

THE ROLE OF ETHICAL WILL IN PERSONAL AND SOCIAL RESPONSIBILITY FOR HEALTH

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Abstract. The partisan fight over Obamacare continues despite its support by Congress, the Supreme Court, and the majority of American citizens. Obamacare is anathema to those: (1) opposed to government support of the poor and non-white population; (2) opposed to the role of government in general; and (3) supportive of private sector control of the most expensive health care in the world.

The rationale for national public sector involvement in health care is to assure quality services, access to everyone (as many as possible), and reasonable cost. Health care must be conceived as a *system* that is more responsive to the citizens at large, through their government, than to special interests.

The idea of *ethical will* in this paper has two meanings.

As (1) a document designed to pass on ethical values from one generation to the next, an ethical will demonstrates personal responsibility both for the health of oneself and for others. It links an individual to his or her family and its universal needs, and is a strategy that should be more widely encouraged.

As (2) a social construct, *ethical will* is the necessary basis for the health of the larger society. It begins with the ethical responsibilities of the individual. Individual responsibilities sum at the societal scale to societal responsibility. Societal ethical will is the necessary condition for a sustainable and resilient societal health system. It will easily trump self-serving partisan political and neoliberal economic considerations.

Keywords: Obamacare, Party Politics, Neoliberal Economics, Ethical Will, Social Responsibility, Societal Responsibility

VLOGA ETIČNE VOLJE PRI OSEBNI IN DRUŽBENI ODGOVORNOSTI ZA ZDRAVJE

Povzetek: Pristranska borba okrog ameriškega socialnega zavarovanja 'Obamacare' se nadaljuje, četudi so ga podprli Kongres, Vrhovno sodišče in večina Američanov. Nesprejemljiv je za tiste, ki: (1) nasprotujejo vladni podpori za revne in ne-bele občane; (2) nasprotujejo vlogi države na sploh, in (3) podpirajo to, da privatni sektor obvladuje najdražjo skrb za zdravje na svetu. Razlogi, da se nacionalni javni sektor ukvarja z zdravstveno oskrbo, vključujejo zagotovitev kakovosti storitev, njihovo dostopnost za vse (za čim več ljudi) in sprejemljive stroške. Zdravstveno oskrbo je treba dojeti kot *sistem*, ki se bolj odziva občanom na sploh s pomočjo njihove vlade kot posebnim interesom.

Zamisel o *etični volji* v tem prispevku ima dva pomena.

- (1) Kot listina, ki naj prenese etične vrednote iz generacije v generacijo, kaže etična volja osebno odgovornost za zdravje ljudi samih in drugih. Povezuje posameznika z družino in njenimi univerzalnimi potrebami in je strategija, ki bi jo morali spodbujajo čim širše.

- (2) Kot družbeni konstrukt je etična volja potrebna podlaga za zdravje širše družbe. Začenja se z etičnimi odgovornostmi posameznika. Le-te se na družbeni ravni združijo v odgovornost družbe, katera je nujen pogoj za trajnost in odporen zdravstveni sistem družbe. Zlahka bo premagala sebične politične in neo-liberalne premisleke.

Ključne besede: Obamacare, strankarske politike, neoliberalna ekonomika, etična volja, družbena odgovornost, odgovornost družbe

1. Introduction. This paper derives from my personal discovery of the idea of an Ethical Will (Hebrew: “Za va ‘ah). It is a document designed to pass one’s ethical values, wisdom, and love down to future generations. It is an ancient idea from the Judeo-Christian tradition. The original template for the practice can be found in Genesis 49: 1-33, in which a dying Jacob gathers his sons to offer them his blessing and to request that he be buried, not in Egypt, but in Canaan in the cave at Machpelah with his ancestors.

Other examples may be found in both the old and new testaments, in medieval writings, in writings of the 16th through the 18th centuries, and in modern times. Most medieval ethical wills were simply written for the private use of children and relatives. From the sixteenth to the eighteenth centuries, ethical wills tend to be more learned and less simple. Today, ethical wills are written by both men and women of all faith traditions, ethnicities, economic status, and educational levels. Andrew Weill, M.D., promotes preparing an ethical will as a gift of spiritual health to leave with family members. He says that the principal benefit is to the writer, because it links family and cultural history, clarifies their ethical and spiritual values, establishes a legacy to future generations, and addresses “universal needs” of belonging, life purpose, and one’s desire to make a difference. The ethical will, although it is not a legal document, may also inform charitable and personal financial decisions, and clarification of advance health directives. Its generic purpose, however, is to pass on family history and wisdom to future generations, and to include expressions of love and hopes and dreams for children and grandchildren (http://en.wikipedia.org/wiki/Ethical_will).

