, chances are the worse it gets.

Mounting evidence shows how greatly healing and reduction of suffering owes to the doctor-patient relationship. For many of us who consider ourselves religious, that shouldn't be news but often turns out to be.

The Christian exemplar, of course, is the Great Physician who kept pointing out the huge role of spiritual and emotional factors in sickness. To one man begging for relief, his response was "your sins are forgiven."

The Chicago grant is also a reminder that Christian relationships are prey to the same impatience, quick-fix, multi-tasking ruin that others face in other settings. How much do seminarians, to say nothing of regular church goers, become attuned to the sacred dimensions of ordinary conversation or in responding to problems and crises of friends? Perhaps that is going well and we don't need the equivalent of a tens of millions of dollars experiment to re-emphasize. Perhaps cultural distractions, glib, unhearing advice and growing rudeness don't affect Christians much. Just wondering.

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