As such, the ethical will is an expression of one’s social responsibility for one’s personal health and the health of others, linking an individual with his or her family and its universal needs. As a social construct, *ethical will* is the necessary basis for the health of the larger society. It incorporates the idea that social responsibility extends beyond one’s own family to the welfare of others in the larger society. In this way, individual responsibilities sum at the societal scale to societal responsibility.

2. The Obamacare We Deserve. An op-ed piece by Michael Moore, under this same title in the *New York Times* (2014), succinctly sums up where we are right now with Obamacare. The legislation took effect on January 1. The socially responsible health care insurance system that we need, but thus far *have not obtained*, is a single payer system in which the government, rather than multiple private insurers, pays the health care costs. Nearly all developed nations utilize this system. They all obtain better health results at substantially lower cost per capita than in the U.S., as shown by statistics compiled by the OECD (2011). Our costs range as high as twice as much per capita, in comparison with other developed countries.

Affordable universal health care was the objective of Obama’s Affordable Care Act, but its implementation contains one fatal flaw: it is a pro-insurance industry plan implemented by a president who knew in his heart that a single-payer, Medicare-for-all plan was the better way to accomplish it. Instead, what we have is a plan conceived by the Heritage Foundation to keep the private insurance industry intact. The plan got its first trial in Massachusetts under the governorship of Mitt Romney. The result, according to Moore, is that we will be channeling over \$100 billion annually to private insurance companies by 2017, and the “affordable” part of the Affordable Health Care Act already can be seen as a cruel joke by many consumers. We paid a high price for political expediency.

In spite of these failures, Obamacare is much better than no national health care at all. Two million Americans have signed up for the new insurance exchanges, despite the disastrous website, rising private insurance rates, and Obama’s mistaken promise that people could keep their old coverage. Insurers can no longer stop covering patients because of the high cost of their care. Children up to age 26 can be covered by their parents’ plans. The twenty red (Republican) states that have refused the benefits of Medicaid expansion will eventually lose \$20 million in federal

funds per year for hospitals and treatment, to say nothing of the new jobs required--a major incentive to expand needed coverage of uninsured citizens, numbering in the millions.

In the blue (Democratic) states, a public option on the insurance exchange could enable a health plan insured by state government rather than the private sector. Massachusetts is already trying to implement such a law. Several counties in California are following suit. Montana has set up health plans for state workers that require no co-pays and no deductibles—the same thing already being done in the private sector by Google, Cisco, and Pepsi.

The most exciting new possibility is Vermont's plan for a single-payer system, starting in 2017. If it works, many other states will follow suit. But corporate money is already flowing into Vermont to crush the initiative, and Vermont's legislators will need all the support they can get.

3. The Encumbrance of Libertarian Ideology. The fundamental political stumbling block is the counterproductive influence of libertarian ideology. Libertarianism is a set of political philosophies that uphold liberty as the highest political end, reflecting self-interest. In 18th century America, John Locke and Thomas Paine argued for and against it. Locke argued the primacy of individual personal and property rights before government. Paine, on the other hand, argued his concern for a society based on the common good and egalitarianism. He opposed slavery and supported public education in the name of justice and equal opportunity.

A recent book by Yuval Levin (2013) attempts to show that a similar 18th Century debate between Edmund Burke and Thomas Paine was central to the emergence of conservative and progressive parties in the US, as well as political partisanship. Burke argued for continuing policies that are demonstrably effective, while Paine argued for continuing innovation of improved policies, using scientific and technical knowledge.

Levin, an Obama-era conservative and founding Editor of *National Affairs*, was invited for an interview concerning his book by Judy Woodruff on the PBS News Hour of Jan. 1, 2014, with the stated hope that his book would help inform the present U.S. political impasse. Woodruff's interview format displayed journalistic skepticism of Levin's recommendations concerning how to frame a free society, including the applicability of the theory to solving present-day problems that affect people's lives, and relieving their suffering. Several viewers subsequently contributed similar critiques on line. Perhaps the most trenchant of these stated that Burke was primarily interested in conserving Feudalism (see PBS NewsHour transcript, 01-01-14).

The widespread popularity of conservative libertarianism notwithstanding, as evident in the work of Ayn Rand (1943, 1957) and in right-wing politicians such as Rand Paul, Paul Ryan, and Ted Cruz, it is highly questionable whether the ideas of Locke and Burke are viable in any ultimate ethical or scientific sense today. If liberty is the highest value, what is to stop its economic and political expression from exploiting the weak and vulnerable? Where does justice and compassion fit in? Can unelected corporations express the democratic will of a nation's citizens? How can any economic system, based on self-interest and profit maximization, take appropriate care of the poor, sick and suffering? What is fundamentally wrong with an appropriate *balance* of governmental and private sector powers? Why should conservative religious ideas control public policy? How can conservatives continue to ignore the scientific evidence concerning catastrophic climate and ecological change? Do we want our state governments to be taken over and controlled by those rich and sufficiently inclined to do so, as has already happened in North Carolina? (See Moyers & Company, 2014.)

Libertarianism controls neoliberal economics and threatens to exercise the upper hand in politics, as well, but it is not consistent with any comprehensive social science, social ethic, or constitutional democracy, and no democratic body politic has ceded such authority willingly. It has been taken, and continues to be taken, by force of privately controlled wealth.

4. The Efforts of Key Leaders to Unleash Social Responsibility. At this critical juncture for health care, social justice, environmental sanity, and world peace, several American leaders have stepped forward with new strategies to guide the political dynamic of the nation away from the dominance of self-interested libertarianism.

One of these is U.S. Senator Bernie Sanders of Vermont, a political Independent who is considering a run for President in 2016. He perceives the need for a progressive candidate to focus on the crucial crises not being discussed, including oligarchic control, income inequality, social justice, health care, and global warming. He believes the nation is in a critical economic position it has not been in since the late 1920s, just before the Great

Depression, with the top one percent controlling 39% of the wealth while the bottom sixty percent controls only 2.3% of the wealth. He has visited Birmingham, AL and other southern cities to initiate a new southern political strategy that is in reality a key part of a 50-state progressive strategy. The strategy is designed to get the southern electorate—one of the poorest, least healthy, and least educated in the nation—to vote its own best interests, rather than the interests of the oligarchs and the libertarians who have always controlled the region.

Another progressive political superstar is Elizabeth Warren, the Democratic Senator from Massachusetts. A former professor at Harvard Law School, Warren has risen quickly to power with a huge national following. Overnight she has changed the nature of debate on the looming national retirement crisis in which Social Security, Medicare, and Medicaid need to be improved and expanded, rather than cut back, to head off decades of poverty for the many millions of our aging populace. She is a powerful watchdog over the excesses of the mega-banks and has come out against the Keystone XL Pipeline because of its pivotal role in the global warming crisis. Her speech to the AFL-CIO convention this summer electrified her audience when she told it that the U.S Supreme Court is on the path “to be a wholly owned subsidiary of big business” (Hazen, 2013). It is the controlling oligarchy and its libertarian perspective that is the focus of her concern, against which she means to unleash populist social and political ethical will.

A third American politician with progressive political instincts, Bill de Blasio, has just come to power with a landslide victory as Mayor of New York City. He has drawn positive attention for replacing Police Commissioner Ray Kelly and his stop-and-frisk policies (based on racial profiling) with Bill Bratton, who as LA’s police chief worked well with progressives and people of color. Mayor de Blasio’s main political objective is to reduce inequality in NYC, a purpose substantially different and more challenging than the main thrust of the three-term, business-oriented Bloomberg administration (Hazen, 2013). American states and cities have been much more innovative than the national government in recent years, and de Blasio’s victory is widely perceived as a harbinger of important progressive change throughout the country.

A final mention goes to *TIME Magazine’s* person-of-the-year awardee, Pope Francis, champion of the poor. His *Evangelii Gaudium* (2013) shows that the current economic impasse is by no means unique to the U.S. His apostolic exhortation attacks libertarian neoliberalism as a form of tyranny and calls on church and political leaders to address the needs of the poor. The following excerpts from his exhortation sum up his devastating critique of the prevailing economic and political system:

As long as the problems of the poor are not radically resolved by rejecting the absolute autonomy of markets and financial speculation and by attacking the structural causes of inequality, no solution will be found for the world’s problems, or for that matter, any problems.

The worship of the ancient golden calf has returned in a new and ruthless guise in the idolatry of money and the dictatorship of an economy lacking a truly human purpose. The worldwide crisis affecting finance and the economy lays bare their imbalances and, above all, their real lack of concern for human beings; man is reduced to one of his needs alone: consumption.

This imbalance is the result of ideologies which defend the absolute autonomy of the market place and financial speculation. Consequently, they reject the right of states, charged with vigilance for the common good, to exercise any form of control.

Such an economy kills. How can it be that it is not news when an elderly homeless person dies of exposure, but it is news when the stock market loses two points? This is a case of exclusion. Can we continue to stand by when people are starving? This is a case of inequality. Today everything comes under the laws of competition and the survival of the fittest, where the powerful feed upon the powerless. As a consequence, masses of people find themselves excluded and marginalized: without work, without possibilities, without any means of escape.

It is no longer simply about exploitation and oppression, but something new. Exclusion ultimately has to do with what it means to be part of the society in which we live; those excluded are no longer society’s underside or its fringes or its disenfranchised—they are no longer even a part of it. The excluded are not the “exploited” but the outcast, the “leftovers.”

5. Conclusions. This paper has explored the idea that something like a societal ethical will, perhaps arrived at as a kind of summation of the individual ethical will of many citizens, is a necessary but often missing element of

socially responsible public policy. Societal ethical will is necessary to embody the wisdom of current generations in policies designed to safeguard the health and welfare of present and future generations, and indeed the welfare and sustainability of the planet itself.

We have argued that the ethic of caring and sharing clearly trumps the ideology of individual and corporate “rights” to exercise libertarian economic powers, because that individual/corporate liberty comes with high social costs. These costs include growing disparities in the distribution of income and wealth, lack of access to employment, and lack of full access to quality social services at affordable cost. We have also taken some pains to show that the libertarian ideology is not, as often claimed, based on any valid scientific or other demonstrable analysis. Standing alone, it is nothing more than a self-serving ideology, and it is well past time for it to be generally regarded as such. It should be abandoned forthwith as helpful in constructing public policy when its insufficiencies are not countervailed by other criteria.

We have examined the issue of Obamacare in the United States as a specific case study, and have seen that when health care solutions in the aggregate are driven primarily by market/libertarian considerations, the consumer pays much more dearly for care of lesser quality than in countries that minimize the administrative costs with a nationalized single payer insurance plan, thus making health care more affordable and more accessible to their respective citizens. The United States already is able to do this in connection with its Medicaid program.

The beauty of our current political situation is that we have significant new national leadership emerging in the United States, capable of leading mass movements built on ethical support of social responsibility in a number of crucial policy areas, including health care, public education, full employment, equitable distribution of income and wealth, fair progressive taxation, environmental health and welfare, the amelioration of global warming, and even the cessation of continuous warfare. Fortunately we also have, at this time, a Pope who is similarly perceptive and willing to add his powerful voice for justice to the ethical watershed that is now clearly demarcated.

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Business ethics take into consideration responsibilities not just inside the workplace, but also within the environmental, cultural, and social structures of communities. Corporate social responsibility has been divided into four types that must be considered simultaneously, including ethical, legal, economic and philanthropic responsibilities to consumers and society. Corporate Accountability. Corporate responsibility and accountability spreads into areas of ethics, legalities, and regulations. It also has an impact on the economy and the environment. Economic responsibilities refer to a business's focus on producing goods and services for consumers. The document "Ethics in Social Work" An ethical code for social work professionals was approved by the SSR Board in 2006. 2. Introduction. The intention is to offer a fundamental direction concerning the role of ethics in social work. An ethical code is meant to focus attention and give direction in matters demanding the exercise of own judgement. The code is also intended to stimulate an ethical debate between social work professionals and within the organisations where they practise their profession. How much of the responsibility for a person's situation and future is entirely his own? Which ethical values and norms are essential for judging the balance between the responsibility of the public society and that of the individual? Dilemma and risk. Start studying Ethics and Social Responsibility = STMG191. Learn vocabulary, terms and more with flashcards, games and other study tools. The value of any formal code of ethics relies on. Effective hiring practices that staff organisations with honest and moral people, committed managers who are willing to set examples and act as positive ethical role models, the underlying human resource foundations of the organisation. Corporate social responsibility is defined as an obligation of the organisation to act in ways that serve both its own interests and the interests of its many external stakeholders. _ refers to an organisation's obligation to act in ways that serve its own interests as well as those of its many external st The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use. Designed by minimum graphics Printed in Switzerland. Contents. This document was prepared by Carl Coleman and Andreas Reis of the WHO Department of Ethics, Trade, Human Rights and Health Law¹ and Alice Croisier of the WHO Global Influenza Programme Unit in the Department of Epidemic and Pandemic Alert and Response.